Letter of Intent

Transition to Motherhood: Redefining Your *Self*

GCAP Final Project Requirement

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Transitional to Motherhood: Redefining Your Self

Problem Statement

First time motherhood fundamentally changes one’s life, making it more complex – not only through increasing demands, conflict, and frustrations, but also by deepening joys, activating social ties, and enriching parents’ self concepts (Nomaguchi & Milkie, 2003). Motherhood has been associated with women redefining their sense of self, involving change, causing disequilibrium, and reorganization. Researchers in developmental health have demonstrated changes in individual well-being across the transition period and consider the transition to parenthood to be a time of crisis (Feeney, Alexander, Noller, & Hohaus, 2003; Kralik, Visentin, & Van Loon, 2006). Feinberg (2002) highlighted that the transition to parenthood represents a transformation of the new parents as individuals and of the developing family system. Despite the amount of available research and support, some first time mothers are unprepared for the change in their personal identities and new role that mommy entails.

Project Rationale

Macbeth Williams and colleagues (1987) recognized the need for societal practices that promote healthy (and more realistic) attitudes towards the transition to parenthood. Lack of preparation for the life-long journey of early parenthood may explain some mental health issues that families are faced with during the child's first year (Bassoff, 1983; Brockington, 2004). For example, infant temperament and behavioral problems at four years have been linked to exposure to high levels of maternal stress during pregnancy (Austin & Priest, 2005). Perinatal (conception to end of first postnatal year) mood and anxiety disorders have been detected in up to 30% of women and men that was still present when children were 3 1/2 years old (Cowan & Cowan, 1995). While the experience of parenting is worthy of focus, this project specifically targets the
experience of mothering, to ensure first-time mothers have realistic expectations about mothering and are given an opportunity to challenge some of these expectations before assimilating them into their identity. The focus of this project is on biological mothering. The challenge for women as mothers is not just to question the values of society, but also the values that the women themselves have adopted in behaving as good mothers (Shelton & Johnson, 2006). The constraining social construction of motherhood has continued to create a dilemma for contemporary women (Tardy, 2000). Women face unrealistic cultural expectations to be both productive members of society and to take care of their children’s needs. Women must justify the desire to fulfill their own dreams, including careers outside of motherhood. A plethora of research exists in regards to the risks, complications, and negative effects of the transition to motherhood; however, research into the positive aspects of transitioning to mothering is lacking, which skews society’s perception of the postpartum period as a medical problem, rather than a transformation of self.

Expectant mothers may be unprepared for the subsequent life-long change in identity that occurs with motherhood (MacBeth Williams et al., 1987; Edhborg, Friberg, Lundh, & Widstrom, 2005). Nyström and Öhrling (2004) found parents overwhelmed by feelings of love and joy inspired by the infant, as well as the new situation of being a family. It is also the reality that many first time mothers are not prepared or aware of how much impact a child will have on their previous identities (Choi, Henshaw, Baker, & Tree, 2005). In this case, it is vital to acknowledge the changes that occur during the postpartum year and how the woman will re-identify her self to include the role of mother.

My goal in this final project is to increase awareness of the challenges, both positive and negative, to mothers' self-identities as they transition to motherhood and to normalize the trials
and tribulations that new mothers’ may experience. I believe it is important to normalize the intense positive and negative reactions to becoming a mother. For example, the transition may be challenging and overwhelming, and it does not mean mothers are mentally unhealthy. It is my belief that new mothers need to know that grief due to identity change and loss can be a normal part of the postpartum transition and that it may not be depression. As such, it may be helpful to understand the use of dialectical thinking during the transition to motherhood, which will be described in the next section.

Theoretical Foundations

The theoretical foundations that underpin this project are based on social construction theory and components of dialectical behavior therapy. Social construction theorists propose that people’s beliefs about the world are social inventions (Cisneros-Puebla & Faux, 2008; Hoffman, 1990). Stemming from these notions, I align with postmodern therapies, which stress the importance of culture in determining reality, and emphasize the influence of language and power relationships in shaping and defining our roles and identity. Social construction theorists state that each of our perceptions is not exactly duplication but rather our point of view seen through our assumptions and past experiences about people (Gergen, 1985).

Our reality is constructed through language and is socially determined though our relationships with others and with the cultures’ shared sets of assumptions. The goal of this project is to assist first time mothers to incorporate/adopt more dialectical thinking in their process of transitioning to mothering. Dialectical means that two ideas can both be true at the same time. Being dialectical will require letting go of all or nothing ways of seeing a situation, and expanding ways of seeing things (Marra, 2005). I concur that all individuals have knowledge
that is unique, different, and worthy of sharing. From a motherhood perspective, an example can be: *I can take care of myself and my baby AND I need help and support from others around me.*

Supporting Literature

First-time motherhood is characterized by profound change, a strong sense of loss, isolation, and fatigue (Harwood, McLean, & Durkin, 2007; Shelton & Johnson, 2006). Many researchers have demonstrated that first-time mothers described their new role as overwhelming, in a state of constant learning, and a profound change in self-identity (Ayers & Pickering, 2005; Lu, 2006). Motherhood can be full of contradictions (Miller, 2005). For example, new mothers often talk of feeling happiness for the new baby and, at the same time sadness of their loss of self-identity. Another example is the paradox of feeling conditional support and value in society as a mother while simultaneously feeling intense pressure to perform as a mother. Dialectical thinking is proposed in this project to assist new mothers to separate paradoxical feelings to expand the possibilities that happiness and sadness can co-exist and to accept that idealized beliefs are often not attainable nor realistic.

During a life transition, a significant source of stress may be the unsettling experience of changes in the self and in the environment that lead people to ask themselves, *Is this what I expected?* In my own experience, becoming a mother changes one's life, making it more complex through demands as well as joys. Research on the effects of motherhood on women’s lives has emphasized the costs and largely ignored positive aspects of mothering or how having children may enhance women’s lives (Nomaguchi & Milkie, 2003). From my perspective, I feel it is important to retain a dialectical perspective on mother’s experiences and recognize the benefits and rewards of motherhood, along with the challenges and disappointments. The rewards and challenges faced by first-time mothers may be independent aspects during the same transition.
The changes that occur to a first-time mother’s sense of self are neither immediate nor automatic when the baby is born. This process is gradual and needs to be recognized as a normal part of the journey to identifying oneself as a mother.

The expectations that can fuel feelings of oppression and inadequacy can also serve to represent a normative adult role and give new mothers a sense of security and belonging (Marshall, Godfrey, & Renfrew, 2007; Sieber, 1974). Many families manage this transition without suffering mental health problems yet there has been little explicit theoretical or empirical analysis of how having children may enhance adults’ lives. In this vein, van Bussel, Spitz, and Demyttenaere (2006) investigated women’s mental health before, during, and after pregnancy and found that compared to a matched control group of non-pregnant women, the pregnant women were not more at risk for common mental health disorders during early pregnancy and postpartum than those who were not pregnant or who had not delivered recently.

In a paradoxical study, Wilkinson (1999) measured changes in positive mood simultaneously with changes in negative mood during the second trimester and again in the third postpartum month. Wilkinson found evidence of a modest overall increase in both positive and negative affect, for both men and women who were new and experienced parents. Wilkinson concluded that negative affect and positive affect should be considered as independent dimensions rather than aspects of a single mood dimension. This implies that it is important to consider the challenges as well as the joys and benefits of new motherhood as separate dimensions that may not be opposites. From this perspective, it is normal to feel overwhelmed with sadness and joy and love simultaneously. Judgments of weak or bad mothers are outside of this perspective.

*Self-Identity*
Given the changes accompanying parenthood from emotional, physical, and social perspectives, new parents' self-identities are in a time of reconstruction. Changes during parental transition have been identified by females as loss: loss of autonomy and time, loss of appearance, loss of sexuality/intimacy, loss of occupational identity, and loss of previous attachment to partner (Cowan & Cowan, 1995; Marshall et al., 2007). For the scope of this project self-identity will be referred to as the sum total of a being’s knowledge and understanding of his or her self. Our self-concept can be influenced by our attitudes, habits, beliefs, and ideas. Pieces of our actual identity include a sense of continuity, a sense of uniqueness from others, and a sense of affiliation.

Identity formation was developed by Erik Erikson, with the onset of the identity crisis in the teenage years (Broderick & Blewitt, 2003). Erikson believed identity crisis to be recurring, as the changing world demands us to constantly redefine ourselves. Erikson suggested that people experience an identity crisis when they lose “a sense of personal sameness and historical continuity” (p. 159). Motherhood may have an effect on women’s maturity in terms of integration and differentiation of the self (Marshall et al., 2007). Becoming a mother can be inclusive of an identity crisis when an individual is challenged to redefine her role to also include mother or caregiver.

Positive Aspects of Motherhood

Some of the positive aspects of becoming parents differed for men and women (Nyström & Öhrling, 2004). Mothers described feeling a sense of satisfaction and feeling complete love for the infant. Mothers also talked about pride and felt a level of amazement and enjoyment about becoming a parent, as well as experiencing a special sensitivity to the needs of the child. Finally, women described motherhood as rewarding. For example, Tronick, Beeghly, Weinberg, and
Olson (1997) studied whether or not mothers who scored low on self-report depression scales were denying their symptoms and suffering from an illusion of mental health. Their findings suggested that women could experience a positive postpartum state that was considered normal.

**Prenatal and Postnatal Education and Support**

Assisting and facilitating parents’ preparation for the transition and to move towards a sense of mastery involves acquisition of information and social support systems (Brissette, Scheier, & Carver, 2002). Time is also essential during the transition and allows people to gradually disengage from old behaviours and ways of defining self. Pregnancy, or the year before the child enters their lives, is an opportune time to begin this transition and prepare the mother and couple for their new roles (Salmela-Aro, Nurmi, Saisto, & Halmesmäki, 2001).

In today's society, most women becoming mothers for the first time are virtually on their own when it comes to figuring out how to balance and address the needs of their baby, their couple relationship, and their commitments to work outside the family (Mercer, 2004). Choi and colleagues (2005) interviewed new parents about the realization of new motherhood. The women in their study reported feeling unprepared for their new identity because motherhood had not been what they expected. Their preconceived ideas were strongly influenced by current society's values, beliefs, and myths of what motherhood should mean. Motherhood had either not been what they expected or they had not known what to expect.

Kralik and colleagues (2006) found that assisting people to transition towards a sense of mastery involves the acquisition of information while maintaining or developing strong connections with others and learning new ways to adapt to change by becoming more aware of themselves. Transitioning into motherhood may be viewed as a gradual developmental process women experience. The process is best initiated prior to the transition itself. That is, preparation
and awareness enables expectant mothers to navigate the changes to self more readily. Many researchers have found psychoeducational interventions with couples to successfully prepare each member for the new addition to their family as well as to personally prepare for the roles, responsibilities, and expectations placed on each member (Cowan & Cowan, 1995; Shapiro & Gottman, 2005). The difficulty lies with getting these resources to new parents and professionals working with families and pregnant or expecting adults.

In terms of assisting parents to manage the transition, Paris and Dubus (2005) found that staying connected socially to family, friends, and professionals that supported and educated the mother and father about the trials and tribulations was helpful. Setting realistic expectations also helped build confidence and prepare mothers and fathers (Warren, 2005). The meaning a mother makes of her situation as well as her use of problem-solving help with parenting and infant-care issues, may be critical to how adaptively the transition is negotiated (Affonso, De, Korenbrot, & Mayberry, 1999; Pridham & Chang, 1992).

Social construction theorists hold that our personality and ways of thinking may impact how this transition will be experienced (Gergen, 1985). Individuals respond differently to similar transitions because people have their own unique experiences, personal resources, and belief systems. These factors interact to influence our perceptions and coping strategies of the motherhood transition, which ultimately shapes our perception of the outcome of the transition (Kampfe, 1997). There seems to be many factors that are important to ensuring a healthy transition to motherhood.

Project Procedures
The project will consist of two sections. The first section will be a comprehensive review of the current literature of the effects on women who are transitioning to new motherhood. Specifically, the review will attempt to answer the following questions:

1. What is transition and why is it important to understand the transition to motherhood?
2. According to current literature, what factors influence a positive transition to motherhood and what are some of the negative consequences of an unhealthy transition?
3. What effect does the transition to parenthood have on first-time mothers and their sense of identity?

The main purpose for conducting this project which is a comprehensive literature review is to enhance knowledge around first-time mothering and to assist in preparing women for the transition to motherhood. Providing women with a comprehensive understanding of the changes they can expect during the transition to motherhood based upon qualitative and quantitative research is the final goal of this project. By increasing first-time mothers' level of knowledge, it is hoped that these women will be prepared for the transition when it occurs and that they will experience less mental health problems as well as less chances of family problems. This will also encourage healthy emotional development of their new child. The literature review will provide the direction and format for the handbook resource to be provided in the final project.

For this research I will use online databases such as EBSCO host, Academic Search Premier, Psychological and Behavioral Sciences Collection, and PsycINFO. The majority of English articles included in this literature review will be published from 1995-2008; however, other seminal articles may be included. I will also search reference sections of primary research studies identified through Mertens' (1998) criteria. The results will be synthesized into a user-
friendly format that will act as a learning guide for people entering this transition, with the hopes of preparing them for the journey of becoming a parent who is informed of the processes specific to this transition.

The second section will consist of the actual handbook, titled "Transition to Motherhood: Redefining Your *Self.*" To prepare mothers who are transitioning into motherhood, this handbook will be a self-help curriculum-based resource, and is suggested to fill the current gaps in maternal health care practices.

**Potential Implications of the Project**

The need to validate and support new mothers in their roles is crucial to the emotional well-being of each partner, the child, the family system, and our communities. The handbook resource developed from this project will be sent to Alberta Mental Health Board, as well as to the community health centers in each of the Health Regions in Alberta. The ultimate aim is that the amount of mental health problems experienced by first-time mothers may decrease as mothers are more prepared for their transition. This resource may help contribute to this aim. It is also important for mothers to access this information without having to rely on professionals to provide it for them. Giving first time mothers information that will empower them to foresee that changes occurring in the postpartum year are normal and expected. Mothers have the right to question internal and societal pressures about the *shoulds* of motherhood since they will gradually become more confident as they learn and grow with their infants. There are many beliefs and values surrounding mothering behaviors and women have a right to decide as they embark this journey the behaviors that fit with their unique identity. The proposed handbook may decrease anxieties and build confidence in women during this transition to motherhood.
References


