

The Association between Gender Role Attitude and Maternal Identity among Thai-Adolescent Mothers

Abstract

Background: The transition to motherhood is a critical developmental milestone in a woman's life, influenced by various factors, including gender role attitudes, which shape maternal behaviors and identity formation. However, the relationship between gender role attitudes and maternal identity remains underexplored. **Materials and Methods:** This descriptive cross-sectional study examined the association between gender role attitudes and maternal identity among 263 postpartum adolescent mothers in northeastern Thailand. Participants were purposively selected between July 2021 and August 2022. Data were collected using a self-administered questionnaire with strong psychometric properties, including sociodemographic data, the Gender Role Attitude Scale (Cronbach's $\alpha = 0.94$), and the Maternal Identity Scale (Cronbach's $\alpha = 0.95$). Descriptive and bivariate statistical analyses were conducted to assess potential associations. **Results:** The mean age of participants was 18.7 (1.29) years, and the mean age of their infants was 4.89 (0.39) months. Participants exhibited predominantly egalitarian gender role attitudes, with a mean score of 3.57 (0.48) and reported a high level of maternal identity, with a mean score of 4.57 (0.64). A statistically significant positive correlation was found between egalitarian gender role attitudes and maternal identity (Pearson's $r = 0.45$, $p < 0.001$). **Conclusions:** This study highlights the significant association between egalitarian gender role attitudes and a strong maternal identity among adolescent mothers. These findings suggest that fostering egalitarian gender role attitudes may support maternal identity development and improve maternal and child wellbeing.

Keywords: Adolescent mothers, gender identity, gender role

Introduction

Gender role attitudes refer to an individual's beliefs regarding the appropriate behaviors, roles, and responsibilities of men and women within society.^[1] These attitudes encompass societal perceptions, expectations, and behaviors assigned to individuals based on their gender identity, forming a core element of socialization and cultural norms.^[2] They significantly influence individuals' experiences and opportunities across various domains, including family dynamics, education, work environments, and cultural practices.^[3] The connection between gender role attitudes and maternal identity holds substantial importance as societal expectations heavily influence women's choices, opportunities, and experiences in their roles as mothers.^[3,4] Maternal identity, defined as a woman's self-perception and enactment of her role as a mother, is shaped by multiple sociocultural

factors, with gender role attitudes playing a prominent role.^[5] Gender role attitudes exist along a continuum, ranging from traditional to egalitarian perspectives. Traditional attitudes emphasize the interdependence of partners and distinct power dynamics, with the husband assuming the breadwinner role and the wife as the homemaker and primary caregiver. In contrast, egalitarian attitudes advocate equal power dynamics and less rigidly defined roles, enabling both partners to share economic responsibilities and child-rearing tasks equitably.^[3,5-8] In examining gender role attitudes, five key dimensions have been identified: Egalitarian Gender Roles (EGR), Female Gender Roles (FGR), Marriage Gender Roles (MaGR), Traditional Gender Roles (TGR), and Male Gender Roles (MGR). Each dimension captures specific societal expectations and beliefs about the roles and responsibilities assigned to individuals based on gender.

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Understanding these dimensions provides insight into the complex interplay between gender role attitudes and the development of maternal identity, particularly within varying cultural and social contexts.^[9]

Research indicates that traditional gender role attitudes significantly shape maternal role expectations and identity by influencing how women perceive their responsibilities and sense of self in motherhood. Women who align with conventional gender norms often internalize caregiving roles as central to their maternal identity, reinforcing societal expectations of motherhood.^[10] Maternal identity encompasses the internalized sense of oneself as a mother, including thoughts, emotions, and behaviors associated with the role.^[11] This multifaceted identity can be assessed across dimensions such as emotional attachment to the child, perceived competence in the maternal role, and satisfaction with the motherhood experience.^[12,13] Achievement in maternal identity can be categorized into three core areas: 1) Maternal and Newborn Relationship (MNR): This reflects the bonding between a mother and her baby, essential for all mothers intending to nurture their child. A strong maternal-child relationship in the baby's first year significantly enhances cognitive and linguistic development in later years. 2) Maternal Role Competency (MRC) represents the mother's ability to effectively practice child-rearing skills and meet her baby's needs. 3) Maternal Role Satisfaction (MRS) denotes the mother's gratification and confidence in performing maternal roles fluently and successfully.^[14-17] The journey to achieving maternal identity often involves navigating significant physical, mental, and social changes, alongside challenges related to fulfilling the multifaceted roles of motherhood. For postpartum adolescent mothers, these challenges are compounded by the rapid transition from childhood to adulthood. Adolescent pregnancy, a critical life event, poses risks not only to physical health but also to mental wellbeing as these young mothers confront societal expectations and their evolving identities.^[18] In many societies, traditional gender roles position caregiving as a fundamental component of maternal identity, often placing the primary responsibility for child-rearing on mothers. However, as societal attitudes evolve toward more egalitarian perspectives, the recognition of shared parenting responsibilities is becoming more prevalent. These shifting norms provide adolescent mothers with opportunities to redefine maternal roles and expectations, enabling them to balance caregiving responsibilities with their personal goals and aspirations in a manner that better aligns with their individual needs.^[19] Examining the dimensions of maternal identity and its relationship with gender role attitudes provides critical insights into how adolescent mothers navigate the dual roles of caregiving and personal development. Understanding this interplay is essential for designing interventions and support systems that promote maternal wellbeing and foster equitable gender roles in parenting.

Existing research highlights a complex relationship between gender role attitudes and maternal identity. While egalitarian views are associated with greater satisfaction and competence in maternal roles, traditional beliefs emphasizing caregiving may also strengthen maternal identity.^[12,19,20] These inconsistencies, particularly among adolescent mothers who face greater pressure to conform to traditional roles, emphasize the need for further investigation to better understand these dynamics and their implications.

Gender role attitudes significantly influence the formation of maternal identity, shaping how women perceive and enact their roles as mothers within societal frameworks.^[4] Societal expectations regarding gender roles impact women's sense of agency and self-efficacy in maternal roles, thereby affecting their behaviors and experiences in caregiving.^[3] The intersection of individual beliefs and societal norms underscores the complexity of maternal identity development and caregiving practices.^[6] In Thai culture, which is deeply influenced by Buddhism, traditional gender roles continue to dominate societal expectations. Women are often expected to embody the ideal wife, managing household responsibilities and raising children, while men traditionally serve as the primary financial providers. These cultural norms play a crucial role in shaping women's maternal identity and caregiving roles.^[21] The transition to motherhood during adolescence represents a critical developmental milestone, accompanied by unique challenges and opportunities. Exploring the relationship between gender role attitudes and maternal identity in adolescent mothers is crucial for understanding how these attitudes influence their experiences. Such an understanding can inform the development of evidence-based interventions aimed at fostering positive maternal identity formation and empowering adolescent mothers to achieve both personal and caregiving success.

Materials and Methods

A cross-sectional study was conducted in northeastern Thailand between July 2021 and August 2022 to examine maternal identity among adolescent mothers. The study population comprised adolescent mothers who had given birth at two selected hospitals in Khon Kaen province, a region with a high prevalence of adolescent pregnancies. The required sample size was calculated using Yamane's formula (1973),^[22] with a minimum of 258 participants determined at a 95% confidence level and a margin of error of 0.05. To account for potential nonresponses, an additional 10% of the estimated sample was included, resulting in 284 distributed questionnaires, of which 263 were completed and returned. Convenience sampling was employed for participant recruitment. Inclusion criteria required participants to (1) be aged 15 to under 20 years at the time of childbirth, (2) have delivered a single, full-term infant (gestational age ≥ 37 weeks), (3) have an

infant aged 4 to 6 months at the time of data collection, and (4) demonstrate an understanding of the study objectives and provide informed consent. Exclusion criteria included adolescent mothers with unintended pregnancies, chronic medical conditions, or cognitive impairments that could interfere with participation. Ethical approval was obtained prior to data collection. The researcher accessed participant information through nurse-midwives working in the postpartum wards of the selected hospitals. Eligible participants were contacted via telephone to explain the study and invite participants. Upon agreement, self-administered questionnaires were mailed to participants with prepaid return postage to minimize financial burden. The questionnaire required approximately 45–60 minutes to complete.

Data were collected using a self-administered questionnaire comprising three sections: 1) Sociodemographic Data: This section gathered information on participants' age, educational attainment, marital status, and other relevant characteristics. 2) Gender Role Attitudes: Gender role attitudes were assessed using a translated and adapted version of the Gender Roles Attitude Scale (GRAS), originally developed by Zeyneloglu *et al.*^[9] The GRAS consists of 38 items categorized into five dimensions: (1) Egalitarian Gender Roles (EGR), (2) Female Gender Roles (FGR), (3) Marriage Gender Roles (MaGR), (4) Traditional Gender Roles (TGR), and (5) Male Gender Roles (MGR). Responses were recorded on a 5-point Likert scale ranging from 1 ("completely disagree") to 5 ("completely agree"). For egalitarian statements, higher scores indicated stronger agreement, while for traditional statements, higher scores reflected disagreement with traditional gender roles. Higher overall scores represented more egalitarian attitudes, whereas lower scores indicated adherence to traditional gender norms. The adapted version demonstrated high reliability (Cronbach's $\alpha = 0.94$). 3) Maternal Identity: Maternal identity was measured using the Maternal Identity Scale,^[23] which assesses three dimensions: (1) Maternal-Newborn Relationship (MNR), evaluating bonding and interaction between mother and infant; (2) Maternal Role Competency (MRC), assessing perceived ability to perform child-rearing tasks; and (3) Maternal Role Satisfaction (MRS), measuring confidence and gratification in the maternal role. The scale comprises 24 items rated on a 5-point Likert scale (1 = "disagree" to 5 = "strongly agree"), with higher scores indicating a stronger maternal identity. The scale demonstrated excellent reliability (Cronbach's $\alpha = 0.95$), and content validity was confirmed by three experts (Content Validity Index = 1).

The return of a completed questionnaire was considered implicit to participate in the study. Data analysis was conducted using IBM SPSS Statistics version 28, with statistical significance set at $p < 0.05$ and a 95% confidence level. Descriptive statistics were used to summarize sociodemographic characteristics, with categorical variables

presented as frequencies and percentages and continuous variables reported as means and standard deviations. Bivariate correlation analysis was performed to examine the relationship between gender role attitudes and maternal identity.

Ethical consideration

The study was approved by the Khon Kaen University Ethics Committee for Human Research and the Khon Kaen Hospital Ethics Committee for Human Research (Approval Code: HE642138, dated June 29, 2021). As per the committee's guidance, the questionnaire and information sheet were distributed to participants via prepaid postage. Returning the complete questionnaire was considered implicit to participate in the study.

Results

A total of 263 postpartum adolescent mothers completed the questionnaire. Sociodemographic characteristics are summarized in Table 1. The mean (SD) age of the participants was 18.7 (1.29) years, and the mean age of their babies at the time of data collection was 4.89 (0.39) months. Out of 263 adolescent mothers, 45.30% reported completing senior high school as their highest educational level. 55.90% were unemployed, and 71.5% were living with a partner. All adolescent mothers identified as Buddhists, and 47.10% reported that their families worked as employees. The overall attitude toward gender roles, as measured by the Gender Role Attitudes Scale (GRAS), demonstrated a tendency toward egalitarian views, with an average score of 3.57 and a standard deviation of ± 0.48 . Among the dimensions of gender roles, the highest scores were observed in the Egalitarian Gender Roles (EGR) and Marriage Gender Roles (MaGR) subcategories, with mean scores of 4.17 and 4.06, respectively. These findings suggest that adolescent mothers strongly favor equal roles between genders and value partnership dynamics in marital responsibilities. In contrast, the Female Gender Roles (FGR) subcategory recorded the lowest average score of 2.76, indicating a lower endorsement of traditional female-specific role expectations. Scores for Male Gender Roles (MGR) and Traditional Gender Roles (TGR) were moderate, averaging 3.65 and 3.20, respectively. Overall, the results reveal a blend of progressive and traditional attitudes among adolescent mothers, with a clear preference for egalitarian and shared responsibilities in both gender and marriage-related roles [Table 2]. The Maternal Identity Scale revealed a high overall Maternal Identity Score (MIS) among adolescent mothers, with a mean of 4.57 (0.64). Among the subcategories, Maternal Role Satisfaction (MRS) recorded the highest mean score at 4.71 (0.65), reflecting a strong sense of fulfillment and confidence in their maternal roles. Maternal Role Competencies (MRC) followed closely with a mean score of 4.53 (0.68), indicating a high level of perceived ability to perform child-rearing tasks effectively. The

Table 1: Sociodemographic characteristics of adolescent mothers

Characteristics	Frequency (Percentage)
Age: Mean (SD) year	18.70 (1.29)
Baby's age at data collection: mean (SD) month	4.89 (0.39)
Educational level	
Primary school	18 (6.80)
Junior high school	108 (41.10)
Senior high school	119 (45.30)
Occupational study	18 (6.80)
Working status	
Employee	47 (17.80)
Unemployed	147 (55.90)
Student	69 (26.30)
Marital status	
Couple	188 (71.50)
Single	75 (28.50)
Family's occupation	
Agriculture	67 (25.50)
Own business	30 (11.40)
Employee	124 (47.10)
Trading	42 (16.00)
Religious believe	
Buddhist	263 (100)

Table 2: Personal gender role attitude score (GRAS) and maternal identity score (MIS)

Gender role attitude (<i>n</i> =263)	Mean (SD)
A. Egalitarian gender role (EGR)	4.17 (0.93)
B. Female gender role (FGR)	2.76 (0.49)
C. Marriage gender role (MaGR)	4.06 (0.65)
D. Traditional gender role (TGR)	3.20 (0.88)
E. Male gender role (MGR)	3.65 (0.89)
Total	3.57 (0.48)
Maternal identity (<i>n</i> =263)	
1. Maternal-newborn relationship (MNR)	4.49 (0.69)
2. Maternal competency (MRC)	4.53 (0.68)
3. Maternal role satisfaction (MRS)	4.71 (0.65)
Total	4.57 (0.64)

Maternal-Newborn Relationship (MNR) subcategory had the lowest mean score of 4.49 (0.69), suggesting slightly lower but still strong bonding and interaction between mothers and their newborns. These findings highlight a generally positive attitude among the participants, with slight variations across the dimensions [Table 2].

The study revealed no statistically significant correlation between the overall Gender Role Attitude Scale (GRAS) and the Maternal Identity Scale (MIS). However, subcategory analysis showed significant relationships between specific dimensions of GRAS and maternal identity. Notably, adolescent mothers identifying with egalitarian gender roles (EGR) exhibited a strong positive correlation with

maternal identity ($r = 0.45$, $p < 0.001$), indicating that those endorsing egalitarian views tend to develop a stronger sense of maternal identity. Conversely, higher scores in female gender roles (FGR) showed a significant negative correlation with overall maternal identity (MI; $r = -0.13$, $p = 0.038$) and the maternal-newborn relationship (MNR; $r = -0.17$, $p = 0.007$), suggesting that traditional views of female roles may weaken a mother's connection with her infant and self-perception as a mother. Similarly, traditional gender role attitudes (TGR) were negatively associated with maternal identity (MI; $r = 0.16$, $p = 0.009$), the maternal-newborn relationship (MNR; $r = -0.21$, $p < 0.001$), and maternal role competency (MRC; $r = -0.12$, $p = 0.042$). These findings imply that adherence to traditional gender roles may undermine the development of a positive maternal identity and perceived competence in maternal roles. Last, male gender role attitudes (MGR) demonstrated a negative correlation with the maternal-newborn relationship (MNR; $r = -0.14$, $p = 0.025$), suggesting that adherence to traditional male gender roles may adversely affect the emotional bond between a mother and her child. These findings underscore that although overall gender role attitudes may not directly predict maternal identity, specific dimensions, particularly those aligned with traditional or rigid gender norms, can negatively influence a mother's self-perception and her emotional bond with her newborn.

Discussion

The findings of this study offer fresh insights into the interplay between gender role attitudes and maternal identity, uncovering both consistencies and deviations from existing research. Although the overall Gender Role Attitude Scale (GRAS) did not show a significant correlation with the Maternal Identity Scale (MIS), specific subcategories within gender role attitudes revealed notable associations with maternal identity and its components. These results corroborate prior studies while adding nuanced perspectives to the understanding of this relationship.

The observed positive correlation between Egalitarian Gender Roles (EGR) and maternal identity is consistent with recent research emphasizing the advantages of egalitarian beliefs for maternal self-concept and overall wellbeing. Previous studies have indicated that mothers endorsing egalitarian views report higher levels of life satisfaction, attributed to their ability to balance caregiving responsibilities with personal and professional roles.^[24] Similarly, Kossek *et al.*^[25] found that egalitarian gender attitudes foster coparenting practices, which, in turn, positively influence maternal identity and role satisfaction.

The negative associations observed between Female Gender Role attitudes (FGR) and traditional gender Role Attitudes (TGR) with maternal identity, maternal-newborn relationships, and maternal role competency align with findings from previous research. For instance, Van Putten

et al.^[26] demonstrated that adherence to traditional gender roles often limits women's ability to navigate motherhood in ways that align with contemporary, multifaceted identities. Such rigid norms can contribute to role strain, impacting both the emotional and practical dimensions of maternal identity. Furthermore, recent studies by Endendijk *et al.*^[27] underscore the link between rigid gender role beliefs and negative parenting outcomes, particularly for mothers disproportionately burdened with primary caregiving responsibilities.

The study's finding that male gender role attitudes (MGR) negatively correlate with the maternal-newborn relationship aligns with contemporary research. Shifting societal expectations surrounding fatherhood and male involvement in caregiving have been shown to significantly influence maternal dynamics. For example, Nielsen *et al.*^[28] reported that when male partners adhere to traditional male roles and disengage from caregiving responsibilities, maternal stress levels tend to increase, adversely affecting the maternal-newborn relationship.

Recent theoretical frameworks and empirical research highlight the importance of flexible gender norms in fostering positive maternal identities. Vasileva *et al.*^[29] demonstrated that adopting egalitarian gender norms within families significantly enhances maternal wellbeing and satisfaction as caregiving and household responsibilities are more equitably distributed between parents. These findings underscore the urgent need for policy interventions that promote gender equality in domestic roles to support the development of maternal identity and overall family wellbeing.

However, the study's cross-sectional design limits the ability to draw causal inferences, and the reliance on self-reported data raises the potential for social desirability bias. Furthermore, the study does not address how shifts in gender role attitudes over time might affect maternal identity, which remains an important area for future exploration.

Conclusion

This study provides valuable insights into the relationship between gender role attitudes and maternal identity, revealing both positive and negative associations depending on the specific gender role constructs. A key finding is that Egalitarian Gender Role attitudes (EGR) are strongly correlated with a positive maternal identity, suggesting that mothers who endorse shared parenting roles experience higher self-confidence and wellbeing in their maternal roles. In contrast, traditional and female gender role attitudes (TGR and FGR) were found to negatively impact maternal identity, particularly in terms of emotional connection with newborns and perceived maternal competency. These results highlight the restrictive effects of rigid gender norms, which often place disproportionate caregiving responsibilities on mothers and hinder their ability to integrate multiple aspects of their

identity. The study also sheds light on the less frequently explored influence of male gender role attitudes (MGR) on maternal relationships, demonstrating that rigid adherence to traditional male roles can negatively impact maternal-infant bonding. The findings have important implications for public health policies and family support programs. Interventions promoting gender equality, particularly in parenting roles, could significantly enhance maternal wellbeing and the quality of mother-child relationships. Programs that challenge traditional gender norms and encourage shared caregiving responsibilities have the potential to improve maternal identity and overall family dynamics. Future research should continue to explore the nuances of how gender role attitudes influence maternal experiences across different cultural contexts and family structures. Longitudinal studies could offer valuable insights into how evolving gender attitudes influence maternal identity over time, particularly as societal norms continue to shift. Expanding future research to incorporate fathers' perspectives on caregiving roles would provide a more comprehensive understanding of family dynamics and their impact on maternal outcomes. This study contributes to the growing body of literature emphasizing the critical role of flexible and egalitarian gender roles in fostering positive maternal identities and healthier family relationships. By advocating for shared parenting responsibilities and challenging traditional gender norms, these findings underscore the importance of promoting gender equality as a pathway to improved maternal wellbeing and family cohesion.

This study provides valuable insights into the relationship between gender role attitudes and maternal identity, focusing on the influences of egalitarian, traditional, female, and male role constructs. The findings highlight practical implications for enhancing maternal wellbeing and family dynamics, offering guidance for future research into cultural variations, longitudinal effects, and fathers' perspectives.

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Conflicts of interest

Nothing to declare.

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