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First Pregnancy: Its Impact on Sex Role Orientation,

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Ph.D. degree in Psychology

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Date_June 8, 1980

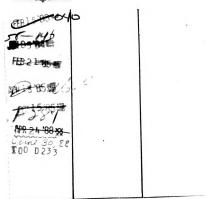
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FIRST PREGNANCY: ITS IMPACT ON SEX ROLE ORIENTATION, CAREER ORIENTATION, AND BODY IMAGE

By

Phyllis Watts

A DISSERTATION

Submitted to Michigan State University in partial fulfillment of the requirements for the degree of

DOCTOR OF PHILOSOPHY

Department of Psychology

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ABSTRACT

FIRST PREGNANCY: ITS IMPACT ON SEX ROLE ORIENTATION, CAREER ORIENTATION, AND BODY IMAGE

By

Phyllis Watts

This study was an attempt to bring a much needed empirical focus to the issue of the psychological consequences of first pregnancy. To do so it explored changes at a variety of different levels that might occur in both the woman and her husband as a result of the events surrounding the birth of the first child. Three areas of possible change were examined: sex role orientation, career orientation and body image.

The first pregnancy marks a time of considerable stress in an individual's life. It is a time when the "weight" of past socilization, especially for women, is likely to be particularly strong. Moreover, because the maternal role is still considered to be a major life role for a woman, it was expected that some change would occur in her sex role orientation as a result of the first pregnancy. Though for a man the stresses experienced might be less than those of his wife, it was nevertheless hypothesized that there would be evidence of some change in sex role orientation for him as well.

In addition to changes in sex role orientation brought about by the first pregnancy, it was expected that significant changes would occur in a woman's attitude toward her career. With the first pregnancy, a woman must face the dilemma of a dual role. Because of the incongruence between the role of mother and that of career woman, it was hypothesized that some change should occur in a woman's career orientation with the advent of maternity.

In addition to the more behavioral changes that might occur as a result of the first pregnancy, this time can also be viewed as a turning point in terms of a woman's self-perception, especially her view of her own body. Since the first pregnancy is a unique event not only psychologically, but somatically as well, it was expected that when compared with the non-pregnant group, women pregnant with their first child would show greater fluctuation in body image, as would their spouses.

The participants for the pregnancy group were 28 married couples in their last trimester of pregnancy with their first child. The control group consisted of 16 couples married at least one year who were neither pregnant nor had any children. Both groups were paid volunteers solicited from the community. Four instruments were administered in this study: (1) the Bem Sex Role Inventory; (2) the "career orientation" scale; (3) the Body Cathexis scale; and (4) a demographic questionnaire. Participants in the pregnancy group were administered the questionnaires during the last trimester of pregnancy and then again when their infant was four months old. Participants in the control group received the questionnaires approximately six months apart.

Contrary to expectation, none of the predicted changes were found for sex role orientation, career orientation or body image. However, there were a surprising number of unpredicted correlational findings. Results were discussed in terms of possible theoretical and methodological problems, with recommendations for further research.

For My Mother

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ACKNOWLEDGMENTS

Occasionally in the educational process a student is fortunate enough to find an individual who offers a model of humanistic and scholarly endeavor; who is tolerant of differing approaches to the acquisition and application of knowledge; who provides unfailing encouragement and prudent guidance; in short, a teacher in the finest sense of the word. It is to my great benefit that I had the opportunity to work with Larry Messé, who is just such a teacher. It seems virtually impossible to adequately express my gratitude.

I have been fortunate in other ways as well. Gary Stollak taught me much about competence, patience and tolerance, both by example and by our work together. I am deeply grateful for the opportunity to have worked with him. In addition, I would like to thank Joel Aronoff and Bill Crano for providing me with solid feedback and criticism, not to mention their willingness to come through in a pinch.

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CHAPTER I

INTRODUCTION

Historically, psychologists have viewed the developmental process as complete around the age of adolescence or perhaps soon after. For Freud (1933), the transition to the genital phase at puberty marked the end of psychosexual development. Piaget (1963) views the final achievement in cognitive development as occurring sometime in the teens, if at all. And, though Erikson (1952) postulated psychosocial development as a lifetime phenomenon, most researchers (Ainsworth & Bell, 1972; Clarke-Stewart, 1973; White & Watts, 1973; Yarrow, Rubenstein & Pederson, 1972) have focused on early child development. In recent years, however, the view that psychological development is complete, for better or worse, with the termination of adolescence has begun to change. Increasingly, theorists are focusing on the developmental tasks adults must cope with in their life cycle and the concomitant intrapsychic characteristics that facilitate or hinder them in the process (Block, 1972; Levinson, 1978; Loevinger, 1966; Loevinger & Wessler, 1970).

The tasks an adult faces are many. They include the selection of and preparation for a career, selection of a mate, and the transition to parenthood, to mention only a few. It is this

last task -- the transition to parenthood -- that was the focus of this study.

One could argue that the transition to parenthood, that is, the first pregnancy, represents the most demanding of all developmental tasks. The decision to keep the child, once made, becomes almost irrevocable, for birth, like death, is a fundamental life transition that cannot be altered. One can speak of an ex-job or even an ex-mate, but not of an ex-child.

Because parenthood represents a major life transition, one might expect to find a wealth of literature in social science devoted to understanding this complex phenomenon. Inexplicably, however, this is not the case; in fact, there appears to be a paucity of research in this area. It is possible that this lack of empirical attention is due to the sex of the researcher, since psychology, historically, has been primarily a male endeavor. Moreover, the birth process in this culture is considered to be primarily a female domain and, therefore, potentially not as "important" as traditional "male" concerns, such as work. In any event, why so little work has been done in the area of sociopsychological consequences of giving birth, is not the scope of this study to explore. Rather, the present study was an attempt, although a limited one, to redress this situation by first exploring the literature that is devoted to this topic and then investigating empirically three areas of psychological and social functioning that were expected to be affected by the transition to parenthood:

sex role orientation in both spouses; career orientation in the woman; and body image, again in both spouses.

The First Pregnancy

Our culture has a curious view of pregnancy. Or, perhaps it would be more correct to say that it has two views of pregnancy and that these are in marked contrast. On the positive side, we tend to idealize the pregnant woman. She is perceived not only as fulfilling her primary role as a woman, that of a mother, but also of carrying the future generation. For her contribution she is pampered by spouse, friends, and relatives alike. She is not only allowed to be, but also expected to be, impulsive and any of her mysterious cravings are indulged with equanimity and amused tolerance. On the other side of the coin we see a very different picture. Historically, pregnant women have been faced with the loss of their jobs as soon as they began to "show." This prospect has been particularly true in those professions where a woman's body has been an integral, if unstated, part of the job requirement; e.g., secretaries, flight attendants, bar maids, waitresses, teachers -- in other words, most of the occupational fields that are predominantly female. Euphemistic phrases such as "she was knocked up" or "she has a bun in the oven" provide further anecdotal evidence for this more negative view of pregnancy. Accordingly, Grimm (1969) suggests that our society values the pregnant women more as an abstraction than a reality.

In analyzing the transition to the parent role, Rossi (1968) notes that most studies centering on the birth of the first child have focused their attention upon just that, the child. Thus, for example, there are numerous studies of the effects on the child of "insufficient" mothering, but this work pays little or no attention to the possible deprivation a mother experiences as a reult of maternity that could be the basis for her poor conduct.

Rossi outlines several ways in which the parent role differs from other primary adult roles, and suggests that the first pregnancy is the major transition in an adult female's life. She argues that when pregnancy was likely to follow shortly after a woman's marriage, the marriage itself was the major transition. But the increasing availability and use of contraception, along with the expectation that both members of the couple will work to acquire household furnishings and other material comforts--e.g., a second car or whatever--has led to a trend toward postponing this transition to the birth of the first child.

Though some changes have occurred, there is still extensive cultural pressure for women to assume the parental role. Because of this pressure, Rossi argues, there is an increase in women's ambivalence about pregnancy, both in terms of its irrevocability and the social pressure to conceive, and this ambivalence takes its toll on the psychological well-being of the pregnant woman. To make a difficult transition even more stressful, training in the skills needed for adequately fulfilling the parental role is minimal indeed. Rossi outlines four contributing factors to this lack of training

experience. First there is a paucity of preparation. Because our educational system is dedicated to the cognitive development of the young, little girls, in effect, are trained for the job market. Thus, women often approach maternity with little or no previous childcare experience beyond that gained through occasional babysitting. Needless to say, men tend to have even less experience. Second, there often is a lack of any realistic training for parenthood during the anticipatory stage of pregnancy. In contrast, during the engagement phase before marriage, the couple typically has the opportunity to make the necessary interpersonal adjustments that serve to facilitate the transition to marriage. By discussing values and life goals, through sexual experimentation, and often just through living together before marriage, the couple can anticipate and/or practice the behaviors that are integral components of a spouse role relationship. In contrast, there are no such "head Preparation that does start" experiences for the first pregnancy. exist predominantly consists of reading, consulting with parents or friends and discussion between the couple. The abrupt nature of the transition, which is the third factor Rossi discusses, makes the transition even more stressful. In contrast to the professional work role, the birth of the first child is not followed by any gradual taking on of responsibility. It is as if the couple shifted from graduate student status to a full professorship within a twenty-four hour period. Since the mother is usually the primary caregiver, it is she who must start out immediately on twenty-four hour duty with the responsibility of a tiny infant who is totally dependent on her

care. Finally, since the central task of parenthood is rearing children to become competent adults, the new parents quickly realize that there are no clear, widely accepted guidelines that can direct them toward even beginning to fulfill that goal.

Rossi's analysis, while important, leads only to the rather general conclusion that the first pregnancy is a time of dramatic change in an individual's life. Moreover, as noted above, so little research has been initiated within this domain that knowledge regarding just what specific changes occur, or how the couple adjusts to these new circumstances is minimal. Some researchers (Grimm, 1969) have contended that pregnancy is universally a time of ambivalence and tension. Others cite the importance of "ego strength" and confidence in ability to parent (e.g., Farber, 1976; Shereshefsky & Yarrow, 1973). One researcher (Hobbs, 1968) found that males adjust to the transition more easily than do females, though he offered no explanation for his finding.

The present study is an attempt to bring a much needed empirical focus to the issue of the psychological consequences of first pregnancy. To do so, it explores changes at a variety of different levels that might occur in both the woman and her husband as a result of events surrounding the birth of their first child. In the following sections three areas of possible change are examined. The first section deals with sex role orientation. As discussed in more detail below, sex role orientation can have an impact on human functioning at a number of levels. It can affect intrapsychic functioning, in terms of self perception; it can affect the more

behavioral level of functioning in terms of division of labor and childcare responsibilities within the home and, at a more sociological level, it can influence the woman's decision whether or not to return to work. The second section focuses on possible changes in a woman's career orientation and attitudes about a woman's role as a result of the first pregnancy. The final section deals with possible changes that might occur primarily at the intrapsychic level of functioning, in terms of the body image of both the woman and her husband.

Sex Role Orientation

Sex role differentiation is universal cross-culturally. Women and men are expected to engage in different behavior, granted different social privileges, and for the most part, negatively sanctioned for engaging in cross-sex behavior. In our own culture, the past decade has brought increasing social changes in our conceptualization of sex appropriate behavior. This change, in turn, has brought an increase in the attention paid within psychology to the concept of sex role orientation.

Historically, masculinity and femininity were viewed as a single bipolar continuum, such that ranking high on one attribute automatically implied a low ranking on the other. Only recently has this assumption been challenged, mainly by persons who accept, in general, the view of human functioning proposed by Bakan (1968). Bakan asserts that two fundamental modalities characterize all living organisms: agency and communion. He defines agency as a sense of

self that is manifested in self-assertion, self-protection and selfexpansion. Conversely, communion implies selflessness, a concern for others and a wish to be connected or "at one" with other organisms. He postulates that agency is associated with what is commonly considered "masculinity" and communion with "femininity." He further proposes that the developmental task of all organisms is to integrate these two modalities.

In a similar, though less speculative vein, Bem and her collaborators (1974; 1975; Bem & Lenny, 1976) argue that individuals who are psychologically androgynous are better able to engage in situationally specific behavior without concern for its specific sex role stereotype. She reasoned that such androgynous individuals have richer behavioral repertoires from which to draw than do their sex typed counterparts, and she developed a sex role inventory designed to measure an individual's sex role orientation (Bem, 1974). She found that a person's scores on masculinity, femininity, and androgyny were highly reliable in terms of temporal stability. Moreover, in a series of validation studies she demonstrated the efficacy of her construct and her measurement procedure.

In one study (Bem, 1975), for example, she found that androgynous people of both sexes vary their behavior cross-situationally so that they are able to engage in both "masculine" and "feminine" behaviors, whereas sex typed individuals do not. In this study only the androgynous people showed "masculine" independence when under pressure to conform as well as "feminine" nurturance when given the opportunity to play with a baby kitten. The sex typed

individuals, on the other hand, did not display high levels of crosssex behavior; masculine males were not especially nurturant toward the kitten and feminine females were not especially independent in the face of pressure to conform.

In another study, Bem and Lenney (1976) found that cross-sex behavior was aversive for sex typed people since they appeared to actively avoid it. In this study, individuals were asked which of a series of paired activities they would prefer to perform for pay while being photographed. They found that the sex typed individuals were more likely than the androgynous or sex reversed participants to resist sex-inappropriate activity, even though such choices cost them money. In addition, when actually engaging in cross-sex behavior, the sex typed participants reported greater psychological discomfort and more negative feelings about themselves. Bem and Lenney (1976) concluded that sex typing restricts an individual's behavior in unnecessary or even dysfunctional ways.

In a more intrapsychic conceptualization of sex role orientation, Block (1973) presented a theoretical analysis of sex role development which she linked to Loevinger's (1966; Loevinger & Wassler, 1970) stages of ego development. In agreement with Baken (1966), the main thrust of her argument is that the fundamental task of all human beings is to balance agency and communion. Block argues that a critical period in sex role development occurs when a child enters what Loevinger labels the conformity stage. This is a time when a child attempts to control impulses by conformity to external rules and is especially concerned about appearances. She argues that

socialization patterns impinge differently upon the sexes; boys are encouraged to control affect, while girls are encouraged to control aggression. The conscientious stage, which follows, is a time when rules are internalized and inner feelings and motives are differentiated. It is at this point when the individual's self definitions of masculinity and femininity become moderated by inner values and conceptions of responsibility. For those individuals who enter the autonomous stage, self concepts become more clearly articulated and attempts are made to integrate conflicting aspects of the self. Block argues that this stage is the period when the individual becomes aware of values and orientations that depart from traditional sex role expectations and where she or he must reconcile these contradictory elements. At the highest integrated stage women's and men's sex role identities include an integration of both masculine and feminine, that is agentic and communal traits and values. This integration yields sex role definitions that are truly androgynous. Essentially, Block is arguing that psychologically androgynous individuals are freer than are persons at lower stages of ego development to incorporate or reject, as suits their own needs or the situation, the sex role behaviors that society prescribes.

Block cites some tentative empirical support for her theorizing. She used Loevinger's sentence completion method (1970) with high school students to assess their maturity of ego functioning. She found that males and females who scored at the most mature levels of functioning endorsed characteristics clearly combining agency (self-centered, effective, restless) with communion (sensitive,

altruistic) while this pattern was not true for students who appeared to be at the lower levels of ego development.

In the work of Bem and Block we see two different approaches to the study of sex role orientation. Bem focuses on the more behavioral manifestations of this concept, and, though never stated, the implication from her work is that sex role orientation is a fairly stable aspect of an individual's functioning. Block's focus is developmental and intrapsychic. Though she hypothesizes developmental changes within the individual regarding sex role orientation, she views these changes as the result of internal psychological forces. Thus neither theorist postulates or makes reference to a change in sex role orientation that might occur as a result of a major life change, for example, the transition to parenthood.

As discussed previously, the first pregnancy marks a time of considerable stress in an individual's life. It is a time when the "weight" of past socialization, especially for women, is likely to be particularly strong. Because the maternal role is still considered a major life role for a woman, there is a high probability that some change will occur in her sex role orientation as a result of the first pregnancy. Though for a man the stresses experienced might be less than those of his wife, he too is experiencing a major life change which might in one way also be manifested in a change in sex role orientation.

It was difficult to predict the direction that this change in sex role would take, since it plausibly could take a number of forms. For example, it could be argued that due to the stress of

the transition, androgynous people would become more sex typed in an attempt to embrace more widely accepted, and therefore more familiar behavior. Conversely, it is possible that more sex typed individuals would become more androgynous in an attempt to prepare for what they perceive to be the more multifacited behaviors required of a new parent.

Since this was an exploratory study, no directional hypothesis was advanced, though it was predicted that the impact of the first pregnancy would elicit some change in sex role orientation. No such change was predicted in a control group of spouses who were not experiencing a first (or any) pregnancy.

Career Orientation

In addition to changes in sex role orientation brought about by the first pregnancy, one might expect significant changes to occur in a woman's attitude toward her career. With the first pregnancy, a woman must face the dilemma of a dual role.

Developmentally, female children are taught academic and vocational skills that presumably prepare them for job responsibilities as adults. Yet, having gone through the educational system, girls are typically encouraged not to use their skills directly, but to develop a new set of skills; housekeeping, child tending, husband tending--skills whose acquisition are not an important goal of public education. Moreover, there are no clear cut norms that facilitate the woman in her task of combining the two roles.

Darley (1976), in her analysis of the dual role system,

argues that socially a woman's performance in one role has implications for her performance in the other. She asserts that the qualities traditionally associated with the role of wife-mother (e.g., nurturance, responsiveness to others) are incompatible with the qualities associated with the role of achiever in the occupational world (e.g., assertiveness, rationality, independence). She argues further that the strains of insecurities in women who have taken on the two roles derive in part from the tendency in others to make inferences about a woman's personality from her behavior. For example, a successful career woman is seen as having an "aggressive" character, rather than as being capable of behaving in an assertive way. Thus, a woman of this type is assumed not to be a "good mother" because the qualities associated with mothering are the opposite of those attributes that people "see" in her job-related activities. This incompatibility results in role strain which, in turn, elicits both self doubt in the woman herself and negative social sanctions by the people who make up her social world. However, Darley also suggests that this problem arises only if the woman chooses to work, rather than being forced to work for financial reasons.

Indirect support for Darley's speculations was provided by Johnson and Johnson (1977), who found that role strain was identified with child-rearing, not marriage. Interviews were conducted on 28 dual career families, with the mean age of children being under six years. The majority of the women interviewed were in highly demanding professions such as university faculty, physicians, etc. Johnson and Johnson found that though husbands helped somewhat with

household and childcare giving tasks, the wife really had the major responsibility for childrearing. All of the women reported major concerns over the conflict between their career and their children. They described their conflict in terms of feeling overwhelmed, guilty, drained, etc. Conversely, their husbands reported no conflict, no strain. This incongruency between spouses can be attributed to the differential expectations of females and males in terms of role requirements.

Along a similar vein, Araji (1977) found a marked incongruence between husbands' and wives' role attitudes and their actual behavior. In this study, 1,154 married couples responded to a questionnaire about their attitudes and behavior regarding certain family roles. She found that while both sexes tended to express equalitarian attitudes toward role sharing, women enacted the majority of duties related to all roles, with the exception of the provider role. No measures of role strain were taken in this research, so no assessment could be made of the woman's attitudes about or reactions to their multiple roles. However, in another study (Nevill & Damico, 1975) family size was found to be significantly related to role conflict in women. More stress was reported by women with one child or more than three, than by women with two or three children. This rather complicated finding suggests there is a curvilinear relationship between a woman's role conflict and the number of children she has, with stress being especially elevated at the transition to parenthood or if the family is particularly large.

In an attempt to understand why women, apparently more so than men, experience role conflict, I shall turn to the theoretical conceptualizations of role conflict that were developed by Sarbin and Allen (1968). Following traditional sociological thinking they describe two kinds of roles, ascribed and achieved, which are differentiated primarily in terms of the degree of choice one exercises in entering them. Ascribed roles, of which the parent role is an example, are attained because of an individual's inherent characteristics or because of a necessary relationship to another person. For example, a woman may choose to have a child, but once the choice is made, she is a parent regardless of how she behaves. On the other hand, achieved roles are usually attained through processes like training, personal achievement or election. For example, an athlete is an achieved role because it is comprised of a set of behaviors that one can express or not express by choice.

Sarbin and Allen hypothesize that the two types of roles differ primarily in terms of the types of valuations assigned to respective role performances. In achieved roles, the valuations for poor or non-performances are at or near the neutral point, while good performance of such roles may be very positively rewarded. But, in an ascribed role (e.g., that of parent) the range is from negative, for poor to non-performance, to neutral for successful performance. Thus, mothers are not generally rewarded for successfully enacting the parent role, but they are severely judged if they fail. In addition, Sarbin and Allen hypothesize that the standards for evaluating ascribed roles are more ambiguous. Thus, it is not as

clear what a good parent is, as it is what a good athlete is. Sarbin and Allen also point out that for the male, the occupational role is most salient, while the mother role is most salient for females. If this is true, as Darley (1976) argues, the possible rewards available to women for good performance of their salient role are less well defined than are those available to men for succeeding at theirs. Thus, when women attempt to combine the ascribed role of mother with the achieved role of job holder, they find themselves in an unresolvable conflict. This conflict is particularly intense because it is difficult to incorporate positive evaluations for good performance on the job when that very performance implies poor performance in their ascribed role as mother.

Thus, it seems that a woman pregnant with her first child would be called upon to re-evaluate her orientation toward work outside of the home. In an exploratory study, Jiminez (1978) collected data from 120 women in the last trimester of pregnancy and then again post-partum. She found that even the women who were most job oriented rated themselves significantly less so after delivery, though this change was not significantly related to their job plans. Hobbs (1968) found that more women than men reported severe amount of difficulty adjusting to the birth of the first child. Though he did not attempt to explain this finding, it is possible that these women experienced greater conflict with re-evaluating the impact of their dual roles, potential or actualized. Wylie (1977) found that education was negatively related to ease of transition to parenthood, suggesting that more educated women--that is, women who were likely

to be more career orientated--were experiencing more conflict with their possible dual role.

Because of the incongruence between the role of mother and that of career woman, I expected that some change should occur in a woman's career orientation with the advent of maternity. Thus, it was predicted, that when compared with the control group, women pregnant with their first child would show significant changes in their orientation toward a career.

Body Image

In addition to the more behavioral changes that might occur as a result of the first pregnancy, this time can also be viewed as a turning point in terms of a woman's self-perception, especially her view of her own body. During this period, a woman must accommodate to the physical aspects of pregnancy, child birth, and lactation. As the pregnancy develops, there is an inevitable buildup of bodily discomforts, periods of fatigue, and a general sense of awkwardness, which should in some way affect a woman's body image and her general sense of physical attractiveness.

Though the research on this issue is sparse, there is some evidence that a woman's body image fluctuates as a result of the first pregnancy. Tolor and Dignazia (1977) found that, when compared with a control group, a group of pregnant women drew more nudes, more distorted figures, and figures that were smaller in size. While not specifically interested in body image, Shereshefsy and Yarrow (1973) found that women with more medical symptoms showed more

problems in adapting to the pregnancy, though a causal relationship cannot be determined from their data.

The concept of body image itself is an elusive one. One component of body image as conceptualized by Secord and Jourard (1953, 1954, 1955) is "body cathexis," which they define as the degree to which an individual feels satisfied or dissatisfied with various parts of the body. In a study that investigated the relationship between body cathexsis and other personality measures (Secord and Jourard, 1954), they found attitude toward the body was significantly related to an individual's attitude toward her/him self. Specifically, dissatisfaction with the body was related to a general lack of self-esteem. Dissatisfaction was also found to be related to high levels of anxiety concerning pain, disease or bodily injury. Moreover, the reported relationship tended to be stronger for women than for men. Secord and Jourard interpreted this finding as a manifestation of the greater importance society places on the female body.

Since the first pregnancy is a unique event not only psychologically, but somatically as well, it is likely that when compared with the non-pregnant group, women pregnant with their first child would show greater fluctuation in body image.

Though there is no evidence to suggest that the husbands of pregnant women would be in any way affected in terms of their own body image because of their wife's pregnancy, there is nevertheless the possibility that they would be. Since the first pregnancy is a time of increased stress it is possible that this would be manifested,

in part, by a change in body image for the husbands as well. Thus, it was predicted that in addition to the change in the body image of the pregnant women, there would also be a change in the body image of their husbands. Again, because this is exploratory research, the exact nature of the change, for either member of the expectant couple, was not predicted.

Summary of Hypotheses

The transition to parenthood marks a unique event in an individual's life. This study was designed to explore changes that might occur in three major areas of an individual's life: sex role orientation, career orientation, and body image.

Hypothesis 1: Sex-Role Orientation

It was predicted that the impact of the first pregnancy would elicit some change in the sex role orientation of both spouses when compared with a non-pregnant control group.

Hypothesis 2: Career Orientation

Because of the incongruence between the role of mother and that of career woman, it was expected that some change would be manifested in a pregnant woman's orientation toward her career, which would not be evident in the control group.

Hypothesis 3: Body Image

Because of the psychological and somatic stresses inherent in the first pregnancy, it was predicted that changes would occur in the

body image of both spouses when the wife is pregnant with their first child. In contrast, these changes over time would not be evident in the control group.

CHAPTER II

METHOD

This chapter presents the methodology and design that were used to test the hypotheses.

Participants

The participants for the pregnancy group were 28 married couples in their last trimester of pregnancy with their first child. They were volunteers solicited from prepared childbirth classes in the greater Lansing community to participate in a larger research project examining the effects of parental perceptual style on the infant's subsequent psychological development.

The control group consisted of 16 couples, married at least one year, who were neither pregnant at the time of this study, nor had any children. They, too, were volunteers solicited through an ad run in a weekly faculty-staff newspaper published on the Michigan State University campus. Table 1 indicates the demographic characteristics of the two groups.

Instruments

Four instruments were administered in this study: (1) the Bem Sex Role Inventory; (2) the "career orientation" scale; (3) the

	Pregnancy	Group Con	trol Group		
Years Married	3.0		5.13		
	Age				
	Pregnancy	Group Con	trol Group		
Females	25.6	:	26.5		
Males	27.4	:	28.1		
	Occupation*				
	Pregnancy	Group Con	trol Group		
Females	4.0		4.1		
Males	4.4		4.8		
	Years in Occupat	ion			
	Pregnancy	Group Con	trol Group		
Females	3.1		4.4		
Males	4.0		4.8		
Level of Education (in years)					
	Pregnancy	Group Con	trol Group		
Females	14.9		15.8		
Males	15.0		16.1		
	Annual Income (in dollars)				
	Pregnancy	Group Con	trol Group		
Females	7842.9	87	50		
Males	13890.4	88	31.3		

Table 1.--Mean Scores for Demographic Variables

* 1 = unemployed; 2 = student pre B.A.; 3 = blue collar; 4 = white collar; 5 = student post B.A.; 6 = professional

Body Cathexis scale; and (4) a demographic questionaire.

Bem Sex Role Inventory

This scale is a sex role inventory that treats masculinity and femininity as two separate dimensions, thereby making it possible for a person to characterize him/herself as masculine, feminine or androgynous by the endorsement of masculine and/or feminine personality characteristics. The scale consists of 60 adjectives, 20 each of masculine, feminine, and neutral items. The individual responds to each item by use of a seven point scale. On the basis of these responses the person receives three scores; a femininity score, a masculinity score, and an androgyny score. This scale has been shown to be both internally consistent (Bem, 1974) and has been used successfully to predict behavior (Bem, 1975; Bem & Lenney, 1976; Bem, Martyna & Watson, 1976). Appendix A presents a copy of this instrument.

"Career Orientation" Scale

This seven item scale was developed specifically for this study and was designed to measure attitudes toward career orientation. Questions deal with career motivation and aspirations as well as attitudes toward the dual role of women. Respondents are required to indicate the extent of their agreement with each item by using a five point Likert type response format. Appendix B presents a copy of this instrument.

Body Cathexis Scale

This scale developed by Secord and Jourard (1953) is designed to measure degree of satisfaction or dissatisfaction with various parts

of the body and specific bodily functions. Individuals respond on a five point scale to indicate the degree of satisfaction/dissatisfaction they experience with each body part. This scale has been found to be internally consistent (Secord and Jourard, 1955) and to have construct validity (Jourard & Secord, 1943; Secord and Jourard, 1954, 1955). Appendix C presents a copy of this instrument.

Demographic Questionnaire

Each participant completed a demographic sheet so that the following data were obtained: age, level of education, current occupation, number of years in occupation, individual (not including spouse's) yearly salary, and number of years married. Appendix D presents a copy of this instrument.

Design

The design of this study for the dependent variables of sex role orientation and body image was a $2 \times 2 \times 2$ factorial with (a) sex of participant, (b) experimental or control group, and (c) pre-post scores (a repeated measure), as the three independent variables.

For career orientation the design was a 2 (group) x 2 (time of measurement) factorial, as only female participants were used for this analysis.

Procedure

Pregnancy Group

Since this study was part of a much larger project, many of the procedures that the couples experienced were not directly relevant to examine the hypotheses, though they will be briefly mentioned here.

Once having agreed to participate, an appointment was arranged for the couple to come to the unviersity and view a video tape, fill out a series of questionnaires and be interviewed. The Bem Sex Role Inventory and the demographic sheet were in this group of questionnaires. The interviewer then gave the couple, each separately, a second packet of questionnaires to be completed individually at home. This packet contained the remainder of the questionnaires for this study. The couple was interviewed a second time, this time at their home, and the questionnaire packets were picked up. At this interview the couples were paid \$60.00 for their participation. In addition, they were given a self-addressed stamped card to return when their child was born.

Two weeks before their infant turned four months old, the couple was recontacted by phone and each spouse was mailed a questionnaire packet to complete individually. An interview was scheduled and the completed questionnaires were picked up at that time. The couple was then paid an additional \$25.00 for their participation.

Control Group

Procedures for the control group were the same as those for the experimental group with the exception that they were not interviewed. After coming in to view the videotape and complete questionnaires, they were given individual packets of questionaires to return by mail. After six months, this procedure was repeated. Each couple in this group received \$25.00 for their participation.

CHAPTER III

RESULTS

Tests of the Hypotheses

Sex Role Orientation

It was predicted that the impact of the first pregnancy would elicit some change in the sex role orientation of both spouses as compared with a non-pregnant control group.

Because the Bem Sex Role Inventory yields, in effect, three different measures of sex role orientation (that is, a score each for masculinity, femininity and androgyny) each one of these scores was subjected to a 2 (sex of subject) x 2 (group: pregnancy or control) x 2 (sex role orientation: pre-post; a repeated measure) analysis of variance.

<u>Femininity</u>. The mean scores for femininity are presented in Table 2 (with higher scores indicating greater endorsement of feminine items).

Table 2.--Mean Femininity Scores on Bem Sex Role Inventory

Sex of Subject	Group	Pre-score	Post-score	
	Pregnancy	5.03	5.01	
Females	Control	5.05	4.95	
Males	Pregnancy	4.75	4.65	
	Control	4.62	4.61	

As can be seen from Table 2 there were no significant changes in scores on femininity for either males or females in the pregnancy group, nor were there significant differences between the pregnancy and control groups as a whole. There was one significant finding, a main effect for sex, $\underline{F}(1,81) = 9.193$, $\underline{p} < .002$, indicating that, on the whole, females scored higher in femininity than did males.

<u>Masculinity</u>. Much the same results were found for scores on masculinity as for scores on femininity. Table 3, which presents the referant means, indicates there was little change in scores on masculinity for either males or females in the pregnancy group. Furthermore, there were no significant differences between the pregnancy and control group as a whole. As with femininity, there was a significant main effect for sex, <u>F</u> (1,81) = 3.99, <u>p</u> < .05, indicating that males on the whole scored higher in masculinity than did females.

Sex of Subject	Group	Pre-score	Post-score	
	Pregnancy	4.85	4.86	
Females	Control	4.74	4.82	
Malaa	Pregnancy	5.15	5.17	
Males	Control	5.20	5.19	

Table 3.--Mean Masculinity Scores on Bem Sex Role Inventory.

<u>Androgyny</u>. Table 4 presents the mean androgyny scores for each group. Androgyny scores are a \underline{t} ratio value derived by subtracting the respondent's femininity score from their masculinity score and multiplying by the conversion factor 2.322, derived empirically by Bem. Thus, a negative score indicates a higher endorsement of "masculine" items, with a concomitant lower endorsement of "feminine" items. The reverse is true for positive scores. Again there were no significant changes in androgyny scores for either females or males in the pregnancy group. However, there was a very slight trend toward higher masculinity scores in the post-test measure. This was also true for females in the control group, but not for their male counterparts. Again, there was a significant main effect for sex with males scoring higher on masculinity and lower on femininity than did females, <u>F</u> (1,81) = 10.84, <u>p</u> < .001.

Sex of Subject	Group	Pre-score	Post-score
Females	Pregnancy	.49	.28
	Control	.73	.31
Males	Pregnancy	93	-1.15
	Control	-1.35	-1.36

Table 4.--Mean Androgyny Scores on Bem Sex Role Inventory

Career Orientation

It was predicted that a change would be manifested in the pregnant women's orientation toward their careers that would not be evident for women in the control group.

Because the career orientation scale was developed

specifically for this study, it was necessary to obtain a measure of its internal consistency as a scale. Thus, women's pretest responses were used to estimate the reliability of the scale. Cronback's coefficient alpha was employed which yielded an alpha score of .92 for the seven item scale. Since the measure of internal consistency was so high, the items were combined for each participant, yielding a single score for career orientation. These scores were then subjected to a 2 (group: pregnancy or control) x 2 (career orientation: pre-post; a repeated measure) analysis of variance. (On a five point scale higher scores indicate stronger career orientation.) Table 5 presents the relevant means.

Table 5.--Mean Career Orientation Scores.

Group	Pre-score	Post-score
Pregnancy	3.67	3.68
Control	4.17	4.19

Inspection of these means suggests that there might have been a difference between the pregnancy and control group in career orientation, with the control group scoring higher on this dimension. However, this difference did not reach statistical significance, nor did any other effect. Body Image

It was expected that the pregnancy group would demonstrate changes in body image resulting from the stresses of the first pregnancy, though no change was expected for the control group. Participant's body image score on the body cathexis scale were subjected to a 2 (sex of subject) x 2 (group: pregnancy or control) x 2 (body image: pre-post; a repeated measure) analysis of variance. On the five point scale, lower scores indicated greater satisfaction with body image.

Table 6, which presents the cell means, indicates almost no change in scores for body image and very similar means across all conditions. Thus, no differences were found to be statistically significant.

Sex of Subject	Group	Pre-score	Post-score
Females	Pregnancy	2.31	2.33
	Control	2.28	2.19
Males	Pregnancy	2.21	2.31
	Control	2.30	2.32

Table 6.--Mean Body Image Scores on Body Cathexis Scale

Additional Findings

Data from the demographic questionnaire were submitted to correlational analysis to examine possible relationships between groups and sexes. In general the two groups did not differ. However, the control group had more education than did the pregnancy group, \underline{r} (88) = .30, $\underline{p} < .003$. This was true for both females, \underline{r} (44) = .28, $\underline{p} < .04$, and males, \underline{r} (44) = .32, $\underline{p} < .02$. Also, couples were married longer in the control group than those in the pregnancy group, \underline{r} (88) = .43, $\underline{p} < .001$. Finally, women in the control group were older than those in the pregnancy group, \underline{r} (44) = .53, $\underline{p} < .001$.

In terms of sex role orientation, higher endorsement of "masculinity" was related to higher occupational status, <u>r</u> (88) = .33, <u>p</u> < .001. This relationship was true for women, <u>r</u> (44) = .36, <u>p</u> < .008, though it did not reach significance for men, <u>r</u> (44) = .16. Masculinity was also related to higher education, <u>r</u> (88) = .26, <u>p</u> < .008. This relationship held true for both women, <u>r</u> (88) = .23, <u>p</u> < .05, and men, <u>r</u> (44) = .33, <u>p</u> < .01. Finally, more "masculine" people had greater income, <u>r</u> (88) = .37, <u>p</u> < .001. Again, this was true for both sexes, females, <u>r</u> (44) = .34, <u>p</u> < .01, and males, <u>r</u> (44) = .30, <u>p</u> < .02.

¹Analysis of covariance was considered though not undertaken as the likelihood of success was minimal, due in part to the moderate relationships found. Moreover, there was no a priori basis for predicting these relationships.

Turning to the measure of career orientation in women, one finds several relationships with the demographic variables. Women with higher career orientation also reported higher occupational status, \underline{r} (44) = .36, $\underline{p} < .009$; they were more educated, \underline{r} (44) = .36, $\underline{p} < .05$, than women with less orientation toward a career. In addition, they scored higher on "masculinity" than did women with less motivation for a career outside of the home \underline{r} (44) = .27, $\underline{p} < .04$. Perhaps most surprising was the finding that positive body image was related to stronger career orientation, \underline{r} (44) = .43, $\underline{p} < .002$.

Finally, when viewing relationships between body image and the demographic variables, one finds that older women were more satisfied with their bodies than were younger ones, <u>r</u> (44) = .32, <u>p</u> < .02. For males, however, there was no such relationship, <u>r</u> (44) = .05. Women with higher occupational status also reported greater satisfaction with their body image than did those in a lower occupational status, <u>r</u> (44) = .32, <u>p</u> < .02. While there was a similar trend for men, it did not reach statistical significance, <u>r</u> (44) = .10. Higher income for women was also related to positive body image, <u>r</u> (44) = .24, <u>p</u> < .05. Again, this relationship was not significant for men, though there was a similar trend, <u>r</u> (44) = .13. Finally, higher education was associated with greater satisfaction with body image. This relationship was true for both women, <u>r</u> (44) = .32, <u>p</u> < .02, and men, <u>r</u> (44) = .24, <u>p</u> < .05.

CHAPTER IV

DISCUSSION

The primary reason for conducting this research was to test the impact of the transition to parenthood upon three seemingly stable phenomena: sex role orientation, career orientation and body image. This chapter presents a discussion of the results of this research and their implications.

Sex Role Orientation

The results of this study provided little support for the hypothesis that there would be changes in sex role orientation resulting from the first pregnancy. Beyond the more parochial finding that males and females differed in general, with females being more "feminine" and males being more "masculine," there is little alternative but to conclude that sex role orientation is not significantly affected by this major life event. Nevertheless, what remains unclear is why no differences were found.

From a theoretical perspective there are several lines of thought suggesting that sex role orientation is subject to change both developmentally (Block, 1973) and situationally (Bem, 1975). It would seem that the first pregnancy falls somewhere in between these two conceptualizations. From a developmental perspective, the transition to parenthood represents a major life event. However,

while pregnancy is a developmental milestone, it could be that sex role orientation is a manifestation of a more stable cluster of personality characteristics which, as Block (1973) argues, emerges from one's stage of self or ego development, and therefore is not affected by other developmental milestones.

The situational perspective is, in effect, arguing that individuals with specific sex role configurations, labeled psychologically androgynous, respond to environmental stimuli by engaging in behavior appropriate to the situation. Conversely, sex typed individuals tend to respond in line with their particular sex typing regardless of the situation. Since pregnancy can be viewed as a rather long term "situation", it is conceivable that it has little or no effect upon the sex role orientation of sex typed individuals. For psychologically androgynous individuals, it is possible that the changes are more complex and rather than eliciting a more static change in sex role orientation, possible changes occurring across the pregnancy would be more subtle and complex.

Though the Bem Sex Role Inventory implies by its title that it is a measure of behavior, i.e., one's sex role, it is, in fact, a scale measuring self-ascribed personality traits. If, indeed, as suggested above, traits are a more stable configuration, it is possible that actual behavior -- such as division of household labor and childcare giving -- might have been found to fluctuate in the pregnancy group.

Though it is unlikely that methodological changes alone would have produced significant findings in this study, it is nevertheless

important to consider them. It is possible that taking a first measurement in the last trimester of pregnancy acted to camouflage changes that might have occurred during the first or second trimester. It is also possible that pre-selecting individuals on the basis of sex role orientation would have resulted in significant findings. Finally, the instrument used to measure sex role orientation might not have been sensitive enough to pick up subtle changes in that construct.

Clearly in a final analysis, however, one must conclude that the results were unequivocal. Therefore, the hypothesis predicting changes in sex role orientation, due to the transition to parenthood at least as measured by this study, must be rejected.

Career Orientation

The results of this study provided no support for the hypothesis that women experiencing their first pregnancy would exhibit changes in career orientation. However, there was a slight difference between the pregnancy and control groups with regard to this variable. Though it was not statistically significant, the trend suggests that women in the control group were more strongly motivated toward careers outside of the home than were those in the pregnancy group. Whether women in the pregnancy group had been more career oriented and because of measuring late in the pregnancy were now less so, or whether from the start they were less career oriented, is difficult to determine. Several of the correlational findings shed light on this issue; women in the control group were older,

had more education and were married longer than those in the pregnancy group. This pattern of correlations, coupled with the finding that advanced education was related to higher career orientation, suggests that women in the control group had perhaps delayed having children or they had decided never to have them. This speculation is somewhat akin to Wylie's (1977) finding that education was negatively related to ease of transition to parenthood.

Still the results did not support the prediction that career orientation changes as a function of the first pregnancy. It is possible that women less oriented toward a career would be more likely to choose parenthood earlier in life. Thus, the pregnancy itself does not act as a major change agent. From the group differences one can speculate that the women in this study dealt with the possible role strain resulting from a dual career (Darley, 1977) by prioritizing one or the other.

Based on its internal consistency, it appears that the instrument measuring career orientation had at least adequate psychometric properties. Because a woman's occupation was found to be significantly related to her career orientation, it is possible that had this study pre-selected women who would be expected to differ on this dimension--such as homemakers and professional women--that changes in career orientation would have been evident, at least in the pregnant women scoring high on this dimension.

Both the work of Araji (1977) and Johnson and Johnson (1977) indicate a marked contrast between couples equalitarian attitudes and their actual behavior. Such might be the case with career

orientation as well, so that change in attitude is an inappropriate criterion measure for change in career orientation. A more appropriate criterion might have been a behavioral one, such as returning to work after the birth of the child.

While it is easy to speculate on possible differences between the two groups of women, it must be born in mind that it is speculation, for the differences did not reach statistical significance. Furthermore, this pattern of means was not predicted specifically and the original hypothesis, that changes would occur in career orientation as a result of the first pregnancy cannot, on the basis of this study, be substantiated.

Body Image

It was expected that there would be some change in body image resulting from the first pregnancy that would not be evident in the non-pregnant control group. The results of this study, however, did not confirm this hypothesis. Furthermore, no differences were found between the sexes or the two groups. There are several ways of interpreting this finding. Clearly the most straightforward interpretation is that pregnancy does not have an effect on an individual's body image. While seemingly counter-intuitive, it might be that body image, as measured by this study, which used degree of satisfaction/dissatisfaction, did not accurately tap the relevant dimension. Perhaps a measure of physical attractiveness, which would reflect a more social dimension, or body awareness, reflecting a heightened sensitivity to one's internal somatic states, would have produced significant findings.

Though unpredicted, several interesting relationships were found between body image and other variables. The finding that older women were more satisfied with their body image than their younger counterparts is at first glance quite surprising. Certainly in a youth-oriented culture such as ours, one might expect that a positive body image would decline with age. However, this correlation is congruent with Secord and Jourard's (1954) finding that body image was significantly related to an individual's attitude toward him/herself, with dissatisfaction being related to a general lack of selfesteem. It might be that younger women, less comfortable in their newly acquired adult roles, reflected this discomfort via a poorer body image.

There were many more relationships between body image and other factors for women than for men. This suggests that though societal attitudes regarding women have undergone major transitions, body image is still a more salient variable for women than for men. This pattern of results replicates well Secord and Jourard's finding of 25 years ago. What is of special interest are the strong positive relationships for women between body image, career orientation, education, income, occupational status and scores on masculinity. Though more women are in the workforce than ever before, there remains the cultural stereotype of the career woman as a somewhat dowdy individual who is uninterested and/or unaware of her body. The fact that women who scored high on these dimensions also were more satisfied with their bodies suggests that women embracing a less

traditional female role might place less emphasis on bodily perfection. In light of the traditional cultural view of women, in which considerable emphasis is placed on having a beautiful body, this relationship makes sense, for women embracing the more traditional cultural view of females expressed more dissatisfaction with their bodies.

Conclusions

This study was designed to bring an empirical focus to an area that had been little researched, namely the psychological consequences of the first pregnancy. However, the areas measured led to quite disappointing results. Because the area is relatively uncharted, further research might make use of interviewing as a method to allow participants the opportunity to respond in a relatively unstructured manner. Such a procedure would allow respondents to cite changes that they experience as they make the transition to parenthood. From this data base it might then be fruitful to undertake a more formal investigation of the areas of change previously identified by the interview process. In addition, it is possible that the pregnant group was an atypical sample and not representative of pregnant couples in general. This sample was self-selected and highly homogeneous. They were attending prepared childbirth classes, which I believe indicates a very positive orientation toward the pregnancy experience. Future research should be oriented toward selecting a more representative sample of pregnant couples.

It must be born in mind that this study, exploratory in

nature, cannot be taken as evidence that there are no psychological consequences related to the first pregnancy, and therefore, the area merits little attention, either empirically or conceptually. On the contrary, I believe that the study of the first pregnancy, and the possible psychological changes ensuing from it, remains fertile uncharted territory.

APPENDICES

Appendix A

Bem Sex Role Inventory

Self Description: Trait List

Please indicate how well each of the following characteristics describe you as you <u>now</u> see yourself. Use the 7 point noted. Indicate the number that corresponds to your rating.

	1	2	3	4	5	6	7
	Never or						Always or
	almost new true of me						almost always true of me
Number		ā			Mumb.		
Number					Numb		
1.	Self-reliar	nt				31.	Makes decisions easily
2.	Helpful				·····	33.	Sincere
4.	Self-rellar Yielding Helpful Defends owr Cheerful	n belie	fs			34.	Compassionate Sincere Self-sufficient
						35.	feelings
6.	Moody Independent Shy Conscientic Athletic					36.	Conceited
7.	Independent	5				37.	Dominant
0. 9.	Conscientio	ous				39.	Soft spoken Likeable Masculine
10.	Athletic					40.	Masculine
11.	Affectionat Theatrical Assertive Flatterable Happy	e				41.	Warm Solemn Willing to take a stand Tender Friendly
12.	Theatrical					42.	Solemn
<u> </u>	Assertive Flatterable	`				43.	Willing to take a stand Tender
15.	Нарру	•				45.	Friendly
16.	Strong pers	sonalit	y			46.	Aggressive
17.	Loyal	_	•			47.	Gullible
18.	Unpredictat	ole				48.	Inefficient
20.	Strong pers Loyal Unpredictat Forceful Feminine					49. 50.	Aggressive Gullible Inefficient Acts as a leader Childlike
21	Reliable					51	Adantable
22.	Reliable Analytical Sympathetic					52.	Adaptable Individualistic
23.	Sympathetic	:				53.	Does not use harsh
24	Jealous					54	language Unsystematic
25.	Jealous Has leaders	ship ab	iliti	es		55.	Unsystematic Competitive
	Sensitive 1					•	
	others					56.	Loves children
27.	Truthful					57.	Loves children Tactful Ambitious Gentle Conventional
<u> </u>	WILLING TO	take r ing	ISKS			50.	AMDITIOUS Gentle
30.	Truthful Willing to Understandi Secretive					60.	Conventional
						•	

Appendix B

Career Orientation Scale

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For each of the following statements please indicate how much you agree or disagree by circling the appropriate number on the scale 1,2,3,4, or 5.

1. A woman should spend more time and energy on her household responsibilities than on her career.

1	2	3	4	5
Strongly	Slightly	Neither agree	Slightly	Strongly
agree	agree	nor disagree	disagree	disagree

2. Women with children should not work outside the home if they don't have to financially.

1	2	3	4	5
Strongly	Slightly	Neither agree	Slightly	Strongly
agree	agree	nor disagree	disagree	disagree

3. I would be satisfied to be a housewife.

1	2	3	4	5
Strongly	Slightly	Neither agree	Slightly	Strongly
agree	agree	nor disagree	disagree	disagree

4. It is important for me to have a job in which there is opportunity for advancement.

1	2	3	4	5
Strongly	Slightly	Neither agree	Slightly	Strongly
agree	agree	nor disagree	disagree	disagree

5. A woman should stop working once she has a child.

٦	2	3	4	5
Strongly	Slightly	Neither agree	Slightly	Strongly
agree	agree	nor disagree	disagree	disagree

6. Having a career outside the home is important to me.

1	2	3	4	5
Strongly	Slightly	Neither agree	Slightly	Strongly
agree	agree	nor disagree	disagree	disagree

7. With proper childcare there is no reason why a woman with a young child should not work.

1	2	3	4	5
Strongly	Slightly	Neither agree	Slightly	Strongly
agree	agree	nor disagree	disagree	disagree

Appendix C

Body Cathexis Scale

Below are listed various aspects of the body. Please rate the extent to which you <u>currently</u> are satisfied or dissatisfied with these aspects as they apply to you. A l would indicate that a person was currently very satisfied with the particular body aspect he/she was rating. A 5 would indicate that a person was currently very dissatisfied with a particular body part.

Please circle the number that best represents your <u>current</u> satisfaction or dissatisfaction with a particular body part.

	Very	Satis	fied		Very Di	ssatisfied
1.	Hair	1	2	3	4	5
2.	Hands	1	2	3	4	5
3.	Fingers	1	2	3	4	5
4.	Breathing	1	2	3	4	5
5.	Back	1	2	3	4	5
6.	Exercise	1	2	3	4	5
7.	Shape of head	1	2	3	4	5
8.	Height	1	2	3	4	5
9.	Arms	1	2	3	4	5
10.	Digestion	1	2	3	4	5
11.	Lips	1	2	3	4	5
12.	Forehead	1	2	3	4	5
13.	Voice	1	2	3	4	5
14.	Knees	1	2	3	4	5
15.	Weight	1	2	3	4	5
16.	Trunk	١	2	3	4	5
17.	Facial complexion	1	2	3	4	5
18.	Distribution of hair over body	1	2	3	4	5
19.	Sex drive	1	2	3	4	5
20.	Waist	1	2	3	4	5
21.	Ears	1	2	3	4	5
22.	Ankles	1	2	3	4	5
23.	Body build	1	2	3	4	5
24.	Age	1	2	3	4	5
25.	Chest (or breasts)	1	2	3	4	5.
26.	Hips	1	2	3	4	5
27.	Legs	1	2	3	4	5

		Very	Satisfied Very Dissatisf		tisfied		
28.	Feet		1	2	3	4	5
29.	Health		1	2	3	4	5
30.	Posture		1	2	3	4	5
31.	Sex organs		1	2	3	4	5
32.	Appetite		1	2	3	4	5
33.	Nose		1	2	3	4	5
34.	Wrists		1	2	3	4	5
35.	Energy level		1	2	3	4	5
36.	Chin		1	2	3	4	5
37.	Neck		1	2	3	4	5
38.	Profile		1	2	3	4	5
39.	Width of shoulders		1	2	3	4	5
40.	Size of stomach		1	2	3	4	5
41.	Skin texture		1	2	3	4	5
42.	Teeth		1	2	3	4	5
43.	Sleep		1	2	3	4	5
44.	Sex activities		1	2	3	4	5
45.	Face		1	2	3	4	5
46.	Back view of head		1	2	3	4	5
47.	Buttocks (seat)		1	2	3	4	5
48.	Eyes		1	2	3	4	5
49.	General muscle tone or development		1	2	3	4	5
50.	Overall body appearance		1	2	3	4	5

Appendix D

Demographic Questionnaire

Name	AgePhone#
Address	
Occupation	Years in occupation
Highest level of education	completed (circle one)
Elementary grade: Junior High School: High School: College: MA Degree Ph.D. Degree	1 2 3 4 5 7 8 9 10 11 12 1 year 2 years 3 years Degree Grante
	nal training

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