

Becoming a second-time mother: the experience of too much and the limit

Tornar-se mãe de um segundo filho: a experiência do muito e do limite
Ser madre de un segundo hijo: la experiencia de lo mucho y del límite

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Abstract

Objective: To understand the woman's experience of becoming a second-time mother.

Methods: The study design adopts a qualitative methodology with a hermeneutic phenomenological approach. Data collection was performed in two daycare centers in the Leiria area. Phenomenological interviews were conducted with 11 women with a second child aged between 18 and 24 months. Van Manen's guidelines were taken into account in the activities developed in the data analysis process.

Results: Becoming a second-time mother emerged as "a completely different experience" in that two children and a family require the performance of numerous activities by the woman, which leads her to the experience of too much and the limit, of going beyond herself in the search for a new self who wants to find the essential. The search for help is the path taken by the woman at a time when she needs more support.

Conclusion: This study opens a new perspective of understanding the phenomenon of transition to parenthood and may have an impact on nurses' clinical practice.

Resumo

Objetivo: Compreender a experiência vivida da mulher ao tornar-se mãe de um segundo filho.

Métodos: O desenho do estudo adota uma metodologia qualitativa com abordagem fenomenológica hermenêutica. A colheita de dados foi realizada em duas creches da área de Leiria. Foram realizadas entrevistas fenomenológicas a onze mulheres, com um segundo filho, de idade compreendida entre os 18 e os 24 meses. As atividades desenvolvidas no processo de análise de dados tiveram em consideração as orientações de Van Manen.

Resultados: Tornar-se mãe de dois filhos emergiu como "uma experiência completamente diferente", na medida em que dois filhos, uma família, exigem a realização de inúmeras atividades pela mulher, que a conduzem à experiência do muito e do limite, do ir além de si, na procura de um novo eu, que quer encontrar o essencial. A procura de ajuda é o caminho percorrido pela mulher, num tempo em que precisa de mais apoio.

Conclusão: Este estudo abre uma nova perspetiva de compreensão do fenómeno de transição da parentalidade podendo assim ter impacto na prática clínica dos enfermeiros.

Resumen

Objetivo: Comprender la experiencia vivida por una mujer al convertirse en madre de un segundo hijo.

Métodos: El diseño del estudio adopta una metodología cualitativa con enfoque fenomenológico hermenéutico. La recopilación de datos se realizó en dos guarderías de la zona de Leiria. Se realizaron encuestas

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fenomenológicas a 11 mujeres con un segundo hijo entre 18 y 24 meses de edad. Las actividades desarrolladas en el proceso de análisis de datos siguieron las instrucciones de Van Manen.

Resultados: Ser madre de dos hijos surgió como “una experiencia completamente diferente”, en la medida en que dos hijos, una familia, exigen la realización de incontables actividades por parte de la mujer, que la conducen a la experiencia de lo mucho y del límite, de ir más allá de sí misma, buscando un nuevo yo que quiere encontrar lo esencial. La búsqueda de ayuda es el camino que la mujer atraviesa, en un momento en que necesita más apoyo.

Conclusión: Este estudio abre una nueva perspectiva de comprensión del fenómeno de transición de la parentalidad y puede tener impacto en la práctica clínica de los enfermeros.

Introduction

Becoming a second-time mother, as a transition, leads to health needs, as the woman is impelled to incorporate new knowledge and mobilize new capacities and resources in order to adapt to her new role and new identity.⁽¹⁾ Understanding how this phenomenon is experienced by women, considering the complexity inherent to the fact of being a unique person and while “being-in-the-world”^(2,3) / “a being-in-the-world”^(4,5) at a certain time, will help the woman to live this moment. This help facilitates the care of the child and the integration of this new being within the family, as well as the adjustment of the woman to this new condition in order to overcome the anxiety and stress experienced in this moment of vulnerability.^(6,7)

“Being the mother of a child is different from being the mother of two”,⁽⁸⁾ because it implies that the woman receives the second child in his/her unique place so that this child feels confident in the environment embracing her/him.⁽⁸⁾ This experience involves different maternal feelings and expectations, in addition to being a process of growth and transformation⁽⁹⁾ that interferes with her position in the family, with her relationship with the baby, the sibling and the husband.^(7,8,10-12)

The literature suggests that the change experienced by women who become a second-time mother can be demanding and exhausting, lead to burnout and new tensions in the marital relationship,⁽¹¹⁻¹³⁾ and is a favorable moment for the emergence of problems, such as depression, anxiety and tiredness.^(8,11,12,14,15)

Moreover, while a process built on interaction, it poses “as a female issue that persists in the contemporary world, insofar as it triggers gender roles and contributes to the greater burden of women”.⁽⁷⁾

In addition, the birth of a second child also gives rise to brotherhood and can trigger conflicts.^(8,11,12,16)

In order that the mother is able to offer her presence and embrace to the second child, she needs to feel supported,^(1,8,15) a preponderant aspect in this path of adaptation and the search for balance.⁽¹⁾ Here, the husband exercises a fundamental support function.^(1,7,11,17,18)

Although being the mother of a first or second child are qualitatively different experiences,⁽¹⁷⁾ there are few studies describing the experience of this transition for the second time from the mother’s point of view in a profound way, not focusing only on pregnancy, postpartum or the weeks immediately after birth.^(1,11,19-21)

In the scoping review conducted by Rodrigues and Velez⁽²¹⁾ with the objective of identifying and mapping the existing scientific evidence on women’s transition when becoming a second-time mother, nine studies published between 1997 and 2013 were identified. In this review, was reached the conclusion that more studies in this scope should be conducted.

In the convergence of the exposed dimensions was defined the research question: what is the meaning of the woman’s experience when becoming a second-time mother? The objective of the study was to understand, from the woman’s point of view, the lived experience of becoming a second-time mother. It is important to accept the uniqueness of the lived world by taking into account the centrality of the person that leads to the exploration of the phenomenon essence in order to find person-centered ways of caring that meet one’s complexity and uniqueness.

Methods

The present study adopts a qualitative methodology and a hermeneutic phenomenological approach.

The activities developed in the data analysis process took into account Van Manen's guidelines.^(22, 23)

The favorable opinions of the Research Ethics Committee of the Escola Superior de Enfermagem de Lisboa (No. 817/2016) and the National Data Protection Commission (No. 4156/2016) were obtained. Consent was also requested from the principals of daycare centers and study participants.

Data collection was conducted in two private daycare centers in Leiria, Portugal. The experiential material was collected in phenomenological interviews lasting approximately 60 minutes, with 11 second-time mothers of children aged between 18 and 24 months. Participants who met the aforementioned eligibility criteria and had interest in participating in the study were identified jointly by the direction of daycare centers and the educators.

A written invitation was made and the time and place of the interview was arranged according to the participant's preference. The researcher had a training before the interviews, which occurred between March 2016 and March 2017 in a meeting room of the daycare center or at the homes of participants.

Mothers were aged between 26 and 43 years and lived with their companions, who were the parents of their children. They worked full time, except for one woman who was a student. The time interval between the birth of children varied between 21 months and five years.

Following the guidelines proposed by Van Manen^(22,23), participants were asked to identify a significant and concrete situation regarding the experience of becoming a second-time mother, describing what had happened, what they did, said and felt in that situation, namely in relation to the body, space, time, things and others.

The interviews were audio recorded and transcribed. A moment of familiarization followed, with immersion in the phenomenon under investigation through the reading and re-reading of reports.^(22,23)

After organizing the approach described by Van Manen⁽²²⁾, the themes or experiential structures related to the phenomenon were isolated. For this construction, collaborative analysis was also used, with participation of supervisors, teachers and researchers specialized in nursing who belong to the

research area "Lived experience and epistemology of practice".

Results

After analysis of the narratives, four essential themes emerged: motivation, fear(s), the experience of the encounter and (re)encounter and the experience of too much and the limit of oneself: "I need more...".

The experience of too much and the limit of oneself: "I need more..." was one of the essential themes identified. This experience is related to the countless activities that participating women have to undertake, which lead them to the experience of going beyond themselves in search of a new self who wants to find the essential but needs help.

In this article, we presented the theme of the experience of too much and the limit of oneself: "I need more..." and its four essential subthemes - "It is giving our all...", "I want to be here, but I also want to be there...", "The experience of the essential", "The too much but with support of the other... of the husband... of the family... of the nurse"

The extracts of the narratives presented below will be identified by the letter E followed by an Arabic number as a way of maintaining the anonymity of women participating in the study.

"It is giving our all..."

The too much is continuously present in the reports of study participants as something extreme, in which participants reveal giving their all, as if transcending their self. The experience promotes a duality in her feeling in the face of the present time lived, a time in the woman's daily life in which, reflecting on a past time, she feels out of time for herself.

Let us see the following narratives:

"It is all too much, it is a lot to have two small children. Of the good, and I mean, it is not bad ... Bad as tiring, of what is demanded from us, of ... taking us to exhaustion. Yes it is! It's all too much" (E1).

"And when the girl was born (...) there was a time of the day when I had to manage the tasks or the

things I had to do on my own: feeding, preparing the food, doing all the housework, basically the things we have to do” (E0).

“It was starting over again. Because I was going to... go back to a phase (...) that was already over. What I feel most, is the lack of time for myself. (...) it is giving our all.” (E3).

The too much, the everything, almost an extreme, elapse the time of these narratives, which in their essence and limit assume a positive, good character, although for a self that feels tired, on the edge.

“I want to be here, but I also want to be there... I wasn't being a proper mother...”

Seeking to understand the experience of the phenomenon, becoming a second-time mother, a feeling of duality, ambivalence, and suffering was identified, as emphasized by participants.

Women participating in the study report that, at the same time, they want to be here and take care of a child, “but they also want to be there”, taking care of the other child. Such is the demand that at that time, they feel they are not being good mothers, or rather, they are not being proper mothers. They feel that they are not performing their role well by not taking into account the individuality of each child. This feeling is visible in the following narratives:

“So, I was bathing the oldest and the smallest, in the crib, starts to whine. I said to the older one, “Look, wait just a little bit, I'll go check on sis, okay?” (...) I went there in a flash. I see “ok, ok, everything is fine with you, what you want is (...) lap”. (...) It is complicated (...). Oh, I felt powerless, (...) I want to be here, but I also want to be there (...)” (E1).

“I realized, ten at night, in the girl's room, sitting in a chair, like these children's chairs (...) with her lying in bed, I was reading her a story, at the same time that I was breastfeeding the boy. (...) I felt that (...) I wasn't being their mother and I wasn't being a proper mother (...)” (E5).

The decision making, the choice and the definition of priorities that can lead to the limit, to the disease, are experienced by participants at this time, as a daily, intense and constant challenge.

The experience of the essential

In this challenging decision-making process, in a time when there is no time, the participating women allude to their lived experience also as the experience of meeting the essentials. In the midst of too much and the limit in which they live, it is in the children that they encounter and (re)encounter what is essential to their lives, as follows:

“A person has no time, everything is in a rush (...). In the morning it is waking up, it is having breakfast, it is taking them to school, it is working (...). Then, they arrive, it is bathing, the eldest goes to study, fix something for dinner, (...) having to guide all things at home. (...) But then, in those moments when I am more fragile (...). It has happened to me with my D. telling me “Hey, Mom! I'm here, I'm here, I like you a lot (...)” (...) and only then I realize (...). The most important thing is here (...). It's fantastic!” (E8).

The appreciation of the other, who is a child, of being with him, of the existing affection, transforms and gives meaning to these women's experience, allowing them to live this experience positively.

The too much but with support of the other... of the husband ...of the family ...of the nurse

The search for help is the path taken by participating women at a time when they need more support to respond to the moment they are experiencing. Although they have the knowledge from the experience of transition to parenthood with the presence of the first child, this moment brings new challenges and responsibilities associated with a greater weight felt and lived.

The husband takes on a fundamental support role. In the narrative presented below, the woman portrays her feeling about her transition to parenthood and the difficulty in responding to everything, as it used to be in the past, a situation that even

caused the organization and (re) construction of the whole family in the same space.

“At the beginning, perhaps, we might think that things can still continue as they used to be (...). But then, with the second one, we start to realize that it is difficult to be able to undertake everything (...) we started to think about going to live with him [in the same house]. I don't know if because of the burden, if because of him not participating in daily life (...) as much as I need (...) but the truth is I need more...” (E0).

In addition to the primary support of the husband, participating women reported the support of other family members and nurses.

“I have a husband who is super! (...) They bathe together, but I bathe one, he bathes the other. (...) My daughter is now going to my mother-in-law for a week (...). It will cost me a lot, but thankfully because she likes it. Hard, but I also need a little space, the father and I.” (E6).

“And suddenly, the nurse has everything ready [to vaccinate M.] and says to me, “Did you come alone?” (...) and I (...) “yes, do we need someone else here? I didn't realize we needed”. And suddenly ... she (...) put H. on her lap [and] took him” (E5).

This is a period of the life cycle in which the way of being-in-the-world and with-the-others makes the support of others pertinent and necessary, namely of a professional intervention.

Discussion

As revealed, “being a mother of two is a completely different experience” (E10). Two children, two beings, one family, require the performance of numerous activities by the woman, which lead to the experience of too much and the limit, of going beyond oneself, described as “giving our all”.

In this search for a new self, a new balance, time takes on a preponderant value. So, it is important to

ask ourselves: What is the meaning and the sense of time for these women? Is it the time on the clock or is it the time lived?

In the study he developed - and where he tried to describe the experience of transition to parenthood from the perspective of the woman who is a second-time mother - O'Reilly⁽¹⁾ identified the theme, “taking a break”. This theme emerged as a common element, insofar as participants reported feeling the need to take a break, although this desire took on a low priority, given the so many other things they had to do.

Heidegger proposes time as the horizon of all understanding and interpretation of being as a “fundamental ontological function”.^(2,3) In his words, “if the being should be apprehended from the time and the different modes and derivatives of the being are only actually understandable in their modifications and derivations in the perspective of time and with reference to it, then, what shows itself is the own being, and not just the person while being and being “in time”, in its “temporal” character”.^(2,3)

Thus, involved in this present time that goes back to the past and projects itself into the future, participants also live a time of duality, in which “they want to be here, but also there...”, in which “they feel they are not proper mothers”, who do not fulfill their maternal role. This ambivalent feeling brings suffering, because they have to decide, set priorities, which requires self-control. In the studies they developed, Santos⁽²⁴⁾ and Henriques⁽²⁵⁾ also portray this darker side of motherhood.⁽²⁶⁾

However, for participating women, the essential is there. The essential, which is the other, the presence of the other ... But, for this, it is necessary to see it, because, as Merleau-Ponty refers⁽²⁷⁾, “to see, in principle, is to see more than what is seen”.

The husband, the family, the nurse, guide the path of these women. In several studies, these actors are also identified as facilitators of this transition.^(1,24,28) However, since being one child is different from being two, the availability of support figures may not be total, but counted. In his study, Santos⁽²⁴⁾ also highlights that the insufficient preparation for the performance of the maternal role by health professionals, is identi-

fied by participants as an element that makes this transition more difficult.

Is it important to ask about the place of the man, the partner, the father, in this transition? Does it translate into support for the woman and/or child-care? Several studies focused on this transition point to issues of gender, relationship and marital satisfaction,^(11,12,29-33) namely the greater conflict of roles and isolation reported by women in the experience of this transition to parenthood. Marital communication, depression and social support are identified as important targets of the intervention.⁽¹²⁾

Nevertheless, for participating women, this is an experience of small big things. It is above all, a “positive experience”.

Although it is a limitation that the findings presented here only portray one of the essential themes identified, they allow an opening to the understanding of the phenomenon, and its representativeness or extrapolation is not possible nor intended.⁽²³⁾

The facilitation of transition processes constitutes a focus of attention in the nursing discipline.^(34,35) The experience of this phenomenon requires the operationalization of professional human care aimed at strengthening skills, identifying resources and minimizing the vulnerabilities.⁽⁷⁾ The presented findings and their meaning for nurses will open the horizon of their understanding on the experience lived by these women and will certainly impact on their way of being-present in daily care.

Conclusion

Being a mother of two is a completely different experience in that two children, two beings, one family, require the performance of numerous activities by the woman, which leads to the experience of the too much and the limit, of going beyond oneself in the search for more and for a new self that wants to find the essential. Supporting the human experience of women when they become a second-time mother in a unique way and as it is lived, unveils and promotes the understanding of the essence of this phenomenon, thereby producing knowledge that sustains forms of person-centered care that

attends their complexity and uniqueness, and supports the decision-making process inherent to an evidence-based nursing care practice.

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Collaborations

Rodrigues J and Rebelo-Botelho MA contributed to the design of the project, analysis and interpretation of data, writing of the article, critical revision of the intellectual content and approval of the final version to be published.

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