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## Research Paper

### Developing a Conceptual Model of Coping with the Maternal Stress based on Coping Strategies of Satisfied Women: A Grounded Theory Approach



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#### ABSTRACT

**Objective:** Unmanaged stress during parenthood can lead to poor performance of the family and inappropriate parenting in general. Therefore, it is necessary to identify optimal methods of dealing with stress.

**Methods:** The present qualitative study was based on a grounded theory approach. The population included women (living in Tehran in 2021), who were satisfied with their lives and had at least one 6-year old child. After the initial investigation, from among 51 women, 11 women whose level of satisfaction with life was above the mean were selected through purposive sampling method. The research instrument included Diener's (1985) Satisfaction with Life scale and semi-structured interviews. The data obtained from the interview were analyzed through Strauss and Corbin's method.

**Results:** The qualitative analysis of the interviews showed that satisfied women used strategies, such as preventing the spread of the problem, changing the situation, self-empowerment in processing negative emotions, communication activism, educational activism, conscious problem solving, and seeking professional help to deal with their maternal stress. The central factors included not giving up, solving the problem and activism to solve it. The causal factors included worrying about child's developmental delay/ developmental disorders, financial pressure, and role density/ role conflict. The underlying factors included agreement or disagreement in spouses' training methods, dynamism and activism, modeling and gaining experience, persistence and perseverance, feeling self-inefficiency in training, realism/perfectionism, mother's independent personality/ feeling lonely, and living in the present time/ worrying about the future. The intervening factors included unwanted pregnancy/ spouse' unwillingness to have children, perceiving the ineffectiveness of the efforts, comparing the growth of peers, worrying about providing facilities for the child's growth, and weakness in emotional regulation/ depression. The facilitating factors included the calmness of the child, the mother's personal space and recreation, the support of the spouse and families, and the mother's openness to experience. Finally, the consequences of coping with maternal stress included managing the emotions of the mother and the child, the child's taking responsibility, the enrichment of the marital relationship, the intimate relationship/ acceptance, and parents' acceptance of the child and their companionship.

**Conclusion:** The results of the current study can be the basis for future studies. It can also assist formulating educational and therapeutic programs aimed at dealing with the stress caused by the birth of the first child.

## 1. Introduction

Parenthood represents a major life change which can significantly affect the emotional health of both men and women.

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Although parenthood can be a positive experience, parents may face challenges which can increase their stress levels and can negatively affect their emotional health. Parental stress refers to the perceived psychological distress of the mother or the father; it is caused by the demands of being a parent (Westrupp, Macdonald, & Evans, 2022; Goldenberg & Goldenberg, 2008; Deater, 2008). These stressors are associated with the caregiving context; they make it more challenging for parents to fulfill parenting roles (Dong, Dong, & Chen, 2022; Fang, Luo, Boeble, Windhorst, Van Grieken, et al., 2022).

Unmanaged parental stress is one of the determinants of ineffective parenting which is associated with many negative consequences, including poor physical health, parental depression and children's social-emotional maladjustment (Harris, 2021). Discovering the factors affecting parental stress is very important; it assists developing the strategies to facilitate parenting and to promote child development, especially for young children. According to previous studies, social support and parental self-efficacy are the factors which potentially influence parental stress (Capuzzi & Stauffer, 2021; He, Zhang, Tong, Lan, Li, et al., 2018; Kim, 2018). Parenting theories (e.g., Abidin, 1992; Belsky, 1984) hypothesize that parents' psychological stress reactions may contribute to poor parenting behaviors (Liu & Wang, 2015). In fact, bad parental behaviors have negative effects on children's behaviors (Xing & Wang, 2013, Olson, Chen, Ibarra, Wang, Mash, et al., 2022).

Family stress is a process of family change; it is not just an event or a situation which occurs in a family (Guthrie, Zubatsky, Redlinger & Smith, 2022, Chzhen, Howarth, & Main, 2022). Lavie et al. (1987) consider a stressful event in the family as a situation which has the potential to change the family system. Relying on the literature, Nelson and Norm (1981, cited in Hill, 2012) considered the dimensions of changes caused by stress in the family as internality, externality, pervasiveness, speed of change, intensity, predictability, reversibility, scope and stress level. Families with stress and damage have some characteristics, including ineffective problem solving (i.e., lack of effective identification of stressful factors), weak relationships based on blame rather than solution-orientation, structural defects (i.e., lack of solidarity, inflexibility in roles and the tendency to overstate and to focus on individuals rather than the family system and all members, poor use of resources, and using strategies which generate problems (e.g., violence and drug use) instead of solving the problems (Masarik & Conger, 2017).

In many cases, couples and families face many crises and stresses in the life cycle which may cause disharmony and imbalance in their relationships (Boss, Bryant, & Mancini, 2016). The analysis of the evolution of marital satisfaction during the married life of individuals shows that couples experience high marital satisfaction in the first years of married life (before parenthood), low marital satisfaction in the middle years (parenthood) and high marital satisfaction in the following years. In fact, the relationship between life cycle and marital satisfaction follows a U-shaped curve (Carter & McGoldrick, 1989). Despite the widespread belief in this curvilinear relationship, according to Van Laningham et al. (2001, cited in Abbasi et al., 2011), there are studies which show other patterns, either a constant decrease or increase in marital satisfaction; in some cases, no relationship can be observed. Due to such limitations, the curvilinear relationship in the life cycle is ambiguous. The present research study partially sought to elucidate these ambiguities.

Research studies conducted on family life cycle stress have often emphasized the couple sub-system. For instance, Yaman et al. (2010) examined family stress and the influence of parents in children's externalization of problems in immigrant families. In addition, in a review, Oldo et al. (2006) investigated the stress of families and mothers during the birth of the child. Furthermore, these studies may have focused on one of the sub-systems of the family system - mainly the husband and the wife system. For instance, Ebrahimipour, Aslani & Aman (2013) focused on psychological well-being and marital happiness in the life cycle of couples. Taherzadeh and Khojaste Mehr (2013) examined the changes in the perception of fairness and marital satisfaction in the family life cycle of married men and women. Eslami and Samani (2013) investigated the difference in marital satisfaction, happiness and dimensions of love in the family life cycle. Shido et al.'s (2014) focused on the relationship between exposure to stress, family functioning, and internalizing symptoms among male youths. Thus, as it is evident in the literature review, there is a gap in the examination of the stress of Iranian families and the strategies to deal with it among couples with a young child.

Based on the existing theories, models and research studies, intrapersonal, interpersonal and socio-cultural factors play a role in family stress in the life cycle. Hence, the current research study sought to find out what strategies satisfied women used to reduce the stress of parenthood.

It is worth mentioning that according to [Carter and Mc Goldrick \(1989\)](#), the stresses in family life cycle are influenced by ideas, beliefs, myths and patterns of family, ethnicity, religion, friends, work, society, political, social, and cultural issues and unpredictable events. Therefore, it can be different in different societies. Furthermore, since this issue has not been considered in Iranian society, there is a knowledge gap in this field. The current research sought to develop a model to deal with the maternal stress in the life cycle based on Iran's sociocultural conditions; it answered the following questions:

1. What strategies do satisfied women use to deal with the stress related to the stages of family development after the birth of the first child?
2. What are the indicators and the components of the satisfied women's pattern of coping with maternal stress?

**2. Materials and Methods**

This study was a qualitative study based on a grounded theory approach. The sample population included women (living in Tehran in 2022), who were satisfied with their lives and had at least one less than 6-year-old child. The sample was selected through purposive sampling method, in which sampling continues until data saturation emerged. This type of sampling follows the rule of gradual selection and has a repetitive nature. In this method, the researcher selects an initial sample and analyzes the data obtained from it. Then, they select more samples to refine

emerging categories. This process continues until the researcher reaches the stage of data saturation. In other words, the stage where no new data is obtained from further expansion of the sample. The inclusion criteria were willingness to participate in the study, having at least one less than 6-year-old child, mothers being in the age range of 30-40 years, and not applying for divorce.

First, Satisfaction with Life scale (SWLS) was used to screen satisfied women, and a semi-structured interview was used to extract the model. Satisfaction with Life scale was developed by [Diener, Emmons, Larsen & Griffin \(1985\)](#), and includes five items which measure the subjective feeling of well-being. Each item has 7 options, which are answered on a 7-point Likert scale (from completely disagree to completely agree). The individual's final score is in the range of 5-35. Higher score indicates greater satisfaction. The validity of this scale (using Cronbach's alpha coefficient) was reported as 0.90, 0.82 and 0.79, respectively for American, German and Japanese nations ([Schimmack, Radhakrishnan, Oishi, Dzokoto & Ahadi, 2002](#)). In Iran, the reliability of this scale was reported as 0.83 using the Cronbach's alpha coefficient and 0.96 using test-retest method ([Mohammad Kochki & Guderzi, 2016](#)).

Actually, 51 women were examined in terms of satisfaction with life. From among the women whose score in Satisfaction with Life scale was higher than 21 (i.e. 30 women), those who were willing to participate in the research study were invited for an interview (see Table 1). Finally, 11 women participated in the study.

**Table 1. Demographic characteristics of the participants**

No	Mother's age	Marriage duration	Number of children	The children's ages	Educational level
1	40	10	2	5. 8	B.A.
2	35	7	1	5.5	B.A.
3	35	6	2	5.5	M.A.
4	39	10	2	3. 7	B.A.
5	37	9	2	4. 7	M.A.
6	39	8	1	5	B.A.
7	30	7	1	5.5	M.A.
8	32	6	1	5.5	B.A.
9	35	9	1	4	B.A.
10	35	10	2	5	M.A.
11	34	7	1	5	B.A.
<b>Mean</b>	35.54	8	-	4.8	-
<b>Std. deviation</b>	3.04	1.57	-	1.38	-

As Table 1 shows, the number of participants was 11. The mean age of women and the standard deviation were 35.54 and 3.04, respectively. The mean duration of their marriage and the standard deviation were 8 and 1.57, respectively. With regard to their educational level, 63.63% had a bachelor's degree, and 36.37% had a master's degree.

After screening, a semi-structured interview was used.

First, a sample of research questions was designed based on the opinions of the relevant professors. These questions asked what stress they experienced after the birth of their first child, what strategies they used to deal with the stress after the birth of their first child, how effective these strategies were in reducing the stress and solving the problems.

Before conducting the interviews, the following ethical considerations were taken into account. First, an informed consent for conducting the interviews was taken. Second, the participants had the opportunity to withdraw at all stages of the research study. Third, the presence of the participants at the location of the interview was coordinated. Fourth, to record the interview, permission was obtained from the participants. Fifth, the information was kept confidential. Sixth, the participants had the right to refuse to answer some of the questions.

The interviews were conducted and analyzed during four months. Due to the spread of Covid-19 virus, the participants were not willing to be interviewed in person. Thus, the interviews were conducted and recorded in Skyroom. First, two interviews were conducted to investigate the possible problems. Then, 11 main interviews were conducted until data saturation was reached.

After conducting the interviews, Strauss and Corbin's (2013) method was used for data analysis. In this way, the recorded interviews were immediately transcribed and typed word by word. The transcripts of the interviews were read several times to get a general understanding of it. Then, the researchers exchanged opinions with the supervisor and advisors to extract the themes.

In grounded theory approach, the data are analyzed in three ways, including sentence as the unit of analysis, paragraph as the unit of analysis, and the entire text as the unit of analysis. In the current research study, a combination of the three mentioned methods was used. In other words, the sentences, the paragraphs and the entire text of each interview were used to identify the initial codes (open coding). In fact, each interview was examined sentence by sentence. Then, the implied meaning in each phrase was extracted and recorded. This was repeated for each paragraph and the entire text of each

interview. Open coding was done after each interview, and according to the relevance and compatibility of each code with other codes, it was placed under a general category. This process was repeated many times; after repeated considerations, the open codes which were more semantically similar were selected as axial codes, based on which selective codes emerged.

In order to check quality of the data, the four criteria proposed by Lincoln and Guba (1985 cited Oliver, 2011.) were used. More specifically, to check the credibility, the corrective comments of the supervisor and the advisors were applied on the process of conducting interviews and analyzing them. To check the conformability, in addition to the fact that the researchers tried not to interfere with the process of data collection and analysis as much as possible, they tried to keep the record of all the stages of conducting interviews and analyzing them. To check the dependability of the data, the transcripts of the interviews were presented to the research colleagues and a qualitative research expert for a more detailed review of the codings. In order to check the transferability, it was tried to select the participants from different social, cultural and economic levels. Nevertheless, since the transferability of the findings in qualitative research depends on the extent and the conditions of the similarity in original research, the decision on the transferability of the findings of the current study is left to the users.

### 3. Results

The first question: What strategies do satisfied women use to deal with the stress related to the stages of family development after the birth of the first child?

The themes regarding the first research question extracted from the interviews are reported in Table 2

**Table 2. The strategies of satisfied women in dealing with stress related to the birth of their first child**

Axial codes	Open codes
<b>Preventing the spread of the problem</b>	Timely and decisive action
	Ignoring the child's inappropriate behaviors
	Avoiding beating around the bush
<b>Changing the situation</b>	Changing the condition
<b>Self-empowerment in processing negative emotions</b>	Increasing the tolerance threshold
	Trusting God
<b>Communication activism</b>	Not disagreeing with father in the presence of the child
	Managing the relationship and the conversation with spouse
	Allocating time, talking and empathizing with the child
	Managing relationships with others
<b>Educational activism</b>	Increasing knowledge on training
	Supervising and controlling properly
	Providing growth opportunities for the child
	Encouraging verbally and practically/ highlighting strengths
	Training the child
	Strengthening the child's social interaction

<b>Conscious problem solving</b>	Focusing on the solution, not the problem
	Reducing the role density/ changing the contribution
	Satisfying one's unmet needs for her children
	Being realistic instead of perfectionist
<b>Seeking professional help</b>	Asking for help from experienced individuals
	Making sufficient effort to assess and to diagnose the problem
	Having standard care/ treatment

As Table 2 shows, with regard to the first research question, seven axial codes and 23 open codes were detected. These codes were summarized in the selective code which states that satisfied women do not run away from the problem after the birth of a

child; they consciously and proactively use some strategies to solve the problem and reduce stress.

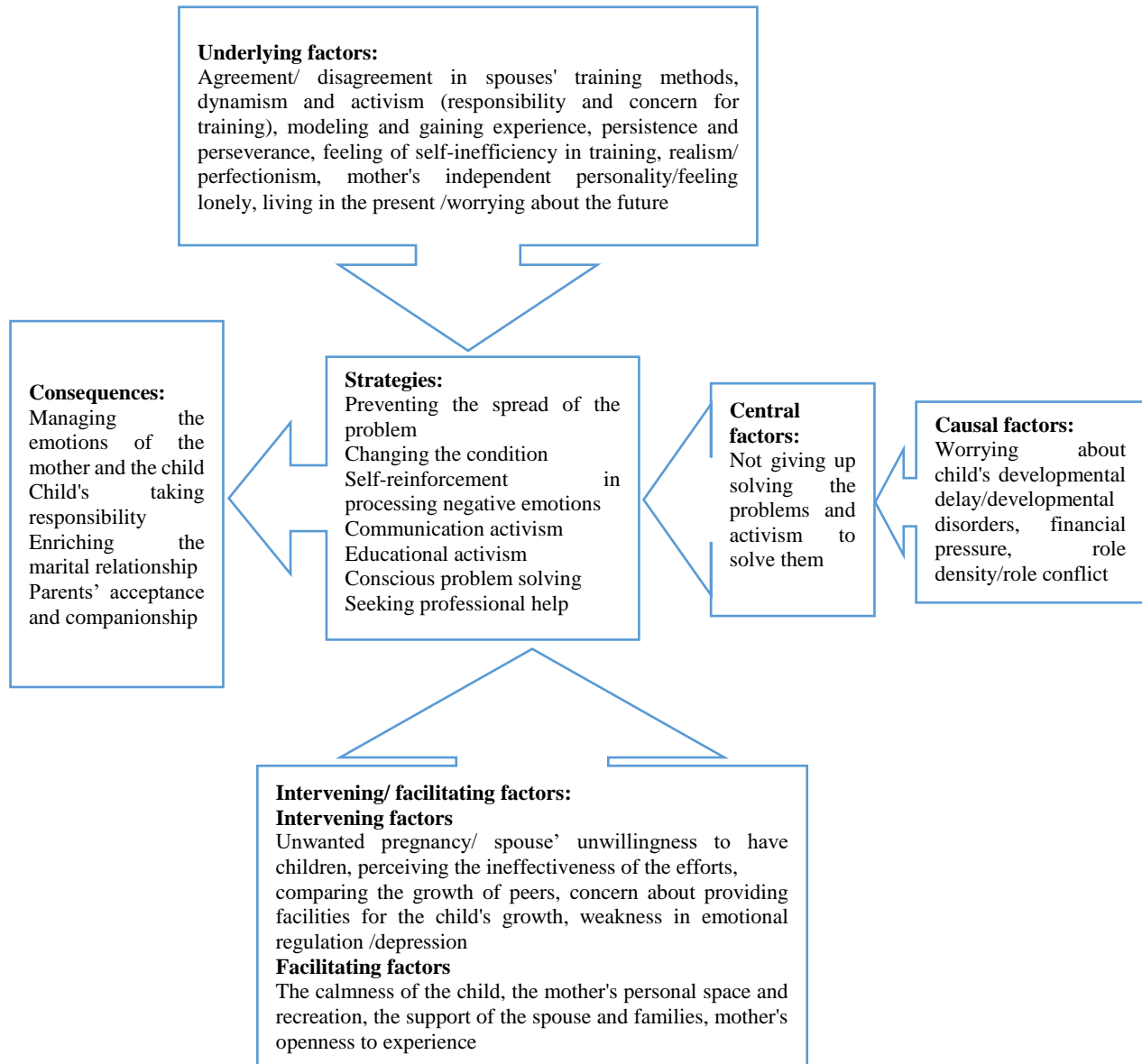
The second research question: What are the indicators and the components of the satisfied women's pattern of coping with maternal stress?

**Table 3. The indicators and the components of the satisfied women's model of coping with maternal stress**

Open codes	Axial codes	Selective codes
<b>Causal factors of maternal stress</b>	Worrying about child's developmental delay/ developmental disorders	Not giving up solving the problems and being active to solve them reduce the parents' stress.
	Financial pressure	
	Role density/ role conflict	
<b>Underlying factors</b>	Dynamism and activism (responsibility and concern for training, modeling and gaining experience, persistence and perseverance) / the feeling of self-inefficiency in training	
	Realism/perfectionism	
	Mother's independent personality/feeling lonely	
	Living in the present time/ worrying about the future	
<b>Facilitating factors</b>	Calmness of the child	
	The mother's personal space and recreation	
	The support of the spouse and families	
	The mother's openness to experience	
<b>Intervening factors</b>	Unwanted pregnancy/ spouse' unwillingness to have children	
	Perceiving the ineffectiveness of the efforts	
	Comparing the growth of peers	
	Weakness in emotional regulation/depression	
<b>Strategies to reduce stress</b>	Worrying about providing facilities for the child's growth	
	Preventing the spread of the problem	
	Changing conditions	
	Self-empowerment in processing negative emotions	
	Communication activism	
	Educational activism	
<b>Consequences of coping with stress</b>	Conscious problem solving	
	Seeking professional help	
	Managing the emotions of the mother and the child	
	Child's taking responsibility	
	Enriching the marital relationship	
	Intimate relationship/ parents' acceptance and companionship	

According to the above themes in Table 3, the educational model of how satisfied women cope with

their maternal stress was composed of the indicators and the components shown in Figure 1.

**Figure 2. The educational model of how satisfied women cope with their maternal stress**

#### 4. Discussion and Conclusion

The results of the present study showed that satisfied women use some strategies (i.e., preventing the spread of the problem, changing the conditions, self-empowerment in processing negative emotions, communication activism, educational activism, conscious problem solving, and seeking professional help) to cope with their maternal stress. The underlying factors included agreement or disagreement in spouses' training methods, dynamism and activism, modeling and gaining experience, continuity and perseverance, feeling self-inefficiency in training, realism/perfectionism, mother's independent personality/ feeling lonely, and living in the present time/ worrying about the future. In addition, the intervening factors included unwanted pregnancy/ spouse' unwillingness to have children,

perceiving the ineffectiveness of the efforts, comparing the growth of peers, worrying about providing facilities for the child's growth, and weakness in emotional regulation/ depression. Moreover, the facilitating factors included the calmness of the child, the mother's personal space and recreation, the support of the spouse and families, and the mother's openness to experience. Finally, the consequences of coping with maternal stress included managing the emotions of the mother and the child, the child's taking responsibility, the enrichment of the marital relationship, intimate relationships/ acceptance, and parents' acceptance of the child and their companionship. The findings of this research study are consistent with those of Oldo et al. (2006) and Aslani and Amanolahi (2012).

These findings can be explained by referring to the fact that people should do certain developmental tasks in order to successfully pass through different stages of family life cycle and to transfer from one stage to another. From Duval's (1988) point of view, the transition from one evolutionary stage to another in the family life cycle usually creates the most potential stress in the family. However, the transition to the next stage requires re-evaluation of situations by family members and adjustment of their thoughts and behaviors in order to match the expectations and new developmental tasks in the next stage (Ballard, 2012, Hwai, 2022). With regard to the present study, it can be admitted that satisfied women underwent these processes. Parenting stress refers to conditions or situations in which parents are faced with environmental demands and demands that exceed the social and personal resources available to them. Meanwhile, mothers experience higher stress, which is related to their level of satisfaction with life and physical diseases. Children who are physically or mentally disabled impose on the parents, especially the mother. The most important issues and problems of these parents are: the problem of accepting the child's disability, problems caused by nursing and care, issues related to free time, family financial and medical and educational problems (Cooper McLanahan, Meadow & Brooks Gunn, 2009). High levels of parenting stress create problems and harm parenting skills. In addition, on parents, psychological functions cause them problems, create disorders such as negative effects, influence and aggression, and increase negative documents, which ultimately leads in a negative interpretation of the child's behavior, increasing punishment and causing problems in family factors. (Hintermai, 2019). Mothers in the present study also reported such stresses.

The extensive literature on family stress emphasizes that stress is an inherent part of family life. Some stressors, such as life cycle transitions, are predictable and normative, while others (e.g., catastrophic events) are unpredictable. Despite the pervasiveness of stress, successful families are those who engage with life stresses instead of avoiding them (Terkelsen, 1980 cited in Lopez et al., 1988). In Hill's (1958) study on families, two critical factors to cope with stress were identified. They included the family's resources in dealing with stress and the family's definitions and their interpretation of stress. In the present study, satisfied women also considered these two factors.

According to this view, family stress arises from a real or perceived imbalance between life demands and the family's ability to meet these demands and transform

them into positive outputs (Terkelsen, 1980, cited in Lopez et al., 1988). In fact, the critical criterion of a stressful event in the family depends on how the family deals with that stress. Stress becomes distress when it is experienced as a disaster. On the contrary, when people actively engage with stress as a challenge, stress would become beneficial. It seems that in the current study, satisfied women actively viewed their maternal stress as a challenge.

Family Stress theory and Family Development theory focus on common points. Both theories consider the families as a unit of analysis and a small group set, with regard to their reactions to events, disorganization, renegotiation, and reorganization. In fact, Rodgers (1973) found out that family stress theory is necessarily a special case of family development theory. Despite the similarities, these theories emphasize different types of reactions and organizations. Family development theory focuses on internal, normative and ubiquitous events while family stress theory examines the effects of acute and unexpected external events (Figley & Mccubbin, 1983, Jaggi, Allini, Casciello, & Meucci, 2022). If change and adaptation are viewed as the outcomes of developmental situations as much as the outcomes of non-normative stressors, the different emphases of Stress and Development theories may be seen as different aspects of a single problem (i.e., family adaptation to stress over time) (Mederer & Hill, 2014, Chung, Chan, Lanier, & Wong, 2022). According to the mentioned viewpoints, it can be stated that based on family stress and family development theories, satisfied women used positive strategies to organize and to adapt to the developmental change of family life cycle and their maternal stress.

The sample of the present study included the satisfied women living in Tehran. Thus, it is suggested that further studies investigate the women from other cultures and ethnic groups. The findings of this study can be used to design educational models based on this conceptual model to help women to effectively deal with their maternal stress in the developmental phase of family life cycle.

## 5. Ethical Considerations

### Compliance with ethical guidelines

All ethical principles have been considered in this study..

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**Authors' contributions**

All authors have contributed in conducting this study.

**Conflicts of interest**

The authors declare that they have no conflict of interest.

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