

Free essay on critique: experiences of preconception, pregnancy, and new motherho...

[Science](#), [Biology](#)



\n[[toc title="Table of Contents"](#)]\n

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1. [Key concept and rationale](#) \n \t
2. [Theoretical framework and research design](#) \n \t
3. [Sample and setting](#) \n \t
4. [Data collection and procedures](#) \n \t
5. [Data analysis](#) \n \t
6. [Discussion](#) \n \t
7. [Limitations](#) \n \t
8. [Conclusion](#) \n \t
9. [References](#) \n

\n[/toc]\n \n

Key concept and rationale

The gay liberation movement gained momentum in the 1970s and gave rise to many two men and two women relationship households. As a result, many such same gender couples have been opting for means to raise biological families, in a manner similar to heterosexual couples. The key concept of the article was to explore the preconception, pregnancy and new motherhood experiences of the non-biological mothers in the lesbian couple. There have been many studies depicting the need for becoming a biological parent among the lesbian mothers; however, very few studies have been conducted to understand the unique difficulties faced by the lesbian non-biological parents during preconception, pregnancy and post-partum. This idea forms

the rationale for this study. The research problem has not been stated explicitly.

Theoretical framework and research design

The past literature review suggested that many of the studies done on lesbian couple focused on the role of the lesbian non-biological mother in legitimizing and formalizing the motherhood after the child was born. Very few studies had focused on the psychological state of the non-biological lesbian mother during the pre-pregnancy, pregnancy and post-pregnancy period. The study used this gap in the theoretical knowledge as their framework to guide the study. A descriptive phenomenology design was used for this study. This methodology is best suited when the study explores a phenomenon that is poorly understood or is completely new and the participants are thought to have expertise in that matter. In the current, it was not possible to anticipate the content of the experience gained during the preconception, pregnancy and the new motherhood by the lesbian non-biological mother. Therefore, descriptive phenomenology was the apt research design for this study. The approach used was a semi-structured interview that allowed the participants to answer the questions more openly without the rigidity of a questionnaire. Since descriptive phenomenology requires sharing one's experiences and feelings with regard to a particular phenomenon, semi-structured interview was an appropriate way to avail answers and insights. The duration of the initial interview with the participants was only 30 to 60 minutes per couple; however, the authors do mention prolonged contact with the participants as a way to verify the data

given by them as well as to gain their confidence. The duration of the prolonged contact and repeated interaction was not mentioned explicitly but was described as being the length of the duration of the data saturation. The authors eliminated bias by using self-reflective diary to provide reflexivity for the design. The Institutional Review Board approved the research design that was designed to protect the rights of the human subjects involved in the study. Written consent was obtained from all the participants for ethical conduct and use of data.

Sample and setting

The criteria for the study were that 1) the lesbian non-biological mothers must be in a committed relationship with their partners; 2) the partners must have given birth to full term babies in the 2 years prior to the commencement of the study; 3) the couple must reside in urban or suburban cities of the Pacific Northwest; and 4) they must have the ability to respond well in English, both verbally and in writing. For sampling and addressing the needs of the study, the participants were recruited using advertisements in the print media, lesbian-based websites and through participant referrals. The participants who contacted the authors via email and telephone were filtered and recruited based on the above-mentioned criteria. The final sample contained 24 lesbian non-biological mothers whose ages ranged between 28 to 48 years. The duration of the committed relationship ranged between 2.5 to 16 years. 75% of the participants were college graduates while the rest were high school graduates. 83% of the participants were employed. 20 of the 24 were Caucasians, 2 were African Americans and 2

were of mixed ethnicities. The sample size was large enough to attain data saturation. The interviews for data collection were recorded at the participant's house (n= 20) while some were conducted in a private rented location at the site of the study (n= 4). The authors included information on the home environment during the creation of field notes.

Data collection and procedures

The data collection was conducted using semi-constructed interviews that were audio recorded. The audio recordings were transcribed verbatim for analysis. The descriptive phenomenological approach requires that the interview be open enough to extract as much knowledge as possible. Therefore, the questions were framed in such a way to ensure non-confinement. The authors have not elaborated on all the questions that were asked during the interview; however, they do mention that the interview questions began with non-specific questions like “ What has your life been like in a partnered relationship?” and moved on to more specific questions such as “ How did you decide about starting a family with biological child/children? What was the process of attempting pregnancy for you?” and “ What did it feel like?”

For the descriptive phenomenology design, the data collection method of audio recorded interview and data recording procedure of verbatim transcription were appropriate. As mentioned earlier, the bias was eliminated using self-reflective diary. The data collection was carried over the phone and email until data saturation was achieved. The authors are trained nurses

with professional academic degrees. As nurses, they are qualified to conduct such interviews and analyze the results.

Data analysis

For unbiased data analysis, bracketing technique was used. Bracketing involves viewing the data and interpreting it setting aside one's prejudices and biases. Multifaceted data collection process and multiple interactions were conducted to ensure the trustworthiness of the data. The data revealed that the lesbian non-biological mothers experienced a feeling of isolation and feeling different during their partner's pregnancy. The data analysis revealed seven distinct themes in the narratives of the participants. Firstly, they found that the preconception phase to the pregnancy was a roller coaster ride. Secondly, the lesbian non-biological mothers had legal concerns over the biological relationship of the child. Thirdly, the participants were aware that a little person was inside their partner along with being aware of the emotional and physical challenges their partners faced during pregnancy. Fourthly, theme was that the participant expressed fear over losing their relationship with friends and families over the pregnancy due to the stigma in the lesbian community over emulating heterosexual families. Fifth theme was that the lesbian non-biological mothers felt incomplete as mothers. Sixth theme was that the participants wanted a unique role as parents due to lack of biological connection. Finally, the authors noticed that post-partum blues affected even non-biological mothers.

Discussion

The results were summarized succinctly that pointed out that lesbian non-biological mothers were unable to contribute biologically as a mother and were not protected legally until they legally adopted the child. This situation is unique to homosexual parents when compared to heterosexual parents where the biology cements the parental bond. The under-recognized role as the 'other mother' led to the post-partum depression and isolation in the participants. Excerpts from the interviews backed the seven themes that supported the claims made by the authors. The themes adequately categorized the data from the interview and was found to be universal among all the participants. The analysis brought forth a meaningful research, which helped understand the phenomenon under study.

One of the purposes of the paper was to understand the unique problems faced by lesbian couple as a parent. The findings of the authors revealed that the lesbian non-biological mothers were the most vulnerable during the perinatal period (a few weeks before and after birth). The authors substantiate these findings with previous studies that refer to the ill-defined role of non-biological mother in a lesbian couple and the need for participants to form a niche form themselves in their new family of three. The authors also found out that the unacknowledged role of the lesbian non-biological mother as a parent in the intake forms, hospital policies and terminologies was the source of their depression and isolation. The authors suggested that the emotions felt by the lesbian non-biological mothers are similar to those felt by new fathers. However, due to the lack of support for such co-mothers, their depression often go undetected and untreated. A

unique desire of the participants was that they would like to be acknowledged as equal parents to the biological mother. The findings have many directions for future studies and research. They also have suggestions for potential policy changes in the use of language in intake forms and provider forms.

Limitations

One of the limitation expressed by the authors was the size of the sample used in the study. The sample was not only limited to mere 24 participants but also was not ethnically, educationally, socially, financially and geographically diverse. The findings cannot be generalized due to this reason.

Conclusion

The study showed how the lesbian couple face unique situations and decision-making problems associated with childbearing and childbirth that are alien to heterosexual couples. The authors used descriptive phenomenology to collect data and used bracketing to analyze the data to eliminate bias. The data revealed a meaningful theme of seven recurrent ideas that prevailed within the experiences of the lesbian non-biological mothers, which is a novel discovery in this field. These themes are related directly to the field of nursing because the unacknowledged attitude of the caregiver during the prenatal period, the biased language of the hospital forms and the untreated post-partum blues faced by the lesbian non-biological mothers fall within the nursing category. This study reveals that the nurses and caregivers need to acknowledge the non-biological mother as

a parent and must be invited to classes traditionally reserved for husbands and new fathers. The study also points out that the hospital forms need to be more inclusive to avoid isolation among the lesbian non-biological mothers. The authors suggest that the issues of the lesbian co-mothers are directly relevant to nursing because they will help in creating inclusive hospital policies and equitable adoption laws.

References

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