



DCPsych thesis

An existential exploration of the experience of British-Iraqi mothers during the first 40 days of motherhood
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An Existential Exploration of the
Experience of British-Iraqi Mothers During
the First 40 days of Motherhood

Doctoral Thesis

*Submitted to the New School of Psychotherapy and Counselling and Middlesex
University Psychology Department in partial fulfilment of the requirements for the
Degree in DCPsych in Counselling Psychology and Psychotherapy*

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April 2023, London, England

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Statement of Authorship

This dissertation is written by Arwa Hussein and has ethical clearance from the New School of Psychotherapy and Counselling and the Psychology Department of Middlesex University. It is submitted in partial fulfilment of the requirements of the New School of Psychotherapy and Counselling and the Psychology Department of Middlesex University for the Degree of Doctor of Existential Counselling Psychology and Psychotherapy. The author reports no conflicts of interest and is exclusively responsible for the content and writing of the dissertation.

Abstract

Though there has been numerous literature over the past decades around the topic of ‘motherhood’, there remains little written about the experience for mothers from a bi-cultural background living in the UK. This research aimed to investigate the experiences of eleven British-Iraqi first-time mothers during the first 40 days of motherhood and to explore these experiences from the perspectives of the Four Worlds of Existence (Deurzen, 1997). All the women interviewed were married to and living with the father of their child and had the presence of family support. Ten main themes were uncovered within each of the Four World Dimensions, each with a few sub-themes. These themes were: the physical experience of becoming a mother, breastfeeding, the experience of support, the impact of culture, the importance of ‘mama’, emotional response, thrownness of motherhood, interwoven identities, religious and cultural beliefs and establishing values. The themes portray each mother’s unique experiences and they also found numerous common themes from the narratives of each of the eleven mothers’. Many of the themes were overlapping, particularly those between the Physical and Personal Dimensions, with numerous interconnections. The research findings highlighted a different and unique account of first-time motherhood for this specific cohort. The presence of the middle eastern/Arab culture within a new mother’s identity has been shown to impact the level of support she and her newborn receives.

Keywords: qualitative, phenomenological, motherhood, transition, existential, breastfeeding, support, British, Iraqi.

Glossary of Arabic Terms and Abbreviations

This section provides brief definitions for Arabic terms used within the thesis and abbreviations.

Transliteration	Term Written in Arabic	Meaning of Term
Alhamdulillah	الحمد لله	Thanks and praise to God
Hadith	حديث	A collection of traditions and sayings from the Prophet Mohamad (PBUH) that constitute as a guidance for Muslims practices.
Haram	حرام	That which is forbidden within religious law
Hijab	حجاب	The covering of modesty of a woman's body in the presence of men that are not 'Mahram', believed to consist of the covering of the hair, chest, arms and legs.
InshAllah	ان شاء الله	God willing
It'wakal	أتوكل	To rely on God, from the word 'reliance' on God
The Qur'an	القرآن	Sacred book of Islam, revealed to the Prophet Mohammad (pbuh).
PBUH		Peace and Blessing Upon Him, a term said after the mention of the Prophet Mohammad.
Um	أم	Mother
Ummah'	أمة	Nation
Imam	إمام	Leader
A'maam	أمام	The front

1. Introduction

1.1 Development of Research Interest

الْجَنَّةُ تَحْتَ أَقْدَامِ الْأُمَّهَاتِ.

“Heaven lies beneath the feet of our mothers.”

Mizan al-Hikmah, vol 10, pp 712 – 3

The above saying is dear to my heart as I heard it frequently growing up in Britain as a first-generation Iraqi migrant. Muslims attribute this saying to the Prophet Mohamad (PBUH), and it highlights the importance of a mother in Islam and predominantly Islamic cultures, like the Iraqi one. The greatness of this transcendental concept of heaven cannot be conceptualised in Islam without accepting that mothers are theoretically above heaven. In Arabic, the word mother (أم) is derived from the same root as the word's nation (أمة), leader (إمام) and the front (أمام). Mothers in Islam and much of the Middle East can be seen as leaders who build future nations, constantly at the forefront. I did not truly understand the profound meaning of this narration until I endured the labour of my firstborn, feeling his skin on mine after hours of indescribable pain. I experienced a renewed fierce connection with my mother, stronger than ever, that was born along with my son.

Training as an existential counsellor exposed me to many philosophical thoughts that fuelled my curiosity surrounding the unique experience of becoming a mother. Psychologists, philosophers, scientists, and healthcare organisations have regularly discussed motherhood with a keen interest (Oakley, 1987). However, despite there being a rich bulk of research surrounding the experience of motherhood in the West, there is little written about the experience of motherhood for women of Middle Eastern descent living in the West. There appears to be no research yet exploring the experience of motherhood for British mothers of Iraqi descent. Knowing this as well as a spark powered by my own interest and experience resulted in the writing of this thesis.

Becoming a mother threw me into many unknowns, leaving me exposed to immensely raw emotions. I wanted to be a mother and was overjoyed to learn I was pregnant, yet my prior expectations were shattered, leaving me in a spiral of unexpected existential questioning during this significant life transition. My own experience of being mothered was positive, supported by a healthy relationship with my mother and cultural influences. However, though I had a positive image of motherhood, this was blinded by the raw, challenging, yet beautiful experience of *actually* becoming a mother. My perspective of reality shifted, bringing a sense of hyperawareness to the difficulty I would have faced without familial support as a first-time postpartum mother.

In addition to my identity as a mother, my cultural identity has shifted over the years. Growing up, I faced much confusion around my cultural identity, in many ways feeling Iraqi, and in others, feeling so different from my family in Iraq. I became more grounded in my identity through growth and exposure to others. However, this identity was thrown into question once again alongside becoming a mother. It unlocked a mental and sometimes social battle I had not expected around which culturally influenced traditions I wanted to keep, and which did not fit my newly grounded British-Iraqi identity. Traditionally, daughters of Iraqi descent (and other Middle Eastern ethnicities) are provided with a forty-day window to recover both physically and emotionally postpartum. This recovery time includes support for the new mother as well as care for the newborn, mostly from mothers, mothers-in-law, and other female members of the family. The forty-days of recovery are of cultural and religious significance. I realised that I did not hold the same values and beliefs surrounding motherhood as my peers, and neither did I hold the same values and beliefs as my mother. My experience was unique because of my background. At times I found solace with healthcare professionals, and at other times with my mother. But mostly, I found comfort in my roots as a British-Iraqi, taking essential things from both cultures that helped me transition from womanhood to motherhood.

Reflecting led to questions arising that have been pivotal in the development of this piece of research:

1. Do women in the community experience a strong connection to their British identity *and* their Iraqi identity?
2. Does the way we culturally identify influence how we deal with motherhood?
3. Is my experience of becoming a mother similar to other British-Iraqi women?

Mothers who identify themselves as British *and* Iraqi are considered first-generation immigrants. This term alongside its ambiguity refers to a native-born citizen whose parents are foreign-born *or* a foreign-born citizen whose parents immigrated when the person was very young. Thus, for this study, first-generation British-Iraqi mothers will refer to:

- A mother who identifies as British-Iraqi
- *And* whose parents were born in Iraq, while she was born in the UK, *or* those who migrated with their parents during their childhood,
- *And* the mother has a British nationality and lives in the UK.

Motherhood was chosen as the focus of this research because of its powerful presence amongst women and within society. Despite holding to and connecting with many identities, being a mother is the strongest and most important one, thus amplifying my interest in how other British-Iraqi women experienced motherhood and how it impacted their lives. I believe academic literature is missing the unique insight into the experience of dual-cultured mothers.

1.2 Relevance to Counselling Psychology: A Clinical Phenomenon

The last fifty years have seen a considerable increase in the number of immigrants settling in Britain, to seek safer homes and secure futures for their families. This diversity is a matter that Britons are proud of, acknowledging that the multicultural aspects of the United Kingdom have become part of its renewed culture.

Epidemiological studies in England have reported evidence that pregnancy and childbirth are vital times in a woman's life, leaving them more vulnerable to experiencing mental health problems (Evans et al., 2001). According to the NHS, 1 in 10 women will experience postnatal depression (PND) within the first year of childbirth (NHS, 2022). Research has found this figure to be higher for migrant women, demonstrating an increased risk of PND (Stewart et al., 2008). However, pathologizing responses to this very challenging and transformative period in a woman's life takes away the right of the mother to fully experience this transition with all its raw difficulties.

Given this study is about first-generation British-Iraqis, it is important to consider the number of migrants in the UK. Reports have found that over 29% of UK residents were born abroad, with a significantly higher figure of over 55% for London (Office for National Statistics, 2020). The experiences and beliefs surrounding motherhood within collectivist communities such as the Iraqi one differ in some ways from those of the Western and British cultures. An estimated 75-80% of Iraq's population is Arab, with the remaining 15-20% being Kurdish, including other minority groups, such as Assyrians, Chaldeans and Turkmens. With Iraq being prominently Arab, it is worth understanding what this means. The term 'Arab' refers to people who originally come from Arabic-speaking countries and who share a historical and cultural heritage (Ahmad & Dardas, 2016). The similarities between Arabs from different countries can be perceived as apparent for those who are not Arab as they share one language. However, their differences become more apparent to those living amongst Arabs or Arabs who can distinguish between different dialects and notice different traditions. In saying this, it seems there are overlapping postpartum traditions among Arabs, crossing North Africa to the Middle East (Davies, 2013). Precise UK census data on the Iraqi population residing in the UK is not readily available, however, an estimated seventy to eighty thousand Iraqis were living in the UK during the 1990s (Al-Rasheed, 1994). This was influenced by a large influx of Iraqis migrating to the UK to flee the Baathist regime in the nineties. Due to the past decade of violence and war that Iraq has experienced, it is estimated that this number is currently higher. The majority of Iraqis living in London alone report themselves as Arabs (Al-Rasheed, 1994), however, this does not cover Iraqis living outside London.

This research intends to contribute to the literature on motherhood and begin a dialogue amongst the counselling and maternal healthcare professionals around the experience of bi-cultured mothers. Addressing this life-transition from the lens of the existential approach will aid in understanding the

conflicts, paradoxes and meaning-making that women encounter with becoming mothers. Though motherhood is seen as a universal experience in many ways, each of us encounters motherhood subjectively, impacting our relationship to ourselves and others (Deurzen, 2010). Influenced by the work of Binswanger and Heidegger, Deurzen has described the four worlds in relation to the way we as humans relate to the world, one another, and ourselves (Deurzen & Arnold-Baker, 2005). These are the personal, physical, social and spiritual worlds, all of which are impacted by the transition to motherhood (Arnold-Baker, 2015). Thus, conducting an existential study will benefit existential counselling by adding to our understanding of this lived experience. Exploring the experiences of first-generation British-Iraqi mothers will shed light on the blend of two different perspectives, allowing a deeper and more nuanced description of this critical female experience through the lenses of others. Cross-cultural counselling psychology has produced, on the whole, more limited research than other areas of counselling (Eleftheriadou, 2010). Though we cannot assume that the accounts that will be reported from this study may necessarily benefit our healthcare system, they can benefit our understanding of Iraqi mothers residing in the UK, with regard to their experiences of this life-altering event.

1.3 Aims and Objectives

This research was developed to phenomenologically explore, describe, and clarify the experience of early motherhood for British-Iraqi women, particularly in the first 40 days postpartum. More specifically, the aims of this study are twofold:

- To investigate the experiences of British Iraqi first-time mothers during the first 40 days of motherhood.
- To explore these experiences from the perspective of the Four Worlds of Existence (Deurzen, 1997).

The research objective for this study is *to increase the understanding of the experience of British Iraqi first-time mothers during the first 40 days postpartum.*

In carrying out in-depth interviews with women and exploring their experiences, the objective is to understand if they felt this 40-day period was beneficial. To gain a rich and deep understanding of this unique experience, a phenomenological methodology will be applied. The ultimate hope is to cast some invaluable insights into the perspectives of British-Iraqi first-time mothers for psychotherapists, social workers, and other disciplines interlined with maternal experiences, for both British and Iraqi mothers.

I am curious to explore and discover the experiences of these new mothers from the position of an existential therapist as well as that of a British-Iraqi mother. By taking an existential-phenomenological approach to this research, I hope to elucidate a deeper understanding of the experience of motherhood and cultural identity.

1.4 Potential Contribution to Knowledge

Britain is known for its international community and integration of cultures, an aspect that most Britons take pride in. However, as existential counsellors, we have a role to understand the characteristics of clients based on their unique social insights, to aid our understanding and knowledge of our clients (Strawbridge & Woolfe, 1996). Though there is vast research on motherhood, we remain on a search to increase our understanding of this mysterious life-altering event. Given the effect culture and religion have on one's value system, it is beneficial to explore this within a specific group. The differences across cultures in motherhood practices may benefit the way we approach mothers postpartum here in the United Kingdom. According to Eleftheriadou (2010), the field of cross-cultural psychology has limited research within its field and requires more attention. She identifies that cross-cultural aspects will regularly penetrate our lives and may form a critical aspect of therapeutic work. Thus, I hope that this research will begin a dialogue within the field of psychology to discuss the role of a dual cultural identity in one of the most moving life transitions for women.

A large percentage of clients who see counsellors/therapists will discuss motherhood or parenthood at some point in their counselling journey. Thus, the more insight we have into cultural experiences in motherhood, the better equipped we can become as therapists to provide an understanding base with our clients.

Implementing practical changes and support to the lives of mothers in the UK may not be possible, however, providing literature on the experiential experience of British-Iraqi mothers will allow us a better understanding of the multidimensions that affect a woman during her transition into motherhood.

In the next chapter, the literature review will be presented to help set the base for this research and better our understanding of the factors involved for the women who will be interviewed.

2. Literature Review

In this chapter I will present the process of the literature review followed by critically reviewing the findings of the material explored. The aims and method followed will be discussed, before dividing the findings into four sections which hold importance for this research. An exploration of motherhood support and the 40-day postpartum period will be presented, followed by past relevant research around the mother-daughter relationship. I will then present relevant literature from the existential perspective on motherhood, as well as the existential perspective of cultural identity. The aim of these sections is to provide a thorough overview of the literature in support of this research.

2.1 Aim and Method of Literature Review

This literature review aims to explore and delineate relevant research that is associated with the experience of first-time motherhood for migrant mothers, specifically British-Iraqi's. Particularly the experience of new mothers during the first 40 days postpartum and their access to support, if any, will be examined through the lens of existential phenomenology.

To ensure this research had access to previous relevant literature, a structured and systematic method of literature reviewing was followed. A range of published articles were examined through numerous databases (see **Appendix A, Table 9**). Several word combinations were then searched to ensure no literature was overlooked. After running many searches, I noticed many terms are encompassed in the term 'motherhood'.¹ For this reason, I used the term 'motherhood' when searching, ensuring the full scope of literature was covered. I made the choice to conduct two separate literature searches; one to explore the literature on motherhood and the 40-day postpartum mark for Iraqi's, and the second to explore the literature on motherhood and cultural identity.

The first literature search produced limited results. To expand the scope, the term 'support' was used as an alternative to 40 days, as this period involves caring for and supporting the mother and her newborn. Database search results can be found in **Appendix A, Table 10**. Initially I ran the searches without a date limitation but decided to change the parameters for the search to only include studies from 1980 to present. I did, however, chose to include earlier relevant studies that were referenced within other studies, thus included these original papers. All relevant articles were examined and saved. Following this, I also examined the reference lists. Articles that explored PND were skimmed to see if they cited other relevant research. Research on PND specifically will not be included unless it specifically refers to Arab migrants, due to the focus of this research being on British-Iraqi mothers. More general exploration of the existential perspectives on motherhood was then reviewed (see **Section 2.4**).

¹ Including but not limited to 'maternal', 'postnatal', 'perinatal', 'postpartum', 'transition to motherhood', 'early years of motherhood', 'early motherhood experience', 'first year of motherhood'.

A second literature search was then run examining motherhood and cultural identity. To specify the search, the terms 'existential' and 'phenomenology' were added to the search. Results can be found in **Appendix A, Table 11**, which again was limited to research between 1980 to present. Relevant articles were examined, and reference lists were also checked. However, all pertinent articles were already found in the main literature search, and papers on mothers who were not Middle Eastern were not included. Instead, an exploration of the existential-phenomenological views on cultural identity was explored and discussed (see **Section 2.5**).

While I followed a structured and systematic method of reviewing the literature, it is important to note my own processes through this. I was inevitably driven by my own experiences and beliefs around the experience of first-time motherhood for British-Iraqi women. Thus, I had some pre-conceived ideas around the phenomenon, such as being aware of the care and support provided to new mothers within the middle eastern, Arab and Iraqi population. However, I wanted to ensure I covered the previous literature that holds value towards this research, and thus as discussed above, I ran two main searches, in addition to an overarching exploration of literature around the mother-daughter relationship (see **Section 2.3**) and the existential perspectives of motherhood and cultural identity (see **Section 2.4 and 2.5**)

2.2 Motherhood, Support and the 40-day Postpartum Period

In this section, I will present the relevant literature found around motherhood, support and the 40-day postpartum period which was found through the two systematic literature searches that were run.

There is a distinction between a social *network* which has been defined as the availability of social contact and functional support, to social *support*, which refers to a mother's access to her close family and friends (Thorpe et al., 1992). It is important to understand the difference to fully appreciate the experience of mothers when they reference 'support' from family, rather than medical support. Previous studies exploring support during motherhood will be explored in chronological order to display the development of findings over the decades.

Maternal social support was found to significantly relate to the security of the infant-mother attachment at twelve months (Crockenberg, 1981), though the cohort examined was representative of mainly Caucasian women and may not be representative of women from other backgrounds. A study conducted by Crnic et al., (1983) examined the effect of stress and emotional social support on women's maternal attitudes. Structured home-interviews were conducted with 105 mothers identified social support as a moderator of stress. Both support quality, as well as support satisfaction, were found to be dimensions related to a smooth transition to motherhood.

Levitt, Weber and Clark (1986) explored the social networks available for mothers of infants. They found that mothers identified with limited people in their closest circle during this transition, which included their husbands and the mother's parents. Results indicated that the marital relationship was a key source of support, with the amount of support received being interlinked with the new mother's satisfaction. A high concordance was found for the support received from both the husband and the mother's mother, and the new mother's satisfaction with these relationships.

Psychoanalyst Daniel Stern (1995) developed a principle known as the 'Motherhood Constellation'; a construct that describes the main subjective themes experienced by mothers. Stern discusses the cultural aspects that impact motherhood, including the responsibility of the baby's survival and the ability of the mother to love her newborn. Although the father and other family members will provide support for the new mother at the start, the mother herself is not provided with practical support or training for her new full-time maternal role. The Motherhood Constellation includes a supporting-matrix theme, that refers to the mother's need to be part of a sympathetic support system. Such a system is essential for the protection of the mother's psychological and physical state after the life-changing event of motherhood. Having access to a support system provides the mother the chance to assemble information to help her through becoming a mother (Stern 1995). This concept is supported by Stadlen (2005) who acknowledged the importance of advice and practical questions from other mothers to the new mother.

Another study by Goldstein, Diener and Mangelsdorf (1996) explored factors associated with maternal characteristics, including social support, life stress, mood and maternal personality. Numerous dimensions of social support were reported as being important to the transition to motherhood and mother-child interactions. Mothers have unswervingly reported either their mothers or husbands as their primary postpartum support givers.

Cronin's (2003) study explored the needs, perceptions, and experiences of first-time mothers during the postnatal period. Analysis of data showed that the maternal mother was key in supporting the new mother both emotionally and practically in direct childcare, advice and time out for the mother to socialise. The support from professionals is reported to be mainly surrounding the development of the newborn, less so on maternal support, yet highlights the importance of support towards facilitating the new mother's aptitude to cope.

The studies described thus far refer to mothers in the West, however, Forman et al. (1990) researched Arab mothers. They identified forty days to be a transitional marker amongst this group of women. The effect of social support received and experienced during the forty-day rest period was highlighted. A link between purity and this rest period was emphasised, a concept that is considered beneficial for a woman's health amongst Arabs. It was reported that female family members were expected to act as role models for the new mother and influenced the breastfeeding practices, especially during these forty days, regularly offering support and advice.

An ethnonursing study was conducted by Luna (1994) on Lebanese Muslim immigrants living in the United States, a sample that has elements of exposure from two differing cultures. The study aimed to explore the experiences and meanings of care for this cohort, and though many details were explored, for this review, only those related to motherhood will be pointed out. The study found that the Muslim mother plays a vital role in early childrearing, a role which participants referred to with pride. The mother-daughter relationship present is extremely close and intimate. Overall, the study identified that familial obligations towards care are interlinked within the participants' Islamic worldview. The Muslim male is seen to be responsible for the family's economic support, whilst the Muslim female is responsible for childcare and education.

Khalaf & Callister (1997) conducted a study where thirty-two low risk Jordanian Muslim women were interviewed. A native speaker was chosen to interview the mothers using culturally sensitive questions to help shine light on these women's experience of childbirth. Twenty-four of the mothers had a female member of their extended family assisting them during childbirth. Some of the themes that arose were

‘motherhood feeling’ and ‘the need for a reliance on God’, with a strong spiritual dimension being present around the experience of childbirth.

Nahas & Amasheh (1999) explored the personal experiences, perceptions, and meanings of Jordanian women residing in Sydney, Australia who have experienced PND. This study reported that Jordanian women in their home country experienced family support during births, deaths and daily activities, while Jordanian women living in Australia did not report this support. A similar study explored the lived experiences of Middle Eastern migrant women in Australia and found coinciding responses (Nahas, Hillege & Amasheh, 1999). One of the themes that emerged was loneliness due to a feeling of isolation and lack of social support. These mothers expressed a loss in having their families far away from them and felt a sense of loss of interaction with people that hold similar practices as them. Furthermore, they experienced difficulty in fulfilling their role as a mother/wife without the help of family support. With motherhood being exalted within the Middle Eastern culture, these women experienced a fear of being labelled as ‘bad mothers’. However, it is worth noting that the western fears around motherhood seem to be around competence, whereas the Jordanian mothers in the above study had religious worries.

Hundt et al. (2000) explored Arab women’s reproductive and health practices in the forty-day postpartum period. Over a period of five years, they collected data in several ways: interviews shortly after birth in the hospital; natural group interviews in the women’s homes during a forty-day postpartum period; structured home interviews six months postpartum; and fifteen interviews took place with a subsample of the structure interviews that occurred six-months postpartum. The study found that the forty-day postpartum period is not just for purity but also a health-enhancing practice, including family help with daily care and a special diet for the new mother. It was reported that one health-enhancing practice that is provided to women is the daily care of the home and children for a period of at least two weeks postpartum. Depending on the family and traditions, there is a variation in the amount of support received, however in the past it was known that women would not resume their usual house chores until passing the forty days.

Another study conducted in the UAE by Green & Smith (2006) explored how societal changes have impacted family processes and parenting practices across three generations of Arab women. They found that all generations reported that their mother was their primary source of advice and guidance during early infant care.

Hoang, Le & Kilpatrick (2009) reported that becoming a new mother in a foreign land is a challenge for migrant women who have limited access to traditional practices and social support. The change of culture and reduced exposure to more traditional and familiar practices can leave the new mother with a sense of lack of social support. Although this study does not focus on Arab women, it does highlight a change in

cultural practices amongst western and non-western cultures concerning motherhood, and it supports the notion that the healthcare system holds a role of understanding the needs of new mothers based on their cultural identities.

Missal (2013) conducted a study exploring the experience of Gulf Arab women's experience of transiting into motherhood. The study was based on two theoretical models, namely Leininger's theory of Culture Care Diversity and universality (Leininger & McFarland, 2006) and the Transition's Framework (Meleis et al. 2000). Two cohorts were included in this study, with the initial cohort interviewing seventeen Gulf Arab women on three different occasions, before childbirth, two-four weeks postpartum, and forty-days postpartum. The second cohort interviewed seventeen first-time mothers after giving birth in Oman. Results highlighted four identifiable patterns as indicators of change in first-time mothers: women's personal transition; mother/baby relationship; family influences; and cultural/religious beliefs/practices. Furthermore, four phases were also identified indicating an Arab woman's journey from conception to motherhood: preparing for motherhood; childbirth experience; forty-days in residence; and the forty-day marker. Mothers expressed their expectations that family members would be present during childbirth and would plan who would support them during and after birth. After the birth of their child, women practised forty days in residence, living either with or nearby their mothers/mothers-in-law. No reported resentment regarding this forty-day residence was described. Female members would care for hospitality arrangements when guests visited to congratulate the new mothers. Other arrangements were also taken care of, such as housework, laundry, cooking, and caring for the newborn. This is to allow the new mother space to focus on herself and the newborn. New mothers reported that they felt supported, due to regular interactions with their siblings and other female family members who would assist with daily activities, and in doing so lessen the load on the new mother. Furthermore, Arab women in this study reported a relationship with God and how it influenced their transition to motherhood, with religious and cultural beliefs being an integral part of the experiences of these women. Given the difference of experience amongst Arab mothers and British mothers, it is worth highlighting in order to support the healthcare system to care for and support the differing needs and expectations from new mothers who are from Iraqi or other Arab descent.

Benza & Liamputtong (2014) conducted a meta-synthesis study examining studies between 2003 and 2013 on the lived experiences of immigrant women with regards to pregnancy, childbirth and motherhood. Four themes were identified across the qualitative studies, namely, expectations of pregnancy and childbirth; experiences of motherhood; encountering confusion and conflict with beliefs and dealing with migration challenges. Though the experience of transitioning into motherhood and all that it entails is a natural yet life-changing and on many occasions difficult process, the experience for migrant women has an added struggle. The experience of migrant women is influenced by societal and cultural values, and the ability of the women to adjust to their new environment can be challenging.

Bawadi & Ahmad (2017) conducted a longitudinal piece of research exploring the experience of childbirth and transitioning into motherhood for Arab migrant women living in the UK. A hermeneutic-phenomenological approach was applied in this study, eliciting from the work of Heidegger. The analysis of twenty-four interviews from eight women identified 'displacement and reformation of self' as the main theme with several subthemes, one of which was 'moving from dependence'. Arab women experiencing this new world of motherhood in a foreign country were finding they were forced to be more independent, which in turn required for her to be more self-reliant. Part of this new independence is due to parting with their extended families, who in Arab countries, have a major role in supporting or refuting their decision making and assisting their children well into their adulthood.

Research highlights that early motherhood is an immensely difficult time for new mothers. The importance of receiving support during the postpartum period for a new mother has been emphasised. However, the amount of support one receives will differ based on the availability of family and the social expectations of the family's surroundings. It is common for new mothers to experience feelings of anxiety or PND. However, receiving good support during this transition into new motherhood can reduce the effect of anxiety and depression (Price, 1988). Research has also shown that there is a difference amongst Arab women, with their experience of support being shaped by their cultural background. However, no study was found exploring Iraqi Arabs, or British-Iraqi women.

2.3 The Mother-Daughter Relationship

Given one factor influencing this research has been the support British-Iraqi mothers receive postpartum from their families, particularly their mothers, it is important to explore the literature present around the mother-daughter relationship. It is also important to bear in mind this relationship may present itself differently amongst cultures, religions and decades.

The relationship parents hold with their child, and its effects on the child's future development have interested researchers extensively over the decades. The mother, as both the primary caregiver in most family dynamics and the one who physically bore the child, has vital importance in the child's development (Onayli & Erdur-Baker, 2013). Attachment styles have been found to affect the quality of the child's future relationships (Bowlby, 1988/2008), while the emotional connection was found to be the highest in the mother and daughter relationship than any other dyad (Fischer, 1991, Hrdy, 2011). Thus, the dynamics of this important relationship holds a determining role in the life of adult women embarking on their journey into motherhood. The mother-daughter relationship has been reported to have a high significance in many cultures (Rastogi & Wampler, 1999). It has also been found to be a predictor of the new mother's attachment pattern with her newborn (Stern, 1995).

Freud (1933) reported that a woman is likely to revive her identification with her mother at the point of becoming a mother herself. Bibring et al. (1961) discussed that during pregnancy, women will potentially experience a reorientation of some sort towards their mothers. Furthermore, British sociologist Peter Townsend (1957) described familial relationships to be dominated by women, in particular, the mother-daughter bond as being the cornerstone to family interactions. Though it should be noted Townsend's (1957) work was around those of poorer families, the importance of women within the family dynamic remains significant.

It has been suggested that we can view the mother-daughter relationship as a life cycle with some significant transition markers: daughter's adolescent years, marriage, entering motherhood, and the mother's old age (Murray-Parkes, 1971). These transitional periods can alter the state of the mother-daughter relationship. Feminists have identified that this relationship is salient, with the social construction of gender holding an influential role in the unique bond we find between mothers and their daughters (Chodorow, 1978). Object relations theory has conjectured that women are affected by patriarchal influences, pushing them into becoming the primary caregivers. This leads to young girls disconnecting from their mothers (Chodorow, 1978). In 1999, Chodorow moderated this view and stressed the importance of individuality of personal gender, both on our identities and specific relationships like the mother-daughter one. She states that culture does not determine the personal meaning we have of gender, rather this is created by 'characteristic emotional tonalities' for the individual

and for the intersubjective pair. However, an emphasis on the importance of the mother-daughter relationship remains evident across the research.

Fischer (1981) focused on a potentially significant transition in the mother-daughter relationship: when the daughter becomes a mother herself. This study focused on the concept of “developmental stakes” in terms of the mother-daughter relationship, considering how this relationship is affected by developmental changes such as marriage and parenthood. Interviews were held to examine the impact of a daughter’s transition to marriage and motherhood on this relationship. Results found that throughout such changes, the relationship is redefined for several reasons. Firstly, there is a shift in relative statuses, the daughter’s marriage can secure her self-affirmation from child to adult. Secondly, there is a change in the perspective of the daughter’s role, transitioning into motherhood can allow the daughter to go from her mother’s counterpart to being witnessed by her mother in this role. Finally, there is a shift in the family structure, with the dynamics moving from nuclear to extended for both the daughter and the mother.

Fischer (1983) also conducted a comparative study exploring if shifting the structure of family networks creates changes in family relationships. The mother-daughter and mother-in-law and daughter-in-law relationships were examined. Three dimensions that affect the changes within both relationships were identified: interactive involvement, interpersonal boundaries, and relational strain. The birth of a child precipitated a clarification between the interpersonal boundaries present between the mother and daughter, whilst greater ambiguity was created for the quasi-maternal relationship between the mothers-in-law and daughters-in-law. Following the birth of the child, mothers were more likely to seek comfort and advice from their mothers than their partner’s mothers.

Fischer (1986) conducted in-depth interviews with adult daughters, born between 1948 and 1958 and their mothers who were part of the 1950s mothering cohort. The mothers in this cohort lived through a period with the highest rates of marriage and fertility in this century. However, their daughters entered adulthood in a time (the 1970s) of decline in both marriage and motherhood, and a rise in divorce and females involved in labour force work. Demographically, the difference between these two cohorts of women is prominent. The daughters in this study reported being trapped between two opposing ideologies, the “traditional mother” and the “modern mother”. Fischer (1986, p. 201) concluded that “The family roles of women provide a meeting ground for the interweaving of generations.”

However, it should be noted that Fischer’s earlier work (1981, 1983, 1986) was based on a cohort of mothers reaching adulthood in the 1950s and early 1960s, where the western cultural values and expectations surrounding marriage and pregnancy differed greatly from what is now deemed acceptable by society. Fischer (1991) reviewed this shift in the difference between the life of a mother and the life of her daughter. In more recent studies, young mothers are the daughters of working mothers. Daughters in

this review reflected on their identity with their mothers negatively, wanting to avoid certain characteristics they saw in their upbringing. Two-thirds of mothers in this sample reported aspiring more for their daughters than they were able to do themselves, though they held no regrets to how their own lives panned out.

Stern (1995) acknowledged the importance of one's own mother, as well as other potential maternal figures to a woman's experience of motherhood. Unsurprisingly, the transition to motherhood prompts memories of childhood or one's own experience of being mothered, impacting the new mother's reaction to her own child. This too influences the formation of her new identity, both from woman to mother, and from daughter to mother. However, Stern (1995) noted that this is but a theoretical model that can benefit clinicians, rather than a clear life stage that women encounter.

The research presented highlights the importance of this strong mother-daughter connection, whether it is positive or negative, is indisputable. However, given the nature of this study, it is important to consider the role of motherhood from Arabs' and Muslims' perspective. Islam holds the role of a mother highly, and this status is present within the Islamic and Arab culture. This must not be confused with the patriarchal attitudes present within some of the Middle Eastern regions regarding women, with some people still holding the idea that women/daughters are below men/sons. Rather, Islamic values view motherhood as a highly valued and dignified role within the family, whilst still acknowledging how difficult motherhood is. The tradition below by Imam Al-Sajaad (a.s) can shed some light onto the view of a mother in Islam:

It is the right of your mother that you should appreciate that she carried you [in her womb] the way nobody carries anybody, She fed you the fruits of her heart which nobody feeds anybody. She protected you [during pregnancy] with her ears, eyes, hands, legs, hair, limbs, [in short] with her whole being, gladly, cheerfully, and carefully; suffering patiently all the worries, pains, difficulties, and sorrows.

Risalatul Huqooq – The Chapter of Rights

The Prophet Mohamad (PBUH) is known to have had only daughters, particularly Lady Fatima (a.s), known to be one of the five women of the world, whom he held very dear. This came at a time when Arabs were burying their daughters and only allowing their sons to survive. With the Prophet's (PBUH) ancestry line being continued through his daughter, Muslims worldwide see this as a powerful message from God to humankind to appreciate and accept females as equals to males. To sum up, the following tradition by Imam Al-Saadiq (a.s) depicts the importance of the mother role for the Prophet Mohamad (PBUH), particularly in comparison to the father role:

'A man came to the Prophet (PBUH) and said: 'O Apostle of God, whom should I honour?' He said: 'Your mother.' The man said: 'And then whom?' The Prophet said: 'Your mother.'

The man said: 'And then whom?' The Prophet said: 'Your mother.'

The man said: 'And then whom?' The Prophet said: 'Your father.'

Al-Kafi, vol. 2, p. 159, Hadith 9, Chapter 'Honouring One's Parents'

2.4 Existential perspectives on Motherhood

Due to a personal interest in the existential perspective, and with this research focusing on the experience of motherhood through an existential lens, it was paramount to explore overriding existential perspectives. Endless changes occur for women from the moment they find out they are pregnant all through to the actual physical experience of childbirth and beyond into parenting their newborn. The existential perspective focuses on our existence as humans within our worlds. Previous existential literature on motherhood have explored themes such as the ones discussed below: Identity, Embodiment and Meaning of Motherhood.

2.4.1 Identity

Identity is important when considering motherhood, as women are thrown into a new role that they gradually evolve into through pregnancy, birth and postpartum. Simone De Beauvoir (1965/1997) was famously known for her feminist views on motherhood, particularly regarding self-identity. Her book 'The Second Sex' discusses pregnancy and motherhood and explores De Beauvoir's existential and feminist perspective. De Beauvoir perceived women as being reduced by society to the role of 'mother'. A society that limited women's interactions in the workplace and emphasises their roles in the homes. De Beauvoir argues that the maternal role is far from natural, dictated by society's moral choice, a limiting role within western society. According to De Beauvoir, women can regain their autonomy through their child-rearing choices by pushing back at the social constraints of motherhood that seeks to steal her identity as a woman and reduces her into the identity of a mother alone. She further believed that maternity, science and religion reduce mothers to silence, an idea Kristeva (1987) agreed with. This has led women over the years to find a medium between nature and culture, a medium I believe we are constantly battling. Kristeva (1987) argued that religious literature and systems focuses on Jesus Christ, leaving the Virgin Mary in the silent shadows though she was the one who birthed him and gave him human life. It is debatable who and which system silenced the Virgin Mary from this important role, yet there remains more emphasis on the one who was birthed rather than the one who birthed. The scientific dialogue, however, argues that motherhood is a biological and natural process, removing the individual mother from this transition and life event. De Beauvoir and Kristeva are in agreement that women are reduced and silenced by society to the position of 'mother'. Experiencing such silencing limits a woman's expression of self and emphasises on a patriarchal suppression within society. However, it should be noted that the society being criticised here is the western one, which since then has evolved to what I believe is a kinder place for mothers.

Kristeva (1987) emphasises the importance of the mother-child relationship. Experiencing and enduring pregnancy will not only allow the new mother to reidentify with her mother but also find her own identity that now includes her newborn. This process is a 'continuous separation' for the mother, challenging her new identity whilst still separating herself as a woman. Kristeva highlights the danger of mothers making their newborn their new identity, redefining her meaning to that of her child's. Kristeva does not share

Winnicott's view of the 'good enough mother', instead, she believes that the mother requires something else to love than her newborn. This stance is shared by De Beauvoir in that the new mother needs something beyond her new child and a new identity as a mother in order to become her own individual, to avoid a battle of identity.

Stern (1995) identified that transitioning into motherhood will not only change the woman's life practically but also will change the woman's actual self. Central to this transition is the need for maternal role models, both the new mother's mother and other maternal figures (mother-in-law, sisters, aunts). Experiencing motherhood first-hand will prompt early memories for the new mother of the mothering she has received, both on a preconscious and conscious level. Such memories will impact the decisions and actions the new mother makes in interacting with her newborn, as well as her self-judgement on how she should be mothering. It further affects her self-identity, transitioning from daughter to mother.

Miller (2005) focused her research on the impact a newborn has on a mother's identity. Her findings showed that for most mothers, the process of feeling like a mother was gradual, stemming from the practicalities of mothering. Enduring labour alone did not result in women feeling like mothers, much less as experts in their new role. Miller (2005) believed an ontological and pivotal shift occurs for women through birth and early motherhood that is complex and in search for a balanced new self. Furthermore, Miller noted that the Western image towards mothers and motherhood makes it a difficult topic for women to discuss. This has led to myths surrounding motherhood that impact women's perceptions and expectations of motherhood, causing them to feel unprepared once they experience becoming a mother.

Through numerous encounters with new mothers through support groups, Stadlen (2005) observed an internal shift not only in a new mother's life, but within herself, to create space for her newborn and new identity. In line with Miller's (2005) views, this shift is a gradual one, and includes the acceptance of her new identity. With this acceptance and a shift in her being, the new mother's other relationships will also begin to shift, so much so that mothers will struggle to recall what their lives were like before, what they themselves were like before.

Butterfield (2010) expanded on De Beauvoir's concepts on motherhood in her search for understanding 'the meaning of identity of a mother'. She views motherhood to be ambiguous, through being determined due to the physical certainties surrounding birthing a child, and the way pregnancy physically and emotionally alters a woman's body. Motherhood has an aspect of individual freedom, in the respect that one can choose their mothering style and preference. However, such preferences are affected by our societal, cultural, historical and individual influences. Butterfield rejected the concept that mothers should be constantly viewed as selfless with entire devotion, rather, this should be replaced with the notion that

mothers are a work in progress, a principle that resonates well with me from my own experience transitioning into motherhood.

Arnold-Baker's research (2015) found that women are confronted with a paradox of experiences through motherhood, inflicting feelings of uncertainty around their selves, their new identity and role as mother and carer, leading to a creation of a maternal identity.

2.4.2 Embodiment

The process of becoming pregnant and giving birth is an embodied experience. It is important to understand what embodiment means with reference to motherhood for the benefit of understanding the women in this study. In Cartesian terms the body is viewed primarily in a biological context, separated from the mind and others. However, existential theory views the body as 'lived', which embodies consciousness within the world (Langdrige & Finlay, 2011). From an existential perspective, embodiment is a process of living in the physical body, central in our experiences. This is important when considering motherhood, a transition concerning physical bodily changes. Embodied experiences, such as motherhood, can be understood as existential givens, a feature of *Dasein* (Letunovsky, 2004).

Furthermore, as the body is an important phenomenon in existentialism, it is reported as one of the seven 'existential dimensions' (Ashworth, 2003).

Merleau-Ponty (1962) proposed that the mind and body cannot be understood separately, they are a unified whole that is experienced together. Our bodies are fundamental to our perception and understanding of our human experience. Through our bodies connecting with the world and experiencing different situations, a 'system' is created for the purpose of generating meaning from our experiences (Deurzen, 1997).

Existential philosopher Nietzsche (1883) held unambiguous views on the primacy of the body. The self, according to Nietzsche, is a mere function of the body, rejecting a dualistic stance on the body. The body and self are equal, rather than the body simply housing the self. Therefore, to connect with your 'self', you must connect with your body. Our bodies are key to expressing ourselves to those around us and can reflect the identity we hold (Nietzsche & Kaufmann, 1995). For pregnant women, this physical identity is a visible one.

Sartre distinguished between three dimensions of the body: being-in-itself (*en-soi*), being-for-itself (*pour-soi*) and being-for-others (*pour-autrui*). These ontological dimensions depict that the body is not limited to subjective and unconscious living, but it also self-consciously lived as an object for others. This indicates the effect of our sense of self and how our bodies can be objectified through the look of another (Sartre, [1969], 2003).

Lupton (2013) explored the uniqueness of a woman's embodied experience that comes from motherhood. Merleau-Ponty's principle of interembodiment was used to depict the way mother and baby are intertwined, embodied through pregnancy, childbirth and the early years. Although many factors surrounding motherhood are socially constructed, some factors are unique to just the woman, aspects that we should appreciate and celebrate rather than view as limitations of the female sex.

A phenomenological study by Lawler and Sinclair (2003) explored the experiencing of women with PND. Data was analysed through the use of van Manen's four existential lifeworld's. Conclusions included that motherhood is a chief life-altering occurrence for women, with those PND experiencing an extreme form of anguish surrounding the loss of their former selves. They also suggested that the term 'depression' plays a harmful role for postnatal women, preventing them from seeking help and placing assumptions that they may not be coping with this life-changing transition into motherhood. The postnatal period is difficult with the physical and hormonal changes occurring for a woman, and it only feels natural that a new mother would find such a transition difficult to comprehend.

Another study phenomenologically explored new mothers postnatal embodied experiences (McCarthy, 2016). An exploration of the new mother's experiences during pregnancy, childbirth and postnatally was sought, with data being analysed using van Manen's hermeneutic approach. Reports of postnatal embodiment appeared through the experience of disruption, displacement, and alienation, aspects which were equally emotional and psychological as they were physical. McCarthy's (2016) findings highlight the complex link between the body and mind, placing importance on how an existential understanding of our bodies can therapeutically support women transitioning into motherhood.

2.4.3 Meaning of motherhood

Hartley (2005) conducted a phenomenological inquiry on the transition to motherhood, including 7 mothers in the UK. The study found that first-time motherhood brought about fundamental changes in the woman's being-in-the-world, causing a rearrangement of her entire being. The study challenges mainstream knowledge of PND and argued that due to the extraordinary life transition of motherhood, experiencing significant levels of distress postpartum is to be expected.

Motherhood is an existentially challenging experience that causes women to re-evaluate the meaning of their existence. Prinds and colleagues (2013) conducted a scoping review of studies conducted between the years 1990 to 2010. Eleven papers were thematically analysed using Deurzen's (2005) four dimensions of experience. The physical dimension referred to the physical experience of childbirth was concluded to create new perceptions of being-in-the-world. The social dimension called into question the mother's sense of belonging and position within the family. The personal dimension is where our inner selves are confronted by changes in our lives. The spiritual dimension showed that many mothers found it difficult

to coherently express their experiences due to the barriers of the existing language used by healthcare professionals. According to Prinds et al. (2013), it is in the spiritual dimension where mothers will recreate their existing core values and create new meaning in life. This study concluded that motherhood is an existentially life-changing occurrence that changes our values and affects what meaning we associate with life. However, the study was based on previous studies, an exploration of a specific sample of mothers would add to the research scope.

Two more recent studies were conducted exploring the existential dimensions of the transition to motherhood (Arnold-Baker 2015, Garland, 2019). Using phenomenological approaches to analyse the data, Arnold-Baker (2015) used Van Manen's hermeneutic analysis and later drew from Deurzen's (2014) Structural Existential Analysis. Garland (2019) decided to add in a combination of the framework of the Four Dimensions of Existence (Deurzen, 1997), focusing her interview questions on this framework. Both studies concluded that the transition to motherhood is a multifaceted phenomenon that actively challenges each dimension of a mother's existence. Garland (2019) highlighted the complexity of motherhood and supported the notion that motherhood is an existential crisis, which had earlier been explored by Arnold-Baker (2020) and Donaghy (2020). On the physical dimension, the mothers showed an awareness of the anxiety of mortality and their limitations whilst on the personal level they were faced with issues of responsibility, freedom and choice. On the social dimension, the mothers reflected on their newfound relationship with their infants, whilst on the spiritual dimension all the mothers described an experience of unconditional love with their newborn.

The existential analysis used in Arnold-Baker (2015) and Garland (2019)'s studies demonstrated that new mothers experience a change in each of the four dimensions of existence. Social relationships are affected by these changes, both in how the mother relates to her baby and others. Values and beliefs are reevaluated, either resulting in them being challenged or reaffirmed. Ultimately, the process and experience of transitioning to motherhood cause enormous changes and shifts for a woman.

2.5 Existential perspectives on Cultural Identity

Given that this study will be exploring the experience of bicultural mothers, it is important to inspect the denotation of culture and race, highlighting how multifaceted they are (Eleftheriadou, 2010). Culture is so complex, and holds a weighty influence on us, though many a time this influence is subtle, with the current reality of the world being diverse and part of an "international community" (Strawbridge & Woolfe, 1996). Eleftheriadou (2010) beautifully compares the complexity of culture to that of the mother-infant interaction, seeing one part of the interaction does not give us a whole representation of what is occurring.

Individualism is the dominant cultural view present in the West, although anthropologists have debated the peculiarity of this impediment (Geertz, 2008). It has been estimated that a mere 30 per cent of the world's population is part of the individualistic culture (Triandis, 2001). However, ontological individualism considers culture and the individual as separate entities. The argument is that on a metaphysical level, humans are separate from others, society, and nature (Richardson et al., 2002). However, by taking this stance, we reduce the importance of culture, allowing it to become a mere inessential milieu. Heidegger (1962) says the opposite to this, believing that as human beings we are being-with, constantly in relation to ourselves, others, society and the world.

The scope of psychotherapy and counselling has many a time undergone criticism due to failing to address the challenges of migrants and bicultural individuals (Christopher & Smith, 2014). Both theory and practice have been derived from a monocultural stance, resulting in cultural oppression (Jaladin, 2011). The Western culture has developed concepts and measures within society, that is extended to those who do not come from an exclusively western background. This has resulted in misinterpretation, assumptions, and a lack of appreciation for the hidden practices of other cultural norms (Pedersen, 1991). More recently, cultural influences are acknowledged to be unescapable, with a powerful influence on the formation of our "being", whilst remaining obscure for researchers who attempt to understand these influences (Kitayama & Markus, 2000). Cross-cultural research places emphasis on defining culture, though fleeting, in an attempt to understand the phenomena by creating a tangible classification and general characteristics related to culture (Seeley, 2003). However, the existential perspective has attempted to reduce the level of cultural oppression by accentuating the deliberation of a phenomenon, encircling individual views as well as cultural and gendered views, before generating a conclusion (Ibrahim, 1996).

The concept of cultural identity remains complex, affected by both our internal and external contexts of existence. Heidegger (1962) disputed the concept held within Western cultures that we are separate agents, rather he believed we engaged with the world through 'being-in-the-world'. We are 'thrown' into the world, according to Heidegger, and likewise 'thrown' into different cultural practices. The surroundings that encompass us as we explore life impacts how we relate to the world. Within Western cultures, values and meaning are seen to be subjective possessions, which we can adopt or abandon as we wish.

Buber (1970/2000) held similar ideas to Heidegger surrounding the 'self'. He believed the 'self' is immersed in our social worlds concerning others (I-thou) and that the 'self' is immersed concerning itself (I-it). Buber recognised 'identity' to be free to change, though highly influenced by our interpersonal contexts, such as culture. Relationships were held with great importance in relation to human existence, viewing us as being of the in-between, yearning for interactions and relationships with others (Buber, 1970/2000).

In contrast to these views, Sartre (2003) suggested that we, as humans are subjective 'beings' and are free to respond to our surroundings and the world as we wish. The responsibility of creating our own identities, thus, falls on us. Sartre (2003) believed we are free to create and respond to the world we exist in, and it is our responsibility to create this identity. This perspective argues that we hold the choice to create a 'self' from nothing, aspiring towards 'being-in-itself' and 'being-for-itself', whilst using the freedom we have. However, it is a struggle to be both, highlighting human beings' failure to handle this responsibility of reinventing our 'self' (Deurzen, 2005).

Overall, existential views recognise 'identity' as interchangeable, though they differ on what influences such changes. Living in the world socially amongst and in relation to others means our self-identities are free to evolve though influenced by our social circles, histories, and cultures (Miller, 2000).

2.6 Overview of literature review

An extensive literature review was conducted using various terms. Previous research exploring the difference amongst cultures in motherhood perspectives and expectations were found. It is important to note that though most of the studies included core qualitative elements; they also incorporated some quantitative methods in the collection of data.

Ultimately, the review identified a gap in understanding and knowledge of the bicultural effects of motherhood. This study aims to provide a deeper understanding of the experience for British-Iraqi women during the first 40 days of motherhood and to explore these experiences from the perspectives of the Four Worlds of Existence. Little seems to be known about this specific cohort, however, there is research highlighting the importance of a rest period for women influenced by culture (Hundt et al., 2000). Studies have also explored maternal support amongst Arab migrant mothers (Forman et al., 1990, Luna, 1994). Arab mothers have frequently reported receiving post-natal care from female family members (Khalaf & Callister, 1997), with those missing out on such care because of being immigrants, expressing feelings of depression (Nahas & Amasheh, 1999). I aim to explore if experiencing such support, which has been documented in previous studies (Levitt, Weber & Clark, 1986; Cronin, 2003), allows this transition to be less intense for the mother. I am also interested to see the effect of being part of both the British and the Iraqi culture, and how intertwined or conflicting values have affected the experience of these women.

During the process of this review, I found endless papers that considered the importance of postpartum practices, but given the limitations of the research I could not include them all. Studies have noted that the UK had a legislation on midwifery practice in 1902 that was defined by ten days as the needed time for rest and receiving of care from the midwife postpartum (Huang & Mathers, 2010). Though this was a considerable time ago, it depicts a different social view of the postpartum period for British mothers in the early 1900's, one that may resemble the support expected within middle eastern and Arab communities. The UK was a mostly ethnically homogenous society prior to the 1950s, with some presence of South Asian and Caribbean communities. These communities began to increase after the Second World War due to shortages in labour (Fryer, 1984). The continuous increase in different cultural communities has resulted in a more diverse community, making way for continued understanding on cultural and religious factors that impact motherhood and the healthcare system. Additionally, there is a greater importance placed on midwife care in the UK than in Middle Eastern countries like Iraq. In the UK, the majority of women receive care from the National Health Service (NHS), including postnatal care being provided by midwives and obstetricians. After this, mother and baby are placed into the care of the Community Midwives (CMWs) who provide support around breastfeeding and overall monitoring of the baby and mothers care (Metcalf et al., 2016). This care involves a minimum of three home visitors or more where required and for up to six weeks postpartum, before being discharged by the Healthcare

visitors (Kokab et al., 2022). In contrast, new mothers in Iraq are often discharged within three hours following uncomplicated vaginal deliveries and the postnatal care is limited to none (authors understanding of culture practices in Iraq). However, there is a stronger presence of structured familial support, which places a lower influence from midwives and doctors during the postpartum period. This depicts that in the UK there are more interventions being provided by healthcare professionals for a new mother, potentially because of the reduced familial and community support.

Having considered the literature available and the gaps present, it is also important to consider researcher biases. When considering a hypothesis, it is important to remain aware of the hermeneutic circle. This refers to the researcher's preconceptions and intuitions before starting the study. While we try to understand a specific phenomenon based on concrete interpretations, we will revise our initial beliefs surrounding the phenomenon. I am aware of my preconceptions regarding the experience of Iraqi mothers postpartum, and thus it will be impossible to remain a blank canvas. Thus, it is important to be aware that my biases and preconceived opinions have impacted the unfolding of a hypothesis of this study. According to Heidegger, it is important for a researcher to know how to stand inside the hermeneutic circle rather than to avoid it (Heidegger, 1962; Hoy, 1993). Knowing and identifying my preconceptions and assumptions based on my experience is important and valid when conducting research that is close to the researcher. I kept a journal throughout the course of the research and ensured I used personal therapy as a space to explore feelings that arose for me before, during, and after data collection. However, putting my experience aside, I feel it is important to provide an account of these women's experiences hoping it will provide us with a deeper and clearer understanding of whether holding two cultural identities has impacted their experience of becoming mothers and the postpartum period. Further details of the reflexive process that unfolded during the research can be found in the coming chapters, specifically **in Sections 3.5, 4.6 and 8.5.**

3. Methodology

High-quality research should align epistemology, ontology, methodology and method, remaining consistent throughout (Scotland, 2012). This chapter aims to highlight my personal epistemological and ontological position and my consideration of several alternative methods. This process led to choose Structural Existential Analysis (SEA) as a research method to capture the experience of motherhood for British-Iraqi's. The chosen method will then be described in detail, delineating the design and practical implementation.

3.1 Development of the Research Question

The aim of this study is to investigate the experiences of British Iraqi first-time mothers during the first 40 days of motherhood, within the perspective of the Four Worlds of Existence (Deurzen, 1997). Conducting the above extensive literature review further helped me develop my research question. I hope to build upon previous work that focused on the experience of motherhood for Middle Eastern women, with some of the studies being conducted in the West (Luna, 1994; Nahas & Amasheh, 1999; Hundt et al., 2000; Missal, 2013; Bawadi & Ahmad, 2017). By exploring the experience of motherhood through an existential lens, I hope to build upon present existential research (Hartley, 2005; Arnold-Baker, 2015; Prinds et al., 2013; Garland, 2019). Though these studies focused on an existential dimension, the samples did not cover any bi-cultured mothers. Thus, my aim in conducting this project was to gain a better insight into the lived experience of first-time motherhood for British-Iraqi women and to explore if there are any parallels for these women. In the coming section we will consider if a quantitative or qualitative research method is more fitting for this research.

3.2 Quantitative or Qualitative Research

Methodology refers to the principles that guide research, whilst methods refer to the unique research techniques and strategies employed by the researcher to complete the research (Silverman, 1998).

Academic research adapts either quantitative and/or qualitative methodologies. When conducting quantitative research, observable variables are analysed through the use of strategic mathematical equations, allowing the researcher to make significant conclusions (McLeod, 2011). In many areas of science, the use of such research is vital to ensure progress within the field. However, if a quantitative research methodology were adopted for this study, it would reduce the new mother's deep and meaningful experiences down to categories that can be contained within boundaries, with the results being generalised to a larger population. A qualitative research methodology, on the other hand, seeks a deep exploration of meaning through the participants' insight into the phenomena, without identifying measurable variables in advance. Qualitative researchers acknowledge the multi-layered and complex interconnections that encompass the explored phenomena whilst not being limited by definable facts (Rist, 1977). Thus, qualitative researchers aim to be open to research without attempting to predict the outcome. Data is collected through non-experimental environments, usually through the form of structured or semi-structured interviews. This process allows the content to unravel, creating an intersubjective interaction between the participant and researcher and clarifying meaning around the phenomena.

This research seeks to provide a deep and honest exploration of the experience of the participants during the life-altering transition into motherhood whilst still acknowledging their bi-cultural background. As identified in the previous chapters, the research question aims to explore the experience of British-Iraqi first-time mothers during the first 40 days postpartum. I am aware and understand that in addition to this, the experience of the mother's bi-cultural identity will further shape her overall experience of herself. Therefore, I aim to explore a phenomenon that is uniquely experienced by this cohort of participants which may be experienced differently by others, and potentially even differently by the same mother at a different time in her life. The concept of temporality and wanting to learn from individual experiences correspond with my critical realist position.

3.3 Epistemology and Ontology

All research frameworks hold a set of beliefs about the world interlinked with a set of terms. This leads to a particular epistemological position, which refers to our view and knowledge on what we as a researcher understand about a particular experience (Langdrige, 2007). Epistemology refers to the theory of knowledge that functions as the basis of the research (Willig, 2013). Epistemology is a branch of philosophy that is concerned with questions such as ‘what is knowledge?’ as well as ‘how is this knowledge acquired?’ (Willig, 2013). Ontology, which refers to the philosophy of reality (what is being?) is linked to epistemology which refers to how we know reality, whilst methodology highlights a method in which such knowledge can be accessed and explored. Thus, it is important to identify the epistemological position the research aims to follow to ensure a better understanding of the world we live in and how we exist among it. Phenomenological methodology syndicates both principles of epistemology and ontology and is concerned with our knowledge regarding the reality of Being (Cohen & Omery, 1994). Positivist epistemological positions emphasise the importance of the external world determining one correct view, regardless of the circumstances (Kirk & Miller, 1986). On the other hand, the hermeneutic phenomenological position acknowledges and believes that our observations and descriptions are selective based on our understanding and experience of the world (Willig, 2003). The epistemological position of the phenomenological framework places importance on human knowledge being co-created through language by our history and culture. Thus, meaning-making is an intersubjective experience and can be interpreted in numerous ways. Regardless of which phenomenological philosophy is adopted, phenomenology as a research methodology invites the researcher to immerse themselves in the experiences of the participant.

3.4 Philosophical Framework: The Phenomenological Methodology

A qualitative methodology has been chosen to allow a deep experiential account of support during the postpartum period for British-Iraqi mothers. Qualitative research requires the philosophical and theoretical framework to guide the presentation of the phenomena being explored, in this case, becoming a mother. It is vital to identify the theoretical framework from the start to understand the position the researcher is taking. This research will adopt a theoretical and philosophical framework, method and analysis that is based on a phenomenological methodology.

The choice of philosophical framework research adopts depends on the researcher's aims as well as their beliefs on science, knowledge and human existence. Phenomenological research is systematic and seeks to explore a given experience rather than to seek an explanatory account of actions or experience (Polkinghorne, 1989). Philosophers such as Galileo, Descartes and Newton were pivotal in creating a science of the natural world that is objective, mechanistic and deterministic. However, this method does not translate as smoothly when researching human science, as humans are not as mechanistic as concepts such as gravity. In the early 20th century, phenomenology was developed as an opposition to this dominant Cartesian approach to knowledge. Husserl and Heidegger's were fascinated in demonstrating the contradiction of the pseudo-scientific approach towards science when concerning human's experiences and argued that human interactions could not be measured in a controlled manner (Langdrige, 2007). By rejecting the need for a priori hypothesis in research, phenomenology emphasises the descriptive and interpretive search for understanding human experience. To do this, there is a focus on first-person accounts of a particular aspect of existence, in this case, becoming a mother, from a specific cohort to extrapolate the underlying structure and meaning of the experience. This yields reflective findings and meanings that are both uniquely idiosyncratic as well as universal essences of the phenomenon (Polkinghorne, 1989).

Phenomenologists have suggested different epistemological positions of understanding human experiences (Vos, 2020). However, the two main phenomenological philosophies are derived from Husserl's transcendental and descriptive philosophies as well as Heidegger's hermeneutic and interpretive philosophy. The below sections will first explore both philosophies, followed by presenting the epistemological and ontological position of this research.

3.4.1 Husserl's Phenomenology

The epistemology of phenomenological research methods takes its base from Husserl's views, particularly the link between the researcher and the topic of research (Lavery, 2003). Husserl inspired this revolution in scientific methods as he proposed phenomenology as a more appropriate method that encapsulated description, seeking out the phenomena of the human experience. He argued that exact science remains

abstract without involving any subjective understanding. However, phenomenology is not a subjective method, rather it proposes to unite subjectivity and objectivity.

Husserl (1900/1985) suggested that all human explorations should be based within our 'lifeworlds' (*Lebenswelt*), focusing on the actual lived experience to enable us to create knowledge and understand life through a deeper sense. He supported the idiographic approach, believing that by focusing on a smaller group we can come to a better understanding of a phenomenon, rather than seeking out to establish general laws, such as those that are present within positivist research (Langdrige, 2007). Husserl aimed to develop a descriptive science that would uncover the essence of each phenomenon.

A key concept required for understanding Husserl's phenomenology is intentionality: that our minds are *always* focused on a phenomenon (Lavery, 2003). It was originally Franz Brentano's idea which Husserl supplemented with intuition (Warnock, 1970). Intentionality is the notion that consciousness always has a subject and an object. They are linked by an intentional arc, without which we cannot understand our experiences. Intuition is to use all our senses in conjunction to ensure we feel into things and approach them with a natural attitude. Intentionality and our consciousness are always directed towards something. This is best used to help develop a specific view on a phenomenon to form structures of consciousness that are referred to as essences. Essence, according to Husserl, is the uncovering of the numerous layers that form our lived experience until the core is found naked, reaching the essence.

Husserl disputed that to phenomenologically explore experiences, a clear distinction between the act of consciousness (*noesis*) and the phenomena in which the consciousness is directed towards (*noema*) should be identified. Husserl stated that for this to be possible, the researcher must place their assumptions to one side, *epoché* their prior beliefs to allow the experience of others to be objectively embraced. This is known as a transcendental reduction (Moustakas, 1994). Only once the researcher has managed to *epoché* their prior beliefs can a phenomenological attitude be adhered to, making way for an objective description of the experience.

Eidetic reduction is concerned with reaching the essence of consciousness. This type of reduction is an imaginative variation of the phenomenon in question (Ehrich, 2005). Eidetic reduction allows us to transform essences that are implicit to being more explicit. However, despite the variations of our consciousness, it ultimately remains the same. Husserl believed that through reduction, we can distance ourselves from the world, consciously bracketing our biases and assumptions about a specific phenomenon. Though it is in the best interest of the research for the researcher to be able to *epoché*, it is difficult in practice and, in my opinion, somewhat optimistic from Husserl's account. Since Husserl, many philosophers and researchers have provided variations of descriptive phenomenology such as Giorgi (1985) and Ashworth (2003).

3.4.2 Heidegger's Phenomenology

Though Heidegger was influenced by Husserl's work, he sought his unique explanation of phenomenology as a methodology known as interpretive phenomenology. Heidegger's philosophy regarding human existence and how this is manifested amongst others in the world is vital in understanding the ontological position of phenomenological research. An understanding of Heidegger's phenomenology can highlight the experience of first-time mothers, and further be insightful for individuals that hold more than one cultural identity.

Different to Husserl's concentrated phenomenological philosophy, Heidegger (1927/1962) deviated from Husserl's views on reductionism. Through his introduction of interpretative phenomenology, Heidegger marked the beginning of hermeneutic phenomenology. To establish the meaning of the term 'phenomenology', Heidegger broke the term into two parts, 'phenomenon' and 'logos'. Heidegger (1962/1966) defined 'phenomenon' as 'what shows itself from itself', whilst linking 'logos' with speech and our way of explaining the phenomena to others through an accessible key. Heidegger expressed the importance of the concealed element in what we try and display about a phenomenon, with the ability of phenomenology to unravel such concealed elements and access the undiscovered. Sometimes this concealment is accidental whilst at others, it is necessary.

According to Heidegger, human beings differ from inanimate objects and even animals in the world, referring to human beings as 'Dasein'. Dasein, as referred to in Heidegger's influential book 'Being and Time' is characterised by holding certain care for the world. It is not possible to separate the world from our beings, and thus we are always being in the world. Accordingly, Heidegger believed that Dasein's existence is dynamic and is impacted by the quality of the world around us and our interactions with the world and others. He used the term 'being-in-the-world' to demonstrate the interconnectedness of Dasein with the world.

An intrinsic aspect of being-in-the-world is that we came to existence through being 'thrown' into the world, one that already had meanings, object, language and people pre-established. Thus, Dasein is linked to temporality, where our existence holds a historical aspect, with our experiences in the moment involving both our past and a projection of our future. This view allows Dasein to have the freedom to create and choose our existence, a freeing dynamic, that has the potential to project itself into the future. However, this freedom holds its limitations, as we are thrown into a specific world, impacted by time, society and culture etc, that ultimately shapes our experience of being-in-the-world and the choices we can or believe we can make. Heidegger (1927/1962) referred to this as 'facticity'. Human beings are thus always being-in-the-world in relation to something or involved in their environment being shaped.

Heidegger was familiar with Husserl's account of intentionality however fiercely challenged his view on 'reduction'. He did not believe we can distance ourselves from the world and analyse the experiences of a phenomenon from an isolated position (Walsh, 1996). Heidegger (1927) speculated that 'being' could not be apprehended without subjectivity, making our experiences inseparable from reality. He presented certain givens of being, such as time, space etc., that we use to make meaning of the world around us. Despite Heidegger's views on subjectivity, he advocated the importance of bracketing our preconceptions when exploring a phenomenon to refuse the impact of our biases. A key epistemological difference to Husserl, Heidegger believed it impossible to fully surpass our natural attitudes towards a phenomenon and remain outside our being-in-the-world. Rather, he believed that all description of phenomena were indeed an interpretation of how the experience had been shaped by the context in which it was experienced, and the language used to describe it by the individual. This led Heidegger to introduce the hermeneutic aspect to his stance of phenomenology. In doing so, Heidegger attempted to move past the descriptive accounts of a phenomenon and towards finding meanings in the everyday occurrence of the phenomena. As described by Annells (1996), hermeneutics is an interpretive process whereby we can understand a phenomenon through language and "meaning-making". The interpretation one makes of a phenomenon is the "meaning-making", a central aspect of Heidegger's interpretive phenomenology (Smith, Flowers & Larkin, 2009). This is a significantly different focus to that of Husserl's phenomenology, with Heidegger focusing on the description and understanding of the essence of Being, seeking some ontological qualities of human existence. Similarly, I aim to explore if there are ontological and universal commonalities for British-Iraqi women who experience motherhood.

There is common ground between first-time mothers as they enter a new world of existence with universal commonalities. However, to accurately understand the experience of these women, I feel it is important to keep in mind both Husserl's epistemological understanding and Heidegger's ontological position whilst conducting this research with the aim of grasping the essence of such moving experiences.

3.4.3 The Ontological and Epistemological Position of this Research

As an existential researcher, I am interested in conducting research that allows a rich description of the experience of British-Iraqi new mothers. I believe that approaching this through an existential-phenomenological lens will help in understanding and interpreting the experiences of how these women experience the transition to motherhood through the exploration of the essence behind this phenomenon. For this reason, I felt adopting a hermeneutic phenomenology for this study would be best. My epistemological position is influenced by Heidegger and Merleau-Ponty, who consider knowledge to be a co-creation through the influence of language, social context and culture as well as our pre-established biases that influence our interpretation of reality. Though Heidegger and other philosophers have explored the notion of inherent meanings in the world, I align myself with Heidegger's view that we

are unable to fully bracket our pre-established knowledge. Thus, I consider myself to hold a critical realist position (Guba & Lincoln, 1994).

Furthermore, I find myself relating to writers to encourage taking a relational stance to research (e.g., Finlay & Evans, 2009). I believe that knowledge is created between people being together, emphasising that interviews are a co-creation through the interplay of the researcher and participant (Rubin & Rubin, 2012). This position echoes my attitude towards counselling and assimilates Heidegger's existential principle of intersubjectivity. In considering intersubjectivity, I am indicating that I see myself as part of the research, a dynamic fragment in the creation of meanings that emerge from the participant's exploration of their experiences. As a British-Iraqi mother myself, I hold a level of pre-knowledge and bias on the phenomena being explored. According to Husserl, pre-knowledge should be bracketed to ensure the findings are not obscured. Though I believe we can reduce the impact our biases have on the findings, I do not believe that we can fully bracket our views. Our views will inevitably be part of shaping the research and should be embraced and reflected upon. Embracing this necessary dual notion, I align with Mantzoukas (2004) and consider it necessary to neither over-emphasize nor underestimate the impact I have within the research. Rather, it is vital to remain balanced when considering the phenomena as they arise within the participant's interviews and be reflexive about how they have been portrayed and shaped.

It is important to understand what ontology is to understand the ontological position of this research study. My identity as a British Iraqi and constant exposure to both cultures has allowed me to appreciate relativism ontologies such as the phenomenological approach. According to Heidegger (1927), 'being' cannot be apprehended without subjectivity, meaning that our human experiences cannot be separated from reality. The notion of subjectivity directs the ontological position of this research by recognising the complex relationship between being and reality. It is important to recognise how as a researcher I experience this phenomenon in relation to the participant, as I do not believe it is possible to entirely remove ourselves from our own experiences and emotional connections. Thus, my ontological stance is aligned with Heidegger's dynamic views of being-in-the-world. The concept of temporality as described by Heidegger is important in my view – what may be true in one situation may not be perceived as true in another, placing weight on the impact of context and personal situations. The interpretation we make is therefore important, with the deeper explorations of the life-worlds of the participants.

In addition to this, the impact of the existential training I have received, my cultural identity and experiences have allowed me to conclude that our human existence, reality, and meaning-making processes cannot be separated from our wider contexts. For these reasons, this research will hold a relativist ontological position, assuming that our reality and existence is subjective and also dependent on the experience of the observer.

The epistemological position of this research is equally as important as the ontological position. Interpretive epistemology focuses on construing the data from the participant's account to understand to attain knowledge (Crotty, 1998). This holds the assumptions that the researcher and participant along with their social worlds impact one another, creating a reality experienced by both. This view is consistent with my views as a researcher.

Phenomenology, as explained earlier is the study of 'being' and can include two phases stemming from the outlooks of Husserl and Heidegger. Husserl's transcendental phenomenology will provide a unique attitude at looking at the interviews through descriptive deep explorations and methodological reductions. Husserl believed we can identify and suspend all our assumptions that have stemmed from culture, history, and personal experiences, also known as 'bracketing', to reach a universal essence of a given phenomenon (Larkin & Thomson, 2012). Though the structure of Structural Existential Analysis, which is described in **Section 3.5**, is built upon Husserl's views, I believe it is difficult, if not impossible to entirely bracket off our assumptions, but we can and should aim to strive to be reflexive throughout the research process. On the other hand, Heidegger's phenomenology will allow me to understand the experience of becoming a mother by finding universal essences within the stories of these new mothers. Heidegger believed that we always experience things through ourselves and that it is impossible to bracket. This sits well with me as we cannot help ourselves as humans, we are naturally biased and have our unique ideas and thoughts, with some more conscious than others. Reflexivity will try and make me as a researcher aware as much as possible about my biases and feelings about this topic. I am already coming to this research with a level of bias as I am a British Iraqi mother with my own experiences. Thus, I aim to use reduction as suggested by Husserl in this research, being as reflective as possible to reduce the bias and allow emerging data to be as unbiased as possible. The other aspect of the research is hermeneutics, which will focus on the interpretation and the meaning of experience, as well as the development of meaning between the researcher and participant. While women enter motherhood through physical changes and the birth of their babies, the experience and identity of motherhood are created uniquely through each woman's cultural, social and historical context of being. Hermeneutics will add a unique dimension to this researcher to allow a deeper descriptive account for the mother.

3.5 Alternative Methods

After exploring and considering several phenomenological methods for this study, some research methods were considered, namely the Auto-ethnographic method, Heuristics Inquiry and Van Manen's Lived Experience. I have provided a brief overview below of these methods and the reasons why I chose not to pursue them for this study.

3.5.1 Auto-ethnographic method

Auto-ethnography refers to a method that allows the researcher to reflect on their self-experience about their 'own people' (Hayano, 1979). Given the topic of this research is so closely connected with my self-identity as a British-Iraqi mother, it felt necessary to consider the auto-ethnographic method.

The Auto-ethnographic research method incorporates both ethnography and autobiographical writing to our own life experiences when writing and reporting about others (Scott-Hoy, 2002, McLeod, 2011). It aims to suggest a sense of the personal world of both the researchers and participants self and culture combined, providing a way for ethically bound research (Etherington, 2004). It aims to avoid the generation of a theory of fixed themes, rather, the reader is provided with the opportunity to interpret and understand the recorded descriptive experiences provided suggestively. Its anthropological influence inspires the researcher's unique journey alongside that of the participants to bring meaning to phenomena and heighten symbolic systems within their lives (Siddique, 2011). By placing the self within a social context, auto-ethnography allows for a narrative to form and emphasises the exploration of the nature of the unique phenomena. More recently, such research has reduced its focus on numbers in the research and increased its focus on detail and depth of the lived experience.

Auto-ethnography explores the fragmenting effect of dialogue based on identity, as well as the need for us to connect the phenomenon to a larger social and cultural context (Marechal, 2010). This method has the potential to explore and convey the richness of the mother's lived experiences by accessing her social and cultural world. It encourages descriptions of lived experiences with a distinct intertwining of reflexivity throughout the research process (Ellis, Adams & Bochner, 2010).

However, after further exploration of this methodology, I became concerned about becoming over-absorbed in my personal experience and losing sight of the lived experiences that the participants would be sharing. One of the critiques of this methodology is one may lose sight of the participant's experiences due to its suggestive and autobiographical emphasis (Chang, 2008). Though I hold my experiences dear to me, I want to adopt an approach that allows me to appreciate the experiences of other British-Iraqi women, regardless of whether our experiences have commonalities. I thus decided to consider the Heuristic inquiry method instead.

3.5.2 Heuristic Inquiry Method

Moustakas's (1990) heuristic inquiry stems from his autobiographical account of an experience, one of difficulty, decision making and loneliness. The approach to personal experience was reapplied and used in others to better understand their accounts. Moustakas wanted to identify the processes that aid the internal search of researchers in their efforts to explore, collect and interpret data (Hiles, 2002). This method places value on the identification of the research question, one that affects the researcher emotionally and cannot be overlooked and is potentially more significant than finding the 'right' answer (Macy & Rothberg, 1994). Identifying the research question becomes the first contact between the researcher's internal world and the social world that we connect with externally in the heuristic method. Due to the personal nature of this method, great care and sensitivity are required as the question unravels into the researcher's social and external context. Gadamer (1976) reported that the research question should be lived and embodied by the researcher, a principle that Moustakas coincides with.

Once the research question has been formulated, the impulse to seek out the answer should be avoided. Working with an embodied question will allow the analysis and exploration, influencing the quality of the researcher's exploration, a concept that heurism shares with Heidegger (1962). Ultimately, the heuristic method begins from the personal experience of the researcher, who has a desire to better understand the experience. This is a valuable tool to explore subjective human experiences (Sela-Smith, 2002). Once the personal aspect is explored, findings can then be applied to a broader context.

There are six phases in Moustakas's heuristic inquiry. The first phase is 'initial engagement', where the researcher provides an autobiographical account of what has generated the creation of their research. Then is 'immersion', which questions the researcher's ability to remain with the experience. 'Incubation' refers to the researcher retreating from the intense and personal research question to actively participate in events unconnected to the research. 'Illumination' involves awareness and openness by the researcher to accept new knowledge about the phenomena. 'Explication', however, involves a reflection of this awareness. These two stages can only be achieved with great rigour, awareness and self-reflection whilst analysing data. Lastly is 'creative synthesis' refers to the researcher's intuitive powers and submission to the research process unfolding naturally.

However, I decided not to use Moustakas's heuristics inquiry for this research as the window of time where I am aligned with the participants lived experience of being a first-time mother has passed. Thus, I can now only draw upon my memories of the experience rather than experience them in the present. Thus, I felt it necessary to consider a method that is in line with hermeneutic phenomenology.

3.5.3 Van Manen's Lived Experience

My search for a fitting method then led me to consider the phenomenological method developed by van Manen. Van Manen's method seeks to engage closely with a phenomenon through the exploration, rather than conceptualisation of a lived experience.

Phenomenologist Van Manen presented his four existentials' as a heuristic for phenomenological researchers to apply after the research process has been undertaken. The four existentials' demonstrate a fusion of the objective hermeneutic circle and the alethic hermeneutic circle, by acknowledging the experience of a phenomenon overall as well as the role of the research to the phenomenon (Dowling, 2007). His work combines Husserl's descriptive phenomenology and hermeneutic phenomenology (Cohen & Omery, 1994). However, van Manen agreed with Heidegger's view regarding Husserl's view on bracketing, reporting that the attempt to forget what we know already will cause the supposition to continuously return to our reflections (van Manen, 1990). Hermeneutic phenomenology is more of a process of co-creation between the researcher and participant (Gadamer, 1976). Ultimately, phenomenology is the application of language with the phenomenon in question. Branching out from the work of Heidegger, hermeneutic phenomenology is based around the principle that reality is not limited to one truth, but multiple realities can make the truth (Lavery, 2003). The interaction within hermeneutic phenomenology is not only between the researcher and the participant but also between the researcher and the interview transcripts. The transcripts are the key to unlocking the meaning behind the language used, putting verbalised meaning to the phenomenon.

Van Manen refers to pedagogic reflection, where the researcher is encouraged to self-reflect about their interactions with the research. The participants' experience should be considered alongside the researchers. The research should be consistent and sensitive with their reflection to ensure a two-way process within the methodology process. Van Manen's 'existentials' are used to conduct this method, namely: *Spatiality* (lived space), *Corporeality* (lived body), *Temporality* (lived time) and *Relationality* (lived human relation).

Van Manen's process is more flexible than heuristics, with the researcher contributing their views to the phenomena. However, I am looking for an existential exploration of the experience of these mothers, which will allow for a greater depth of analysis. I will explore the experiences shared in relation to Deurzen's four world's framework, paradoxes, and tensions.

3.6 Chosen Method: Structural Existential Analysis and Reflexive Process

After much consideration, an existential-phenomenological method was chosen for this study. Structural Existential Analysis (SEA) is a research method that originates from Husserl's phenomenology that was developed by Deurzen (2014). SEA aims to systematically understand the individual's predicaments, personal worldview and being in the world, and to record this whilst remaining aware of what is being observed rather than just using a subjective assessment. SEA was introduced as an existential-phenomenological method for research after developing and applying several heuristics through clinical therapeutic work (Deurzen, 2014).

Our existences and experiences are multidimensional with complex interconnections. Deurzen (1997) identified five heuristics that can be used to investigate a phenomenon through SEA in research, which I have described briefly below:

1. **The Structure of the World in space:** This heuristic concerns the four dimensions of existence, namely personal, social, physical and spiritual. By using this heuristic model, the researcher can observe the narrative shared by the participant. Where is the participant located within the dimensions and are they using all the layers or are they most consistently in one or two dimensions?
2. **The Structure of Time:** This concerns the dialectic of temporality. With experiencing time we experience change, a movement in space, this is also an important phenomenological phenomenon to track in research. How does the participant relate to their time, are they mostly preoccupied with the past, present or future?
3. **The Structure of Conflict:** This heuristic concerns the tensions and paradoxes present for an individual. Describe and record the tensions and opposites that people live with to understand the experience more fully and sensitively. Positives and negatives relate to one another, to recognise both allows a dialectical consideration in the research observation.
4. **The Structure of Emotion:** This heuristic involves using a compass of emotions to record the state of mind of the participant at all levels, sensations, emotions, thoughts and intuitions.
5. **The Structure of Intentionality:** The fifth heuristic in SEA is concerned with onto-dynamics. It looks at the various negative intentions people experience in each of the four dimensions. It aims to show how full of dread and difficulties human existence is, and how people manoeuvre around this and how they find ways to work that out for themselves.

It is important to remain reflexive during all parts of the research, as the researcher is themselves the form of data collection, analysis and conclusion (Russell & Kelly, 2002). The aim of reflexivity is to increase awareness of research biases and recognise when and how they may influence the analysis of data, thus increasing the rigor of the study (McLeod, 2003). It further requires a recurrent evaluation of our inner processes (Finlay, 2011).

I decided early on to keep a journal as part of my reflexive journal, as well as dedicating counselling sessions at least once a month to my processes around the research process. Choosing SEA as my methodology means a great deal to me as I feel the four dimensions allow a clear depiction of my own experience as a British-Iraqi mother. As a framework, it contained enough flexibility for the personal individuality of each mother's experience to be highlighted. It also allows a benchmark for similarities to be explored through this phenomenon as a shared experience by the mothers in this cohort. By utilising the journal writing, I was able to notice my own processes from my experiences and explore them further in counselling, a tool which I believe increased my awareness of self-bias and helped me as a researcher from the stages of choosing a topic and methodology, to completing the conclusion of the research. The internal world of a mother is affected by the social aspects of receiving support from the family, and I as a mother and researcher was affected by the social support I received throughout this process, though very different to support postpartum, I was being supported as a daughter and wife by those that love me to reach my goals. The way the four dimensions are clearly described separately, whilst still occur as a whole, felt fitting for this piece of research given, particularly when considering a cultural aspect during this life-changing transition in a woman's life, as well as during a researcher's journey towards concluding and presenting their work. Choosing SEA as my methodology in itself carries a certain set of assumptions, one of which is that it is useful to look at the phenomena of motherhood through these existential dimensions. Previous existential research (e.g. Arnold-Baker, 2015, Garland, 2019) have highlighted the importance of the existential perspective, which further drew me to choosing SEA. I have included further details of the reflexivity process during this research in **Section 4.6** and at the end in **Section 8.5**.

4. Method: SEA

4.1 Choice of Heuristics

Due to the constraints of the doctorate, I decided to apply and use two of the above heuristics presented for this research. The first and main heuristic I decided to focus on was *Space*, which encompasses the Four Dimensions of Existence. I decided to frame the semi-structured interview questions around these four worlds to help ensure the participants had an opportunity to explore their experiences within the dimensions. Using this heuristic lens to explore the experiences of new British-Iraqi mothers will provide a theoretical clarity and holistic view of these women's experiences. According to Deurzen (1997), experiences can be understood using the four dimensions in an interlinking and overlapping manner, the dimensions are not separate. Therefore, it is important to address this research in a semi-structured manner, to ensure a thorough insight into this life-changing transition can be explored. I decided to tailor the semi-structured research questions surrounding the Four Dimensions of Existence, to help the participant describe their experience in a deeper way.

A description of the four intertwined dimensions used to explore the structure of the world in *Space* (Deurzen, 2010) can be found in Table 1 below.

Table 1: The Four Dimensions of Existence

Physical (<i>Umwelt</i>)	The human body interacts with the physical environment at all times, through our sensory and motor systems. Our five senses are our access to the world and our functional route.
Social (<i>Mitwelt</i>)	Refers to our interactions with the world of people, involved in contact through cooperation or control. This is regulated by our feelings, with communication as the key passage for feelings. The existence of others in the public world is important to consider with the social dimension. Meaning is created by striving with others for the formation of values.
Personal (<i>Eigenwelt</i>)	Connecting through our 'I' or 'self' to the internal that is constructed from the experiences of the physical and social dimensions. Concerned with finding a sense of stability and selfhood, through the regulation of thinking (both verbal and nonverbal) rather than feelings. Through accessing concepts, schemas and images, we reconnect with notions concerning our personal world.
Spiritual (<i>Überwelt</i>)	Connection through what we may consider the soul, a dimension that seeks out meaning, regulated by intuition. Meaning is found in the spiritual dimension by discovering a sense of purpose.

The second heuristic I decided to use was the *Structure of Conflict* heuristic, to help identify the dilemmas and tensions experienced by the participant concerning motherhood. However, I chose not to directly question the paradoxes present unless it is in the form of a follow-up question from information the participant already provides. Rather, I decided to analyse the data further after identifying the themes present within each of the four dimensions, to see if anything significant arose.

Deurzen (2014) has stated some of the major tensions that people are exposed to in each of the four dimensions, which will be examined as part of this analysis (see **Table 2**). The dimensions are in opposition to one another, what people desire and what they fear, what they want to approach and what they want to escape. Considering the paradoxes helps the researcher realise how the participant's discourse is travelling around the dimensions, what areas are of comfort and what areas are being avoided. Some areas the participant will find easier to describe in words whilst others are more difficult to verbalise.

Table 2: Paradoxes of Human Existence (Deurzen & Adams, 2016, p30).

	Challenge	Face challenge: gain	Avoid challenge: loss
Physical <i>(Umwelt)</i>	Death and pain	Life to the full	Unlived life or constant fear
Social <i>(Mitwelt)</i>	Loneliness and rejection	Understand and be understood	Bulling or being bullied
Personal <i>(Eigenwelt)</i>	Weakness and failure	Strength and stamina	Narcissism or self-destruction
Spiritual <i>(Überwelt)</i>	Meaninglessness and futility	Finding an ethic to live by	Fanaticism or apathy

Reflecting on previous studies that have used SEA, it is clear that one of the strengths of this method is the ability to hold an open attitude to a phenomenon. Arnold-Baker (2015) and Garland's (2019) studies demonstrated the need for a multidimensional approach to understanding a phenomenon such as transitioning to motherhood, to ensure a rich description and understanding of the new mother's experience. Using this existential dimension framework will aid the participant in the explorative journey of their experiences, unfolding any challenges.

4.2 Formulating the Interview Questions

The implementation of a hermeneutic phenomenological approach continued in the development of the interview questions for this study. Active reflexivity during the process of building the research allowed interview questions to be formed, broken down, and reformed. Eventually, the semi-structured questions felt that they were in the most beneficial form to support deep and meaningful data collection.

This was followed by further semi-structured questions to help the participant remain focused on the experiences. I decided to develop and design the interview questions based on the four dimensions of existence, to help explore the experiences of the participant from many angles. By doing this, I hoped to collect a rich description of motherhood as a British-Iraqi from all dimensions to better understand the phenomenon as experienced by the participant. Interview prompts were also used to aid the participant in telling and proceeding further with her story, whilst ensuring she felt heard and understood.

To break the ice with the participants and give them some guidance, the interviews, which lasted between one hour to one hour and a half, began with a brief direction about the aim of the interview.

Hello and thank you for taking the time to talk to me about your experiences of becoming a mother. The interview itself will be more of a conversational exploration, guided by questions to help you explore your experience. I invite you to speak as openly as you feel comfortable, providing as much detail as you can. If for any reason you need to stop or take a break, we can do that.

The interview then commenced with a broad opening question to allow the participant to take the lead of her narrative and experience.

I wonder if you can describe your experience of becoming a mother, particularly in the first 40 days?

This was followed by asking the mother the interview questions that were framed around the Space Heuristic (see **Appendix B**).

4.3 Participants

4.3.1 Sampling Criteria

Defining the sampling criteria is a vital component of qualitative research, with a more distinct and homogenous sample allowing greater research validity. Due to the specificity of the research topic, a purposive sampling method was used to capture the experience of this specific group of mothers and to ensure eligible participants were recruited. Purposive sampling ensures the participants that are recruited have a shared level of knowledge or experience about the phenomenon being explored (Palinkas et al., 2015). All participants were asked a set of demographic questions before organising a suitable interview time (see **Appendix C**). It should be noted the second question (Are both your parents Iraqi?) was only added after the pilot study. Furthermore, in line with hermeneutic interviewing which is supported by the SEA method (Deurzen, 2014), the participant's willingness to be interviewed and partake in exploring their experiences is of high importance to ensure authenticity (Bernard, 2002).

All participants were provided with a Participant Information Sheet (see **Appendix D**). The sheet stated that to participate, the mother needs to identify as a first-generation British-Iraqi, having either been born in Iraq and moved to the UK during their early years, or born in the UK to Iraqi migrant parents. In addition to this, the participant is to be a biological mother of **one** child between the age of 6 and 15 months. This was to allow the new mother space of at least half a year to adapt and adjust to motherhood, whilst still ensuring that the postpartum period is still fresh in her mind. Another criterion was that the mother is married to and living with the father of her child. This is to portray the most common setup for Iraqi families, in addition to the reality that motherhood will impact single mothers differently. Though the inclusion criteria of the participants may sound very defined, this enhances the validity of a research study, whilst still giving scope for the mothers to explore their experiences of motherhood given their similar backgrounds.

This study recruited and interviewed eleven British-Iraqi first-time mothers to share their experiences of becoming mothers. When considering a sample size, it is difficult to indicate a correct answer, rather the focus should be on the quality of the data being collected (Smith, Flowers & Larkin, 2009). The core of the research is on in-depth analysis, understanding and richness rather than accumulating a large number of transcripts.

4.3.2 Ethical Considerations

Before beginning the recruitment process, ethical approval was successfully obtained from NSPC and Middlesex University to ensure this study adheres to the Code of Ethics. Given the recent Covid-19 pandemic, a decision to offer online interviews instead of conducting face to face interviews was made to ensure the research was not drawn to a halt.

Confidentiality: Given that I am exploring the experiences of mothers from the same community as myself, it was important for me to ensure I did not know the participant on any level and had not spoken to her or seen her before the email contact. Before interviewing a participant, they were provided with the 'Participant Information Sheet' to read. This outlined possible risks and benefits, confidentiality procedures, length of the interview, method of data collection, and the participants' right to refuse information or withdraw from the study at any point up until the interview is transcribed. The participant was informed that the interview will be audio-recorded, and all files will be safely stored on an encrypted USB stick. They were also provided with a 'Consent Form' which they needed to sign and return to me before the interview. Furthermore, before starting each interview, the limits of confidentiality were recalled to the participants. I personally transcribed and anonymised the interviews, ensuring the information provided by the mothers was non-identifiable. Furthermore, any names of family members that were mentioned in the interview were replaced to ensure the safety of the participant's identity and to protect the confidentiality of all named parties. Given the nature of the cohort, each participant was informed of the possibility of other mothers within the community recognising her story if they read the research after publication. I reassured the participants' that names will not be included in any forms and any identifiable details will be disguised, with all data stored according to the Data Protection Act (2018) and the Freedom of Information Act (2018). Participants were made aware that they could withdraw their data from the study until the point of analysis in February 2021.

Risk to Researcher: Due to the Covid-19 pandemic that occurred before the data collection of this study began, all previously anticipated risks to the researcher were no longer present. Research interviews took place from the researcher's home office, ensuring a confidential and private space was created for the research.

Risk to Participants: To ensure the participants' emotional welfare was protected during the interviews, all the mothers were reminded before commencing that we could stop at any time if they needed to. I asked the participants to ensure they were in a confidential space for the duration of the interview. Also, I ensured I remained mindful throughout the interviews of the possible vulnerability of the participants due to the nature of the topic being explored. I provided them with enough space to express their experiences and feel understood and supported if needed. At the end of the interview, I provided each participant with a debrief, where we discussed their experience of the interview and I then emailed them the debrief sheet for their records (**see Appendix F**). Information for accessing support from healthcare professions was also provided, as discussing early motherhood could have distressed the participant. The participants' contributions were treated throughout with the utmost respect and sensitivity, as would any material that was explored by a client within counselling, ensuring they were heard and appreciated for their contributions. The mothers interviewed within this study did not need to stop the interview due to

distress, however, some did need to pause briefly to attend to their child. This did not impact the interview process.

4.4 Recruitment and Interview Procedure

I started my search for participants by sending my advertisement to the online pages of Iraqi community centres and mosques. Initially, I had decided to place these adverts in these institutions, but due to the pandemic, recruitment also became entirely online. Additionally, I sent my advert to colleagues who shared it on their social media platforms to increase the number of people it would reach. I also advertised my research on academic forums, both to increase awareness of the research and research potential participants.

Once a potential participant contacted me via email, I sent back an email thanking them for their interest and provided them with more information in the form of the Participant Information Sheet (**see Appendix D**).

I then scheduled a telephone conversation with each participant, during which I made sure they fitted the criteria and asked them some demographic questions. I assigned each participant with a number and pseudonym name to be used from this point forward to ensure her anonymity and confidentiality. After ensuring the participant satisfied the inclusion criteria and we proceeded to organise a date and time for the research interview. I then sent the participant a Consent Form to sign and return before our scheduled interview (**see Appendix E**).

Interviews were conducted through a secure online platform called Zoom and recorded using a digital handheld device. All participants were asked to have the right equipment for the interview, consisting of a camera and microphone attached to a computer/laptop, and a private environment where they can sit comfortably for the duration of the interview. Upon completing the interview, the participants were debriefed and thanked for their participation as well as provided with a Debrief Sheet (**see Appendix F**).

In addition to the practical elements of interviewing, I remained aware of the potential power dynamic between the participants and me as a researcher. Given I am interviewing women who identify from the same cultural community as myself, it came as no surprise that some of the participants wanted to examine if they have seen me previously. I did not know any of the participants and thus could move forward with the interviews, however the questions identified to me that the participants were aware that I too was British-Iraqi. I asked them to kindly assume that I know nothing of their cultural background and potential traditions they may share within the interviews and to rather provide as much detail as they are comfortable in doing so when describing their experiences. I ensured I maintained an open and genuine attitude to listening and understanding the phenomenon these mothers had kindly agreed to share with me.

4.5 Benefits of the Research

The population of adults born to immigrant parents who live in the UK is huge, yet there remains a vague understanding of the influence of cultural background. Though there is immense research on the experience of motherhood, there is little that factors in the effect of culture for first-generation immigrant families. The findings from this study will address whether holding a British-Iraqi identity affects the experiences of first-time mothers during the first 40 days. It will address if the experiences are similar or different to other Arab communities, or if they are more in line with the British culture and response towards motherhood.

These findings can be valuable in bettering our understanding of bicultural communities and motherhood practices and may benefit the way we approach mothers postpartum here in the United Kingdom.

According to Eleftheriadou (2010), the field of cross-cultural psychology has limited research within its field. She identifies that cross-cultural aspects will regularly permeate our lives and act as a critical aspect of therapeutic work. Thus, the findings from this research would be of interest to Counselling Psychologists in general. Furthermore, through understanding other communities, we can improve our abilities as practitioners, both doctors and midwives caring for pregnant women, as well as social workers and professionals within the educational system. This study will fill a gap in the literature, with no current literature exploring the experiences of mothers of Iraqi descent. The findings can help enrich multicultural research and understandings of motherhood and cultural experiences.

4.5 Validity

The validity of a research study is impacted by the way it has been conducted, and thus, the reliability of the findings presented. According to McLeod (1994), phenomenological research can be deemed trustworthy and valid in several ways. These include a clear description of the procedure being implemented to allow transparency for the readers to understand the steps taken to reach the findings. Furthermore, it is important to contextualise the experience being examined to highlight the specific cultural societal context it is created from, as phenomenologically the aim is not to develop a theory on human existence, but a deeper understanding of a phenomenon. The reflexivity of the researcher is an important contributing factor to the validity of a study, which has been discussed in Section 4.6. Though the sample size of phenomenological qualitative research is considerably smaller than that of quantitative research, this does not reduce its validity, rather the researcher must depict the importance of the findings and how it can be applied in other areas (McLeod, 1994).

4.6 Researcher Reflexivity

Qualitative methodologies recognise the influence of the researcher on the research process. The level to which the research contributes to the construction of the meanings surrounding the phenomenon is important and can determine how much emphasis is placed on reflexivity (Willig, 2013). Reflexive practice throughout conducting research is of great importance, to ensure the researcher is aware of their biases and prior assumptions. It is also important to embrace these biases and assumptions as part of the research, as they provide a valuable account of the experience. This will allow a clearer transparent execution of the research in all its stages.

Before interviewing participants, I used a strategy inspired by Bolam, Gleeson and Murphy (2003) to encourage my reflexivity. I asked a colleague to interview me using my interview schedule, the process of which helped me identify more deeply my preconceptions surrounding my dual identity and experience of motherhood. I then asked a close friend if I could interview her, as she fits some of the important criteria of the study (she was British Iraqi, but no longer resides in the UK and her child is above the age criteria). This further helped me ensure how useful my questions were and how best to seek a deep description from the participant. Due to time constraints, I could not transcribe these two practice interviews but listening to them aided my reflexivity and increased my confidence ahead of the pilot interview. Part of this process will include actively using SOAR, which is included as part of SEA as a method (Deurzen, 2015), which is briefly described below:

1. To remain aware and reanalyse how I as a researcher am interfering with the research (***State of Mind***).
2. To remain aware of my worldview, and to not allow this to interfere with the worldview of the participant (***Orientation***). My belief system will not be the same as that of the participant, even if we come from the same cultural background.
3. Thirdly, to be aware of my aptitude and temperament based on my previous experiences, in this case, becoming a mother. I may find myself relating to some of the participant's experiences, however, that does not mean it is relevant to the research (***Attitude***).
4. And lastly, to remain aware of how I begin the interaction with the participant. To become in tune with things that affect me and to filter them out, whilst still acknowledging them to see how they influence me as a researcher (***Reaction***).

Given this topic is close to my heart, it was paramount that I dealt with my reflexivity sufficiently throughout the process. From as early as choosing my research topic, I began keeping a reflexive journal on how the process impacted me, both as a researcher and as a mother. Following each interview, I also wrote about how I experienced the participant, and my reactions to the experience she shared with me. These feelings changed during the process of analysis, where I managed to separate the participant's

experiences more from my own, reducing my researcher bias. However, I am aware this process is ongoing, which is why I readdressed my feelings at every stage of the research.

Writing down my thoughts as they occur is important and allows me as the researcher to notice things I did not recognise clearly (Maxwell, 1996; Woods, 1999). I adopted this idea and ensured the journal was easily accessible to me at all times. I also explored my experience of this research study in personal therapy and used my academic supervision as a place to reflect on my journey. Adopting an active reflexive practice has benefited me in understanding and acknowledging my biases, as well as separating them from the experience of the participant. Finally, reflexive practice increases the validity of research, adding to the clarity of the decisions made throughout and the findings recorded.

5. Implementation of SEA and Data Analysis

This section will describe the details of how SEA was used as a research method in this study. Previous examples of studies that have applied SEA were examined to gain support and inspiration for the implementation of SEA (e.g. Arnold-Baker, 2015; Christophy, 2017; Garland, 2019). Though SEA provides the researcher with an existential structure to consider, it also allows the space for creativity and flexibility in the application of this method. Purposive sampling was used for this qualitative study to accumulate data from eleven British-Iraqi first-time mothers through online semi-structured interviews. Below I have provided the steps I took in conducting the data analysis in line with my understanding of SEA.

5.1 Step One: Considering the layers of Phenomenology in SEA

Several layers of phenomenology can be applied in SEA, including the three reductions (phenomenological, Eidetic and Transcendental); dialogical and hermeneutic interviewing and working with bias (Deurzen, 2014).

5.1.1 The Three Reductions

To ensure the research is approached with minimal predispositions, the biases that are present must be considered, in correspondence to the notion of phenomenological intentionality and bias awareness (Moustakas, 1994). In line with the SEA method, the following three reductions, as suggested by Deurzen (2014), were kept at the forefront during data collection and analysis to enhance the researcher's awareness of bias.

1. **Phenomenological reduction** refers to clarifying the process of consciousnesses (*noesis*). In practice, this consists of epoché, description, horizontalization, equalization and verification (Deurzen, 2015). To be able to epoché successfully, the researcher must eliminate their assumptions surrounding the phenomena. It is of importance that a narrative is sought from the clients rather than an explanation or interpretation whilst remaining aware of the limitations of the researcher's observations. Throughout the narration, it is imperative to initially place equivalent importance on what is being spoken about and to regularly check in with the client that you as the researcher are processing what is being said in the way the client is intending to portray.
2. **Eidetic reduction** refers to the actual objects present in our observations (Deurzen, 2015). This includes five principles: *Noema*, *Abschattungen*, *Wesensschau*, Genetic Constitution, and Universals. *Noema* refers to attending closely to the phenomena in a new vigilant lived-world manner, whilst *Abschattungen* concerns the researcher's awareness of things that we face under different circumstances, being open to viewing things from various perspectives. *Wesensschau* is our search for essences directly to allow us a better understanding of what the phenomenon is rather than how it seems. *Genetic constitution* is keeping in mind that everything is in movement and alters dynamically, as Husserl says, things are never static, thus our experiences of a phenomenon are in

movement. Finally, *Universals* is the researcher seeking to tie together features of the phenomena in an infinite manner.

3. ***Transcendental reduction*** applies to the subject of consciousness (Deurzen, 2015) and includes six principles: Ego Cogito, Transcendental ego, overcome Solipsism, Horizon of intentionality, point zero and Transcendental inter-subjectivity. Ego Cogito refers to focusing on heightening our awareness of our experience through self-conscious observation, whilst the transcendental ego refers to seeking what unites us with the world, a principle of consciousness rather than our perspective that emerges from a personal ego. Overcome Solipsism is the movement towards inter-subjectivity and the horizon of intentionality is accepting our limits to what we can see from the place we are standing. Point zero is the awareness that our vision of the phenomenon will always re-centre itself in our world, while transcendental inter-subjectivity is our attempt to seeking multiple perspectives of others, to re-check the truth actively.

5.1.2 Dialogical and Hermeneutic Interviewing

To ensure we understand the phenomena being described by the individual, we must gain as much depth as possible through dialogue. The process entails searching for a true and better understanding by using words to understand the meaning behind what is being explored. Dialogue has been found to be the best method for understanding an experience in the closest proximity to the truth (Gadamer, 1976). Data is collected and analysed through a hermeneutic interpretation of the dialogue to ensure the meanings expressed were intended to be expressed (Deurzen, 2014).

Practically, after completing each interview on Zoom with a participant, the interview was transcribed from the digital recording. Both the original recording and the transcription were saved on a password encrypted USB. I transcribed the recording and then went over it twice to ensure it was accurate. This was a time-consuming and intensive procedure, however, it allowed me to immerse myself in the participant's experience and was a constructive part of the analysis process. After transcribing the interview, I made notes in my reflexivity journal about how the process impacted me both as a researcher and as a British-Iraqi mother. I repeated this step with each interview.

5.1.3 Awareness of Bias

This is important both before interviewing, during interviews, and after whilst analysing the data collecting from the interviews. Please refer to **Section 4.6**, where I have explored the process of bias in detail.

5.2 Step Two: Detailed line by line analysis

The process of analysis began with a detailed line by line analysis of each interview separately, inspired by the work of van Manen (1984). I printed the first transcript, ensuring it included line numbers. I then went through each line and highlighted emerging themes, identifying which of the four dimensions they fell within (Deurzen, 1997). I then created a table consisting of three columns: line number(s), transcript extract, dimension (**Physical** – **Social** – **Personal** – **Spiritual**). This helped me visualise the dimensions and themes emerging effectively. Once I had completed arranging this, I went through the transcript again, this time through the table, and found I was able to adjust the dimensions more accurately and began including themes. I found that many themes had overlapping dimensions, particularly the **Personal** and the **Social** dimensions. At times it was difficult, but this is somewhat part of the process, as Deurzen (1997) highlights that the dimensions are not fixed as our human existence is more complex than containing it rigidly in groups. Rather, the dimensions are a framework that help us understand a person's existence in a holistic way rather than trying to 'force' experience into categories. Below is an example of this table which highlights how I completed the process. The themes changed and became clearer the more I examined the transcript.

Table 1: Example of how Step 2 of the analysis was conducted

Line	Extract	4 Worlds	Theme
66-68	everyone would tell me like, sleep when she sleeps to catch up on rest, but I couldn't. When she was asleep, I was either just anxious and nervous or too stressed to sleep or I was just staring at her feeling so lucky and thankful and happy.	Physical Personal	Bodily Gratitude
186-187	there was a constant stream of visitors bringing gifts and food and it was lovely it was, it was such a special time.	Social	Receiving Support

5.3 Step Three: Identifying emerging subthemes within the 4 Dimensions

I repeated Step Two for the remaining ten transcripts and created a new document for each Dimension and Theme. I grouped together the extracts from all eleven participants together based on the dimension and theme and was able to rename the themes in a more fitting manner to represent the mothers interviewed in the study.

I divided and grouped the lines within each dimension together and worked through them. In doing this, the subthemes present for the participants became clearer and more focused. Several subthemes were found emerging from each dimension. This resulted in the transcript being divided into four. I made another table identifying the major themes and the subthemes within each of the dimensions. An additional column was added for this process. And as with the previous step, the themes and subthemes changes and became clearer the more I examined the transcripts.

Table 2: Example of how Step 3 of the analysis was conducted

Line	Extract	4 Worlds	Theme	Subtheme
66-68	everyone would tell me like, sleep when she sleeps to catch up on rest, but I couldn't. When she was asleep, I was either just anxious and nervous or too stressed to sleep or I was just staring at her feeling so lucky and thankful and happy.	Physical Social	Bodily Gratitude	Sleep
186-187	there was a constant stream of visitors bringing gifts and food and it was lovely it was, it was such a special time.	Social	Receiving Support	Presence of Visitors/Friends

5.4 Step Four: Identifying the paradoxes and awareness of Emotions

During the analysis process, I noticed some tensions and conflicts for each participant. I made notes along the way to help with the identification of paradoxes present. By using both the table of analysis I had created in Step 4 as well as the table in Step 5, I wrote down which paradoxes were present within each of the dimensions.

In addition to this, throughout the analysis, I remained aware of the emotions that the mother was experiencing. Though I did not apply this heuristic as a model and diagram due to time and word limit constraints, I drew on my awareness and knowledge of existential philosophies on emotions to better understand the mothers' experiences.

5.5 Step Five: Presenting the Findings

Using the different tables and colour coded documents to analyse the data collected from the interviews, I then presented the themes and subthemes that emerged from each of the four dimensions. Due to the volume of the data, I ensured I remained focused on the research question and aims and began choosing the relevant extracts from each theme to use as part of my findings. The longer I immersed myself within the process of analysis the deeper and clearer my understanding of the experience these women encountered during early motherhood.

In Section 6, the findings can be found where I present each of the four dimensions separately before presenting the paradoxes and tensions that emerged from this study.

6. Findings

6.1 Introduction

This research aimed to investigate the experiences of eleven British-Iraqi first-time mothers during the first 40 days of motherhood and to explore these experiences from the perspectives of the Four Worlds of Existence (Deurzen, 1997). By using an existential-phenomenological method to analyse the data as described in section 5, several themes were uncovered within each of the Four Dimensions of Existence, each with a few sub-themes. I have attempted to encompass the participants' experiences within these themes to portray their unique experiences and found numerous common themes from the narratives of each of the eleven mothers'. Many of the themes were overlapping, particularly those between the Physical and Personal Dimensions, with numerous interconnections. I chose to categorise them using the framework of the Four Dimensions of Existence as I felt a deep connection with this framework when exploring my own mothering experience through personal therapy and the duration of this doctorate program. I then will present the common paradoxes and tensions that arose from the analysis, further depicting the interconnectivity between the subthemes and these mothers' experiences. Lastly, I will present the paradoxes and tensions that emerged from the data set.

6.2 Demographic Data

Some demographic data (**see Table 3**) was obtained from the mothers as part of the initial screening before the interview, to ensure the participants came from a fairly homogenous population. All the women identified as British-Iraqis, married, and living with the father of their baby. Each participant was given a pseudonym to protect her anonymity. The children's ages ranged from 6 months to a maximum of 15 months. In addition to the information collected before the interview, the mothers all disclosed within the interviews what kind of birth they experienced (natural or caesarean), their religion and what level of family support they experienced. I have divided the family support they received postpartum into the following categories:

- a) Moved into her parents' home to receive support (for 10 days postpartum or less)
- b) Moved into her parents' home to receive support (for more than 10 days postpartum)
- c) Own mother moved in with new parents to provide support (for 10 days postpartum or less)
- d) Own mother moved in with new parents to provide support (for more than 10 days postpartum)
- e) Mother/mother-in-law/sisters visiting to provide support
- f) Other
- g) Support Impacted by Covid Pandemic

Table 3: Demographic information about the mothers interviewed

Mother's Code and Pseudonym	Age at time of Interview	Child's Age and Sex	Years married	Type of Birth Experienced	Family Support Available	Religion
M1 Yasmin	30	12 months Female	Nine	Vaginal birth without intervention	E	Muslim
M2 Amal	26	15 months Male	Three	Vaginal birth with intervention	B	Muslim
M3 Ahlam	27	14 months Female	Two	Vaginal birth without intervention	B	Muslim
M4 Shayma	25	13 months Male	Four	Vaginal birth without intervention	C	Muslim
M5 Zuhur*	35	7 months Female	Two	Caesarean	D & G	Christian
M6 Hanna	30	12 months Female	Three	Vaginal birth with intervention	E / F	Muslim
M7 Maha	27	12 months Female	Four	Vaginal birth without intervention	B	Muslim
M8 Madina*	28	8 months Male	Three	Caesarean	G	Muslim
M9 Rahma	33	12 months Male	Eight	Vaginal birth without intervention	D	Muslim
M10 Bayda*	25	6 months Male	Two	Vaginal birth without intervention	G	Muslim
M11 Dua	28	12 months Female	Four	Vaginal birth with intervention	D & E	Muslim

**These participants experiences were impacted by the pandemic and lockdown.*

6.3 Themes

A total of ten themes were uncovered across the Four Dimensions Framework, through a process of existential-phenomenological analysis from the eleven interviews undertaken. Three heuristics were used as part of the SEA methodology: Four Dimensions of Existence, Paradoxes, and the Emotional Compass. The themes encapsulate the mothers' narrative of becoming new mothers and being British-Iraqi, demonstrating the complexity of their bi-cultural identities and new identities as mothers. Each theme and subtheme will be discussed in turn with the support of verbatim material from the mothers themselves. In Table 4 below, details of the themes, subthemes and in which narratives they were found can be found.

Table 4: Themes found within the narratives

	Main Themes	Subthemes
Physical Dimensions	The physical experience of becoming a mother	Trauma of birth
		Post-Birth Impact
		Body image and expectations
		Sleep Exhaustion*
	The choice to breastfeed	Motivation and determination
		Initial difficulties of feeding
Maternal-Infant bond		
Social Dimension	The experience of support	Role of Family
		The importance of friends/visitors
		Receiving advice
		Midwives
	The impact of culture	Providing support
		Expectations of 40 days
		Making own choices
	The importance of 'mama'	Endless support
		Practical care
	Personal Dimension	Emotional response
Overwhelming		
Paradox of love		
Sleep exhaustion*		
Thrownness of motherhood		Life before
		Shift in independence
		Unexpected reality
Interwoven identities		Blend of cultures
		Religious identity
	Being a mother	
Spiritual Dimension	Religious and cultural beliefs	Submission to God
		Passing down traditions
		Meaning of motherhood
	Establishing values	Importance of family
		New generational values

**The subtheme 'sleep exhaustion' was identified in two dimensions.*

6.4 Physical Dimension

Though motherhood as a concept can be experienced emotionally and spiritually for many women, there is clarity in the physical aspect associated with motherhood. A woman will experience motherhood before experiencing the moment of holding her child in her arms, through the embodied changes and emotional shifts through pregnancy and birth. The women interviewed for this study spoke mainly of the physical experiences they faced after labour, much of which they felt was unexpected. They also spoke at great length of their experiences of breastfeeding, all of whom did breastfeed their children. Below is a table showing the two main themes within the physical dimension and the subthemes.

Table 5: Themes and subthemes within the Physical Dimension

Main Themes	Subthemes	Paradoxes (P) and Tensions (T)
The Physical experience of Becoming a mother	<ul style="list-style-type: none"> ○ Trauma of birth ○ Post-Birth Impact ○ Body image and expectations ○ Sleep Exhaustion* 	Euphoria/Exhaustion (P)
The choice to breastfeed	<ul style="list-style-type: none"> ○ Motivation and determination ○ Initial difficulties of feeding ○ Maternal-Infant bond 	Relentlessness/Struggle (T)

6.4.1 Theme One: The physical experience of becoming a mother

Shayma: for the first two weeks I couldn't walk really well, I couldn't sit, I couldn't sleep, I couldn't do much. (78-81)

Women begin the physical changes of motherhood during pregnancy, experiencing a change to their bodies as well as an emotional reaction to the changes occurring. This theme reflects the most accentuated responses from the mothers to their physical experience of motherhood, a sense that their lives became more immediate and focused on the moment. The physical experience is the most noticeable one for the mother and those around her.

Subtheme One – Trauma of Birth: There was a deep desire across the narratives of the women about wanting to have natural births, a desire to avoid any medical inductions or caesareans. However, the reality that women lose a level of control over the experience of birth meant that medical intervention is sometimes required. This loss of control of how these women had envisioned their births to have caused them to experience a level of trauma. In many cases, the loss of control that some women have over their

bodies before and during childbirth can be transferred into an emotional and mental strain for the new mothers. There is a shared view of how traumatising the loss of control is for the women in this study.

Amal: my birth wasn't that easy, like towards the end, like the baby stop moving before I was giving birth so they induced me in, so just the fact going through induction and not natural birth that was you know, a lot... (82-98)

It was very important for Amal to experience birth without interventions and experiencing an induction with her firstborn has left her fearful of future pregnancies. She felt that she had no control or power to decide how she could give birth, and this left her with emotional unease.

Hanna: Her movements has reduced so they decided to keep me in hospital to keep an eye on that as well keep an eye on my baby, and yeah so they induced me. So yeah, that was a bit of a traumatising experience. (13-19)

In another instance, Hanna spoke of how she was fearful of having a c-section and turned to God to get her through natural labour. She unfortunately went through the fear of loss, watching her child's heart rate reducing which led to Hanna being induced. Physically, birthing her child became a traumatic experience for Hanna.

Madina: I had a deceleration of my baby's heartrate and then it was it just went downhill from there. Yeah, I was induced, but it was quite fast, but I was induced, and the end result was that I had a very traumatic childbirth. (151-160)

Similarly, Madina experienced a reduced foetal heart rate which led to her being induced, she too described her experience as being 'traumatic'. Madina's tone during the interview was one of shock, she had not expected her birth to unfold as it did, and it left her entering motherhood with an increased doubt about things she previously had thought she could control. The speed at which things had turned for Madina had left her unable to process the experience at the time.

Subtheme Two – Post-birth impact on the body: Some of the women interviewed for this research expressed that they had attended pregnancy classes and were shocked at just how little was spoken about what happens after birth. Though they shared their close relationships with their own mothers and sisters, it seems that the postpartum difficulties were often not shared, with the majority of comments being around the spiritual importance of the role of mothers. The impact of the birth, the bleeding and the physical pain prevented these women from feeling they could look after their newborns alone. Hanna spoke in anger that people do not talk about this – that the events that happen to some women's bodies

do not end at birth. It was almost as if the post-birth impact on the mother's body was a taboo subject that could not be discussed, especially as the impact happened on such a private level and may not be physically noticeable to others.

Hanna: I didn't realise how much women go through after actually giving birth. Nobody talks about it. After labour I saw how my body changed physically and even mentally it was really draining. Physically, a month later after birth, this is a bit detailed but our bodies go through a lot, so I experienced bleeding – and I was like I didn't sign up for this, nobody told me you go through this, people don't talk about this. (310-319)

Amal shared her bodily experiences postpartum and there was a sense of her carrying a level of shame and shock around it. The unexpected reality of the difficulties and pain postpartum was one these women had not anticipated. Her experiences again were felt in a very private lens – in the bathroom – and because no one could witness her tears, it was difficult to share her grief surrounding this loss of control with others.

Amal: just simple things like opening your bowels that was such a challenge, I used to sit like an hour on the toilet just crying because I couldn't open my bowels, it was so painful. (82-98)

There was a limitation to these new mothers' physical ability to continue their lives, though now with the added responsibility of caring for a newborn. This sense of losing control of what previously was a normal daily bodily function now became a source of pain parallel to the new mother navigating all the other emotions that came with motherhood.

Ahlam: I had a midwife check me and she said things were fine with the stitches but of course I didn't feel fine as I couldn't move as freely as I could before. (267-282)

Ahlam shared that though her midwife had cleared her stitches to have been 'healing well', she did not feel this. The basic response of moving 'freely' was taken away from her temporarily. An added dimension for her to face amidst this life transition. The medical sense of 'healing' did not equate to Ahlam's feeling that she had internally and mentally healed, particularly since she had not anticipated needing to heal in this way.

Hanna: Oh and the cramps you know when your body's trying to go back to its normal place, well your womb. Like contractions after giving birth, when your body is trying to go back to how it was, yeah that was painful. I didn't know that would happen after birth. (105-111)

Hanna again expresses her oblivious attitude towards motherhood in a tone of anger and frustration towards those who had already experienced motherhood, as well as the professionals. There was a sense that had the difficulties, both physical and emotional, of motherhood, been shared and spoken about, Hanna would have felt better equipped to accept her experiences. Hanna desired control and autonomy over her body again after the experience of birthing her child, it was somewhat confusing and distressing for her to be experiencing contractions afterwards.

Subtheme Three – Body Image and Expectations: The reality of motherhood entails a huge physical change in a woman's body, shifting from the revealing of a baby bump to carrying a visible bump through mid-pregnancy to struggling to walk for long distances at the end of pregnancy due to potentially the weight or simply the need for regular toilet breaks. With the new age of social media, coming to terms with body image becomes increasingly hard to swallow for many new mothers. Regardless of what body type a woman had before she became pregnant, pregnancy no doubt causes a shift in the woman's image.

Amal: physically before you give birth, you feel like you're unbreakable. And then when you give birth, everything changes. All of a sudden, you know, you didn't have that belly, you were flat, and now we have this belly, every time I eat now I'm like nine months pregnant again (laughs) and you just become so much more humble. (239-243)

Amal speaks of how she felt before giving birth, an inner strength and belief that her body was unbreakable, a sense of endurance and perseverance. Though after the birth of her child, she began to struggle with her body image, and though during the interview Amal regularly referred back to her faith and an acceptance that her body is still strong, it was clear that she has lost the image of herself before pregnancy, an image that she liked and wanted to hold on to without letting go of her new role as a loving mother. She also lessened her expectations of how her body should look and behave for her, humbling herself and attempting to love this new version of herself.

Ahlam: I changed physically of course, like when I see myself in the mirror I feel like yeah I am a mother (laughs). I look like a mother. (laughs) (347-348)

However, Ahlam spoke about her body image differently and struggled with being very slim during pregnancy that she would regularly faint. The change for Ahlam first came mentally, where she began visualising herself as a mother, though she found that physically she remained similar to how she recalled herself before birthing her baby. She began seeing herself as a mother, an image that shifted from previously where she saw herself as a newly-wed woman in her prime physically and mentally. Ahlam spoke of this with pride and acceptance; however, it is important to note that she did not struggle with

her physical body returning to what it was before carrying her baby. On the outside, she looked the same, she did however feel differently.

Zuhur: I was very skinny and then like I've put on a lot of weight. I don't like my body now, but I used to before. And having stretch marks, I got a lot during pregnancy, I struggled with this, it's not a good change for me. I didn't like how my body was changing, not just after the birth but even during pregnancy. (100-107)

Zuhur shared her struggles with body image. It took a great deal of courage for the mother to express her feelings and share her vulnerabilities, particularly since this is something she is still struggling with. It was clear that Zuhur had not expected to experience these difficulties, particularly months after. She shared that she is also struggling to like her body during pregnancy and felt constantly tired from carrying the extra weight of her baby for what at the time felt like an eternity, yet later felt like a short few months. It was the physical reminders in the form of stretch marks that made Zuhur unsatisfied with herself as she had somewhat failed. She was struggling to accept the impact of pregnancy and labour.

Madina: I had an emergency c-section. So basically, I had the operation scar. At first, I'm not going to lie to you, I was scared looking at it, so I wouldn't want to see it or look in the mirror. (63-76)

Madina experienced a caesarean and though she shared her acceptance of not having her 'ideal' birth unfolding, she did struggle to face her scar postpartum. For several months she avoided looking at the impact enduring a caesarean had on her physical body in the hope that it simply would not be there. It was Madina's avoidance of accepting her physical scar that made the changes she was experiencing harder to accept, ultimately, she was struggling to accept her new postpartum body.

Rahma: it's a huge physical change, I mean, you give birth and you still look like you're pregnant, particularly in the beginning. I think I...I don't know if I just didn't read into stuff like that enough or that it just never occurred to me that this is how you're going to look like. I was like quite surprised, I thought there'll be more shrinkage in my belly than that. (130-138)

Rahma felt that her pregnant self was similar to her postpartum self. It was difficult for her to come to terms with this as she had not had the expectations from those around her nor from the books she had read about the bodily changes, or not, in her case, that can occur after giving birth. She added her sense of disappointment in how her belly did not shrink back as much as she wanted.

Subtheme Four – Sleep Exhaustion: With the experience of motherhood came a level of exhaustion for all the women interviewed. They attributed this emotional exhaustion to be mainly triggered by the

sheer tiredness from the lack of sleep that was experienced. Emotional exhaustion for the new mothers in this study refers to the women feeling overwhelmed, in physical pain, and feeling that they not be the new mother they thought they would be. The lack of physical sleep and rest the new mothers were getting hugely impacted the emotional exhaustion they experienced. Physically losing out on something that they had not needed to seek out and was once a privilege.

Amal: There's no sleep. But then when it actually happens, you're like, oh, my god, there's actually no sleep, like, you're awake the whole night through. (17-19)

Though many had told the new mothers to catch up on sleep when their newborn's slept and try and rest as much as possible before they experienced birth, the reality for Amal and others was that being awake the whole night remained unexpected. And losing out on sleep, made coping with the new ordeals of motherhood more difficult. Amal felt that she had to remain awake the whole night and rarely experienced emotional rest because of this.

Maha: So the lack of sleep, I think, I think that was probably the biggest issue in the first 40 days not being able to sleep at night properly. And like I said, because I had to hold my baby upright for so long, so that meant during the night I literally was up the whole time. (140-143)

Maha shared her difficulties around no sleep and needing to hold her baby even after feeds so she would not throw up, and by the time she could put her down, she would need changing or feeding again. A cycle that in those moments felt never-ending for this new mother.

Madina: Like the sleepless nights with my son, it was tiring. Something that I needed to adjust to, not having that much sleep and trying to maintain a whole day's work, like my normal day-to-day activities, without any sleep. So it was in the first couple of weeks was exhausting, whilst my body physically got used to lack of sleep. (63-76)

Sleep should not be undervalued, the importance for anyone, particularly a new mother who is adjusting to her role and responsibilities. As we can see from the experiences of Madina and Zuhur, the struggle they experienced in feeding their babies and continuing through their days became extremely difficult because of the sleep exhaustion they experienced. The babies were waking up hungry at unpredictable times, which can be difficult for a tired mother. particularly during the early months, breastfed new-borns often feed slowly, adding to the time needed for feeding and increasing the exhaustion experienced by the mother. The physical loss of sleep impacted how they experienced this important time, a time where they found themselves thrown into a new responsibility, a newfound love, and a newfound routine. The lack

of sleep also impacted Zuhur's ability to connect with her newborn in the way she described, as well as the endless struggle of staying awake to breastfeeding while being exhausted beyond measure.

Zuhur: And I was trying to feed her but I was nodding off, falling asleep while I was feeding her and my husband would wake me up and make sure I was careful but I was so exhausted. (36-42)

Zuhur: and I was trying to feed her but I was nodding off, falling asleep while I was feeding her and my husband would wake me up and make sure I was careful but I was so exhausted. (36-42)

The physical experience for the mothers in this study was a pivotal phenomenon in relation to transitioning into first time motherhood. The women did not anticipate such an extensive struggle and shock to their physical beings during this period.

6.4.2 Theme Two: The choice to Breastfeed

Hanna: I mean the media and everyone makes it out to be so beautiful, and don't get me wrong, it is, after being not so sore anymore. But at the beginning it isn't very pleasant, but the media and everyone talk only about how great an experience breastfeeding is rather than the difficulties of it. (325-328)

All the new mothers that were interviewed expressed a strong desire and determination to breastfeed their babies. This seemed to be influenced by several factors, particularly their religion and the importance placed on breastfeeding in the Holy Quran, as well as their scientific knowledge of the benefits of breastfeeding. However, they also experienced a shock at the difficulties that came along with breastfeeding and felt that it is not spoken about sufficiently. The decision to continue breastfeeding albeit with the difficulties for these women seemed important and meaningful and led to most of the mothers enjoying the emotional bond that was triggered by the physicality of breastfeeding.

Subtheme 1: Motivation and determination: Hanna revealed how she was not able to enjoy breastfeeding due to the soreness. She was disappointed that in retrospect she only heard about breastfeeding through a biased and one-sided coin that did not share the struggles and pain that come with the connection and joy. Though she struggles, she remained determined to keep moving through her breastfeeding journey.

Yasmin expressed throughout the interview that she was adamant to breastfeed her newborn child, and to support her decision to do so, she ensured she did not prepare for any alternatives. However, this

motivation did not mean Yasmin did not struggle with breastfeeding, particularly in the initial few weeks. This triggered emotions such as feeling overwhelmed and seeking help from midwives. However, on a physical level, Yasmin was certain she wanted to commit to breastfeeding her baby.

Yasmin: I was really motivated to breastfeed, so I think that I was just like, whatever it takes, this needs to work. And almost, I hadn't bought a pump machine, I hadn't bought any formula, I just...maybe it was naïve, but I had not prepared for any alternatives. (190-193)

This determination was expressed throughout most of the interviews, with the mothers voicing that they did not want to give up amidst the difficulties, the motivation they held overrode the stresses that came with this newfound commitment these women had accepted. Shayma explained that she was adamant about ensuring her breastfeeding journey was successful despite its difficulty. She was motivated and driven by the belief that it was beneficial for her baby, at the cost of her physical pain. Over time, Shayma became accustomed and adapted to the pain, again, like the other mothers, determined to make it work.

Shayma: I was very determined, I didn't want to give it up. Just because I knew how difficult it is and how good it is for my baby. I didn't want to give up on the decision of breastfeeding because it was painful. I mean, I knew that I would get better. So yeah, I was, I was happy to go through the pain, just, you know, get on with it. (110-113)

Hanna shared that she did not enjoy breastfeeding in the first couple of months, but her determination and belief that this is what she wanted to do, what she believed was best for her child, helped her continue through. Thankfully she began to enjoy the process once she and her child found a rhythm that worked, opening up the door for meaningful connections and memories.

Hanna: But the first month, month and a half, I did not look forward to it, I was very reluctant. But I just kept going. (122-134)

The women interviewed were clear in defining the choice that they held surrounding breastfeeding, supported by the advocacy for breastfeeding by their healthcare professionals and up-to-date research. However, Rahma shared that she felt naïve, holding a preconception that breastfeeding is spoken of positively within western society, and also within her own Iraqi, and Muslim communities. She had expected it to be easy to cope with, a natural ability for mothers to encounter without too many difficulties. Nevertheless, this mother continued breastfeeding her child, holding her beliefs and determination close through the difficulties and eventually began to also enjoy the process.

Rahma: it was definitely a choice to breastfeed. And in the beginning, the latching was really difficult...again, maybe I didn't read, and I was a bit naïve, and I just thought it would just be quite natural erm but it wasn't. (165-168)

Subtheme 2 - Initial Difficulties of feeding: Though the mothers all expressed a strong determination and desire to breastfeed their newborns, it was not without initial hurdles of difficulties surrounding this. It is important to remember that all the mothers in this study came from families where their religions and culture influenced their family values, including the importance of breastfeeding. Though the mothers were not asked about whether they themselves were breastfed, it was clear that they all held the practice of breastfeeding in high regard. The physical pain of breastfeeding was described by Hanna, in addition to a fear that her baby was not feeding enough. This led Hanna to a level of self-doubt, dealing with these emotions and a level of guilt whilst persevering through the physical pains of feeding. The confusion and new and foreign experience made Hanna feel unequipped for the role of breastfeeding within her new identity as a mother. It was so unanticipated that it made it harder for Hanna to work through the first few months.

Hanna: And breastfeeding. Oh god yes I struggled with that. For the first month or two it was painful and I was worried my baby wasn't getting enough milk, I was worried I wasn't doing it right. I didn't know if she was latching properly. Yeah, it was very, very painful at the same time. (111-120)

There was a sense that the new mothers did not expect breastfeeding to be difficult to establish and finding themselves in pain came as a shock. It felt that had they been more aware of all aspects of breastfeeding, these women may have experienced the initial, and sometimes long-term struggles of breastfeeding differently.

Shayma: I actually didn't realise how painful breastfeeding was until I started breastfeeding. And then yeah, it was very difficult experience for me breastfeeding. (87-90)

Shayma was both breastfeeding as well as pumping in the first few weeks, a somewhat double commitment, hoping to overcome the difficulties she was facing. There was a strong belief that she did not want to give her baby formula, stemming from fear and guilt of failing at a task that she felt would be straightforward pre-partum. However, as with the other new mothers, Shayma persevered through and eventually, the initial difficulties eased, and the experience of breastfeeding began becoming more pleasant.

Shayma: I started breastfeeding, and then I try to pump as well, but it was, they were both difficult, but I didn't want to give him formula. So I just wanted to keep, you know, breastfeeding as much as I could. And yeah, I think after two weeks, the pain decreased, and I kind of got the hang of it. So yeah, it was, it was better. (90-93)

Yasmin felt overwhelmed by the difficulties of breastfeeding and expressed a fear of not being able to feed her child to the community midwife. When support arrived, Yasmin found herself bursting into tears in the midwife's arms. Yasmin found solace in the midwife at a time when she experienced great vulnerability. However, the midwife is also a stranger, someone who does not know Yasmin and her independent nature that struggles to request help. This probably made it easier for Yasmin to express her exhaustion and vulnerability at that moment. Yasmin found it easier to speak to her midwife at that moment, possibly due to a worry about placing herself in a position of increased vulnerability with those closest to her. This placed Yasmin in a paradoxical element, where though she could access support that was being offered by family, she was reluctant at times to avoid feeling vulnerable.

Yasmin: I was finding it very difficult to establish breastfeeding...erm I had them coming in to help across two days, erm, and getting in touch with the midwife team and whether it was arranging visits or, or whatever it took I think that sort of vulnerability pushed me to get the help that I needed, where I knew I needed it where I may have not done that otherwise. (55-59)

Subtheme 3 - Maternal-Infant Bond through breastfeeding: The mothers spoke of a deep and meaningful bond that came from breastfeeding their babies, both from the time spent alone with them and the physical contact that they gained from breastfeeding. Listening to their narratives allowed me insight into how this was a driving force for these women to continue, alongside the struggles of breastfeeding, as the benefits and bond were greater. Amal explained that she felt a sense of closeness that could not be felt except for mothers, and she very much enjoyed this feeling, expressing pride in it.

Amal: every time that he was breastfeeding, I just felt so close, like, it was a feeling that I don't think anyone could feel unless you're actually the mother. It was amazing. Yeah. I love it. (129-130)

The physical closeness of a newborn with a mother was one that Amal held close to, enjoyed and valued. A feeling that no one else could feel or understand but was meaningful for her journey into motherhood. It also added intimacy through skin to skin, which made the bonding process more meaningful for Amal.

Amal: it felt like the feeling when he was inside me and no one could feel that. So it was something special that I only could feel, however I would describe it, it's not going to be like as when you're experiencing it, just how close he was to me and just looking down at him when

I'm breastfeeding him, you know, just having his mouth so close to me... That was amazing.
(132-136)

Ahlam shares the difference in the maternal bond between breastfeeding a newborn and an older baby. The joy in her voice when sharing her experience was clear and directed towards one of commitment stemming from her undeniable love for her child and the physical contact they share in the moments when she feeds her. The physical contact from breastfeeding made way for an intimate closeness that enhanced her emotional connection with her baby. As her baby grew, Ahlam was able to experience new, unique and private moments with her newborn.

Ahlam: I feel like it's a great bond when I'm breastfeeding her, so it is different now to when she was younger. Like now she's more active when she breastfeeds, she jumps in and out of feeding and expects my breasts to be out for her always (laughs) it's different but I still enjoy it.
(421-424)

Following the initial difficulties, Zuhur experienced breastfeeding to be not only positive but a source of comfort for her. The physical attachment between a mother's breast and her young baby's delicate mouth, a sense of nurturing and connecting her baby. In these moments the newborn is submitting to the basic human need of being fed and needing food, whilst receiving physical comfort and safety from her mother's arms. Not only was the baby feeling secure being close to her mother's chest, but it also provided security and comfort for Zuhur who expressed this positively impacted her.

Zuhur: But for me that was the most positive feeling, it's almost comforting feeling to have the baby attached to you and you're feeding them, and you feel like you're giving them the best of you, you're giving them all your antibodies and all the good things. And I think breastfeeding makes babies feel secure as well, like when you're when you're hugging them and breastfeeding them. (128-137)

Maha shared that she appreciated the physicality of needing to stop what you're doing in the day, pause to feed your baby and connect with them in such an intimate and loving way. The idea of being able to pause the day, no matter how hectic it was, to ground herself and bond with her newborn were comforting for Maha.

Maha: she was good with the breastfeeding and I absolutely loved the experience absolutely love the idea of you know, stop doing everything and just sit down to breastfeed her. (163-175)

Breastfeeding was something all the mothers in the study expressed a desire to do and continue with their newborns. And indeed, through the struggles, the mothers all breastfed their newborns. Their experience

of motherhood was impacted by breastfeeding in that they had expected it to be smooth running and somewhat easy. Their realities were different to their expectations prior to the arrival of their newborns.

6.5 Social Dimension

A woman's social world shifts when entering motherhood, no different to every other aspect of her world shift and adjusting to make space for the new addition to her life. Her relationship with other mothers may begin to form, as well as her relationship with her own family taking on a new shape. In addition to the already formed relationships changing, a mother begins to form a relationship with her newborn. The women interviewed in this study spoke heavily about the importance of their family in their experience of motherhood, which was one of acceptance and support. The impact of culture on these women, identifying as British-Iraqi was fascinating, shining light on a unique experience of support, an intertwined structure built on family, love, and expectations.

Table 6: Themes and subthemes within the Social Dimension

Main Themes	Subthemes	Paradoxes (P) and Tensions (T)
The experience of Support	Role of Family	Difficulty Accepting Support/ Appreciation for support (P)
	The importance of friends/visitors	
	Receiving advice	
	Midwives	
The impact of culture	The 40 days and its traditions	Own values/cultural values (P)
	Embracing the practical support	
	Making own choices	
The importance of 'Mama'	The provider	Own values/cultural values (P)
	Mother-daughter relationship	
	Renewed appreciation	

6.5.1 Theme Three: The experience of support

Yasmin: it was very clear that the support from my family and my husband's family as well was, was going to get us through and it did in the end. It carried us through. (153-154)

The importance of support for a new mother does not come to a surprise, as she requires to adjust to her newfound role, the emotional and practical support she receives from her partner, family and friends has been found to positively impact a new mother's mental wellbeing. However, the women interviewed in this study spoke of receiving a unique type of support from their loved ones. They described the impact of support, particularly from family members on their experience of early motherhood. There was a strong theme across all the mothers of being looked after by family, both in the form of physical and practical support, as well as emotional support. The mothers described how the mental load of

motherhood became lighter because there were surrounded by their families at a delicate time where they transitioned from womanhood to motherhood. The nuclear support described by the new mothers heavily weighed on their experiences and was reflective of the role of familial support within the Iraqi culture.

Subtheme One – Role of family: Family was a strong theme throughout all the interviews, particularly when describing the role, the families played in the care for the new mother postpartum. Most of the women interviewed for this study went from the hospital to their parent's home to recover and be looked after, or alternatively, their mothers came to stay with them. Amal shared the importance of her mother's presence with her after giving birth to her child. The support was not limited for Amal to her mother either, as she was left feeling a sense of comfort and safety knowing that other members of the family stepped in to support her when required. The role of family was given importance for all the women in this study, with their respective families not needing to be called upon for help. There was an unspoken of expectation that they would be present. This helped the new mothers as it was difficult to admit their physical experience of motherhood compounded a sense of vulnerability during their postpartum period.

Amal: staying with my mother after birth made things a lot easier, having that social circle to support you, rather than being sort of alone and having to deal with that. Just knowing that if my mother is unavailable then there's my sister that will come and help. (312-317)

In recent years, mothers have been found to raise their voices further to advocate that some of the basic human needs such as showering should not be referred to as self-care, but rather a necessity. Shayma shared how having the support of her family in becoming a mother herself made the simple necessary tasks for her easier to complete. She felt held and supported with her family's company, looking after her baby so that she could attend to other things. Without her family's input and support, Shayma felt she would have struggled to meet her basic human needs, like showering and making food for herself.

Shayma: I was able to have a shower, I was able to make food, I was able to just have a nap, or anything, you know just those little things that you just can't do by yourself when you've just given birth. Erm, I was able to do a lot of those things with everyone else helping me, looking after my baby, or making food for me or cleaning the house for me, things like that, so, it was good. (37-41)

Hanna shared a sense of feeling overwhelmed with adjusting to her new life as a mother, caring for a newborn. The role and support of her family in the weeks after giving birth provided her with sense of protection, helping her adapt to the new aspects of her reality that she was thrown into with motherhood. The role of her family helped Hanna to adjust to motherhood and ease into the responsibilities in a more equipped way, both practically and emotionally.

Hanna: I had the support, you know, from family which was really good. Otherwise, I don't know what I would have done to be honest. I guess it felt surreal. I didn't know what to expect. Everything was new to me. (24-28)

Ahlam described receiving support in all forms from all her family members, including her father who would put her daughter to sleep for a nap she could take a shower or have lunch. She described the support from her elder sister too who lived abroad, in the form of late-night calls. Ahlam found solace in these calls, connecting with her sister, and speaking about motherhood whilst her parents, siblings and newborn were asleep.

Ahlam: I felt I had support 24/7. Whenever I needed it. There was someone, during the day it was my dad, my mum, my husband, and during the night it was my sister who lived abroad. I never felt alone. (570-574)

Zuhur's experience was tainted by the pandemic, though she still spoke of how grateful she was that both her mother and mother-in-law were able to visit her after giving birth to her daughter. It allowed her the space to nap and shower whilst her baby was being watched by them without worrying for her newborn. More importantly for Zuhur, their presence meant she received their experience, advice, and care. The support Zuhur received was not only practical, but also emotional. The sense of having to deal with the new changes together with her family was exceptionally comforting and relieving for Zuhur.

Zuhur: Even if they didn't support me with anything physically, just the moral support and knowing they are around me all the different. But they would cook for me, look after my baby so I could take a nap or whatever. Sometimes we would just order food in, it didn't matter whether they cooked or not or took the baby from me, it was so good to simply have them around. (395-399)

Subtheme Two – The importance of friends/visitors: In addition to family interactions, Yasmin also experienced friends reaching out to her to congratulate her on her newborn. In the moment Yasmin describes that she was too overwhelmed to notice all the messages and it took her a few months after to catch up on everything. Guests would come bearing gifts and food, and this was often a reason for the mothers feeling exhausted and tired, though they too expressed enjoyment in interacting socially with others after giving birth. There is significance in the reaction Yasmin had to the visitors and friends asking how she is, a sense of being cared for and a connection with the community. Being surrounded by others and having others ask about you lightened the anxiety of new motherhood for Yasmin, she was rarely left alone with her thoughts. It is possible Yasmin would have struggled had she been left alone during these first few critical weeks postpartum. Not only is it a naturally difficult period for new mothers, but Yasmin

also holds a cultural expectation and awareness of the support available. The comparison would have made it more difficult for Yasmin, had she been left alone with her thoughts.

Yasmin: there was a constant stream of visitors bringing gifts and food and it was lovely it was, it was such a special time. (145-146)

Shayma's experience had similarities with that of Yasmin's, both experiencing a constant flow of calls and messages from people checking up on them. Shayma was surrounded by other new mothers within her family, and this seemed to create a silent understanding that the presence of others is important during such a huge life transition. The importance of other's understanding was vital for Shayma. She was able to come to terms that it was okay to not be okay, but with the presence of her family, it became easier to face her feelings and overcome her loneliness.

Shayma: I always had people calling me or texting me and I think because my cousins and my sister had given birth like a year before me or a couple of months before, erm, some of them did experience erm I think it was postpartum depression erm so they always made a conscious effort to call me, come over, check up on me, so yeah I never felt like I needed someone, or that I was lonely (67-71)

The sharing of advice was welcomed by Zuhur, who found the interaction and presence of visitors even through phone calls had a positive influence on her experience of motherhood. Some of Zuhur's friends were unable to visit her due to the pandemic, and she still felt surrounded and held by her family and friends during this unique first-time experience of motherhood. Zuhur found comfort in hearing from those who had experienced motherhood before her, finding strength in their stories and advice.

Zuhur: social interaction was very useful, even friends calling or coming over to congratulate you and to visit, you feel you're surrounded by people who are willing to share whatever advice and positivity they have, you just feel like there's people who have done this before. (62-65)

Subtheme Three – Receiving advice: Yasmin speaks throughout the interview about the role of her sister, and at times about other mothers from the community like herself and their experiences postpartum. However, it is only at the end of the interview that Yasmin speaks of her close friend, who she would turn to for advice. The support offered by her friend and sister seemed significant and different to the support Yasmin received from her family, which stemmed from maternal care and cultural traditions. However, from her sister and close friend, it felt more intimate and real on a relational level, something Yasmin values and holds dear to her. Perhaps it was easier for Yasmin to express her worries to her close friend as they were of similar age and could relate to one another due to both their generational, cultural and motherhood experiences.

Yasmin: And there is also a close friend of mine who had a baby sort of 9-10 months before I did. And so throughout maternity leave, I would ask her and my sister constantly, oh I can't do the breastfeeding or any type of advice, it would be the two of them, I feel that both of them have had a big impact on the way that I would like to parent as well. (747-751)

A sense of shared experience was spoken about by Shayma, where she felt that she and her cousins, friends and sister were in unity through their experiences of motherhood. A common ground with those that she was close with helped Shayma navigate through the first few weeks of motherhood, creating the spirit of enjoyment as part of her experience. Shayma found comfort in sharing her experiences, making her feel validated and listened to. Also, the bond of friendship made it easier for both Yasmin and Shayma to seek advice as there was less need for them to uphold a certain image or try to reach a certain standard that otherwise may be present with family. This seemed to be a negative aspect of these women's experience of family support.

Shayma: Sharing the experience with my cousins, with my sister, with my friends. Everybody wanted to know how the birth was. It was nice having people you know coming over, talking to them, yeah, I enjoyed it... (63-65)

The inclination to provide kind advice to Zuhur from others was welcomed and proved to her to be a huge aid in her processes during the first few weeks of motherhood. Zuhur sensed comfort from knowing the advice was framed through the lens of love and care, not tailored to make her feel like she was less than as a new mother but held by other more experienced mothers. Having access to this social support system was beneficial for Zuhur as it was for other mothers within this study.

Zuhur: you feel you're surrounded by people who are willing to share whatever advice and positivity they have, you just feel like there's people who have done this before. (63-65)

Madina's experience echoed this too, with her declaring fiercely in the interview that she welcomed advice. It felt evident that these women were mainly receiving advice that was not tainted with any level of judgement, advice that was being sourced from loved ones, advice that was appreciated and desired.

Madina: I welcome advice, the more advice I get from other mothers the better because I guess they've been through it. (290-291)

Subtheme Four – Midwife Support: Yasmin experienced some difficulty establishing breastfeeding, and this vulnerability left her needing to ask for support from the community midwife – something she would have avoided in other cases. Having a newborn depend on Yasmin forced her to step outside her comfort

zone and seek her. However, she wasn't happy with the advice from the first midwife who visited and had to call them back and ask for another visit. Yasmin felt confident enough to express she was not happy with the help, even though initially it was difficult for her to request it. She continued to demand more help from a place of vulnerability and strength and this is what her daughter needed. The second visit helped Yasmin and she began feeling more confident and has remained to breastfeed her daughter for a full year. This experience is unique to Yasmin as her professional background impacts and influences her knowledge as a new mother, another mother may not have felt this way. Yasmin was able to find this strength and ask for help for the sake of her newborn who depended on her in every sense. This was made possible for Yasmin by the recurrent offering of help from her family and friends, helping her overcome her previous outlook that asking for help made her look like she was not coping.

Yasmin: I had them coming in to help across two days, erm, and getting in touch with the midwife team and whether it was arranging visits or, or whatever it took (55-57)

Amal spoke of her positive experience with the NHS and the midwives that cared for her both at the hospital and in her home. Being heard was important for Amal, whilst still being able to express her vulnerabilities to her healthcare professionals and seek support through her breastfeeding journey.

Amal: And, if anything goes wrong, there's always the doctors that I could go and see that are readily available for me. The support from the midwives, they came at home and visit me, the services that the NHS provided, that was just brilliant, it was amazing. (312-317)

The experience of support from midwives with breastfeeding was shared by all the women interviewed, highlighting the importance of their roles towards new mothers in those early days of motherhood. Particularly for Zuhur who underwent a caesarean section and remained in the hospital for a brief period after the birth of her daughter,, her midwives provided an added level of care for her by ensuring she could sleep and would inform her when her baby needed feeding. This allowed some of her initial worries to be reduced, knowing her daughter was safe and she would not sleep through feeds due to the surrounding support.

Zuhur: And then the midwife also would come and take her if she starts crying and try calm her if I was asleep and wake me if needed. (38-39)

6.5.2 Theme Four: The impact of culture

Maha: It's a very cultural, very Iraqi thing that when someone gives birth, they go and stay at their mum's or they have their mum come around to stay at theirs to help. (399-400)

Culture, beliefs, and practices influenced the experience of the mothers in this study, many of which being intertwined. Though some of the mothers held differing opinions to their mothers and/or mothers-in-law's surrounding certain traditions, others were more willing to inherit some of these traditions from the older generations. Ultimately, the impact of culture was one that created a supportive bubble, but also put into question which traditions these women wished to uphold, and which traditions they did not have the energy to dispute in those early days of motherhood.

Subtheme One – The 40 days and its traditions: Yasmin spoke of the importance of 40 days within the Iraqi culture as a 'milestone', and what that means on a practical level for many new mothers. In previous generations, this unfolded as women being cared for by her parents and not leaving the home until this period was over so she could recover. For Yasmin, she is aware of the 40 days but it was not necessarily a defining period in the same way she described, rather it seems somewhat a historical tradition that has begun to lose some of its elements in today community. Nonetheless, Yasmin did not experience the same as some of her friends did after the birth of her daughter. She describes herself getting on with things, and not expecting to be treated any differently. There was a sense that Yasmin was implanting another way of working through this period to make do with the situation she had at hand, knowing the period must come to an end.

Yasmin: when I look back to the first forty days, we kind of just threw ourselves into the deep end and got on with it. We didn't really treat ourselves or expect to be treated as like, the sacred post-partum period where we didn't leave the house, and no one came to live with us and we didn't go live with anyone. (107-110)

Ahlam's experience was influenced by her mother's strong cultural values, and somewhat underlying fear that took shape in the form of protection. Her family were insistent that she was not to leave home until her 40 days had finished, which Ahlam struggled with. The limitations were something Ahlam tried to struggle against but found her belief to listen to her mother's advice overrode her desire to break her mother's request. Ahlam's mother would cook for her and her husband, taking over their care entirely, but this meant Ahlam had to avoid eating sour food, and was told to eat lots of dates to keep her energy up, a food that she does not like. She did, however, eat dates, as she believed her mother's advice was sound and that it would help establish a steady milk supply for her newborn. Ahlam knew her mother had good intentions and simply wanted to provide her with the best care, however, she still felt and

acknowledged in the interview that this restricted her during her postpartum feeling. At the time, Ahlam struggled to voice this to her mother due to the sheer exhaustion from childbirth and caring for her newborn. The level of cultural commitment to the '40 days' impacts the new mother depending on how much it differs to their own views on some traditions. There is an opposition here to some of the positives of the support provides, with an impact of the mothers own relationship with her own mother and family being of importance.

Ahlam: So that was mainly in the 40 days when I said that I felt like a prisoner, mainly because of my mum. She didn't let me do certain stuff. No, you can't do this, you can't eat this, you're still in within your 40 days. I think it was sour food which she didn't let me eat, she said it was not good for me, and certain food that I usually don't like I was forced to eat, because apparently it gives me energy and strength. (46-50)

There seemed to be some traditions for British Iraqis surrounding the accepting of visitors during a woman's postpartum period, which felt that the doors of their homes are home without many restrictions. Though Zuhur's experience was affected by the pandemic and her influx of visitors was impacted by this, she did share the traditions she held close to her heart, and ones that made her feel a stronger connection to her identity and motherland. She found herself following some traditions without too much thought as doing them would not impact her and did not place her belief system into question. Zuhur was too occupied by other things to mind or contest following through with the traditions presented to her.

Zuhur: We also get certain sweets ready after the birth of a baby to give to visitors and guests, like masgool, I'm not sure what they are called in English but they are sugar coated almonds. So you prepare a nice tray for those who visit. Its tradition to also give money as 'Sadaga', as a charity when a baby is born which we did. These are the things I remember. Also when the baby's umbilical cord falls off, it's said it's good to throw it in a school so the child becomes good at school, or anywhere good basically so the child has good luck, these are little things I remember. Whether I believe it all or not, I still do it as it doesn't impact me and I don't think too much about it either. (290-299)

Madina was also impacted by the pandemic and shared a similar account to the other mothers surrounding the consumption of sweet food during the early weeks to aid the mothers milk supply. There is a cross-over between the mother's physical and social dimension with the meaning of food differing. She further shared that within their traditions, newborn males are usually circumcised within the first 40 days, but she had to wait a little longer with her son due to her son's weight. It did not bother Madina that she had to wait, but the occurrence of male circumcision was clearly acceptable within this community. It should be noted that the majority of the mothers were Muslim and circumcising males at or soon after birth is part of the Islamic faith.

Madina: the first 40 days he had to be circumcised, but he was too small to do so, I had to literally wait till he was a certain weight for him circumcised, so I had to wait for four months and he got circumcised at four months. Also, I was told to eat certain foods for breastfeeding. So I was always told to eat sweet stuff. And those were things that I did follow, or that I tried to follow like eating dates, nuts, soups, have lots of fluids to try and increase the breastmilk. (168-173)

Subtheme Two – Embracing the practical support: The mothers described the influence of support constructed from the backbone of their cultural identities as Iraqis. Being surrounded by family and having guests bearing gifts and food was a pivotal experience of early motherhood for most of the mothers interviewed. After reflecting through the interview, Amal shared that she realised she had expected the support received by her family and community to be a given, when in fact it may not be the case for the other new mothers. The presence of one's own mother for Iraqis, according to Amal, is expected during the first weeks postpartum.

Amal: I think I might have not mentioned it, because I expected it to be this way, a given that just normally happens. To other Iraqis, all my relatives and friends, when a woman gives birth, number one, the mother would be there. And then obviously her husband, and if she has sisters, aunties, uncles, wherever, whoever she's close with, they are usually there for her and supporting her throughout the first few weeks. (514-518)

Yasmin received practical support that is influenced and tailored based on her mother's and mother-in-law's expectations and beliefs. Some of which Yasmin felt she did not necessarily share, a tension present between her mother's beliefs and her own. One of the traditions was a ritual purification bath for the mother ten days postpartum – Yasmin describes her mother coming over to help take care of the baby so she could have this bath. Such traditional details were beyond Yasmin in these moments, so early on in her postpartum journey, it felt that it was simply too much to consider the whys behind the rituals for her. However, she later spoke of her gratitude for their presence as she did not know how she would have managed bathing her daughter whilst carrying the anxiety present within the first few weeks of motherhood. Though there remained a mild dispute surrounding the necessity of certain things, Yasmin embraced the practical support she received.

Yasmin: for example, you know after ten days, my mum came and she was like I'm going to look after the baby, you need to think about this Ghusul (غسل) like, to cleanse yourself so that you can start praying again and to be honest I hadn't even thought about it. (Line 306-308)

Subtheme Three – Making own choices: Though the cultural background impacted the level of support these new mothers received, it did not stop them making their own choices on what suits their personal situation better, and what they would prefer in terms of receiving support from their families.

Shayma shared that her mother had anticipated to spending the first two weeks postpartum with her, however she felt this was unnecessary and made the choice that ten days of live-in support from her mother would suffice. There was a voice given to Shayma as a new mother, to accept the support presented to her, but to also chose how much would be adequate. The practical support too was embraced, with her having the additional hands to aid in caring for her newborn and caring for her. It is not customary for British-Iraqi's to live with the extended families, so perhaps this made Shayma's mother's stay uncomfortable and somewhat unnecessary beyond 10 days.

Shayma: she wanted to stay for 2 weeks, but I think 10 days was more than enough for me and she needed to get back to her house and my brother and my dad and, erm, yeah I think it was just because 10 days was enough for me I think to have someone over and to learn what to do with my son, how to bathe him, change him, things like that. Yeah... (49-53)

Yasmin made the choice not to stay confined to the indoors postpartum and went on walks from day two. Yasmin is aware of the cultural traditions that some people chose to follow, with new mothers not leaving home until the 40 days have passed. However, it is clear this is not a belief and tradition Yasmin wanted to follow, she had no intention to do so and began walking with her newborn from as early as two days postpartum. It feels that Yasmin wants to exert her independence, with the theme of difficulty in asking for help being significant for this new mother. In asking for help, Yasmin may feel she is losing or giving up a level of her independence which she has taken years to build both professionally and in her identity as a married woman who chose to delay starting a family. It seems important for Yasmin to create her own ways of doing things, some of which may go against the family culture or traditions. This too was an aspect voiced by Shayma, Maha and Zuhur, who followed their own instincts surrounding how warm their babies were and if they wished to leave the home in the first few weeks or not.

There was an aspect for the mothers in this study of not fully understanding or wishing to apply the traditions their mothers held close. They did not want to conform to all the tradition, particularly those that they felt did not align with their other values which potentially were influenced by their upbringing here in the UK. The mothers instead were constructing their own values, drawing from both cultures and being able to identify what was important for them and that not all their own mothers' traditions and values were actually important to them as mothers.

Yasmin: we also wanted and didn't feel there was a need to stay home, so from day 2 we were going out for walks you know. (Line 104-105)

I've alluded to the fact that I am the kind of person who does find it difficult to ask for help.
(Line 127-128)

Zuhur: They also say we shouldn't take the newborn out for like the first 40 days, but I didn't do that, I think we first went out after 10 days. (288-289)

Maha: So even during the first 40 days, although culturally and as a family, everyone told me that you can't go out, you have to stay at home, you have to lie down for 40 days (laughs), I thought that was crazy, it's insane (laughs). (26-29)

Rahma was another mother who also experienced a level of expectation that support from her mother and family would be a given during her postpartum period. However, she too made the choice, like Shayma, how exactly this support would be provided. Initially after leaving hospital, Rahma and her son went to her parents' home, but quickly realised the situation could not continue for too long. She swiftly opted to moving herself, her son, and her mother to her own home where she had already set up her home in anticipation for her son's arrival. There was a sense that though Rahma was welcome at her parents' home, it was impractical and would impact other family members as well as restrict her freedom with a newborn. The decision not to stay with her parents was accepted by her mother, with a sense of trusting her daughter's autonomy and choices. Across all the interviews there was not a sense found that the new mothers are required to stay at their mothers, but rather that they receive support from their mothers in some form. For most of these women, this meant having their mothers around for at least 10 days postpartum, at times this was at the new mothers' homes, at a times at her parents. It was clear from the narratives that this was mostly determined by the daughter's desires, rather than by the mother, with a level of expectation that her mother would agree and support her.

Rahma: I had made the decision that I didn't want to stay with them, because we just had the whole baby setup at home. And also because I didn't want to disturb my siblings and stuff, erm it's hard. But I think we tried like one night at my mums, we stayed there, and it just didn't work for anyone so we decided at ours was better. (106-109)

6.5.3 Theme Five: The importance of Mama

Maha: so I guess 90% of it was probably from mum. So my mum played a very big role. (78)

The majority of the mothers interviewed for this study expressed a deep importance for their own mother, but they also shared that their relationship shifted in entering motherhood themselves. It was clear that the cultural expectations within the British-Iraqi community played a role in the assumption that the mother would be present at, or after the birth of her grandchild. The mother takes on the role of caring for her daughter, cooking for her and attending to other household chores to aid in her postpartum recovery.

Subtheme One – The provider: It was clear for many of these women, the support they received from their mothers during their postpartum period did not end at the 40-day mark but continued through until the present. Ahlam shares with humour that the support remains until now. It felt much deeper than parents stepping in to aid their daughter in childcare, a support much more intimate and loving. In many ways, a sense that the lives of the new mother and her own mother remained entwined well after she had moved out of her family's home and started her own family.

Ahlam: The support I get from my mother, and the 40 days support, well that hasn't even ended now. (laughs) She still supports me and helps, so every time I have an appointment or anything, I would just go drop my daughter off to my mum. (158-160)

Amal shared that this support fell beyond the realms of practicality, but the mere presence of her mother was one of support, safety, and happiness. A feeling that Amal holds dear, growing with the days as her own journey into motherhood grows.

Amal: I think it was more than just the physical and practical support that she gave me. I think just being close to my mother just made me feel so like safe and happy. (481-488)

The pivotal role of the mother for these British-Iraqi mothers was further stressed in Maha's account, where she described her mother taking on the practical roles, leaving her free to explore her new added identity as a mother. Not only did this allow more physical time for Maha to use up with her newborn child, but it allowed more mental space for her to evolve in the crucial first few weeks where her life was thrown into the unknown new reality of motherhood.

Maha: my mum played a very big role. So I was at my mum's, and she basically helped me. So she helped look after me in every way, like you know, took care of my laundry, cooking, cleaning that kind of stuff so I don't have to do any of that, no extra chores. (78-81)

Yasmin refers to her mother on several occasions to her mother as a 'feeder'. Providing for their daughters through food seemed to be a huge part of these women's relationship with their mothers. The nurturing through feeding a child that began at the start of their lives returned in their adult lives, when they found themselves vulnerable due to motherhood.

Yasmin: And with my mum as well she's she's a feeder anyway, in the best of times so imagine me post-partum, she was constantly supplying food and making sure that we had everything we needed (136-138)

Subtheme Two – Mother-daughter relationship: Ahlam described with humour how her relationship with her mother to be close, but with some boundaries. It came evident that they share a deep friendship, involving humour and deep connection, whilst Ahlam remains actively respectful towards her mother. The need for and importance of respecting parents was deeply ingrained in all accounts shared by the mothers in this study. Shayma spoke of how present her mother remains in her life after she married her husband and moved out. Daily conversations as well as visiting her mother regularly shows how important and profound this relationship is for Shayma. Motherhood and moving away from her mother did not come in the way of their relationship. If anything, it brought the two of them intimately closer, especially as Shayma's family grew. There was a sense of becoming equal with her mother on the level of motherhood whilst still being cared for by her own mother.

Ahlam: My relationship with my mum - we're very close. (530-539)

Shayma: I have an amazing relationship with my mum. We speak every day, I have my own house but I come to my mums most days I would say. (286-287)

Though meaningful and deep relationship between a mother and a child is not uncommon, what was being described by these women was a friendship too. Maha shared that she was the youngest of several sisters and how their bond was close. At times she would turn to her older sister about things where she felt a generational gap with her mother. However, Maha kept repeating that even with this gap, her bond with her mother was the stronger and most stable. She spoke of how this bond and friendship influenced her own being, consisting of discussions surrounding values and beliefs as well as also having a social and lighter connection with her mother.

Maha: that relationship with her has had the strongest impact on who I am as a person. On top of that we share a lot of our ideas, our values how we see things and how we deal with situations, we even share tastes in clothes and food! (laughs) So probably in that sense I am closest to my mum than all my sisters (573-576)

Madina too conveyed a deep connection and friendship with her mother. The ability to open up to her mother about her worries whilst keeping the boundary of respect clear was an important aspect for Madina. She sees her mother as her friend and confidant, but also the one that constantly provides her with care, love and nurturing even in her adult years, as well as towards her newborn child.

Madina: She's my best friend, literally yeah. I always go to her, she's my best friend. She's my everything, I talk to her about everything, we're close, we have that mother-daughter relationship as well as I guess, she's my best friend. (266-269)

Subtheme Three – Renewed appreciation: The mother's interviewed voiced a clear positive relationship with their own mothers, one even stretching out to that of friendship, including their mothers in their social lives as well as their familial lives. However, in becoming new mothers themselves, they began to find a renewed appreciation for their own mothers' roles as carers and providers. Amal felt her relationship with her mother became even stronger once she experienced the fruits of motherhood herself. It led her to reflect on her teenage years, where at times she would argue with her mother – a memory which now leaves her with regret. Through her newly acclaimed motherhood, she was able to be a different version of the daughter she used to be, understanding her mother in a way she could not before.

Amal: it has become a lot stronger since giving birth, I mean, it was already strong in terms of our relationship, but it could have been better, there were moments where there was a bit of disrespect on my part, and I feel like after giving birth that has made me (pause) a lot more respectful to my mother, just knowing how much she had to go through to raise us. (447-450)

Though Hanna felt she was close to her mother growing up, she did struggle to connect with her at times, placing the reasonings on a generational gap. This stopped Hanna discussing all things with her mother, and so did not quite have a friendship with her mother but maintained a loving closeness and respect towards her. In becoming a mother, Hanna found new appreciation for her mother, and began viewing her in a different light. Where before she experienced a level of annoyance at her mother not understanding her, she now experiences a sense of gratitude for the sheer amount her mother went through to raise her and her siblings. The experience of motherhood along with its difficulties and stresses shed a new light on the way Hanna sees her mother, even with the generational gap.

Hanna: after I got married and became a mother, I literally contact my parents every single day (laughs). Erm... I don't know I guess after becoming a mother I've realised how much they've sacrificed for me, and how much my mother has sacrificed for me... I mean if I'm going through this much physically and mentally, I can't imagine what she went through. (374-387)

Shayma began feeling even closer to her mother after the birth of her child. Watching her mother step in to care for them whilst overcoming the challenges she faced in the initial weeks of motherhood revived an indebtedness towards her own mother. Shayma began to pay attention to the details and experienced a higher appreciation for them too.

Shayma: I feel it made us closer. I appreciate every little thing that my mum has done for me, and that she still does for us, especially now that she has her own grandkids. She's doing even more than before. So definitely I'm more appreciative of my mum. (296-298)

6.6 Personal Dimension

Entering motherhood is a major life-changing event in the course of a woman’s life, one that causes the creation of a new way of existing amongst herself, others, and her newborn. It ignites our inner self, putting into question conflicting experiences and uncertainties surrounding our ability to be the mothers we wish to be. Whilst facing all these paradoxes within their personal dimension of being, a new mother is left to make sense of what motherhood is, what it means to them, and what it entails. The women interviewed for this study spoke of their emotional responses in becoming new mothers as well as what it means to them to now be a mother.

Table 7: Themes and subthemes within the Personal Dimension

Main Themes	Subthemes	Paradoxes (P) and Tensions (T)
Emotional Response	<ul style="list-style-type: none"> ▪ Anxiety and uncertainty ▪ Overwhelm ▪ Paradox of Love ▪ Sleep Exhaustion* 	Euphoria/Exhaustion (P)
Thrownness of motherhood	<ul style="list-style-type: none"> ▪ Life Before ▪ Shift in independence ▪ An unanticipated challenge 	Unprepared / Getting on with it (T)
Interwoven Identities	<ul style="list-style-type: none"> ▪ Blend of Cultures ▪ Religious identity ▪ Being a mother 	

6.6.1 Theme Six: Emotional Response

Ahlam: it was a mess with tears and happiness. (14)

The mothers in this study described a range of emotional responses to motherhood triggered by the changes that were brought about by their pregnancies and birth of their children. Whilst feeling excited and overjoyed by the birth of their newborns, they also welcomed the intensity of anxiety and feeling overwhelmed. Some of the mothers struggled with this more than others, particularly those who led independent academic lives previous to becoming mothers. However, motherhood introduced new feelings of vulnerability and discomfort. For Ahlam, she described her feelings as a ‘mess’, and it felt she lost control to compose and control her feelings during that time.

Subtheme One – Anxiety and uncertainty: Yasmin experienced a level of anxiety as well as euphoria when she became a mother. The uncertainty attached with her new role and finding her feet with her husband looking after a newborn caused Yasmin some unrest. Her anxiety was paired with vulnerability as Yasmin had experienced a big change in her physical and emotional existence.

Yasmin: it was the first time in my life that I felt, almost so insecure and just uncertain of myself and vulnerable as a result. Umm so it was a lot of anxiety but at the same time it, it was euphoric. (34-36)

This was also the case with Shayma, whose anxiety at the start of her motherhood journey meant she could not fathom the thought of leaving her child in anyone else's care without her also being around. This feeling eventually lessened as her baby become a little older, however she remains to hold a strong sense of responsibility towards her child. As a mother, she felt she was the only one to provide her newborn with what he needed. But this also meant that Shayma was continuously anxious and uncomfortable to leave her newborn in the care of another adult.

Shayma: So in the first couple of months as well, because my child was so young, I didn't think I would ever be able to leave my child and you know, someone else would look after him and I would go back to work. (204-206)

However, in what seemed like an equal level, Yasmin experienced an overwhelming sense of joy and happiness that came along with motherhood. The positive feelings Yasmin welcomed also helped her bond with her newborn. The balance between Yasmin's fears and worries as a new mother and her overwhelming joy is a fine line, impacting her emotional responses and meant she felt she needed to reach out for support. Yasmin knew to face her anxiety she had to ask for help and this was uncomfortable for her. She was accustomed to getting on with things on her own, finding pride in her independence. Yasmin did accept support from her sister who insisted on being with her once she returned home from the hospital with her newborn, and this turned out to be a positive and supportive experience for Yasmin. Her mother too, offered her support in the form of cooking for Yasmin and her family. There was a level of influence from cultural traditions surfacing in that the daughters remain under the care of their parents during transitions such as motherhood, and that this level of care does not end with their daughters becoming adults, wives and mothers.

Yasmin: I think at the same time the anxiety and the nerves just.....it kind of meant that I was reaching out for help when usually I'm the kind of person who would find that really hard to do. (51-53)

The strain that arrived with the welcoming of her newborn was one that Ahlam did not anticipate. Everything was new, she was thrown into a new world that was spoken about often within her family and society generally, yet it still felt foreign to her. She required time to adjust, heal and accept her new position in the world, her newly created responsibilities towards caring for her child. However, the stress was somewhat lessened as she knew she was not going through this alone, but with the support of her family.

Ahlam: it was very stressful, very hard, mixed with emotion, something new, a new experienced to me. (11-12)

Subtheme Two – Overwhelmed: Yasmin spoke about how she went into hibernation; the experience of motherhood was so intense that she took a step back from things, including replying to messages being sent to her. She went on to share her experience of finding her feet and adapting to the new reality that left her caring for a newborn that her usual role as a wife became difficult – something she previously thought little about. She withdrew from her usual social interactions and found it difficult to respond to other people’s messages. In taking the time to adjust to her newfound role as a mother, Yasmin suddenly found herself in the depths of uncertainty and providing for a newborn. Before motherhood, Yasmin was a giver and provided support to her husband, but once she became a mother it was difficult to balance this and her priority and energy was all driven on her newborn. It should be noted within the original Iraqi forty-day postpartum period, one purpose is to protect the mother from too many social obligations – Yasmin found herself stepping away from feeling socially obligated to reply during this period of her motherhood journey. Before motherhood, Yasmin was a giver and provided support to her husband, but once she became a mother it was difficult to balance this and her priority and energy was all driven on her newborn.

Yasmin: for the first sort of month when we were in that bubble of being absolutely overwhelmed, I could not even think about, you know, caring for someone else, so caring for my husband or providing for him (496-498)

Shayma too experienced a powerful emotional response to this powerful life transition, finding herself crying from the sheer exhaustion from her new role. The crying was Shayma’s means of calling for help and informing those around her that she was struggling. However, often Shayma would cry in private, adding to her anxiety of being noticed. She was living in a paradox of wanting to be heard but trying to silence her cries as to not be a burden on others.

Shayma: It was very overwhelming, erm, and I cried a lot (11)

The new responsibility led Zuhur to struggle emotionally during the first weeks of motherhood. She experienced a mental overload of worry, trying to find a sense of organisation and order within her life. This led Zuhur to abandon some of her own needs, such as her physical recovery from a caesarean. Zuhur, too, was pre-occupied to attend to and worry about her body's physical changes due to her responsibilities towards her newborn.

Zuhur: The mental pressure, the responsibility towards my child, I was mentally busy thinking about so many different things that I wasn't too concerned at that point about my body and the physical changes to my body. (111-113)

The physical exhaustion that Hanna experienced impacted her emotional response, describing her experience also as one of overwhelm. However, through the difficulties, Hanna was able to remain confident in her new role as a mother, helping her move forward through the initial difficult weeks. She had embraced her new identity as a mother with the supportive presence of her husband, mother and family.

Hanna: I felt overwhelmed. But I did feel confident that I could do it. But I did feel drained and exhausted and overwhelmed at the same time. (235-236)

Subtheme Three – Paradox of Love: In describing the difficulties motherhood brought to the lives of these women, what became apparent was that love was intertwined in all they did, and in the actions of those caring for them. Welcoming their newborns created this new, powerful emotional response within the beings of these mothers, forceful yet delicate, a paradox of love. Ahlam shared that though she cannot shake away the details and difficulty that she experienced in early motherhood, she has managed to forget the pain because it was overridden by the love she experienced. Love was a natural response for these women and they were able to overcome some of the postpartum difficulties with their newborns through love, though at times overwhelming, and connection.

Ahlam: I haven't forgotten the details, but I have forgotten how painful it was because of the overwhelming love I felt. (250-252)

Hanna shared a similar experience, working through the exhaustion that became a reality to her days. The overwhelming love she felt for her daughter allowed her not only to continue, but to strive towards the best version of herself as a mother. Her tiredness did not come in the way of her being present and loving with her newborn, finding an inner strength to carry her through.

Hanna: this was my baby, I loved her instantly and I would do anything for her. Regardless of the tiredness I was still very determined to make sure I did everything that I could to be the best mother. (237-239)

These women's identities shifted, from being wives and daughters, to now also mothers, and this new identity took a dominating role in their existence. They were able to embrace the difficulties because of the joy that they also felt. Madina described her new role as rewarding, highlighting a sense of meaning being created for her through her experience. Madina was aware of the sacrifices she had made, but welcomed them with the presence and existence of her newborn.

Madina: And as a mother, I feel great, I feel happy. Having in my life, it's rewarding, even though there were some sacrifices (113-114)

Subtheme Four – Sleep Exhaustion: Though the subtheme of sleep exhaustion can be found within the physical dimension, it felt fitting to also include it in the personal dimension too. The impact of sleep created a strong emotional response for the mothers interviewed. Upon becoming a new mother, Yasmin heard from many people a common piece of advice: to catch up on sleep when the baby is sleeping. However, Yasmin found this difficult to do, trying to reach a balance between being nervous to sleep and being so thankful and happy that she could not sleep. She experienced heightened emotion that made sleep difficult, showing one way she reacted to becoming a mother. Though she needed the sleep, she sometimes chose to stay up to watch her newborn, whilst other times struggled to sleep because she was anxious. This balance was particularly difficult for Yasmin to adapt to in the first few months of motherhood.

Yasmin: When she was asleep, I was either just anxious and nervous or too stressed to sleep or I was just staring at her feeling so lucky and thankful and happy. (39-40)

Amal even shared that the sleep exhaustion to be the most difficult part for her. This shows the impact of losing something that was somewhat a given in her life previously. It was difficult for Amal to describe this, highlighting a sense of weakness in Amal's self-perception of her response to early motherhood. Though she described not getting any sleep, Amal really meant not being able to have restful sleep due to being woken up several times during the night and struggling to get back to sleep of fear her baby would once again need her. This caused emotional pain for Amal, leading her to cry most of the nights during those first few months.

Amal: I was crying most nights. Just just because of like (pause) you know, you don't actually get any sleep - I think that was the hardest part mostly. (47-48)

Hanna experienced a mental exhaustion and lack of patience towards herself and those around her, leaving her less able to enjoy her newborn than she would have liked. She attributed this emotional response to the heightened sleep deprivation she experienced during early motherhood. It came as a surprise to Hanna, as it was an aspect she had not previously considered and felt she had taken for granted all the time she had before life with a newborn. The lack of sleep led Hanna to feel irritated, wishing it was spoken about more within her support circle and community. She found motherhood being hailed, and though she experienced the beauty through her daughter's presence, she yearned for more discussion about the difficulties. Madina too expressed the impact of needing to adjust to life without a full night of sleep. Coming from a busy work life for several years before becoming a mother, she shared that nothing compared to the tiredness of motherhood. For Madina, motherhood could not be compared to any full-time job she previously had. This was levels more demanding both practically and more importantly, emotionally. The women in this study referred to their mothers helping during the nights to help their daughters get some rest to continue through the days with the unpredictable newborn sleep routine. There was little mention of their partners with regard to helping through the night, with their support being found in other areas.

Hanna: And I guess my sleep pattern probably has impacted my mood too, which is something I also didn't expect. That's the problem, it makes me really annoyed, no one talks about this, no one explains this to you before. (321-323)

Madina: physically motherhood is tiring. Like the sleepless nights with my son, it was tiring. Something that I needed to adjust to, not having that much sleep and trying to maintain a whole day's work, like my normal day to day activities, without any sleep. (67-70)

6.6.2 Theme Seven: Thrownness of motherhood

All of the women interviewed had experience of caring for babies within their families, however they all described that in becoming mothers themselves they were thrown into an unknown reality. There was a sense of loss when reflecting back on their previous lives. It was a paradox, as they still had the commitment and surety that they would not swap their current role as mothers for their previous life.

Subtheme One – Life before: Yasmin refers to her life before as being 'selfish', as she was not caring for anyone vulnerable and could go out when she wanted and work as she pleased. Though she has flashbacks about these times and sometimes yearns for the freedom life before, she seems content in her

new added role as mother and carer. Upon reflection, Yasmin learned that her old life made her appreciate motherhood and her newborn even more. Despite not being able to go out and sleep whenever she liked, the value and love of being a mother for Yasmin was worth the sacrifices.

Yasmin: But, no regret, but there were definitely flashbacks of life before, and sometimes you just feel like I do miss that, I do miss being out and not needing to worry about bedtime, I do miss lying in and I do miss just a full night's sleep which I still have not had since the day she was born. So there are things that you miss, but, I would never go back to not having her just so I could have those things. (618-622)

Reflecting on her life with her daughter, Ahlam realised how she struggled with long working hours before. Now her previous reality is a distant memory, and one which felt easier than her experience of coping with long tiring hours in the day as a mother. The stress stemming from the new routine with her newborn, adjusting to life as a family of three came as a shock to Ahlam. Now, her life before seemed carefree and stress-free, with her perception of difficulties shifting in entering motherhood.

Ahlam: used to finish work at 7pm. I used to feel like oh my god, I can't do this, I'm so tired. I can't take this anymore! But then giving birth and looking after a child, that's like a, I don't know how to describe it, not a full time job, but an even *fuller* time job (laughs) you suddenly are literally stressed all the time, working as a busy bee all the time. (36-40)

Subtheme Two – A shift in independence: The sense of independence for Zuhur began to fade with motherhood, and her days and nights were no longer in her control but fixated around her daughter's feeding hours and nap times. This led to Zuhur's reality to destabilise for a few months, a phase where she had to learn to accept a different reality with more restrictions. Zuhur's freedom was somewhat lost, not able to rest, shower, or take a walk as spontaneously as before. Her connection with her newborn aided her ability to overcome this loss, finding joy in the time she spends with her. Zuhur shared that she thought when she first had her daughter that she would want her maternity leave to end quickly, but now that it has, she yearns for more quality time with her daughter, even though this comes at a cost.

Zuhur: So suddenly, you have an additional person that you're *always* responsible for. And you cannot just split your time equally anymore between things. I can't be as independent as I used to be. (24-26)

Yasmin tried hard to regain her independence after giving birth to her daughter. Her identity as a doctor meant that she was trained to be rationale in difficult situations, however motherhood led her to finding this independent anew. Yasmin seemed to have struggled with adjusting and accepting that she was no

longer as independent as she used to be, and that her emotions got in the way of rational decisions now that her daughter is on the scene.

Yasmin: my husband only had two weeks of paternity leave so I did need to learn to be independent quite quickly and just put her in the car and go out to see my mum who doesn't drive as much and so I think that helped me to try and get to a state of being independent quicker. (112-115)

Subtheme Three – An unanticipated challenge: Hanna's experience of motherhood came as a shock to her, though she was comfortable in her role as an aunt for many years, the reality of caring for her own child was extremely different. She expressed how surprised she was that the difficulties of motherhood were not discussed by healthcare professionals, and the emphasis was surrounding the actual labour and details surrounding the baby's care. Though Hanna thought this information was useful at the time, when she was in the mist of the difficulties, she was left wondering why it was not discussed more. Her community, especially the elders, often spoke of the beauties of motherhood but the struggles were not touched upon. Motherhood was seen as sacred, and it felt that highlighting the struggles may lessen its sacred status. This may have impacted the ability of some of the mothers to express their feelings and emotions to their mothers around how they were cared for, but was not the case for all the participants

Hanna: I did not expect it to be this hard and this draining and at the same time beautiful and rewarding (laughs) it isn't just negative. (301-302)

Yasmin speaks of how motherhood was the hardest thing she has experienced. She also spoke of how unexpected it was and the how many compromises and changes occur with this life transition. Though Yasmin is aware of the medical impacts of pregnancy and motherhood, hearing about it from an academic or social setting (from other parents) was not the same as experiencing it in its rawness and reality. Yasmin attempted to prepare for motherhood by listening to podcasts and attending her antenatal classes, though she still felt unprepared, and her expectation of motherhood did not match the experience. Yasmin's expectations of motherhood and life after the birth of her daughter did not match her experiences. She found adapting difficult, where she needed to adjust her previous life now to focus on her baby entirely. There was also the emotional strain of overthinking basic tasks, such as going to the bathroom. The support system helped ease the struggles but in the moments the mothers were left alone, the emotional bricks would fall and the challenges would become clearer. While being surrounded and cared for by others, it was easy to focus on the presence of others and the love of the newborn.

Yasmin: I didn't expect it, expect how hard it would be and everyone says that. You just don't anticipate that there's so much compromise and such a change in your life and every little

decision like when you go to the toilet, like, everything, you need to think two three four times about. (528-531)

it was definitely much harder. It goes back to what I said about nothing prepares you for it, so it was much *much* harder than I ever expected. (518-521)

Amal was shocked by the difficulty that came with early motherhood. She shared the view of the majority of the other mothers interviewed that the preparation about the challenging aspects is minimal for new mums.

Amal: the first few days were really hard. Erm and you sort of get shocked with what you get faced with it. Like, erm you know, I know people try to prepare you for and say, okay, it's going to be challenging. (15-17)

6.6.3 Theme Eight: Interwoven Identities

Our cultural identity is a huge influence on how we experience life experiences, both those that we are exposed to and those that we chose to make, such as motherhood in the case of this study. These women are all daughters, sisters, wives, and now also mothers. They had in common that they all identified as being British-Iraqi, though it is clear what this means for each mother is unique. However, there was a strong theme throughout that none of the mothers felt entirely British, describing how this new identity has been created by adapting what works for them from each of the cultures they have been exposed to. Religion, however, seemed like the identity that held the upper hand for these women, finding that they took on values that did not contradict their religious teachings, particularly around respecting their parents. The new mother's application of being a mother was influenced by their interwoven cultural identities. All the participants in this study identified as practising religious women, with ten being Muslims and one being Christian. No significant difference was found between the experience of the one Christian mother compared to the other Muslim mothers.

Subtheme One – Blend of cultures:

Yasmin spoke of how blended her identity is because of her cultural background and how that has impacted her. From language to food, the influence of her Iraqi heritage is evident. She speaks about how this is a shared feeling with her friends too, with them not being as Iraqi as their parents and finding a new medium. However, Yasmin also spoke about how she does not feel just British either or embracing that she's something different is easier. In comparison to her parents' generation, she feels more British than they do, having grown up and been educated in the UK.

Yasmin: I think I feel, like this blend of something that a lot of my friends can probably relate to, which is that we are Iraqi, that's where we originate from and it does have so much of an

influence on our lives. But we are British, we've just made this new sort of, we've made a new heritage since being here. (332-335)

She further expressed that it serves her to know she is not only British, helping her navigate her differences and viewing them as an aid as she processes this transition of motherhood. The media and British society reminded and made Yasmin feel that she was 'a bit different' and not wholly British. In a way, Yasmin, like the other mothers, had to find a middle ground between both their British and Iraqi identities.

Yasmin: I think I'm definitely not just British. And I think it helps to know that, because erm, as British as you want to feel or think that you are, we live in a, we live in an environment, were, to a certain extent, whether you can't appreciate it that your different, the, the factors around you, people around you, the media, whatever sort of outlet it is, will remind you that you're a bit different. And so actually to just embrace that and own it is much, is much easier. And so I, I do, I do own it. (421-426)

Rahma initially shared that she feels equally British as she does Iraqi, however it came across that she struggles with "cultural baggage" – a term that she explained to mean things that clash with her own personal values. On the one hand, her religious identity as a practising and covering Muslim mother influenced which values clash with her identity. Rahma is also highly academic, and she shared that she felt her background has influenced her to reject some cultural traditions around motherhood, such as allowing a newborn to taste dates. On the other hand, she welcomed and emphasised the importance of having family around, another cultural tradition, and wanted her newborn to see both sides of the family regularly. However, for Rahma, she struggled to feel either British or Iraqi and expressed relating to both identities simultaneously. This is a recurring sense that these women feel out-of-place and not completely belonging in any of these identities, hence they have created a blended culture that overlaps both, fitting more with their values.

Rahma: I feel both. Probably 50-50, because I'm very critical of a lot of cultural baggage, but at the same time, I don't identify myself as fully British, because I don't embody a lot of cultural values too. (251-253)

Ahlam shares how she feels and that she has lost aspects of the Iraqi culture which was influenced by not living there. However, she made choices, not all of which she fully valued because they felt fitting with her culture. She explains how she chose to swaddle her newborn, expressing a dislike to the British way as being "too loose" while the way she observed families swaddling their babies in Iraq was firmer, "you wrap the baby like a burrito". Ahlam wanted to lean more towards the "Iraqi" way of swaddling as with the swaddles she bought from shops in the UK, her child easily found a way out, so she opted for using

the ones she had purchased from Iraq. Her Iraqi culture influenced her decisions and the way Ahlam dealt with her newborn.

Ahlam: I don't live in Iraq, so of course I feel I've missed out in some ways. But what I've taken from my culture...if we're speaking about babies then I chose to swaddle like my cousins in Iraq, even if I didn't like it. (387-389)

Subtheme Two - Religious identity: All the mothers identified as religious women, and all but one were Muslim, therefore, religion clearly plays a huge role in the lives of these women. There was a sense of being grounded through religion and finding peace that some traditions help religious significance, placing these women at ease. Yasmin described her religion and cultural identities as being two equal boats, highlighting the importance of both for her on a personal and intimate level.

Yasmin: I don't know if, if it's the same boat, but if they were two boats they would definitely be equal to one another in terms of religion and the culture. (446-447)

Zuhur shared how the importance of religion for her as an Iraqi and how her experience is that religion and culture have numerous shared factors. She described how depending on which city a family is from, they would bake different sweets on occasions such as childbirth in Iraq. These traditions are ones she and her family continue to uphold. She also shared that it's common for Iraqis to share each other's religious festivities, placing an emphasis on how cultural these gatherings are. She felt that her religious and cultural identity was shared by other Iraqis too.

Zuhur: I'm a Christian, and it's things like when we gather for Christmas or Easter, in the church ... it's so beautiful. It's the same with Iraqi Muslims, ... and it's also a cultural gathering not just religious with Iraqis. (242-246)

Ahlam shared that she has come across some religious misconceptions and biases. Her experience, however, was one of being treated highly by those around her. She described this as 'I felt like a queen', and that the misconceptions did not match with her reality. This helped with Ahlam's self-belief and confidence in her new mothering role towards her daughter. She felt her role was given validation and purpose by those around her.

Ahlam: But as a Muslim, we hear so many misconceptions about women and how, like, they are a burden on the community and stuff like that, and how they aren't treated well. But no,

that wasn't my experience, I felt like, this sounds cheesy, but I felt like a queen, everyone around me was treating me really well. (302-306)

Subtheme Three - Being a mother:

Yasmin spoke of her identity as a mother and how she thought she would be and how she became. Her choice to immerse herself in a year of motherhood meant she could focus herself on her newborn entirely and find comfort in her new identity. Yasmin spoke of how difficult this was, but eventually was able to get into a routine that worked for her and her daughter. The tension between accepting her choice and facing the hardships that motherhood brought seemed significant for Yasmin. The year Yasmin spent with her newborn was nothing like her work life and other aspects she went through. She was able to see her newborn grow and develop in a short period of time which consumed her life more than anything she had previously experienced.

Yasmin: But for a large part of maternity leave, which has been one year, I think my only identity was as her mother, and as I said for someone whose been a professional for so long, and even like a wife for 9 years without being a mother, it was difficult you know, overnight, those just took a backseat, and my main and probably my only identity was as her mother.
(577-581)

Zuhur described motherhood as being a lifelong responsibility. Her whole life had become about caring for her daughter, and suddenly her other roles had taken a back seat. What Zuhur previously found important seemed less important with the domination of her motherhood identity taking hold. She was able to see her life through a new lens and appreciate her new relationship with her child.

Zuhur: now I feel like I've started a project that doesn't have a deadline. Like of course God has blessed me with a beautiful daughter, I'm not complaining, but being a parent is a lifelong responsibility. (362-364)

6.7 Spiritual Dimension

The spiritual dimension does not represent exclusively the spirituality that can be associated to religion. Though the women interviewed in this study all associated themselves with a formal religion, mostly Islam with one mother identifying as a Catholic, this dimension showed the impact of these women's beliefs and values. Their identities as British-Iraqis paved the way for an increased importance for the role of family within their lives, and in their choices as new mothers both for themselves and for their children. But it was clear their commitment to their religion brought them comfort in moments of difficulties in the unknowns of motherhood.

Table 8: Themes and subthemes within the Spiritual Dimension

Main Themes	Subthemes	Paradoxes and Tensions
Religious and cultural Beliefs	<ul style="list-style-type: none"> ▪ Submission to God ▪ Passing down traditions ▪ Meaning of motherhood 	
Establishing Values	<ul style="list-style-type: none"> ▪ Importance of Family ▪ New generational values 	Own Values/Cultural Values (P)

6.7.1 Theme Nine: Religious and Cultural Beliefs

Madina: I'll pray if it got difficult or speak to God, I guess, helped me overcome, the hardships of motherhood. (240-241)

It was clear from all the interviews the importance that faith had on these new mothers' lives, with all but one identifying as practising Muslims. The other mother identified as being Catholic, however, no difference was found between the importance of God and the amount of reliance the mother placed towards her faith. They spoke of 'tawakul', leaving things to God, submitting to the experiences they dealt with and believing they would understand the benefit of their experiences after. It seemed that the tawakul in these women's lives became more present after becoming mothers.

Subtheme One – Submission to God: Yasmin speaks about the thrownness of motherhood, and how she found solace in her faith during difficult times. Her belief in God and dependence on Him is what she believes got her through. Yasmin spoke of how prayer played a pivotal part in how she managed her mental health and how she parents her daughter. It was through her dependence on God that Yasmin was able to get through her struggles and in turn, they felt lighter on her.

Yasmin : sometimes when your just in the depths and throws of like... anxiety, sometimes you just like need to surrender to the fact that, you know, I believe in God and I believe that if I can It'wakal (أتوكل) or depend on Him, He will help me to get through this, so many other mothers in the world have. (280-283)

Maha shared her beliefs surrounding the important role mothers have as part of not only her faith but also her culture. The importance was so instilled into Maha's upbringing that she had anticipated this role to one of difficulties due to its high status. She understood that motherhood came with its difficulties that could only be made easier with its blessings. The benefits associated with motherhood within the religion of Islam were values grounded within the British-Iraqi community according to Maha. This helped Maha embrace the difficulties, allowing God to guide her through the sleepless nights and the challenging moments. The rewards Maha is referring to are ones she believes she will gain from God, both in this life and the afterlife. These can be in the form of health, wealth, success and blessings for her children and future grandchildren.

Maha: I knew to be a mum was never going to be easy, because you were given so many benefits, you were given so many rewards for it so obviously you're not going to get all those rewards for nothing otherwise it would just be unfair. Erm, so I knew that I was going to have to embrace this change, because it's a big responsible role at the same time, an important one, something that is life changing for my child basically. (194-199)

Amal too shared that she believes her experiences were smoother due to her belief and submission to God's will. She referred, though with hesitation, that she may have become depressed and given up on things had she not had the belief that things would become easier. This belief made it easier for Amal to accept the struggles she was experiencing. She referred to a verse from the Holy Quran, "with every hardship comes ease", and went on to explain what this meant to her. It came across that this verse was somewhat of a lifeline for Amal during the darker moments of early motherhood. It was through her belief and faith in God that the hardships of motherhood would relax.

Amal: If I didn't have that faith and that belief that with every hardship there is ease, I think the first few weeks would have been much harder. (229-230).

Subtheme Two – Passing on traditions: Yasmin talks about the values she wants to instil in her daughter based on her religious beliefs and cultural identity. The importance of speaking Arabic and listening to Quran at home and how this will frame her daughter's identity. These values hold great importance for Yasmin, and she wishes not to lose them in the upbringing of her children. Exposure to Arabic nursery rhymes within the home is also something Yasmin began to actively do to influence her daughter's closeness with her identity, with the belief that each of these moments impacts her parenting

and the way her baby will respond. Unfortunately, Yasmin understands that with each generation traditions will be “further diluted” and to preserve these traditions, Yasmin has tried to actively keep them alive in her household.

Yasmin: And I think, with my daughter, I am trying to instil those values. We, I try and speak Arabic to her at home, erm, but with an awareness that if it became this diluted from my parent’s generation to mine, I can only imagine it would be further diluted, erm into her. Which is, which is a sad reality. (413-416)

Yasmin also spoke about the responsibility she has as a parent to impact her daughter’s identity and values. With her own identity being diluted in comparison to her parents, she wonders how much more diluted her daughter’s identity will be. Even with regards to food, Yasmin and her husband have made the choice only to give their daughter Halal food, with their beliefs impacting their daily life in all aspects. She also added that religious identity is somewhat more important than her Iraqi one but they are not too far apart as they attune to one another.

Yasmin: I think it is our responsibility as well to make sure that she, she also has strong, and when I say Iraqi, I also mean what I also refer to as Muslim values. Because, for us religion probably is more important than culture, but I feel the two do come hand in hand. And I think it’s important that we try as hard as we can to instil that in her because we know it’s going to become so diluted that we might as well try our best. (436-441)

Madina held her beliefs close to her heart and wished to create a representation of these beliefs within her home for her son, albeit his young age. She felt this was just as important for her role as a mother, as it was for her as a parent providing her son with an Islamic environment to grow up in, surrounded by the verses of the Holy Quran and prayers. She believed that introducing her beliefs early on in her son’s life would make it easier for him to understand his identity and take pride in it. This was voiced too by Maha, who found herself being more attentive to her behaviour after becoming a mother, as she now had a role to lead, a position where a small being was watching her every move and replicating it.

Madina: I would have the Quran on to make sure my son listens to it. In the mornings when I wake up, when I’m having my breakfast, I’ll have it on in the background, for example, or I’ll have certain supplications on which we call Duas (دعاء). But yes, certain applications on that I want my son to recognise, so as he’s growing older, he has been in that atmosphere within the household is not something he only begins to recognise as he’s older. (226-231)

Subtheme Three – Meaning of motherhood:

Throughout all the interviews, the mothers spoke about the importance of the role of motherhood within their religious and cultural beliefs. Children are taught from a young age within the Iraqi culture that their

mothers are the key to their lives being blessed, and often referring to a famous saying by the Prophet Muhammad (pbuh). Hanna and Maha shared this saying with me during their interviews, identifying the impact it has on their belief system. The view is ingrained in their lives, not only with regards to how they view their own mothers, but how others view them upon becoming mothers. There is a shared belief in how blessed motherhood is in Islam and this has driven women to see the importance and value of their role as mothers.

Hanna: So it's huge. The prophet Muhammad (pbuh) has a saying that paradise lies beneath a mother's feet, and you know, even being a mother is a form of worship. So it's a religious view that mothers are really important. (197-199)

Maha: I've always been taught about the importance of motherhood and I've always believed in the importance of motherhood. I mean, we have our famous Hadith (حديث) that heaven is under the mother's feet, so to place such a role with high importance is amazing, our target, our ambition, where we want to be in the future, in the next life, heaven itself to be at the bottom of our mother's feet, must show just how important my mother is for her to be placed there. (189-194)

Amal also referred to this Hadith, as well as the importance the Quran places on respecting your parents. She described how she was brought up to respect her parents and holds this view close to her, however, only became aware of what this actually means when she became a mother herself. By experiencing motherhood herself, Amal felt more connection to her mother and understood the importance placed on respecting and valuing ones parents within her religion and culture. She was able to appreciate what at times felt like restrictions to her upbringing when she became a mother and viewed them with more respect and understanding.

Amal: I think as an Iraqi you're raised with respect to your parents and as a Muslim, obviously. So there are always boundaries, red lines that I would not cross with my parents but just like simple arguments where I was raising my voice, that used to happen. But now, having gone through motherhood, that has changed a lot of things, you know, just made me understand why, in the Quran it states that you need to never raise your voice with your parents, so it just put things into perspective. (456-461)

Ahlam refers to ranks, a term often used to describe the levels of heaven. Mothers in Islam and among the Iraqi culture are believed to have access to the highest rank of heaven due to the importance this identity holds in the eyes of God. It felt that Ahlam had embraced the struggles of motherhood more easily with this belief and knowledge that it is an elevated role, one that she will be highly rewarded for both in this life and the afterlife. Through motherhood, Ahlam was able to comprehend how the high rank of motherhood through her own physical and raw experiences.

Ahlam: make you realise how high a rank woman have, how high a rank mothers have, or should have amongst all Muslims! Some people may think being a mum is an easy job, you're 'just' looking after a baby, but it's huge! when people say oh its nothing, why would God give you this high position, come on! (312-318)

Yasmin described and was clear about what kind of mother she wanted to be and continues to want to work towards being. She has thought about her values and what she would like to instil in her daughter and their relationship a lot. Yasmin has reflected on her own experience with her own mother and watching her sister be a mother and found her own way to how she would like to be. Yasmin began feeling like a mother and connecting with her unborn child at the time of finding out she was pregnant.

Yasmin: But (*pause*) I don't know if I had very strong thoughts about what I would be like as a mother, I guess I did hope that I would be very loving and very gentle and wanting to be more like a friend to my children and that is a work in progress, and I hope I'm achieving that as I go along. (521-524)

6.7.2 Theme Ten: Establishing Values

The women in this study found themselves adhering to many of their cultural and religious values. However, they also created and reformed some values to be more fitting of their needs as new mothers. It was clear with all participants that a concrete value that was not up for debate was the importance of family. This value held centre stage for these women, with the mention of the family unit being present throughout all the interviews.

Subtheme One – Importance of family: Yasmin places importance on family and exposing her daughter to both her family and her husband's family. Allowing space for these familial relationships to develop holds value for Yasmin. She speaks of 'our' identity, referring to the influence of her cultural and religious identities. Yasmin wants her daughter to carry this value of the importance of family throughout her own life and is doing so by ensuring her daughter has her extended family around her and involved in her childhood.

Yasmin: I guess I do things even without thinking but, making sure that we, like I said before, exposing her to a lot of our families because that's a big part of our identity. We want her to feel that family is a big priority and a big value of hers. (494-479)

Amal shared the importance of family too, particularly placing an emphasis on the importance of ones own parents. In becoming a mother, Amal's admiration and respect towards her parents increased, bringing with it a level of understanding for the lives they lived to bring Amal and her siblings up.

Amal: So as a Muslim, we believe that no matter what your parents do to you, or how they are, there should always be a respect to your parents up to a point where you're not even allowed to raise your voice against them. You know, we're raised up in our family based on these values. And then becoming a mother myself, I thought I understood that before and I thought I had the level of respect that I should have, but by becoming a mother, it's just gone up, like so many levels! (467-472)

Rahma too, shared the importance of family within her value system. She became more aware of its role in becoming a mother. prior to having her son, Rahma and her husband would spend time with their families but without a sense of urgency. However, now, Rahma feels more inclined to create time to ensure her son is spending time with the extended family. The role of family holds a huge importance within her life.

Rahma: family is important, and I think when you have children you realise just how important family is. Before that, if your couple, I don't think your so attached with interacting with family, but once you have kids you realise, they need aunts and uncles and grandparents to be around. (377-380)

Hanna spoke of the role of family and the importance of the support she gets from them. Though Hanna had previously seen her sisters being cared for by family after having a newborn, she now witnessed first-hand the impact of familial support on her experience of becoming a mother. Hanna wants to hold on to these traditions and support, placing increased importance of family and staying connected with them on a personal and intimate level. She shared that she wants this for her children too, for them to value their elders and to be valued by them.

Hanna: the way we support each other, so how my mother-in-law and mother would bring me food and look after me after I had my daughter. That's something I would definitely keep and teach my children as well. The generosity of the culture and the importance of family. I do feel with the British culture, again I'm not trying to be ignorant, but just what I've seen, when parents get older, they usually live on their own and barely see their children, and some end up living in care homes. Whereas in our culture there's no such thing, you know, when parents get older and there's no one else to take care of them, like if their partner passes, then we take care of them. So that's another nice thing that I hold on to. (269-277)

Subtheme Two – New Generational Values: Yasmin is clear about what kind of mother she wants to be and works towards being. She has thought about her values and what she would like to instil in her

daughter and their relationship a lot. Yasmin has reflected on her own experience with her own mother and watching her sister be a mother and found her own way to how she would like to be. Yasmin began feeling like a mother and connecting with her unborn child at the time of finding out she was pregnant.

Yasmin: But (pause) I don't know if I had very strong thoughts about what I would be like as a mother, I guess I did hope that I would be very loving and very gentle and wanting to be more like a friend to my children and that is a work in progress, and I hope I'm achieving that as I go along. (521-524)

6.8 Paradoxes and Tensions

The mothers interviewed shared several paradoxes and tensions in sharing their narrative of becoming a mother and interacting with others. Many of the paradoxes and tensions overlapped between the four dimensions, thus I have presented them based on the paradox and tension itself rather than the Dimensions they fall into. This analysis is based on all eleven interviews, and it should be noted is a brief analysis given the word limitation of the paper.

6.8.1 Paradox: Euphoria and Exhaustion

One of the paradoxes the new mothers spoke about is the exhaustion and euphoria she experienced in the first few weeks after giving birth. An overwhelming sense of love and joy was felt alongside tiredness and lack of energy. The joy of their newborns and becoming mothers helped them get through the exhaustion in these early days. This impacted the sleep patterns of these women too, unable to sleep because of being kept up by the baby or feeling either overwhelming joy or worry. The mothers were exhausted physically and mentally, but through this, they also experienced a sense of excitement in the prospect of their newborns life and their new roles. The mothers also expressed the intensity of being tired coinciding with the feeling of motherhood being rewarding and special. they were able to feel two opposing feelings simultaneously, which did indeed add to their emotional exhaustion.

6.8.2 Paradox: Difficulty accepting support while appreciative of the support

Another paradox experienced by the mothers in this study was a struggle to accept the support being offered to them, whilst also wanting it and at times expecting it and appreciating it. All the mothers were aware of the culturally built concept of 40 days of rest, and of women in the family supporting and caring for the new mother and her child. However, they had all also been brought up and lived in the UK for the duration of their childhood and had taken on a strong identity of independence. The mothers expressed a relief that with motherhood they could step away from some of their usual life duties such as housework, cooking and work. However, some of the cultural expectations did not align with the mothers but were being presented by their families as a source of care and protection. For example, some of the new mother's mothers did not want their daughters leaving the house too often during their postpartum period, while the new mothers wanted to get some fresh air and take a walk with their newborns. They were often told that this would make them sick, and this created tension. However, on the whole, the majority of the new mothers were certain of their outlooks and made boundaries on what help they received, how much and for how long based on their unique needs during this delicate transition.

6.8.3 Paradox: Own Values and Cultural Values

This paradox is similar to the above one, as the new mothers found themselves questioning their cultural values and if these aligned with their personal values. Often, the new mothers did not agree with the traditions their mothers and families applied, and they at times spoke out, whilst in other times, find it too overwhelming to discuss and left things pass. They did however mention, had they not been so exhausted from new motherhood, they believe they would have said something to their mothers/families. Though their cultural values and own values were a paradox in some instances, the mothers also expressed how their cultural and families were a source of protection and care for them during their transition to motherhood.

6.8.4 Tension: Relentless struggle with Breastfeeding

A tension experienced was one related to breastfeeding, with Yasmin, Amal, Rahma, Madina and others being adamant about successfully breastfeeding their newborns, though this did not come without immense mental and emotional struggle. It seemed the physicality of breastfeeding alone was not the only struggle; the implications it came with also impacted the new mothers. Choosing to breastfeed meant some of the mothers could not leave their newborns for a few hours, and their day's activities were suddenly about when their newborn needed feeding and how accessible this was if they were outdoors. Breastfeeding is referred to in the Holy Quran, and though the mothers did not state that their religions signified the importance of breastfeeding their children, it is probable that this too played a role. The mothers also reference to the current research around the benefits of breastfeeding, and through its difficulties, they powered through what was mostly a difficult early journey for these mothers.

6.8.5 Tension: Unprepared but Getting On With It

The mothers in this study expressed how they thought they were somewhat prepared for motherhood, but when the reality of this transition occurred, they felt underprepared and lost. This created doubt and tension in the mother's sense of self. The new mothers reference their participation in caring for younger siblings and nieces/nephews as a reason for this transition to be easier than their realities. They did however manage to power through the sense of doubt and continue showing up for themselves and their newborns. They all expressed that they felt more equipped in the transition knowing they had their families' support and physical presence around them. Those who did not have their families around due to the covid pandemic expressed how they felt they had lost out and somewhat short-changed. they did, however, utilise telephone and video calls through their days and nights with a newborn.

6.9 Inter-relatedness of the Themes

Motherhood is a complex and subjective experience, with each woman experiencing this life transition in a unique way. The findings of this study depicted this uniqueness, and highlighted an inter-relatedness within and across the main ten themes. It should be noted that the methodology used, SEA, breaks up the data analysis into four dimensions, and with this is an advantage of looking at the phenomena from four different perspectives. It does, however, also create a division, where the researcher needs to decide in which dimension an overarching theme is in. This paradox causes a separation whilst still recognising the interrelationship and connection that is without a doubt across all four dimensions. For example, the mothers in this study were mostly adamant to breastfeed their newborns and had all decided on this prior to birth, they however experienced a difficult physical experience that challenges their personal values and decisions.

It has been argued that a woman's transition into motherhood begins at the point of making the decision to have a child (Stadlen, 2011). Though this may be an experience within the Personal Dimension, it quickly impacts the new mothers Physical Dimension, and arguably her Social and Spiritual Dimensions. A woman's entire 'being-in-the-world' is transitioning from womanhood to motherhood. A new mother is not only building a new relationship with her child, but also with herself, impacting her sense of 'being' (Stadlen, 2011), which was found across the themes presented. There is a continuous and ever evolving interrelatedness with her child, loved ones, her whole world, with a particular importance of her own mother in this particular cohort. Bergum (1989) presented that women will experience the inter-relatedness with her newborn through pregnancy, labour, daily life, and the interaction with others. The findings showed the impact and influence of these women's experiences on their interaction with others, and particularly their selves and reaffirming their family and social values. Additionally, women will experience their newborn's in a unique manner through pregnancy, embodying their own selves, with a soon to be anticipated separation at birth that is uncontrollable by the mother. It is only with this separation that the mother begins to experience her newborn as a separate entity, through a paradox of connection of inter-relatedness. With this comes responsibility, which was highlighted through the themes presented above, influenced and impacting by the care and support the mother receives, as well as her expectations of the support she should and would receive.

Sadly, given the limitations of this research, a deeper exploration of the inter-relatedness of the themes cannot be presented, but it is an aim for a separate paper to be written on this topic in the near future. In the final two chapters, a discussion of the results will be presented, before ending with a conclusion of the research, including the implications on clinical practice and suggestions for future research.

7. Discussion

7.1 Introduction

This research project aimed to understand and explore the experience of becoming a mother for British-Iraqi women, to bring light to the cultural impact and traditions, if any, that influence a woman's experience. The research also aimed to understand the meaning of motherhood for these women and understand their experience of care, support, and choices such as breastfeeding, diet and rest.

In chapter six, I explored and presented my findings, framing them within the existential four worlds, using Structural Existential Analysis. Using this heuristic provided structure for the thesis, from the interview questions to the analysis and presentation of the findings. The findings showed a unique and intimate presentation of support and care for the postpartum British-Iraqi woman by her family, particularly by her mother. In this section, I will discuss key theoretical points associated with the themes that arose within each of the four dimensions (physical, social, personal, and spiritual). I will then discuss where the findings from this study sit within the present literature on motherhood and support. By doing this, I aim to highlight the uniqueness of this study alongside other research studies. I will then provide a critical evaluation of my thesis, including an evaluation of the chosen methodology and a critique of the research method used. I will also address my role in the interview process and the potential bias that was present. Finally, I will consider the relevance and importance of my findings to the field of psychology and counselling, suggesting potential avenues for further phenomenological research.

7.2 Overview of Findings

The mothers in this study described their experiences of becoming a mother, focusing on the first 40 days postpartum, within the context of their experiences as British-Iraqi women. All the women interviewed were married to and living with the father of their child and had the presence of family support. They recollected details of the first few weeks after giving birth, and the impact and influence their beliefs and values, both cultural and religious, had on their experiences. Of the eleven mothers interviewed, one was a practising Christian, with the rest identifying as practising Muslims. It was clear faith played a strong and important role for all the mothers, yet the influence of culture and traditions showed that there was no significant difference between the Christian mother and the other mothers interviewed.

A heuristic analysis of the participants' experiences was presented in Chapter Six, where ten main themes emerged from the interviews: the physical experience of becoming a mother, breastfeeding, the experience of support, the impact of culture, the importance of 'mama', emotional response, thrownness of motherhood, interwoven identities, religious and cultural beliefs and establishing values. These themes echoed these mothers' lived experiences of motherhood during the first 40 days as British-Iraqis. The themes paint a fitting backdrop to the essence of the phenomenon, providing a meaningful description of the research question.

Overall, these British-Iraqi mothers regarded their experience of familial support to be pivotal in the outcome of their experience postpartum, bringing forth memories of a constant and supportive system in place, both practical and emotional. Most of the mothers spoke of not knowing how they would have coped in those moments without this support. Some of the mothers were impacted by the pandemic, resulting in a reduced presence of practical face-to-face support from their families after the birth of their children. It seemed these women and their families found a way around still accessing the support, less conventionally, in the form of food regularly being dropped off to the new parents and video calls around the clock to ensure the mother was not left alone in navigating her new role. The mothers also all expressed gratitude towards God for helping them through the difficult moments and blessing them with the gift of motherhood, all of whom viewed it to be an elevated status in the eyes of God.

The findings of this study increase our understanding of what the experience of becoming a mother is like for British-Iraqis. It also brings to light the significance of the social impact of receiving a unique form of support from family during the difficult first few weeks of motherhood.

7.3 The Bi-Cultural Identity of New Mothers

This study focused on the experience of becoming a mother for British-Iraqis, to increase our understanding of how their identities influenced their experiences during the first 40 days. The study uniquely addresses what it means for a bi-cultured woman to navigate the complexities of motherhood whilst navigating her values and beliefs that may be culturally influenced by her environment. There is minimal previous research exploring the experience of motherhood for Arab women, and none so far specifically considering the experience of first-generation British-Iraqi women. A previous study by Bawadi (2009) explored the experiences of childbirth for migrant Arab Muslim women in the UK, whilst Davies (2013) explored Arab Muslim women's experiences of maternity services in the UK. There is a clear distinction between studies exploring motherhood in the West, and studies exploring the impact of living in the West on migrants. This study, however, explored the experience of women impacted by their parent's migration to the UK, where they have cultivated a unique identity for themselves stemming from British values and their parental-influenced Iraqi values.

The women in this study experienced a shift in their being-in-the-world and began constructing a new image of themselves that differed from that of their mothers. What was fascinating is that most of these women spoke of how their values are in harmony with those of their Iraqi friends who are mothers, those within the same generation as themselves. It became clear that a new collective identity within the Iraqi community had been created for these first-generation Iraqi mothers. The data revealed that the women started valuing their choices and questioning their traditions and values, whilst still holding a profound respect towards their families, particularly their mothers. There remained a strong reliance towards God, and an underlying expectation from the mother's family to step in and be present if needed. Different to the results found in Lamba's (2015) study on the experiences and understanding of PND in migrant Pakistani-Muslim women, the mothers in this study were able to voice their choices to their parents without fear of upsetting them or overstepping cultural respect towards elders.

The mothers in this study also found themselves more able to make their own choices without the pressure from family, comparing their situations to being very different to those of their families living in Iraq. There was a sense of gratitude that living in the UK meant their voices as mothers were heard more, whilst still holding onto the traditions that meant they were held, supported, and cared for by their families.

The findings emphasised that with the freedom to make choices within the new mother's role, they were able to live more confidently in their new world and identities. This is supported by the findings from Hernández-Albujar's study (2004) where they found that Latin American women living in America had adapted to their new familial roles, finding a more balanced share in power dynamics with their husbands, including decision-making and responsibilities. The women in this study spoke of how it was the new

norm for their husbands to be helping around the home and with childcare, an aspect that had changed from that of their parents' generations and beyond. A culture with overlaps with the Iraqi one is the Iranian one. Darvishpour (2002) found a shift occurring within Iranian families residing in Sweden, from a more traditional family power structure to one that is more balanced and democratic, with the women being more independent. The mothers in this study too expressed the importance of independence for them, with most of them having jobs but choosing to take time out during early motherhood to recover, adjust and spend time with their newborn. Some of the women were in positions during the time of being interviewed where they were considering childcare options, most of which were family-based rather than nursery-based, for their one to one and a half year old. They also shared a feeling of being supported by their partners and parents to return to work, emphasising a more equal balance between the new mother and the new father. Bawadi (2009) found that Arab Muslim women residing in the UK were able to integrate into British society, allowing them to "achieve more egalitarian conjugal relations" (p. 240). This seems to have been the shifting present within the sample in this study too, though the women in this study were confident in their British identities, taking from it what suited them and helped them grow within their lives. What is clear is that the experience of motherhood was a unique one for British-Iraqi new mothers, with a mixture of two cultures influencing their outlook, beliefs, expectations and self-expectations of what kind of mothers they wanted to be. In addition, the presence of clear, reliable practical support from the family postpartum, particularly the new mother's mother was embraced and helped the women in this study through this difficult yet beautiful experience.

The World Health Organisation (WHO) has proposed that maternal care is best built around our understanding of a woman's physical, mental and social needs (Mooney et al., 2007). However, childcare practices and care for the new mother differ across cultures and religions, and this becomes even more unique yet merged for mothers who have experienced and been influenced by more than one culture, such as British-Iraqis. Uniquely, research by Crowther and Hall (2015) honed into the importance of spirituality in addition to our physical, mental and social needs. They reported an increase in literature around the importance of spirituality not just during the end of life, but at the beginning of life, such as childbirth, as well as its links to the wellbeing of humans. They however found that there is a limitation in this importance being applied into the postnatal and midwifery care provided to new mothers. Clinical and scientific evidence has found that humans are not only physical, mental and social beings, but also spiritual beings, however this aspect is not yet well understood (Moreira-Almeida, 2013). This is not yet included in the WHO's proposals for maternal care, and Crowther and Hall (2015) have supported the need for spirituality to be included in peri and postnatal care of new mothers. It is with hope that the findings of this research too add to the evidence towards the importance of a spiritual stance care for new mothers in the UK, regardless of background.

7.4 Physical Dimension

The transition from womanhood to motherhood starts from an embodied experience that evolves, impacting the other dimensions of a new mother's life. From the physicality of conception, a woman's physical bodily response begins impacting her everyday life. It came as a shock to the mothers in this study that the physical experience of motherhood continued after the months of pregnancy ended. New mothers were immersed in the daily routines of their newborn's needs, through changing them, feeding them, and caring for them all whilst being unexpectedly sleep deprived. Though the mothers in this study anticipated to an extent sleep deprivation, it came as a shock to them how much this impacted them in the early days, and how much it placed a physical and emotional strain on them. Two main themes emerged within the physical dimension which will be explored and discussed below.

7.4.1 Theme 1: The Physical Experience of Becoming a Mother

The below four subthemes were found within the first theme:

1. Trauma of Birth
2. Post-birth impact
3. Body image and expectations
4. Sleep exhaustion

A prominent feature of motherhood and the female identity is the possibility of carrying a child and giving birth (Battersby, 2006). Women hold a conscious knowledge of their physical potential for childbearing and childbirth and may experience a paradox of emotions around this phenomenon, particularly before becoming mothers. The women in this study had a layered addition to these features of motherhood, with their cultural identities influencing how they viewed the phenomenon of motherhood and the role of mothers in the family system.

Numerous writers such as Stadlen (2020) and Barclays et al. (1997) have spoken about the continuous exhaustion experienced by new mothers, both physical and mental. Harley (2005) shares her insight into a mother's experience of feeling 'drained' from existing in a being-mode, whereas previously she may have been in a doing mode. The Being mode can be isolating whilst also allowing the relationship with the newborn to unravel authentically. The new mothers in this study were taken aback by the impact birth had on their bodies, with most aspects being unanticipated. They had held the view and expectation that following the event of labour, they would return to their strength and health fairly quickly. They spoke of being surprised by the postpartum pain, the womb contractions, and the long weeks of bleeding. They were hyperaware during pregnancy of the changes in their bodies, the space being made for their newborn and their bodies nourishing their unborn child. With the end of labour, the baby disconnects their internal embodied attachment to the mother, leaving the mother to face the impact of her body enduring the trauma of labour and the post-birth impact. Alongside navigating their bodily changes, the

mother becomes the carer for a wholly dependent newborn that remains their own person, with their own body and feelings. The mother is faced with embracing the choice of motherhood, the choice of responsibility for another and for her new role. Sartre's paradigm shift can help us understand this process, with the new mother adapting and embracing her new role and identity, heightening the understanding of responsibility towards another and feelings of fragility, anticipation, and anxiety. Though some women begin to feel like mothers at the point of conception, physically birthing a child represents a new phase of motherhood (Hartley, 2005).

The women in this study also shared the unanticipated shock of the impact birthing their children had on their bodies physically and mentally. This concept is shared by Prinds et al. (2013) who found women's experiences to be similar, noticing the physical limitations during a time when mothers are emotionally vulnerable and transitioning through to motherhood. Through the physical pain experienced after birth, the women in this study had to remain strong to ensure their babies were fed and well looked after. The dependence on another increased their worries and made it harder for these women to process their own experiences. Similar findings were highlighted by Vik and Haftin (2012) who reported that new mothers' anxiety is heightened due to the dependency their newborn has on them for survival.

The mothers in this research were mostly taken by surprise by the impact pregnancy had on their bodies and found their pre-pregnancy expectations did not line up with the reality experienced. Though there was a strong sense of gratitude towards their bodies for being strong enough to carry and birth their babies, it did not stop a sense of loss towards their previous bodies. This is different to what was found by Garland (2019) and McCarthy (2015) who found mothers able to 'get back their bodies' and experienced a sense of social acceptance for being able to do so.

One mother in this study expressed that though she did not struggle with her body image as such, describing herself as "very skinny", she found herself viewing her body differently, somehow seeing it as a "mother's body" now. This impacted how she began to carry herself and dress, an aspect shared by some of the mothers in Garland's (2019) study. This is also echoed by Bailey (2001) who shared the concept that women were feeling like their bodies existed for an "other" rather than for themselves. Depending on the role they are living in the moment, they can step in and out of these roles and what demands they bring with them. This transition involves many changes both internal and external, stressing the density of the relationship between the mind and body (McCarthy, 2015).

Becoming a mother consists of a physical change, one that starts at conception and begins to grow out through pregnancy. The mothers in this study believed that with birth their prior bodies would be returned to them, and in a manner, the way they existed in the 'old' body would also return. However, this was not the case, and as highlighted by McCarthy (2015), motherhood involves both internal and

external shifts to the self, carrying with it a mental load for the new mother to navigate through between her bodily expectations and emotional and mental desire. Some of the mothers described looking similar to how they did before becoming pregnant, however feeling very differently so much that it impacted how they began to dress and carry themselves. This finding concurs with the findings of Bailey (2001) who described women feeling their body is for an ‘other’, impacting their wardrobe choices. This can be linked with Sartre’s (1956) discussion about “being for others” where he states that relationships can emerge because of people’s attraction not to the other, but to how the other makes the person feel about themselves. New mothers can find themselves making choices based on how others make them feel about themselves, in this case, the presence of their newborns makes them feel like mothers, leaning towards choices that may make others and themselves perceive them as mothers. There is a complex and paradoxical relationship between the body and the mind which may create further tensions for women as they transition into motherhood (McCarthy, 2015).

All the women interviewed in this study expressed an elevated experience of sleep exhaustion during the early weeks of motherhood. This was the most critical cause of distress reported by the new mothers interviewed. The continuous responsibility both emotionally and physically for another human being was described as overwhelming and exhausting. The tiredness and exhaustion experienced by new mothers have been described as a ‘league of its own’ by Stadlen (2020, p110) and seemed in parallel to the experiences of the new mothers in this study.

Similar to the findings of Arnold-Baker (2015), mothers in this study were shocked by the reality of motherhood. The new mothers in this study had an anticipation that their experiences would be like that of looking after their nieces and nephews, and this somewhat impacted their expectations that they were more equipped to face motherhood because of this. Additionally, they had the presence of their mother’s practical support in some form, also adding to their assumptions that this would mean their experience would be smooth. However, their pre-conceived picture of motherhood as being calm and smooth was different to the reality of motherhood which jolted their system as well as their daily routines. In Figs’s (1998) book on motherhood, she described the presence of a “nurture shock” to new mothers, this concurs with the experience of the mothers in this study who experienced a physical and emotional shock to their realities with the birth of their new selves and newborns. This view is also shared by Stadlen (2005) who describes the postpartum tiredness a new mother experiences as arriving as a “rude shock”. The sleep exhaustion adds to the new mother’s challenges, falling in the way of her process of understanding and absorbing her new role.

7.4.2 Theme 2: The Choice to Breastfeed

Three subthemes were found within the second theme:

5. Motivation and determination

6. Initial difficulties of feeding
7. Maternal-infant bond

The women in the study expressed a firm desire and commitment to breastfeed their newborns. However, this also came with a shock of the difficulties that came with this physical, emotional, and spiritual process. They did not have to breastfeed their newborns, but they had made an active decision to do so during their pregnancies. Jacobsen (2007) describes decision-making as a phenomenon that unravels when there is more than one option, and by choosing one road we are rejecting another. The mothers in this study had made an active choice not only to try and breastfeed but were also determined to continue doing so. There seemed to be a necessity in continuing their breastfeeding journey albeit the difficulties for these women, with most managing to get through the physical difficulties, allowing them to reach an enjoyment in the emotional bond. Making this decision meant these women became responsible for their newborn in an additional way, with the consequences being the initial pain, finding private places to breastfeed if outside the home, as well as expressing if they needed to leave their baby in the care of someone else. The decision to breastfeed was also made by these women during their pregnancy, both influenced by their families and culture as well as reading resources around the benefits of breastfeeding for both mother and child. Existential theories view the body as being 'lived' and embodying the consciousness within our world (Langridge & Finlay, 2011). This process of living through our physical body is key to our experiences. This is important to consider when looking at the choice to breastfeed. Embodied experiences such as breastfeeding can be understood through existential givens (Letunovsky, 2004).

It was proposed by Merleau-Ponty (1962) that the mind and body cannot be understood as separated but are a unified whole. Our physical bodies are core to our understanding of our experiences. The new mothers were connecting with the world of motherhood, experiencing it through a paradox of struggle and joy. In this process, they were able to create meaning of their experiences (Deurzen, 1997). This view is shared by Nietzsche (1883) who believed our bodies are the grounds where we express ourselves and reflect on the identity we hold.

McCarthy's (2015) findings echoed what was found in this study, that breastfeeding is an important piece of a new mother's physical bodily experience, though rooted in cultural and societal practices and expectations. The mothers in this study for the most part found breastfeeding to be enjoyable and pleasurable once they overcame the initial hurdle and struggle, similar to the findings of Schmied & Lupton (2001). Different to their findings, this study did not show these new mothers struggled with physical practices concerning their independence and control as well as value and acceptance. There was an overarching acceptance that this was a piece of the larger picture of motherhood and that breastfeeding is valued and exalted amongst the Middle Eastern cultures. This is not to say that some of

the new mothers did not struggle, such as *Yasmin* who reached out to her midwife and sister for support and guidance with breastfeeding.

Research has found that support is a significant factor in successful and continued breastfeeding (Lavender et al. 2005). They reported that having physical and emotional support for their families, healthcare providers and friends increased the period women would breastfeed their baby. Within Arab communities and particularly in Arab countries, it has been found that women do receive such physical and emotional support both during and after labour (Bawadi, 2009). It could be concluded that this may have influenced the decision to breastfeed amongst women in this study, as well as their desire to continue feeding their babies. According to Rassin et al. (2009), Arab women have been found to opt to breastfeed due to the societal and cultural influence they are surrounded by, which may include the gentle urging towards breastfeeding present in the Holy Quran.

Research has found that breastfeeding has been encouraged amongst Middle Eastern and Southeast Asian communities (Liamputtong, 2013; Brathwaite & Williams, 2004; Ariff & Beng, 2006; Bawadi, 2009). Often women are looking forward to breastfeeding, with the desire to continue for up to two years, a time-span that is mentioned in the Holy Quran. These findings are echoed by this study, where all the women shared a desire to breastfeed, continuing through the initial struggles. Research has shown that the UK has below the international average for breastfeeding rates and is lower compared to other European countries (Lavender et al. 2005). It has been recorded that only 17% of mothers in the UK exclusively breastfeed their 3-month-old babies, a rate that further drops by 4 months postpartum (WHO, 2023). Data from Iraq has shown that 9 out of 10 children are breastfed at some point in their lives, with 25.8% being exclusively breastfed for the first six months (UNICEF, 2021).

7.5 Social Dimension

The shift from being accountable for your own care to being accountable for the care of a vulnerable newborn changes a new mother's social world. Not only does it open up the opportunity to connect with and understand other mothers in a new and authentic manner, but it also restructures the social relationships one had from becoming a mother. In this study, all the mothers spoke about how their relationships with their own mothers changed, adding a more understanding sphere for these women. They also found themselves making social decisions around their newborn's needs, recalling a life not soon before where they had not thought twice about committing to social events. They have entered a dimension where a new relationship is unravelling, one built upon the instinct of protection, care, and nurturing. This new relationship impacts the new mother's other relationships, as now they tend to the needs of their child before their own needs. This did not mean the new mothers "lost" their social lives, rather their social worlds altered, making space for pre-planning, childcare, and extensive preparations before a mother socialises how she previously did. Ultimately, these women's social worlds changed, with some of these changes being favoured as it was more fitting for the new mothers' lives. Three main themes emerged within the social dimension which will be explored and discussed below.

7.5.1 Theme 3: The Experience of Support

Four subthemes were found within the third theme:

1. Role of family
2. The importance of friends/visitors
3. Receiving advice
4. Support from Midwives

One form of support the new mothers reported receiving was from their midwives. Though the input was not always in line with that that they received from their mothers and family friends, it was welcomed by women in this cohort. Many studies have shown the importance of midwives in decreasing a new mother's anxieties through pregnancy, childbirth and postpartum, including studies that explored the experiences of migrant Arab women (Bawadi, 2009). Yasmin shared how valuable it was to have her midwife visit after the birth of her daughter, where she was allowed a safe space to share her feeling of overwhelm and worry about the struggles of breastfeeding. Bawadi's (2009) stated that one of the most satisfying aspects of the migrant Arab women interviewed in her study was the home visits they received from healthcare professionals. Having care being extended not just from family and friends but also from professionals helped these women navigate the transition to motherhood.

The women in this study showed an appreciation for the midwives who cared for them, but there was an underlying expectation of further support continuing at home that lessened the light on midwife care. In Bawadi's (2009) study, heightened importance on midwives was made as the mothers were migrants and

often did not have their own families around for support and were not viewed as having a “consumer-provider relationship”. The mothers in this study felt equally British as they did Iraqi and expressed confidence in their identities as well as their trust in the healthcare system. This aided their experiences, and they were able to utilise the advice from midwives that aligned with their own values. Some of the mothers were able to reach out to midwives for support around breastfeeding, but it is important to note this was not their only source of support around motherhood. The presence of supportive midwives undoubtedly, helped these new mothers navigate the new world they were adjusting to, and they did not experience any judgement due to their differing values. However, with the continuously changing cultural identities that women hold in the UK, healthcare professionals must remain not only culturally sensitive but also competent when providing maternity care.

In Bawadi’s (2009) study, the women reported feeling low and exhausted postpartum, which was partly attributed to the lack of social support for their families due to distance. The women in this study too expressed feelings of confusion and exhaustion, and at times feeling low, though they had their families around them. It can be argued that having a social support system, one that provides practical care to the new mother may benefit her emotional and physical recovery, however, the existential crisis (Arnold-Baker, 2020) that is born with motherhood should not come as a shock given the difficult emotions that arise with it. This view is supported by Hoang et al., (2009) whose results uncovered that the social support during the postpartum confinement period in Asian culture is intended to sustain the physical and mental well-being of new mothers.

Research has shown that motherhood brings with it a social shift that is distinctive to humans (Rosenberg, 2012). The presence of social support can be an expression of empathy and understanding and is vital for the new mother and is an important factor in support of the mothers' psychological well-being (Stern, 1995; Stadlen, 2011). Kruckman (1992) found that in cultures outside the Western ones, mothers are provided with more support to aid their adjustment to this new transition. A formal and expected unveiling of support is not found within Western societies, though Arnold-Baker (2015) highlighted two features of the social dimension that are important during the transition into motherhood. The first was around support for the new mother around the duties of caring for a newborn whilst the second was about how this transition impacts the mother’s relationships with others around her - Arnold-Baker’s study was conducted in the UK. The current study has shown that mothers welcomed the practical postpartum support provided by their families as well as an impact on their relationships, particularly an increased understanding of their own mothers and closeness after becoming mothers. The presence of honest communication with other mothers has been found to help mothers feel supported (Price, 1988). Price (1988) also found that the company of social support aids a mother's emotional and psychological responses to the strains of motherhood. This view concurs with the findings of this study. The mothers spoke about sharing their worries with their mothers and sisters, as well as not

needing to worry about the cooking and cleaning, which helped them focus their attention on bonding with their babies. The mothers felt less isolated as they knew they were not facing motherhood on their own, but rather had their husbands, mothers, and sisters to carry them through. Research has found that satisfactory social support reduces the level of stress within a situation, the larger the social support the more likely the prospect that a mother's needs will be met as she is more easily able to meet her baby's needs (Goldstein et al. 1996).

Arnold-Baker's (2015, 2020) research highlighted how the shift in a woman's social relationships upon becoming a mother can be explained by Heidegger's (1996) being-towards notion of how the mother relates to her newborn, as articulated by Arnold-Baker (2015). By the mother allowing herself to be vulnerable and open within herself to care for her newborn, she needs to see beyond the baby being an object, but rather a being in themselves that is deserving of understanding and care. This too is similar to the I-Thou concept by Buber (1970/2000), where a mother submits herself to connect with her newborn. Buber also refers to an 'inborn-Thou', a concept that refers to the innate instinct to build a relationship and connection with the newborn. He also claims that when a baby is born, they have a desire to seek out an I-Thou relationship. When a new mother begins to relate in this unique way with her newborn, she may be able to apply this understanding in her other relationships. The women in this study expressed a greater understanding and appreciation of their mothers and other mothers since becoming mothers.

7.5.2 Theme 4: The Impact of Culture

Three subthemes were found within the fourth theme:

1. Providing support
2. Expectations of 40 days
3. Making own choices

The women in this study were experiencing motherhood in limbo between that of a meshed family system and an autonomous nuclear family system. They had the clear presence and involvement of their mothers and sisters, whilst remaining nuclear with their husbands about parenting choices. What was clear though was that all choices were expressed to their meshed families with respect and mostly were accepted with love and understanding. They were able to remain autonomous of their choices whilst still involved in a meshed family, not losing the support, both practical and emotional, from their families. Within the Arab culture, childbirth is on the whole regarded as a female-dominated experience (Bawadi, 2009), the women in this study all had their husbands present during labour, with many of them also having their mothers as their second birthing partner. The families of the new mothers have recreated something similar to what they culturally would have had in Iraq, a support network of women to care for the mother and newborn during this period. What was interesting is that the role of the husband was not cancelled at all, and all the new fathers had parental and marital responsibility. This is different to how it

may be in Iraq, though things have changed in the last decade. On the whole, men will have a lesser role during the postpartum care of their wives, both practically and in relation to making decisions. Listening to the women, however, it felt that the husbands fit in silently to the needs of their wives, by the direction of their mothers-in-law, stepping up when needed and stepping back when needed. However, it felt that the husbands fit in silently to the needs of their wives, by the direction of their mothers-in-law, stepping up when needed and stepping back when needed. This seems to be part of the new bi-cultural experience of British Iraqi mothers. All the women in this study saw their husbands as a vital support to them through pregnancy, delivery and postpartum. However, the presence of an older female added a different kind of support for the new mothers. This study highlighted that by living in the UK and adopting a British identity, the mothers interviewed had moved towards a more modern application of the postpartum period, without losing the core aspect of support within their tradition. It became clear that though the new mother had a voice to express her choices, she equally engaged and welcomed the care presented to her by her mother and others during this special time. They continued to hold onto traditions regarding food, keeping warm, and religious duties such as circumcising their male babies and a spiritual bath on the tenth day after labour. However, the women no longer adhered to the 40 days of rest in the way it may have been adhered to in the past. This means they did not limit themselves to staying at home until 40 days were over, distant from their husbands and other members of the family. One mother described that her own mother held strong traditional values regarding whether a new mother could visit a pregnant mother, and this was the situation present with her sister at the time. She tried to hold onto this but found herself respectfully explaining to her mother that she had to and wanted to see her sister. Similar to the results in the study by Ny et al. (2007) where they explored the experiences of women of Middle Eastern background living in Sweden, this study found that the mothers considered their husband's participation in their labour and postpartum experience as a positive one. The men were welcomed to step in to help with what was previously a traditionally all-female role of care and support. They shared that they felt more understood by their husbands after they had witnessed first-hand their struggles.

The most prominent cultural practice that women in this study practised was the extensive care and support provided for a postnatal woman, particularly by the females in her family. There was also a concern about the mother's emotional well-being, with all family members being sensitive to her needs, and keeping away stressful news from her to avoid impacting her well-being. By taking charge of the cooking, cleaning and laundry, the new mother was able to place her energy and focus on caring for her newborn. Another one was the importance placed on welcoming guests to visit the new mother and new child, bearing food for them, most of the time this food was tailored towards using foods believed to support the healing process, such as iron-rich food, as well as foods that help with milk production. The new mother was advised to eat a healthy diet, mostly warm food and to wrap up warm even if she is

feeling hot to help her bones strengthen following the physical trauma of childbirth. These findings are supported by Bawadi (2009) who found similar results.

This study is the first to explore postpartum customs amongst mothers who identify as British-Iraqi. Other studies have been conducted exploring Arab Muslim customs (Bawadi, 2009) and second-generation Nigerian migrants (Ofori, 2020) both of which were conducted in the UK. Research has also explored postpartum practices amongst ethnic women with different socioeconomic backgrounds to the women presented in this study (Richens, 2004; Pollock, 2005). However, no previous study has explored this unique identity and experiences of becoming a mother for these women.

Previous research has shown the importance of diet postpartum in different cultures, particularly across areas of the Middle East and Southeast Asia (Liamputtong, 2013; Brathwaite & Williams, 2004; Ariff & Beng, 2006). This mostly was about the postpartum body being in a 'cold' state, needing support to reach a warmer equilibrium. This view is concurred by the findings of this study, with women sharing that they were advised to wrap up warm and eat warm foods rich in iron. In Thailand, a postpartum ritual known as 'yu fai' is observed which includes the new mother lying on a wood bed over a warm fire for the first month postpartum to re-establish the lost heat through labour (Liamputtong, 2013). The concept behind these cultural traditions can be found across many Eastern cultures as found by Ariff and Beng (2006). Kridli (2002) found that pregnant women living in the Middle East emphasize their diet and rest, being encouraged to avoid vigorous work.

The mothers were navigating a world of making their own choices whilst respecting the presence of the support they had, all while navigating the inevitable anxiety and worry about being in a new and unknown situation. According to Sartre (1956), worrying can be viewed as the person exploring the options of choice they have. Some of the women spoke of allowing certain things to happen due to the sheer exhaustion from motherhood, reflecting that they may not have made the same choices had they been less tired and anxious. Stadlen (2005) uses the term 'intelligent motherly concern' rather than worry, a term that seems fitting for these findings. The women stepped away from certain details to be more engaged with the needs of their newborn, choosing which battles to face. Worry is also seen as a primitive and evolutionary response to potential dangers (Stern, 1998). The women in this study worried more about their ability to be good mothers, continuing to stay connected with their babies whilst continuing their lives as working women, wives and daughters.

7.5.3 Theme 5: The Importance of 'Mama'

Two subthemes were found within the fifth theme:

1. Endless support
2. Practical care

The mothers in this study all placed huge importance on their mother's role, and how their image of their mothers shifted after they became mothers themselves. There was a presence of a renewed appreciation for their mother, with her not only caring and providing for her grandchild but also providing for her daughter during this vulnerable period in her life. All the mothers in this study recalled how their relationship with their own mothers changed, and they reflected on how their values, both religious and cultural have impacted how they responded to their mothers as teenagers. There was an understanding, and somewhat of a light was thrown onto the relationship, with an aspect of equality between the two mothers, one older and one new. Freud (1933) referred to this concept that a woman will probably revive her identification with her mother during the process of becoming a mother herself. The women in this study shared that at times in their younger years, they struggled with their relationship with their mothers. Murray-Parkes (1971) has suggested that the mother-daughter relationship is like a life cycle that includes significant markers. These markers (adolescence, marriage, motherhood, and old age) can alter the state of the mother-daughter relationship. The mothers in this study shared that motherhood allowed them to change their outlook on their own mothers, supporting the view of Murray-Parkes (1971).

It should not come as a surprise that the role of one's mother is significant when a woman enters motherhood, with several studies highlighting that mothers will redefine their relationships with their mothers when they are mothers themselves (Darvil et al. 2010; Hartley, 2005). The mother is the primary caregiver in most family dynamics, and being the one who physically endures childbirth, holds an importance in the child's development (Onayli & Erdur-Baker, 2013). It raises the question then if this importance ends when a child becomes an adult. The findings in this study have shown that these grown women find comfort, care and importance in their mother's roles towards them during this life transition. Fischer (1991) found that the mother-daughter relationship has the highest emotional connection than any other familial dyad, highlighting the importance and determining role this relationship has in the life of new mothers. the presence of parental support is impactful on a new parent's attitude towards their new identity (Tammentie et al., 2003). Stern (1995) also found this relationship to be a predictor of the new mother's attachment pattern with her newborn, stressing again, the importance of mama.

Several of the women in the study wanted their mothers as well as their husbands to be present for the delivery of their babies. They expressed wanting a different kind of support, spiritual support, that they wanted to receive from their mothers. A similar finding was present in Bawadi's (2009) study where seven of eight women wished either husbands or mothers to be present for labour, which they felt helped them endure this physically and emotionally demanding experience. Research by Madi et. al (1999) found that the presence of emotional support from close friends or relatives for the mother during labour can reduce the need for medical intervention and complications. As a mother who has now experienced labour three times, this finding does not surprise me as labour is beyond a physical experience but is it an

overwhelming spiritual and emotional paradox that requires deep strength. However, this is not to say the lack of support during labour brings about complications, rather the presence of support can help elevate a new mother's distress. A Cochrane Review by Dennis et al. (2009) found that continuous support through labour decreases maternal and neonatal morbidity.

The mother-daughter relationship has been described as potentially being the oldest relationship a mother will know (Stadlen, 2005). Findings from Garland (2019) showed that mothers re-evaluated their relationships with their mothers, and this impacted their values around mothering. They shared that reflecting on their mother's mothering allowed them to be more understanding towards them, having been thrown into the paradox of motherhood themselves. Similar findings were recorded by Arnold-Baker (2015) who found that mothers not only became more understanding of their mothers but also began to perceive their childhood experiences through a different lens. These findings are in line with both studies, with the new mothers showing gratitude and increased importance to their own mothers. they began to appreciate her struggles and noticed that she had her own challenges at the time she mothered them.

7.6 Personal Dimension

Arguably the most significant shifts from womanhood to motherhood are through our personal dimension of existence. The physical changes may on some level be anticipated, while the social changes also unravel with a level of awareness and expectation. However, many women before having a baby will believe their lives will practically change but do not realise at that point that a hugely defining personal change occurs. A new mother's values are put into question as well as her ability and willingness to accept hardships shifts. The start of this new stage brings along with it a questioning of our inner selves (Prinds et al., 2013), faced with continuously conflicting views and understandings of the world that require constant reviewing of what works for the new mother now, in her new role(s). what occurs for most women after the initial wave of chaos after the birth of their child, is the birth of their maternal identity. Below a discussion of the three main themes found within this discussion will be presented.

7.6.1 Theme 6: Emotional Response

The sixth main theme was named Emotional response, and four subthemes were found within this theme:

1. Anxiety and uncertainty
2. Overwhelming sensations
3. Paradox of Love
4. Sleep exhaustion

The results thus far have shown that a woman's world and way of relating to it changes when she becomes a mother. A large part of this is rooted in the new mother's emotional response to herself, her newborn and those around her during this sensitive and life-changing period. The women in this study expressed anxiety over the uncertainty of how motherhood was unfolding for them. This brought about a level of overwhelm, leaving them feeling vulnerable and at times doubting themselves and their ability to live up to their self-expectations of being a mother. However, the transition to motherhood also came with an overpowering love for their child, a respect for the role of "mothers" and a desire to live up to being the "best" mother they can be. This became trickier to work through all the while dealing with intense sleep exhaustion. Amal shared that she thought she understood motherhood and respected the role it had within the family unit, but upon becoming a mother herself she realised her understanding of motherhood prior was somewhat limited. This view was shared by the other participants too, and also in the findings of Arnold-Baker (2015) who identified that women became more understanding of others when they became mothers.

The mothers were living in the present care for their newborn, with it overtaking all other areas of their lives, limiting the space to be engaged in other relationships. Through the entanglement with their newborn, the women struggled to attend to their own emotional needs and to have the space to face the

transition they had gone through. Only months after this shared entanglement were they able to recognise the shift and the impact it had on them, which was influenced by a lack of sleep. The exhaustion and consuming nature of motherhood can be linked to Sartre's (1943) concept of 'existence precedes essence'. The mothers were focused on simply existing, responding, interacting, and caring for their newborns, at times a repetitive and exhausting cycle. Once this system settled, they were able to recognise the experiences they went through.

The new mother is in a state of I-Thou with her newborn, vulnerable yet focused on their needs. Similarly, this has been described by Stadlen (2011) as the mother creating 'heartoom' for her new relationship with her child. In this study, the mothers seemed to not only provide headroom for their newborns but also their own mothers as this relationship was reborn.

According to Raphael-Leff (2001), mothers respond to their newborns either as 'facilitators', 'regulators' or 'reciprocators'. The latter implies the relationship is interactive and two-sided, with both the mother providing comfort for the child as well as the child providing comfort for the mother. Having three categories to describe the relationship between a mother and a child is arguably simplistic, pathologizing and does not account for the complexity of human relationships. However, it can be used as a way of beginning to understand the ways a woman may respond upon becoming a mother. The 'reciprocator' way of responding is most fitting with the experiences of the mothers in this study, though there remain numerous emotional levels to the mother's response and interaction with her newborn and others. The mothers were initially communicating with their newborns in an embodied and non-verbal way. However, they shared they quickly began speaking to their babies as if they could understand all they were saying. They began to involve them in their prayers by keeping them nearby while they prayed and having the Holy Quran on in the background as they breastfed them. Breastfeeding is a non-verbal embodied experience that can be understood through the work of Merleau-Ponty (1962). The women were communicating through their bodies, and at times through the pain, suppressing it for the needs of their newborn.

The women in this study spoke about the unanticipated shock they experienced in becoming mothers. Kitzinger (2005) also conducted interviews with new mothers within the first few weeks after labour. They expressed a shock at the reality of motherhood and described how it impacted their established routines and lives. Figs (1998, p.23) saw motherhood to be a shock to our existence and believed that mothers who express motherhood unfolding as they expected it to are "probably lying". Women in this study expressed the wish that people had spoken to them about the difficulties surrounding motherhood beforehand, rather than just expressing the beauty of motherhood. This view is supported by Stadlen (2005) who explained that the shock of motherhood is increased because we remain uninformed. This view is also highlighted by Price (1988) who emphasises how the outlook on motherhood within society

is often disguised by positive and cheerful experiences, impacting the way women view motherhood, and also leading them to doubt their responses to motherhood once they enter this transition. Kristeva (2002) and Miller (2005) have referred that the process of feeling like a ‘mother’ is often slow and gradual, a view that concurs with the findings of this study as the mothers began feeling more themselves the longer they were present in their new role.

Furthermore, the mother does not have time to process the changes occurring in her life, which may add to her shock. The reality of their experiences did not align with how they expected motherhood to unfold, a view that concurs with Read et al.’s (2012) research. Thus, there are limits to our freedom to experience this transition in its entirety, as it is clouded by our expectations before the experience. In becoming a mother, a woman is thrown into the unknown, putting into question all she believed she understood. It opens up a door for values and beliefs to be questioned, and/or strengthened through the process, influenced by our expectations of the situation. Early motherhood places women in a vulnerable position where their sense of control may be limited. These can be seen as being in an ‘ultimate situation’, as described by Jaspers (1951). This refers to our limitations in existence, such as those experienced by new mothers. The unknown begins through childbirth, a worry the women in this study expressed, that they could not confirm labour would go as they planned, with a few experiencing their newborn's heartbeat drop. Such an experience throws our existence into further unknown and anxiety. This is followed by the unknown of learning how to adapt and care for the newborn whilst the mother is recovering herself, both physically and psychologically.

7.6.2 Theme 7: Thrownness of Motherhood

Three subthemes were found within the seventh theme:

1. Life before
2. Shift in Independence
3. Unexpected reality

The point of motherhood beginning is sometimes referred to as the moment of conception, whilst other times referred to the moment of birthing your child and simultaneously birthing a new identity for yourself as a new mother. Participants in this study were asked about their expectations of motherhood, and what life was like for them before compared to now. All eleven participants shared common themes relating to the thrownness of motherhood, sharing that they had a shift in independence and felt that their life before the birth of their newborn felt distant like it was in a different dimension. Similar experiences were reflected in the findings of Prinds et al. (2013) and Garland (2019).

The mothers in this study, similar to that in Arnold-Baker’s (2015) study, shared that their lives became more immediate and temporal following their newborn’s arrival. The previous day-to-day routine had

disappeared, being replaced by the unknown and unexpected unfolding of the day at the cue of their baby. The mothers had to adapt, but on the whole embraced that this was part of them finding their new routine, whilst holding the hope that it was temporary, and things would become more grounded as they both adapted to their new roles (mother and newborn). The mothers were living in the present whilst experiencing the impact of their recent past (labour), but not having the time or emotional scope to dwell on the future and what that may look like. This can feel chaotic for the new mother, losing control of their experience of time, whilst watching their newborns suddenly grow (Stadlen, 2005). Existential philosophers have explored the impact of time on our existence and sense of self. Heidegger (1996) suggests there are three stages of time: being-with (present), being-ahead-of-oneself (future) and having-been past). These three stages are linked to represent the cycle of existence. Our present moments contain fragments of our past as well as the future, with the women in this study experiencing early motherhood predominantly in the present, placing their attention on the needs of their newborn. The constant focus on their newborns meant the mothers had little time to think about other areas of their lives. According to Minkowsky (1994), individuals who experience the present intensely are in the zone of activity.

Entering a world of unknown emotions, responsibilities and expectations, the mothers felt thrown into a new world without the ability to hit a pause on time to process it. We can understand this through Heidegger's (1962) views on human existence. In becoming a mother, our internal and external contexts of existence are challenged. Heidegger (1962) believed that we engage with the world through 'being-in-the-world', and thus we are thrown into different situations. The surrounding that encompass us as we explore this situation, in this case, motherhood, impacts how we relate to the world. This was seen in the findings with the mothers being thrown into an unknown new world, which ultimately impacted how they interacted and related to other relationships and situations in their lives.

Buber (1970/2000) had similar views around the 'self', believing that the 'self' is absorbed in our social worlds (I-thou) and with itself (I-it). The motherhood identity that evolves is free to change but is highly influenced by our interpersonal context, such as becoming a mother as well as the cultural context around it.

The new mothers were finding new meaning in their lives and the roles they held within them. Frankl (1964) described three ways in which we can find meaning in our lives. The first is finding meaning through our creative work and accomplishments. The second is finding meaning through our experiences and values. And the third way is finding meaning by accepting that we cannot change our destiny, where this can be connected to the meaning of suffering. The women in this study found that their values and priorities shifted with motherhood, providing a new purposeful meaning, which can be connected to Frankl's second way of finding meaning. They also speak of leaving their struggles for God to sort, which

can be linked to Frankl's third way of finding meaning, however, they embraced the struggles and held meaning to the difficulties of motherhood. Part of these mother's experiences of the thrownness of motherhood was impacted by their identities, another main theme that arose and that will be discussed in the next section.

7.6.3 Theme 8: Interwoven Identities

Three subthemes were found within the eighth theme:

1. Blend of cultures
2. Religious identity
3. Being a mother

Identity is important when exploring the experience of motherhood as women are placed into a new role that requires time for them to adjust to and understand. De Beauvoir (1965/1997) held a feminist and existential view of motherhood, believing that women are reduced to the role of 'mother' by society. She argued that it is a role that is far from natural. Findings in this study found this view unfitting to these mothers' experiences, and it can be argued that De Beauvoir's views are limited to her experiences of society in the time and place she lived. However, De Beauvoir also claimed that women can regain autonomy through their motherhood choices, and though not for the reasons she gave, this concurs with the results of this study. With time, the women became more comfortable in their identity as 'mothers' and began to make choices that fit in with their lives. Though they did not return to their old lives, they also were not trying to, embracing the chance and adjusting to what worked for them and their partners.

Butterfield (2010) highlights that as existential beings with freedom, we are always more than the identities we retain. This view can be used in understanding the women's British-Iraqi identities, as well as their new identities as mothers. Every person will define what the identity they hold means to them, and act upon it through how they choose to live their lives. Butterfield (2010) believes that motherhood is ambiguous as each mother is unique and responds differently to her social world. The findings in this study support this view, with each mother responding differently. However, her social world and the impact of her cultural identity influenced their decisions.

The aspect of creating and reflecting on a new identity alongside their latest identity of 'mum' provided these women comfort and choice, to be able to choose values from their British identity that were meaningful to them, as well as hold onto Iraqi values that they deemed important. There remained a sense of finding new roots for themselves, one that they described they shared with their friends. In their unfamiliarity, they were able to create a familiar experience with other women in their generation and community. The new mothers in this study mostly found themselves heavily influenced in their choices postpartum by their culture as well as religious values and beliefs. They were somewhat equally influenced

by their choices to adopt their British identity where they saw fit and embrace the values that did not clash with their religious identities. This begins to reflect on the concept of intergenerational transmission (Adelman, 1995) where the new mothers are holding onto values from their mother's generations, both influenced by childrearing traditions as well as religious traditions.

The accounts shared by the women who participated in this study showed that they experienced a paradox of cultural identity being resurfaced amid their transition to motherhood. The experiences shared were an overlap of the presence of an autonomous nuclear family model and an extended family, and the new mothers were navigating this, ensuring it was as harmonious as possible. At times the new mothers would let certain traditions pass even if they did not hold value to that particular tradition, for the sole reason that it was meaningful and important to their own mother/mother-in-law who was caring for them. On other issues, particularly parenting choices, the new mothers were not so willing to let their views go unheard. It is important to note that the mothers were less willing to discuss differences of views with their families the younger their babies were.

To co-exist within their new realities, the mothers in this study had to adopt new approaches to find peace within their new existence. They had to adapt not only to the presence of their newborn but also to the impact their cultures, mothers and parents had a shift in their existence. This finding is supported by the findings of Bawadi (2009) who identified a main theme in her findings titled "adaptation to a new culture". Though the mothers in Bawadi's study were migrants themselves and living the experience of birthing their children without the support of their family, they too had to adapt to their situation and continued holding onto some of their motherhood traditions whilst disregarding others. Women in this study found themselves comfortably able to hold on to some traditions by choice, keeping some traditions for the sake of their families, and taking on some values that stemmed from their British identities. What was clear though was that none of the mothers applied values they had come to take as their own that clashed with their religious views, and that their religious values were of more importance than their cultural values.

Interestingly, Parker's (2005) and Urwin et al's (2013) research have suggested that the outlook a mother has on motherhood is impacted by the culture she lives within. The findings of this study concur with that, with the women viewing motherhood as a spiritual and highly ranked identity within their culture and religions. It did, however, leave the mothers questioning some of their values, whilst still highlighting the important value mothers had within their community.

Having presented the three main themes within the Personal Dimension, we will now discuss the main themes that fell within the Spiritual Dimension.

7.7 Spiritual Dimension

The final of the existential dimensions is the spiritual dimension. This signifies our values and beliefs, both religious and not, directing our understanding of the meaning of the experiences we live through. Entering motherhood for the mothers in this study was a hugely spiritually significant experience. They re-evaluated their familial relationships and expectations of themselves being challenged on a personal and intimate level. Two main themes will be presented below, depicting the importance of the spiritual dimension on the phenomenon of motherhood for the mothers in this study.

7.7.1 Theme 9: Religious and Cultural Beliefs

Three subthemes were found within the ninth theme:

1. Submission to God
2. Passing down traditions
3. Meaning of motherhood

All the women in this study expressed the importance of their faith and described the strength that they felt through faith whilst navigating the difficulties of motherhood. There was a huge sense of relying on the will of God, feeling safe that God would get them through it stronger, and a belief that motherhood is exalted by God and thus it is not meant to be an easy journey. The process of becoming a mother was described as a sacred process, a view shared in the findings of Bawadi's (2009) research. The women in this study shared the importance they held in retraining their religious duties and some traditions, particularly those around food and purity.

According to Stern and Kruckman (1983), postnatal depression is a cultural phenomenon that is heavily impacted by the lack of organised social support within individualistic societies. On the other hand, and without a doubt, there is a stigma around the term 'depression' within Arab and Muslim communities, particularly when referring to a new mother's struggle. This comes from the assumption it reflects a lack of faith and support from the community (Sheikh & Gatrads, 2008). What was being seen in this study was an acceptance that Post Natal Depression (PND) is real, but equally that these women's faith and familial support helped carry them through this vulnerable period, similar to that found by Nahas et al. (1999).

The word 'tawkaul' came up several times across the interviews in this study. This refers to the reliance on God to carry them through any struggles. The women described the importance of their religions and cultural practices around childbirth, particularly listening to and reading the Holy Quran. Motherhood was viewed as a sacred identity, one elevated to the highest ranks of heaven by Allah (God). This finding is supported also by the findings of Bawadi (2009).

7.7.2 Theme 10: Establishing Values

Two subthemes were found within the tenth theme:

1. Importance of Family
2. New generational values

Mothers in this study spoke about how core to their values the family unit was. This was not just about them, their partners and newborns, but more so the importance of the grandparents, uncles and aunts, cousins, and the overall community. They also found themselves creating new generational values, falling in between the values of their parents and the values their fellow non-Iraqi British friends and mothers had. Research has shown that Egyptian mothers who had moved to the UK found their lives transformed, leading them to gain more independence and more rights (Karmi, 1997). They did however express a loss of social and community support, sharing that they had lost that with moving countries. The mothers in this study had their parents present in the UK with their lives established. This meant their families were able to recreate this social support system that is culturally and religiously driven. The emotional security of knowing their mothers and sisters could step in if needed reassured these mothers as they navigated through this unknown transition to motherhood. This experience would surely have been different for the mothers of the women in this study, who may or may not have had support similar to what is expected within the Iraqi culture, and what seems to be extended to other Arab cultures (Karmi, 1997; Bawadi, 2009).

Davis-Floyd (2017) argued that the transition to motherhood can be seen as a manifestation of the core values of a society. This view emphasises the importance of the society we are in, and the implications this society has on the values we may have. This society may be the generic and general one, or it could be the micro-society one may hold, such as that of a culture existing within another culture. The findings of this study showed that values are impactful on one's decision-making and experience of motherhood. However, these values can change, and new ones can be created, and similar ones were created for this group of mothers. It seemed that the mothers were balancing out their religious values and finding ways to fit these into their lives in the UK, being able to share it with their other Iraqi friends in the UK. In becoming a mother, a woman has not only opened herself up to relating to her newborn but also will relate to others around her differently, as now her newborn exists in her world. Arnold-Baker (2015) found that women were not just becoming more open with those around them, but were also reconstructing existing relationships, a process that is impacted by our underlying values.

The ten themes found within the data have been presented, and what is clear across them is the inter-relatedness present. All dimensions and all themes within the four dimensions are interlinked given the complexity and magnitude of this life transition on a woman's self and being. In the next section, a critical evaluation of the method used will be presented, followed by the final concluding chapter.

7.8 Critical Evaluation of Method

The literature review showed that there is limited research on the experience of bi-cultural new mothers through an existential-phenomenological perspective. The choice of choosing a phenomenological methodology, namely SEA will be critically explored in this section.

Given that SEA is a newer research method than other phenomenological methods, it is not shocking to learn that previous research studies (e.g. Garland, 2019, Christophy, 2017) have applied SEA as a second analysis following the use of other established methods such as IPA (Smith, 2011). However, its research validity within clinical practice has been appreciated for many years and continues to be applied (Deurzen, 2010). A limitation identified by Garland (2019) surrounding SEA's development from a Husserlian view highlighted that the focus is more on the description of the phenomenon rather than the lived experiences of the research participants. Additionally, the pre-determined dimensions within SEA may also impact researcher bias (Vos, 2020). It can however be argued that the dimensional perspective provides a framework to allow an open and creative analysis of the data and that any research methodology requires the data to be structured as part of analysis. The bias that arose within the research process was faced through thorough reflection and awareness. Furthermore, it has been argued that Deurzen's description of SEA does not align with Husserl's phenomenology (Zhavi, 2019) and draws on the phenomenology of Heidegger and Husserl. Deurzen also states that phenomenology is just one aspect of the methodology. It is a current reality that SEA remains a less-used research methodology, however, I would argue that this does not reduce its credibility. It has provided me with a freeing framework to work on, a springboard to allow the mothers in this study to share their narratives and for me to understand their experiences in a phenomenological manner. I ensured that I faced biases through awareness and reflexivity throughout the research process as further described in **Section 8.5** below.

8. Conclusion

8.1 Summary

In summary, the findings of this study highlight a different and unique account of first-time motherhood for a specific cohort. The presence of the Middle Eastern/Arab culture within a new mother's identity has been shown to impact the level of support she and her newborn receive. Though each mother had a level of choice in what traditions she kept and which she abandoned, there was a pattern of the willingness to accept support from one's mother and sisters from all the mothers interviewed. Previous studies showed that Arabs living in their motherland countries tend to have forty days of rest. This was not true for this cohort, and the practical support reported was that of 10 days to two weeks, with most of the mothers reporting their mother moved in with them to care for her and the baby, or she went to her parent's home to be looked after. Regardless of how long the care was provided for, the impact of it was useful for the women in this study. It was also reported that the support did not end at this 10-day mark, but continued in a different form onwards, as childcare when the mother returned to work or had another commitment.

8.2 Potential and Unique Contributions of This Study

This research has not only contributed towards the limited yet growing literature on motherhood through an existential perspective but more importantly motherhood for mothers from an ethnic minority. It sets itself apart from other studies by providing a voice to British-Iraqi women who connect to and associate themselves with a dual-cultural identity. The findings provide a unique contribution to the field of existential research. They reiterate a narrative around motherhood found in other existential studies, in that it is a life-changing transition impacting and altering all four dimensions of our existence. However, it holds unique in that the experience of motherhood for British-Iraqis has shown to be complex yet supportive, shedding light onto the meaning of motherhood for these women amidst navigating and questioning their identity, values, and beliefs.

The unique experience of support shared amongst this population is important and could benefit all women experiencing motherhood, particularly for the first, if not every time. This study's most substantial contribution is the deep and meaningful ontological description of becoming a mother for first-time British Iraqi women, which highlights the specificity of such a phenomenon alongside the specificity of identity and culture, whilst still uniting these women with the experiences of their fellow British-non-Iraqi mothers.

Though Bawadi (2009) explored the experience of childbirth for migrant Arab Muslim women in the UK and provided a unique outlook, the experience of first-generation British-Iraqi migrants has not previously been discussed in the context of their experience of first-time motherhood. These findings signify an opportunity to inform healthcare professionals about these women's cultural experiences surrounding motherhood, providing an alternative narrative around support for new mothers and lowering the expectation that mothers should experience this transition alone.

This can be of significance to the wider professional community who seek a deeper more unique understanding of the role and impact of culture on our mothering experiences both as a whole as well on a personal level for new mothers. Findings from Ofori's (2020) study on second-generation Ghanaian mothers showed that the role of support both from family and the wider community is important, a finding which was echoed within this study.

Living in an era where the UK is questionably at its most diverse, this study contributes to the field of psychotherapy and maternal health by providing practitioners with insight and understanding when working with individuals from a bi-cultural background. By considering the existential dimensions we are faced with through motherhood we can better support new mothers. It further stresses the intergenerational components of the client's background when working with ethnic minorities.

8.3 Research Strengths and Limitations

It is both a limitation and strength of this research that it explores the experience of a unique and homogenous sample of mothers. The mothers in this study are from a specific background and generation, married to and living with their husbands and father to their child at the time. Thus, the findings reflect the experiences of this limited group. The study did not consider the experiences of other new mothers outside this group, such as single mothers, mothers diagnosed with PND or other mental-health diagnoses, second-generation British-Iraqis, and those with a more diverse cultural background. However, keeping to a homogenous sample within this study increases research validity, reflections and conclusions based on this unique participant cohort. However, it was not my intention to provide causal explanations and generalisations regarding why these women were experiencing motherhood in a particular way, thus we can say that the methodology applied was appropriate and in line with the research aims.

Considering transferability, I am aware of my Iraqi heritage and the rapport that I created between my participants meant that this study is further unique, exploring the experiences of British-Iraqi mothers by a British-Iraqi mother. As a researcher, I was aware of a silent connection between the participants and me, one of heritage, faith, and respect. At times I probed the participants to expand on what they meant when referring to specific cultural norms as there was an assumption I understood. In particular two interviews of the eleven, I experienced the participants holding back in the depth of information they were comfortable sharing, and only during the debrief did they share they did not want their cultural experience to be judged. Thus, it is important to note that some of the women may have spoken to me in more depth than if I were not an Iraqi woman, with a couple avoiding depth due to fear of judgement, and both these situations may have been influenced by my cultural presence.

The nature of small qualitative studies means the ability to provide generalised findings is impacted, with the findings being able to apply to the eleven women who participated. However, the themes that arose have some overlaps with those of other studies that explored the experience of mothers (Bawadi, 2009; Arnold-Baker, 2015; and Garland, 2019). This supports the notion that common themes were uncovered concerning the experience of women becoming first-time mothers, whilst unique themes were uncovered concerning the impact of culture and values on the new mother's choices.

8.4 Validity

As described in **Section 4.5**, the validity of a research study is impacted by the manner it unfolds, from the research design to the presentation of the findings. Phenomenological studies require a different way to verify their trustworthiness and validity. However, following the guidelines proposed by previous phenomenological researchers such as McLeod (1994), I have ensured the validity of this study remains high throughout. Throughout the findings, I have provided many quotes from the mothers to demonstrate a deep insight and understanding of the narratives that were shared. I also created a table showing which themes and subthemes were found across the interviews to depict a level of validity in the presence and demonstration of the themes across this cohort of mothers.

8.5 Reflexivity

Reflexivity through the development of designing the study, conducting interviews and data analysis was discussed in detail in **Section 3.5 and 4.6**, with the same methods extended to when writing the findings and discussion. It is important to be transparent that one of the reasons for choosing this research topic was the hope to extend the experiences of support within the Iraqi community, which is very much a collectivist and culturally driven community to the rest of the British community. I believe my own experience and knowledge of the Iraqi community had a direct effect on the formation of this thesis, in addition to the impact first time motherhood had on me personally. My son was the pushing factor for me to continue seeking a version of myself that was separate yet connected to him, a paradox which I continue to live through alongside my three children now. In addition to this identity of motherhood that influenced this study, my identity as a proud British-Iraqi has impacted the creation of this thesis. I wanted this identity to be heard, to be known, to be seen, by healthcare professionals, academics and more.

Though I wanted to voice the narratives of women with a similar cultural identity as mine, I also engaged in another identity through this process, that of the researcher. I found the process eye-opening, and it helped me grow listening to these women's experiences of support, and connection to their new identities as mothers and how their cultural identities impacted their experiences. The research question initially felt like an exploration, but now having completed the process, the significance of the findings feels much larger than initially anticipated for me. The UK is diverse, and its differences should be celebrated, and respected, but also understood, particularly through life-changing transitions such as motherhood. Research as well as the media often speak of gender, sexual and religious identities, but cultural identities and those impacted by being in another culture other than that of your parents are hugely impactful on our life choices. Mothers often experience feelings of fear and overwhelming responsibility within their new-found roles, and as a professional and academic, I believe we can learn from these unique experiences and apply them to improve our practices and support networks for new mothers.

I ensured during the findings that I stepped away from my own experiences of becoming a mother and referred constantly back to the data and the narratives shared with me by the participants. This was not always easy, and at times this evoked strong emotional responses within me, reminders of a time when I was vulnerable in my journey. At these points, I ensured I turned to my therapist and found solace in writing my thoughts in my journal. It feels important to mention that I delayed analysing the findings by a couple of months as I was experiencing motherhood for the third time during this research process. Initially, this led to feelings of frustration as well as anxiety about my ability to complete this process. However, I found my newborn daughter forced me to face the existential givens of my life and in those moments, I could not successfully focus on my research. She impacted me in a different way to her brothers, as she became a reminder of myself and all the struggles I wish she can avoid. Becoming a

mother to my first and only daughter was profound for me during the course of this research. I needed to take time to process my experience, my feeling, and I felt by doing so, by responding to my own needs, I was able to be fully immersed in the findings and discussion process of the research when I was ready. I believe this helped me recognise my biases and reduce the emotional impacts through my role as a researcher and as a new mother reflecting on the participant's own experiences. The time obstacle I experienced helped me re-ground myself as a researcher and allowed me to ensure I maintained my work and time ethic whilst seeing this hugely personal and important piece of research through. However, I cannot deny that in the moment, I was frustrated with myself for taking longer than I had planned and anticipated to complete the research, a fine reflection of the frustration that can be found in motherhood and finding one's cultural identity.

8.6 Suggestions for Future Research

The experiences that arose within this study prompted me to consider the application of the research findings within the field of psychotherapy and maternal healthcare. My initial intention was to explore the experience of becoming a first-time mother for British-Iraqi women, to better understand how the transition into motherhood was for them. The results have stimulated my interest in future research exploring the experience of other bi-cultured mothers, to see if there any similarities for women navigating the complexities of their paternal cultures alongside that of the British culture. Future research could also include women from varying socio-economic statuses as well as single mothers. Given the limited number of studies exploring the experiences of motherhood for British-ethnic minority groups living in the UK, this study has shown the need for further research to close the gap. The research has shown that mothers who hold a bi-cultural identity are influenced by their cultural values, both Iraqi and British, and this has identified that further exploration and understanding of other ethnic minorities in the UK would be beneficial. Additionally, findings from Bawadi (2009) provided a detailed account of the childbirth experience for Arab mothers, and this study has provided a detailed account of becoming a mother for British-Iraqi mothers. Both studies have added to our understanding of a universal yet unique experience of childbirth/motherhood within a different culture. However, it is important for future research to explore the cultural impact of childbirth and motherhood for other migrant groups, especially as the UK is a multicultural harbour. This information would benefit the maternity care models in place.

After completing the interviews, all the mothers expressed how much they enjoyed speaking about their experiences and thinking about them in a different light. I believe providing such support tailored to mothers from bi-cultural backgrounds would be hugely beneficial, to allow their shared experiences and values to carry them through this transition. Thus, I aim to set up a postnatal support group for mothers from multicultural backgrounds to explore and share their experiences of motherhood and how their identities have impacted this. I believe that more understanding is needed by professionals on the experience of support for mothers from bi-cultural backgrounds like those in this study. Though they receive practical support from their mothers and sisters, it is a different kind of support than that from midwives and healthcare professionals. They are thrown into balancing out receiving this support, transitioning into motherhood, and deciding how much fits with their values and expectations of themselves.

8.7 Implications for Clinical Practice

The research findings have shown that becoming a mother is extraordinary on every level of existence and impacts a woman on each of the four existential dimensions. It is further impacted on an added layer when the individual is navigating the impacts of differing cultural views and beliefs, such as with the British-Iraqi mothers in this study. This increases the pressure in some ways for the new mothers who are contending with finding a new meaning and understanding for their lives and identity. It can be argued that having a firm support system from their mothers and other women in the family helped them navigate these existential questions. In recognising the interrelation dimensions impacting the experience of first-time motherhood for bi-cultured mothers such as those interviewed in this study, it is beneficial for both clinicians such as doctors and midwives, as well as for psychotherapists and academics to understand their experiences in order to provide a supportive and culturally sensitive response to the mothers needs.

The experience of these women was unique, with the majority being provided with both practical and emotional support from their mothers postpartum. It was clear that within this cohort there was a cultural understanding and expectation that the new mother's mother was to provide either live-in help or have her daughter and new grandchild move into the family home so the mother could care for them both. Alongside receiving this support, the new mother is grappling with her new role as caregiver and mother to her newborn, navigating her own emotions, expectations, and sense of responsibility.

When considering the importance of this research on a larger scale, the findings from this research have highlighted the importance of support and understanding the role of culture on a new mother on the experience of the new mother. Midwives and other healthcare professionals wishing to holistically care for the new mother should consider their cultural backgrounds, as well as their preferences and values around maternal practices in order to provide them with the best care.

The findings and unique narrations of early motherhood for these women highlight the multifaceted nature of this transition and the impact it had on these women's values, providing a raw chance to challenge and/or adjust them to their own needs. Exploring this period through an existential lens allows us to understand the experiences from all four dimensions and allows space for the women to reflect on the impact their social and cultural identities had on their expectations of motherhood and the support they received. Lastly, the findings from this study support that of other existential studies on motherhood where it was identified that this transition comes with discomforting shifts and restructuring of one's values and how they are applied. Thus, it would benefit society to move away from using solely the biomedical model to explain struggles experienced by new mothers and move towards viewing this life transition as existentially challenging, which was also suggested by Prinds et al. (2013). I believe that we as psychotherapists and healthcare practitioners, particularly midwives, can support new mothers by not

pathologically viewing their struggles, but rather replacing this view with support and tools for women to move through this transition with more reasonable expectations that are in line with their lived experiences. This could support women to distance themselves from feelings of guilt and anxiety, or at the very least, understand the sheer phenomenon of motherhood so that the exacerbated emotions they experience are seen as more fitting.

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Appendices

Appendix A: Literature Search Database Results

Table 9: Databases used from the systematic literature reviews

PsychARTICLES (joint database search with PsychINFO, CINAHL and MEDLINE)
Web of Science
ScienceDirect
International Bibliography of the Social Sciences (IBSS)

Table 10: Literature Search on Motherhood and the 40-day postpartum mark between 1980 - present

Search #	Search Term	Psych- Articles	Web of Science	Science Direct	IBSS
S1	Motherhood	91,090	15,291	16,813	24,537
S2	motherhood AND (iraq or arab or middle east or migrant or immigrant)	2,664	623	16	8,669
S3	motherhood AND forty days	22	4	646	3,118
S4	motherhood AND support	22,178	3,722	13,520	14,823
S2 and S3	(motherhood AND (iraq or arab or middle east or migrant or immigrant)) AND (motherhood AND forty days)	4	0	2	2,299
S2 and S4	(motherhood AND (iraq or arab or middle east or migrant or immigrant)) AND (motherhood AND support)	781	191	16	7,428

***correct on 29th March 2024**

Table 11: Literature Search on Motherhood and cultural identity between 1980 - present

Search #	Search Term	Psych- Articles	Web of Science	Science Direct	IBSS
S1	Motherhood	91,090	15,291	16,813	24,537
S2	motherhood AND (culture or cultural or identity or ethnic or values or race)	18,388	4,655	633	19,330
S3	motherhood AND (iraq or arab or middle east or migrant or immigrant)	2,664	623	16	8,669
S4	motherhood AND (existential or phenomenology)	848	150	59	1,654
S2 and S3	(motherhood AND (culture or cultural or identity or ethnic or values or race)) AND (motherhood AND (iraq or arab or middle east or migrant or immigrant))	1,451	317	10	8,458
S2 and S4	(motherhood AND (culture or cultural or identity or ethnic or values or race)) AND (motherhood AND (existential or phenomenology))	246	69	10	1,633
S3 and S4	(motherhood AND (iraq or arab or middle east or migrant or immigrant)) AND (motherhood AND (existential or phenomenology))	25	9	3	1,190

***correct on 29th March 2024**

Appendix B: Interview Questions

1. Can you describe your experience of becoming a mother, particularly in the first 40 days?
2. What effect, if any, did the social interactions you received from others (both within your home or outside your home) have on your experience of motherhood? (**Social dimension**)
3. What was your physical or embodied experience of becoming a mother? Or can you describe what it was like physically becoming a mother? (**Physical dimension**)
4. How did your values and beliefs impact the way you experienced motherhood (link to 40 days)? (**Spiritual dimension**)
5. In becoming a mother, how did you perceive yourself? (**Personal dimension**)
6. How would you describe your cultural identity? Do you feel British or Iraqi or both?
7. Has your identity influenced the way you are a mother and your experience of the first 40 days? If so, how?
 - How did these notions of motherhood impact your experiences?
8. How does your experience of motherhood compare to the one you imagined before your baby was born?
 - *What expectations did you have about becoming a mother?*
 - *Has the way you think about motherhood changed over time?*
 - *How has this affected you?*
9. Has motherhood changed you in any way? How?
 - *Personal identity? Your occupation? Your social identity?*
10. Can you describe your relationship with your own mother? Has this relationship changed in any way since you experienced motherhood?
 - *Has any other significant relationship influenced your mothering style or experience of motherhood?*

More general prompts were in the form of:

- Can you say more about this...?
- What does this mean to you?
- How were you feeling?
- What made you feel this way?
- How did you cope?
- What was helpful?
- Where do these practices come from?

Appendix C: Pre-Interview Demographic Questions

1. Do you identify as British Iraqi?

Yes No
2. How old are you?

_____ years
3. Are both your parents Iraqi?

Yes No
4. How long have you been married and living with your husband?

_____ years
5. How many months old is your child?

_____ months
6. What support do you have at home with your child?
7. Who does the support come from? How long have you had or will have the support? What does the support entail?
8. Have you sought help for or been diagnosed with a maternal mental health issue?

Yes No
9. If so what was it? What support did you receive if any?
10. If yes, do you have support from your local health team to manage your symptoms?

Middlesex University, School of Science and Technology
Participant Information Sheet

May 2020

Title of study: An existential exploration of the experiences of British Iraqi mothers during their first 40 days of motherhood.

Researcher: Arwa Hussein ah1733@live.mdx.ac.uk 07*****

You are being invited to partake in a research study. Before participation, it is important for you to understand why the research is being conducted and what it involves. Please read this information sheet carefully. Thank you for your time reading this.

What is the purpose of the research?

This study is being carried out as part of a Doctorate in Counselling Psychology and Psychotherapy with NSPC and Middlesex University. There are no studies yet exploring the experience of British-Iraqi mothers. The aim of the study is to explore the experience of British-Iraqi first-time mothers during the first 40 days, as it reveals itself through your own personal experience. I am seeking vivid and accurate portrayal of what these experiences were like for you. I hope to voice the experience of motherhood for British-Iraqi's.

Why have I been chosen?

- You identify as a first-time mother of one, who has been born and brought up in the UK to migrant Iraqi parents **or** born abroad but migrated to the UK in early childhood.
- Your child is between the age of 6 to 12 months at the time of your interview.

What will happen to me if I take part?

Upon agreeing to participate, I will contact you to arrange an interview. ***Given the recent global pandemic of Covid-19 and due to the uncertainty of being able to interview face to face, you are provided the option to conduct this interview online through a secure platform called Zoom.*** However, if at the time of participation, it is possible to interview face to face, then we may decide on a mutually agreed place and time, but likely to be at your own home. If this does not suit you, an alternative location will be organised. As your baby is still young, they are welcome to be present at the interview for your convenience, although you might prefer to arrange for someone to look after your baby while you are being interviewed. If the interview is online, it will be required that you have access to a camera and microphone attached to a computer/laptop. You will also need to find somewhere to sit comfortably and privately to ensure a confidential space for the duration of the interview. The interview will be recorded through a digital handheld voice recorder to avoid recording through an online platform. Before the interview I will conduct a brief assessment with you by way of a short and confidential questionnaire to monitor and manage any risk in the event that you become distressed. Should this happen you will be free to stop the interview at any time. You will also be offered a list of services available to you should you wish to seek further help or support.

The interview itself will consist of a conversational style dialogue, guided by questions relating to the explored subject. You are invited to speak openly and to reflect on your postpartum experiences. The interview transcript will be sent to you for approval before analysis. The material derived from the interview will be combined with the transcripts from other participants for analysis. After the interview, you will have the opportunity to be debriefed during which I

will re-explain the intentions of the study and what will happen to the findings. Participation in this study is entirely voluntary and you have the right to withdraw up until **February 2021**.

What will you do with the information I provide?

Interviews will be digitally recorded, and data will be transferred to an encrypted USB for storage, deleting the files from the recorder. I will be personally responsible for transcribing the interview, which will be anonymised. All information that you provide me with will be identifiable only with a project code and stored either on the encrypted USB or in a locked filing cabinet. I will keep the key that links your details with the project code in a locked filing cabinet. Your data will be kept for 10 years after I graduate and will be treated with the highest of confidentiality. If my research is published, I will make sure that neither your name, nor any other identifying details linked to you are used. However, as this research will be looking at British mothers of first-generation Iraqi descent, it is important that you are aware that these details will be made explicit throughout the entire research project. All data will be stored according to the Data Protection Act 2018 and the Freedom of Information Act 2018.

What are the possible disadvantages of taking part?

Through exploring your experience in the interview, participation may awaken some strong emotions which could be distressing to talk about. I will endeavour throughout the interview to monitor how you are doing, and should you become distressed, you are welcome to withdraw from the interview. Please inform me to any distress you may be feeling at any point, in which we can draw the interview to a close. If you happen to disclose information regarding something that I am required by the law to pass on to a third person, I must abide by my duty of care and pass the information on but will always aim to talk with you first about what to do. Otherwise, whatever you tell me will remain confidential.

What are the possible benefits of taking part?

With no previous research on this population of mothers, your participation will provide significant insight into the experience for British-Iraqis. Being interviewed about your individual experience may have no direct benefit, however you may find that discussing your experiences with an interested and understanding listener to be of some psychotherapeutic value to you. As a trainee counselling psychotherapist, I will be able to listen attentively and empathetically to your experiences and respond responsibly and professionally to any difficult emotions you may be feeling.

Consent

If you decide to be part of this research, you will be asked to sign a consent form and will be given a copy to keep along with a copy of this information sheet. You will also be asked to consent to your GP being contacted should any health concerns emerge during the interview. Participation is entirely voluntary, and you do not have to take part if you do not wish to. If you decide to take part, you have the right to withdraw until **February 2021** without providing a reason.

Who has reviewed the study?

All proposals for research using human participants are reviewed by an ethics committee before they can proceed. The NSPC research ethics sub-committee has approved this research study.

Expenses

This research is entirely self-funded. Participants are offered the opportunity to have their baby attend the interview or can make other arrangements to attend the interview.

Thank you for reading this information sheet. If you require any further questions, please do not hesitate to contact me. If you have any concerns about the conduct of the study, you may contact my supervisor:

Dr Claire Arnold-Baker

claire@nspc.ac.uk

020 3515 0223

NSPC, 61-63 Fortune Green Road,
West Hampstead, London, NW6 1DR

Middlesex University School of Science and Technology
Written Informed Consent

Title of study: An existential exploration of the experiences of British Iraqi mothers during their first 40 days of motherhood

Academic Year: 2020/2021

Researcher's name: Arwa Hussein ah1733@live.mdx.ac.uk

Supervisor's name and email: Dr Claire Arnold-Baker claire@nspc.org.uk

- I have been fully informed about the details of the research, including the risks and benefits of participating, as explained to me by the researcher and confirm that I have consented to act as a participant.
- I have been given contact details for the researcher in the participant information sheet to keep.
- I understand that my participation is entirely voluntary, and the data collected during the research will not be identifiable, the only detail being disclosed will be that I am a British-Iraqi mother.
- I understand that I can withdraw from participating, have my data withdrawn and destroyed from any use towards the project until data analysis begins in **February 2021**, without any obligation to explain my reasons for doing so.
- I also understand that a recording will be made of this interview and will be securely stored until a verbatim transcript has been made, at which time my recording will be destroyed.
- I give consent for my coded, anonymised data to be held in encrypted form on the researcher's own computer or in a locked filing cabinet in the researcher's own home for 10 years.
- I further understand that the data I provide may be used for analysis and subsequent publication in an anonymous form (such as, journal articles, teaching resources, and other academic/professional purposes), and I provide my consent that this may occur.

Participant's Name

Participant's Signature

Researcher's Name

Researcher's Signature

Date: _____

To the participant: Data may be inspected by the Chair of the Psychology Ethics panel and the Chair of the School of Science and Technology Ethics committee of Middlesex University, if

required by institutional audits about the correctness of procedures. Although this would happen in strict confidentiality, please tick here if you **do not** wish your data to be included in audits

Middlesex University, School of Science and Technology
Debriefing Form

Title of study: An existential exploration of the experiences of British Iraqi mothers during their first 40 days of motherhood

Researcher: Arwa Hussein ah1733@live.mdx.ac.uk
07*****

Academic Supervisor: Dr Claire Arnold-Baker claire@nspc.ac.uk
NSPC, 61-63 Fortune Green Road, West Hampstead,
London, NW6 1DR 020 3515 0223

Thank you for taking the time to participate in this research study and for making a valuable contribution to our knowledge about the experiences of British-Iraqi mothers during their first 40 days of motherhood. As there are a large number of mothers who regard themselves as belonging to this population group currently living in the United Kingdom, my aim will be to shed light on their journeys so that their experience of early motherhood may be voiced, understood and appreciated. Currently there exists no research to date looking at members of this population group. This research has therefore been conducted to address this gap. The debrief will be an opportunity for you as the participant to talk about your experiences of being interviewed as part of this research.

What happens now?

- I (the researcher) will personally transcribe your interview, anonymising any identifiable information. I will send you a copy of the transcript to read and check. I will then proceed to analyse the interview along with the other interviews using the framework of Structural Existential Analysis (SEA).
- The coded anonymised data will be held in encrypted form on the researchers own computer or in a locked filing cabinet in the researcher's own home for 10 years, as per regulations.
- Please remember that it is within your right to withdraw from participating even after this point. You have until **February 2021** to withdraw from this study, in which all your data will be destroyed and will not be used towards the project. You can do this without any obligations to providing an explanation.
- However, if you wish to remain part of this study, you are welcome to request a copy of the findings of this study upon its completion.

I hope you have understood the overall aim and purpose of this study and enjoyed your participation in it. Please note that now your interview has been conducted, should you have any queries or concerns, you can contact me or my supervisor on the contact details at the top of the page.

Should you wish to explore any issues that have arisen for you as a result of participation in this research, please contact your GP or Health Visitor who will be able to help.

If you would like to talk about your personal experiences further with a trained professional, you can contact the following counselling and psychotherapy organisations for access to local therapy.

UKCP Psychotherapy Register - <http://members.psychotherapy.org.uk/find-a-therapist/>

BACP Psychotherapy Register - <https://www.bacp.co.uk/about-therapy/how-to-find-a-therapist/>

NCT: The UK's leading charity for parents <https://www.nct.org.uk/>

Nafsiyat Intercultural Therapy Centre <https://www.nafsiyat.org.uk/>