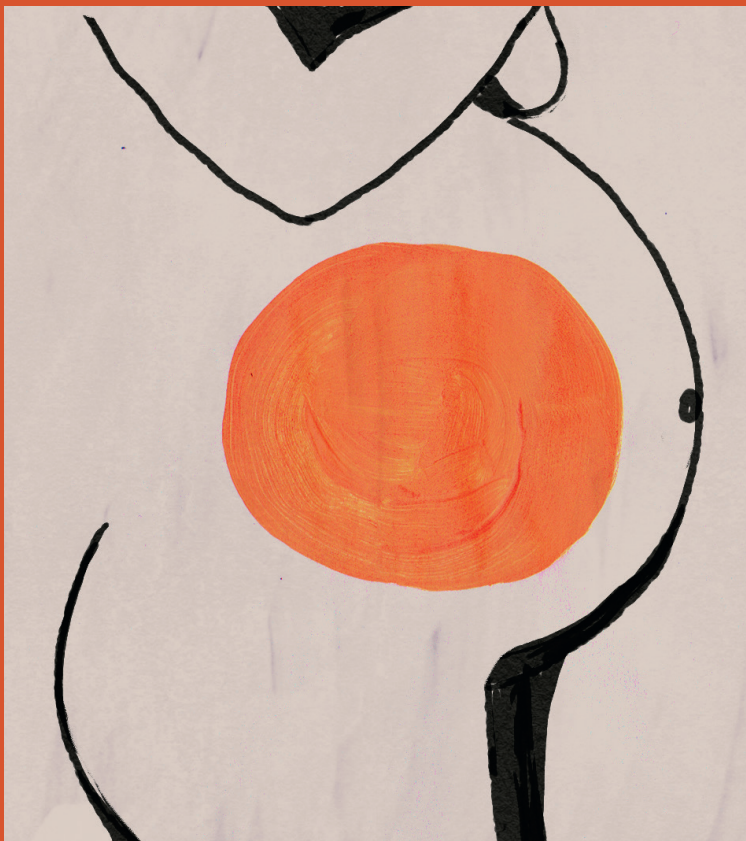




Motherhood, Inside Out

Marianne Rozario and Rhiannon McAleer with
Madeleine Pennington and Eona Bell





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REPORT

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Foreword



How strange, that a major life experience that many women will have – becoming a mother – is so under-researched, hidden, invisible, unrecognised. How strange, that the heft and complexity of growing and giving birth to a human being, and the highly skilled activity of nurturing that human baby in its most vulnerable and important early years – work done, of course, by fathers and other care-givers, but most often by mothers, still – is flattened, undervalued, denied in our society and current culture. How strange, that we fail to prepare and support women in a most vulnerable time. What is this invisibility cloak that descends, and how can we lift it?

Statistics from a multitude of established sources scream of our predicament: high rates of postnatal mental illness, stress and distress; inadequate maternity care; an epidemic of loneliness and isolation. We are failing, as a society, to hold the newborn mother, and to allow for the vast and multi-dimensional layers of matrescence: a physical experience, yes – whether a baby is carried, adopted, or mothered by a non-gestational mother – and also a deeply emotional, psychological, social, political, existential, philosophical, economic and spiritual one.

“We are failing, as a society, to hold the newborn mother.”

Enter *Motherhood, Inside, Out*: a crucial, profoundly insightful report which explores the experience of matrescence, through listening to mothers on wide-ranging topics. We hear about the body, sleep deprivation, mortality, money, metamorphosis, transcendence, algorithms, sacrifice, unpaid labour, relationality, work, isolation, debt, worship, interconnectedness, loneliness, tax, the sacred: the whole, holistic and paradoxical nature of this transition.

When I was casting around for solid ground, in early matrescence, I asked my father, an Anglican priest, about rituals for new mothers in the Christian church, having learned that almost every culture and society on earth has rites and rituals to support and hold the newborn mother. He told me about the custom of the “churching” of women, which died out in the mid-20th century.

Purification aspect aside, I was taken by the idea of a community recognising the “pain and peril” of childbirth together, and acknowledging the momentousness of what the mother has been through, compared with the dominant culture’s pathological neglect and disavowal of the maternal experience. As this report shows, faith communities and church-run groups today are providing space and support for new mothers – but we need much more of this, in both local communities and government policy. There is clearly a significant gap in the support and community new mothers need and crave, and what they are finding; a gap in what the working world expects from the “ideal worker” and how children and a family ecosystem works if it is to thrive; a gap in the reality of recovery from pregnancy and birth, and the pressure to bounce back in days or weeks.

In reading this report, I was struck by just how diverse, rich, complex and wild the transition to motherhood – matrescence – is, across the material and spiritual, and how much we sorely need an evolved culture and society that values relationality, care and interconnectedness.

This report is an essential addition to the literature, and will pave the way for dialogue about the holistic experience of becoming a mother in our society, and the holistic forms of care urgently needed.

By Lucy Jones, 2026
Author, *Matrescence*



This report in 90 seconds

Matrescence (the process of becoming a mother) involves profound physical, emotional, psychological, social, political and spiritual changes, reshaping identity in ways comparable to adolescence. It unfolds not only within the body or the home, but across society, insofar as it fundamentally recalibrates a woman's relationships, how she spends her money, and her view of the world; and prompts deeper questions about meaning, values, community, and connection. For many women, the transition to motherhood can bring a kind of spiritual unsettlement, though this is experienced in different ways and to varying degrees. It reveals us to be interdependent and vulnerable beings, in a culture that values autonomy, self-optimisation and efficiency. It is a transformative human experience.

This report presents the qualitative findings of the *Motherhood, Inside Out* project. It draws on interviews with 91 mothers and 14 professionals directly involved in maternal care to uncover their experiences of new motherhood from the inside out, focusing on how they navigate the physical, social, political, and spiritual aspects of matrescence. It considers these mothers' reflections on topics including personal identity, faith and spirituality, embodiment and body image, the media, family and friends, place in their local community, work, politics and current affairs, and mortality.

The research found that participants were affected differently in all these categories; there is no definitive, universal way of becoming a mother. Nonetheless, with regards to every category, we encountered women whose views and perspectives – indeed, whose whole lives – had been changed at the deepest level when they had children: the mother who now writes regular postcards to her children in case she dies unexpectedly; the mother who understands breastfeeding

her child as worship; the Christian mother who paces at the back of the church with a crying baby, missing the time she could listen to a Sunday sermon without interruption; the many mothers newly infuriated by the inadequacy of government maternity policies, or the exorbitant cost of childcare, or their lack of agency in the workforce; the mother who finds herself baking cupcakes at midnight when her daughter cannot sleep.

The report also evaluates the forms of support available to new mothers in light of these insights, and where gaps remain. It finds that such inner changes, and how they intersect, are generally not well supported, highlighting the need for greater recognition of this complex transition and more holistic forms of care to support mothers through it. Where consistent, relational support is present – especially in person – mothers feel better equipped to navigate these changes. In this context, churches sometimes offer one of the few spaces of ongoing local support, even if their potential to accompany mothers (spiritually and in other ways) is not always fully met.

The report closes with simple recommendations for healthcare providers and local churches/faith groups. These recommendations focus on improving understanding of the inner changes associated with ordinary matrescence, and increasing visibility of the accompaniment that is already available. Ultimately, however, the report points to a wider need for society to more fully recognise and respond to the depth of personal and relational transformation that comes with becoming a mother.

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Acknowledgements

We would like to express our sincere gratitude to all those who contributed to and supported this research project.

Above all, we extend our deepest thanks to the many mothers who generously gave their time to speak with us. Your openness in sharing both the joys and the challenges of your motherhood journeys has been invaluable. We are especially grateful for your honesty and vulnerability; this report is immeasurably richer because it is grounded in your lived experiences and your own words.

Thank you also to the many academics and professionals who shared their work and wisdom with us including Rev. Alice Watson, Caroline Montgomery, Dr. Dawn Llewellyn, Lynn Murphy, Navrup Kaur, Dr. Noelia Molina, and many others. Your knowledge was greatly appreciated.

We wish to thank our colleagues across the Theos and Bible Society teams for their guidance and support in navigating this complex and wide-ranging project. In particular, we are grateful to Chine McDonald, Dr. Madeleine Pennington, Dr. Rob Barward-Symmons, and Dr. Eona Bell for their insight and encouragement throughout.

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Marianne Rozario and Rhiannon McAleer
July 2026

6

Introduction

It's a fundamental human experience that society is only beginning to understand in depth. The process of becoming a mother – the developmental phase termed “matrescence” by anthropologist Dana Raphael in the early 1970s¹ – results in a person transformed.

For much of human history, the inner life of motherhood has been largely absent from the historical record.² Yet especially from the 1970s onwards, a growing body of literature has examined different aspects of this transition. For example, seminal research by Ann Oakley in 1970s London showed that new mothers often experienced conflicting emotions, balancing love and resentment alongside expectations of selflessness and passiveness.³ Meanwhile, in the 1990s, psychiatrist Daniel Stern emphasised that becoming a mother involved a profound identity transformation: one of the most significant physical, emotional and psychological changes a woman can experience.⁴ Memoirs from the 2000s suggest this tension persisted, with many mothers feeling isolated and invisible, hiding behind a social “mask” as described by Susan Maushart.⁵ Rachel Cusk's 2001 account of ambivalence towards caring for her baby paved the way for other writers to express more honest and complex feelings that come with motherhood.⁶

Building on this, reproductive psychiatrist Alexandra Sacks in the mid/late 2010s popularised the term “matrescence” to describe the adolescent-like physical, hormonal, and psychological changes of new motherhood, noting that new mothers experience not only joy, but emotions such as worry, guilt, frustration, and fear.⁷ At the same time, scholars such as Rozsika Parker and Sarah Ruddick highlight how this complexity – particularly maternal ambivalence⁸ and “maternal thinking”⁹ – can foster insight, creativity, and new ways of understanding shaped through caregiving.

Lucy Jones in 2023 likened matrescence to a profound yet poorly understood “metamorphosis”, writing:

*I knew nothing about the emotional and psychological transition that follows birth. I had no idea that something was happening to my brain – that it was literally changing shape. I had no idea what was coming: the anxiety, the life-exploding romance, the guilt, the transcendence, the terror, the psychedelia, the loss of control, the rupture of self.*¹⁰

Here, Jones refers to the emerging scientific understanding of changes to the very structure of a woman’s brain as she becomes a mother.¹¹ And there is a social and political dimension to matrescence too: how a woman spends her money and time, how she relates to her family and community, how she views the world around her, her priorities, and her politics.¹² As Jones further identifies, “When I started to realise many [other mothers] were also in crisis, I saw [motherhood] for what it was: the most socio-political experience of my life.”¹³

Some studies have begun to explore even the spirituality of matrescence, and this project builds on that emerging work. ‘Spirituality’ can be understood as a dimension of human experience involving personal awareness, meaning, and a sense of connection. It shapes individuals’ values, emotional capacities, and relationships, and extends beyond formal religious structures, reflecting a broader sense of purpose and connectedness.¹⁴

Trudelle Thomas, for example, frames matrescence as a deeply spiritual process, in which becoming a mother reshapes identity and values, fostering personal growth, moral development, and a stronger sense of connection to something beyond oneself.¹⁵ Aurélie

Athan and Heather Reel understand matrescence as a “liminal phase of reorientation”, and “an experience of dis-orientation and re-orientation marked by an acceleration of changes in multiple domains: physical, psychological, social, and spiritual”.¹⁶ Dr. Noelia Molina describes matrescence as a “liminal space,” beginning with the loss of one’s past identity and evolving through embodiment – shifts in the body, sexuality, and connection to the child. With adequate support and reflection, she argues, this transition can foster deeper self-awareness and spiritual transformation.¹⁷ Claire Arnold-Baker offers an existential perspective on experiences of motherhood and maternal mental health.¹⁸ Nonetheless, in the broader context of an explosion of recent writing on matrescence, relatively few studies explicitly address these spiritual dimensions.

If we are truly to understand the complexity of this unique human experience in contemporary society – the personal, existential, political, social and even deep spiritual impacts of new motherhood – we must therefore grapple with what really shifts in the inner lives of mothers as they are confronted with questions of self-identity, mortality, freedom, responsibility, transcendence, and worldview. How might these shifts change the way an individual navigates wider society, in ways that are both implicitly and explicitly political and spiritual? And what support is available – and still needed – for mothers to navigate these realms?

In late 2024, Theos and Bible Society embarked on a large mixed-methods study to try to answer these questions – to make the invisibility of new motherhood more visible.¹⁹ This volume primarily presents the qualitative findings of that study, with some supplementary statistics included for contextualisation. An accompanying volume will present the results of the UK quantitative

phases more fully, and later work will reflect on experiences of mothers from around the world.

Methodology

Between March and September 2025, Theos and Bible Society researchers spoke to 91 self-defining mothers and 14 experts and professionals directly involved in maternal care. Participants are generally anonymised throughout this report, but some of our expert participants were happy to be named, as is indicated where they are quoted directly. We spoke to 70 of these participants via semi-structured individual interviews throughout the UK, and 35 via eight focus groups conducted in Belfast, Cambridgeshire, Manchester, Northamptonshire, Swansea, Wiltshire, and two based in London. Most of the

individual interviews lasted between 45 minutes to 1 hour and were mainly conducted online via Microsoft Teams (a handful of individual interviews were conducted in person). All the focus groups were conducted in person lasting between 1 hour and 1.5 hours. The data was transcribed and analysed using NVivo.

Snowball sampling was used to recruit participants for this study. The call for participants and supporting documentation was open to all those who self-defined as mothers, whether expectant, biological, adoptive, step, or in any other way where the term had personal resonance. Of the final sample, four participants were first-time expectant mothers, 47 were mothers with their eldest child between 0-3 years, 29 were mothers with their eldest child between 4-11 years, and 11 were mothers with eldest children between 12-18 years. One mother in the sample had adopted children, another had experience of fostering. None of our participants were step-mothers. The remaining 14 participants were professionals or experts in motherhood practices or literature. It is important to note that the experiences of women and parents who don't identify as mothers but are raising children are therefore not explored here. We encourage further research into all kinds of motherhood.

The slight majority of the participants (57%) identified as Christian (from a variety of denominations and non-denominational groups and with different levels of active engagement with the Christian faith), while 12% were from another religious tradition (Baha'i, Buddhist, Hindu, Muslim, Sikh), and 31% did not identify with any religious tradition or faith/belief group. Despite the wide call for participants, we encountered difficulties in interviewing specifically mothers from other faith groups beyond Christianity.

Findings from our qualitative study were supplemented with a quantitative survey of women aged 18-75 in Great Britain, both with and without children, exploring perceptions of motherhood, and digging into the identity, social, political, and spiritual shifts experienced by new mothers. This polling was commissioned by Theos and Bible Society, and externally conducted by Ipsos between 24th April and 14th May 2026 using its proprietary online panel as well as other vetted panel partners. A representative sample of 4,458 women responded to the survey and, of these, 3,606 women consented to proceed with the survey (having been notified that it contained questions about religion and health). The sample included 2,112 “Mothers”, who we have defined as those who identified themselves as biological mothers, adoptive mothers or step-mothers. For the full sample of 4,458, a quota sample was recruited with quotas set on age, region and working status. This data set was then weighted to the known offline population of this audience by age within region, social grade, working status, education, ethnicity and religion. Some insights from this study are included in this publication, but deeper analysis of its results are presented in a separate volume. A full technical note associated with the quantitative element of the research referenced in this report can be found as an Appendix. Full datasets can be found on the Theos website and the Ipsos website using this link: <https://www.ipsos.com/en-uk/theos-and-bible-society-study-women-and-mothers>.

Report structure

This report is in two parts. Part one examines how new motherhood shapes perspectives on identity, the body, relationships, community, work, politics, spirituality, and mortality. Part two

considers how well these shifts are supported across society, including in healthcare, workplaces, the community, and faith-based provision. The report’s conclusion offers simple recommendations for those working with and supporting mothers.

6

1 Mothers thinking about...

Through semi-structured interviews and focus groups, we invited women to reflect on their personal experience of becoming a mother – how it had changed them and whether they now saw themselves differently – and what impact that had on a variety of personal and socio-political questions. Simply put, we invited mothers to describe their experience of motherhood from the inside out. What emerged was a recognition that motherhood is not a single, contained shift but a transformation, encompassing the physical, social, political, and spiritual dimensions of their lives. Nor is this a one-size-fits-all transition: women experience it in a multitude of ways, particular to their own sense of self and life circumstances.

...Sense of self

Participants across this study differed in exactly how they articulated the impact of motherhood on their fundamental identity and sense of self – whether they felt more fully themselves, a transformed sense of self, or even a loss of self that longed for who they once were. Yet hardly any felt that their identity had been completely unchanged.

“I feel like I’m fully alive and fully me as well.”

Their responses call to mind the words of theologian Laura Fabrycky, “Those earliest days of new mothering I experienced as a personal earthquake, a great, long shaking of the self.”²⁰

While not always feeling able to articulate it clearly, some new mothers spoke of being more fully themselves. One mother shared:

I was reflecting with my husband the other week and becoming a mother, I feel like I'm fully alive and fully me as well... I feel like being a mother was something that I always wanted to do... so when that happened, I kind of went... this is sort of the complete... not that you ever get the completeness, but like, sort of the fullness of who I am now.²¹

This participant was not alone in associating motherhood with a generalised, or even idealised, process of self-actualisation. Another mum shared, “I only really feel whole when I am with [my baby]”.²² Others identified particular characteristics that their transition to motherhood had brought to the fore, with one mother sharing:

I have changed. I feel like... it's pulled out some of the things I was proudest of my character anyway, and it's like made them front and centre and brought them like a whole new purpose... I need to be quite patient in my job. I need to be very organised in my job. I need to be quite social in my job. But all of those things have been pulled out and used... beautifully in mothering.²³

A number of women in our qualitative sample gained more self-confidence after becoming a mother. One mum shared that she accepted herself more than she ever did before,²⁴ and another spoke of confidence in using her own motherly intuition rather than what was written down in books.²⁵ Confidence was also expressed in a “groundedness” or a sense of security that motherhood brought: “I feel so

“I feel so much more secure, secure and confident in other aspects of my life now that I've become a mother... [a] sort of the fullness of who I am now.”

much more secure, secure and confident in other aspects of my life now that I've become a mother... [a] sort of the fullness of who I am now”.²⁶ Similarly, a first-time expectant mum shared:

Unexpectedly becoming pregnant has made me feel more grounded. I feel like I have a lot more clarity and certainty about what I need to do... so yeah, that in a paradoxical way, I found that really freeing, like not so much choice, and yeah, I think I would describe feeling more myself.²⁷

In the quantitative element (conducted by Ipsos) of this wider research project, just over a third (36%) of mothers agreed that they were either “a little” or “a lot” more likely to feel authentic or true to themselves since becoming a mother. At the same time, however, 15% said they were less likely to feel this (“a little” or “a lot” less likely) – and this mixed picture is matched by our qualitative interviews, in which many others mentioned the difficulty of navigating a changed sense of self; a self that was now an expansion of self to include another, and could not be understood apart from one's children.²⁸ As one mother in the qualitative sample put it:

It's such a radical shift that if [N] were to die, I feel I also would have to stop existing. It's like the locus of myself is no longer in me as an individual, but between us. And therefore my future is her future, and I couldn't carry on without her... I can't even identify with the person I was before her.²⁹

Another spoke of having a child as like always having a handbag with you that you can't put down.³⁰ Navigating that new sense of self seemed tricky for some that we spoke to, but others admitted still figuring it out: “I think I'm still sort of finding who post-birth me is even just from head to toe in every imaginable way.”³¹

Within the qualitative sample, a large portion of mothers spoke of feeling unprepared for the task of being a mother: “Nobody, nobody is prepared, nobody. And so it is something you just have to navigate as you go. And it’s different for every person.”³² Some mothers felt that after leaving hospital there was an expectation they should simply know what to do, while others felt prepared for pregnancy and birth but not for the sudden transition to life with a child.³³ Feelings of unpreparedness had deeper implications insofar as they were often tied in with feelings of failure as a mother. As one mother shared, “it came with mixed feelings, because at some point I thought, what if I fail as a mother? What if I can’t actually bring them up right or maybe cater for them?”³⁴ Another mum shared feeling that while she always seemed to succeed in her career, she felt that she was constantly getting things wrong as a new mum.³⁵

Nonetheless, while many mothers did not feel prepared for the task, it often unlocked new characteristics. Quite a few mothers spoke of becoming a more patient or caring person.³⁶ One participant shared that motherhood had “helped [her] unlock a different aspect of [herself] that is a lot more like patient and nurturing, which I wouldn’t say is, weren’t natural things to me before I had a child.”³⁷ Another mother shared that her husband noticed a more caring side of her,³⁸ while another

said that having children made her more empathetic and able to see things from a different point of view.³⁹ It made some mums feel more “skilled”, for example:

*I feel like I am so much more skilled and better placed to work now, having had a big family, than I ever was before, because this multitasking, I mean, it takes parenting, takes multitasking to a different level, that’s for sure.*⁴⁰

Here it is worth noting that the quantitative study found that, while 32% of mothers surveyed said they were more likely (“a lot” or “a little” more likely) to feel “skilled” since becoming a mother, a significant minority – 22% – were less likely (“a little” or “a lot” less likely) to feel this, with 7% saying they were “a lot” less likely to feel skilled since becoming a mother.⁴¹ Despite the many new skills demanded of new mothers, then, matrescence is not always accompanied with the confidence of new learning. So too, returning to our qualitative interviews, for others the process of self-understanding was mixed: “I think your child shows you everything you love about yourself and then everything you don’t like about yourself at the same time.”⁴²

Finally, a changed sense of self was often connected with the loss of practical freedom that accompanies motherhood:

*I always thought I would be... I would sort of have my old way of doing things after having children, I’d still do all my things, then go out and have a coffee and see people. Children were not going to change things too much. Obviously, I was very naïve... I’ve been surprised by how much it has changed everything.*⁴³

One mother spoke of not having the freedom to be alone anymore and wishing she could simply just go out for a run when she wished

to.⁴⁴ Another spoke of how her sense of self changed overnight, and the freedom and independence she had in her 20s was now gone:

*It’s made me a bit emotional, but like, I still kind of miss the person I was before becoming a mum. Because you change so much overnight... that life that you had is just gone, that independence you had, that freedom, and your whole life now is in a way, you have to come to terms with, like the purpose of your life feels like it’s now for somebody else. It’s now for your children... it just takes quite some time to adjust... I am at that stage where you just kind of work out almost, who am I? You know, trying to kind of get your identity back whilst also being a mother.*⁴⁵

...Feeling invisible and undervalued

Often connected to the perceived loss of identity, most mothers we spoke to in our qualitative interviews felt undervalued. They desired to be seen, to be valued for the endless tasks they do often out of sight – often referred to as the invisible mental load. Many of our participants spoke of feeling “invisible” in their new role:

*I think there’s something about mums that is, we’re invisible, we’re so very invisible... you sort of cease to exist as a person, and you just become a mum. So, you’re just [N’s] mum.*⁴⁶

“I think there’s something about mums that is, we’re invisible, we’re so very invisible.”

I do sometimes, just feel quite invisible in the world... I don't know if they see me. I think they just see a woman with a pram... When I was on the tube, when I was pregnant, I would wear a badge, and mostly people would give up their seat. And if they wouldn't, I would ask for it, and feel very justified to get a seat. With a pram... it's very rare for people to offer you a seat once you have a baby and a pram, which is funny, because I actually feel like, particularly after my C section, I probably needed it a bit more.⁴⁷

This resonates with findings from an online survey of UK mothers from 2023 that found that 72% of mothers “often” or “sometimes” felt invisible, while 93% felt unappreciated, unacknowledged or unseen once they’ve had children.⁴⁸

One mother felt that being seen primarily as ‘a mum’ in public could have benefits:

You're seen first of all as your role as a mother, before you're seen as just another human being, but actually in a really positive way, like I get offered help with the buggy more than I need it.⁴⁹

In the Ipsos quantitative research, results were mixed: over a quarter of mothers (27%) rated themselves as “a little” or “a lot” less likely to feel “valued by society” since becoming a mother, while a smaller cohort – 19% – were “a little” or “a lot” more likely to feel valued by society, and for 41% of mothers they rated themselves as equally likely.⁵⁰ But perceptions of value by society and visibility are likely to feel differently depending on context, and in our qualitative study much of the perceived lack of recognition was centred primarily around home-based labour.

Many mothers spoke to us about not feeling valued for their domestic work:

I feel like there should be more recognition of the work that we do in the home, because it's just unpaid labour.⁵¹

My husband always says to me, working, you know, what you're doing is work, and I think a huge problem, is that we don't recognise it as work, because it's not paid.⁵²

“I feel like there should be more recognition of the work that we do in the home, because it's just unpaid labour.”

The mothers with young children felt an expectation to “do it all” – work full-time, manage the household, and raise children – essentially doing three times the work.⁵³ One focus group participant described societal expectations of mothers:

You're damned if you do, damned if you work. You're damned if you don't. I don't understand how you're supposed to be a chef, a nurse, a teacher, work, clean, have your own life.⁵⁴

...Relationship with my body

Just as motherhood affected women's understanding of their inward identities, it also affected their perceptions of, and relationships with, their own bodies. One of our expert interviewees, Dr. Noelia Molina, an academic researching spirituality and motherhood, described how women experienced embodiment “where [their] body is not [their] body anymore”, and how there was “a major kind of shift in consciousness for the mother too, you know, because

you have this baby inside you and then it's outside you.”⁵⁵ Another expert specialising in parenting shared:

*Becoming a mother, it's a bodily experience... we start as body and we end as body, that's kind of the constant through it, throughout life. And I think we need to be paying more attention to the importance of body really, rather than this focus on mind, both are so important, definitely.*⁵⁶

For some, this shift was profound and deeply challenging:

*I've changed a lot on appearance, emotionally, mentally. I feel like everything has changed because my looks changed... I feel less confident in myself, although I have accepted my body the way it is.*⁵⁷

One mother described bursting into tears when seeing photos of herself with friends, feeling unrecognisable and deeply affected by the emotional impact on her self-image.⁵⁸

A few women noted that motherhood changed how they dressed, shifting from taking pride in appearance to dressing more “functionally”. One mother shared:

*I just put on clothes... I know they're gonna get dirty because my kids are gonna like smear stuff on me. I don't have much time for like, to paint my nails and do you know, like, put on makeup and like, I feel like I've changed as a person, and now it's more functional.*⁵⁹

Another described the irony of investing in a sustainable wardrobe she no longer fits into after birth.⁶⁰

Beyond bodily changes, there was also a heightened awareness of physical limitation. One mother spoke of motherhood as “hormonal or neural pruning”, saying: “I felt like, like somebody had taken my

brain out and put a new one in, like I just didn't feel like it was functioning in the same way that it had been before.”⁶¹ Another mum spoke of her mind being in “overdrive”:

*In terms of like, thinking or planning day to day or anything... my mind is like in overdrive. So I feel like I'm always trying to think of, you know, what will be the best for our family, and you know what will work best on a day to day for our child?*⁶²

As noted in the introduction, measurable changes do occur in the brains of new mothers and caregivers: it is a physical shift. But there is an element of this transition which is also related to increased mental load and physical exhaustion. To this end many participants in our focus groups specifically highlighted the mental impact of sleep deprivation:

*I think, for me, the hardest thing right now is the sleep deprivation, not having the constant sleep... I wake sometimes every two hours. So, I really struggle with it sometimes, and then to function the next day with young children.*⁶³

When I had my first son, and he was really ill... he literally didn't sleep. People say this... like how are you actually doing this? And I'm like, but you just, you find a stamina that you don't really know you

“I felt like, like somebody had taken my brain out and put a new one in.”

“Everyone just thinks that you're doing marvellously, even if you're crumbling inside.”

*have, but I think also the ability to kind of just carry on... everyone just thinks that you're doing marvellously, even if you're crumbling inside.*⁶⁴

*And we used to joke that, like my daughter and I did midnight baking, because we literally did. She didn't sleep. So, at midnight till about two, we'd go and bake cupcakes.*⁶⁵

...Social media and the media

Many mothers had seen idealised portrayals of motherhood on social media and almost universally criticised these for setting an impossible standard for most families. "I think the way that the media portrays motherhood is, and especially on social media, it's very picture perfect, and it's not helpful at all."⁶⁶ Mothers on social media seemed to have everything under control and organised, which did not reflect their feelings of disorder and overwhelm.

In the media – but more broadly in society too – mothers shared that a wider and more diverse portrayal of motherhood was needed to include: stories of fertility struggles of women and their IVF journey,⁶⁷ the frequency of miscarriages, motherhood when living in poverty or as a refugee, mental health during pregnancy, motherhood at different ages from teenage single mums⁶⁸ to older mums, mums with children with disabilities,⁶⁹ the racial complexities within motherhood,⁷⁰ or mothers who are struggling with addiction.⁷¹

Other mothers within our qualitative interviews spoke of the algorithms of social media affecting them mentally. If they were anxious or kept viewing certain posts, their Instagram or Facebook feed would bombard them with similar information which entrenched



their worries and concerns.⁷² Beyond that, according to Dr. Dawn Llewellyn, an associate professor of religion and gender, the problem of social media was deeper:

*The social media stuff, it's there, but it actually, it doesn't sort of fulfil that existential, very personal connection... the existential questions that you might be having.*⁷³

“The social media stuff, it's there, but it actually, it doesn't sort of fulfil that existential, very personal connection.”

Several participants enjoyed social media content on motherhood – sometimes learning new parenting styles, other times simply viewing it without feeling pressure to imitate. One mum highlighted positives such as meeting others, including groups for

mothers of children with special needs.⁷⁴ Another used social media for ideas and techniques such as food or exercise tips.⁷⁵ Some women mentioned helpful podcasts during pregnancy,⁷⁶ while others valued TV programmes offering realistic portrayals of motherhood. However, there was consistent caution about online content.

Social media was especially valued for building support communities. Most mums described being part of online groups, particularly via WhatsApp, but also Facebook and other apps.⁷⁷ One mum noted a friend created a local WhatsApp group that included professionals like a physio, dentist, doctor, and breastfeeding support staff.⁷⁸ Another mum joined a WhatsApp group for doctor mums.⁷⁹ One of our expert informant participants Navrup Kaur, founder of Sikh Mum, described creating a global network of 350 new mothers, evolving from a WhatsApp group into facilitated Zoom calls where

women shared experiences, faith, and parenting challenges.⁸⁰ Many mums said these groups reduced isolation, especially at night. As one mum said, “when you're up at 3 or 4am... I had friends to message, and they would message back.”⁸¹

However, other participants found online groups unhelpful.⁸² Some mums emphasised that online groups couldn't replicate in-person support:

*We could all do with less WhatsApp groups, but, you know, like class groups just to support each other, and, you know, be there with reminders, whether it's a small thing or a big thing, I think it's important.*⁸³

Craving in-person support was also highlighted strongly by others too. A professional shared that while online spaces were necessary, in-person support would be more beneficial:

*It's more like having like a regular meet up so people don't feel so alone, and it's instead of just having like an online course, having things that are more live and in person, so you can feel more of that connection spiritually.*⁸⁴

This aligns with 2020 research on the NCT peer-support programme, which found statistically significant reductions in anxiety (-2.5) and depression (-2.5) on the Hospital Anxiety and Depression Scale, with 86% of mums reporting feeling less isolated and lonely.⁸⁵ We believe that, aside from our qualitative analysis, the quantitative research may be suggesting there is a need for more in-person support. In the quantitative survey, 36% of mothers surveyed reported that they were more likely (“a lot” or “a little” more likely) to feel lonely since becoming a mother.⁸⁶ This proportion rises to 53% among mothers who have a child/children still only 0–3-years-old

- and of this sub-group of n=333 participants, 1 in 5 (21%) said they were “a lot” more likely to feel lonely since they became a mother.

...Family & friends

We asked our qualitative participants how motherhood affected relationships with partners, family, and friends. Unsurprisingly, most mums said their partners were their main support. One mother said:

So like first definitely would be my husband, and he's been amazing, both practical support and emotional support, particularly the... first, like five, six weeks, I felt very like dependent on him.⁸⁷

Experiences varied: many said their partners took on household tasks and were encouraging⁸⁸ – for example, one mum described her husband managing meals, laundry, and activities.⁸⁹ However for a couple of mothers, though they were appreciative of their husband's support, they felt dissatisfied that their husbands did not contribute equally at home due to demanding full-time jobs, leaving them to manage responsibilities that traditionally fell to mothers.⁹⁰

Regardless, many mums needed additional support from parents, siblings, and friends, though this varied widely. Some described

“It really does take the entire rest of the ‘village’ to help with the children.”

strained relationships – for example, one single mum felt unable to rely on her family for financial or emotional support,⁹¹ while others reported difficult in-law dynamics.⁹² Others had

strong family support, such as their mothers staying after birth or moving closer,⁹³ which often deepened relationships⁹⁴ and prompted

reflection: “It’s an opportunity to talk about how she parented us... it’s another point of connection.”⁹⁵ This mum also found stronger bonds with her siblings once they both had children.⁹⁶

Quite a few mums spoke of motherhood affecting their friendships. Positively, having friends with similar aged children gave them a deeper connection with each other,⁹⁷ and a shared sense of experience brought one expectant mum closer to her friends.⁹⁸ Yet other mums found it hard to relate to friends that were at different stage of life:

The friends that I used to have... and I still love them dearly, but they're at different stages, so I just suddenly became quite isolated as a mum.⁹⁹

A common thread was the need for a hyper-local support network – a “village” of support. As one mum described it, she really wanted friends and a community that was within pram-pushing proximity.¹⁰⁰ Mothers reflected deeply on how their community was organised, juxtaposed with what they wished for:

“It’s not a luxury to have community at all, it’s a complete necessity.”

I think if you went back 50 years, there would be far more people literally around you in your community.¹⁰¹

I mean, when we say it takes a ‘village’ to raise a child... it’s not just because we like saying it, but it literally does take whole village to raise a child... The mother [should be] the primary caregiver, but not the only caregiver. So while the mother is there with them for the majority of the time, and she’s always present, she has time to

herself as well. And it really does take the entire rest of the ‘village’ to help with the children.¹⁰²

In some cases, family and friends lived too far away to offer in-person support, in other cases strained relationships prevented support or simply not knowing anyone nearby. Without it, many of our participants felt isolated:

In terms of close family and someone able to just drop everything and pop in, we didn’t have that, and that was quite stressful, that was quite isolating.¹⁰³

I think just because of our experience being in Birmingham and being like, just feeling really, really isolated, that was really hard, like my mental health really suffered, and it was like, it’s not a luxury to have community at all, it’s a complete necessity.¹⁰⁴

As such, it seems that creating that “village” within pram-pushing distance is key to preventing maternal isolation. As one academic focusing on the history of women put it:

I think we are getting better at talking about maternal loneliness. I don’t think we’re getting better at solving it... I think that motherhood, we orient women to want to have a community around them, and... some of not having a community perhaps contributes to maternal loneliness.¹⁰⁵

Recent research from the British Association for Counselling and Psychotherapy (BACP) revealed that 62% of parents who’d had a child within the last 12 months said that loneliness has negatively impacted their mental health and wellbeing.¹⁰⁶

...My place in the community

Beyond existing family and friends, mums enhanced or replaced the “village” through local support found in parent and child groups, antenatal classes, school groups, religious groups, mother circles and online. One mum explained that without family nearby or an instant family network, she had to build support through peers, her church, and baby groups.¹⁰⁷ Another mum spoke of relying on neighbours:

I mean our next-door neighbour is a saint. I love her. She’s wonderful... she’s sort of like a substitute granny for our kids, because neither of our parents live nearby. We’re all sort of 300 miles away from our nearest relatives. So,



*we've had to... just latch on to people a little bit to find people who can help and support us.*¹⁰⁸

Antenatal groups (e.g., NCT) were often valued for support and friendship with parents at a similar stage, with many mums describing lasting bonds built on shared experiences, emotional support, and practical advice.¹⁰⁹ However, some struggled with these groups: “these antenatal classes just didn’t feel like I belonged, I wasn’t very interested in the kind of vibe.”¹¹⁰ Another found them unhelpful, focused on

“I think we are getting better at talking about maternal loneliness. I don’t think we’re getting better at solving it.”

moaning about partners or comparing baby food, preferring space to discuss topics beyond parenting such as politics.¹¹¹ Many didn’t want to be seen as “just mums”, but as people with broader interests and contributions.

Other local support came from structured classes and groups in libraries, parks, museums, galleries, community centres, and private organisations. A few mums mentioned baby massage and baby yoga as spaces that helped them slow down.¹¹² Many also attended playgroups in community centres, parks, and churches,¹¹³ while those with older children used support groups for mental health, disabilities, and counselling services.¹¹⁴ Once children were older, friendships from school-based mum groups became important.¹¹⁵ As one mother noted, “there’s a lot for the community you build up through primary school... I’m just about to become the chair of governors at the school.”¹¹⁶ Another noted she joined a parent fundraising group in week one, which became her friendship circle.¹¹⁷

Beyond formal local support groups, many mothers spoke of informal avenues of support – both in-person and online – though this varied from city to rural environments. These included finding connections between other mums in playgrounds or through community cafés such as a café set up with neurodivergent children in mind.¹¹⁸ Mums also set up local informal groups, such as a group for mums having twins in the area¹¹⁹ or setting up mindfulness classes to connect with mums with a holistic or spiritual interest.¹²⁰

A number of mothers shared that forming friendships with other new mums within faith communities enabled deep conversations delving into personal topics like birth trauma, mental and physical health, and caring for newborns.¹²¹ An expert on birth trauma and liturgy that we spoke to as part of this research, Rev. Alice Watson, spoke of church-based parent and child groups as:

*Sources of support, because you can be in a place where it’s a bit safer and a bit more open to be able to talk about what might be going wrong, or those kind of things, or how you feel.*¹²²

Echoing this, other mums who attended faith-based parent and child groups felt they provided a strong support because of shared values and beliefs and were appreciative of the prayers they received from others.¹²³ For many mums, faith communities offered safe spaces and sources of support whereby they felt comfortable to share the joys and struggles of matrescence. As explored in the second half of this report, mums also engaged with faith communities in social ways, for example through parent and child groups in churches, or community meals.



...Work & priorities

Returning to paid employment after having children is a financial necessity for many mothers, whether they want to or not. Statutory maternity pay is only paid for 39 weeks, although many women take longer off work to care for their new children, and company top-up policies vary widely in the level of their provision. Research from Pregnant Then Screwed found 76% of mothers relied on debt or savings due to low statutory maternity pay.¹²⁴ A 2024 survey, Maternity Action found that 73% of women worried about money when they were pregnant or on maternity leave – a rise from 64% in 2022. Nearly a quarter (23%) said they struggled a lot to buy the things they needed while pregnant or on maternity leave, and over half (54%) said that they “sometimes” struggled. An increasing percentage of women said that money worries had affected their health or wellbeing while pregnant or on maternity leave (56% in 2022 and 65% in 2024).¹²⁵

Participants in our qualitative interviews noted that maternity pay only provided support if someone was already employed when they become pregnant, and shared that unplanned pregnancies without support were even more financially precarious.¹²⁶ While enhanced employer pay was appreciated, levels varied greatly. Women spoke about these differences explicitly. As one participant shared:

I have a friend who won't get any maternity pay from her employer until she's been there for three years, which is probably the worst I've ever heard... but then I've got another friend who I think works for civil service, and she gets like six months full pay.¹²⁷

When re-evaluating their priorities since becoming a mum, some mentioned that children shifted their priorities away from paid employment.¹²⁸ One expectant mother felt less motivated at work,¹²⁹ while another described emotionally detaching herself from projects as she prepared for the next stage of life.¹³⁰ And one mum of three shared:

I had ambitions to have a career, and I thought that's what I was going to do, and I sort of completely changed my priorities with becoming a mother, and that's my job is much less important to me. My career is much less important to me than my children.¹³¹

However, other mothers said their feelings about work had not changed, with some looking forward to returning after maternity leave.¹³² One mother noted that the mental stimulation of work helped balance the exhausting aspects of motherhood.¹³³ There is no 'one-size-fits-all' balance between employment and the unpaid labour of mothering – and indeed, the same economic pressures which force some women back into paid employment, even on fewer hours, drag others out of the workforce altogether. Women across our

“My career is much less important to me than my children.”

study were juggling family and work depending on their own circumstances, in a struggle that seems intrinsically interwoven into the experience of motherhood in today's society.

Childcare for pre-school children was widely described as an exhausting and precarious juggling act, often “improvised”¹³⁴ by individual families through a patchwork of part-time work, paid childcare, and support from grandparents or other relatives/friends. For many, this delicate balance meant that if one element failed, the entire arrangement was disrupted.

But even for those mothers that still desired a career, many wanted a balance between paid employment and seeing and caring for their child. Many mothers spoke about the desire for more flexible or part-time paid work. For example, in the words of one mother:

“I am grateful for being at home, that I am able to do that, but I still feel bad or guilty for not working.”

I don't feel any different about wanting to pursue that career. I think I might want to pursue it three or four days a week and have a bit of extra time with my baby.¹³⁵

Others had found a way that worked best for them, juggling family and part-time work, or working freelance, or setting up their own business.¹³⁶

Guilt was a common feeling both for participants who returned to paid employment, and those who didn't:

And I know I am grateful for being at home, that I am able to do that, but I still feel bad or guilty for not working.¹³⁷

I've just gone back now fully to work. And the mum guilt is horrendous.¹³⁸

I mean, balancing work and time with the baby is hard. Like, obviously, Monday to Friday only. We get to see her for a bit in the morning, but in the evening, it's difficult... when I first went back to work it was hard, because obviously I was with her 24/7, leaving them doesn't feel natural.¹³⁹

Guilt could also be felt towards employers, with one mother describing feeling “an element of guilt” telling her employer she was pregnant, due to the financial impact on the organisation. The same participant said she also felt the need to reassure them of her commitment by overcompensating before taking leave.¹⁴⁰

Equally, a stay-at-home mum shared how it personally impacted her:

I feel in society, a lot of mums who are working or others see me as someone who's just a stay-at-home mum and she's lucky and maybe lazy... I think a lot of them see I've lost confidence.¹⁴¹

Despite this, some mothers came to a new appreciation of the social value of mothering – wishing perhaps that wider society would recognise it more. In the words of one first-time expectant mother:

“What it takes to be a mother and raise children, I think it's one of the most, if not the most, important job there is to a functioning and better and flourishing society.”

I think that there's this false dichotomy between work and home, and that I worried that because I wasn't working, I was no longer doing anything important... when you really think about what it takes to be a mother and raise children, I think it's one of the

most, if not the most, important job there is to a functioning and better and flourishing society.¹⁴²

..Current affairs and politics

In our quantitative study, 44% of mothers said they thought about politics and current affairs “a little” (29%) or “a lot” (15%) more since becoming a mother, compared to only 11% who thought about it less (“a little less” or “a lot less”) – while 72% of mothers reported thinking more about education (“a lot” or “a little” more), 62% thought more about nature and the environment (“a lot” or “a little” more), and 52% thought more about their local community (“a lot” or “a little” more).¹⁴³ These statistics perhaps suggest a subtle but powerful political disruption that comes with motherhood, in the broadest sense, as priorities shift and change. Having a child, it seems, fundamentally recalibrates how women relate to the world around them. As one mother shared in the qualitative study:

I started thinking a bit more about mothers around the world, and thinking about mothers in Gaza, mothers in Ukraine, mothers in, you know, Israel and thinking, you know, I've definitely struggled with things, but I'm not in a war. I'm not in a bunker. I'm not like on the road being a refugee.¹⁴⁴

At the same time, for some mothers in our qualitative sample, having children reduced their engagement with current affairs, often as the emotional cost became too high. As one mum shared: “I don't really pay attention to the news much, because it worries me a lot when I see the news.”¹⁴⁵ Similarly another shared: “I've increasingly disengaged from the world and the news and just trying to, like,

“I’ve increasingly disengaged from the world and the news and just trying to, like, protect my mind and heart and stay hopeful.”

protect my mind and heart and stay hopeful.”¹⁴⁶ A few mums commented on finding it difficult to watch other children in distressing situations on the news such as in war-torn places, or as refugees.¹⁴⁷ While such distressing global news had

impacted them in the past, it emotionally left a much larger dent now they themselves had children.

At the same time, we found that motherhood intensified political awareness of policies directly relating to participants’ own children’s lives. To this end, the majority of mothers did not describe a fundamental shift in their political beliefs since having children, but they did describe a change in how politics showed up in their everyday thinking. In areas of healthcare, education, technology, and the environment, the consequences of political decisions could feel newly personal. Again, this speaks to the ways that motherhood can be a quietly political event for women, as they navigate their own place – and the place of their children – in wider society.

Many mums were concerned about their children’s usage of technology and were therefore interested in relevant government policies to protect them from online harm. This included use of social media by children,¹⁴⁸ amount of screen time, access to smart phones and computers,¹⁴⁹ and the impact of technology on mental health.¹⁵⁰ A mum with a newborn said:

I was still very passionate about things like social media, in terms of like technology and adoption of technology, and usage of technology, and the impact that has on children. I would love to be

*an advocate of not having it and not utilising it and how to govern and restrict it.*¹⁵¹

Some mothers also spoke of being concerned about AI and what effect that might have on their children and the future.¹⁵² And motherhood made some participants think of the implications for the environment and the climate crisis. As a Muslim mum put it: “What is the world going to look like in 20 years’ time, 30 years’ time, when they’re adults and trying to navigate that?”¹⁵³ Some spoke of wanting safer green spaces,¹⁵⁴ were worried about the effect of pollution¹⁵⁵ and the effect of carbon emissions on travelling,¹⁵⁶ or chose to recycle more.¹⁵⁷

...Spiritual practice

Among the women in our qualitative interviews and focus groups, the impact of new motherhood on spiritual practice ranged widely: some reported a deepening of spirituality, others a refocusing of their practices, some faced significant barriers to spiritual engagement, and for a few, there was no change at all. While previous qualitative work by Bible Society had indicated the birth of a child as a spiritual “disruptor” life moment for greater spiritual openness,¹⁵⁸ in this study the pregnancy and birth of a child rarely prompted a change to religious practice from those who previously engaged in no religious or spiritual practice at all. Instead, we more commonly saw a shift from weaker to stronger belief, with more frequent practice, sometimes passing the boundary from belief without belonging to active participation in a faith community. In our quantitative study, over a quarter of mothers (27%) said they thought about God and spirituality

more since becoming a mother (“a lot” and “a little” more) – though this varied significantly by faith affiliation with only 11% of non-religious mothers (n=921) answering in this way, compared to 34% of Christians (n=1003) and 61% of non-Christian religious respondents (n=131). While almost 3 in 5 (59%) selected “it has made no difference” at this question.¹⁵⁹

Nonetheless, navigating spirituality after children could have mixed impacts. For women with an existing faith, we found the transition to motherhood almost universally disruptive to existing spiritual practice – though this disruption could be experienced both positively and negatively. In response, and with no singular widely socially recognised pathway to adopt, the women in our qualitative

“It’s really hard to get to church on a Sunday morning and to connect with people when you’ve got a kid pulling on your leg and they want 500 snacks and just think, like, why are we trying to do this?”

study actively reformulated their spiritual lives, creating new practices either within private individual life or family and community contexts. These adaptations were almost entirely self-directed, highlighting a notable gap within Christian communities especially to meet and negotiate the spiritual needs of mothers.

Attending community worship

Attendance at community worship was notably varied for many of participants within our qualitative interviews, who identified as having a religion. For some, the transition to motherhood created space for new practices, with connection to community a particular driver. One



Muslim mother described how she was now able to attend Friday prayers at the mosque – something previously impossible because of work commitments.¹⁶⁰ A number of Christian mums reflected they now attend church more regularly and with more intention as a result of having children.¹⁶¹ Yet for others, attendance became more difficult:

*I think in terms of barriers, it can be really hard to follow sort of standard practices of faith. So it's really hard to get to church on a Sunday morning and to connect with people when you've got a kid pulling on your leg and they want 500 snacks and just think, like, why are we trying to do this? Because I can't engage and likewise... trying to sort of build in any structured practices of sort of personal Bible reading or stuff just hasn't worked for me. Like that just hasn't felt like it's worked at this in this season of my life, and I think is something that I've missed and something that I would like to get back to.*¹⁶²

“I was never very religious before that, but [I] put the kids into Sunday school saying, you know, they need to have some sort of spirit or some sort of guide in life.”

Across these accounts, the primary attendance motivation was not often personal spiritual support, but the perceived value of community and the importance of shaping a child's spiritual development. This same motivation could also lead people to start attending church

where they didn't attend previously, as one mother reflected:

I was never very religious before that, but [I] put the kids into Sunday school saying, you know, they need to have some sort of spirit or some sort of guide in life, just to kind of keep them, keep

*them going. If we're not there, at least they've got some sort of basis.*¹⁶³

Another participant similarly described attending church primarily for her daughter's formation rather than her own:

*I'm going because I wanted to have my daughter have some understanding of a religion... it's the reassurance that there was a structure... Having that general understanding of what a religion is can then help me sympathise and empathise more where other people are coming in from different religions.*¹⁶⁴

Similarly, another mother explained:

*We don't go to church weekly, [but] when we're celebrating events like Christmas or Easter, we feel it's important to take the girls to church and understand the true meaning. And I think a lot of that has got to do with also just being respectful about religion and giving them an understanding as I think it's important in all culture. You know... we want them to have a respect and understanding for all cultures and religious beliefs.*¹⁶⁵

Together, these reflections draw attention to church attendance as a perceived benefit for the next generation.

What then of the spiritual engagement of mothers as individuals?

For many religiously active participants, becoming a mother made attendance at church more challenging. For some, the barrier was practical: getting out of the house is difficult, with young babies no more predictable on a Sunday morning than any other day. For others, the greater difficulty often emerged once they arrived. While church communities were largely described as supportive, lack of proactive inclusion tactics left some mums feeling spiritually reduced



as they struggled to juggle looking after a child whilst participating in community worship. Where Sundays had once meant “listening to the service or sermon” and “connecting with friends,” attention was now “split”.¹⁶⁶ One couple described alternating roles – one parent sitting in to listen, the other at the back “taking care of him and probably not getting fed spiritually in that moment”.

Others spoke of diminished engagement, something that was particularly acute in the early years of caring for babies and toddlers. One mother reflected, “I am definitely less engaged, because I’m constantly paying attention to her”.¹⁶⁷ Another described how sometimes she’d spend “most of it [church service] walking him up and down at the back of the church... trying to stop him crying”, with the result that “you miss the sermon” and church is a “bit less enjoyable.”¹⁶⁸

In some cases, the impact extended beyond divided attention to physical separation. Parents of babies and toddlers often removed themselves from the main congregation for groups or into side rooms, creating a subtle but real distance from communal worship. Again, the mothers we spoke to recognised there were no easy solutions to the inherent challenges of having young children. Yet one of our expert participants, Rev. Alice Watson, also articulated a quiet loss: “I think it’s often that you do lose a part of who you are as a spiritual person separate to your children”.¹⁶⁹

These accounts should not be read as suggesting churches are fundamentally unsupportive; our participants stressed this

“I think it’s often that you do lose a part of who you are as a spiritual person separate to your children.”

was far from the case. Nonetheless, there is an absence of proactive structures that protect mothers' spiritual participation. Practices that were most valued were those intentionally designed for inclusion: baby rooms with live-streamed services, headphone access when stepping outside, or community-wide approaches to childcare rather than relying on a small rota of parents. Without such measures, the spiritual cost of early motherhood remains largely socially invisible. Mothers continue to attend, but often at the expense of their own spiritual nourishment.

Personal devotion

For many of our qualitative interviews' religiously active mums, the spiritual impact of matrescence was felt beyond community worship too. Opportunities for contemplation became increasingly challenging with a child. A number of mums reflected they "don't have time to pray,"¹⁷⁰ due to intensity of looking after young children. As one mum reflected:

*There's no downtime, like there's no time to reflect. Sure, you reflect for 30 seconds and then someone's pooped, or someone needs something. Even in the evening, like she's quite colicky... There's no time to just settle down and process anything.*¹⁷¹

This disruption was experienced by non-Christian participants too. Muslim mothers also reflected on the demands of prayer when sleep-deprived, the challenge of divided attention, and fear of what children were up to while they prayed.

A number of our mums reflected they "don't have time to pray".

Nonetheless, many women we spoke to adjusted their practice to reflect their new lives amongst the challenges. Prayer became refocused on prayer for children; liturgical prayer took on new depth with the experience of parenting. Some also described a deepening appreciation for prayer as they navigated the anxieties and challenges of daily life. Again, women sought community, with a number of Christian mums making or finding prayer groups with other mums, to provide support and new spiritual outlet.

The challenges of personal scripture reading was also raised by a number of our Christian mums, particularly those for whom Bible reading had been a regular discipline. Again, this was due to lack of space for quiet time in the overwhelm of caring for young children and in some ways seemed less adaptable than personal prayer.

One participant highlighted how rare uninterrupted time had become. What proved most meaningful were not organised church initiatives, but simple acts of practical support such as someone babysitting so she could "go to a coffee shop and read [her] Bible". As she describes: "For me, those moments have been precious, but there's not many of them."¹⁷²

Again, no easy solutions presented themselves. One participant shared that she had made a Bible reading group for mums but with young children present, they struggled to engage as they wished. However, again, we saw that mums were resourceful in adjusting to these challenges, integrating Scripture into the child's reading rhythm, as one mum describes:

I don't have, like as much capacity to kind of read the Bible, but in an intensive way. But I've been reading the Psalms, and that's a kind of easier section of the Bible [to] digest, and that's been really kind of comforting and actually reading them out loud to her while I've

*been feeding as well, just because it helps me kind of concentrate and it feels a nice thing to do.*¹⁷³

The presence of children's Bibles was also noted as beneficial for some mums, as they integrated Bible reading into their children's routine, even if it was a struggle for their own.

Worship in everyday mothering

“In the past, we might have been thinking and praying about how to love sacrificially ... now we're putting that into practice ... demonstrating that sacrificial love to him, and so recognising that is still a spiritual practice.”

For some mums there was a conscious integration of the everyday practices of motherhood into sacred moments. Among Christian participants, this sometimes was articulated around the idea of the domestic monastery, with its roots in the book by Ronald Rolheiser¹⁷⁴. The idea of obedience to duties you wouldn't always want to do, of ways of learning embodied

service, clearly resonated. For these mums, motherhood was practical theology, as described by one mum:

*In the past, we might have been thinking and praying about how to love sacrificially and like, oh, how do we do that? Whereas now we're putting that into practice... demonstrating that sacrificial love to him, and so recognising that is still a spiritual practice, but in a different way. It's not reading about it. It's not like learning the theology of it. It's living it out. It's doing it every single day.*¹⁷⁵

The positioning of motherhood practices as sacred were also present among our mums from other faiths. A Muslim mum reflected that within Islam any act with the right intention is an act of worship, including the feeding of her child: “So, for example, if I'm feeding my baby, if I if in my mentally, I'm just like, you know what this is for God, then that is worship in itself.”¹⁷⁶ Likewise, one Sikh participant reflected on the spiritual act of breastfeeding as taught in scripture, and the significance of surrounding them with positive energy while nursing to likewise spiritually nurture her daughter.

...Spiritual reflections

Beyond the significance imposed on pregnancy in cultures throughout history, it has been argued that motherhood, and birth in particular, is a profoundly spiritual experience for individuals,¹⁷⁷ a time of expansive growth whereby women navigate anew questions of meaning, self, and transcendental connection with something deeper than oneself. In speaking to this study, researcher Dr. Dawn Llewellyn described how “the sheer joy, the ecstasy of [birth] triggers an awe moment”,¹⁷⁸ a sense there is something bigger, for some women. The connection with birth was similarly remarked upon by Caroline Montgomery, a maternal professional, in her experiences working with women as she describes:

I think it definitely awakens awareness. You know, I think it's a time when mothers are like, whoa, the miracle of birth. You know, is there a God?... What is the meaning of life?... It definitely awakens something in them, and they've got that time and pause to actually

*think about, well, they haven't got the time, they haven't got the energy, but they do pause and think, oh wow, you know.*¹⁷⁹

Feelings of awe and wonder

Few of our qualitative participants without an active faith resonated with the idea becoming a parent was an explicitly spiritual time when asked directly. Yet when asked instead if they resonated with the language of “awe and wonder” a different picture emerged. Across the interviews many women described motherhood as a period in which life, death, and the emergence of new personhood, were encountered with new focus.

Among these participants of all spiritual perspectives – including those with no religious belief – a common reflection was on the wonder and awe of seeing new life take shape. For some, these feelings were rooted in the experience of pregnancy and breastfeeding. One of our participants described realising what her body could do in creating and sustaining life as “mind blowing”,¹⁸⁰ a phrase repeated by another mother when reflecting on seeing the “tiny human inside”¹⁸¹ during a scan.

In many of these interviews, women as creators – the idea that something new had come to be – was a particularly awe inspiring thought, as explained by one of our mums:

*I thought when she started to kick, maybe when I was pregnant, I thought wow, this is just incredible, what we do and how, how we just create them. And when she was lifted up in the C Section, it was just that was a sense... it was just amazing really. I don't know if I'd go so far as saying spiritual or anything, but yeah, it was a brilliant feeling.*¹⁸²

As explored more in the next section, some participants also felt differently about death and mortality on becoming a mother.

While present among our non-religious mums, reflections on creativity and creation were especially prevalent among participants who belonged to a religious tradition or faith group. For these women, pregnancy, birth, and early motherhood bought a new sense of wonder at God or the divine at work in the world, or a deepening of spiritual worldviews. For one participant, this process was so significant that it took her from cultural Christian practice to something more personally meaningful, as she reflected:

*And then I had kids and I was just so amazed by it, like the whole process of... I've created this whole person. And I know obviously that my husband had a part to play, but it made me believe in God, like, truly believe in God.*¹⁸³

For others, their experiences reshaped their understanding of God as a creative force, as one mum captures here:

*I really understand who God is and who we are in a new way. You know, we are, we are born to grow. It's so obvious we're born to grow that you kind of, until you see it, you don't realise until you see that baby comes out like that and then they can't even get their hand to their mouth and you have to learn all that. And then all the other things are learned.*¹⁸⁴

Here we see another theme present across both religious and non-religious participants: the awe and joy of seeing the child learn, grow

“I really understand who God is and who we are in a new way. You know, we are, we are born to grow.”

and create. For some again, this inspired reflection on God's creation; for others, it was the wonder of seeing personality, capacity, and inner potential unfold day by day.

A number of our interviewed participants were moved by the way their child saw the world, in turn provoking them to see the world 'through their eyes'. Women spoke of the wonder with which children encounter ordinary life, prompting them to notice "the joy in the everyday moment"¹⁸⁵ or "beauty in small things" as normally "you just don't notice these things when you're taken up with adult stuff".¹⁸⁶

Self and other

This altered way of seeing was closely connected to shifts in selfhood and purpose. Some of the qualitative participants described

“I think it's given me more in terms of the meaning of life, why we're here, why we're doing this.”

motherhood as bringing a new sense of meaning, sometimes in explicitly existential terms. As one participant reflected, "I think it's given me more in terms of the meaning of life, why we're here, why we're doing this".¹⁸⁷

For others, purpose was grounded less in metaphysical reflection and more in the value of their new role itself, as this participant reflected: "I think it's most intense and exhausting, but also the most purposeful I've ever felt. I suppose I have some importance and something to give."¹⁸⁸

In most cases, this purpose was deeply relational, found because decisions, priorities and actions were now made through considering their impact on the child. Yet like all themes in this study, this came

with the shadow side, where the weight of this responsibility came with anxiety.

Even so, women who resonated with this theme seemed to find joy in this new perspective, with one describing her new purpose as both "grounding" and "decentring"¹⁸⁹. Closely related was the joy many women found in a heightened sense of connectedness¹⁹⁰ – both to the child and their development, but also with a larger experience of mothers throughout history and the amazing, but perhaps less previously understood work, they had done. As one mum shared, "I think it's that overwhelming love that you feel... I think I was really struck by how raw that love and that connection was, like, straight away."¹⁹¹

New perspectives on faith

Finally, among the practicing Christian mothers we spoke to, becoming a parent often provoked a changed perspective on God and the stories of Scripture. This was a powerful and recurrent theme across the interviews, with women describing how becoming a parent made them see the idea of God's character in a new way. Most frequently, the concept of God as a parent particularly resonated, with the love they felt for their own child giving a new frame for helping them understand God's love and delight in them.

The Bible in contrast appeared as more complex and contested in our interviews. The figure of Mary resonated with a number of participants, shifting the story from nativity staple to one read with visceral empathy and embodied relation. One mother described her experience revisiting the nativity narratives:

*Reading about Mary giving birth absolutely struck me, because I was like, if I was Mary, I'd have died... I cannot hear the Christmas story without thinking that and being like...we take the stuff for granted.*¹⁹²

For another:

We've got so used to just talking about it... Mary gave birth in a stable, and she got there on a donkey and she had this baby, and everyone came to meet the baby, and I was just like, has no one realised how significant that must have been, and she must have felt so scared and she must have felt so overwhelmed when she just had this baby, and it was her first baby, and all these people were saying he's here and he's going to change the world. And she's probably just thinking Well, you know, I'm just trying to breastfeed

*him and keep him warm and do all of these really basic things, because she was just a woman who'd had a baby.*¹⁹³

Here, not only are classic stories of Scripture read with new depth, but the absence of female-centred experiences took on a new importance. Other participants similarly found their own motherhood experiences raised challenges in their reading of Scripture. For one participant, this was in the absence of women's motherhood stories, whether about infertility or childbearing. For her, while motherhood had opened her eyes to "see this world afresh",¹⁹⁴ this living experience was not reflected in her experience of Christianity. For another, the suffering of children such as the firstborn in Egypt became particularly challenging.¹⁹⁵

Yet, these challenges were not killer blows to faith and sit alongside other parts of Christian life and Scripture taking on new and enriching depth. Rather, as we will explore later in this report, this configuring and reflection is a live process for women, one they're often navigating alone and with limited resource. As noted by one of our experts, Dr. Dawn Llewellyn, feminist commentaries on the Bible do exist, but are often inaccessible in the mainstream. A proactive step for Christian communities to support new mothers could be to make space for these readings, not in the abstract, but in dialogue with mothering in the 21st century.

The interviews given by our participants demonstrate the rich inner life of women navigating the transition to motherhood – the ways their understanding of life, death, experiences of awe and wonder, connectedness, spirituality and relationship are encountered and reconfigured. Yet it is notable these questions were some of the most challenging for our participants to answer. Outside of those with an active faith, few found it easy to describe these experiences when



asked directly about ‘spirituality’. Yet, when shifting to language of awe, wonder and gratitude, women were able to reveal the depths of the experiences they were navigating alongside the everyday joys and challenges of parenting.

The absence of resonance with religious or spiritual language should not be mistaken for the absence of encounter with existential questions, or spiritual impact in its broadest sense. We suggest some mothers may benefit from conversations on topics such as encounters with new life, mortality, awe, and moments of everyday wonder being more culturally normalised, thereby providing space to allow reflection on the emotional, relational, and even existential dimensions of the transition to motherhood. However, if they are to be meaningful and welcoming, they must be shaped by language that resonates with women’s lived experience rather than imposing frameworks that feel distant from it.

...Death

Alongside wonder at new life, in the qualitative study we explicitly asked mums whether new motherhood had heightened their awareness of mortality, transforming death from an abstract fact into an immediate relational concern. Existing literature suggests a link,¹⁹⁶ and we believe that the quantitative research for this wider project confirms an impact here: 65% of mothers said they thought about death “a little” or “a lot” more since becoming a mother – only a slightly percentage than those who said they thought more about education (72%) and family (76%)¹⁹⁷. We might expect women to think more about schools once they enter the world of parenting, but that death can enter women’s inner lives in anything close to a comparable

way indicates the extent to which becoming a mother can confront women with the deepest existential questions.

At the same time, this may well not be the case for all mothers. In the qualitative phase of our study, there was a mixed response among our participants: slightly more mums said they did think about death more, but for others it made no difference at all. As one mum shared:

I hadn't honestly, really thought about [death] until reading that question, I guess because I'm still, I still feel so busy, wrapped up in the everyday.¹⁹⁸

“If I died now that... that’s so scary, and what would happen to my child? And would my child remember me when they’re an adult? And how will they live without me?”

And indeed, in the quantitative element of this project, 27% reported becoming a mother made no difference, while 5% said they thought about death “a little” (3%) or “a lot” (3%) less since becoming a mother. However a majority – 65% – rated themselves as thinking about it a lot (27%) or a

little (38%) more.

Supported by previous Theos research,¹⁹⁹ we know that we are not very good as a society at talking or thinking about death. Motherhood didn’t seem to massively change that.

For those who had thought about death differently since becoming a mother, this could be expressed in an awareness of their own mortality and a deep realisation that “we’re not around forever”.²⁰⁰ It was often bound up with questions of what maternal

absence would mean for the child, particularly if death were to come unexpectedly or too soon.

“If I died now that... that’s so scary, and what would happen to my child? And would my child remember me when they’re an adult? And how will they live without me?”²⁰¹

The consequences for their children should they die, brought fear and a sense of anxiety to a number of mums within the qualitative research. Others took (or thought about taking) practical steps to prepare.

One mother shared that she and her husband wrote their wills as soon as their son was born as it felt like the sensible thing to do,²⁰² while another mum spoke of getting life insurance in place.²⁰³ Another shared that she regularly writes postcards to her children in case she dies.²⁰⁴ A few mentioned concerns about dying in childbirth with one mum sharing that her good friend died in that way.²⁰⁵ Another shared, “I mean, it’s definitely made me care about much more about my own mortality, and I occasionally panic... I must write a will.”²⁰⁶

For others, mortality was also thought about in terms of the death of their children, and the maternal desire to ensure the safety of their children. One mum with older children shared:

It’s more of, like, the anxiety of safety, especially, for my children... making sure they live through the day, and even just when going out and about, making sure we’re safe.²⁰⁷

Another mum shared that it wasn’t a fear of death for herself, but for her children, and that made her worry that her children may, for example, fall down the stairs and die.²⁰⁸ A couple of mothers and a professional spoke of mortality in light of having experienced miscarriages too, and how even if in the womb, it should be

understood as a death too.²⁰⁹ These accounts echo a broader body of literature and published memoirs on parenthood and grief, in which writers draw on experiences of miscarriage, stillbirth, and the loss of a child to articulate how grief, mortality and aspects of spirituality are woven into maternal experience.²¹⁰

For others, motherhood made them aware of their parents' mortality and that they won't always be around:

*We're actually more acutely aware of our parents getting older as we like, sort of transition into this next season of life, and so yeah, that sense of mortality becomes like, we feel like we're going to be confronted with that sooner than we would have hoped for.*²¹¹

Many of the mothers in the qualitative study described being confronted by some of the most visceral questions of existence through the everyday experience of parenting, and this included conversations with their children as they learned about death. As one participant described:

*My daughter said to me recently, when will you die? It's like a really, really heartbreaking question that you've got to answer, and you've got to be real and you've got to be honest, but you also want to protect them.*²¹²

Such moments underline that mothers are often required to interpret the toughest questions of existence for another, balancing honesty, reassurance and uncertainty. Many participants described feeling ill-equipped for this task, nonetheless recognising the significance of these questions for their children.

Conclusion

There is not only one pathway to motherhood. Matrescence can make women feel more authentic, raw, expanded, and deeply present – but it can also leave them radically challenged, as their sense of self is reshaped by love, responsibility, and vulnerability. For some mothers, it is a process of feeling more “fully alive”; for others it confronts them profoundly with their own mortality; for some, it may do both. It reorganises a woman's identity, priorities, politics and inner world: a new life is born not only in her arms, but within her. As a result, motherhood opens quests for deeper meaning, with reflections on wonder, connection, the fragility of life, love, and gratitude all present among our participants.

This qualitative research we undertook found that the actual nature of reflections prompted by motherhood can be strikingly different for different women. But a society that better understands the multifaceted nature of matrescence for all women – that is, the range of ways that a woman might be affected by this shift – is better equipped to support all new mothers. With this in mind, section two will ask how well supported our participants felt in their matrescence.

6

2 Motherhood: supported



Support from healthcare

Care in pregnancy

Our participants within the qualitative study sought information and care from various sources during pregnancy, valuing reliable guidance alongside personalised support and companionship. Despite the growing role of technology, many emphasised the importance of human contact during this time of profound change.

Antenatal information and care

Most participants attended antenatal classes, either privately or through the NHS. NHS classes were shorter and sometimes felt overwhelming,²¹³ while one participant noted that private courses offered more in-depth learning and social opportunities.²¹⁴ Yet others criticised private classes for idealising vaginal birth, leaving mothers feeling they had failed if interventions were needed. Private courses were more likely to teach pain-management techniques such as hypnobirthing,²¹⁵ and trends like pregnancy yoga and “babymoon” retreats were seen as adding to women’s coping “tool box”.

More broadly, Rev. Alice Watson, a Christian academic and priest whose research focuses on birth trauma in particular, felt that not enough was said about the physical, spiritual and emotional impact of matrescence, and that it should be discussed more openly in antenatal care:

I don't think the space is there for people to be able to properly consider their mental and emotional and spiritual health, and certainly, when I was going through a traumatic birth experience first time around, I didn't feel as if I had the tools to understand

*what I was going through, and I was quite scared about admitting to anything that I was going through.*²¹⁶

Women pregnant during Covid lockdowns especially noted that they missed informal peer support. As one mum shared:

*When you're in a Zoom forum, there's not the opportunity to have side conversations and ask people, how's your experience of pregnancy going?... You're looking for another mum to say, Yeah, my hips really ache too.*²¹⁷

Some also received distressing pregnancy news via apps or social media, which may have been better delivered in person.²¹⁸ As digital healthcare expands, efficiency must be balanced with empathy. A social worker working with vulnerable mothers said:

*I'm not sure that information is the thing that mothers need the most, right? I think maybe they need connection more than information... if we're only focused on giving information to mothers, I think what we're really communicating is you're on your own. Here's a leaflet. Go and sort it out. Yeah, I think the connection piece means we're in this together.*²¹⁹

In-person care during pregnancy

Whether through continuity of midwife care or support from a doula, mothers consistently valued in-person support, which could positively transform their experience of matrescence when delivered well.

The 2025 Care Quality national review of maternity services found continuity of care was patchy: 25% of mothers saw the same midwife at every antenatal visit, 36% most of the time, 24% some of the time,

and 15% never.²²⁰ This aligns with participants' experiences in this study. Those with a consistent midwife described positive outcomes,²²¹ including one case where continuity enabled early detection of severe iron deficiency that might otherwise have been missed.²²² Most

participants who saw multiple midwives expressed that they would have preferred to see the same midwife throughout pregnancy.

A small number of women employed doulas for informational, practical, emotional and even spiritual support across pregnancy, labour, and postpartum. A doula described their role as “mothering the mother,”²²³ reviving a form of community support once provided by female relatives but now often absent. While the support provided by doulas was needed and valued, it was highlighted that such a role was only necessary because of gaps in the healthcare system and lack of having “other people in the community who just held the birthing process”.²²⁴ As one mum-to-be shared: “I don’t think doulas would be necessary if, if we felt like the healthcare system was providing that support.”²²⁵ However, for one of our participants, the spiritual practices doulas lean into was important:

*I had a doula and a Christian doula, and so that was a really interesting kind of experience for me, because first, I didn't know doulas existed, and I didn't know that something that you picture as very medical can be spiritual experience.*²²⁶

“I’m not sure that information is the thing that mothers need the most, right? I think maybe they need connection more than information.”



Care around childbirth

Some women described their birth experience as traumatic, highlighting a lack of care and support as a key element of this trauma. Dr. Noelia Molina who has spoken to women after birth trauma said some spoke of “being handled like a piece of meat”.²²⁷ One mother explained:

*I had that traumatic birth experience with my first birth. I felt like it could have been better, especially since it was in the hospital... I didn't feel taken care of... so the midwives at the ward who looked after us, a lot of them weren't very nice... she even ended up scolding me, and, like, being quite mean because I was, like, doing it [breastfeeding] wrong.*²²⁸

Another mother felt disempowered by a lack of accompaniment as she prepared for birth:

*My last midwife appointment, she asked me, 'Do you want an epidural? You need to decide if you want an epidural.' And no one has explained to me yet what that involves, why you would have one.*²²⁹

In the hours and days after childbirth, too, interviewees described feeling alone and overwhelmed, with limited guidance from busy hospital staff. One mum shared:

It was the end of visiting hours, because it was nighttime, and I had just been through this crazy 40 hours, and then I was on my own with this little baby in a plastic crate.²³⁰

The Care Quality Commission's review of NHS maternity services (2025) reported that 72% said their partner or someone else close

“I had that traumatic birth experience with my first birth. I felt like it could have been better, especially since it was in the hospital... I didn't feel taken care of.”

to them was able to stay with them as much as they wanted after the birth.²³¹ Several of our participants who had to cope alone overnight after long labours called for more flexible rules and better accommodation for the fathers/partners in hospitals, even simple measures such as a comfortable chair or an

extra bed.²³² The clear picture of the research was that accompaniment is not prioritised in the care of new mothers, with the result that many feel disorientated – or are left literally alone – at their most vulnerable and unsettled moments.

Care in the 'fourth trimester' and beyond

In the 1950s, mothers in the UK would remain in hospital for between eight and 14 days following childbirth, around 6 days in the late 1970s and 80s, and be allowed time to rest and recover before returning home to domestic duties.²³³ Today, they typically leave hospital hours or at most days after giving birth, and many of those we interviewed described this period as a time of overwhelming exhaustion, sleep deprivation and anxiety. As one mother put it: “They release you into the world straight away while being in pain.”²³⁴

While the Care Quality Commission's NHS maternity review (2025) reported that 83% of women were told who to contact about postnatal mental health concerns,²³⁵ our participants' experiences were more varied. Most had some contact with health visitors and GPs postpartum. One mother described “amazing” support when her baby became unwell. Others, however, experienced postnatal visits as rushed and perfunctory. More commonly, visits were seen as rushed “tick-box” exercises focused on the baby, with mothers' wellbeing overlooked. As Rev. Alice Watson noted, “If your baby is healthy... everything else is kind of like, it will be okay, and you'll get over it.”²³⁶

The routine postnatal “six-week check,” offered to all mothers, was similarly described as a missed opportunity. Rather than creating space to explore women's recovery, mental health, or embodied experiences after birth, women could feel it signalled that recovery should now be complete and normal activities resumed:

“You feel that if you're asking for help, you're failing, which is absolutely not true.”

It's like, what contraception are you going to use? No matter about, how do you feel about this? The fact that, even if you had a quote, unquote 'normal' birth, your entire body has changed, those sorts of things.²³⁷

You feel that if you're asking for help, you're failing, which is absolutely not true. But because you feel like that, this society pressure, you don't necessarily ask for help, then you don't get the help, and it all gets a lot worse.²³⁸

Infant feeding was a common concern. In particular, although mothers recognised the benefits of breastfeeding, many found it harder than expected and reported inadequate hospital support, echoing recent research highlighting a lack of good education for midwives in this area, combined with understaffing.²³⁹ Inadequate support from the outset resulted in anxious new mothers struggling to feed their babies, and again accompaniment was a strong theme in our interviews:

*There should be a lactation consultant, specifically, who does rounds like other people who check your child's hearing or something. There should be someone who comes around every day, once a day, just to help you through it. Because unless you have a helpful midwife who will respond to your calls and stay there with you and give you helpful advice, then you're just stressed.*²⁴⁰

Some sought help from private or community services, but provision was inconsistent and not always accessible, highlighting the need for more reliable infant feeding support.²⁴¹

Studies suggest that as many as 10-15% of mothers are affected by postnatal depression,²⁴² and several interviewees expressed feeling depressed, anxious and motherhood affecting their mental health. Mothers who had sought help were generally positive about their treatment in primary care and the speed of referral to specialist mental health teams.²⁴³ Some had not reached out, because the demands of caring for the baby took priority.²⁴⁴ Others concealed symptoms of depression because of social pressure to be well with new motherhood. They wanted perinatal illness to be spoken about more widely, to destigmatise and acknowledge the whole range of emotions that comes with motherhood.²⁴⁵ That admitting feelings of overwhelm is associated with shame and an inability to cope is a

striking indicator of how little focus there has been on the ordinary but all-encompassing inner shifts that come with matrescence.

Care that understands how a mother's identity is shifting – and indeed, that is clear-sighted about that distinct identity, in recognition of her as a patient in her own right – would better support new mums. As one mum told us:

*The outcome for babies and that relationship really does rest a lot still on a mum feeling valued and valuable and having worth now that she's keeping the baby alive... but her role is more than that. She's still a person who needs medical care for who she is, and I think that maybe that messaging could be stronger.*²⁴⁶

Faith-based support

For a notable number of our participants, the in-person support that mothers repeatedly told us was so important had come – often unexpectedly – through church communities, with numerous mothers highlighting local social networks provided or facilitated by churches and other faith groups. A Christian mum shared:

*I think definitely your community is your 'village'. We always hear like, where's my 'village'? And I get it. Lots of people don't live close to each other, parents and grandparents and things like that... but I feel we have to make our own... something that can bond community, obviously church can do that.*²⁴⁷

This support was not, however, limited to religious mums. One non-religious mum who attended a toddler group in the local church shared:

It's just toys, play mats for the babies, a bigger area for like toddlers... it's just a nice place to meet people from the village... they have toast and croissants and tea and coffee and, yes, open to everyone... In fact, the few times I've been, they don't even mention religion... sometimes they would have like a Bible reading at the start from the kids' Bible... the vicar has popped in a few times. But again, he doesn't talk to you about religion. He genuinely asks, 'How you doing?' 'How's your little one'.²⁴⁸

Several mums said church-run parent and child groups were often the only free or low-cost options locally. A Christian mum noted:

The church-run groups are the only ones that are free... church ones are the only ones that give you tea, which is like, the smallest thing and the biggest thing in the world.²⁴⁹

“The church-run groups are the only ones that are free... church ones are the only ones that give you tea, which is like, the smallest thing and the biggest thing in the world.”

Whether it is through small gestures of hospitality, or offering a sense of care and connection, faith-based community groups appear distinct. A non-religious mum spoke of attending church-based groups: “I’ve gone to loads of baby classes, but that is obviously me paying and going to them... [they] wouldn’t know

to come to you to support you.”²⁵⁰ Baby and toddler groups have been run by churches for many decades, but perhaps their value as a source of peer support and companionship for mums at an often lonely time needs reinstating.

Mothers who were not part of a faith community expressed admiration for the strong sense of belonging and support that churches provide – they felt a wider gap in modern society existed for meaningful, regular community.²⁵¹ One non-religious mum shared:

I’ve often thought maybe like going to church might help. My mum used to go to church and maybe like praying whatever and having that sense of community that way... But I’ve often thought about that, because I think if you’re a member of a church, maybe you have this community and the youth groups, essentially for children. So, I’ve often thought about that. I’ve just never done it.²⁵²

For a few mums who were already part of existing church communities, they desired more support from their faith community. Some Christian mums spoke of being the only ones in their church or workplace to have a newborn, so sought to start a baby group themselves in their church.²⁵³ Another mum spoke of struggling with the other mums in her church saying:

“I’ve often thought maybe like going to church might help.”

I guess the mums in our church can be a bit cliquey, because lots of them have grown up in the church, right? And like all know each other, you can feel a bit of an outsider, but then I think my expectations are too high sometimes.²⁵⁴

Perhaps in this regard, churches still have a way to go to offer deep support for new mothers and make church itself accessible to mums.

Practical support

A large proportion of mothers who identified belonging to a faith community spoke of practical support they had received. A Christian mum shared that members of her church community cooked her meals in the weeks after giving birth.²⁵⁵ Another Christian mum shared a similar story:

*It's a thing our church does, the small groups, your small group leader or someone else... There's a website that you can click on and sign up... choose whether you want it every night or every second night for about four or five weeks. People bring meals, just a very practical thing a church provides.*²⁵⁶

A Muslim mum spoke of a supportive environment in her mosque; others offered

to look after her children, they provided meals when she was sick, and parent and child groups.²⁵⁷ A Christian mother spoke of her church giving baby clothes to asylum seekers who were a part of the church community.²⁵⁸ A Muslim mum spoke of organising an event in her mosque with a breastfeeding midwife and inviting local Muslim mums to it – 15 attended including some who were newly postpartum.²⁵⁹

Resources such as the information guide from Parenting for Faith outlines ways churches can be more of a practical support for parents.²⁶⁰

Intergenerational support

One of our academic participants described one distinctive benefit of church support as its intergenerational community, providing “practical assistantship”.²⁶¹ Unlike age-specific parenting groups, the church brings together people of different ages and life stages, allowing parents to receive advice, practical help, and emotional support from those with more experience. A Christian mum spoke of the intergenerational community in her church:

*People have seen it all before or been through it, and also just maybe people that have time in different ways. Whereas, I know, like mums' groups, we are all tired, maybe at that initial point of just having a baby or different things. Whereas, yeah, that intergenerational kind of family and the whole taking a village to raise a child kind of thing, I've really seen that work.*²⁶²

“People bring meals, just a very practical thing a church provides.”

Older members of the church community often act as surrogate grandparents, offering care, reassurance, and hands-on help, especially in the early days of parenting. This intergenerational “village” fosters shared responsibility for children and makes age differences irrelevant, creating a strong sense of family and mutual care. As one Christian mum with older children said, “our church has a lot of older people that are like attached grandparents to our family in some way, they’re really always looking out for the kids”.²⁶³

Spiritual support

The reflections from religiously-active mums above demonstrate the profound impact becoming a mother can have on personal and community spirituality. What is also clear is that women are largely under-resourced and under-supported in navigating these changes.

While some religious traditions such as Sikhism with strong motherhood rituals seem to fare better, within Christianity there are notable gaps in support. This is not about individual communities, but rather the mainstream recognition of spiritual pastoral needs in general. Both the mothers and professional experts we spoke to were

clear there is a notable gap in the spiritual provision for women, whether in communities or structures such as the NHS and midwifery services. Chaplaincy has potential to be key here, but our experts reflected its scope is currently limited to times of tragedy such as loss of a child.

Both the mothers and professional experts we spoke to were clear there is a notable gap in the spiritual provision for women.

In this work we met a number of women actively working to meet this need, from Christian hypnobirthing apps to mother-friendly retreats, to religiously-rooted doula practice to creating online communities. These solutions will work differently in different contexts and all need scaling, supported by open conversations. Underlying many of our interviews, however, is a multitude of spiritual work that is largely invisible and unacknowledged. Perhaps for those who support mothers in their spiritual lives, there is one simple action we can all take: see and ask, as described powerfully by Rev. Alice Watson:

*I think in that sense, it's a kind of not to be forgotten as their own people, and to say, what are your spiritual needs at the moment? How can we meet those?... So [let's] not let people be forgotten... it's paying attention, like the kind of pastoral care, to what have actually happened and what of it are you still struggling with. And it's just a realness – what is this, beyond the kind of gloss of a nice new baby, what's actually happening?*²⁶⁴

Ritual

Across human cultures, ritual has long played a central role in marking the transition to motherhood, locating motherhood not simply as a biological outcome, but as a profound change in identity that requires witnessing, support, and symbolic framing.

Perhaps for those who support mothers in their spiritual lives, there is one simple action we can all take: see and ask.

In China and across East Asia, *zuo yue zi* (“sitting the month” or Chinese lying-in) traditionally marks the first 30–40 days after birth as a protected liminal period. New mothers are relieved of ordinary responsibilities, cared for by female relatives, given specific foods, and encouraged to rest, heal, and bond with their child. In the Igbo culture of Nigeria, *omugwo* refers to the three months following birth when a new mother’s own mother looks after her and her newborn. In the Church of England, the service known as the “churching of women”, performed weeks after childbirth, formally welcomed a woman back into the religious and social community, acknowledging both the danger of birth and her survival of it. Associated with purification, it also operated as a rite of reintegration: a public moment in which a woman’s experience of birth was named, witnessed, and given spiritual meaning.

Yet “churching of women” was discontinued in the later twentieth century, and in the contemporary UK, traditional or shared cultural matrescence rituals are largely absent outside of particular ethnic or religious communities. Very few women in our sample had participated in any mother-focused rituals, with only a small minority participating in even newer secular expressions such as baby showers. The absence of ritual was also sadly notable for our participants who had experienced pregnancy loss.

When mothers did participate in ritual, they did so with practices focused on the child. These included singular events like baptisms and christenings in the Christian faith, and multiple significant events over a baby’s first year as observed by some of our Hindu participants. When we asked about rituals, Christening and baptism were the rituals that most immediately came to mind for many participants, whether they had chosen to participate or not – though infant baptisms

themselves have been in decline for many decades in both the Church of England and Catholic church, indicative of the wider shift from cultural Christian practice to ‘no religion’ as default in the population.

For those not in an active Christian community, decisions to baptise or christen a child were shaped by a range of motivations. Often, this decision was rooted in connection, whether to tradition, family, or place. For several women, baptism was simply what their family had always done: “I just know with my family, you know, they had always done it. And I spoke to them and I thought it was important.”²⁶⁵ For others, the occasion was described in more relational and sentimental terms. One mother reflected that it was:

“These baptisms are, you know, actually become more and more emotional. I think it’s a really, really nice tradition.”

*a nice family occasion... It was kind of a sentimental reason as well. Like my grandma made my Christening gown. So it was nice for [my daughter] to wear it as well. So there was that, my mum really wanted it as well.*²⁶⁶

Here, the ceremony connects with ideas of belonging – binding together child, parents, grandparents and memory. Similarly, baptism for one mum was a way of remembering family – an honouring of their values through remembrance:

I was probably a bit blasé about this ... but actually I see what this celebration means to his family and to my husband as well, particularly given that a lot of the sort of relatives in Greece, you know, are no longer with us, and these baptisms are, you know,

*actually become more and more emotional. I think it's a really, really nice tradition.*²⁶⁷

Less frequently, mothers spoke of baptism as a symbolic way of situating their child within the wider church – and, by extension, the local community – even if regular attendance was not anticipated.

While in the culturally Christian atmosphere of Britain, ritual has traditionally been associated with singular significant events, it seems for our non-religiously affiliated mothers, the meaning of 'ritual' is more closely associated with developing smaller, more frequent patterns of behaviour. The everyday rituals developed by our mums were often themed around grounding and marking the passage of time, whether diary writing, letter writing or reviewing photos. Throughout these reflections, mums often valued these practices as a way of tracking change and “all these mini momentous occasions as they grow up” that can otherwise “so quickly become hazy memories”.²⁶⁸

When prompted, many of the mothers we spoke to reflected positively about the idea of a practice or experience to mark the passage into motherhood. This was particularly true among those with some degree of religious familiarity, who were conscious that other traditions often provide clearer rites of passage. One participant described with some emotion, what communal recognition might look like:

I mean, how amazing to take a group of older women or older people with you to church that stand beside you... Imagine saying you've just done this amazing thing, and we're going to stand with you and help you raise that baby, or adopt that baby, or whatever it

*is that you're doing with that child of whatever age. That would be amazing. What a gift it would be if we did that.*²⁶⁹

These reflections echo themes identified by the academic experts Dr. Dawn Llewellyn and Rev. Alice Watson, who have noted that contemporary motherhood is often under-ritualised despite the magnitude of its physical, psychological and social demands from pregnancy to birth to early parenthood.

At the same time, there was caution. Several mothers were wary of creating yet another expectation for women already stretched to capacity. One reflected candidly:

*I think particularly with my first... I found motherhood so overwhelming that lots of things that maybe I would have liked to do when I look back... just never felt like there was time... sitting on the sofa holding a baby all day was all I felt capable of. But, yes, it does feel like that maybe should be more of a thing, kind of more of an announcement of, you know, babies into the world sometimes, celebrate it.*²⁷⁰

Her account highlights a central tension: the desire for recognition alongside profound exhaustion and overwhelm. Any ritual that adds pressure, performance, or cost risks compounding the very burden it seeks to address. Perhaps this tension is reflected in our quantitative data on this theme: around 1 in 10 mothers (9%)²⁷¹ said, thinking back to when they first became a mother, that they would be “very” interested in participating in a formal ritual or ceremony (similar to baptism or marriage) to mark a women's transition to becoming a mother – and a further 2 in 10 (20%) would be “fairly” interested – but 64% said they would not be interested (23% “not very” and 41% “not at all” interested) in participating in this way.

This may well suggest that the creation – or recovery – of motherhood rituals presents therefore both opportunity and risk. Done well, such practices could materially strengthen care for a significant cohort of women at a moment of vulnerability and change. Done poorly, they could become commodified and burdensome experiences, reinforcing individual responsibility and pressure. For rituals to be meaningful in this context, they must be rooted in community, both symbolically but also practically. They would need to be able to acknowledge the full spectrum of maternal experience: physical and psychological trauma, joy, celebration and thanksgiving, loss and grief. And in a cultural landscape where the experiences of motherhood are so contested, any new expression must be fundamentally collaborative and expressive, where mothers can fully and authentically inhabit their new identity, rather than feel the need to perform it. Those who interpret and accompany the transition to motherhood – writers, thinkers, podcasters, midwives, doulas, chaplains, and faith leaders and community leaders – will play a critical role in legitimising and shaping any future development.

The emphasis here is not on spectacle, but solidarity: a public acknowledgement of transformation, accompanied by a visible commitment of ongoing support.

Workplace support

Our qualitative participants described mixed experiences of support for new mothers in the workplace.

Many of them experienced unsupportive workplace environments. One mum shared, “Everyone you know talks about employer



flexibility... they gave me 24 hours' notice and said, either you come back next week full-time or you quit."²⁷² Similarly, another participant's employer declined her request for a staggered return to work, and subsequently made her redundant.²⁷³ Meanwhile, one mum shared her experience of telling her employer she was pregnant again:

*Six weeks [after returning], I told him I was pregnant with [my second child], and my boss told me, you basically came back for a cup of coffee. That's what his words were.*²⁷⁴

In contrast, other mums spoke of positive conversations. One described supportive bosses when extreme fatigue affected her work during pregnancy²⁷⁵ and another noted her pregnancy was supported because she worked at a Catholic school: the head told her, "we are in the business of children, that includes your children and you whilst you're pregnant."²⁷⁶ For most women, workplace support depended on their boss. Gender mattered little, but bosses with young children were often more supportive.²⁷⁷ As one mother said, "in all of those jobs, I've been supported really well by good line managers, and all of whom are parents, probably not surprisingly."²⁷⁸ However, another mum noted that although her manager was empathetic as a mother herself, business demands still created tension.²⁷⁹

Various participants mentioned flexibility at work.²⁸⁰ Post-Covid work culture has provided many mums with greater flexibility in sectors where you can work from home, but for some it came with an effect of feeling you need to juggle everything and meaning you are never "off".²⁸¹

A society-wide conversation is needed on how workplaces can better support mothers, including through flexible working arrangements and more supportive and accommodating

environments. But underlying these conversations on motherhood and workplace practices is a broader challenge to the notion of an "ideal worker" as someone with no boundaries, and no competing demands on their time. As one mother explained, a "good worker" is often assumed to be someone who does not leave early, take time off for a sick child or aging parents, or have responsibilities outside of work – an expectation that becomes unrealistic once a person has a family.²⁸² As previous Theos work has explored, in an age where AI and technology can operate 24/7 without competing demands, it is crucial that efficiency does not come at the expense of care for the human person.²⁸³

Government support

Many concerns arose for our participants when thinking about broader government support for new mothers. A focus group participant felt that the government didn't realise that mothers caring for their children (rather than returning to paid employment) is beneficial for a child in their early years.²⁸⁴ The policy focus is on encouraging paid economic participation rather than enabling family choice. A professional specialising in parenting similarly noted that government and society are not set up to give substantial enough benefits to mums to remain at home if they wish to.²⁸⁵ As one mum put it: "being pregnant, giving birth, protecting this, this tiny

"I mean, so our nursery fees are more than our mortgage, even with... the government's 20% tax free childcare."

human then it's the hardest job. So the state should pay mothers."²⁸⁶

Various participants mentioned that, in their view, the current statutory paternity leave was not sufficient.²⁸⁷ Moreover, those that enjoyed longer paternity leave, shared parental leave policies or enhanced pay for fathers noticed the difference not only financially but in a more positive experience of fatherhood allowing for closer bonds with their child, one describing it as a "revelation".²⁸⁸

Regarding childcare provision in the UK, most women raised how "extremely expensive" it was.²⁸⁹

*I mean, so our nursery fees are more than our mortgage, even with... the government's 20% tax free childcare. We utilise that, and it's still more than our mortgage.*²⁹⁰

Although views varied – one felt paying £1800 a month to work three days was good value²⁹¹ – many said high costs limited their choices, sometimes forcing them out of paid work, especially with more than one child: "if you have more than one child, it eats all of your salary...I didn't have much choice apart from to stay home."²⁹² Despite differing views on childcare's value, there was broad agreement that provision is shaped more by finances than personal choice, with some expressing frustration that policy prioritises returning women to work over supporting families' preferences:

*I really felt quite upset about how families have been almost forced apart in order to keep women at work... I'm a bit mad that childcare entitlement has increased so much so that if you want to financially survive, you have to go back to work and put your kids in care.*²⁹³

Along with this, several criticised the expansion of 30-hours free childcare that have been recently introduced, arguing they would

“I’m a bit mad that childcare entitlement has increased so much so that if you want to financially survive, you have to go back to work and put your kids in care.”

have preferred direct financial support, longer maternity leave, or incentives for family-based care such as grandparents.²⁹⁴

Again, others raised their perception that these policies implied that nursery care was inherently best for children, rather than respecting parental choice, particularly during the early years when many mothers

wished to spend more time at home.²⁹⁵ In contrast, some mothers – especially single parents or those with limited financial support – argued for more free childcare hours to make employment viable.²⁹⁶ One suggested solution was for the government to provide free state-based nurseries, akin to the state education sector.²⁹⁷

Together, all these perspectives highlight both the shared pressures mothers face and deeply divided views on how childcare should be structured and supported. But both counts reveal an underlying uncomfortable reality: that childcare provision is largely dictated by financial considerations.

Inefficient tax policies for family households were also brought up by a few mums. One mum shared:

*How we value motherhood in terms of, you know, tax-wise, it's very inefficient for one person to earn low and one person to earn like a salary, because you're not really seen as a household.*²⁹⁸

Another mum shared that due to her husband's salary they didn't get any childcare benefit, despite not being in employment when she was pregnant and only with temporary work now.²⁹⁹

Conclusion

Matrescence is more than a medical event; it is a transformative life stage requiring consistent, compassionate, in-person support. And while developments in maternal care have thankfully made birth in the UK safer than ever, moving beyond a focus on safety towards relational, practical care would also help women process change and build confidence – particularly those without personal support nearby.

While digital platforms can connect, they cannot replace face-to-face relationships. Strong local networks – within pram-pushing proximity – remain vital. For many women, churches and faith communities can function as intergenerational “villages”, offering tangible help such as meal rotas, clothing swaps and parent and child groups, modelling the extended community many mothers seek in an increasingly dispersed world.

Becoming a mother often involves profound yet largely unseen spiritual work, as women navigate shifts in identity, meaning, and connection with limited recognition or support. While rituals have historically helped hold and mark this transition, their relative absence today leaves many mothers quietly seeking or creating their own ways

to make sense of the experience, revealing a deep but often unmet need for recognition, community, and care.

Broader societal backing is also critical. Workplace practices and government policies signal how motherhood is valued. Meaningful change requires genuine flexibility, stronger statutory protections, enhanced maternity pay, expanded parental leave, and fairer family tax and childcare policies that reflect the real costs of raising children. A society that truly values motherhood creates conditions in which families can thrive, not merely cope.

6

Conclusion and Recommendations



“The Most Important Person on earth is a mother. She cannot claim the honour of having built Notre Dame Cathedral. She need not. She has built something more magnificent than any cathedral – a dwelling for an immortal soul, the tiny perfection of her baby’s body... The angels have not been blessed with such a grace.

They cannot share in God’s creative miracle to bring new saints to Heaven. Only a human mother can.”

*Venerable Jozsef Cardinal Mindszenty
(Former Hungarian Roman Catholic Cardinal)*

New motherhood is a tangle of contradictions: exhausting and exhilarating, mundane and miraculous. It is, at once, painful and joyful, ordinary and extraordinary – one of the most transformative experiences a woman can undergo. The days may feel like an endless cycle of feeds, nappies, and fractured sleep – a constant juggle of needs that leaves little space to breathe. Yet woven through this often overwhelming struggle is something sacred: motherhood becomes a profound reorientation of the self towards care, vulnerability, interdependence, and a deeper capacity for love – alongside the quiet wonder of new life unfolding. As Ronald Rolheiser observes, “Being a mother... stretches the heart... Parenting reshapes the core of your being to help you to love more like God loves.”³⁰⁰

This report has sought to listen to mothers’ experiences of matrescence from the inside out, attending to how this transition is felt across the physical, social, political, and spiritual dimensions of their lives. In doing so, the research has also reflected on the forms of support available to mothers, considering where this support may fall short.

In concluding, we suggest that simple changes at key meeting points would make a meaningful difference to women’s experiences as they navigate this vital transition. We therefore recommend that healthcare professionals (e.g. NHS leaders, midwives, health visitors, GPs):

- **Embed spiritually-informed care:** Healthcare professionals, as well as chaplains in healthcare settings, should be trained to recognise and discuss the emotional and spiritual dimensions of ordinary matrescence, accompanying women to articulate their internal struggles and shifts without shame or fear of being seen not to “cope”. Currently, inner shifts are largely approached through a lens of screening for perinatal mental illness; this is a vital concern, but new mothers can sometimes feel nervous of sharing their inner lives too deeply as a result. Relatedly, alongside all the informative literature that new mothers are already given at key touchpoints (i.e. in midwife appointments, when they first leave hospital, and during health visits), a faith-literate pamphlet which is focused on building accompaniment, by validating and signposting support for, the identity, spiritual, and social shifts they may be experiencing as part of ordinary matrescence – including to local community groups and faith communities that run services or events for new mothers – could be invaluable. This could be developed through neighbourhood and community health initiatives including social prescribing.
- **Prioritise accompaniment:** Consider how care for new mothers during the immediate hospital stay can better facilitate continued accompaniment, including by enabling partners to stay overnight where this is not already possible. Chaplaincy could also have an

expanded role with new mothers in hospital settings, supported both by healthcare providers and supporting faith communities.

- **Enhance the 6-week check:** Our participants raised how the 6-week check is largely focused on the baby and has a tick-box feel when it comes to maternal wellbeing. A more holistic postnatal appointment should give adequate time to the mother's physical, emotional, and spiritual wellbeing – not only the baby – and move beyond tick-box screening.

On leaving the medical system, for many, churches remain among the few places where “village” support is still found within local communities, even if they do not always realise their full potential as sources of spiritual accompaniment. For churches and other faith groups, then, we additionally recommend:

- **Restoring rituals:** Consider offering formal, co-created rituals focused on the new mother, to bring women together in recognition of this life change.
- **Consolidating “village” support:** Consider how in-person support that faith communities already offer in the community can be better signposted, advertised, and expanded, to generate new “villages” for new mothers – including ensuring that existing baby and toddler groups are listed in well-known “mum apps” like Happity and Pebble.
- **Widen spiritual support:** Expand spiritual resources and support in community spaces beyond parent and child groups, through chaplaincy support, spiritual/theological resources, retreats or other prayer outreach. Create spaces that normalise conversations that touch on the deep moments of motherhood.

- **Faith reflections:** Within the practicing Christian community, churches can support new mothers by asking open questions about possible spiritual changes and challenges women may be experiencing, and pay particular attention to the impact on the spiritual practices of prayer and Bible reading. On the latter, making the insights of feminist theologians who explore motherhood and the experiences of women in the Bible more available may be valuable. Churches can also model truly parent-friendly communities, creating spaces where parents are not just welcome but pro-actively included. There are no one-size-fits-all solutions, but if churches are open about both the value of building parent-inclusive spaces – and sharing the learning of how to get there – the impact may extend far into wider society.

At the same time, supporting new motherhood is not the responsibility only of healthcare professionals or formal faith and community groups. Rather, it is society-wide and ongoing. Ultimately, then, our findings point therefore to a broader challenge: that society as a whole must do more to recognise and support the profound personal and relational changes that accompany the transition to motherhood. This recognition is needed in workplaces, communities, the media, personal relationships, and families. It is hoped that this study can make its own small contribution to this significant work ahead.

6

Appendix

Technical Note: Quantitative research conducted by Ipsos on behalf of Theos and Bible Society

Using Ipsos' online omnibus service (i:omnibus), 4,458 women in Great Britain aged 18-75 were surveyed. The sample obtained is representative of the population with quotas on age, region and working status. The data has been weighted to the known offline population proportions for age within region, social grade working status, education, ethnicity and religion.

Of the total surveyed, n=3606 consented to participating in the survey and to the collection of information about both religion and health. After weighting to the known offline population proportions for age within region, social grade working status, education, ethnicity and religion, the sample was made up of 4,071 women – 2,386 of whom identified as mothers.

The following numbers of participants consented to do the survey and were subsequently asked questions, n=422 18-24s, n=623 25-34s, n=739 35-44s, n=615 45-54s, n=1207 and 55-75s. Of those that consented, n=1720 said they did not have a religion, n=1533 described themselves as Christian, n=248 described themselves as having another religion and n=2122 described themselves as biological mothers, step-mothers or adoptive mothers.



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1 – Mothers thinking about...

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- 21 Participant interview 33
- 22 Participant interview 22
- 23 Participant interview 2
- 24 Focus Group Participant Rushden
- 25 Focus Group Participant Twickenham
- 26 Participant interview 33
- 27 Participant interview 16
- 28 $n=2,112$ biological mothers, step-mothers or adoptive mothers aged 18-75 in Great Britain were asked "Since becoming a mother, are you more likely, less likely or equally as likely to feel the following?" and presented with 10 areas to rate, including "Authentic or true to yourself". The proportions selecting each rating were: 14% "A lot more likely", 22% "A little more likely", 42% "Equally likely", 13% "A little less likely", and 3% "A lot less likely".
- 29 Participant interview 22
- 30 Focus Group Participant Swansea
- 31 Participant interview 27
- 32 Participant interview 54
- 33 Focus Group Participant Northamptonshire
- 34 Focus Group Participant Northamptonshire
- 35 Focus Group Participant Bushey
- 36 Participant interview 24
- 37 Participant interview 33
- 38 Participant interview 38
- 39 Participant interview 19

- 40 Participant interview 42
- 41 $n=2,112$ biological mothers, step-mothers or adoptive mothers aged 18-75 in Great Britain were asked "Since becoming a mother, are you more likely, less likely or equally as likely to feel the following?" and presented with 10 areas to rate, including "Skilled". The proportions selecting each rating were: 10% "A lot more likely", 22% "A little more likely", 39% "Equally likely", 16% "A little less likely", and 7% "A lot less likely".
- 42 Focus Group Participant Manchester
- 43 Participant interview 30
- 44 Participant interview 60
- 45 Participant interview 9
- 46 Participant interview 22
- 47 Participant interview 27
- 48 Peanut, 'The State of Invisibility' invisible-mothers.peanut-app.io/
- 49 Participant interview 2
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- 51 Participant interview 4
- 52 Participant interview 13
- 53 Participant interview 8
- 54 Focus Group Participant Manchester
- 55 Participant interview 56
- 56 Participant interview 25
- 57 Participant interview 31
- 58 Participant interview 41
- 59 Participant interview 45
- 60 Participant interview 27
- 61 Participant interview 37
- 62 Participant interview 66
- 63 Focus Group Participant Cambridge, see also Focus Group participant N. Ireland.
- 64 Focus Group Participant Chippenham

- 65 Focus Group Participant Bushey
- 66 Participant interview 18
- 67 Participant interview 1
- 68 Participant interview 17
- 69 Participant interview 23
- 70 Participant interview 43
- 71 Participant interview 58
- 72 Participant interview 63
- 73 Participant interview 17
- 74 Focus Group Participant Chippenham
- 75 Participant interview 31
- 76 Participant interview 61
- 77 Participant interview 28
- 78 Participant interview 59
- 79 Participant interview 28
- 80 Participant interview 53
- 81 Participant interview 61
- 82 Participant interview 30
- 83 Participant interview 54
- 84 Participant interview 68
- 85 NCT, 'Research shows mum-to-mum support improves mental health and wellbeing', 6 February 2020. www.nct.org.uk/about-us/media/news/research-shows-mum-mum-support-improves-mental-health-and-wellbeing?_gl=1*3nkajd*_up*MQ.*_gs*MQ.&gclid=Cj0KCQjw8eTFBhCXARIsAlkiuOwJV-AgfJeUbVgcOU5_6Z0aoTGaVVX9UfiDpIr_wgm6CYhRemVp5kAaAlO-EALw_wcB
- 86 $n=2,112$ biological mothers, step-mothers or adoptive mothers aged 18–75 in Great Britain were asked “Since becoming a mother, are you more likely, less likely or equally as likely to feel the following?” and presented with 10 areas to rate, including “Lonely”. The proportions selecting each rating were: 12% “A lot more likely”, 24% “A little more likely”, 28% “Equally likely”, 15% “A little less likely”, and 12% “A lot less likely”.
- 87 Participant interview 63
- 88 Participant interviews 62 and 33
- 89 Participant interview 20
- 90 Participant interviews 5 and 9, and focus group participant Bushey
- 91 Participant interview 65
- 92 Participant interviews 53 and 65
- 93 Participant interviews 9 and 19
- 94 Participant interview 5
- 95 Participant interview 9
- 96 Participant interview 9
- 97 Participant interview 18
- 98 Participant interview 16
- 99 Focus Group Participant Bushey
- 100 Participant interview 63
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- 104 Participant interview 18
- 105 Participant interview 6
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- 107 Participant interview 10
- 108 Participant interview 59
- 109 Participant interview 62
- 110 Participant interview 21
- 111 Participant interview 51
- 112 Participant interview 33
- 113 Participant interview 37
- 114 Participant interview 15
- 115 Participant interview 42
- 116 Participant interview 39
- 117 Focus Group Participant Chippenham
- 118 Participant interview 24

- 119 Participant interview 20
- 120 Participant interview 21
- 121 Participant interview 2
- 122 Participant interview 3
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- 127 Participant interview 1
- 128 Participant interview 14
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- 130 Participant interview 70
- 131 Participant interview 13
- 132 Participant interviews 2 and 66
- 133 Participant interview 19
- 134 Participant interview 4
- 135 Participant interview 60
- 136 Participant interview 60, 8 and 9
- 137 Focus Group Participant Bushey
- 138 Focus Group Participant Manchester
- 139 Participant interview 61
- 140 Participant interview 63
- 141 Participant interview 47
- 142 Participant interview 16
- 143 *n*=2,112 biological mothers, step-mothers or adoptive mothers aged 18-75 in Great Britain were asked "Since becoming a mother do you think more or less about the following topics, or has becoming a mother made no difference?" and presented with 8 areas to rate, including "Politics/ current affairs", "Education", "Nature and the environment" and "Local community" – "Politics/ current affairs", – for which the proportions selecting each rating were: 15% "A lot more", 29% "A little more", 43% "It has made no difference", 6% "A little less", and 5% "A lot less".
- "Education", – for which the proportions selecting each rating were: 41% "A lot more", 31% "A little more", 22% "It has made no difference", 2% "A little less", and 2% "A lot less".
- "Nature and the environment", – for which the proportions selecting each rating were: 23% "A lot more", 39% "A little more", 33% "It has made no difference", 3% "A little less", and 1% "A lot less".
- "Local community", – for which the proportions selecting each rating were: 13% "A lot more", 38% "A little more", 41% "It has made no difference", 3% "A little less", and 3% "A lot less".
- 144 Participant interview 63
- 145 Participant interview 47
- 146 Participant interview 70
- 147 Participant interview 27, 28, 41 and 59
- 148 Participant interview 64
- 149 Participant interview 29
- 150 Participant interview 20
- 151 Participant interview 33
- 152 Participant interview 61
- 153 Participant interview 24
- 154 Focus Group Participant N. Ireland
- 155 Participant interview 27
- 156 Participant interview 33
- 157 Participant interviews 35 and 61
- 158 Bible Society spiritually open segmentation focus groups, delivered by KSBR, 2012 [unpublished]
- 159 *n*=2,112 biological mothers, step-mothers or adoptive mothers aged 18-75 in Great Britain were asked "Since becoming a mother do you think more or less about the following topics, or has becoming a mother made no difference?" and presented with 8 areas to rate, including "God or spirituality". The proportions selecting each rating were: 11% "A lot more", 16% "A little more", 59% "It has made no difference", 3% "A little less", and 8% "A lot less". Full results, including proportions selecting each answer presented on scale questions such as these, can be found at XXXX
- 160 Participant interview 28
- 161 Participant interview 31
- 162 Participant interview 51
- 163 Focus Group Participant Bushey

- 164 Focus Group Participant Rushden
- 165 Participant interview 54
- 166 Participant interview 33
- 167 Participant interview 2
- 168 Participant interview 64
- 169 Participant interview 3
- 170 Focus Group Participant Rushden
- 171 Participant interview 30
- 172 Participant interview 35
- 173 Participant interview 63
- 174 Ronald Rolheiser, *The Domestic Monastery: Creating a Spiritual Life at Home* (Brewster, MA: Paraclete Press, 2019).
- 175 Participant interview 33
- 176 Participant interview 28
- 177 Aurelie Athan, & Lisa Miller, 'Spiritual Awakening Through the Motherhood Journey', *Journal of the Association for Research on Mothering* 7(1) (2005). Noelia Molina, Motherhood, spirituality and culture (Routledge/Taylor & Francis Group, 2019).
- 178 Participant interview 28
- 179 Participant interview 12
- 180 Participant interview 55
- 181 Participant interview 1
- 182 Participant interview 38
- 183 Participant interview 45
- 184 Participant interview 5
- 185 Participant interview 67
- 186 Focus Group Participant Twickenham
- 187 Focus Group Participant Twickenham
- 188 Participant interview 30
- 189 Participant interview 41
- 190 Participant interview 14 and 51
- 191 Focus Group Participant Bushey
- 192 Participant interview 23
- 193 Participant interview 51
- 194 Participant interview 57
- 195 Participant interview 30
- 196 Marie Sejrsgaard, Dorte Hvidtjørn, & Christina Prinds, 'The paradox of awareness of death in parenthood transition—A qualitative study' *Death Studies*, 49(6), (2025), pp. 807–815. doi.org/10.1080/07481187.2024.2361744
- 197 *n*=2,112 biological mothers, step-mothers or adoptive mothers aged 18–75 in Great Britain were asked “Since becoming a mother do you think more or less about the following topics, or has becoming a mother made no difference?” and presented with 8 areas to rate, including:
- “Education” – for which the proportions selecting each rating were: 41% “A lot more”, 31% “A little more”, 22% “It has made no difference”, 2% “A little less”, and 2% “A lot less”.
 - “Family” – for which the proportions selecting each rating were: 49% “A lot more”, 27% “A little more”, 21% “It has made no difference”, 2% “A little less”, and 1% “A lot less”.
- 198 Participant interview 46
- 199 Marianne Rozario, *Ashes to Ashes: Beliefs Trends and Practices in Dying, Death and the Afterlife* (Theos, 2023); Madeleine Pennington with Nathan Mladin, *Love, Grief and Hope: Emotional Responses to Death and Dying in the UK* (2023).
- 200 Focus Group Participant Bushey
- 201 Participant interview 51
- 202 Focus Group Participant Bushey
- 203 Focus Group Participant Bushey
- 204 Participant interview 30
- 205 Focus Group Participant Bushey
- 206 Participant interview 9
- 207 Participant interview 55
- 208 Participant interview 59
- 209 Participant interview 58
- 210 Tamarin Norwood, *The song of the whole wide world*, (London: Vintage, 2021). Karen O'Donnell, *The dark womb: Re-conceiving theology through reproductive loss*. (London and Norwich: SCM Press, 2022)
- 211 Participant interview 33
- 212 Focus Group Participant Bushey

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- 213 Participant interview 27 and 64
- 214 Participant interview 4
- 215 Focus Group Participant Manchester
- 216 Participant interview 3
- 217 Participant interview 9
- 218 Participant interview 70
- 219 Participant interview 58
- 220 CQC, *Maternity Survey 2025*. www.cqc.org.uk/publications/surveys/maternity-survey
- 221 Participant interview 18
- 222 Participant interview 30
- 223 Participant interview 53
- 224 Participant interview 5
- 225 Participant interview 1
- 226 Participant interview 5
- 227 Participant interview 56
- 228 Participant interview 55
- 229 Participant interview 1
- 230 Participant interview 4
- 231 CQC, *Maternity Survey 2025*. www.cqc.org.uk/publications/surveys/maternity-survey
- 232 Participant interview 2
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- 234 Participant interview 8
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- 236 Participant interview 3
- 237 Participant interview 3
- 238 Focus Group Participant Bushey
- 239 Poor breastfeeding education for UK healthcare professionals: a huge gap in the provision of early breastfeeding support for new mothers. | AIMS
- 240 Participant interview 46
- 241 Participant interview 27
- 242 Postnatal depression harming up to 85,000 new mums in England, warns RCPsych
- 243 Participant interviews 30 and 34
- 244 Focus Group Participant Bushey
- 245 Participant interview 14
- 246 Participant interview 14
- 247 Participant interview 8
- 248 Participant interview 38
- 249 Participant interview 22
- 250 Participant interview 38
- 251 Participant interview 4
- 252 Participant interview 47
- 253 Participant interview 10
- 254 Participant interview 43
- 255 Participant interview 22
- 256 Participant interview 30
- 257 Focus Group Participant Cambridge
- 258 Participant interview 69
- 259 Participant interview 28
- 260 Parenting for Faith, 'Becoming a baby friendly church', 4 December 2019. www.parentingforfaith.brf.org.uk/post/becoming-a-baby-friendly-church/
- 261 Participant interview 6
- 262 Participant interview 35
- 263 Participant interview 50
- 264 Participant interview 3
- 265 Participant interview 8

266 Participant interview 38

267 Participant interview 42

268 Participant interview 62

269 Participant interview 10

270 Participant interview 62

271 *n*=2,112 biological mothers, step-mothers or adoptive mothers aged 18–75 in Great Britain. Online fieldwork conducted by Ipsos 24th April – 14th May 2026.

272 Focus Group Participant Bushey

273 Participant interview 8

274 Participant interview 47

275 Participant interview 66

276 Participant interview 39

277 Participant interviews 41 and 59

278 Participant interview 51

279 Participant interview 33

280 Participant interview 61, 43 and 18

281 Participant interview 43

282 Participant interview 22

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285 Participant interview 25

286 Participant interview 27

287 Participant interview 60

288 Participant interviews 38 and 51

289 Participant interviews 48 and 51

290 Participant interview 59

291 Participant interview 9

292 Participant interview 45

293 Participant interview 30

294 Participant interview 30 and 34

295 Participant interview 18

296 Focus Group Participant Swansea

297 Participant interview 4

298 Participant interview 63

299 Participant interview 45

Conclusion and Recommendations

300 Dr Wight in Ronald Rolheiser, *The Domestic Monastery: Creating a Spiritual Life at Home* (Brewster, MA: Paraclete Press, 2019).

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Motherhood, Inside Out

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At once intimate and socially significant, this report calls for a broader cultural conversation about motherhood and a deeper recognition of the personal, relational, and spiritual changes that accompany the journey into becoming a mother.

“

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Front cover image: Emily Ikoshi from the short animation *Making a Mother*

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