

Perceived Physical and Emotional Health Impact of Childbirth on Married Couples in Abia State (Mixed Study)

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Abstract

The arrival of the baby in the family usually comes with number of changes that the parents must make in order to accommodate the child. These changes are in form of several learning activities, and personal/collective adjustments in order to perform the roles of parents adequately. However, most parents are not usually prepared for these inevitable changes thereby making them experience a mixed feeling of depression and joy simultaneously. Joy that arise from the arrival of the child and their transition into parenthood; and depression arising from doubt of their readiness for parenthood. In order to understand the impact of child birth on couples in Abia state, the study investigated the perceived physical and emotional health impact of childbirth on married couples. The study used a cross-sectional convergent mixed design to perform the research. 90 couples (180 individuals) were recruited from 9 primary healthcare centres in Abia. The modified RAND-36 item survey (version-1) and interviews guide were used to acquire data for the study. Data was analysed using the RAND 36 item health survey 1.0 scoring method for the quantitative data while thematic analysis was performed on the qualitative data. Result indicated that childbirth has a positive impact on the physical health of 70.6% of the respondents while 29.4% were negatively impacted based on their physical health status. Furthermore, 57.8% were positively impacted emotionally while 42.2% indicated that childbirth has a negative impact on their emotional health. Additionally, stress, lack of adequate support from their spouse, changes in their lifestyles, fear, fatigue, sociocultural factors were identified as the main factors that influence both the physical and emotional health impact of childbirth on their lives. Although the physical and emotional health of couples are both significantly impacted by childbirth; the impact is mostly felt emotionally than physically as seen from the study results. Therefore, there is an urgent need to address the emotional needs of couples transitioning into parenthood.

Introduction

Becoming a mother sometimes is not continually an optimistic experience for all women (Harwood et al., 2007), especially first timers. This is because a new mother has to adapt to a number of physical, emotional and social changes during the transition to motherhood. Researches (Thorp et al., 2004) have reported that a motherhood to some women is a difficult task especially when it comes to coping with its numerous challenges. For certain individuals, the expenses associated with child rearing, such as a lack of sleep and concerns about proper upbringing, hold greater significance than the benefits, (Nomaguchi & Milkie, 2003). Moreover, the responsibility of being a parent in solitude or in conjunction with inadequate prenatal assistance and/or an early age may result in a variety of unfavorable emotions among mothers, such as apprehension, despondency, and resentment (Graham et al., 2002; Porter & Hsu, 2003; Thorp et al., 2004). Most women according to Mc Leish and Maggie (2017) report, suffer from sub-clinical symptoms like anxiety and depression in their transition to parenthood.

In order to effectively cope with these challenges, a mother needs all the supports she can get. These supports can come from spouse, relatives, friends, community, etc. Although, the support from the all aforementioned are important, the best support system for a new mother has to come from the spouse. Spousal support, a term utilized to represent the assistance provided by a male partner to his female counterpart during pregnancy, labor, and delivery, encompasses a range of provisions, namely physical, emotional, psychological, spiritual, and financial supports. It should be noted that this is not an exhaustive list, but rather a comprehensive one (Arisukwu et. al., 2021). However, most women do not receive this support from their spouses. This lack of social support, from the spouse, as asserted by Leger and Letournear (2015) denies the woman of empathic support which the husband has the privilege of providing. Certain academics have noted that despite the wishes of male parents to play an active role in the antenatal, intrapartum, and postpartum phases, they encounter constraints in the form of insufficient informational aid, unfavorable attitudes towards participation, characteristics of the marital bond, connections with their own parents, as well as the various interpretations of spousal assistance during gestation (Xue et. al., 2018). Various elements as evidenced through scholarly sources encompass degrees of knowledge, dispositions towards engagement, characteristics of conjugal bonds, connections with parental figures, and sociodemographic factors such as profession, educational attainment, and age, among numerous others, may serve as principal antecedent factors for the types of assistance anticipated and received from life partners (Oyekola et. al., 2020; WHO, 2019). During maternal health periods, the degree of assistance a husband provides to his wife may be influenced by a variety of factors. Male participation in maternal health is hampered by cultural norms, gendered ideologies, and logistical obstacles (Oyekola et. al., 2020).

Moreover, during the process of becoming parents, expecting parents encounter a variety of personal, familial, and social modifications, which possess significant consequences for the bond between the partners, the relationship between the infant and the parent, and the development of the infant (Werner-Bierwisch, et. al., 2018). The inability of the couple to effectively cope with the arrival of the newborn could bring about strain in the relationship which could affect the wellbeing of the newborn and violence in the home (Brody & Hamilton, 2013). Most of the focus in the past has been on maternal care and childbirth with little attention on men and the effect of pregnancy and parenthood on them. Falade (2020) therefore opined

that there is the need for the male partners to be directly involved in pregnancy and childbirth. Polomeno (2014) points out that the couple relationship at the period of transition is very fragile. Help ought to be sort for support especially for the first timers. It was therefore identified that antenatal & postnatal education will be of help to the couple in coping with the challenges of pregnancy and childbirth.

Additionally, pregnancy also affects the women's partner as he sympathetically, emotionally and psychologically responds to every physical, emotional and psychological impact of pregnancy on the spouse even after six weeks of birth of baby. This however is sometimes said to be psychologically and culturally based (Baldwin et. al., 2018). This was evident, in the research conducted by Meijeir et al. (2019) where men in ancient communities assumed pregnancy status during their wives' period of pregnancy extending to six weeks after birth.

Having established the importance of spousal support for a woman during pregnancy and early motherhood, it is important to know that pregnancy and the transition to parenthood is a major developmental period with important implications for parents, for the infant-parent relationship and the infant's development (Deave, et. al., 2018). Research has consistently opined that the family life-cycle's developmental stage is an arduous event, often inducing significant stress and engendering profound alterations in the family (Priel & Besser, 2012). Cowan and Cowan (1992) identified five-dimension continuum in a systems theory: inner life, quality of relationships in the family, stress outside the family, the quality of marriage, and the baby. The authors arrived at the determination that the process of becoming parents represents a timeframe characterized by considerable stress and, on occasion, unsuitable modifications for a noteworthy number of new parents (Cowan & Cowan, 1995). These changes require adequate knowledge of the prevailing events (pregnancy and parenthood) by both parent. These will allow them to effectively deal with the challenges of parenthood. Therefore, knowing the impact of parenthood on both their physical and emotional health will equip the parent with the necessary skills required to effectively manage parenthood.

1.3. Aim of the Study

The aim of this study is to investigate the perceived physical and emotional health impact of childbirth on married couples in Abia State. The specific objectives will be to:

1. determine the perceived physical health impact of childbirth on married couples in Abia State.
2. ascertain the perceived emotional health impact of childbirth on married couples in Abia State.

1.7 Hypotheses

1. There is no significant difference in the perceived physical health impact of childbirth on married couples in Abia State.
2. There is no significant difference in the perceived emotional health impact of childbirth on married couples in Abia State.

Research Methodology

The study employed the cross-sectional mixed design to actualize its research objectives. The research population consisted of all married couples who attend both antenatal care and post-natal care at all the primary health centres in Abia State. Three primary health centres were drawn from each of the three senatorial districts in Abia State (Abia North, Abia South, and Abia Central districts). These primary health centres are outlined as follows; 164 couples (328 persons) visited all the selected health centres (three) for both ante-natal and post natal purposes during the period of 10 months (August 2022-April 2023) that the study data was collected. Therefore, the study population is 328. From this population, a sample size of 180 was drawn. The instrument for data collection was an adapted RAND 36-item health survey (version 1.0) and an interview template. The data from the study was analysed through two methods; distributive analysis, and thematic analysis.

Results and Discussion.

4.1 Research and analysis

Table 4.1 Demographic data of respondents

		Frequency	Percentage
Age	20 - 29 years	85	47.2
	30 – 39 years	51	28.3
	40 – 49 years	44	24.5
Total		180	100
Type of Family	Monogamous	136	75.6
	Polygamous	44	24.4
Total		180	100
Occupation	Civil Servant	50	27.8
	Trading	70	38.9
	Others	60	33.3
Total		180	100
Educational Level	Primary	90	50
	Secondary	58	32.2
	Tertiary	32	17.8
Total		180	100
Parity	Para-1	65	36.1

	Para-2	61	33.9
	Para 3 and above	54	30
Total		180	100
Dwelling/Locality	Rural	102	56.7
	Urban	70	43.3
Total		180	100

Table 4.1 shows the demographic distribution of the respondents; it shows that 85 representing 47.2% of the respondents are aged 20-29 years old, 51 (28.3%) are aged 30-39 years, 44 (24.5%) are aged 40 years and above. For family type distribution; 136 (75.6%) were monogamous family, 44(24.4%) were polygamous family; for occupation distribution; 50 (27.8%) were civil servant, 70 (38.9%) were traders while 60 (33.3%) were grouped under other occupation. For educational level; 90 (50%) of the respondents have primary school level of education, 58 (32.2%) have secondary school education while 32 (17.8%) have tertiary education. Furthermore, 102 (56.7%) of the respondents lives in rural areas while 70 (43.3%) are urban dwellers. This implies that majority of the respondents are aged 20-29 years old, have a monogamous family, are traders, possess primary school level of education, and lives in the rural area of the state.

Table 4.2: perceived physical health impact of childbirth on married couples

Physical Health impact	Physical health score range	Frequency	Percentage
Negative Impact	0-899	53	29.4
Positive Impact	900-1000	127	70.6
Overall	0-1000	180	100

Mean = 969.44±155.03; median = 900.

Table 4.2 above outlines the result of the analysis of the perceived physical impact of childbirth on married couples in Abia State. From the table, 29.4% of the respondents indicated that childbirth have a negative impact on their physical health while 70.6% of the respondents stated that they have been positively impacted by the birth of their child.

Table 4.3: perceived emotional health impact of childbirth on married couples

Emotional Health impact	Emotional health score range	Frequency	Percentage
Negative Impact	0-339	76	42.2
Positive Impact	340-440	104	57.8
Overall	0-440	180	100

Mean=343.89±39.78; median 340

Table 4.3 above outlines the result of the analysis of the perceived emotional impact of childbirth on married couples in Abia State. From the table, 42.2% of the respondents indicated that childbirth has a negative impact on their emotional health while 57.8% of the respondents stated that they have been positively impacted by the birth of their child.

Hypotheses

4.4: Test of hypothesis on the difference in the perceived physical impact of childbirth on married couples

	n	Mean Score	p-value
Age			
20 - 29 years		893.2±123.09	
30 – 39 years		945.9±127.82	
40 – 49 years	85	921.1±119.04	
	51 44		0.000*
Occupation			
Civil Servant	50	911.1±122.46	0.000*
Trading	70	897.9±138.29	
Others	60	929.7±123.07	

Parity			
Para-1	65	894.5±92.10	0.000*
Para-2	61	901.6±112.40	
Para 3 and above	54	861.9±98.20	
Educational Level			
Primary	90	731.3±129.06	0.06
Secondary	58	941.6±143.87	
Tertiary	32	886.7±131.09	
Type of family			
Monogamous	136	912.7 ±119.06	0.310
Polygamous	44	782.6±127.09	
Dwelling/Locality			
Rural	102	881±99.06	0.001*
Urban	70	918±123.01	

The table above shows the result of the analysis of the difference in responses of the respondents' on the perceived physical health impact of childbirth on married couples in Abia State. From the table, a significance difference was found in the respondents' responses based on age ($p=0.000$), locality ($p=0.001$), occupation (0.000), and parity (0.000) while there in no difference in their responses based on family type (0.310), and educational level (0.06) at 0.05 significance level. This implies that there is a significance difference in the perceived physical health impact of childbirth on married couples in Abia state based on their age, locality, occupation and parity.

4.5: Test of hypothesis on the difference in the perceived emotional impact of childbirth on married couples

	n	Mean Score	p-value
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Age			
20 - 29 years		4121.1±21.90	
30 – 39 years		415.9±31.46	
40 – 49 years	85	421.6±19.04	
	51 44		0.001*
Occupation			
Civil Servant	50	381.1±22.46	0.000*
Trading	70	392.9±18.03	
Others	60	417.7±28.07	
Parity			
Para-1	65	294.5±27.61	
Para-2	61	341.6±25.91	0.000*
Para 3 and above	54	419.9±21.20	
Educational Level			
Primary	90	271.3±29.06	
Secondary	58	341.6±25.91	0.000*
Tertiary	32	402.7±12.90	
Type of family			
Monogamous	136	381.6±19.06	
Polygamous	44	407.7±17.09	0.130
Dwelling/Locality			
Rural	102	319±29.06	0.000*
Urban	70	398±23.01	

The table above shows the result of the analysis of the difference in responses of the respondents' perceived emotional health impact of childbirth on married couples in Abia State.

From the table, a significance difference was found in the respondents' responses based on age ($p=0.000$), locality ($p=0.001$), occupation (0.000), educational level (0.000) and parity (0.000) but no difference in response based on family type (0.130) at 0.05 significance level. This implies that there is a significance difference in the perceived emotional health impact of childbirth on married couples in Abia state based on their age, locality, occupation, education level and parity.

4.2 Discussion of Findings

Objective one: determine the perceived physical health impact of childbirth on married couples in Abia State.

Childbirth can have significant physical effects on both mothers and fathers. These effects can either be positive or negative for the couples personally and together. For women, the positive can be in the form of sense of empowerment and accomplishment they derive from the physical process of giving birth. Furthermore, the postpartum period can also be a time of increased physical activity, as mothers may engage in activities such as breastfeeding, carrying and caring for their newborn, and even exercising to regain their strength and fitness. For the fathers, the physical impacts of childbirth may not be as immediate or obvious, yet they can still experience positive effects. Like the joy of becoming a father can motivate to adopt healthier behaviors, such as quitting smoking or reducing alcohol consumption, in order to set a good example for their children.

For the negative physical impact of childbirth, mothers may experience pain, fatigue, and physical changes associated with breastfeeding. In addition, some women may experience complications during childbirth, such as postpartum hemorrhage or infection, which can have long-term physical consequences. For fathers, physical effects of childbirth may include increased stress levels and sleep disturbances. Additionally, fathers may experience physical exhaustion and fatigue as they adjust to the demands of caring for a new baby.

However, the overall positive impact of child-birth are significantly more than its' negative impact. This can be confirmed by the findings of this study, which revealed that the physical health of 70.6% of couples in Abia state are positively impacted by the birth of a new child. For the women, the period is a time of increased physical activity as they engage in activities such as breastfeeding, carrying and caring for their newborn, and exercising to regain their strength and fitness. While for the men, the joy and happiness of having a child makes them live a healthier life in order to position themselves as a role model to their new infant. Furthermore, the physical experience of giving birth to a newborn also led to a sense of empowerment and accomplishment for the parents, as well as brought them closer together and strengthen their relationship.

The findings of this study is in accordance to summation of Fisher et al. (2012) that reported that the physical process of giving birth can lead to a sense of empowerment and accomplishment for women. It also confirmed that conclusion of Bonsaksen et al., (2016) that stated that becoming a father can motivate men to adopt healthier behaviors, such as quitting smoking or reducing alcohol consumption, in order to set a good example for their children. However, negative impact of childbirth was also revealed by this study, it shows that 29.4% of the new parents in Abia state attested that parenthood impacted their physical health in a negative manner. The women stated that physical trauma which can be in form pain, discomfort, and a longer recovery period associated with delivery effects like perinatal tear, episiotomy, and c-section incisions negatively impacted their lives during the parenting

period. Furthermore, some of the women complained of postpartum depression that also affected their lives after delivery as they now feel fatigued, lacked the energy they once had, and experienced changes in their appetite and sleep patterns; and sleep disturbances caused by the demand of taking care of their new infant at night.

These negative impacts experienced by nursing mother in Abia state affirmed the findings of researches like Jiang et al. (2017) that stated that childbirth can cause physical trauma to both women and men, such as perineal tears, episiotomy, and c-section incisions; Fisher et al., (2012) that stated that women are at an increased risk of experiencing postpartum depression, which can have negative impacts on physical health, such as fatigue, lack of energy, and changes in appetite and sleep patterns; Lee et al., (2017) that stated that new parents often experience sleep disturbances due to the demands of caring for a newborn, which can have negative impacts on physical health, such as fatigue, irritability, and reduced immune function.

Objective two: ascertain the perceived emotional health impact of childbirth on married couples in Abia State.

Childbirth can have a significant emotional impact on both mothers and fathers. The transition to parenthood can be a time of great joy and excitement, but it can also be a period of stress and adjustment as couples adapt to their new roles as parents. Mothers may experience a range of emotions during the postpartum period, including anxiety, depression, and mood swings. Postpartum depression affects around 10-20% of women, and can have long-lasting negative effects on both the mother and the child (Goyal et al., 2019). In addition, the physical and emotional demands of caring for a newborn can lead to exhaustion and feelings of overwhelm.

Fathers may also experience their own emotional challenges during the postpartum period. They may feel a sense of helplessness or anxiety as they adjust to their new role as a parent, and may struggle with the changes in their relationship with their partner (Bartlett & De Shields, 2019).

The above narrative is also peculiar with the findings of this study. From analysis, 57.8% of new parents in Abia state experiences a positive emotional health experience from becoming a parent while the emotional well-being of 42.2% of new parents in Abia state is negatively impacted by the arrival of a new born. The major positive emotional health advantage of having a new born was expressed in the joy and happiness the couples feel after the birth of their child. Followed by the strengthening of the bond between the couples resulting from shared experience of becoming parents which brought them closer together and deepen their emotional bond. Afterwards, the negative emotional health impact expresses itself in form of fear, anxiety, mood swings, exhaustion and the feeling of overwhelm. These emotional impacts were mostly expressed by the mothers although the fathers' health are also negatively impacted. The couples stated that they don't feel the kind of emotional stability they were felt before the conception of the child. The significance of the negative emotional experience can be seen in the percentage difference between those who affirmed positive emotional health impact and negative emotional health impact (9.2%) as compared to 41.2% difference for physical health impact. This shows that childbirth has more negative impact on the couples' emotional health than their physical emotional health. The positive emotional health experience reported by this study is in accordance with the findings of Shorey et al. (2018) which stated that giving birth can be a powerful and emotional experience for women, which can lead to a sense of accomplishment and self-

worth; and Herschderfer and Epstein (2014) which stated that becoming a parent can bring couples joy and happiness, as they experience the love and connection with their new child. Furthermore, the negative emotional health experience of couples in Abia state coincides with the findings of Shorey et al. (2018) which stated that new parents usually experience anxiety and stress related to the health and wellbeing of their newborn, as well as the challenges of adjusting to a new role as a parent; and Muzik et al. (2016) which stated that postpartum depression is a common emotional health concern for new mothers, which can negatively impact their emotional wellbeing and that of their partners.

Chapter Five

5.2 Conclusion

The study investigated the perceived physical and emotional health impact of childbirth on married couples in Abia State. Using the appropriate data analysis tool to analyse the data collected for the study and obtaining the relevant result, the following conclusion can therefore be drawn from the study;

1. Although parenthood has a positive impact on the physical health status of most of the couples (70.6%) with new born in Abia state, a significant number (29.4%) were negatively impacted by the birth of a new born.
2. The emotional well-being of 42.2% of couples with new born in Abia state is negatively impacted by the arrival of a new born while 57.8% experiences a positive emotional health experience from becoming a parent. When compared with physical health, the emotional health of couples in Abia is more negatively impacted by the birth of a child.
3. Age, birth experience, postnatal care, stress, sociocultural factor, change in lifestyle, fatigue, fear of the unknown, and spousal support are the main factors that influence the perceived physical health of couples with new-born in Abia state
4. Mental stress, irritability, depression, health of the new-born, financial capability, sociocultural support, and spousal support are the main factor that influences the perceived physical health of couples with new-born in Abia state
5. The use of social media, encouragement from spouse, music, and family support are the main measures being employed by couples with new born in Abia state in order to overcome the perceived negative physical and emotional impact of parenthood.
6. There is a significance difference in the perceived physical health impact of childbirth on married couples in Abia state based on their age, locality, occupation and parity.
7. There is a significance difference in the perceived emotional health impact of childbirth on married couples in Abia state based on their age, locality, occupation, education level and parity.

5.3 Recommendations

Following the conclusion made in the preceding section, the researcher offers the following recommendations;

1. Since a significant number of the couples are negatively impacted by the birth of a child, 29.4% for physical health and 42.2% for emotional health, there is an urgent need for health authorities to address the main drivers of this negative trend.
2. There should be an avenue for counseling in the primary health centres that should cater for the physical and emotional needs of couples who attends the health centres especially first time parents.
3. Studies should be undertaken in order to determine who experiences the most negative physical and emotional health impact between the mother and the father of the new born.

4. Furthermore, since the study was conducted in only Abia state, similar studies should be undertaken in other state of Nigeria in order to compare results with the result reported by this study.

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