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Abstract

Background: Poor mental health is considered a major health challenge globally, not least for young people, who will form families within forthcoming years. Research related to childbirth and parenthood transition has focused on how to promote good mental health by preventing mental illness.

Aim: We discuss how a salutogenetic approach to mental health in parenthood transition is beneficial, and specifically how the component of *meaningfulness* in Sense of Coherence (SoC), could be investigated to optimize good mental health during parenthood transition.

Discussion: In more recent understandings of *meaningfulness*, ideas from existential philosophy and psychology have been included. We discuss how, from an existential psychological perspective, open and explorative questioning of life conditions and dilemmas may help to regain one's footing and get in touch with one's driving force – *meaningfulness*. Such questioning implies that someone, a professional or a friend, actively and relationally helps explore existential aspects of life.

Conclusion: We believe that investigating and asking research questions pointing at optimizing a salutogenetic perspective, specifically focusing on the component of *meaningfulness* and its embedded existential aspects of life, could lead to new knowledge on how to promote good mental health in maternity care.

Keywords

Salutogenesis, childbirth, mental health, parents

Introduction

Poor mental health has been described as one of the greatest health challenges globally, and studies and interventions focusing on promoting health (rather than treating diseases) have regained focus¹⁻⁴. The prevalence of mental health as an area of concern for young people is illustrated by research statistics. For example, in Denmark, 23% of young women and 13% of young men (aged 16-24) reported poor mental health in “The Danish National Health Survey” in 2017⁵. In Australia, 20% of young women and almost 13% of young men (aged 15-19) reported mental health to be their biggest personal concern in the *Youth Survey Report 2020*; twice as many young women felt stressed ‘all of the time’ or ‘most of the time’ (54% compared with 27% of young men)⁶. These young people will form families within forthcoming years, and reflections on how to approach mental health challenges are therefore essential in maternity care services.

Mental health as a concept does not have a single, universal interpretation. The World Health Organization describe mental health as “... a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community.”² An interview study exploring how Danes interpret the term ‘mental health’, the idea of being mentally healthy was found to be related to an overall ‘state of mind’, often described as ‘feeling good about yourself’, and to positive ‘relations’, understood as positive relations to family, friends and others, but also to pets, hobbies or ‘being part of something’⁷. However, within research and institutional contexts, the term ‘mental health’ is often primarily related to mental illness, and the objective of interventions is frequently to reduce or prevent mental illness⁸⁻¹⁰. Consequently, research related to childbirth and parenthood transition has focused on how to promote good mental health by preventing mental illness¹¹⁻¹³. An example of the promotion of good mental health is the rise in screening programs to detect mental illness such as perinatal depression^{14,15}. The increase in perinatal screening programs has been criticized for lacking systematic evaluation of whether the programs have led to improved mental health¹⁶. Also, the process of screening has been challenged for encompassing stigma-

related factors leading to low willingness to disclose information during screening processes, since new mothers may worry about being labelled 'sick' and stigmatized as 'a bad mother' ^{17,18}.

One may argue that screening programs are embedded in a pathogenetic approach to mental health during parenthood transition. They have a strong focus on risk, on singular unwanted events, such as depression or PTSD, and they may represent an example of instrumentalist and non-person-centred care ^{18,19}. We propose that a salutogenetic understanding may be a highly relevant approach for understanding mental health during parenthood transition. Thus, in this paper, we discuss how a salutogenetic approach to mental health in parenthood transition is beneficial, and specifically we discuss how new research questions, focusing on *meaningfulness* in Antonovsky's concept Sense of Coherence (SoC), could be investigated to optimize good mental health during parenthood transition.

Salutogenesis

The concept of salutogenesis, originally coined by the medical sociologist Aron Antonovsky, emphasizes the relationship between health, stress, and coping, and rejects the dichotomy between illness and pathology. Antonovsky formulated the theory of *Sense of Coherence* (SoC), within which there are three components that inform how an individual perceives and responds to life events: *comprehensibility*, *manageability*, and *meaningfulness* ²⁰. *Comprehensibility* refers to how inner and outer events in life seem structured, predictable, and explicable. *Manageability* refers to whether resources are available in life to meet the demands from these events. *Meaningfulness* refers to whether the events seem worthy of investment and engagement ^{20,21}.

The underlying premise of SoC is that stress and illness are integral parts of human existence, rather than parts we can live without or conceal ourselves from. It is also an underlying premise, that we live in constant interaction with our surroundings. Thus, a healthy life is not a life without stress or illness; individuals swim in the 'river of life', where a strong sense of coherence can keep us healthy, in sometimes

roaring, sometimes serene waters of stress and illness or wellness and fitness ^{20,21}. In this perspective, a healthy life may entail illness, adversity and major life-changing events, and strong emotional responses are merely warranted to swim in the roaring part of the 'river of life', and not a sign of pathology. A key concept is Generalized Resistance Resources (GRR), which are resources to develop a strong SoC, existing on both individual, family and societal level, originating from genetic, constitutional, psychosocial, cultural and spiritual, material sources ^{22,23}. A SoC perspective implies a nuanced, processual and autonomous interpretation of how one's life is healthy.

The salutogenetic approach has been explored theoretically and has impacted knowledge and practices in relation to children, adolescents, and elderly people, for example in schools and health care settings. In contrast, systematic application of salutogenetic approaches is not yet fully embedded in research related to childbirth and parenthood transition ²³⁻²⁵. Moreover, in a recent study investigating associations between mental well-being and healthcare costs in Danish adults, the authors suggest investing in promoting good mental health also among the non-mentally ill population to reduce health care resources ²⁶. This supports an argument for investing in research related to a salutogenetic approach to childbirth and parenthood transition. Antonovsky's theoretical salutogenesis-approach has been questioned empirically and discussed in relation to the interrelationship between components of SoC or the age of when SoC is stable and "locked" ^{27,28}. Antonovsky himself labelled meaningfulness as the "driving force" in salutogenesis ²⁰. However, empirical studies have found various components to be of importance ²⁹. In this paper, we discuss salutogenetic thinking as an orientation and in the broader light of also more recent concepts, to contribute to a debate on how new research questions and new clinical practices could be proposed ^{30,31}. When referring to meaningfulness as a driving force, we therefore acknowledge the empirical discussions related to theory of salutogenesis, but understand it as an orientation, described as *"an idea in close concert with a broad academic movement towards a positive perspective on human life"* ^{31 p. 16}.

Defining existential aspects of salutogenesis

In pointing to a salutogenetic perspective as an alternative to a pathogenetic perspective, we focus especially on the third component in the concept of SoC, namely *meaningfulness* and how existential aspects of life are embedded (figure 1).

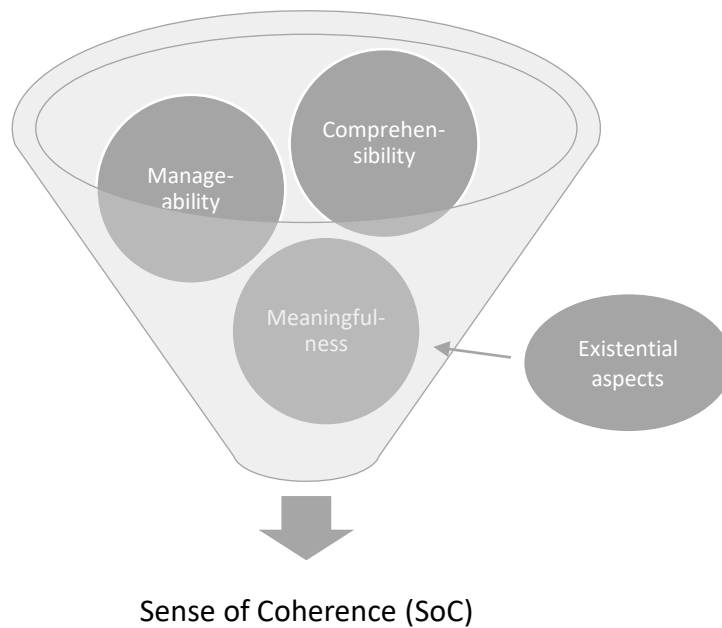


Figure 1 Existential aspects of meaningfulness

According to Antonovsky, the third component in SoC, *meaningfulness*, is the driving force in obtaining a sense of coherence that enables an individual to cope during times of stress ²⁰.

This understanding of *meaningfulness* as the motivational aspect as vital has been explored also by others, for example the Austrian psychiatrist and Holocaust survivor philosopher Victor Frankl, who claims that humans cannot survive without meaning ³² Also the newer psychological concept of flourishing, is in its salutogenetic orientation closely connected to meaningfulness ³³. Flourishing refers to how thriving in life also includes feelings of purpose and meaningfulness ³⁴. Moreover it is seen as an inevitable part of the Australian government-supported research based mental health promotive programme Act-Belong-Commit, now inspiring also other countries, for example Denmark, in how to work from a salutogenetic

orientation^{35 36} *Meaningfulness* is closely linked to existential aspects of life are, which are paradoxically, at the same time different from biological, psychological and social aspects of life, and yet intertwined with and impact upon them³⁷. Existential aspects of life encompass the whole continuum of overarching perceptions, significance, and practices of, for example, meaning and purpose in life, which can derive from secular, religious, or spiritual sources^{38,39}. Thus, they cover the existence or absence of a higher power. When the 'river of life' is roaring, considerations of responsibility and mortality appear and may trigger considerations related to both relationships, choices in life, and whether there is a higher power or a god to pray to⁴⁰⁻⁴².

Existential aspects of a salutogenetic approach in parenthood transition through open and explorative questioning

Parenthood transition can be a stressful period of life, not only due to the extensive biological and social changes involved, but also due to the change of one's place in the world⁴¹⁻⁴³. Considerations may range from whether one can 'love enough' or be a 'good enough parent', to more fundamental existential fears of losing oneself into a new life-role, or even dying. Thoughts about death and mortality may also appear during the childbirth period, and such considerations seem to be a normal and healthy response to parenthood transition^{41,44}.

Times of stress and crisis might challenge not only our *comprehensibility* and *manageability*, but also our ideas of *meaningfulness*, and life can feel empty or meaningless. From an existential psychological perspective, dialogue about life conditions and dilemmas may help to regain one's footing and get in touch with one's driving force – *meaningfulness*. Existential psychology focuses on essential life dilemmas and the big questions of life and emphasises both the positive and negative dimensions of life⁴⁵. We all have a sense of what makes life worth living, but it can be implicit and unspoken, even to ourselves, until we face a crisis. Through open and explorative questioning, *meaningfulness* can re-emerge³⁵.

Rooted in a European tradition of existential philosophers, existential aspects of life encompass questioning of life conditions and dilemmas related to one's place in the world^{37,45}. Open and explorative questioning implies that someone, a professional or a friend, through dialogue and reflection and in an equal relation, helps explore existential aspects of life. It could imply questions of what creates meaning in everyday life and how this might change in times of crisis. In this case, open and explorative questioning in relation to becoming a parent could explore specific life conditions, dilemmas, and reflections. Examples of such questions are provided in table 1.

Examples of open and explorative questions
<ul style="list-style-type: none"> • How does it feel to be you at the moment? • How do you feel about becoming a mother/father? • How do you cope with the uncertainties of becoming a mother/father? • What do you find joyful in becoming in becoming a parent? • Have you previously experienced significant decisions or dilemmas? • How do you think of the baby growing inside of you/your partner? • How do you think of your/your partner's changing body? • How do you expect your relation to your partner to change? • How do you expect you relation to or thoughts of your parents to change? • What do you look forward to, in becoming a mother/father? • Becoming a mother/father might also trigger feelings of guilt or fear. Have you experienced this?

Table 1: Examples of open and explorative questions

In Denmark, we are witnessing a movement of young women, mothers, raising their voices in the public debate, demanding compassion and humanity in maternity services. Many have felt let down by a system offering standardised instead of person-centred care. A survey from an internet forum for mothers (momkind.dk) has found that 10% of new mothers were dishonest at the postpartum screening. This fear of stigmatisation is echoed in a new wave of motherhood literature countering the narrative of motherhood as a blissful state of inexhaustible love for the offspring. Maja Lucas, Dy Plambeck, and Olga Ravn are

Danish authors who have disclosed the raw, unfiltered embodied manifestations and the fierce emotions of motherhood in novels published within the past five years⁴⁶⁻⁴⁸. The depth of an almost savage love, the exhaustion, the rage and the parental and partner conflicts are exposed as counter-narratives to the devoted and sacrificial motherhood roles often portrayed. Furthermore, a recent citizen proposal demanding a more humanistic and person-centred approach during pregnancy and childbirth can be interpreted as an abandonment of the one-sided focus on risk-avoidance and physical health in maternity care⁴⁹.

These movements signify the importance of meeting the needs of women and families in maternity care. Embracing how parenthood might change life at a deeply existential level can be a way to provide a more holistic and appropriate maternity care for modern women and families. Actively questioning how life changes when becoming a mother or father, can help unfold how existential aspects and thus *meaningfulness* can change.

Enhancing good mental health through focus on salutogenesis, including existential aspects

Midwives are excellent providers of health-promotive care and are associated with supreme efficiency in use of resources measured in short, medium, and long-term outcomes⁵⁰. Based on the 2014 Lancet Series, the suggestion to ask different research questions was raised by Kennedy et al in 2018, and within that, the urge to research and optimize physiological, psychological, and social processes during the whole childbirth period in life³⁰. In research, a starting point could be to investigate how good mental health might be stronger related to meaningfulness and existential aspects in life, and consequently propose new research questions preferably related to perspectives from both patients and health professionals. In clinical practice, integrating active questioning of life conditions and dilemmas related to one's place in the world could be an alternative to the integration of yet another screening tool. In many countries, midwives are already trained in providing individual, person-centred and equity advancing care.

We believe that investigating and asking research questions pointing at optimizing a salutogenetic perspective, specifically focusing on the concept of *meaningfulness* and its embedded existential aspects of life, could lead to new knowledge on how to promote good mental health in maternity care.

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