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<th>STRESS OF MOTHER DURING PREGNANCY AND POST-PARTUM STAGES</th>
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Mother-child relation is one of the most remarkable biological, psychological, social and inter-dependent relation existing in the sphere of human bondage and social matrix. The paramount importance of the relation is not only from the fact that it is the basis of continuation of human race but it is what makes a future human being in terms of his/her personality, value system, citizen and mental health etc. The efforts on the part of the mother to bring up the child from the stage of conception to growing up him/her in a state of fully biological autonomous system is a long process and not without paying the cost in terms of time, energy, psychological, emotional and social price. The whole process is not just a smooth transition but is a path in which price has to be paid in unusual type of currency.

Pregnancy is a unique period in the life of a woman. The latest researches are not very far off when the woman may produce child without sexual intercourse and even artificial insemination. Biotechnology is on the brink of such achievements in which mother’s ova and father’s sperm could meet, without mating or even seeing each other and the baby may have his/her embryonic period in complex chemicals and tubes in the laboratory. Scientific achievements are accelerating at astounding speed. However such mind boggling researches may not become a common practice with people in all cultures of the world. Millennium Three has many such wonders in its sleeves that would be unfolded in future history of humankind.

In modern times, the numerous pressures on the human life make it a stressful experience so much so that life becomes a sickening experience. Procreation is considered a very gratifying experience by the women but the other factors have made it different than a simple biological experience. Period of pregnancy brings various other problems associated with life, which are not merely biological but social, cultural, economical, political and psychological in their content. These problems are surmounting and can be potentially stressful. Before I discuss them with elaboration I would like to make the concept of stress clear. Basic concept of stress remains same, though it may be applied in various contexts.

STRESS AND MOTHERHOOD

Reber (1985) defines stress as, “Generally, any force that when applied to a sys-
tem causes some significant modification of its form, usually with the connotation that
the modification is deformation or distortion. The term is used with respect to physi­
cal, psychological and social forces and pressures.” Stress can both be cause and effect.
In psychology it is usually taken in the sense that it is an external demand on the
organism and if the organism is not capable of coping with stress then it may have to
pay the price in terms of physiological malfunctioning.

In the present paper author is exploring the stresses of the mother during and
after pregnancy. In fact this phenomenon is not culture free. It would be found out
that pregnant mothers have different problems in different cultures. Whiting (1963)
shows that child rearing practices are quite different in diversified cultures. This book
explores six cultures viz. Kenya, India, Okinawa (Hawaii), Mexico, Philippines, and
USA. Pregnancy, child rearing practices and other cultural aspects related to upbring­
ing have been examined by different investigators in the actual field setting researches.
For example in Indian context (pg. 313), it is written, “Particularly boys who have
been born after several years of barrenness or after the death of several children, may
be accorded more attention.... When baby cries adult response is fairly prompt” That is
just to highlight that how mother-child interactions can have different shade in a partic­
ular cultural backdrop.

Pregnancy is a universal phenomenon and so is the stress. But it does not imply
that period of pregnancy is universally stressful. Pregnancy needs to be viewed
through the lens of culture. For example a teen age mother maybe excited on being
pregnant in USA even if she is unmarried, while in the similar circumstances an Indian
unmarried teen aged mother may harbour the thoughts of suicide. On the contrary if
she (Indian girl) is married and pregnant then she may get a very respectful treatment
from her family members. The birth of a child out of wedlock is biologically a perfect
phenomenon but socio-culturally a problem situation in many societies of the world.
Musick (1993), quotes, “Although young mothers may initially say they were very up­
set to find themselves pregnant, later as they come to know you better and trust you
more, they often change their story, conceding that they are glad to be having a baby.”

Motherhood is a universal process and pregnant mothers usually undergo that
experience in their cultural context. Mothers are subject to stress of various dimen­
sions of cultures in which they live or later on nurture and rear their children. These
stresses may not be even stress for many, because in most of the cultures the rewards
of being pregnant outweigh the stresses of motherhood. Most cultures have premium,
valuation and respect for the pregnant mothers as it can be seen in the reflection of
health care programs of a country for such mothers. However, the following kinds of
stresses may be observed in pregnant mothers.

BIOLOGICAL ASPECTS

Biological stresses are associated with the physiological changes and other associat­
ed fears. For the mother it is a unique phase of life. Prior and gained knowledge
determines the anticipated stress and fears regarding pregnancy. In this context it is vital that whether it is first, second, third or nth pregnancy. That amounts to experience in being pregnant. Not only that but if a mother had prior bad experience of miscarriage then it can be a hidden fear factor in the process of pregnancy. In this context doctor-pregnant mother relationship matters significantly. The change in shape and contours of the body of a woman in itself is a change in the self-image especially during last 2-3 months of pregnancy. Bourne (1976), points out to various kinds of stresses in the pregnant mother arising due to vomiting, constipation, bleeding, taste changes in mouth, changes on appetite and food habits. Though these may be transitory in nature but they are disturbing for the female and are potential stress factors.

SOCIAL ASPECTS

social aspects are mainly with regard to the interaction dimensions involving relatives, friends, and other acquaintances. Once a woman is pregnant then after 4-5 months of pregnancy she can not hide it. Pregnant mother has a social compulsion to speak out about pregnancy and share the news at least with few people in her inner social circle. Would-be mothers often confess about this to her husband, boy-friend, mother-in-law, mother and few other friends. In many instances pregnant mothers are under great stress in disclosing their pregnant status specifically when the child in womb is out of wedlock or disowned by the father. Similarly if the child in mother’s womb is due rape, war victim, or socially unwanted circumstances then such pregnancies bring mixed feelings of shame, disgust, sorrow and depression. The joy of being pregnant under above circumstances is devoid of the spirit and internal happiness which in general a woman may enjoy as bliss. Another dimension which in some cases can be a source of stress is regarding the financial expenses required for hospitalisation etc. In some countries working pregnant mothers may face loss of job and maternity leave problems, causing occupation related stress. In poor families and in poor countries pregnancy requires money which the poor mother/family may not be in a position to pay. It may be a loan or some other stressful financial arrangement that remains a tension for the mother, while child is still in the womb.

PSYCHOLOGICAL ASPECTS

Physical and physiological changes associated with pregnancy are major stressors. Pregnancy results in a major change in the mother because she is to becomes the producer of a child. The process of expected perpetuation of the child from the womb remains a phenomenon of curiosity till it happens. In fact these factors vary in one major dimension that whether it is first or subsequent pregnancy. The lesser the nth pregnancy, the greater is the amount of experienced stress. Many personal variables are likely to affect the mother like her educational level, family background, assurance and support by husband/boy-friend and parents. Some pregnant mothers get adequate information from their friends, mothers, spouses or even books or educational materials that usually diminishes their stress levels. In fact readiness to produce a child can combat the stress level and even the process of child birth can become tension free.
The role of medical supervision during the pregnancy and at the time of child birth is not to be under estimated. The doctor-pregnant mother relationship in these instances is quite important. The doctor has not to be merely obstetrician but an assuring and trusting psychologist as well. This trusting interaction in a big way can reduce the much anticipated anxiety of the mother.

DELLIVERING THE CHILD

This stage is definitely a physiological unique experience in which the quantum of pain and labour has to be born by the mother for which woman organism is built by the Nature in a definite way to cope up that much amount of biological pain. The anatomical and physiological change that a woman undergoes is natural built in mechanism. The developments in medical science and surgery have reduced the fear and mortality rate. But the vital factor is that to what extend one is able to get the blessings of these new bio-medical innovations, which is linked to the prosperity and the economic factors of the individual and her social security system. I consider that this stress factor is basically a determinant of social and economical background of the mother rather than anything else. Even in primitive societies where advancements of technology are not available the pregnant mothers in that system deliver the child without much constrains. In fact the observation of the author is that woman in such backgrounds deliver the child without much hue and cry as compared to mothers in more affluent and technologically enriched societies.

Some problems are associated with the process of labour. It is of course a natural physiological process but some mothers overestimate the fear and have a panic like feeling. That can disturb them to great extend. Similarly Caesarean operation can induce the fear usually associated with surgery. In some instances, mothers may have the knowledge about twins or more babies in the womb and that may induce fears. Women having Rh negative blood group may experience more than normal anxiety due to fear of blood mixing of mother and child. Vicarious fears can also haunt the perspective mothers if they happen to hear the news of some bad delivery, or some abnormal and painful delivery cases in the hospital or in their social circles. News like the death of a child in womb or mother during pregnancy brings vicarious fears and stress to would be mother.

The delivery of the first child is especially a major turning event in the life of the woman. In the cultural context it would be viewed with different connotations. For example in India woman is considered to pass through three stages in her life as daughter, wife and mother. Marriage converts a daughter into a wife and subsequently the birth of child converts the wife into mother. Though a woman may be concurrently a daughter, wife and mother but then her identity in the social set up is accordingly. Child birth in Indian society is very much looked forward in the context of the sex of the child-in-waiting to be born.

POST-PARTUM SCENARIO
Once the child is delivered from the womb of mother a new phase begins in the life of the mother. In terms of social psychology it is the beginning of dyadic interaction. Mother-child is one of the most intense relation in terms of physiological, psychological, social and all most all other dimensions in the life of both of them. It is quite intense in the beginning and even over long periods of time it may never diminish to lower levels. Here we shall confine ourselves to initial periods, say one year. Our interest is to focus on the stress that the mother may experience once the child is delivered. As a matter of fact it can be studied from the perspective of both of them, but we presume on the basis of conventional findings that the mother would do no harm to the child.

In the mother-child interaction the assumption, that mother may be anti to her offspring occurs not so frequently. However even if it occurs then it is due to various other social, economical, political, sibling rivalry and other factors. In fact at the root level psychological bond operates very effectively throughout their life. So we shall mainly explore the factors leading to stress in the mother regarding the child in the first year of their interaction. Yes, there are instances in which mothers are harsh to their child, even to the extend of abandoning them and in very rare and pathological cases killing the child. These ultra kinds of acts on the part of mother are not due to lack of maternal love but because of social pressures, like illegitimate child, or child as a result of rape etc.

The common stresses that the mothers may face with regard to new born baby may be as follows:

The new born baby is too delicate to handle and it is the prime worry of the mother that her child should nourish properly. Mothers quite often become disturbed about the health status of the child. In fact mother perceives more than proportion even the minor health problems of her child. Actually a child may only cry to express his/her problem but the mother may cognize that stimulus in much greater magnitude. It is a disturbing factor for the mother to see her child sick or in any kind of suffering or distress.

The mothers are also concerned about various other aspects of the child for example how does the child looks like? Or in some instances the doctor may tell about some kind of disease or potential likelihood of some future disease in the child. These kinds of information can be anxiety provoking and disturb the newly become mother. Any kind of handicap in the child would also be disturbing and a mother would require some time before she may be able to cope with the harsh reality. If the child has some physical defect then it is an obvious stress for the mother to cope with. Mothers have various spoken and unspoken feelings and thought about the child which, after the child's birth takes a shape of facts, many of which may be hard to accept as reality. Motherhood becomes a fact after post-partum stage. Thereafter, it is to be viewed in the reality of life context which is not always pleasing. The mother has to
undergo a transition from what she anticipated before, during and after the birth of the child.

Cultural factors play very significant role in post birth scenario. According to Kakar (1981), “Birth of female child in India brings low self esteem, depression and depreciation to the mother. Celebrations are also much less; she tends to perceive a son as a kind of saviour and to nurture him with gratitude and even reverence as well as with affection and care.”

CONCLUSION
The motherhood is quite an enriching experience and more so when it is the first child. No doubt that there are numerous stress and anxiety arousing factors but largely most of the perspective mothers cross this stage effectively. The mother has an added responsibility and a new learning experience but like any other new experience, process of mothering is very much emotional and biological in nature. Nine months of pregnancy in the life of a woman are remarkably memorable and have intense feelings and emotions associated with that. Women often remember these stages distinctly in their memories even after many years. Culture remains a silent but a potent factor in the whole process of conceiving, producing and nurturing the child.

I close this paper with a poem by Erica Jung, entitled, “The protection we bear.” The poem appears in Judish S. Musick’s book, "Young, poor and pregnant."

My baby
flowed around me
protecting me
in her own radiance
for nine whole months,
I did not fear death.
My baby within
and the spirit without
were one,
I was at peace.
Then she was born,
and fear reclaimed me.

REFERENCES