

The Experience of Happiness among Chinese Postpartum Mothers

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Abstract

Postpartum maternal happiness, an indicator of quality of life that may decrease the effects of negative emotions such as postpartum depression, is not well studied. The purpose of this analysis was to explore how postpartum mothers experience happiness. Data were part of two cross-sectional studies with snowball sampling designed to understand health status of Chinese postpartum mothers. Forty-eight and 151 Chinese mothers within 1-year postpartum in the United States and Taiwan, respectively, answered an open-ended question about the happiest events they experienced during the postpartum period. Qualitative data were analyzed by bracketing contexts to meaning units, aggregating meaning units into themes, and deriving a thematic structure that fitted all themes. Interconnectedness and fulfillment were identified as describing postpartum maternal happiness. Existence of the baby, interaction with the baby, connecting everybody in the family, and integration of the baby into the family were the categories of interconnectedness whereas extension of mother's life, achievement, and being supported were the categories of fulfillment. The center of the postpartum mother's life was the baby and the baby, as well as activities associated with the baby, was the main source of mothers' happiness. Family support and achievement of various expectations, including continuation of the family name, also contributed to maternal happiness. Helping new mothers to understand both positive and negative emotions may encourage further discussion about areas in which mothers are feeling particularly challenged. Interventions such as cognitive counseling that stresses positive emotions may be used to assist new mothers find a healthy balance of emotions, especially cope with depression or feelings of sadness.

Keywords

Postpartum, Happiness, Chinese

1. Introduction

Pregnancy and the period following the birth of a child are generally thought to be happy time (Ballas, 2007). However, although the quality of life has been an interest of research, its indicator, happiness (Veenhoven, 2000), has been understudied especially at the time of postpartum. This is so even though it has been shown that positive feelings including happiness are related to better immune function and that unhappiness about being pregnant women is associated with greater engagement in risky behaviors and in depression (Barak, 2006; Blake et al., 2007). Additionally, a greater sense of happiness during the postpartum period is related to fewer depressive symptoms (McGill, Burrow, Holland, Langer, & Sweet, 1995) while positive affects were associated with lower level of anxiety and suicide ideation, and better quality of life (Soares et al., 2013). Thus, happiness may have positive physical and psychological effects on new mothers.

As early as 1986, Mercer defined maternal role attainment as an “attachment to the infant through identifying, claiming, and interacting with the infant, gaining competence in mothering behaviors, and expressing gratification in the mother-infant interaction,” (Mercer, 1986: p. 6) although postpartum happiness was not specifically addressed. Thus, even though new mothers may feel fatigue, disorganized, and frustrated in their new role (Ashton, 2002; Brouse, 1988; Fowles, 1998), being a mother should not be a negative experience. Mercer later advocated that the term maternal role attainment be replaced with the term “becoming a mother” since establishing maternal identity was a dynamic process involving in defining a new self and regaining confidence in self (Mercer, 2004). Becoming a mother is a process of appreciating, discovering, learning, and accepting, which results in a positive and worthwhile experience with the establishment of new aspects to relationships with partners, families, and in-laws and achievement of a new balance and life process (Martell, 2001).

Despite the work of Mercer and others, most studies of postpartum mothers have focused on negative feelings, especially postpartum depression. Positive feelings such as happiness that may decrease the impact of negative emotions have not been well studied or understood. Greater understanding of these positive emotions, including happiness, could lead to interventions that emphasize these positive emotions, thus decreasing some of the more negative feelings that new mothers experience. The purpose of this analysis study was to understand how postpartum mothers experience happiness.

2. Method

2.1. Design and Procedures

The data for this paper were derived from two cross-sectional studies, one in the United States (US) and the other in Taiwan, focused on understanding the health status of Chinese postpartum mothers living in both countries. Those two studies were mixed methods research design. The quantitative results of those two studies were presented elsewhere (Cheng & Pickler, 2009; Cheng, Walker, & Chu, 2013). In addition to completing survey questionnaires, participants were asked to write down their happiest events during the postpartum period. A structured questionnaire was not used since there are few validated research tools about happiness and because happiness is an abstract and subjective feeling probably best explored using the participants own words (Lu & Gilmour, 2004). Only results from the analysis of the qualitative data were reported here. An institutional review board in the US approved both study protocols. Participants were recruited who 1) had given birth to a healthy child who was younger than 1 year old, 2) lived with the child, 3) were self-identified as Chinese or Taiwanese, and 4) were older than 17. Participants in the US were recruited through professional referrals, distribution of flyers, and electronic announcements on websites. Participants in Taiwan were recruited through professional referrals. Data were collected with paper or electronic questionnaires via mail or email in the US while paper questionnaires were used in Taiwan.

2.2. Data Analysis

Data were analyzed using the following steps (Pollio, Henley, & Thompson, 1997; Giorgi, 1997). First, the authors read all contexts and bracketed meaning units in words, phrases, or sentences. Meaning units were determined by the authors. Second, the authors examined the contexts for a sense of a whole. Third, meaning units were aggregated into themes. Finally, the authors derived a thematic structure that fitted all themes.

2.3. Sample

One-hundred-fifty-one Chinese mothers in the US and 238 mothers in Taiwan who met inclusion criteria responded to invitations or advertisements about the study. Of those respondents, 48 mothers in the US and 151 in Taiwan answered the open-ended question about happiness.

Most participants were married (US: 100%, Taiwan: 97.7%), primiparous (US: 61.4%, Taiwan: 48.9%), and had delivered vaginally (US: 69.0%, Taiwan: 64.9%). About half of the participants had given birth to a boy (US: 50%, Taiwan: 53.4%). Ninety-six percent (96%) of US participants were born outside the US and had been in the US for a mean of 8.1 years ($SD = 7.4$, range .67 - 30, median: 5.50). Participants living in the US had higher educational levels (US: 91.5% of or higher than bachelor's degree, Taiwan: 67.9% of or lower than associate degree), were older ($M \pm SD = 30.83 \pm 4.00$ for Taiwan, $M \pm SD = 33.48 \pm 3.44$ for US, $t(199) = 4.70$, $p < .001$), and had younger infants at the time of data collection ($M \pm SD = 6.33 \pm 3.54$ months for Taiwan, $M \pm SD = 5.20 \pm 3.15$ months for US, $t(198) = 2.23$, $p = .03$) than participants living in Taiwan. More participants living in Taiwan worked full time (US: 28.2%, Taiwan: 70.2%).

3. Findings

Two themes were found that described new mothers' happiness: interconnectedness and fulfillment. Four categories associated with interconnectedness were existence of the baby, interaction with the baby, connecting everybody in the family, and integration of the baby into the family. Three categories of fulfillment were extension of mother's life, achievement, and being supported.

3.1. Interconnectedness

3.1.1. Existence of the Baby

Just by having a baby and being with the baby made mothers happy. Participants reported that they were happy by "being with the baby every day," "playing with the baby," and "seeing the baby happy." Mothers had a sense of achievement and were happy when people praised their baby by saying that they were "beautiful," "healthy," "cute," and "good-natured (not fussy)." They were happy just to "be with their babies all day long and dressed them up," especially when their babies "recognized them," "called them mom," and "smiled at them."

I have two baby boys plus my husband. My happiest thing is to see them sleep soundly every night.

3.1.2. Interaction with the Baby

Participants reported happiness when they interacted with their babies. Mothers were touched by seeing more facial expressions and smiles on the faces of their babies as the babies grew older. The babies "depended on," "needed," and "trusted in" the mothers and responded to the mothers' care with happy and satisfied smiles.

He (the baby) was screaming and crying after pooping. His eyes and face was so tender after I diapered him.

3.1.3. Connecting Everybody in the Family

Participants reported being happy just "being with the family" and "communicating with their mother-in-laws." The newborn brought members in the family together. Especially for mothers in the US, happiness was reported about having their family come from home (China) to see them and the babies at various times during the postpartum period.

When I was on leave, I went back Taipei (home) to see my baby. When I saw my parents-in-law, my husband, and my baby were happy together, the atmosphere of joy made my happiest moment.

At first, we three (the family) used to live in three separate places. Now we have conquered all difficulties and are living together. We, the family, support each other and that is a source of my happiness.

3.1.4. Integration of the Baby into the Family

Babies being included in the family made mothers happy and content. Happiness was especially noted when mothers saw their husbands "learn how to parent the baby," "intimacy between the husband and the baby," "own sister carefully taking care of the baby," and their "older child(ren) played happily with the baby without jealousy." One participant said she was happy because she saw "contentment in my husband's eyes when he looked at her (the baby)" while another mother said "my husband came in one day and held both me and our new son

and said ‘my family.’ Participants said that family dynamics changed positively after their baby’s birth. Participants noted that their husbands tried not to work overtime and “came home on time to be with me and the baby.”

It is my happiest moment when my husband takes us all out on the weekend. Before the baby came, it was always me who proposed to go out but he showed less interested then. Now, it is him who suggests us to go out for a walk.

3.2. Fulfillment

3.2.1. Extension of Mother’s Life

Participants reported that their happiness started when they knew their “babies were delivered safely” and were “healthy at the moment they were born.” Participants also reported being happy when they were “discharged from the hospital,” and when the baby was “problem free at well-baby checkups.” Some participants noted that they cried because they were happy when they first held their “little gift from God” right after childbirth. Participants also reported being happy when they saw the children “played well,” “ate well,” “slept well,” and grew up healthy and reached developmental milestones such as “making sounds;” “calling papa and mama,” “sitting,” “dancing with hands and legs,” “crawling,” “walking,” and “clapping hands.” One participant wrote that she was happy when her “baby’s jaundice gradually faded. His face no longer looked yellowish and he was getting bigger and bigger.” For preterm or sick babies, the happiest moment was when mothers saw their babies “thrived” and “recovered from illnesses.”

On New Year’s Day, I was bathing my baby and found that he was trying to turn his body over. I was thrilled. He was trying so hard. I was so touched and had an impulse to cry.

3.2.2. Achievement

Participants were happy not only because they “gave births to lovely babies and were successful in pregnancy and maternal tasks” and “finally became a mother,” but they had “a successful breastfeeding.” Mothers were happy when they knew their “breastfed babies could grow and develop normally” and realized they were “a mother to a child.” Just having that thought “comforted me (the mother).” A participant who had a baby boy was especially happy and felt relieved from the “stress for having given birth to a boy to carry on the family’s last name.” Mothers had their confidence back as one mother said:

When I looked back at what I had written, suddenly, I knew I finally got rid of so much self-doubt. I became a mother with self-confidence. The health of the baby proved that our sacrifices were worth it.

3.2.3. Being Supported

New mothers were happy when they “could have enough sleep” and “take a trip out of town with family.” The support and care started “right at the beginning of the pregnancy” and was “priceless.” The sources of happiness came not only from the baby but also from the husband and other family members. For example, one participant stated that “my husband could understand how hard it was to take care of a baby and started to help when getting off from work.” Support from other family members was also a source of happiness. As participants noted, “my mother-in-law prepared so many kinds of food and was afraid of my lacking of appetite,” “my sisters helped name the baby,” “my birthday was within the period of my maternal leave and my parents-in-law came and celebrated it with us” also cheered mothers up. Another participant was happy because her husband “affirmed and encouraged” her and told her to “take some time off to relax.” In addition to themselves, mothers were happy when they saw their babies valued by the senior members of their families. As one participant said,

My second girl was a super-healthy baby so I was very happy. Although I gave birth to two girls, all members of the family love them.

4. Discussion

New mothers’ experience of happiness can be described with the themes interconnectedness and fulfillment. Existence of the baby, interaction with the baby, connecting everybody in the family, and integration of the baby into the family were the categories of interconnectedness whereas extension of mother’s life, achievement, and being supported were the categories of fulfillment. From these findings it may be concluded that the center of a mothers’ life during the postpartum was the baby and the baby as well as activities associated with the baby was the main source of mothers’ happiness. Family support and achievement of various expectations, including con-

tinuation of the family name, were all included in sources of happiness.

The most important task for postpartum mothers is to establish maternal identity and gratitude in becoming a mother, including satisfaction with mother-infant interaction (Mercer, 1986, 2004). However, it can be argued that postpartum happiness is more than satisfaction with mother-infant interaction; it is also a psychological feeling of fulfillment. It also establishes relationships with family members and integrates the baby into the family. These findings are consistent with findings of other researchers. In a study using Q methodology to explore postpartum maternal concerns of western (i.e. non-Chinese) mothers; the findings revealed that the postpartum was a story of happiness rather than simply contentment (Jordan, Capdevila, & Johnson, 2005). Participants in the study stated that they could not imagine life without their children and they had never felt happier. The participants also noted that their children were the most important thing in their lives and that they had supportive families. These findings are like the findings of the current study, although in the current study, participants were also happy for their achievements of personal goals.

Happiness has been described as a harmonious state of existence that is achieved when an individual has the wisdom of discovery along with contentment or gratitude, giving, and self-cultivation (Lu, 2001). Different from Euro-Americans, Chinese people view social relationships as an important element of happiness in which individuals are interdependent, self-restrained, and considered for other people's welfare. Additionally, Chinese emphasize harmonious homeostasis and spiritual enrichment as part of happiness while Americans are more concerned with material gratification and personal achievement (Lu & Gilmour, 2004). Similarly, Chinese mothers in this current study were happy because they not only achieved the goal of being a mother, which fulfilled their lives, but they were also able to maintain and strengthen family relationships.

Studies have reported that postpartum mothers concurrently experienced negative mood and joyous and happy states (Jordan et al., 2005; Clark, Skouteris, Wertheim, Paxton, & Milgrom, 2009; Nicolson, 1999). This analysis included participants who reported depressive symptoms as well as those who did not. In fact, only four participants of 72 who reported depressive symptoms expressed that they did not experience any happy events. Thus, even mothers reporting depressive symptoms experienced happiness in ways similar to mothers who did not report depressive symptoms. As one mother stated, "Being a mom is much tougher than I expected both physically and emotionally but baby's innocent smile helps me get through."

Recognizing that both sadness and happiness accompany important life events is useful for clinicians. Helping new mothers to understand this as well could be important to the new mother's well-being. Asking mothers at early postpartum and early well child health visits about both sadness and happiness may encourage further discussion about areas in which mothers are feeling particularly challenged. Additional interventions may be used to assist new mothers in finding a healthy balance of emotions, including cognitive counseling that stresses positive emotions as a way to cope with depression or feelings of sadness.

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