



Becoming a Father: Childbearing Perspective การก้าวเข้าสู่การเป็นบิดา: มุมมองการตั้งครรภ์และการคลอด

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การเป็นบิดา เป็นกระบวนการเปลี่ยนผ่านที่สำคัญยิ่งในชีวิตของผู้ที่กำลังจะเป็นบิดา ในขณะที่ภรรยา ตั้งครรภ์และคลอดบุตร ผู้ที่จะเป็นบิดาต้องพบกับการเปลี่ยนแปลง การท้าทาย และความกดดันต่างๆ เช่นเดียวกับผู้เป็นภรรยา พยาบาล/ผดุงครรภ์ควรทำความเข้าใจและให้การดูแลช่วยเหลือผู้ที่จะเป็นบิดา เช่นกัน ถ้าผู้ที่กำลังจะเป็นบิดาสามารถผ่านเข้าสู่การเป็นบิดาได้สำเร็จ จะนำมาซึ่งภาวะสุขภาพที่ดีทั้งด้าน ร่างกายและจิตใจของผู้เป็นบิดา รวมถึงภรรยาและบุตร ในทางตรงกันข้าม ถ้าผู้ที่กำลังจะเป็นบิดา ไม่ประสบความสำเร็จในการเปลี่ยนผ่านเข้าสู่การเป็นบิดา ถือเป็นภาวะวิกฤติ ซึ่งจะส่งผลกระทบต่อผู้เป็น บิดาเองและทุกคนๆ ในครอบครัว ปัจจัยที่มีอิทธิพลต่อการเปลี่ยนผ่านเข้าสู่การเป็นบิดา ได้แก่ 1) ปัจจัย ส่วนบุคคล 2) ปัจจัยความสัมพันธ์ระหว่างบุคคล และ 3) ปัจจัยทางสังคม การเข้าใจในปัจจัยและบริบท ต่างๆ ที่มีผลต่อการเปลี่ยนผ่านเข้าสู่การเป็นบิดา ช่วยให้พยาบาล ผดุงครรภ์ และเจ้าหน้าที่สาธารณสุขที่ เกี่ยวข้องกับผู้จะเป็นบิดา สามารถจัดบริการและให้การดูแลได้ตรงกับความต้องการของผู้จะเป็นบิดา ซึ่งจะส่งผลให้การเปลี่ยนผ่านเข้าสู่การเป็นบิดาประสบความสำเร็จได้เป็นอย่างดี

คำสำคัญ: บิดา ผู้ที่จะเป็นบิดา การตั้งครรภ์และการคลอด การเปลี่ยนผ่าน

Abstract

Fatherhood is an important transition process in expectant fathers' lives. During their wife's pregnancy and birth, expectant fathers experience many changes in addition to confronting various challenges and pressures. Nurses/midwives should have an understanding of these and take care of expectant fathers as well as the mothers. If a successful transition into fatherhood is occurs, men will have physical and psychological well-being which is conducive to the wellbeing their wife and their baby. On the other hand, if an unsuccessful transition occurs, expectant fathers may experience a crisis during their transition into fatherhood. Factors influencing the transition into fatherhood are 1) personal factors, 2) interpersonal factors, and 3) social factors. Therefore, understanding the factors and the contexts which influence the transition into fatherhood will be useful for nurses/midwives and healthcare providers to provide nursing care and services to meet

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the needs of transitioning father. This will result in more successful transitions into fatherhood.

Key words: Father, Expectant Father, Childbearing, Transition

Introduction

Fatherhood is the state or responsibility of being a father (Höfner, Schadler & Richter, 2011). A status of fatherhood has been attained by having a child and is irreversible. The term fatherhood is used interchangeably with the term fathers. Fathering includes, beyond the procreative act itself, all the childrearing roles, activities, duties, and responsibilities that fathers are expected to perform and fulfill (Tanfer & Mott, 1997). The transition into fatherhood of an expectant father is a time of great change in men's lives (Cooper, 2005). The important developments of expectant fathers has also been significant in the management of pregnancy and birth, with the prospective father being encouraged to be actively involved in this process (Wee, Skouteris, Pier, Richardson & Milgrom, 2011). Some expectant fathers will experience a transformation in their self-understanding, and the need to prepare for the leaving of a more independent lifestyle and the adoption of responsibilities and restrictions associated with the father role. Prospective fathers may also grapple with reflection on what kind of father they wish to be (Jordan, 2007)

Childbearing is the process of pregnancy, carrying the baby and delivering a baby, while childrearing involves raising a child and helping him learn the necessary life skills to function properly as an adult. The larger process of childbearing can be divided into three stages

that are preconception (the period before pregnancy), prenatal (the time from conception to birth), and postpartum (the time right after the baby's birth). While becoming a parent is generally a rewarding life experience, this major life transition can trigger negative effect in a man's life as he may face challenges during this time of the life transition during childbearing process (Boyce, Condon, Barton and Corkindale, 2007). Transition into fatherhood is important to men and has deep effects as each father has their own unique experience of conception, pregnancy, labor and birth, and early parenting, all in the context of a unique larger life experience. In addition, the expectant fathers will face the transition from a couple to a triadic relationship, and the need to share his partner's affection with a third party. An understanding of this experience is essential to healthcare providers who work with childbearing families in order to be more sensitive, respectful, and effective caregivers (Jordan, 2007), which benefits expectant fathers, partners, and their babies.

Fatherhood today

Today's father is no longer always the traditional married breadwinner and disciplinarian in the family. He can be single or married, externally employed or stay-at home, gay or straight, an adoptive or step-parent, and a more than a capable caregiver to children facing



physical or psychological challenges (American Psychological Association, 2016). During the past three decades, a multitude of social, political, and economic factors have combined to alter significantly the role expectations for fathers as well as mothers. Among the multitude of social conditions and changes that have set a stage for this more involved fatherhood were the women's movement, fathers' presence in the birthplace, an increased understanding of the effects of father absence, and changing economic conditions (Shapiro, Diamond & Greenberg, 1995). Psychological research across families from all ethnic backgrounds suggests that fathers' affection and increased family involvement help promote children's social and emotional development. (American Psychological Association, 2016). Today's fathers are expected to be more actively involved in child care than in the past, and to a modest extent the average contemporary father is indeed more involved than was his predecessor. Most modern fathers indicate the differences between previous generations, specifically between their outlooks and actions as fathers and those of their own fathers. Their behavior provides accounts of how their behaviors differ in practice, particularly in how they interact with their children and in how they participate more broadly in the day-to-day performance of shared parenting duties. Fathers' behaviors are dependent in that they depend on their own family circumstances for what they are required to do (William, 2008)

Fatherhood in the twenty-first century has been characterized by four important social trends being nurturance and provision of care; moral and ethical guidance; emotional, practical

and psychosocial support of female partners; and economic providing (Marsiglio, Day & Lamp, 2000). These have fundamentally changed the social and cultural context in which children grow, which is also effected by women's increased labor force participation, increased absence of nonresidential father in the lives of the childbearing and childrearing process, increased involvement of fathers in intact families, and in some cases increased cultural diversity. These trends are changing the nature of father involvement and family life, and in turn affecting children's and fathers' developmental trajectories. The life span approach to fatherhood considers the broader socio-historical context in which fatherhood develops, and emphasizes the urgent need to consider mothers, fathers, and family structure in future research in relation to understanding and modelling the effects of parenting on child development (Cabrera, Tamis-LeMonda, Bradley, Hofferth & Lamp, 2000).

Furthermore, fatherhood is becoming increasingly individualized. Fathers are forced to provoke change within the family and within society more broadly as traditional models of fatherhood are progressively being called into question by partners and by a range of social institutions, the mass media and the government. Fatherhood is also discussed regarding social change, drawing on the notions of reflexivity and reflexive modernization (Willians, 2008). Recently, the discussion about the changing roles of fathers focused on their increasing role in the direct care and rearing of their children. This new focus highlights a shift from a concern with fathers as persons primarily involved in the economic support of the family and perhaps in



the discipline and control of older children to a view that places increasing stress on the role that fathers play in the direct care of children of all ages (Lamp, 1995). Additionally, influencing factors also effects the transition of being a father with respect to the childbearing process.

Influencing factors of the successful transition into fatherhood

When a successful transition into fatherhood is occurring, men have subjective well-being; which includes managing emotions and a sense of dignity, effective coping and adaptation, personal integrity and quality of life. On the other hand, if an unsuccessful transition is occurring, the expectant fathers may be confronted with maladaptation, malfunctioning, severe dysfunction and deterioration. This situation puts men into a transitional crisis. Furthermore, this crisis may have effects on the couple's relationship and the family well-being (Sansiriphun, 2009). Factors influencing the fatherhood transitional process could be categorized by personal, interpersonal and social factors as described in the following.

1. Father personal factors: Includes perception of novice fathers, psychological factors, and race/ethnicity of fathers. Perception of novice fathers is due to the change from non-father to father and from already-father to father-again. This changing status is accompanied for many by a sense of uncertainty about their transition and how different life might be (Draper, 2003). Therefore, adjusting to the news of a pregnancy is a potentially unsettling time for novice father that is often associated with increased apprehension and anxiety. Regardless

of whether they were a first or once-again father, most men engage in a level of emotional work to come to terms with and accept the pregnancy. As a result, understanding men's antenatal experiences and their anxieties is an important step in the development of preventative paternal perinatal mental health measures among new fathers because father's wellbeing is associated with maternal psychological well-being, positive perinatal experiences and child development (Fenwick, Bayes & Johanssam, 2011). Thus the associated father-model effects fatherhood as it is increasingly a response to personal biography and circumstances rather than being modeled on traditional ideal types of what it means to be a father (William, 2008).

Psychological factors include distress among expectant fathers, which is associated with a range of psychological variables, particularly a poor marital relationship and poor social networks. This is consistent with a general vulnerability model for psychological distress (Boyce et al., 2007). Fathers who represent levels of distress are associated with subsequent depressive symptoms. However, this effect can be removed when preexisting depressive symptoms are partial laid out (Greehalgh, Slade & Spiby, 2000). Thus, the readiness of fathers who present their readiness to be a father, topics of interest for fathers-to-be, and practical actions of fathers-to-be are the properties of the way to be a father. Readiness to be a father includes issues such as the psychological maturity of the father. Topics of interest means the priorities the father had initially in his life. Practical action describes how fathers approached situations (Kaila-Behm & Vehvilainen-Julkunen, 2000).



The race/ethnicity of fathers is also an important topic for consideration. It was found that in hispanic groups there are diverse social interactions and cultural factor that effect the fatherhood pattern. While patterns and predictors of father-infant engagement across race/ethnic groups of fathers differ, other factors could influence fathers' experiences too. African-American and Latino fathers had higher levels of engagement in caregiving and physical play activities than white fathers. There were no differences in verbal stimulation activities across race/ethnicity. Fathers' educated at college level predicted more verbally stimulating activities whereas an analyses of fathers' reporting couple conflicts predicted less caregiving and physical play (Cabrera et al., 2011).

2. Interpersonal factors

When pregnancy is complicated by increased obstetrical risk, fathers face additional stress as this situational crisis is superimposed on a significant development transition. Although some elements of the high-risk pregnancy experience are similar for both father and pregnant mother, others are unique and rather gender-specific. In order to understand the effects of high risk pregnancy on expectant fathers, it is important to first consider the nature of the risks involved (May, 1995). For some pregnant women who have undergone an ultrasound screening for identifying soft markers, fathers reported feeling immediate frustration and thoughts about the consequences of pregnancy following the ultrasound. This included the need for facts in order to gain control on the situation as well as concern for their partner and fetus. Doing amniocenteses or

not is a joint decision with several considerations that is difficult for fathers as it may result in unexpected findings (Ahman, Lindgren & Sarkadi, 2011). Moreover, high-risk pregnancy has evolved as prenatal health care has become more complicated and has allowed women who are likely to require specialized care to be identified in advance. The emotional and physical demands of high risk pregnancy and additional stressors limit the emotional and physical energy available to expectant parents to deal with the normal stress associated with childbearing. Fathers may lose any sense of control, feel isolated, and face the very real threat of physical risk and even death of the mother and the fetus (May, 1995).

Health care providers/nurses/midwives and fathers have differing ideas of the meaning of father, father's role, and father's expectation. Spouses, relatives and health care providers/nurses/midwives could encourage fathers to choosing a specific way to be a father, or discourage them from adopting a specific way. Thus, various supports for different kinds of fathers and their individual needs in family nursing are worthy of attention (Kaila-Behm & Vehvilainen-Julkunen, 2000). Although fathers prioritize the needs of their pregnant partners, it is important for health care providers/nurses/midwives to assess fathers' needs and incorporate a family-oriented approach to prenatal care (Jungmarker, Lindgren & Hildingsson, 2010). Expectant father have mentioned their need for special supporting and encouragement during pregnancy, which may be as important as the care of expectant mothers and the pregnancies' outcome.



Therefore, health care providers/nurses/midwives need to be as aware of and sensitive to these needs (Finnbogadottir, Svalenius & Persson, 2003). While men enter a role of a kind of fact manager and have both a psychological need as well as the capacity to perceive important information during the process following the detection of ultrasound or medical procedure with pregnant women and their fetus, health care providers/nurses/midwives conducting the pregnancy should possess some relevant knowledge to be able to provide immediate information about those procedures, including risk assessment for chromosomal defects and written information about soft markers (Ahman et al., 2011).

Regarding social support, fathers who receive good personal support from family, close friends and health care providers/nurses/midwives reported being satisfied with their fatherhood transition. Antenatal class attendance can have positive consequences for fathers and their partners. For some fathers, attendance at classes may be associated with less positive reports of childbirth experiences. Moreover, married fathers who attended antenatal classes reported lower levels of depressive symptomatology than unmarried fathers. However, the way in which men experience childbirth may have some influence on their subsequent emotional well-being (Greehalgh et al., 2000). Experiencing childbirth following attendance was less fulfilling than for fathers having similar coping styles which did not attend classes, including avoiders of threat-related information. Fathers' reports of fulfillment and delight while attending childbirth were

negatively related to their level of depressive symptomatology at 6 weeks postpartum. Fathers who had insufficient information about pregnancy and childbirth were also at risk of being distressed, suggesting that more attention needs to be paid to providing information to men about their partner's pregnancy, childbirth and issues relating to caring for a newborn (Boyce et al., 2007).

3. Social factors

Considering social change, it is significant that men don't refer to their approach to fathering as being new (William, 2008). The ways of being a father are dependent on the culture, and for each group of men. Furthermore, the process of first time fatherhood was linked to how they saw themselves as men. Additionally, the traditional way of being a father has been changed because of societal changing such as increased employment of women and greater number of nuclear families. With more women entering into the workforce, the number of dual-earner families has been exceeding that of single-earner families since 1997. This alteration is leading Asian couple's values into more equitable practices regarding running a household, raising the child, and performing the role of a financial provider. As a result, men are more actively involved with the child bearing and child rearing process and share domestic labor more equally (Kwon & Roy, 2007; Seto, Becker & Akutsu, 2006; Shwalb et al., 2010). This is partially due to the move from agriculture-based to industrial-based society as a result of the great impact of rapid socioeconomic development.

Thai society has gradually become less



agricultural and more industrialized and urbanized. The family is being transformed from an extended to a nuclear structure and this trend applies to both rural and urban families. Fathers have been coming to share the role their wives play in the household and regarding child caring. Furthermore, equity in education is leading more women to education than ever before. As Thailand develops, the roles of women are changing and there are trends supporting greater employment of women. As a result, men are expected to take and increased shared in house hold work (Pinyuchon & Gray, 1997; Yoddumnern-Attig, 1992). Recently, Thai fathers are allowed to be involved in their partner's pregnancy, birth and child care activities due to the merging of relevant policies which promote and encourage men to participate in childbearing and childrearing. Importantly, the parental class is an indicator for measuring the quality of hospitals for maternal and child health care. The particular reason for the paternal class is to point to the physiological and psychological development of the children and the benefit of the well-being of family. (Department of Health, Ministry of Public Health (2007)

A study of the transitional process of first-time fathers during their wife get normal pregnancy in Thailand was studied by Sansiriphun et al. (2010). This investigated the process of becoming a first-time father for Thais. Grounded theory methodology was performed in this study. The result demonstrated that protecting the unborn baby was the process that the expectant Thai fathers used to manage their main concerns and develop into fatherhood. This process was divided into three phases,

namely 1) confirming and accepting 2) perceiving the unborn baby as a human being, and 3) ensuring the health of the mother and baby. They also used five strategies to manage themselves namely, seeking more information, taking good care of the unborn baby and the wife, modifying behaviors, building a relationship with the unborn baby, and preparing for child care and post-partum care. The study also revealed that Lan-na (northern Thai) cultural beliefs and traditions influenced the expectant fathers' experiences, shaping their views of fatherhood. The unique knowledge that was gained from this study included that most Thai men follow the traditional beliefs adopted from past generations in order to protect their unborn baby from harm and to promote the well-being of their baby and their wife.

Conclusion

Fatherhood is a time of great change in a man's life. It also could be a trigger for negative effects in a man's life too. If a successful transition into fatherhood is occurring, men have subjective well-being. Oppositely, if an unsuccessful transition is occurring, the expectant fathers may walk into a transitional crisis. To be a father is associated with psychological distress. An expectant father is often neglected by health care teams and his peer groups, as attention is focused on the woman. As a result, his concerns and anxieties may remain unknown due to a lack of focus on him, which could increase his negative experiences during this life transition. Comprehensive strategies should include the expectant father being involved in prenatal programs. The expectant father who receives



sufficient information, good preparation for fatherhood, and who is encouraged in becoming an active participant in the process of pregnancy and childbirth can make significant contributions towards infant health development. Thus, a deep understanding of the fatherhood process is necessary for nurses, midwives and healthcare provider who work with childbearing families in

order to be more sensitive, respectful, and affective caregivers. Furthermore, it could be used to provision the quality of maternal and child nursing as well as family nursing, in order to ensure the well-being of expectant fathers during their transition into fatherhood, and as a consequence the wellbeing of their baby, their wife, and their family.

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