

Postpartum psychological pressure on single mothers: an interpretative phenomenological analysis

Psychological pressure on single mothers

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Abstract

Purpose – To delve further into the phenomenon of psychological pressure on single mothers, the purpose of this paper is to explore the factors that affect the psychological state of single mothers in Vietnam.

Design/methodology/approach – Interpretative phenomenological analysis (IPA) interviews were conducted and analysed with the aim of understanding the psychological state of single mothers sampled from a social group in Vietnam.

Findings – Single mothers lack direct support needed to improve their confidence, job opportunities, income levels and social status. The absence of interventions increases the psychological pressure on single mothers in Vietnam.

Research limitations/implications – A future study can explore the psychological state of single mothers using a more expansive data set.

Practical implications – Understanding the psychosocial and socio-economic risk factors of postpartum psychological pressure in single mothers may have important implications on preventative and support measures, as well as laying the groundwork for social protection interventions and informing welfare policy-making at a national level.

Social implications – Social constructs in Vietnam compound the effect of postnatal depression on Vietnamese single mothers (in contrast to their counterparts in developed Western nations). This means that researchers and policymakers need to reconstruct stigmas that cause psychological pressures on single motherhood, and in doing so, help to change the view held about single motherhood.

Originality/value – This study is the first to explore psychological state of mothers in Vietnam using IPA.

Keywords IPA, Ideal psychological state, Postpartum stress, Psychological pressure, Single-motherhood

Paper type Research paper

Introduction

One widely neglected field of study in developing nations is that of the psychological health of single mothers in relation to childbirth and raising a child or children. In Vietnam, for



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instance, single motherhood is generally a source of unhealthy psychological state for women (Tho Tran *et al.*, 2018). The phenomenon of single motherhood calls for further investigation in terms of understanding its occurrence (Upadhyay *et al.*, 2019) and impact. Tho Tran *et al.* (2018), owing to the close relationship it has with societal norms and cultural consequences (Hofstede, 2018) especially, around the psychological state of single mothers. Although the exact number of single mothers in Vietnam remains either unreported or unsupported by current government and institutional data, there are still cases of this phenomenon covertly lingering in several provinces of the country (Do *et al.*, 2018). Generally, the situation of single motherhood in and of itself should not pose major issues; however, there are reported cases of postnatal depression (PND) even in advanced societies such as Europe and the USA (Oates *et al.*, 2004), raising the concern that the phenomenon might be more precarious in developing societies (Upadhyay *et al.*, 2019). Compared to Vietnam, the findings in the West highlight the experiences of single mothers and how these impact both their daily lives and their performance at work. The UK's National Health Service (NHS, 2011) estimates that around 15% of women experience PND, with 58% of this number not seeking medical intervention. Considering the population of Vietnam, which is currently around 90 million (Benuyenah and Phoon, 2014), the number of women who experience PND is likely to be much higher than in the UK. Thus, making sense of women's experiences of postpartum psychological pressure is crucial to gaining a thorough socio-cultural understanding of this issue.

Culturally, Vietnam is generally classified as a collectivist society (Hofstede, 2018) in which family cohesion is key, while key to the proper functioning of family cohesion is a sustained equilibrium between family members. This equilibrium could be destabilised by a woman family member having a child without the support of the child's father or a woman choosing to or accidentally becoming a single mother. The state of having a child without the support of the child's father is described as single motherhood (Trost, 1980) in the PND literature.

In this study, we explore the situation of single mothers as a key element of the family unit while aiming to understand how single mothers respond to different events in their lives. According to Klasen *et al.* (2011), matriarchal households in developing countries should be entitled to receive support, as they are generally disadvantaged compared to others; they frequently struggle in the face of obsolete cultural norms and social discrimination (Do *et al.*, 2018). Indeed, when becoming single mothers, not only do women experience social opprobrium but also many psychological health issues (Mehta and Mehta, 2014). Noticeably, when compared with non-single mothers, single mothers tend to encounter more mental health issues. While a typical non-single mother works on average around 40 h per week (An and Kazuyo, 2018), a single mother must work more hours to meet the needs of herself and her children. There are potential consequences for a single mother's work life in the sense that they are constantly under physical (Mehta and Mehta, 2014) and psychological pressure (Slomian *et al.*, 2019). As Vietnam makes progress in its development particularly in the area of labour force participation by women (An and Kazuyo, 2018), it is important to explore the effects of the psychological and socio-economic elements of women's mental health that potentially impede this progress. In this regard, the findings from this study will lay the groundwork for the implementation of social protection interventions and inform welfare policy-making on a national level.

Literature review

Depression among women has attracted research interest from multiple academic fields (Aoyagi and Tsuchiya, 2019; Slomian *et al.*, 2019) owing to its wider impact on the health of

sufferers. Symptoms of PND are commonly considered to include: “depressed mood, loss of interest or pleasure in activities, sleep disturbance, appetite disturbance, loss of energy, feelings of worthlessness or guilt, diminished concentration, irritability, anxiety, and thoughts of suicide” (Slomian *et al.*, 2019). Unlike PND, limited and specific accounts of psychological pressure on mothers have been documented in the social science literature. Owing to its place within the cultural classification (i.e.: *collectivism and feminism*) (Hofstede, 2018), Vietnamese mothers tend to experience shame, humiliation, isolation, rejection and neglect; an aggregate of these termed psychological pressure in this paper and broadly PND in earlier work (Tho Tran *et al.*, 2018; Aoyagi and Tsuchiya, 2019; Slomian *et al.*, 2019). The consensus on the contextual meaning of these terms vary but may include, for example, emotional violence exerted by partners after childbirth (Tho Tran *et al.*, 2018), depression in pregnant women and mothers (Canadian Paediatric Society, 2004) and caring for disabled children and postpartum isolation (Heer *et al.*, 2015; Do *et al.*, 2018). Considering the confusions associated with the term, this study takes the phenomenon of PND to be coterminous with psychological pressure in the sense that they both comprise similar experiences for the mother (Tho Tran *et al.*, 2018, 2018) nonetheless, in Vietnam, the extent of PND on the mother straddles across to the wider social structures and identities. In line with recent investigation into PND (Slomian *et al.*, 2019), previous research has established the link between family structures and the psychological well-being of family members, dwelling on mental symptoms including anxiousness and depression (Butterworth, 2004; Wang, 2004). Depression is found to affect more women than men (9.5% and 5.8%, respectively) (Atkins, 2010). According to the Australian National Survey of Mental Health and Well-Being, about 45% of single mothers encounter some kind of psychological issues during the first year after delivery, whereas this figure is only 23.6% for non-single mothers (Crosier *et al.*, 2007). The various historic positions on the subject of psychological pressure exclude the phenomenon of self-efficacy, for example, Sajedi *et al.* (2016) and later, Aoyagi and Tsuchiya (2019); this, however, is crucial to the Vietnamese situation.

Self-efficacy is defined as a self-assessment of “how well one can execute courses of action required to deal with prospective situations” (Bandura, 1977). There are a number of behavioural and socio-economic characteristics in single mothers that are predictors of depression in relation to self-efficacy theory (Bandura, 1977). These may include being of the female gender, stressful life events, a lack of social support, poverty, a lower level of education, a lack of self-esteem or a recent pregnancy or delivery (Atkins, 2010). Each risk factor plays a part in determining the level of stress present in single mothers. Employment status, financial burden, the parental role and social support are a few of the most prominent factors (Tran and McInnis-Dittrich, 2000).

Given that employment status (Pham and Reilly, 2009; An and Kazuyo, 2018) has been shown to have a profound effect on the level of stress in single mothers (Do *et al.*, 2018; Slomian *et al.*, 2019). Similarly, lone mothers who are unemployed experience more unhappiness, stress and fatigue during the course of their parenthood than both mothers with partners and employed single mothers (Meier *et al.*, 2016). Research has also shown that single mothers who are employed, even with a low salary, tend to encounter fewer depressive symptoms (Laney *et al.*, 2014) than those who are unemployed (Jackson and Scheines, 2018). When less depressed, they are also better able to raise their child or children and seem to encounter fewer behavioural issues from the child in the future (Jackson and Scheines, 2018). Having a job also creates a source of empowerment, social belonging, self-esteem and a pleasant break from the day-to-day parenting routine; hence, leading to better acknowledgement and joy during times of childcare (Yetis-Bayraktar *et al.*, 2013). Without

employment, financial burden is the obvious derivative that influences a single mother's stress level after childbirth (Slomian *et al.*, 2019).

The collectivist nature of societies in Southeast Asia makes parental burden an obvious obstacle for single mothers (Tran and McInnis-Dittrich, 2000). In a study conducted in Malaysia, it was found that single mothers felt that they were being held accountable for many aspects of daily care and the general health and well-being of themselves and their families (Hashim *et al.*, 2015). While roles and responsibilities may not be the sole source of burden, the wide range of ongoing tasks and responsibilities over a long period of time may trigger stress. When comparing generally the case of two women – one with more roles and responsibilities than the other – it was observed that the former is more prone to feeling overwhelmed than the latter (Hashim *et al.*, 2015). However, once children mature and proceed to subsequent developmental milestones, single mothers tend to feel less stress owing to a lesser burden in their daily care routine and also because the mother–child bond may have become stronger (Berryhill and Durtschi, 2017; Williford *et al.*, 2007).

In an earlier work, social support has been identified as an important factor, in addition to financial support and parental support that can act as a predictor of stress levels in single mothers (Crosier *et al.*, 2007). This could be tangible support, such as assistance with childcare or intangible support, for example, emotional or psychological support (Rousou *et al.*, 2019). In other countries, when single mothers receive support from the public, including government, family or friends, it helps to lessen their stress levels (Tran and McInnis-Dittrich, 2000; Reading and Reynolds, 2001).

A few theories including social cognitive theory highlight the known impact of self-efficacy, which determines objectives, perceptions, expectation and habits, which, in turn, have implications for health outcomes (Bandura, 2004). In connection with Figure 3, self-efficacy theory portrays an individual's behaviour and reactions to internal and external factors, making the link between self-efficacy, self-esteem, parenting, health and other indicators (Atkins, 2010) more conclusive.

Given the psychological pressure resulting from PND (Do *et al.*, 2018), it is congruent to revisit the social constructs of motherhood within the Vietnamese context in particular and Southeast Asia in general. For the majority of Vietnamese people, being a mother is culturally and religiously applauded (Tho Tran *et al.*, 2018), which leads to unmarried and childless women resorting to practices such as hiring fake grooms, abortions and conspicuous wedding attendees.

Methodology

As earlier established in the introduction, postpartum psychological pressure is taken to mean external and/or internal circumstances after childbirth that lead to perceived anxiety or other negative emotional or physical states, such as pressure or discomfort on single mothers, which they deem stressful and which affect their mental health and physical well-being (Jones *et al.*, 2001).

As per the nature of the experience being studied, a qualitative approach was chosen for this study, as it answers the deeper questions on series of life changing events encountered by the respondents (Tuffour, 2017). Single mothers' experiences of PND are explorative (Candela, 2019) and would benefit little from a quantitative predictive approach (Smith and Osborn, 2015). To be consistent with studies on lived experiences, phenomenological approach using interpretative phenomenological analysis (IPA) (Smith *et al.*, 2009) was used for the study. In-depth interviews using IPA were conducted with four single mothers who were, at the time of the interview, unmarried or without a partner. Several studies outside Vietnam (Smith *et al.*, 2009; Bulley *et al.*, 2009) have explored and applied IPA however

limited application of this method is evident in the literature regarding postpartum studies in Vietnam (Do *et al.*, 2018). The aim of IPA is to immerse oneself in the data (Flowers and Larkin, 2009); therefore, a native speaker was used for the interviews and transcription. The data collection phase comprised two stages. Firstly, interview data was obtained in native Vietnamese and then translated into English using fluent speakers of both languages.

As the respondents were geographical dispersed and had to reach physically a Skype and telephone interviews (or, rather, dialogues) were conducted in Vietnamese, as this was the language the participants preferred and spoke fluently. To ensure that the meaning of a participant's account was retained, we translated the interview into English and carried out a back-translation into Vietnamese then finally into English (Smith, 2010). Once the reliability of the transcripts was established a hermeneutic analysis was carried out on either margin of the transcript to generate superordinate and subthemes (Smith, 2010; Guba and Lincoln, 1985).

Participants

A group of four single mothers were recruited from a Facebook group called “*Hoi nhung ba me don than*”, which translates as “group of single mothers”. The sample size was deemed adequate as IPA protocol allows for smaller sample sizes with deeper exploration of the phenomenon being studied, (Shinebourne, 2011; Tuffour, 2017). The participants were aged between 24 and 32 years ($M = 28$, $SD = 3.37$). Researcher 1 contacted the group and identified the four would-be participants based on their initial posts on the platform and an initial conversation with them. To fulfil the requirements of *bracketing* as stipulated by Quinn and Clare (2008) and Smith *et al.* (1999), we filtered out Facebook users with extensive posts and commentary about their experiences of childbirth and single-motherhood. By excluding these members, we increased the validity of the information obtained by avoiding the potential bias from posted comments already available in the group's pages. A 14-item semi-structured interview questions were used as a guide to obtain the interview data (Smith *et al.*, 2009). The interviews ranged in length from 45 to 54 min ($M = 47.5$, $SD = 3.70$).

Member checking and rigour

Arguably, there are two approaches to ensuring quality member checking in qualitative research: respondent validation and researcher validation (Carlson, 2010). In this paper, Guba and Lincoln's (1985) recommendation was followed to validate the respondents' accounts. Firstly, to ensure consistency with the recommendation of Sutrisno *et al.* (2014), the researchers validated respondents' accounts through back translation, whereby the English transcripts were translated back into Vietnamese to ensure that they were contextually and personally representative of the interviewees' accounts (Sutrisno *et al.*, 2014). Secondly, approximately 30% of the quoted transcripts as they appeared in the write-up were sent by email for respondents to check, to ensure that they concurred with respondents' recollection of their accounts. This approach has been recommended by Guba and Lincoln (1985) as a means of establishing internal validity. An online (Skype) meeting was conducted with each participant to obtain information on whether respondents agreed or disagreed with their *voice* as presented in the analysis. All respondents were in agreement.

Analysis and discussion

The key difference between the current findings and those of previous studies (Thi and Thuy, 2018; Slomian *et al.*, 2019) is the uniform cultural context within which motherhood is framed. The accounts of the respondents in Vietnam corroborate the findings elsewhere;

however, phenomena such as abuse, gossip and shame, for instance, were unique to PND in Vietnam. All four studies revealed a number of both superordinate and subordinate themes that are common to previous studies but also typified the collectivist face-saving phenomenon (Doucet and Jehn, 1997) found in East Asian societies. The five superordinate themes with associated sub-themes are presented in Figure 1 and discussed below:

The analysis of the transcript revealed a major discovery: the factors that lead to postpartum psychological issues transform over time to become the stressors themselves. Although the overall actual psychological state (APS) – Figure 2, converges with the ideal psychological state (IPS) it is impossible to pinpoint which items in Figure 1 predominate this effect. For example, while attempting to avoid social stigma of being single, a participant chose a man to bridge the gap between her IPS and APS. Inadvertently, this event resulting from loneliness later caused her a long term depression until her child was born:

Well [...] I don't know if it's fate or that I was so easy to convince, but I quickly accepted his proposal and we got married [...].

The above statement portrays a picture of emptiness (Mehta and Mehta, 2014) – a void that the respondent felt needed to be filled. It is apparent that the woman in question became more stressed over the years when she questioned the “rightness or wrongness” of her decision to enter into a spontaneous relationship. Although the reasons leading to this decision can be separated from the effect of the decision, we can observe how the cause transfigured into the effect. Such a phenomenon can make the experienter's psychological state a cyclical one in the short term, although the overall pressure eases off in the long run (Figure 2).

Figure 2 estimates a conjectural convergence between APS and IPS; thus a significant part of this study is the relationship between IPS and APS). It emerged that all participants were initially in an IPS but that this situation rapidly changed, causing them to be in what we describe as an APS (Figure 2). When APS is above IPS, participants reported positive feelings and happiness and vice versa when APS is below IPS.

Financial factors

Across all four studies, participants indicated that financial factors played and continued to play a role in their mental state. An interesting point was made by two of the participants who believed that unemployment had a direct impact on their financial position. Uyen said “[...] I was in college when I dropped out of school and became a single mother. I haven't found any job ever since [pause] I am looking for a support from the single mothers club on Facebook. Sometimes single mothers who needed a job will post a status on the page and other mothers will contact us if they know of any vacancies in the area [...]”. Uyen seems to be experiencing a long-term mental imbalance as a result of abandoning her college studies and ensuing consequences. As an ongoing issue for Uyen, it seemed imperative to her that she seek help from others on Facebook, rather than from her partner's family. In study 4, we discovered that Linh had a similar experience to Uyen's in terms of her education; she said “[...] I was only 20 years old and just finished my Intermediate course and was unemployed. I was planning to study further and get a job when I met the man who is now my husband [...]”. A pattern seems to emerge between a lack of education, job procurement and financial status which are all consistent with previous findings in Asia (Mehta and Mehta, 2014; Do et al., 2018) and the USA (Slomian et al., 2019). Unlike developed nations that have supportive government initiatives (Sajedi et al., 2016), Vietnam does not have a developed

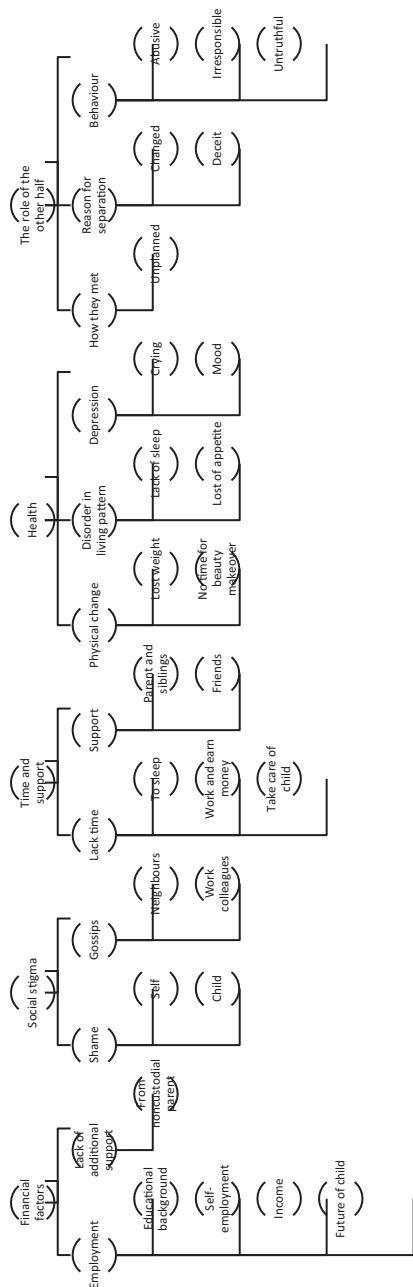


Figure 1.
Emerging themes

welfare system, which seems to worsen the issue for most single mothers in Vietnam (UNDP, 2014) and as in the account of Uyen.

Both Linh and Uyen revealed that, as a result of a lack of tangible support for their needs, they had to resort to online trading to support themselves and their children. The issue does not necessarily stop with online work – as Linh mentioned:

[...] errh I have never really had a real job. I used to sell things online but it wasn't stable and the income was not enough [...] now I have lost all my supply contacts so I can't do that anymore [...].

Later on in the interview, Linh said, “[...] *I don't even have a job to take care of my child*”. We see here a link between employment and financial security, with its potential impact on the children of single mothers. This phenomenon is not exclusive to Vietnam (UN, 2010), as it has also recently been reported by studies in India and Peru and Ethiopia (Upadhyay et al., 2019).

One sub-theme that cuts across all four studies was that of “additional support” or lack of it. According to Tran and McInnis-Dittrich (2000), a lack of financial support in and of itself is not the issue; rather, the issue is the absence of an additional support system (such as from their wider families. We infer that the support system for Vietnamese single mothers is weak, both financially and legally as previously found (Mehta and Mehta, 2014; Do et al., 2018). While the enforcement of child protection laws in Europe and North America tends to play a significant role in preventing and managing paternal neglect (Aoyagi and Tsuchiya, 2019), during our study, our participants indicated that they had received little or no support soon after falling pregnant and after their children were born. For example, when asked the question, “What about support from the local authority?”. Huong answered: “[...] *No, I did not get any support from them* [...]”. When Ngan was asked the same question, she replied: “*It was bad enough that my husband committed a crime, they will never give me any money* [pause] [...] [sarcastic laugh]”. Huong, however, confirmed that she received and continues to receive support from her parents and siblings. See Huong's quote below:

My family, including my parents and brother and sister, helped me during the time I got pregnant until now. There is no one else. They helped me to overcome the loneliness and difficulty that I have to face in terms of money and effort [...].

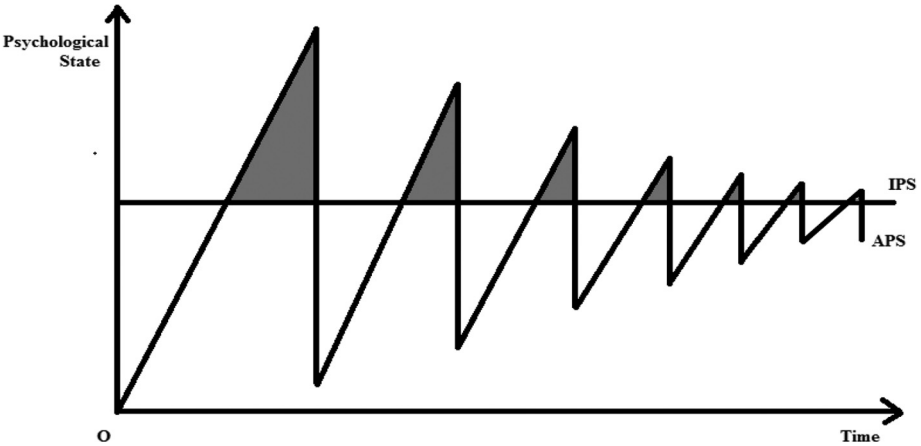


Figure 2.
Model of the
psychological state of
single mothers

With Vietnam being a collectivist society as it scores only 20 on the individualism scale (Hofstede, 2018), and also, by Trompenaars' classification (Trompenaars and Hampden-Turner, 1997), a feminist one, it is not surprising that mothers' families often step in to support their relatives when faced with issues related to single motherhood. Ngan also received help from her family and believes that this has been a strong reason for her "survival":

[...] and sometimes my parents and my husband's parents also give me some extra money to buy milk and clothes for the baby. They also encourage me to be strong and keep going [...] every day when I go to work, my husband's parents take care of the baby for me.

Although three of the four interviewees noted that they have close friends, none mentioned any real support coming from these networks of friends, something analogous to individualistic societies (Caputo and Ayoko, 2015).

Social stigma

In a closely knit society, the impact of social stigmatisation on an individual member can impact their psychological state (Ahmedani, 2011). Naturally, the stigma itself is dormant until it manifests in, for instance, shame and gossip. Shame can have an impact through both a personal reflection and an assessment of the event that has taken place, whereas gossip is more explicit – although both can result in what is generally termed "emotional labour" in the context of work (Corrigan and Watson, 2002). The participants noted that the impact of childbearing and single motherhood on their psychological state was primarily the result of two main variables – the self and the child – which is consistent with earlier studies (The and Parents, 2004; Selin and Selin, 2014; Do *et al.*, 2018). When asked whether they felt ashamed of having a child without a father, they answered as follows:

Uyen: I feel ashamed, particularly when faced with my family and relatives [...] I feel ashamed, but honestly, I didn't know that he was married before. If I had known, I would have never fallen for him [sigh].

Linh: No, I just feel ashamed that I was so naïve and decided to get married at such a young age before getting proper education or job. I feel sorry that my children have to grow up without both parents.

Ngan: No [...] I don't feel ashamed because of that but I feel ashamed for the bad deed that my husband has done.

The above responses confirm the assertion that social stigma presents a confounding effect on PND (Selin and Selin, 2014; Do *et al.*, 2018; Tho Tran *et al.*, 2018) and the psychological state of mothers (Slomian *et al.*, 2019). Gossip is particularly dangerous if it is merely perceived to exist, rather than actually having been encountered. The trauma of assuming that someone is saying something negative can ignite several mental responses (Dong *et al.*, 2013), which can then affect a single mother's attitude and behaviour in society. Three of the mothers interviewed indicated that they had been the victim of gossip in their neighbourhoods and workplaces. Huong said that, although she had not come face to face with the gossipers at work, she believed that people had been talking about her behind her back. Such a cognitive delusion could potentially trigger a number of responses, including feelings of neglect, isolation, fear and mistrust and perhaps even previously discussed antisocial behaviour disorders (Tho Tran *et al.*, 2018; Slomian *et al.*, 2019). The following

views from Uyen and Ngan emphasise the interpretation of shame, neglect, fear and isolation:

Uyen: I feel ashamed, particularly when faced with my family and relatives and I am sure there are some neighbours out there who are saying things about me. Er [...] the child's father's wife and family also made a big fuss, his parents and wife were always calling me and cursing in my face, saying I destroyed their family.

Ngan: [...] And as the child grows up, he could be influenced by the abusive things that the neighbours say about his father and he may feel ashamed of his own dad [...] [sigh] I feel hatred toward the outsiders who are gossiping and saying bad things behind my back.

Health

The health of new mothers is a key public health issue in every country (UNFPA, 2019). A lack of good health, or inadequate health, can negatively impact on the psychological state of mothers, which could potentially increase the risk of dementia and Alzheimer's diseases later in life (Medical News Today, 2019). A common theme identified during the transcription stage of our study was health and (linked to health) health-related disorders, depression and health in terms of physical change. Our participants spoke of weight loss between having their child and the time of the study:

Firstly, Ngan:

[...] thinking and worrying constantly made me lose weight a lot [...].

Then, Linh:

[...] After birth, I was sad a lot, I also lacked nutrition and time to sleep so I lost weight quickly.

Later, Uyen:

[...] I had erratic eating habit so I lost weight quickly.

For about two decades now, interest has arisen in understanding the effects of sleep disorders on health (Colten and Altevogt, 2006). In line with most studies that hypothesise a strong link between a lack of sleep and general health, our study confirms this finding as reported by Participants 1, 2 and 3 (75%). Linked to this phenomenon is the issue of the mothers not being able to take care of their physical appearance, a social criterion that can potentially define spousal rejection or acceptance in Vietnam. Varying accounts in the voices of the mothers are presented here:

Huong: Well as I lack time for the baby and work, I lack for myself as well. No going out, no entertainment, no parties, I didn't look as young and attractive as before.

Linh: I have less and less time for myself nowadays, it is hard for me to go out even when the baby is asleep and the grandparents are looking after her. I just don't feel reassured. Due to the hardship of having a baby, I look terrible now. I used to look much better [laugh].

Uyen: Almost none, I don't even have time to go the hairdresser like I used to. Some single mothers I know who make a lot of money could still look nice while raising the child, but I don't get to be like them [chuckle].

As Vietnam has recently experienced burgeoning socio-economic growth and transitioned into the world economy, looks are an important element of the variables that propel women "up the social ladder". For example, how a woman dresses and looks is an important factor

in how acceptable she is to the rest of the population. Not being able to look their best, as reported by Linh, Huong and Uyen, is, therefore, potentially interpretable as a phenomenon that can be linked to depression. Crying and mood swings were reported as sub-themes by 75% of the participants:

Huong: [...] When I was pregnant, I thought a lot about the child's father and this made me mentally ill sometimes. Often, I might cry or feel depressed or sad; sometimes I thought it is better not to have met him [pause]. But after the baby was born, I don't think a lot about him anymore, I think more about the baby and I feel happy.

Linh: Well, I was crying a lot and I was in low mood all the time. When I was pregnant with my second baby, I continuously found out about my husband's affair and he didn't care to hide it from me, so I was very depressed. I was sad a lot [...] This is clearly a major psychological issue for Linh as it is for Ngan but more importantly for Uyen as expressed below.

Ngan: [...] I was always tired and my mind was never calm or peaceful [...] Evidence of stress related insomnia.

Uyen: [...] the absence of a partner during pregnancy often made me sad and easy to cry. After giving birth, I was still often emotional [...].

Role of the other half

For the cases where partners and husbands left home pre-childbirth, it was found that the psychological pressure reduced over time as a result of having the baby:

Huong: At first, I did not know if I could overcome the fact that I will have to become a single mother. But when the baby was born, I realised that life is not as difficult as I had expected because with the baby in the house, the family was filled with laughter and happiness.

Somehow, it appears the vacuum created by the husband leaving home gradually was filled by the arrival of a new member. This supports the view that social cohesion and belonging (Mehta and Mehta, 2014; Slomian *et al.*, 2019) provide a pacifying effect to people like Huong:

Ngan: [...] But I know I have to move on and my family has helped me a lot, I hope I will feel better soon with the child always beside me. This is similar to Huong's case where the partner's absence is filled with a baby although at that stage the baby is really not a 'perfect' substitute.

Uyen: I just want to live a peaceful life with my child. And it surely got better since he left. Maybe one day, I will forgive him [...].

The inescapable truth in Vietnam is that single-motherhood remains a social stigma; however, in contrast, previous studies (Freeman, 2004; Do *et al.*, 2018) have not emphasised the absence of fathers as a significant cause of PND or psychological pressure. When asked, "Tell me about your child's father", 50% of the responses started off with positive remarks, which then developed into the experiences that (at the time of the study) had led to the mother's poor psychological state (Figures 1 and 2). Huong said:

I did not know that a person could change that fast. He was my colleague at the company I worked for. When we worked together, I looked up to him as a very hardworking, diligent and calm man. So we had feelings for each other and had a baby. But when I was pregnant as well as when I gave birth, he left and we did not contact each other for a long time [pause]. Just recently, the man's family saw on Facebook that I have given birth and contacted me and suggested that they would want to have some responsibility in taking care of both me and the baby. I agreed that

they could visit the baby but to be in a normal relationship with either the child's father or his family, I would not agree [pause]. My own parents advised me that the decision is up to me, they said: If you feel that they are nice to you then you may want to keep contact and visit them, but if not, then it is better to be alone.

On reflection, it appears Huong considers the “honeymoon period” of her relationship with the father of her child short-lived, although the outcome of the relationship would cause her ongoing emotional distress (Figure 1). In line with other findings that address the associated stress relating to mother-child (Canadian Paediatric Society, 2004). We inferred that there appears to be psychological pressure on Huong in terms of keeping in contact with her former partner's family and the future relationship of her child and its paternal family.

In line with other constructs, Uyen replies:

It is fair to say, he is a loving man but the situation does not allow him to care for me. He has a family, wife and children. His greatest sin is that he lied to me and this hurts me [sigh]. He is then irresponsible with me and the baby afterwards, not that I wanted him to stay around, anyway. Err [. . .] now I just want to find a decent job and be on my own, with the baby. I don't really want to rely on anyone at this time. Now I know that when we are financially independent, no one can judge us anymore.

Similar to Huong, Uyen believed that all would be fine – until the truth became clear. They both identify financial issues as a source to their psychological pressure, a factor that cannot be underestimated in country with low economic development (Thi Hong Nguyen *et al.*, 2013).

Given that marriage is extremely important in Vietnam, (Thi and Thuy, 2018), we explored the reasons for separation among all participants of this research. Research studies in the UK and Australia (OECD, 2014) point to the fact that divorce and separation rates are high, mainly in Western countries. While the rate of separation is increasing in developing countries also, divorces are not as high in Vietnam (UN, 2012). It was revealed that the reason for separation influenced participants' APS just as financial and social causes previously studied (Do *et al.*, 2018; Slomian *et al.*, 2019). Both Figures 1 and 3 reveal that participants still experience some form of “emotional labour” when they bring to mind the reasons they are no longer in relationships with their offspring's father. All four participants reported that the father of their child or children either “changed” as time passed or deceived them over the period of their relationship.

Other themes

In addition to the broad themes identified above, three other sub-themes – abuse, irresponsibility and untruthfulness – emerged during the data analysis. These are directly linked to the role of the offspring's father and are vastly important because of the collectivist nature of the Vietnamese society (Hofstede, 2018) and the impact of social stigmatisation emanating from potential divorce (Do *et al.*, 2018; Slomian *et al.*, 2019).

The voice of Linh amplifies the effect of irresponsibility here:

Last year, I discovered that I was pregnant again. My husband was not happy at all, he said I should get an abortion but I didn't agree [pause]. Since then, he didn't care about me anymore despite the fact that I was pregnant. Sometimes he went partying all night and came back drunk and then scolded me and even hit me [sigh]. He didn't even care to conceal his affairs anymore, he texted his girlfriend right in front of my face [. . .].

The significant effect of divorce resulting from Linh's husband is echoed here by Huong:

[. . .] When I was pregnant as well as when I gave birth, he left and we did not contact each other for a long time [pause] [. . .].

Later, the implication of untruthfulness and its effect is revealed in a traumatic voice:

[. . .] But when I was pregnant, he did not want the baby. And during the time we were in love, I found out that he also had an affair with another woman. When he found out that I was pregnant, he left me for the other woman [pause] [. . .].

The child's father did not care about me and was always persuading me to get an abortion [pause]. I didn't agree and sometimes he lost his temper and he slapped me or called me names [sigh].

Revealed by Huong, whose case emphasises the social and emotional deficit of not having a partner. In contrast, Uyen is struggling with childcare without financial contribution from her child's father.

Uyen: [. . .] I am no longer in touch with the child's father and he doesn't give any financial contribution [. . .].

Overall, the psychological pressure demonstrated here is a result of a lack of financial support from participants' former partners. During the initial stages of their respective relationships, it would have been reasonable for them to expect financial support from their partners should the participants fall pregnant. We categorise this under the superordinate theme "financial factors", which also emerged in Linh's and Huong's accounts:

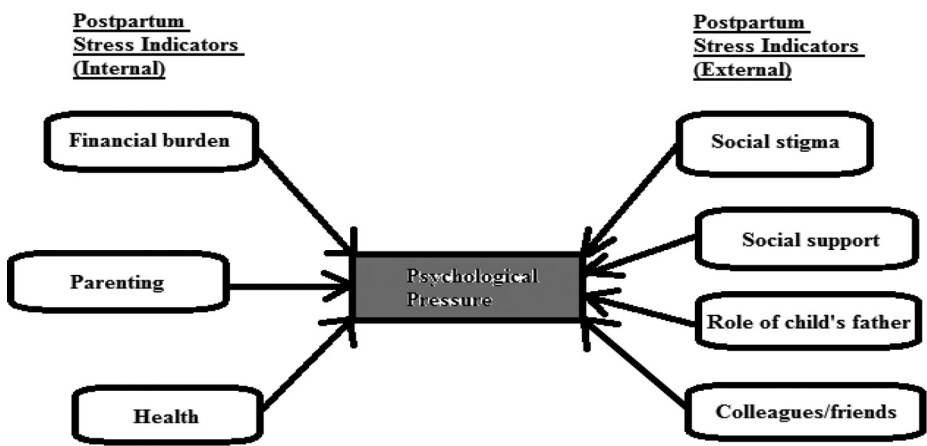
[. . .] His greatest **sin** is that he lied to me and this hurts me [sigh]. He is then irresponsible with me and the baby afterwards [. . .].

In line with [Figure 1](#), Uyen seems to be making a connection between the superordinate themes "health" and "the role of the father". Here, pain could be interpreted as "emotional labour" or pressure on Uyen's mental state. The hermeneutics of the word "sin" implies a questioning of the morality of the child's father, which is likely to bring an extra burden on to the mother.

The findings of the study yielded several factors that could potentially cause postpartum destabilisation of the psychological state ([Figure 3](#)); these coincided with those in other countries with similar contexts identified in the earlier sections. For example, a previous study in Malaysia showed that financial burden was one of the key stressors for single motherhood, coupled with excessive responsibilities on a daily basis, the absence of a partner and a lack of formal and informal support ([Hashim *et al.*, 2015](#)). Similarly, a study conducted in Turkey highlighted the aspect of social stigma and how social norms and prejudices ([Figure 3](#)) led to negative reactions towards single mothers from their communities, which further added to single mothers' pressures and stress levels ([Cakir, 2010](#)); similarly, results of the current study point to the stigma associated with single motherhood in Vietnam, which compounds the incidences of PND. The current study's results also showed that the psychological pressure of single mothers reduced over time, as they moved away from the pregnancy and delivery period; this aligns with findings from the USA ([Berryhill and Durtschi, 2017](#)).

As noted in two recent major studies ([Thi and Thuy, 2018](#); [Slomian *et al.*, 2019](#)), the demanding nature of parenting can be stressful for both single and partnered parents alike, and postpartum psychological pressure may occur when the demanding reality supersedes the perceived resources available ([Figure 3](#)). Higher levels of parenting stress may lead to poorer quality of life for both parents and children alike may spark negative parenting

Figure 3.
Model of stress
indicators of single
mothers



behaviours and may affect the course of child development (Calkins *et al.*, 2004; Slomian *et al.*, 2019).

Social and policy implications

A number of paramount implications derive from this current study. Firstly, social constructs in Vietnam compound the effect of PND on Vietnamese single mothers (in contrast to their counterparts in developed Western nations). This means that researchers and policymakers need to reconstruct stigmas that cause psychological pressures on single motherhood, and in doing so, help to change the view held about single motherhood. In addition, health authorities and government agencies can expand their structural support systems to include PND screening, medication, family attitude towards parenting and educational campaigns aimed at reducing the effect of PND on those who experience it.

In addition, findings from this study further contribute to the scarce research base around the subject of PND in Vietnam and thus highlighting key but under-stressed issues that could negatively impact single mothers (both as a marginalised group and in a wider context), their children’s generation and society overall Upadhyay *et al.* (2019). Understanding the psychosocial and socio-economic risk factors (Figure 3) of postpartum psychological pressure in single mothers may have important implications on preventative and support measures, as well as laying the groundwork for social protection interventions and informing welfare policy-making at a national level.

Limitations

While the use of IPA for this preliminary study provides some qualitative benefits to the PND phenomenon, a future research might consider a much bigger sample size preferably covering the ten ASEAN countries or. Finally, owing to the small sample size, the policy recommendations above should be applied with caution.

Conclusion

PND is detrimental to single-mothers’ health as evident by the voices of sufferers in Vietnam. While progress is made in advanced countries to lessen the effect of PND on

mothers and families (Laney, *et al.*, 2014), little evidence exists for intervention in Vietnam. Single mothers experiencing psychological pressure in Vietnam owing to their maternal status need more social and policy intervention that will help their confidence and provide financial, social and psychological support they are in dire need of.

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Further reading

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