

First-time mothers' experiences of meaningfulness during their third trimester of pregnancy: A focus on spirituality

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Preface

The candidate opted to write an article so that it may be submitted to **The Journal of Positive Psychology** as her chosen research topic is in line with the aim and scope of the journal.

The Journal of Positive Psychology provides an interdisciplinary and international forum for the science and application of positive psychology. The journal is devoted to basic research into and professional application to states of optimal human functioning and fulfillment, and the facilitation and promotion of well-being. The journal brings together leading research in positive psychology undertaken by researchers across different sub-disciplines within psychology (e.g. social, personality, clinical, developmental, health, organizational), as well as across other social and behavioural disciplines (e.g. sociology, family studies, anthropology, neuroscience, philosophy, economics, medicine, organizational sciences).

Appropriate topics for the journal include original research on human strengths and virtues as well as personal and social well-being. For this reason, the journal was selected for publication of the research article, which focuses on first-time mothers' experiences of meaning in an attempt to gain an in-depth understanding of their well-being during pregnancy. This journal places special emphasis on new theoretical and methodological approaches that advance both the science and practice of positive psychology and as this study made use of the Mmogo-method ® it would fall within the scope of the journal.

Opsomming

Swanger vrouens beleef dikwels verskeie persoonlike aanpassings en -voorbereidings tydens hul swangerskap, te make met hul nuwe rol en verantwoordelikheid as ouer, wat deur die geboorte van hul kind teweeg gebring word. Hierdie aanpassings is veral moeilik vir vrouens wat vir die eerste keer 'n moeder word, omdat hulle vlakke van angs en onsekerheid soms hoër is as 'n vrou wat swanger is met haar tweede of derde kind. Vanuit 'n fortologiese oogpunt kan swangerskap gesien word as 'n ontwikkelingsgeleentheid waar groei en volwassenheid moontlik is, mits die ma hoë vlakke van psigologiese welstand beleef.

Wanneer sy dan optimaal funksioneer kan sy 'n sensitiewe moeder word wat vertrou het in haar eie vermoëns om vir haar nuwe baba te sorg. Verskeie navorsingsbevindinge dui daarop dat spiritualiteit en psigologiese welstand 'n nou verwantskap het, maar dat die geleefde ervaringe van eerste keer ma's nog nie ondersoek is nie. Die doel van hierdie studie is dus om 'n groep ma's (wat vir die eerste keer swanger is), se geleefde ervaringe van betekenisvolheid tydens die derde trimester van hulle swangerskap, met spesiale fokus op hulle spiritualiteit, te ondersoek. Kwalitatiewe navorsing en 'n fenomenologiese navorsingsontwerp is gebruik om die ervaringe van eerste-keer moeders in diepte te verstaan. Die Mmogo-Metode® en self-refleksie joernale is gebruik om data in te samel en beide visuele en tekstuele data is vasgelê. Die data is geanaliseer deur 'n tematiese analise op die tekstuele data te doen en die visuele data is geanaliseer deur die simboliese waardes wat die deelnemers beskryf het te vergelyk met die navorsingsvraag. Hierdie groep moeders het 'n baie persoonlike en intieme verhouding met 'n Goddelike werklikheid, waarop hulle staatmaak, beskryf en binne hierdie verhouding vind hulle betekenisvolheid. Hierdie betekenisvolheid spruit uit hulle geloof dat die Goddelike werklikheid lewe gee en dat dit hulle verantwoordelikheid is om die nuwe lewe in die wêreld in te dra. Onvoorwaardelike vertrou in die Goddelike werklikheid maak dat hulle gewilliglik die beheer van hulle lewens oorgee en terselfdertyd die

verantwoordelikheid wat aan hulle opgedra is, aanvaar. Sodoende vind hulle betekenisvolheid wat potensiële implikasies het vir hoër vlakke van psigologiese welstand. Die bevindinge van hierdie navorsing verskaf die basis vir die ontwikkeling van intervensies, wat toekomstige moeders kan bystaan om betekenisvolheid in hulle swangerskappe te ervaar, deur staat te maak op hulle reeds bestaande spirituele oortuigings.

Sleutelwoorde: Betekenisvolheid, Positiewe sielkunde, Psigologiese welstand, Spiritualiteit, Swangerskap

Summary

Pregnancy can be a very difficult time of transition for some women as they have to adapt, change and prepare for the role and responsibility that awaits them after their baby is born. This is especially challenging for first-time mothers as they experience higher levels of anxiety and uncertainty than more experienced mothers. From a fortogenic perspective, pregnancy can be viewed as a developmental opportunity for maturation and growth. With high levels of psychological well-being the new mother will be able achieve optimal functioning by being a sensitive and responsive and confident in her abilities to care for her new-born baby.

There is substantial evidence to show that spirituality is strongly associated with psychological well-being, but the lived experiences of first-time mothers have not yet been explored. Therefore this study aims to explore a group of first-time mothers' experiences of meaningfulness during their third trimester of pregnancy by focusing on their spirituality. Qualitative research and a phenomenological design were used to gain in-depth understanding of the experiences of first-time mothers. The Mmogo-Method® and reflective journals were used as data-gathering techniques and visual and textual data were captured. The data were analysed by using thematic analysis (textual) and comparing the symbolic values (visual) with the research question. This group of first-time mothers expressed a very personal and intimate relationship with a Divine reality that they rely on and from it they derive a sense of meaningfulness. This sense of meaning stems from their belief that the Divine reality is the giver of life; they were given a responsibility to carry new life. Unconditional trust in the Divine reality makes them willing to surrender control of their lives and accept the responsibility they were given. They find meaning, which potentially has implications for higher levels of psychological well-being. The findings of this research provide the basis for

developing interventions for mothers-to-be to make sense of their pregnancy by relying on their pre-existing spiritual frameworks.

Keywords: Meaningfulness, Positive Psychology, Pregnancy, Psychological Well-being, Spirituality

Permission to Submit Article for Examination Purposes

The candidate opted to write an article with the support of her supervisor. I hereby grant permission that she may submit this article for examination purposes in partial fulfilment of the requirements for the degree of Master of Arts Sciences in Research Psychology

Mrs H. K. Coetzee

Declaration by Researcher

I hereby declare that this research, **First-time mothers' experiences of meaningfulness during their third trimester of pregnancy: A focus on spirituality**, is entirely my own work and that all sources have been fully referenced and acknowledged.

A. Redelinghuys

Declaration by the language editor

I hereby declare that I have language edited the thesis **First-time mothers' experiences of meaningfulness during their third trimester of pregnancy: A focus on spirituality** by A. Redelinghuys for the degree of MA in Research Psychology.

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Literature Review

Difficulties in Pregnancy

Pregnancy is one of the most important social and psychological events in a woman's life (Guse, Wissing, & Hartman, 2006; Uguz et al., 2007). Pregnancy is a common phenomenon that is experienced by most women at some stage in their lives (Guse et al., 2006). In South Africa pregnancy is a common experience, as illustrated by the mid-year population estimates. They give the crude birth rate in South Africa as 21 births per 1000 population (Statistics South Africa, 2011). This translates to 1 059 417 babies born in 2011; or approximately 2 babies born every minute. The sad fact however is that with an infant mortality rate of 37.9 and an under-5 mortality rate of 54.3%, only 44% of these babies will live to the age of 57 based on their life expectancy at birth (Statistics South Africa, 2011). Nevertheless pregnancy and childbirth are evidence of the creation of life and this realization can inspire both awe and anxiety in a new parent (Lydon-lam, 2012).

Pregnancy can be very difficult for some women as changes in self-identity, relationships and physique may tax a woman's psychological and tangible resources, causing her profound stress that affects her well-being (Hamilton & Lobel, 2008). According to Abe et al. (2007), pregnant women are exposed to different sources of psychological stress, for example anxiety about their babies, lifestyle changes they have to make, financial implications and workplace worries, to name a few. Moreover, anxiety is one of a very diverse range of experiences that occur during pregnancy (Etowa, 2012). For example, the woman has to adapt to a new maternal role and establish a mother-child relationship with the baby even before birth and she may also be at risk of developing post-partum depression.

Post-partum depression (PPD) affects up to 25% of women within the first 10 days after the birth of their child, with an onset period of up to one month (Kim et al., 2012; Pearlstein, Howard, Salisbury, & Zlotnick, 2006). Research suggests that post-partum a

mother is at risk of developing mental disorders, especially mood disorders such as PPD (Haga, Lynne, Slinning, & Kraft, 2012; Mawson & Wang, 2013). PPD falls into the category of major depressive disorder, with standards for diagnosis given in the Diagnostic and Statistical Manual of Mental Disorders, fourth edition (Haga et al., 2012), and can lead to maternal disability, impaired mother-child attachment and infant developmental problems (Guse et al., 2006; Kim et al., 2012). Known risk factors include a history of depression, high levels of anxiety and perceived stress, low levels of social support and negative life events during pregnancy (Mawson & Wang, 2013; Pearlstein et al., 2006). According to Pearlstein et al. (2006) the common symptoms include mood swings, irritability, tearfulness, confusion and fatigue, making it difficult to diagnose as the first few months post-partum is in any event usually characterized by changes in sleeping patterns and excessive fatigue. First-time mothers are particularly at risk (Haga et al., 2012), according to Herishanu-Gilutz, Shahar, Schattner, Kofman, and Holcberg (2009), because they are likely to be more anxious than more experienced mothers, especially in the first days after birth. The anxiety that first-time mothers experience can stem from the fact that they are concerned and stressed about coping with child care and responding to the child's needs (Tarkka, Paunonen, & Laippala, 2000).

Although valuable information can be gained from this pathogenic perspective, it is generally accepted that pregnancy and post-partum adaptation can be viewed as a developmental opportunity for maturation and growth (Guse et al., 2006; King & Hicks, 2009). According to Vedova, Ducceschi, Cesana and Imbasciati (2011), pregnancy can be viewed as a normal maturation cycle with crisis and growth opportunities. Guse et al. (2006) explained this further: "Within this stressful transition, there might be factors contributing to the maintenance or promotion of psychological well-being" (p. 164). Pregnancy can thus be viewed as a major developmental move for every woman, by which she is challenged to maintain and even promote her psychological well-being (Vedova et al., 2011).

The biggest contributor to a woman's psychosocial development is the establishment of a maternal identity (Herishanu-Gilutz et al., 2009; Mercer, 2004). Becoming a mother is a unique event in a woman's life and many first-time mothers consider it a form of fulfilment. This process starts in pregnancy, when the mother is preparing herself for the maternal role that awaits her after the birth of the child. However, most women perceived the period directly after child-birth as the most difficult in the transition to parenthood (Tarkka et al., 2000). This transition involves a redefining of self-identity and the acceptance of new responsibilities (Benton-Hardy & Lock, 1997; Etowa, 2012). Self-identity needs to be redefined as externally focused on the needs of the baby instead on internally directed toward the woman's own needs (Benton-Hardy & Lock, 1997). In a study done by Etowa (2012) all the women indicated that they understood that becoming a mother involved taking responsibility for caring for the baby. Psychoanalyst Daniel Stern (Haga et al., 2012) refers to this mental organization in which the child is most prominent as the motherhood constellation. In this state the primary focus becomes the well-being of the child and new concerns come into focus, for example whether she is able to maintain the life and growth of the baby, create the necessary support system and assure the baby's development (Haga et al., 2012). Besides maternal identity formation there is a second task in the process towards maternal role attainment: acceptance and fulfilment of new responsibilities that contribute to maternal competency (Herishanu-Gilutz et al., 2009). At first new mothers are often insecure in their competency to correctly perceive and interpret their infant's needs, but later on they develop a growing confidence in their ability to care for their new babies (Herishanu-Gilutz et al., 2009). Maternal role-taking is accomplished when the woman is comfortable in her new role as mother and confident in her abilities to accept and take on the responsibilities brought on by this new role (Mercer, 2004). In this achievement of maternal identity the

mother has established confidence and competence in her mothering activities (Mercer, 2004).

Pregnancy becomes a very important preparation period during which a woman prepares mentally for her maternal role and the responsibilities she knows will arise once her baby is born (Herishanu-Gilutz et al., 2009; Nakamura, 2009). During pregnancy the mother develops maternal sensitivity and affection towards her unborn child that will prepare for her responsibility of caring for the baby after the baby is born (Siddiqui & Hagglof, 2000). According to Siddiqui and Hagglof (2000), women who expressed more affection toward their unborn babies showed better postpartum adjustment and more confidence in their new roles. New mothers describe positive feelings of an emotional bond with their babies after they are born (Herishanu-Gilutz et al., 2009). This sense of connectedness can be traced back to the pregnancy period during which the mother-child relationship started to develop (Herishanu-Gilutz et al., 2009; Saastad, Israel, Ahlborg, Gunnes, & Froen, 2011; Siddiqui & Hagglof, 2000; Wiklund, Edman, Larsson, & Andolf, 2009). Although the relationship develops gradually throughout the pregnancy period (Saastad et al., 2011), there is a rapid increase after the first perception of fetal movements (Siddiqui & Hagglof, 2000). During the third trimester, the fetus begins to show distinct patterns of activity and rest and as the mother responds to these in an increasingly synchronised fashion her feelings of affection and competence grow (Saastad et al., 2011; Siddiqui & Hagglof, 2000). The maternal awareness towards the unborn baby positively influences the mother-child relationship (Saastad et al., 2011). The early establishment of the mother-child relationship is critically important as it forms the basis for the child's future social, emotional and cognitive development (Siddiqui & Hagglof, 2000). Furthermore, sensitive and responsive caregiving by the mother can significantly influence the infant's behaviour and development (Ravn et al., 2011). Ravn and colleagues (2011) define this sensitive and responsive caregiving as the parent's ability to

perceive, interpret and respond quickly to the infant's signals and intentions. Attachment theory explains that working models are formed during early childhood on the basis of parental sensitivity and responsiveness to a child's affective signals (Trillingsgaard, Elklit, Shevlin, & Maimburg, 2011). In later life these working models become the frameworks within which people organize their experiences and relationships in order to deal with distress (Siddiqui & Hagglof, 2000; Trillingsgaard et al., 2011). Sensitive responses by the mother to her child's needs provide the basis for secure attachment (low levels of attachment anxiety and attachment avoidance) when faced with stressful events later in life (Siddiqui & Hagglof, 2000; Trillingsgaard et al., 2011).

However, women with post-partum depression will have more negative perceptions of their infants, themselves and their ability to provide care for their new babies and are unable to respond sensitively to the child's needs. They reported higher levels of anxiety, ambivalence and conflict and lower levels of parenting efficacy (Mercer, 2004). Sadly, few interventions exist that address these psychological aspects of childbearing and the preparation of the individual mother (Guse et al., 2006). It is important that new interventions are developed not only to prevent post-partum depression but also to enhance a mother's psychological well-being before and after the birth of her child.

Pregnancy can be a very difficult time of transition for some women (Hamilton & Lobel, 2008) as they have to adapt, change and prepare for the role and responsibility that awaits them after their baby is born. During the third trimester, with the first perceptions of fetal movements, it is especially important that a new mother starts preparing herself for her maternal responsibility of caring for her child by sensitively responding to the baby's patterns of rest and activity (Siddiqui & Hagglof, 2000). This is especially challenging for first-time mothers as they experience higher levels of anxiety and uncertainty than more experienced mothers (Herishanu-Gilutz et al., 2009). From a fortogenic perspective, pregnancy can be

viewed as a developmental opportunity for maturation and growth (Guse et al., 2006; King & Hicks, 2009) and with high levels of psychological well-being the new mother will be able to achieve optimal functioning by being a sensitive and responsive mother who is confident in her abilities to care for her new-born baby (Gropp, Geldenhuys, & Visser, 2007).

Positive Psychology and Psychological Well-being

Before World War II the study of psychology was orientated towards identifying genius, nurturing talents, contributing to our understanding of psychological well-being and enhancing our ability to realize it (Gropp et al., 2007; Hutchinson, Stuart, & Pretorius, 2010). However, in the aftermath of the war psychology became a science devoted to treating and identifying mental illness using the disease model (Hutchinson et al., 2010; Seligman & Csikszentmihalyi, 2000). Although many developments that were not focused on psychopathology were taking place in the field, the general emphasis in psychology was still on the problem-orientated framework (Hutchinson et al., 2010). Martin Seligman, the founding father of the field of positive psychology, coined the term in 1997 in an attempt to return to some of the ideas of the earlier psychologists, focusing on human strengths and positive adaptation (Hutchinson et al., 2010; Seligman & Csikszentmihalyi, 2000). Positive psychology offers a unique opportunity to reconstruct our views of clinical psychology (Gropp et al., 2007). From this perspective based on strengths psychologists can study motivation, human capacity, potential, positive functioning and health (Hutchinson et al., 2010). This movement towards positive psychology has been accompanied by a shift towards the study of psychological well-being (Gropp et al., 2007). According to Gropp et al. (2007) psychological well-being falls within a field of study that examines quality of life, happiness, life satisfaction and morale. Psychological well-being is multi-dimensional and complex and only when all dimensions are in balance and integrated with one another is optimal functioning possible (Gropp et al., 2007). Psychological well-being changes over time and

varies according to different context (Gropp et al., 2007). A conceptual distinction has been made between subjective well-being, also referred to as hedonic well-being, and psychological well-being, also termed eudemonic well-being (Hutchinson et al., 2010). Subjective well-being is defined as high satisfaction with life, low negative affect and high positive affect. It encompasses emotional functioning and the subjective evaluations of an individual's life (Wood & Joseph, 2010). According to Ai, Hopp, Tice and Koenig (2013) the hedonistic paradigm describes well-being in terms of attaining happiness and avoiding pain. From this perspective the focus is primarily on subjective pleasures versus displeasures (Ai et al., 2013). In contrast, psychological well-being focuses more on existential concerns and the way the individual interacts with the world (Wood & Joseph, 2010). Existential and moral philosophers emphasized that eudemonic positions of well-being refer to the extent to which a person is functioning fully, rather than just feeling good (Ai et al., 2013). From this perspective a person is psychologically well if he or she has a purpose in life and the potential to achieve it, with respect to a higher order of the self (i.e., realization of true self, positive relations or human strengths). Therefore, according to the eudemonic perspective, well-being is a concept that goes beyond subjective happiness and looks at objective indicators of one's well-being, for example, being loved or finding meaning in life (Ai et al., 2013).

Meaning in life is a stable resource that is used to maintain well-being (Steger, Frazier, Oishi, & Kaler, 2006). According to Tavernier and Willoughby (2012) reporting meaning in both trivial and major life events is a significant positive predictor of psychological well-being. A study done by (Steger et al., 2006) supported these claims by proving that people who rate themselves as having a great deal of meaning in their lives reported higher levels of happiness, life satisfaction, and general well-being. Although research into meaning in life focused predominantly on coping with negative life events,

meaning may also be experienced as present in positive events (King & Hicks, 2009).

Meaning is present when an individual feels that an event makes personal sense and fits pre-existing beliefs and expectations (King & Hicks, 2009). According to King and Hicks (2009) meaning can be both present and awaiting detection or it may be viewed as a construction by which the person moulds it from events that occur. When meaning is detected, the individual readily connects an event to a pre-existing framework and the meaning of the event becomes clear. This process refers to the deductive application of a general meaning system to extract meaning from a life event (King & Hicks, 2009). However, sometimes the events that occur do not fit a person's pre-existing assumptions. When assimilation and accommodation are not possible the events that occur in someone's life can shatter the very pre-existing beliefs that would have helped to automatically detect meaning (King & Hicks, 2009). The individual will begin to construct meaning by searching for satisfactory answers to questions about why the event happened to them in particular, what it means and what should be done (King & Hicks, 2009). The result of constructing meaning is demonstrated when the individual feels that he or she have learned from the experience and have gained valuable insights (Briggs & Dixon, 2013). Meaning in life accordingly refers to the process of searching for or engaging in an event such as pregnancy, in an attempt to promote personal worth, hope and a reason for living by finding meaning in such a life event (Briggs & Dixon, 2013). Finding meaning includes cognitive associations that help structure one's world in a predictable fashion, making sense of one's situation as it fits with beliefs and goals that lead to subjective feelings of meaningfulness, purpose and cosmic significance (Tongerren, Hook, & Davis, 2013). Meaningfulness thus arises from the sense that events are profound, significant and promote a feeling of transcendence (King & Hicks, 2009).

Spirituality and Religion

Spirituality can provide this sense of meaning and transcendence (Jesse & Reed, 2004). It is described as an inner subjective experience that drives an interest in understanding the meaning in our lives (Ivtzan, Chan, Gardner, & Prashar, 2011). According to Wong (2010), spirituality, along with freedom and responsibility, is one of the three factors characterizing human existence. He concluded that a sense of meaning and self-transcendence is essential for survival and healing (Wong, 2010). People experience their spirituality and religion as an essential part of their identity that they use to aid them in their search for meaning (Tongeren et al., 2013; Wong, 2010). There are numerous definitions of spirituality and of religion but without any scientific consensus (Silva, Ronzani, Furtado, Aliane, & Moreira-Almeida, 2010). These two constructs can be distinguished by defining spirituality as “a person’s way to find answers to ultimate questions through a relationship with the sacred” (Silva et al., 2010, p. 165) while religion involves practices of “outward worship” (Ivtzan et al., 2011, p. 916). Religion refers to a system of beliefs in a Divine reality and very specific practices directed towards such a divine power (Ivtzan et al., 2011). However, according to Price and colleagues (2006), religion and spirituality go hand-in hand and the polarization of the two constructs is not necessary, because central to both constructs is the search for the sacred. The spiritual intrinsic experience of the sacred and the extrinsic religious behaviours to express this faith naturally follow from each other (Price et al., 2006). According to Dailey and Stewart (2007), the two terms have been used interchangeably; and in this research spirituality and religion will be referred to as overlapping and intertwined constructs. After years of empirical research, there is substantial evidence to show that both spirituality and religion are strongly associated with mental health and psychological well-being (Ivtzan et al., 2011). According to Mann, Mannan, Quinones, Palmer and Torres (2010), spirituality and religion provide mechanisms to help people find meaning in stressful

life events and situations. Spirituality and religion can thus be identified as important protective factors in health (Dunn, Handley, & Shelton, 2007; Silva et al., 2010). Spirituality has also been shown to correlate with health (Jesse & Reed, 2004) and in this context the World Health Organization has cited spiritual well-being as an equally relevant focus for health care providers (Lydon-lam, 2012). Emmons (2006) explained the role of spirituality and religion when he argued that goals of a spiritual nature have the unique ability to predict psychological well-being (Ivtzan et al., 2011). These meaningful goals are orientated towards the sacred and are concerned with ultimate purpose, commitment to a higher power, and seeking the divine in everyday life. The presence of these spiritual goals is related to greater levels of goal integration that unites separate goal strivings into a coherent structure, contributing to psychological well-being by contributing to an individual purpose in life (Ivtzan et al., 2011). It can therefore be argued that human beings are inherently driven to understand their lives by detecting or constructing meaning and that they rely on their spiritual experiences and religious beliefs to find such meaning, especially during significant periods of transition (Lydon-lam, 2012), such as pregnancy.

Pregnancy and childbirth serve as a clear example of a significant period of transition in which meanings and experiences are shaped by spiritual beliefs (Dailey & Stewart, 2007). Pregnancy can be a profoundly spiritual time for a woman and many draw on their spirituality as a resource for coping and consolation (Dailey & Stewart, 2007; Jesse & Reed, 2004). Such spiritual coping can be utilized when a woman is concerned about unpredictable issues, especially in a high-risk pregnancy which carries the possibility of a miscarriage (Hamilton & Lobel, 2008). A study by Etowa (2012) showed that women's spiritual beliefs and values lent perspective to the meaning of their pregnancies. Another study, by Price et al. (2006), proved that women use their spirituality to aid them in their search for meaning. Although the relationship between spiritual coping and finding meaning has been well-

established in previous research, the specific manifestations of the relationship in the lives of pregnant women are not well understood (Mann et al., 2010). It is important to understand exactly how women use their spiritual beliefs to help them find and/or construct meaning in their pregnancy because as this can contribute positively to their psychological well-being during that time (Jesse & Reed, 2004; Price et al., 2006; Steger et al., 2006). The psychological well-being of a pregnant woman is of the utmost importance, because, according to Hamilton and Lobel (2008), the prenatal stress that a woman experiences may have damaging and far-reaching effects on infant and child health after birth.

Experiencing a sense of meaningfulness in pregnancy as a major life event is a positive predictor of psychological well-being (King & Hicks, 2009) and meaning that is found through spirituality has been identified as contributing positively to psychological well-being. There is substantial evidence to show that spirituality is strongly associated with psychological well-being (Ivtzan et al., 2011) and that spiritual and religious beliefs provide a mechanism to help people find meaning in stressful life events (Mann et al., 2010) and as part of their experience of meaningfulness. However, the lived experiences of first-time mothers who make use of their spirituality to find meaning in their pregnancy have not yet been explored. Therefore, the aim of this study will be to explore a group of first-time mothers' experiences of meaningfulness during their third trimester of pregnancy by focusing on their spirituality. The research question can thus be formulated as: *How do first-time mothers experience meaningfulness, and more specifically, spirituality, as a component of meaningfulness, in the third trimester of pregnancy?*

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First-time mothers' experiences of meaningfulness during their third trimester of pregnancy:

A focus on spirituality

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First-time mothers' experiences of meaningfulness during their third trimester of pregnancy: A focus on spirituality

Abstract

This study sought to gain in-depth understanding of the lived experiences of first-time mothers during their third trimester of pregnancy. The non-probability, purposive sample were Afrikaans speaking first-time mothers aged between 22 and 40 years. Data on their experiences of meaningfulness during their pregnancy were collected using the Mmogo-Method® and reflective journals. The data were thematically analysed combining textual data and visual depictions. This group of first-time mothers expressed a very personal relationship with a Divine reality that they rely on and derive meaningfulness from their pregnancy and birthing experiences. They perceived a Divine reality as the giver of life by whom they were given a responsibility to carry new life. Sense of meaningfulness during pregnancy was strongly associated with spirituality.

Keywords: First-time mothers, Meaningfulness, Mmogo-Method®, Pregnancy, Psychological Well-being, Spirituality

First-time mothers' experiences of meaningfulness during their third trimester of pregnancy: A focus on spirituality

Introduction

This study is part of a broader research project focusing on first-time mothers' experience of meaningfulness during their pregnancy. Data were gathered from a group of women who were pregnant for the first time. Two main themes emerged from the data: the importance of relationships and the mothers' spirituality to find meaning in their pregnancy. This article will focus in particular on the role that spirituality plays in meaningfulness in a first-time mother's pregnancy.

Pregnancy is a turning point in women's lives because significant physical, mental, emotional and social changes take place then (Benton-Hardy & Lock, 1997; Dinallo, Downs, & Le Masurier, 2012; Dunn, Handley, & Shelton, 2007; Etowa, 2012).

Pregnancy and childbirth are one of the most significant and enriching social and psychological life events for a woman (Etowa, 2012; Uguz et al., 2007). The various changes that occur during pregnancy in physique, self-identity and interpersonal relationships may tax a woman's psychosocial and tangible resources, causing her to feel anxious and stressed (Hamilton & Lobel, 2008). Physical changes are largely due to dramatic hormonal shifts that cause profound changes in body shape (Benton-Hardy & Lock, 1997). Although pregnant women may experience physical changes they are more often exposed to psychological stress (Abe et al., 2007). Psychological stress in the third trimester involves anxiety about the prospect of becoming a mother and the adjustment to motherhood (Haga, Lynne, Slinning, & Kraft, 2012; Trillingsgaard, Elklit, Shevlin, & Maimburg, 2011). As the expectant mother establishes her maternal role, the growth and development of her baby become the main concern (Trillingsgaard et al., 2011). Pregnant women must adapt as they change from people primarily responsible for themselves, internally focused, to parents responsible for the life

and well-being of children, externally focused, (Benton-Hardy & Lock, 1997; Nakamura, 2009; Wiklund, Edman, Larsson, & Andolf, 2009).

Most of the research on pregnancy and expecting mothers has focused on the identification of risk factors and stressors associated with pregnancies and adverse health outcomes for the mother and child (Dailey & Stewart, 2007; Guse, Wissing, & Hartman, 2006). Little attention has been paid to positive attributes, protective factors and strengths during pregnancy, for example the mother's ability to comprehend her purpose in life and the meaning of her life during her pregnancy. This feeling of meaningfulness can contribute to the general psychological well-being of pregnant women.

Meaningfulness in coping with negative life events were arrived at by the experiences of Victor Frankl (Farby & Frankl, 1968). However, meaningfulness is not only associated with negative life events, but may also manifest during positive experiences and when things are going well (King & Hicks, 2009). Steger (2009, p. 682) defines meaning as "the extent to which people comprehend, make sense of, or see significance in their lives, accompanied by the degree to which they perceive themselves to have a purpose, mission, or overarching aim in life". Individuals make sense of turning points, which are perceived to alter the normal flow and direction of one's life, by applying various meaning-making processes (Tavernier & Willoughby, 2012). Women, for example, may turn to their spiritual beliefs as part of the meaning-making process to help them find meaning in such key events (Jesse & Reed, 2004; Silva, Ronzani, Furtado, Aliane, & Moreira-Almeida, 2010). A sense of meaningfulness in life, created through meaning-making processes, is associated with well-being and effective coping in stressful life-events (Debats, Drost, & Hansen, 1995).

Consequently, regardless of the intrinsic attractiveness (positive valence) or averseness (negative valence) of turning points, they contribute to a sense of meaningfulness

if the individual perceives them as significant or life-changing (Tavernier & Willoughby, 2012).

A sense of meaningfulness and living a meaningful life is an aspect of well-being that derives from going beyond human beings' self-interests and preoccupations, and being involved in something larger than yourself (Baumgardner & Crothers, 2010; Wong, 2010). Therefore, as part of meaningfulness, spirituality has been identified as an important protective factor for health as higher levels of spirituality are generally associated with greater mental health and well-being (Mann, Mannan, Quinones, Palmer, & Torres, 2010; Silva et al., 2010). The research question that will therefore guide this article is: How do first-time mothers experience meaningfulness by focusing on spirituality?

There are numerous definitions of spirituality, but with little consensus about how to define it. Spirituality can be described broadly as the recognition of presence that is higher or greater than the individual human being and includes one's spiritual perspective and one's religiosity (Jesse & Reed, 2004). Spirituality is thus a personal way of finding answers to ultimate questions about the meaning of life in a relationship with the sacred (Silva et al., 2010). Spirituality in this research will be informed by what Price et al. (2006) describe as a "relationship with what they held as sacred" (p. 67). Ivtzan, Chan, Gardner and Prashar (2011) define spirituality as "the personal experiences of the transcendent" (p. 916). Spirituality in this sense is used to describe an inner, subjective experience that creates a strong interest in understanding the meaning of things in life by relating to the transcendent or Divine reality (Ivtzan et al, 2011). While spiritual experience focuses on the belief in, or relationship with, a higher power, religion provides ways of experiencing this Divine reality (Ivtzan et al., 2011). For each individual, spiritual and religious experiences differ, although there are certain commonalities (Emmons, 2006). It can include anything from mere

acknowledgement that something bigger than the self is present in someone's life, to a very personal and intimate relationship with a Divine reality.

The aim of this study will be to explore a group of pregnant mothers' experiences of meaningfulness during their pregnancy (as a turning point) and more specifically how they experience spirituality as an important part of meaningfulness.

Methodology

Research Method and Design

According to Janesick (2000) qualitative research is a holistic design, concerned with the personal and intimate in order to understand a given social setting. Qualitative research methods were therefore used to better describe (Ritchie, 2009) and also to obtain an in-depth understanding (Snape & Spencer, 2003) of the meanings attached to the phenomena of being pregnant. A phenomenological design was used to describe the shared experiences (Creswell 2007; Mawson, Berry, Murray, & Hayward, 2011) of meaningfulness in pregnancy by a group of first-time mothers. According to Mawson et al. (2011), a phenomenological design is particularly concerned with understanding the lived experiences of people who are part of a particular phenomenon. On this basis, a phenomenological approach will be used to describe what all participants have in common as they experience meaningfulness in a phenomenon such as pregnancy (Creswell, 2007).

Research Context and Participants

Participants were a non-probability sample of first-time mothers (n=6) who had attended pre-birth classes at MediClinic, a private hospital group operating in South Africa that provides acute care, specialist-orientated and multi-disciplinary hospital services. Purposive sampling techniques were used to select participants according to predetermined criteria. Based on the research question, the inclusion criteria for participants were firstly, that they are first-time mothers and secondly, that they are at least 6 months pregnant.

A homogenous, Afrikaans-speaking (one coloured and five white) group of women (between 22 and 40), participated in the research. All participants completed 12 years school, three of them are graduates and two had obtained post-graduate degrees. Five of the six participants were married and one was committed to a long-term relationship with her partner. The self-reported living standard of the participants were average (n=5) or above average (n=1).

Procedure

Ethical approval was obtained from North-West University as this research forms part of a larger research project that focuses on how people use their strengths to cope in challenging circumstances (Project number: NWU-0005-10-S1). MediClinic Potchefstroom gave permission for the researchers to invite participants who attended the pre-birth classes. Participants were invited to become involved in the data-gathering process by letter. The invitations were handed out at the pre-birth classes at MediClinic by the nurses who conducted the classes. Women who were interested in participating responded by writing their names on a contact sheet. The researchers contacted those who confirmed that they were interested in taking part in the project. On the day of data gathering all participants assembled around a table and were informed about the aim of the study and their contribution to it, following which they signed an informed consent form. All participants were given a lump of clay, grass stalks and beads, as proposed by the Mmogo-method® (Roos, 2008), and asked to do the following: *Using the materials in front of you, please create a visual representation of your experience of meaningfulness during your pregnancy.* The visual representations were captured in photographs and video recordings which made up the visual data. Once the visual presentations had been made, the participants were asked to reflectively discuss what they had made and to share their experiences with the rest of the group (Roos, 2008; Roos, 2012). The group had the opportunity to respond, add to or alter what the individuals had shared and

a focus group discussion followed. All conversations were recorded and transcribed verbatim to constitute the textual data. The week after the focus group session, data gathering was continued by asking the participants to keep reflective journals. Guiding questions in the journals helped them with their reflections of their experiences. These questions prompted the mothers to report on their experiences of meaningfulness by rating their experience of meaningfulness on a scale from 1 (no meaning at all) to 10 (totally meaningful). Then the mothers were asked to write, in as much detail as possible, about an event that had occurred that day and had contributed to their experience of meaningfulness.

Data-gathering Methods

Mmogo-method®. The Mmogo-Method®, as described by Roos (2012), gives each participant the opportunity to make a visual representation of their experiences before participating in the focus group discussion. This visual representation is used as a departure point to access the deeper personal and subjective meanings of the individual participants by the researcher posing questions. Thereafter the visual representations become the stimulus material serving to involve all the participants in a group discussion to access the collective, shared experience and meanings in the group. By using a projective technique like the Mmogo-Method® and incorporating it with a focus group discussion, information can be acquired on a personal and collective level simultaneously (Roos, 2012).

Journals. Participants were asked to keep reflective journals for one week after the focus group discussion. According to Chien (2012), keeping a journal as a reflective practice can generate insights about experiences that can be shared later. Accordingly, the participants were given the opportunity to further reflect on their experience of the phenomena on a day-to-day basis.

Data Analysis

Textual data. Data analysis of the textual data was done by using thematic analysis as presented by Braun and Clarke (2006) as a method for identifying patterns and themes within the data. Moustakas (1994) described this method of analysis years earlier as a way to analyze phenomenological data specifically. This entails going through the transcribed text and highlighting significant statements that provide an understanding of the participants' experiences. The researcher develops clusters of meaning from these significant statements by grouping them with similar contents. These clusters of meaning then became the subthemes and where possible are further grouped together into main themes (Moustakas, 1994).

Visual Data. Analysis of the visual data (photos of the visual presentations) was done by comparing the symbolic values the participants ascribed to the representations to the specific research question (Roos, 2008). The values the participants ascribed to the representations were integrated with the textual data to support and enrich the identified themes. After the participants had constructed their visual representations they described the inherent symbolic values of the representations. These descriptions were compared with the research question to interpret them.

Trustworthiness

A different language and alternative models are needed to establish the trustworthiness of qualitative research, which aims to describe the experience of the phenomenon under investigation accurately, and not to generalize the findings across different contexts (Krefting, 1990). Lincoln and Guba (1985) proposed a model such as this for assessing the trustworthiness of qualitative research that fits the goals of the qualitative research methods. The model is based on four aspects, namely: credibility, applicability, consistency and neutrality.

Credibility is defined by Lincoln and Guba (1985) as “gaining the approval of the constructors of the multiple realities being studied” (p. 296). This is achieved by providing thick descriptions (Ellingson, 2009), concrete detail and explication of knowledge that show where the findings come from rather than simply reporting them (Tracy, 2010). A qualitative study is credible when it presents an accurate description of this nature or interpretation of the experience people who share that experience would immediately recognize (Krefting, 1990).

Applicability refers to the degree to which the findings can be applied to other contexts. However, according to Lincoln and Guba (1985), the burden of proving transferability lies not with the original investigator but with the person seeking to make an application elsewhere. The sole responsibility of the original investigator is to explain the context and research methodology in sufficient detail for the readers to be able independently to evaluate the application possibilities of the study in their own situations and contexts (Krefting, 1990; Tracy 2010).

Consistency refers to the dependability of the findings and whether the inquiry can be replicated with similar subjects and in a similar context (Krefting, 1990). Dependability is closely associated with the term transferability where the methodological rigour (Tracy, 2010) is assured and the exact procedure that is followed described sufficiently for a second researcher to repeat the process and possibly to obtain the same results if the context and the participants share a certain degree of similarity (Krefting, 1990).

Neutrality requires that the research procedures and results are free from bias and not influenced by the researcher's preferences and characteristics (Krefting, 1990). This can be assured if the researchers have included a significant degree of reflexive consideration of their role in the research process (Ellingson, 2009; Lincoln & Guba, 1985). It is of the utmost importance that the researchers suspend their own understanding in a reflective move to

cultivate curiosity (Creswell, 2007); only by bracketing or reflexively understanding the researcher's own opinions can a true account of the common experiences be created.

Ethical Considerations

This project was approved by the Ethics Committee of the North-West University, Potchefstroom Campus as part of a larger research project. (Project number: NWU-0005-10-S1). This larger research project is concerned with the exploration of enabling contexts where well-being is viewed with special consideration to individual needs, relationships, the state of affairs in communities, and the broader context. Informed consent was obtained from the participants for the present study after the purpose of the research and what would be expected of them had been explained. Special emphasis fell on the voluntary nature of their participation. They were assured that they were free to withdraw at any stage without any negative consequences. Demographic information, shared responses and contact details were handled with confidentiality by assigning pseudonyms to all participants. They were informed that North-West University would accept full responsibility for keeping and safeguarding all collected data. They were informed that the data will be stored in a secure location and on a password-protected computer. Finally the participants were assured that when the results were published all identifying information would be omitted.

Results

Three main themes emerged from the findings, represented in Table 1 (See Appendix 1)

(INSERT TABLE 1 AROUND HERE)

Spiritual Awareness

During their pregnancy the women described a new found spiritual awareness of the presence of the Divine reality in their lives. One participant explained this by saying: 'I am aware once again of God's love and His presence' (Participant 4). Another added that she felt God's presence every day and that: 'He is the one who sustains me' (Participant 1). One of

the participants (Participant 3) made a visual representation depicting her spiritual awareness of the blessings that she had received from a Divine reality during her pregnancy (See Figure 1).

(INSERT FIGURE 1 AROUND HERE)

The participant made a visual representation of her pregnant stomach (bottom, right) and to the left of that a representation of her hand. Above these is a representation she had made of the Lord's hand. The little beads that she had added symbolize the blessings coming down on her and her unborn baby (Participant 5). Participant 3 made a visual representation of herself comfortably leaning back against her faith and her spiritual awareness of God's presence in her life (see Figure 2). She explained that she felt supported and sustained through her spiritual awareness of the presence and involvement of the Divine reality in her life.

(INSERT FIGURE 2 AROUND HERE)

Origins of Life

Life is given by a Divine reality but also by the mother who is the bearer of the life inside her body. In a reflective journal one of the participants (Participant 3) described the origin of life as being the wondrous work of a Divine reality that is taking place in her body: 'I realized that God really is a God of wonders when I think about all the things that are happening on a molecular and cellular level so that my baby can develop and my body is such an important part of that' (Participant 4).

Divine reality. A Divine reality was identified by all the participants as the giver of life. One participant regarded her unborn baby as a gift from God: 'It is absolutely a gift from God' (Participant 2). Another participant explained that the Divine reality was the giver of life: 'God is the one who allowed me to conceive' (Participant 1).

Mother as giver of life. The group of first-time mothers were very aware of the role that they play in carrying life within them: ‘It is something special that happens in your body’ (Participant 5). She continued: ‘It is in a way selfish because it happens to you and it is your body’ (Participant 5). The he pregnant women were sensitive to the fact that even though this was happening within them they did not own life but that their situation was temporary: ‘These are not my children; I have to give them back to God’ (Participant 1).

The Plan of the Divine Reality

The participants described a strong belief in a plan the Divine reality had for them and their children and that called for their surrendering to it. However, they expressed a clear understanding of their own contributions to the plan.

Strong belief in plan of Divine reality. The participants described a very strong belief in the plan of the Divine reality in their lives. When talking about her pregnancy, one participant revered to it as ‘the way that the Lord sent us’ (Participant 2). This belief in the plan of the Divine reality was also very strongly related to the lives of the unborn babies. When talking about the lives of their children, the participants explained: ‘The Lord has a plan for their lives, so He would not have let them be born if He didn’t have something in store for them’ (Participant 1). In the reflective journal the same participant wrote that ‘God only has the best things planned for my children’ (Participant 1).

Surrendering to Divine reality. One participant explained how she surrendered her life to the Divine reality by stating: ‘My whole life is about Him, so I am non-existent if I don’t exist through Him’ (Participant 1). Another made a journal entry that surrendered the honour of her pregnancy to God when she wrote: ‘Once again the honour only comes to God’ (Participant 3). Another participant shared the fact that she had been unable to conceive for a long time and that this was a very difficult time for her and her husband. They made peace with the fact that they would never have children and despite their circumstances she and her

husband were able to surrender to the Divine reality and accept that it was His will that they had not conceived. ‘We talked to God and we said: God, this is Your will, we accept it’ (Participant 6).

Clear understanding of own contributions. The women were very aware of their own contributions to the lives of their children. One participant explained her and her husband’s contribution by saying: ‘You work together towards this goal to give the child the best possible future’ (Participant 6). Another participant referred to her visual representation which depicted flowers to explain how she perceived the contributions of the parents in the child’s life: ‘In my visual representation I made some flowers that symbolize growth. That is how I am going to raise my child with my husband’s help’ (Participant 5).

Discussion

Despite the fact that spirituality can be a very vague concept with different definitions, highlighting different aspects (Silva et al., 2010), these mothers were able to express their spirituality in a very concrete manner. The findings show that they were able to explain the presence of the Divine reality as a tangible aspect of everyday life. They are spiritually aware, for example, of the specific blessing they receive from the Divine reality and they are able to pinpoint exactly how and where the Divine reality is involved in their lives. This active involvement of the Divine reality in their lives contributed to the mothers’ experience of meaningfulness because they felt that they were part of something transcendent (Tongerren, Hook, & Davis, 2013). In the study the first-time mothers expressed the belief that the Divine Reality is the origin of life. They felt part of something transcendent because the Divine reality regarded them as worthy of being the bearer of new life. They believe that the life they carry is a gift from a Divine reality. They described this gift as a miraculous event taking place within them. According to Emmons (2006), the emotional response to a gift is gratitude, whereby appreciation is felt after someone has been the beneficiary of an

altruistic act. From this perspective the women felt grateful that they were used by a Divine reality to carry new life into the world, thus making them part of something transcendent. Being part of something transcendent is an important aspect for pregnant woman because, as Steger, Frazier, Oishi, and Kaler (2006) mention, "goal directedness or purposefulness" (p. 80) is an important part of meaningfulness. Furthermore, from a eudemonic perspective on well-being, a person is psychologically well if they have a purpose in life and the potential to achieve it (Ai et al., 2013). These first-time mothers found purpose in their pregnancy, based on the realization that they were going to be the vessels that carried life into the world.

During the third trimester of pregnancy a pregnant woman is preparing herself to be a giver of life (Jesse & Reed, 2004). This preparation period is very important because the woman is mentally preparing for her maternal role and responsibilities that she knows will commence once her baby is born (Herishanu-Gilutz et al., 2009; Nakamura, 2009). For most women this preparation is difficult (Hamilton & Lobel (2008) as they experience high levels of anxiety when confronted with a change in self-identity to adapt to their maternal role (Benton-Hardy & Lock, 1997; Etowa, 2012). However, the group of mothers studied described that they do not carry the sole responsibility for the future of their children because the children are essentially God's children. They described a shared responsibility, with the mother believing that the Divine reality has a plan for her children and that he only has the best things in store for them. This realization eventually contributed to their psychological wellness (Gropp, Geldenhuys, & Visser, 2007) as the anxiety that was associated with the adaptation to the maternal role was diminished. According to Jesse and Reed (2004), pregnancy can be a very spiritual experience for first-time mothers as they contemplate the miraculous nature of the event. Emmons (2006) describes it as an awe-inspiring experience: feelings of majesty and mystery are present while some of the ideas the women have about the origin and the meaning of life are questioned. Many women may try to find meaning in,

and the meaning of, their lives, which, according to Victor Frankl (Ivtzan et al., 2011), is an essential human motive. In an attempt to make sense of their experiences during their pregnancy, first-time mothers connect their experiences to pre-existing frameworks, for example their spiritual beliefs (Jesse & Reed, 2004; King, & Hicks, 2009). Meaningfulness was experienced by the group of first-time mothers in the current study when their experiences during their pregnancy fitted within the coherent framework their spirituality provides. For example, the mothers expressed a belief system based on the assumption that the Divine reality would support and sustain. This gives them a sense of meaning because they become externally focused on the will and sustenance of the Divine reality instead of their own discomforts.

The limitation of this study is that a small sample was used. It is accordingly recommended that the findings be verified in a bigger sample. Further research may be done with a more diverse sample to obtain a better understanding of the cross-cultural implication of spirituality and meaning. This research was conducted within a private hospital setting, making the sample representative of a certain socio-economic demographic only. It is suggested that future research could focus on groups of people with different socio-economic characteristics.

Conclusion

Spirituality and meaning-making would seem to be linked inseparably in the lives of first-time mothers who experience a turning point by giving birth. Meaningfulness manifested in the lives of these women through their spiritual awareness of a personal, intimate relationship with a Divine reality that can be described in a concrete and tangible manner rather than remaining generalized and vague. Within this relationship they experienced feelings of gratitude towards the Divine reality for the opportunity to be a bearer of life. By bringing life into the world they felt they were a part of something transcendent

and that gave them a sense of purpose, which enabled them to experience meaningfulness. They also experienced a shared responsibility for the lives and well-being of their future children, which made it possible for them to adapt to the maternal role without the anxiety of having the sole responsibility of providing a future for their offspring. This in turn contributed to their psychological well-being by reducing stress. Finally, the mothers were able to experience meaningfulness because the experiences and events surrounding their pregnancy fitted into a pre-existing framework grounded in the belief that the Divine reality would support and sustain them and their children in the future. These spiritual realizations might contribute to the first-time mothers' psychological well-being by reducing psychological stress, associated with pregnancy and adaptation to the mother role, or by enhancing a sense of meaningfulness which increased the mothers' eudemonic well-being with a sense of purpose of cosmic significance in their lives.

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Critical Reflection

The mental health of pregnant woman is a subject widely discussed in scientific literature (Silva, Ronzani, Furtado, Aliane, & Moreira-Almeida, 2010) because of the far-reaching effects that a poor mental health in pregnancy can have on the mother's adaptation post-partum, the mother-child relationship and future the development of the child (Etowa, 2012; Guse, Wissing, & Hartman, 2006; Haga, Lynne, Slinning, & Kraft, 2012; Hamilton & Lobel, 2008; Kim et al., 2012; Mawson & Wang, 2013). Over the years, researchers have focused on the identification of risk factors and stressors associated with adverse pregnancy outcomes and little attention was paid to health-enhancing resources such as spirituality (Dailey & Stewart, 2007). Moreover, a significant amount of research has focused on biological, psychological and social considerations in pregnancy, yet little has been undertaken into the spiritual dimension of pregnancy (Price et al., 2006).

Over the past few decades there has been an increased interest in spirituality, in particular in nursing and other health sciences (Dailey & Stewart, 2007) because of substantial evidence that spirituality is strongly associated with psychological well-being (Ivtzan, Chan, Gardner, & Prashar, 2011). In an attempt to promote health care from a bio-psycho-socio-spiritual viewpoint the World Health Organization has cited spiritual well-being as an equally relevant focus for health care providers (Lydon-lam, 2012). Even though the provision of spiritual care is a well-recognized component of holistic health care, the lived experiences of first-time mothers who make use of their spiritual to find meaning in their pregnancy have not yet been explored and health care professionals often struggle to address spirituality within their practice (Price et al., 2006). Research that explores the spiritual experiences of pregnant woman is needed to help health care providers gain a better understand of how to enhance the overall care they provide to pregnant woman and their families (Price et al., 2006). This therefore set out to explore how a group of first-time

mothers experienced spirituality during their third trimester of pregnancy and how these experiences of meaningfulness enhanced their psychological well-being. The research process was guided by the following question: *How do first-time mothers experience meaning in their third trimester of pregnancy by focusing on their spirituality?*

The findings revealed that meaning manifested in the lives of these first-time mothers through (1) their spiritual awareness of a relationship with a Divine reality; (2) feeling that they were part of something transcendent by being actively involved in the plan of the Divine reality; (3) experiencing a fit between their experiences during pregnancy and the coherent framework that their spirituality provided; and (4) comfort from the fact that the lives and well-being of their future children are shared responsibility between themselves and the Divine reality.

The first-time mothers' psychological well-being was first enhanced by reduced psychological stress associated with pregnancy and adaptation to the mother role because of the spiritual beliefs that the child is gift from a Divine reality, who will sustain both mother and child. Second, the sense of meaningfulness was increased by the mothers' spiritual awareness of the important role that they have to play in the plan of the Divine reality. This contributed to their eudemonic well-being by providing a sense of purpose of cosmic significance in their lives by feeling that they were part of something bigger than themselves.

In an attempt to provide holistic care that focuses on all aspects well-being, spirituality should be included as suggested by the bio-psycho-socio-spiritual model. The eudemonic well-being of mothers can be enhanced and psychological stress reduced by focusing on the sense of meaningfulness that is experienced when mothers rely on their spiritual beliefs and experiences.

Limitations

The limitation of this study is that a small sample was used and that it was representative of a very small percentage of the South African population. Furthermore, this research was conducted within a private hospital setting, which meant that the sample is representative of a certain socio-economic demographic only.

Suggestions for Further Research

It is suggested that future research should include more diverse research populations, representative of different ethnic groups; groups with different educational backgrounds and people with different socio-economic characteristics and cultural backgrounds.

Furthermore, it is suggested that future research make use of quantitative measures to test the hypothesis that spirituality enhances psychological well-being in pregnant and post-partum woman. For example, the Spirituality Perspective Scale (Reed, 1987) can be used with the Mental Health Continuum (Keyes, 2002) to test the research hypothesis.

The Spirituality Perspective Scale (Reed, 1987) is a 10-item tool designed to measure the extent to which individuals hold certain spiritual beliefs and engage in spiritually-related behaviours. Four items pertain to frequency of spiritual behaviours and six to specific spiritual beliefs. Item responses are averaged into a single score that ranges from 1 to 6, with higher scores indicating higher levels of spirituality.

The Mental Health Continuum (Keyes, 2002) measures three dimensions of well-being: emotional, psychological, and social well-being. The item responses are calculated and the final scores are represented on a continuum that ranges from languishing to flourishing.

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Appendix 1: Turn-It-In Report

ORIGINALITY
REPORT

11
%

SIMILARITY
INDEX

2 %

INTERNET SOURCES

9 %

PUBLICATIONS

4 %

STUDENT PAPERS

Appendix 2

Table 1: *Spiritual experiences during pregnancy*

Main Theme	Subtheme
Spiritual awareness	
Origins of life	Divine reality
	Mother
The plan of the Divine reality	Strong belief in plan of Divine reality
	Surrendering to Divine reality
	Clear understanding of own contributions

Appendix 3

Figure 1: Visual representation of the spiritual awareness of the blessing from God's hand

Appendix 4

Figure 2: Visual representation showing the support a mother experiences during pregnancy