

**Relazione attività Terzo Anno di Dottorato di Ricerca
in Relazioni e Processi Interculturali**

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ATTIVITA' FORMATIVA

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ATTIVITA' DI RICERCA

- **Ricerca di dottorato**

- Avanzamento lavori

Nel corso di questo terzo anno di dottorato, ho provveduto a ultimare la raccolta e l'analisi dei dati. Attualmente sto terminando la stesura della tesi. La lingua scelta per l'elaborato è l'inglese. Nei mesi di novembre/dicembre effettuerò, insieme a insegnanti madrelingua, attività di revisione dell'inglese scientifico presso il Centro Lingue – Shenker di Genova.

Di seguito: titolo, indice, introduzione e i principali riferimenti bibliografici.

- Title

**The analysis of psycho-social and cultural factors during pregnancy, childbirth and early motherhood:
From the woman's psychological disease to the subjective and psychological well-being**

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- Introduction

In a woman's life childbirth emerges as a crucial event, which encompasses both biologically and psychologically changes (Kwee & Mc Bride, 2015; Taubman-Ben-Ari, Shlomo, & Findler, 2012). In the past years, several studies were realized primary to understand the negative aspects and consequences of the transition to motherhood, investigating the mothers' intrapsychic dynamics and mental disorders and their role as risk factors for the cognitive, affective and relational development of the child (Ammaniti, Tambelli, & Odoriso, 2013). But a mother play a vital role in the family (Irwin, Beeghly, Rosenblum, & Muzik, 2016) and researchers have gradually expanded the focus of analysis. From the prevention, detection and manage of problems to the psychosocial aspects able to promote a family's healthy psychological adjustment (Symon, 2003), up to the analysis of the perinatal well-being concept putting forward for its deepening (Allan, Carrick-Sen, & Martin, 2013). The suggestion of this change in the study perspective is traceable in a World Health Organization's statement (2011). Integrating the definition of health as not merely the absence of disease or infirmity (WHO, 1946), the individual's mental health was defined as a state of well-being characterized by the realization of own individual potential, by being able to cope with the normal stresses of life and to work productively and fruitfully, and to make a contribution to one's own community.

The title of the present doctoral thesis precisely refers to this historical change. Moreover, it reflects an analysis of psycho-social and cultural factors that includes both the perspective of psychological disease and that of well-being. Before to proceed, regarding the terminology used a clarification is necessary to facilitate the reading of the elaborate. Most of the studies concerning the perinatal period use the term 'psychological well-being' to refer also to the 'psychological disease', such as depression and distress. Instead, in these pages the term 'well-being' is used to indicate constructs that in literature are also called the 'positive aspects' of 'psychological well-being', and 'disease' those also called 'negative aspects'. Precisely, the well-being perspective adopted is that of the positive psychology that uses the word 'well-being' for the constructs included in the more general conceptualizations of 'subjective well-being' and 'psychological well-being'. In accordance, in this work 'well-being' when used alone refers to these constructs.

About the reasons of the double exploration above, considering the greater evidence accumulated over time by quantitative research on woman's psychological disease compared to the few on well-being (Study I), in the study of perinatal well-being it is foremost necessary to look at statistical relationships between well-being and psychological disease measures (Study II). Furthermore, by literature analysis it emerged that constructs already widely explored, such as perinatal depression, have yet to be studied looking at possible effects of mediation (Study III).

Finally, this double perspective allows exploring constructs specifically not already analyzed in the perinatal psychological area. For example the proactive coping, just studied as protective factor of disease and enhancing well-being within other psychology research fields. Although no previous research has ever explored this type of coping in relation to the woman's psychological well-being during the perinatal period, some findings about other coping strategies and woman's depression justify the effort to investigate it in relation to disease and well-being, beside parental couple dyadic adjustment (Study IV).

As underlined by Held and Rutherford (2012), a new motherhood is a highly public and culturally fraught experience, in addition to being intensely personal. Many disciplines investigate the perinatal period; among these psychology in its various fields. But research questions continue to be formulated because of the cultural complexity and social transformations surrounding the becoming mother.

According to a psychosocial approach, in families there are phases that determine the progression of relationships starting from the birth of the couple until the dissolution of the same (McGoldrick & Carter, 2003). Within the cycle of life paradigm, the transition from one phase to another is identified as an event characterized by psychosocial stress, since it requires a redefinition and reorganization of family roles. Therefore, transition is a critical event, as it is capable of bringing vulnerabilities to the family system and its components. The birth of a child is a transition, as is the parenting project because the emotional involvement due to expectations about roles can generate stress (Cowan & Cowan, 2003). Regarding family roles, in the last century the family has undergone major transformations (Walsh, 2012) that have also changed the modalities and meanings related to being parent. For example, currently having a child does not represent in most cases a mandatory phase of the life cycle, and the fathers are more involved in the processes of caring for their children (Migliorini & Rania, 2008). These family transformations, alongside other structural ones, such as a greater precariousness of ties, or the small number of family members, make parenthood more than ever strongly linked to symbolic, ethical emotional and cultural meanings (Malagoli, Togliatti, & Zavattini, 2000). Among the social aspects capable of making this transition more complex, the migration emerges.

In last decades, Italy has increasingly become a multicultural Country with 198 nationalities, out of a world total of 232. The 52,3% of regular foreigners are women, around 5 million (Caritas e Migrantes, 2017). Generally, migration is a process where several factors make it difficult for the adaptation of the family system, resulting in additional stress during transitions (Bacallao & Smokowsky, 2007; Falicov, 2012). Particularly during transition to motherhood, migrant women may find themselves facing a situation of amplified psycho-social risk (Berlincioni et al., 2014;

Collins et al., 2010). Because the remoteness from the primary networks of social support, as well as from cultural values and traditional beliefs about pregnancy and childbirth practices (Benza & Liamputtong, 2014; Moro, Neuman & Réal, 2008).

Furthermore, other social changes make relevant to study perinatal psychology, such as the medicalization of pregnancy and childbirth. Other themes are related to this phenomenon, and have to be mentioned for their capability in affecting transition to parenthood, although they will not be detailed here because beyond the objectives of this work: the medically assisted procreation and the obstetric violence. As regard the perinatal medicalization, in Italy it emerges an over-use of diagnostic services during pregnancy and a rate of caesarean sections among the highest in European Countries, with the most recent data showing a percentage of 35% (CEDAP, 2017). These data reflect a limited control of women on their bodies, which produce anxiety and limits the natural ability of women to give birth (Mansfield, 2008). Researchers talk about a context that charges pregnancy and birth of risk, but at the same time provides women with the possibility of choice (Malacrida & Boulton, 2014). The critical junction therefore appears not to romanticize natural and pre-technological birth, as it has brought benefits in terms of perinatal deaths, but to allow the woman an effective choice, putting it at the centre of the decision-making process (Crossley, 2007; McAra-Couper, Jones, & Smythe, 2012). According to this, studies show that to take part in the decision-making process for the delivery mode is important for woman's birth satisfaction (Salmela-Aro et al., 2012).

By the socio-cultural framework just outlined, the following needs for further study emerge. To analyze the positive and negative aspects of psychological well-being considering migration as a variable (Study II). To adopt a qualitative methodology in order: to explore through an intercultural perspective the meanings attributed by women to perinatal well-being and their expectations about pregnancy and motherhood (Study V); to deep the theme of the woman's choice for the delivery mode (Study V).

This work is the result of, and reflects, the development of a gradual personal interest in the positive aspects of the woman's perinatal psychological well-being. At the beginning of the research doctorate, the study was mainly oriented towards psychological disease and related protection factors. The participation in a perinatal psychology working-group at the Department of Education Sciences of the University of Genoa gave me the opportunity to collaborate in research carried out within the *Optibirth* project (Morano et al., 2018), an international research to address the increase in caesarean section rates focusing on the practice of routine caesarean after a caesarean section. At the same time I participated in the realization of the second wave of the International Survey of

Children's Well-being (ISCWeB), a worldwide study of subjective well-being that was developed by the International Society for Child Indicators (ISCI) (Migliorini, Tassara, & Rania, 2018; Migliorini, Tassara, & Rania, Under Review). This collaboration has increased my knowledge in the field of well-being in general and in particular as conceptualized in the perspective of positive psychology. Similarly to what said by Alderdice and colleagues (2013), I recognized the importance of promoting the woman's perinatal well-being and of her family beside the prevention of psychological disease, as the majority of the women experience positively the perinatal period.

The overall purpose of this doctoral thesis is therefore to focus on the woman's perinatal psychological disease/well-being in order to analyze various psycho-social factors, emerged by literature and cultural context.

The thesis is organized in six chapters, each one dedicated to a study. The first chapter reports a systematic scoping review of the literature realized to identify studies realized in the perinatal psychology area that used standardized measure of well-being developed within the positive psychology perspective. Results report about the utilized instruments and a summary of the evidences of the researches identified. The second chapter presents a quantitative study dedicated to explore the woman's psychological well-being/disease during pregnancy and childbirth, by the analysis of the statistical relationships between several measures. The study will also provide group comparisons, including analysis of differences between Italian and migrant women. The third chapter refers to a quantitative study realized to analyze relationships between distress, depression and dyadic adjustment during pregnancy. The study will provide evidence of the mediation role of depression between distress and depression. The fourth chapter concerns a quantitative study aiming to analyze, during pregnancy and motherhood, relationships between perceived social support and measures of woman's psychological well-being/disease, analyzing the mediating role of dyadic adjustment and social support. In the fifth chapter it is illustrated a qualitative study aiming to explore, among Italian and migrant women, the perinatal well-being meanings and expectations regarding childbirth and motherhood. Finally, in the sixth chapter the Italian women's perception was investigated regarding the possibility to giving birth with a VBAC, focusing on their relational and psychological needs. Strengths and limitations are reported in the conclusions section, beside implications for future research and psychological well-being promotion interventions, both for the pregnant woman and for her partner.

- Main references

Aasheim, V., Waldenström, U., Rasmussen, S., Espehaug, B., & Schytt, E. (2014). Satisfaction with life during pregnancy and early motherhood in first-time mothers of advanced age: a population-based longitudinal study. *BMC Pregnancy and Childbirth*, 14(1), 86.

- Airo, R., Korja, R., Saisto, T., Rouhe, H., Muotka, J., & Salmela-Aro, K. (2018). Changes in emotions and personal goals in primiparous pregnant women during group intervention for fear of childbirth. *Journal of Reproductive and Infant Psychology*, 1-18.
- Alderdice, F., Ayers, S., Darwin, Z., Green, J., Jomeen, J., Kenyon, S., ... & Savage-McGlynn, E. (2013). Measuring psychological health in the perinatal period: workshop consensus statement, 19 March 2013. *Journal of Reproductive and Infant Psychology*, 31(5), 431-438.
- Alderdice, F., Lynn, F., & Lobel, M. (2012). A review and psychometric evaluation of pregnancy-specific stress measures. *Journal of Psychosomatic Obstetrics & Gynecology*, 33(2), 62-77.
- Alderdice, F., McNeill, J., Gargan, P., & Perra, O. (2017). Preliminary evaluation of the Well-being in Pregnancy (WiP) questionnaire. *Journal of Psychosomatic Obstetrics & Gynecology*, 38(2), 133-142.
- Allan, C., Carrick-Sen, D., & Martin, C. R. (2013). What is perinatal well-being? A concept analysis and review of the literature. *Journal of Reproductive and Infant Psychology*, 31(4), 381-398.
- Ammaniti, M., Tambelli, R., & Odorisio, F. (2013). Exploring maternal representations during pregnancy in normal and at-risk samples: The use of the interview of maternal representations during pregnancy. *Infant Mental Health Journal*, 34(1), 1-10.
- Austin, M. P. (2004). Antenatal screening and early intervention for “perinatal” distress, depression and anxiety: where to from here?. *Archives of Women’s Mental Health*, 7(1), 1-6.)
- Basharpoor, S., & Sheykholslami, A. (2015). The relation of marital adjustment and family functions with quality of life in women. *Europe's Journal of Psychology*, 11(3), 432.
- Bassi, M., Delle Fave, A., Cetin, I., Melchiorri, E., Pozzo, M., Vescovelli, F., & Ruini, C. (2017). Psychological well-being and depression from pregnancy to postpartum among primiparous and multiparous women. *Journal of Reproductive and Infant Psychology*, 35(2), 183-195.
- Bélanger, C., Di Schiavi, M. F., Sabourin, S., Dugal, C., El Baalbaki, G., & Lussier, Y. (2014). Self-esteem, coping efforts and marital adjustment. *Europe’s Journal of Psychology*, 10(4), 660-671.
- Benza, S., & Liamputtong, P. (2014). Pregnancy, childbirth and motherhood: A meta-synthesis of the lived experiences of immigrant women. *Midwifery*, 30(6), 575-584.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research in psychology*, 3(2), 77-101.
- Camisasca, E., Miragoli, S., & Di Blasio, P. (2014). Is the relationship between marital adjustment and parenting stress mediated or moderated by parenting alliance?. *Europe’s Journal of Psychology*, 10(2), 235-254.
- Collins, W. A., & Goodnow, J. J. (2014). *Development According to Parents*. New York: Psychology Press.
- Colquhoun, H. L., Levac, D., O'Brien, K. K., Straus, S., Tricco, A. C., Perrier, L., ... & Moher, D. (2014). Scoping reviews: time for clarity in definition, methods, and reporting. *Journal of Clinical Epidemiology*, 67(12), 1291-1294.
- Cowan, P. A., & Cowan, C. P. (2003). Normative family transitions, normal family processes, and healthy child development. In F. Walsh (Ed.), *Normal family processes: Growing diversity and complexity* (pp. 424–459). New York: Guilford.
- Cox, J. L., Holden, J. M., & Sagovsky, R. (1987). Detection of postnatal depression: development of the 10-item Edinburgh Postnatal Depression Scale. *The British Journal of Psychiatry*, 150(6), 782-786.
- Crossley, M. L. (2007). Childbirth, complications and the illusion of choice': A case study. *Feminism & Psychology*, 17(4), 543-563.

- Csikszentmihalyi, M. (1990). *Flow: The psychology of optimal experience*. New York: Harper & Row
- Delle Fave, A., Pozzo, M., Bassi, M., & Cetin, I. (2013). A longitudinal study on motherhood and well-being: Developmental and clinical implications. *Terapia Psicologica, 1*(1), 21-33.
- Diener E., Diener M. (2009) Cross-Cultural Correlates of Life Satisfaction and Self-Esteem. In E. Diener, (Ed), *Culture and well-being* (pp. 71-91). Dordrecht: Springer.
- Diener, E. D., Emmons, R. A., Larsen, R. J., & Griffin, S. (1985). The satisfaction with life scale. *Journal of Personality Assessment, 49*(1), 71-75.
- Diener, E., & Ryan, K. (2009). Subjective well-being: A general overview. *South African Journal of Psychology, 39*(4), 391-406.
- Diener, E., Heintzelman, S. J., Kushlev, K., Tay, L., Wirtz, D., Lutes, L. D., & Oishi, S. (2016). Findings all psychologists should know from the new science on subjective well-being. *Canadian Psychology/Psychologie Canadienne, 58*(2), 87–104.
- Diener, E., Wirtz, D., Tov, W., Kim-Prieto, C., Choi, D. W., Oishi, S., & Biswas-Diener, R. (2010). New well-being measures: Short scales to assess flourishing and positive and negative feelings. *Social Indicators Research, 97*(2), 143-156.
- Dulude, D., Belanger, C., Wright, J., & Sabourin, S. (2002). High-risk pregnancies, psychological distress, and dyadic adjustment. *Journal of Reproductive and Infant Psychology, 20*(2), 101-123.
- Fahey, J. O., & Shenassa, E. (2013). Understanding and meeting the needs of women in the postpartum period: the perinatal maternal health promotion model. *Journal of Midwifery & Women's Health, 58*(6), 613-621.
- Falicov, C. J. (2012). Immigrant family processes. In F. Walsh (Ed.), *Normal family processes: Growing diversity and complexity* (pp. 297–323). New York: Guilford.
- Feeney, B. C., & Collins, N. L. (2015). A new look at social support: A theoretical perspective on thriving through relationships. *Personality and Social Psychology Review, 19*(2), 113-147.
- Giardinelli, L., Innocenti, A., Benni, L., Stefanini, M. C., Lino, G., Lunardi, C., ... & Faravelli, C. (2012). Depression and anxiety in perinatal period: prevalence and risk factors in an Italian sample. *Archives of Women's Mental Health, 15*(1), 21-30.
- Grant, K. A., McMahon, C., & Austin, M. P. (2008). Maternal anxiety during the transition to parenthood: a prospective study. *Journal of Affective Disorders, 108*(1-2), 101-111.
- Greenglass, E. R., & Fiksenbaum, L. (2009). Proactive coping, positive affect, and well-being: Testing for mediation using path analysis. *European Psychologist, 14*(1), 29-39.
- Greenglass, E., Fiksenbaum, L., & Eaton, J. (2006). The relationship between coping, social support, functional disability and depression in the elderly. *Anxiety, Stress, and Coping, 19*(1), 15-31.
- Gutiérrez-Zotes, A., Labad, J., Martín-Santos, R., García-Esteve, L., Gelabert, E., Jover, M., ... & Gratacós, M. (2016). Coping strategies for postpartum depression: a multi-centric study of 1626 women. *Archives of Women's Mental Health, 19*(3), 455-461.
- Held, L., & Rutherford, A. (2012). Can't a mother sing the blues? Postpartum depression and the construction of motherhood in late 20th-century America. *History of Psychology, 15*(2), 107.
- Hilpert, P., Xu, F., Milek, A., Atkins, D. C., Bodenmann, G., & Bradbury, T. N. (2018). Couples coping with stress: Between-person differences and within-person processes. *Journal of Family Psychology, 32*(3), 366-374.

- Henrich, G., & Herschbach, P. (2000). Questions on Life Satisfaction (FLZM): A short questionnaire for assessing subjective quality of life. *European Journal of Psychological Assessment, 16*(3), 150.
- Howarth, A., Swain, N., & Treharne, G. J. (2010). A review of psychosocial predictors of outcome in labour and childbirth. *New Zealand College of Midwives Journal, 42*, 17–20.
- Howarth, A., Swain, N., & Treharne, G. J. (2011). Taking personal responsibility for well-being increases birth satisfaction of first time mothers. *Journal of Health Psychology, 16*(8), 1221–1230.
- Irwin, J. L., Beeghly, M., Rosenblum, K. L., & Muzik, M. (2016). Positive predictors of quality of life for postpartum mothers with a history of childhood maltreatment. *Archives of Women's Mental Health, 19*(6), 1041-1050.
- Jonsdottir, S. S., Thome, M., Steingrimsdottir, T., Lydsdottir, L. B., Sigurdsson, J. F., Olafsdottir, H., & Swahnberg, K. (2017). Partner relationship, social support and perinatal distress among pregnant Icelandic women. *Women and Birth, 30*(1), e46-e55.
- Keyes, C. L., Fredrickson, B. L., & Park, N. (2012). Positive psychology and the quality of life. In K.C. Land, (Eds), *Handbook of social indicators and quality of life research* (pp. 99–112). New York: Springer.
- Kwee, J. L., & Mc Bride, H. L. (2015). Working together for women's empowerment: Strategies for interdisciplinary collaboration in perinatal care. *Journal of Health Psychology, 2*, 1–11.
- Lakey, B., & Orehek, E. (2011). Relational regulation theory: A new approach to explain the link between perceived social support and mental health. *Psychological Review, 118*(3), 482.
- Lobel, M., Hamilton, J. G., & Cannella, D. T. (2008). Psychosocial perspectives on pregnancy: prenatal maternal stress and coping. *Social and Personality Psychology Compass, 2*(4), 1600-1623.
- Lopez, S. J., & Snyder, C. R. (2003). *Positive psychology Assessment: A handbook of models and measures*. Washington, DC: American Psychological Association.
- Malacrida, C., & Boulton, T. (2014). The best laid plans? Women's choices, expectations and experiences in childbirth. *Health, 18*(1), 41-59.
- Mamun, A. A., Clavarino, A. M., Najman, J. M., Williams, G. M., O'Callaghan, M. J., & Bor, W. (2009). Maternal depression and the quality of marital relationship: a 14-year prospective study. *Journal of Women's Health, 18*(12), 2023-2031.
- Mansfield, B. (2008). The social nature of natural childbirth. *Social Science & Medicine, 66*(5), 1084-1094.
- McAra-Couper, J., Jones, M., & Smythe, L. (2012). Caesarean-section, my body, my choice: The construction of 'informed choice' in relation to intervention in childbirth. *Feminism & Psychology, 22*(1), 81-97.
- McGoldrick, M., & Carter, B. (2003). The family life cycle. In F. Walsh (Ed), *Normal family processes: Growing diversity and complexity* (pp. 375-398). New York: Guilford.
- Molgora, S., Acquati, C., Fenaroli, V., & Saita, E. (2018). Dyadic coping and marital adjustment during pregnancy: A cross-sectional study of Italian couples expecting their first child. *International Journal of Psychology*. <https://doi.org/10.1002/ijop.12476>
- Morrell, C. J., Cantrell, A., Evans, K., & Carrick-Sen, D. M. (2013). A review of instruments to measure health-related quality of life and well-being among pregnant women. *Journal of Reproductive and Infant Psychology, 31*(5), 512-530.
- Pesonen, A. K., Lahti, M., Kuusinen, T., Tuovinen, S., Villa, P., Hämäläinen, E., ... & Räikkönen, K. (2016). Maternal prenatal positive affect, depressive and anxiety symptoms and birth outcomes: The PREDO study. *PloS one, 11*(2), e0150058.

- Peterson, C., & Seligman, M. E. P. (2004). *Character strengths and virtues*. Oxford: Oxford University Press.
- Pinto, S., Fumincelli, L., Mazzo, A., Caldeira, S., & Martins, J. C. (2017). Comfort, well-being and quality of life: Discussion of the differences and similarities among the concepts. *Porto Biomedical Journal*, 2(1), 6-12.
- Prino, L. E., Rollè, L., Sechi, C., Patteri, L., Ambrosoli, A., Caldarera, A. M., ... & Brustia, P. (2016). Parental relationship with twins from pregnancy to 3 months: the relation among parenting stress, infant temperament, and well-being. *Frontiers in Psychology*, 7, 1628.
- Rallis, S., Skouteris, H., McCabe, M., & Milgrom, J. (2014). A prospective examination of depression, anxiety and stress throughout pregnancy. *Women and Birth*, 27(4), e36-e42.
- Razurel, C., Kaiser, B., Sellenet, C., & Epiney, M. (2013). Relation between perceived stress, social support, and coping strategies and maternal well-being: a review of the literature. *Women & Health*, 53(1), 74-99.
- Rollè, L., Prino, L. E., Sechi, C., Vismara, L., Neri, E., Polizzi, C., ... & Ierardi, E. (2017). Parenting stress, mental health, dyadic adjustment: A structural equation model. *Frontiers in Psychology*, 8, 839.
- Ryff, C. D., & Singer, B. H. (2008). Know thyself and become what you are: A eudaimonic approach to psychological well-being. *Journal of Happiness Studies*, 9(1), 13-39.
- Salmela-Aro, K., Read, S., Rouhe, H., Halmesmäki, E., Toivanen, R. M., Tokola, M. I., & Saisto, T. (2012). Promoting positive motherhood among nulliparous pregnant women with an intense fear of childbirth: RCT intervention. *Journal of Health Psychology*, 17(4), 520-534.
- Schwarzer, R., & Knoll, N. (2007). Functional roles of social support within the stress and coping process: A theoretical and empirical overview. *International Journal of Psychology*, 42(4), 243-252.
- Seligman, M. E. P. (2002). *Authentic happiness: Using the new positive psychology to realize your potential for lasting fulfillment*. New York: Free Press
- Stanojević, D., Krstić, M., Jaredić, B., & Dimitrijević, B. (2014). Proactive coping as a mediator between resources and outcomes: A structural equations modeling analysis. *Applied Research in Quality of Life*, 9(4), 871-885.
- Symon, A. (2003). A review of mothers' prenatal and postnatal quality of life. *Health and Quality of Life Outcomes*, 1(1), 38
- Taubman-Ben-Ari, O., Shlomo, S. B., & Findler, L. (2012). Personal growth and meaning in life among first-time mothers and grandmothers. *Journal of Happiness Studies*, 13(5), 801-820.
- Thomason, E., Volling, B. L., Flynn, H. A., McDonough, S. C., Marcus, S. M., Lopez, J. F., & Vazquez, D. M. (2014). Parenting stress and depressive symptoms in postpartum mothers: Bidirectional or unidirectional effects?. *Infant Behavior and Development*, 37(3), 406-415.
- Velikonja, V. G., Lozej, T., Leban, G., Verdenik, I., & Bokal, E. V. (2016). The Quality of Life in Pregnant Women Conceiving Through In Vitro Fertilization. *Slovenian Journal of Public Health*, 55(1), 1-10.
- Vismara, L., Rollè, L., Agostini, F., Sechi, C., Fenaroli, V., Molgora, S., ... & Polizzi, C. (2016). Perinatal parenting stress, anxiety, and depression outcomes in first-time mothers and fathers: a 3-to 6-months postpartum follow-up study. *Frontiers in Psychology*, 7, 938.
- Whisman, M. A., Davila, J., & Goodman, S. H. (2011). Relationship adjustment, depression, and anxiety during pregnancy and the postpartum period. *Journal of Family Psychology*, 25(3), 375.
- Walsh, F. (2012). The 'new normal': Diversity and complexity in 21st century families. In F. Walsh (Ed.), *Normal family processes: Growing diversity and complexity* (pp. 3-27). New York: Guilford.

- **Attività di ricerca correlata alla ricerca di dottorato**

**I corsi di preparazione al parto vaginale dopo cesareo (Vaginal Birth After Cesarean - VBAC):
Una ricerca quali-quantitativa sulla qualità percepita dalle donne.**

La letteratura scientifica internazionale sottolinea l'utilità di studiare la qualità percepita dalle donne relativamente alle cure prenatali mettendola in relazione all'esperienza psicologica e agli outcomes ostetrici del parto. Congiuntamente, da un'analisi degli studi nell'ambito della psicologia perinatale, emerge la necessità di approfondire la relazione esistente tra esperienza del parto e comportamenti genitoriali positivi, approfondendo il costrutto di autoefficacia genitoriale. Definita come le credenze di un genitore in merito alla capacità di organizzare ed eseguire compiti nell'ambito della responsabilità genitoriale, l'autoefficacia genitoriale materna risulta positivamente correlata con l'esperienza del parto riportata dalla donna.

La ricerca, realizzata in collaborazione con IRCCS Ospedale San Martino-IST Genova, U.O. Ostetricia e Ginecologia, si colloca all'interno del progetto di ricerca internazionale OptiBirth, finanziato dall'Unione Europea al fine di studiare il fenomeno dell'incremento dei tassi di taglio cesareo. In merito ai fattori che possono aumentare la probabilità di successo del VBAC, viene riportata la necessità di organizzare corsi di preparazione al parto specifici per le donne sottoposte a un precedente taglio cesareo.

All'interno di questo frame-work teorico, la presente ricerca si proponeva:

- misurare la valutazione delle donne circa la qualità delle cure prenatali percepite ai corsi di preparazione al VBAC realizzati in Italia
- esplorare attraverso una metodologia quali-quantitativa la relazione tra qualità delle cure prenatali percepite, outcomes del parto, esperienza emotiva del parto e autoefficacia genitoriale percepita.

La raccolta dei dati è iniziata nel mese di marzo 2017. L'analisi dei dati si è conclusa a dicembre 2017.

ATTIVITA' DIDATTICA

Cultore della materia per la cattedra di: Metodi e tecniche di Psicologia di Comunità, Psicologia delle Relazioni Familiari, Metodi e Tecniche di Intervento di Gruppo per psicologia, e Metodi e Tecniche di Intervento di Gruppo per Pedagogia, Progettazione e Ricerca Educativa.

PUBBLICAZIONI - Cumulativo

Publicate

Migliorini, L., Rania, N., & Tassara T. (2016). Ecological perspective on early years workforce competences: a study in Italian ECEC settings. *Early Years*, 36(2), 165-178.

Migliorini, L., Rania, N., Tassara T., & Cardinali P. (2016). Family routine behaviours and meaningful rituals: A comparison between Italian and migrant couples. *Social Behavior and Personality an International Journal*, 44(1), 9-18.

Migliorini, L., Tassara, T., & Rania, N. (2018). A Study of Subjective Well-Being and Life Satisfaction in Italy: how are Children doing at 8 years of Age?. *Child Indicators Research*, 1-21.
<https://doi.org/10.1007/s12187-017-9514-3>

Morano, S., Migliorini, L., Rania, N., Piano, L., Tassara, T., Nicoletti, J., & Lundgren, I. (2018). Emotions in labour: Italian obstetricians' experiences of presence during childbirth. *Journal of Reproductive and Infant Psychology*, 36(1), 30-41.

Under review

Migliorini, L., Tassara, T., & Rania, N. The influence of the neighborhood on children's subjective well-being: An exploratory study in Italy. Submitted July 2018 to *American Journal of Community Psychology*.

To submit

Tassara, T., Migliorini, L., & Rania, N. Measurements of woman's subjective and psychological well-being: A systematic scoping review of the literature in the perinatal area. *Journal of Reproductive and Infant Psychology*.

PRESENTAZIONI ORALI - Cumulativo

Migliorini, L., Rania N., Piano L., Tassara T., & Morano S. Fear of childbirth and experience of cesarean: the psychological perspective in a qualitative study with women and clinicians. Poster to the 10th Normal Labour & Birth Research Conference 'Normal birth; into the future'. Grange Over Sands, 15-16-17 giugno 2015

Migliorini, L., Tassara, T., & Rania, N. *Multiple levels of influence on children's well-being: the neighborhood role*. ISCI Conference, Montreal, June 30th 2017

Migliorini, L., Tassara, T., & Rania, N. *8-years-old-children's subjective well-being: the first findings from the children's worlds study in Italy*. 15th ISQOLS Annual Conference, Innsbruck, Austria, September 29th 2017.