

III CONFERÊNCIA INTERNACIONAL DE INVESTIGAÇÃO EM SAÚDE  
PROMOVER A SAÚDE ATRAVÉS DA INVESTIGAÇÃO

III International Conference of Health Research  
Promote health through research

# Strategy mobilization in the transition to parenthood

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# Introduction

The transition to parenthood...

- Is one of the most dramatic and intense transitions in the family life cycle.

(Ngai & Ngu, 2013; Katz-Wise, Priess, & Hyde, 2010)

- Irreversible nature and repercussions on the health and well-being of parents and child development.

(Brazelton, 2007; Hidalgo & Menéndez, 2009; Ngai & Chan, 2011)

- The acquisition of parental skills is a complex task.

(Sallés & Ger, 2011)

- Small/nuclear families today do not offer the same opportunities as before.

(Hidalgo & Menéndez, 2009)

- To understand the response patterns of parents in the exercise of parenthood during the child's first 6 months of life.

# Methods

- Grounded Theory.
- Semi-structured interviews (n=60).
- Observation (n=37 home visits).
- Data collection: parents' homes



# Methods

- Participants: 5 fathers and 5 mothers (couples). 4 primiparous, 1 multiparous. 26-33 years old and a healthy full term son, 4♂ e 1♀.
- NVivo. Open, axial and selective codification.  
(Corbin & Strauss, 2014)

# Results

Adopting  
apprentice  
strategies to  
solve  
problems

Making  
decisions in  
problem  
situations

*Actions/interactions  
adopted by parents*

Sharing or  
taking on  
different  
tasks

Reorganizing  
routines and  
activities to  
fulfil

*Paradigm Model*  
(Corbin & Strauss, 2014)

Receiving  
family  
support

Living one  
day at a  
time

Trying to  
conciliate  
the parental  
with the  
work role

Adopting  
apprentice  
strategies to  
solve problems

Evaluating situations

Doing to learn

Experimenting strategies

Watching others care

Learning with family member's advices

Discussing care with the partner

Mobilizing knowledge

Questioning family members and friends

Questioning health (and family) professionals

Not feeling the need to question

Making decisions  
in problem  
situations

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Hospital as a last resort

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Resorting to health services

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Deciding to administrate anti-colic therapy

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Halting prescribed anti-colic therapy

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Not following orthopaedist's orientations

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Sharing or taking  
on different tasks

Providing care together

Intersubstituting each other in caring

Sharing care

Taking up other tasks

Helping in the necessary care

Providing care at night if necessary

Providing care while the mother is debilitated

Replacing the exhausted mother

Replacing the mother when necessary

Replacing the mother in her absence

Stop providing certain care

Reorganizing  
routines and  
activities to  
fulfil

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Enjoying while baby sleeps

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Performing tasks with the baby on the lap

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Interrupting tasks to attend to the baby

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Managing the day around the baby

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Adjusting care schedules

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Performing tasks with the baby nearby

---

Sleeping in separate rooms to rest

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Sleeping together again

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Receiving family  
support

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Receiving support from the family of origin

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Receiving support from the husband

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Instrumental support in househod chores

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Instrumental support in baby care

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Emotional support

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Living one day at  
a time

---

Devaluing less pleasant situations

---

Regarding the present outcomes as positive

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Hoping for improvements in the future

---

Feeling a progressive adaptation

---

Finding the will to overcome

---

Trying to  
conciliate the  
parental with the  
work role

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Preparing the return to work in advance

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Thinking of motherly substitutes for the baby

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Reorganising again routines and activities to do

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Feeling a divide between parent and worker

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# Discussion

- Mobilization of different strategies and resources (family and friends with parental experiences, health professionals).

(Figueiredo, Pacheco, Costa, & Magarinho, 2006; Hidalgo & Menéndez, 2009)

- Skills learnt and developed through interaction with the child. (Ponomartchouk & Bouchard, 2015)

- Parents as non-passive receptors of the advice and indications from health professionals. (Monteiro, 2005)

■ Family support as a facilitator factor in this transition (help with chores, emotional support).

(Ngai & Chan, 2011; Ponomartchouk & Bouchard, 2015; Suzuki, 2010)

■ Experiences anchored to the traditional father role versus involved, present and participative father. (Martins, Abreu, & Figueiredo, 2014)

■ A larger number of parenthood-work conciliation strategies used by women. (Katz-Wise, Priess, & Hyde, 2010)

■ Male career divestment is not observed, not even pondered.

(Aboim , 2010)

# Implications for Practice/Policy

Change and innovation in healthcare practice:

Nurses



- Moments promotive of formal learning
- Face-to-face and distance clinical care

# Conclusion

Components:

- Cognitive (learning, decision-making).
- Relational (family support).
- Operational (division of labour, routine rearrangement, reconciliation of roles).

All day to day situations carry “educogenic” potential.

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