

Mental changes occurring in women in planned and unplanned pregnancy and after delivery

Zmiany psychiczne zachodzące u kobiet w ciąży planowanej i nieplanowanej oraz po porodzie

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Wstęp. Ciąża, poród i macierzyństwo mają istotny wpływ na psychikę kobiety. Ciężarna, przechodząc przez różne fazy, doświadcza zmian psychicznych, które prowadzą do pewnej dojrzałości i gotowości na bycie matką.

Cel. Ocena zmian psychicznych, zachodzących u kobiet w ciąży planowanej i nieplanowanej oraz po porodzie.

Materiał i metoda. W badaniu wzięto udział 100 kobiet w wieku od 19 do 58 lat. Wśród ankietowanych 78 planowało zajście w ciążę, a 22 nie. Narzędziem badawczym była ankieta, składająca się z 28 pytań, przygotowana na potrzeby niniejszej pracy.

Wyniki. U większości badanych kobiet rosnący brzuch wywoływał czułość i dumę (71% ciąż planowanych i 68% ciąż nieplanowanych). Kobiety w większości deklarowały, że duży brzuch nie wywoływał irytacji: ciąża planowana – 62%, ciąża nieplanowana – 64%. Połowa kobiet (w obu grupach) przyznała się do obaw, że po urodzeniu dziecka nie będzie atrakcyjna dla partnera. Kobiety nieplanujące ciążę w większości zadeklarowały (91%), że podczas ciąży zmieniły się ich potrzeby i życiowe cele. Kobiety, które nie planowały posiadania dziecka, częściej zaznaczały, że pod koniec ciąży stały się bardziej drażliwe (68%), niż kobiety, które ciążę planowały (51%). Nieco ponad 70% ankietowanych z obu grup odczuwało na miesiąc przed porodem dumę i spełnienie, które mieszały się ze strachem.

Wnioski. Kobiety, które nie planowały zajścia w ciążę, potrzebują więcej czasu od kobiet planujących ciążę do psychicznego zaakceptowania faktu posiadania dziecka. W początkowej fazie ciąży podchodzą do dziecka bardziej z zaciekawieniem niż z miłością. Trudniej im też nawiązywać emocjonalną więź z dzieckiem, np. poprzez rozmowy z brzuchem. Jednak po okresie dostosowywania się do nowej sytuacji doświadczają emocji podobnych do kobiet, które planowały posiadanie dziecka.

Słowa kluczowe: ciąża planowana, ciąża nieplanowana, zmiany psychiczne, baby blues

Introduction. Pregnancy, childbirth and maternity have a significant impact on women's psyche. Pregnant women, going through various phases, experience psychological changes that lead to certain maturity and readiness for being a mother.

Aim. Evaluation of psychic changes occurring in women in planned and unplanned pregnancy and after delivery.

Materials & Methods. The study involved 100 women aged 19 to 58 years. 78 of the surveyed women planned to get pregnant, and 22 of them did not. A questionnaire consisting of 28 questions, prepared for the study purpose, served as the research tool.

Results. A growing belly caused sensitivity and pride among most surveyed women (71% of the planned pregnancies and 68% of the unplanned ones). In general women declared that the big belly did not cause annoyance: planned pregnancy – 62%, unplanned – 64%. Half of the women (in both groups) admitted to the concern that after childbirth they would not be attractive to their partners. Women who did not plan pregnancy in general (91%) declared that during the pregnancy they have changed their needs and goals. Those women were more likely to become more sensitive in the last phase of pregnancy (68%), than the women who planned to be pregnant (51%). One month before delivery slightly over 70% of the respondents from both groups felt pride and fulfillment, mingled with fear.

Conclusions. The women who had not planned to get pregnant needed more time for mental acceptance of the fact of having a child, than the women who had planned to get pregnant. In the early stages of the pregnancy their attitude towards the child revealed more curiosity than love. It was also harder for them to make an emotional connection with their child, for example through conversations with their belly. However, after a period of adaptation to the new situation they were experiencing emotions similar to the women who had planned to have a child.

Key words: planned pregnancy, unplanned pregnancy, mental changes, baby blues

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Introduction

In our surroundings, there are many women who have been pregnant or have recently become mothers. With interest, we are witnessing the changes that occur in them. The physical changes are obvious, visible and generally well-understood, but the psyche of future mothers still arouses curiosity and fascination. Nowadays the period of pregnancy and motherhood is not the easiest for most women. Faced with the requirements, trying to be inspired by the ideal patterns created by the media, they often get lost in this difficult but such a natural role of being a mother.

Unfortunately, today’s women are more prone to stress and difficulties associated with maternity. Mental disorders associated with pregnancy and the postpartum period are more likely to occur in their cases. According to the statistics, about 13% of women suffer from the postpartum depression. According to the researchers, negative emotions such as frustration, sadness, anxiety and feelings of loneliness, badly affect the fetus and the mother, as well as her subsequent relationship with the child. Experiencing such emotions may cause the increase of the pregnancy-related discomforts, reduction of emotional ties with the fetus and later with the infant and even premature delivery, low birth weight and subsequent problems in the child’s development.

Many factors can affect how a woman copes with new tasks imposed on her. The capacity to adapt to a new role is determined by the attitude of the partner, family, friends, mental state of the future mother and her biological predispositions. It is also worth noting that the feeling of anxiety, fear paired with joy, excitement and love for the unborn baby is quite normal and is associated with the need to adapt to new social functions, as well as with acquiring some mental maturity and developing new character traits. Emotional dysregulation is also associated with a number of physiological changes occurring during pregnancy.

It is important to understand that every woman is a separate being, differently reacting towards the ongoing mental and physical processes in her body. However, the process of getting ready for the motherhood for everyone of them is in some way long and difficult. Nevertheless, all of its stages are essential for mental preparation and getting used to the new situation.

Aim

The purpose of this work was to assess mental changes occurring in women in planned and unplanned pregnancy and after giving birth.

Materials and Methods

The study involved 100 women aged 19 to 58 years. 78 of the surveyed women planned to get pregnant, and 22 of them did not. The youngest woman, at the time of becoming pregnant was 15 years old, the oldest was 43. The number of pregnancies ranged from one to four. Among the interviewees there were women with primary education, secondary/vocational and higher education.

Tests were carried out using the diagnostic survey. A questionnaire consisting of 28 questions was the research tool. The questions regarded the emotions accompanying pregnant women, the impact of their partner’s and family’s support, approach to one’s own body and fears related to pregnancy, birth and motherhood. Most of the questions were single-choice, only questions 26 and 28 were multiple-choice. The women were assured of anonymity. All were at least 18 years old.

Results

The first aim of the study was to determine the women’s attitude to their own bodies, both in pregnancy and after childbirth. Figure 1 shows the awareness of body changes during pregnancy.

The majority of women were aware of the changes in their bodies. 82% of the respondents from the group of planned pregnancies, and 86% of the respondents from the group of unplanned pregnancy pointed out this response. The reception of physical changes associated with pregnancy in the majority was positive; some women indicated that these changes did not concern them at all. The vast majority of respondents in this group were the unplanned pregnancies.

For the question about pregnancy-related discomforts such as nausea or constipation, 55% of the women with the planned pregnancy admitted to suf-

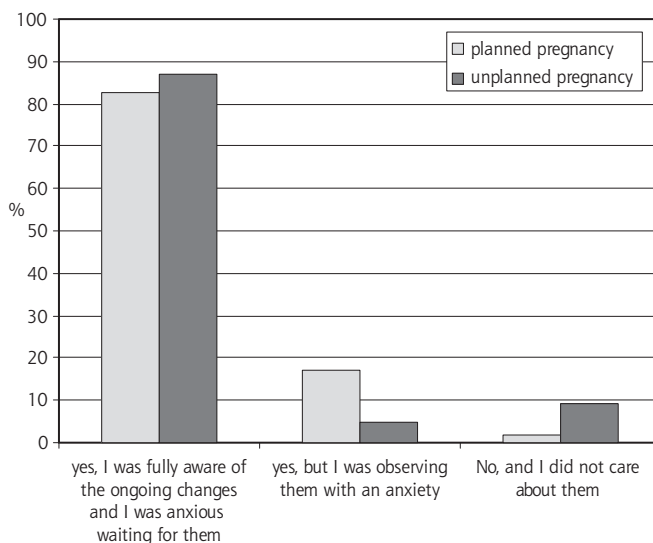


Fig. 1. Awareness of body changes during pregnancy

fering from such conditions, but they did not cause negative emotions. 59% of the respondents with the unplanned pregnancy did not suffer from any of such discomforts. None of the surveyed women indicated that the discomforts evoked negative emotions and fear from the presence of the “foreign body”.

A growing belly caused the feelings of tenderness and pride among most surveyed women (71% of the planned pregnancies and 68% of the unplanned ones). In a few women the belly did not cause any excitement, and in even fewer respondents it aroused negative emotions. In general, the women declared that the big belly did not cause annoyance: planned pregnancy – 62%, unplanned – 64%; however, in some respondents it evoked discomfort and interfered with breathing. A half of the women (in both groups) admitted to the concern that after childbirth they would not be attractive to their partners, however, not to the point that they would abstain from sexual contacts. Around 30% of the women did not experience the difference in perceiving their own body, and almost 20% were afraid of undressing in front of their partners.

Another aspect of the research comprised emotions that accompany pregnancy, delivery and having a child – from joy and pride, to fear and anxiety – they are presented in figure 2.

The study shows the difference in the reaction to pregnancy between the women who planned the pregnancy, and those surprised by it. Up to 87% of the women who had planned the pregnancy replied that they felt pride, strength, gratitude, drive and joy due to the fact that they carried new life. Only 59% of such responses came from the second group. The women with the unplanned pregnancies far more often than the women with the planned ones answered that the confirmation of pregnancy resulted in anxiety, grudge, fear or weakness – 27%. Also they more frequently reported not feeling any strong emotions: unplanned pregnancy – 14%, planned – 4%.

The next question tested how long the women needed to accept the fact of being pregnant (fig. 3).

The research shows that the women who had not planned to have a child were adjusting to this thought much longer. 50% of them needed several days, and 9% were denying their pregnancy for a long time – for comparison, no woman from the group of planned pregnancies indicated such response. The women who planned to have a baby in 68% immediately accepted the fact of being pregnant – which is as much as 27% more than in the second group. Only 32% of the future mothers needed a few days to get used to this thought.

The study also shows that modern women generally are not afraid of the loss of freedom and independ-

ence – over 50% of them were of an opinion that the child would not limit them. Interesting is the fact that the women with unplanned pregnancies in most cases declared changing their needs and goals during their pregnancy – 91% of their responses. In the group of women with planned pregnancies there were about 22% less of such responses. The women did not experience changes in leisure time and social contacts, both groups were quite consistent – pregnancy is not a disease and does not influence those aspects.

The feelings of women during the ultrasound were analyzed next (fig. 4).

According to the responses, the women in the planned pregnancy group mainly felt happiness and affection during the first ultrasound – especially when they heard the heartbeat of their child (90%). Only 10% said that they were curious, however it was difficult for them to imagine that the fetus seen on the screen was inside their body.

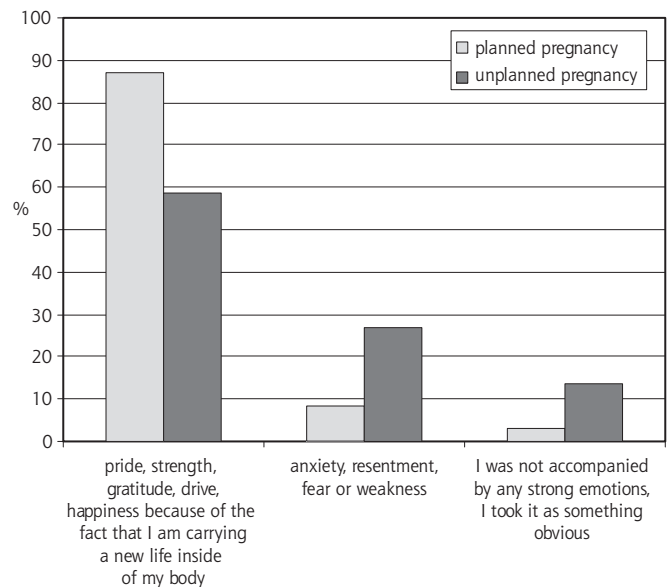


Fig. 2. Emotions accompanying pregnancy, delivery and having a child

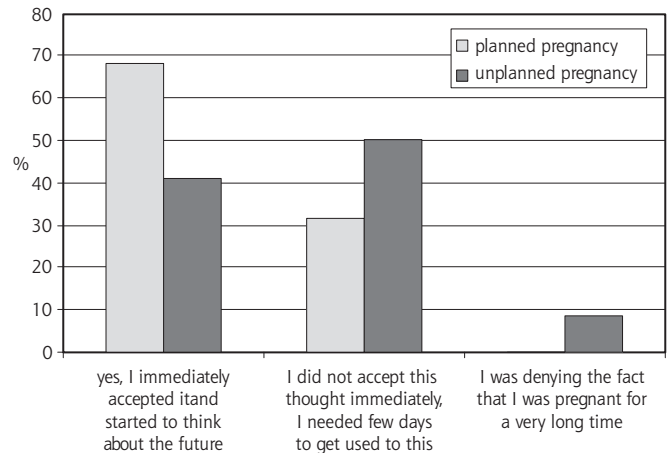


Fig. 3. Time needed by women to accept the fact of being pregnant

Among the women from the unplanned pregnancy group such responses were given by more respondents, as many as 32%. The rest felt happy and touched (68%).

Most respondents were talking to their belly during the pregnancy; they were having conversations with their child. 85% of the women with planned pregnancies and 77% of the ones with unplanned pregnancies thought that the fetus was able to hear them, recognized their voice and thanks to it was calmer. The rest said that they would feel strange talking to their belly.

A little over 70% of the respondents from both groups felt pride and accomplishment, mingled with some fear one month before giving birth. Around 25% of the women felt self-confident and calm. Only a small percentage was frightened by the vision of having a child. The women who had not planned to have a child pointed out that in the last phase of their pregnancy they felt more agitated (68%) than the women who planned the pregnancy (51%).

To the question how they remembered their delivery, most of the respondents consistently answered that it was both a beautiful experience and a great effort – planned pregnancies 74%, unplanned pregnancies 68%. Around 20% of the respondents from both groups said it was a traumatic experience, and they did not want to contemplate it. 9% of the women with planned pregnancies and 14% of the women with unplanned pregnancies reported being in such state of shock that they did not remember their delivery.

Analyzing the syndrome of the baby blues, 47% of the women with the planned pregnancies and 59% with the unplanned pregnancies did not suffer from depressed mood, on the contrary – they felt pride and happiness. 51% and 36% respectively felt tiredness and lethargy, but they showed the interest in their child. Only 1% of the

women in the planned pregnancy and 5% of the women in the unplanned pregnancy suffered from the attacks of crying and did not want to look at their baby.

After returning home, 55% of the mothers who had planned to have a child and 59% of the ones who had not planned a child, adapted very fast to the new situation. Around 40% from both groups felt slightly unsure, but with the help from the family were able to manage. 5% of the planned pregnancy mothers answered that they were not able to manage and that the new responsibilities were too much for them. No such reply was reported among the mothers from the other group.

Around 60% of the interviewed from both groups claimed that regardless the vast amount of information, they were trying to act according to their own values. However 40% felt the pressure from the family, environment and stereotypes, and were getting a lot of confusing advice.

Being a mother is a very special role for every woman. To the question whether the women felt accomplished as mothers, 65% of the group of the planned pregnancy answered that sometimes they feel tired, but the motherhood brought them happiness. Interestingly, the majority (55%) of the women in the unplanned pregnancy answered that the motherhood was amazing and gave them satisfaction. None answered that they did not feel accomplished as a mother.

For the multiple choice question: “What are your associations with being a mother?” the women answered as follows (fig. 5):

- from the group of planned pregnancies: 31% answered – with beautiful moments and happiness, 13% – with hard work, 1% – with lots of sacrifices, 55% – all of the above.
- from the group of unplanned pregnancies: 45% answered – with beautiful moments and happiness, 5% – with hard work, 5% – with lots of sacrifices, 45% – all of the above.

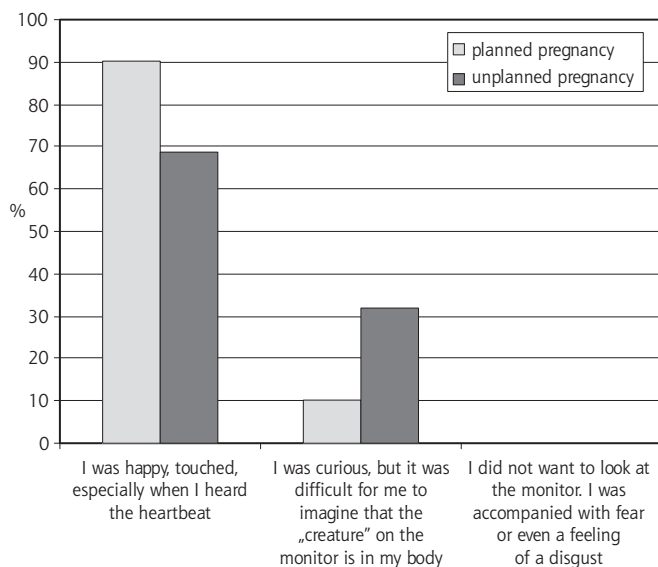


Fig. 4. Feelings of women during ultrasound

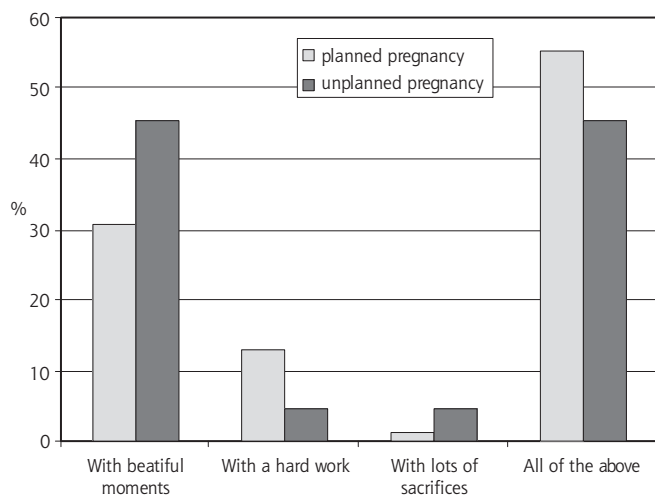


Fig. 5. What are your associations with being a mother?

At the end of the research the most important question, related with pregnancy and postpartum period, was asked: What were the women the most afraid of, and whose help did they appreciate the most. For the most respondents, the partner was supportive during pregnancy: 88% of the women in the planned pregnancy and 73% of the women in the unplanned pregnancy indicated that answer. There were more respondents in the unplanned pregnancy (15%) than in the planned pregnancy (12%) who indicated that they did not have any support from their partners and were left alone (fig. 6).

Furthermore, the research determined what sort of help was offered after the baby was born.

Figure 7 shows who was the most help right after childbirth.

When it comes to help after delivery for the women who planned their pregnancy, the most important was their partner's help (56%) – there was a significant difference in comparison with the group of the women who did not plan their pregnancy, they indicated their partner only in 28% of the responses.

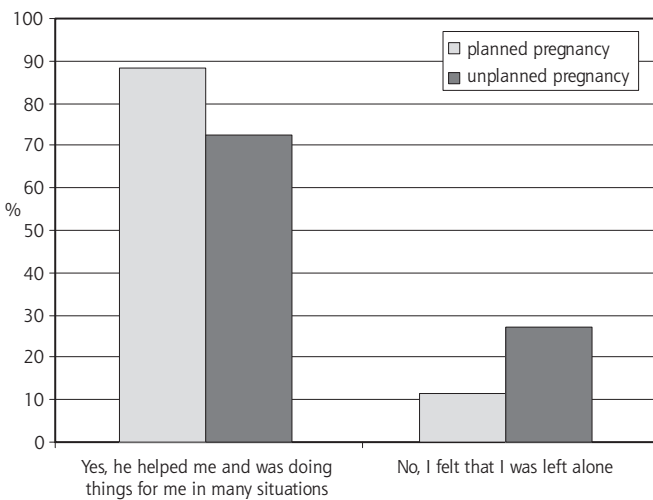


Fig. 6. Support from pregnant women's partner

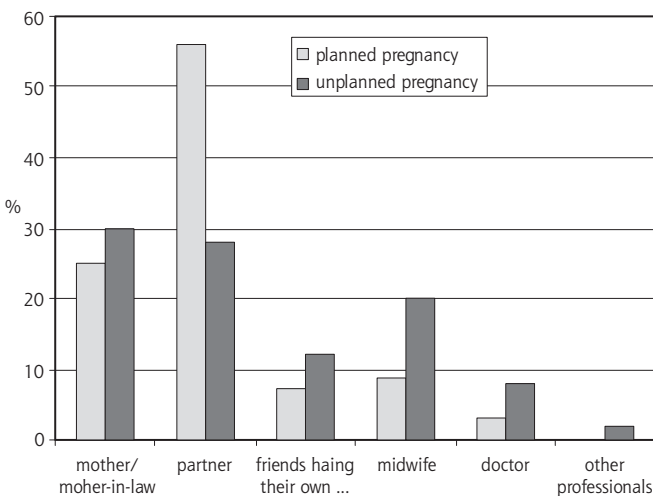


Fig. 7. Source of help after childbirth

For the interviewed who had not planned their child the most important support came from their mothers (30%).

Then as follows:

- for the women in the planned pregnancy the most important support was from: mother – 25%, midwife – 9%, friends with children – 7% and doctor – 3%,
- for the women in the unplanned pregnancy the most important support was from: midwife – 20%, friends with children – 12%, doctor – 8% and other medical specialists (psychologist, therapist) – 2%.

Discussion

The period of pregnancy and delivery introduces many changes in women's life. It comprises the physical, emotional and also social and spiritual aspects [1]. The process towards the readiness of becoming a mother is long and difficult, where positive and negative emotions often mix together. However, all the phases are essential for the mental preparation and getting used to the new situation. Thanks to the changes the women experience during and after their pregnancy, the motherhood is happy and satisfying, regardless the hard work and sacrifices.

Analyzing the responses given by the women taking part in the research, it turns out that each of them in their own way was preparing herself to the new role of being a mother. Going through different phases such as shock, amusement, happiness, and awaiting lead to a certain maturity and readiness for welcoming new life into the world. The physical changes that accompany pregnancy help the woman to accept the fact of carrying new life inside her body. The fears help to realize great responsibilities and are an essential element of that unusual state.

Libera [2] describes that how and how strong the women reacts is influenced by her emotional needs. It also depends on the individual approach to the fact of being pregnant, motherhood and its consequences. The support from the relatives and professionals during that period is important. Lepiarz [3] points out that most important in that period is the possibility of having a casual conversation, without embarrassment about one's feelings, being accepted by the family and the loved ones. The partner's attitude of love and acceptance, is also meaningful.

Women realize that pregnancy has a great impact on their body, which may never return to its previous condition. Some mothers have to seek their sexuality all over again. Most women were aware of the changes undergoing in their bodies – 82% of the respondents from the group of planned pregnancy and 86% of the

respondents from the group of unplanned pregnancy. Lavender [4] also noted such changes and pointed out that it was related to the self-esteem after childbirth.

Interactions between the mother and the child during pregnancy have an important influence on creating emotional bond that gets stronger after delivery – the conversations with an unborn child are the way of giving the child identity, which helps the women become aware of the reality of pregnancy. During pregnancy the woman's goals, drives and needs change – her mentality is adapting to the growing family. At the same time the future mothers do not limit their social contacts and they try to spend their free time just like they did before pregnancy. The women who did not plan to be pregnant take longer to accept pregnancy. They have a more difficult time coping with changes that occur in their bodies, they need more time to accept the fact that they are pregnant and they feel that some phase of their life is coming to a close. More often they treat the fetus as a separate being, they are more curious than emotional; they less often personalize the child. Regardless of those facts, after the time needed for adjustment, they experience the same emotions as the women who planned to be pregnant.

Often the pregnancy-associated feelings and discomforts depend on the attitude of the future mother. Women who planned pregnancy are more likely to experience discomforts associated with nausea or vomiting than the women in the unplanned pregnancy. This is connected with the approach of the first group of women – they usually prepare earlier and try to gather information regarding pregnancy and motherhood. Having read about various discomforts, they often mentally await with anticipation the slightest signs of them, even in the very early stage of pregnancy. The moment when a woman finds out she is pregnant is a very important one. Emotions that accompany this moment have a tremendous influence on the future attitude towards the child – they positively consolidate the feeling of safety and acceptance. The future father's reaction is equally important – especially in the unplanned pregnancies.

Building an emotional bond with the child during pregnancy is also essential. The woman hears the heartbeat of the fetus, feels its movement, sees the ultrasound images – all of that make her see the baby as a separate being. The research shows that the women's feelings during the ultrasound were positive (90%). The future mothers started to talk to their babies, touch the belly, and play soothing music. That is the way of emotional approach to an unborn child, of creating some interaction and intimacy, which are going to be stronger after the baby is born. Imagining the baby's characteristics, behaviors and gender can reflect the desired image of the future child. Libera

[6] also believes that during pregnancy the emotional contact with the child is getting stronger. Additionally it helps women to feel internal power and energy.

The first days after childbirth bring other challenges for a young mother. Burdened with new obligations, she has to face up to the image of an ideal woman created by the media. She has to choose what she should, can or should not do. Being "bombarded" from everywhere with advice from the family, friends and guidebooks, women are not able to make their own decisions. This is when some doubts appear: "Am I a good mother?", "Why am I not coping?" At such moment the partner's and family's help is especially important. As Podolska et al. [8] notices, disturbed relations with the partner, lack of safety, loneliness, lack of support can be a stress factor, negative for women in the perinatal period. Not only the partner is very important during that period. According to the research conducted on 5 000 mothers online by Netmums it turns out that women feel lonely, isolated, and even not fully healthy. The authors claim that it is caused by pressure related with new responsibilities and lack of support from the local societies. Over a half of the mothers believed that during their pregnancy, delivery or postpartum period, they suffered from some kind of depression [10].

The sadness that appears after delivery or so-called "baby blues" is the most common and the least severe emotional disorder after childbirth. Mood swings, sleeping problems, tiredness, incidents of crying are some of the symptoms of this syndrome. It starts in about 3-4 days after delivery and lasts approximately two weeks. This emotional dysregulation is not pathological and is probably caused by hormonal changes in the woman's body after giving birth. In general, support from the relatives, caring medical staff, and sometimes conversations with a clinical psychologist are enough for the young mother to feel better. Waksmański [5] has also noticed such feelings. He believes that such emotional dysregulation is the most common during the postpartum period. Other authors note that the cause of emotional disorders in the perinatal period have not been unambiguously identified yet [6].

Even though, according to Chaudron et al. [7] around 90% of women after childbirth suffer from the baby blues syndrome, and Adewuya [9] pointed out that its strongest symptoms appear between 3-5 day after delivery. This research shows that 47% of the women who planned their pregnancy and 59% of those who did not plan it, did not feel any kind of mood swings, on the contrary – they felt proud and happy.

There are a lot of fears that accompany women through their motherhood. Such fear is natural and

is related to the child's care – its safety and future. At the same time, women worry about what their lives are going to look like, whether they are going to be able to manage all the new responsibilities, and whether their partners are going to be good fathers. As one can see, there are a lot of aspects to worry about.

Conclusions

1. The women who had not planned to become pregnant took much longer to adjust to the fact that they were pregnant. 50% needed several days, 9% were denying that fact for a very long time. In the women who had planned to be pregnant, 68% immediately accepted the fact of being pregnant – i.e. 27% more than the other group. Only 32 % of the future mothers needed a few days to get used to that fact.
2. 87% of the women who had planned their pregnancy and 59% of the ones who had not, answered that they felt pride, strength, gratitude, drive and happiness because of the fact that they were carrying new life.
3. The women who had not planned a baby far more often than the ones who had planned answered that when they found out they were pregnant they felt fear, resentment or weakness – 27%.
4. Analyzing the possibility of the “baby blues” syndrome, 47% of the women in the planned pregnancies and 59% of the women in the un-

planned pregnancies indicated that they did not feel any mood swings, on the contrary – they felt proud and happy. Accordingly, 51% and 36% of the women felt tired and sleepy, but they were interested in their child. Only 1% of the women in the planned pregnancy and 5% in unplanned pregnancy felt sad, and had incidents of crying and did not want to look at their child.

5. A half of the women in both groups admitted that they were afraid that after childbirth they would not be attractive to their partners, however not to the point that they abstained from their sex life. Around 30% of the women did not feel any changes in perceiving their body, and almost 20% were afraid to undress in front of their partners.

Final summary

Pregnancy, childbirth and maternity have a significant impact on women's psyche and cause some changes. The mental changes are the elements of adapting women to the new social role of a mother. There are differences in adapting to this new situation between the women who planned their pregnancy and the ones who did not. Each woman on her way to motherhood is accompanied by both positive and negative emotions. The mental changes occurring in pregnant women have an important impact on creating emotional bonds that consolidate after childbirth.

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