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Title

The fathers' perceptions of intimacy in the marital relationship after the birth of the first child

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A research report submitted to the Discipline of Psychology, Faculty of Humanities, University of the Witwatersrand, in partial fulfilment of the requirements for the degree of Master of Arts (Clinical Psychology)

Johannesburg, South Africa December 2012

Declaration

This is a research project submitted in partial fulfilment of the requirements for the degree of Master of Arts (Clinical Psychology) in the Faculty of Humanities, University of the Witwatersrand, Johannesburg, December 2012.

I declare that this research project is my own work. It has not been submitted before for any other degree or examination at this or any other university.

_____ _____

Fatima Omar Date

Abstract

The transition to parenthood has been noted to be a significant milestone in an individual's life that can have varying effects on the marital relationship. The marital relationship has further been noted to have implications on father involvement with children, where such involvement allows for better health and well being of the child. Sexual intimacy has been noted to be a significant aspect of a marital relationship that has an impact on marital satisfaction. As such the aim of this study was to explore father's experience and understanding of fatherhood as well as their perceptions of the marital relationship post birth of the first child. The marital relationship was explored through understanding how the birth experience and presence of the baby influence fathers' perceptions of their wife's desirability's, of marital intimacy and how sexual intimacy fits into the relationship post birth of the baby. The study consisted of a qualitative design and eight fathers were interviewed using a semi structured interview schedule. The data was then analysed using thematic content analysis. Findings suggested that whilst fathers reported a distinct decline in sexual intimacy there was no decline in marital satisfaction. Decline in marital satisfaction may have been buffered against, as fathers seemed to prepare for the birth of their child and held realistic expectations of the adjustments that would be required post birth of the baby. In addition, their view of intimacy had broadened to include sensuality where spending alone time with their wife and communication were seen as equally significant to sexual intimacy. The results from the study further indicated that fathers are becoming more involved in their parental role. In this regard fathers tended to create an individual space between them and their baby. This finding is in direct contrast to psychodynamic theories which discuss the father as involved in a triadic relationship with his child and hence relating only through the mother.

Acknowledgements

I would like to firstly thank my Creator as this thesis has only been possible through His Mercy and Grace. There were many times during the year wherein I relied on my spirituality to carry me through to the end of this thesis.

To my supervisor Renate Gericke - thank you for the many meetings and conversations. Your guidance and encouragement helped me to formulate and think about this project in ways I never thought possible. You also nudged me in the right direction when I felt completely in the dark and thought that this thesis would never reach its finalisation.

To my husband Faheem Mohamed - thank you for your understanding and patience as you often found me tucked behind my laptop and isolated in the study area. You assisted me immensly in finalising the logistics of this mammoth project.

To my parents Goolam and Najmoonnisha Omar - thank you for your endless support and encouragement, especially at times when I felt that all was lost.

To my sister Anisa Essa - thank you for the encouragement and the endless hours you had to endure hearing me complain in utter frustration.

To all my other family members and my inlaws - thank you for supporting me during the year in countless of ways in order to make it possible for me to cross the line.

To the fathers that were willing to share their valuable time and experiences with me – thank you for your participation. Without you, this thesis would not have been possible.

To my friends especially Sarah Blumberg and Raeesa Valli – thank you for the much needed friendship and support during the year. Our time together of sipping (more like gulping) cups of cappuccino's has been pricelss.

It has been a memorable project, but one that I will forever treasure….

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Chapter One
Background To The Study

1.1 Introduction

The transition to parenthood has been noted to be a significant milestone in an individual's life which can have varying effects on the marital relationship. Most of the research in this area has found a decline in marital satisfaction post birth of the baby (Ahlborg, 2004; Belsky, 1985; Cowan & Cowan, 1995; Cox, Paley, Burchinal, & Payne, 1999; Crohan, 1996; Glade, Bean & Vira 2005). The reasons for such decline have been attributed to the move towards an individualistic culture (Glenn & McLanahan, 1982) and to the extent of adjustment required during this period (Cox et al. 1999; Mizāne & Bite, 2006). This is due to the partners navigating the changes in the family from a dyad to a triad. Significantly, a few studies have indicated no decline in marital satisfaction (Cowan & Cowan, 1992; Fägerskiöld, 2008; Miller & Sollie, 1980). In this regard, buffers to declining marital satisfaction have been suggested to be good communication skills between the couple (Cox, Owen, Lewis, & Henderson, 1989; Troy, 2000) as well as stability in the marriage prior to the birth of a child and a planned pregnancy (Bradley, Mackenzie & Boath, 2004; Jordan, 1990). In addition, the extent of father involvement has also influenced such marital decline (Cowan & Cowan, 1992; Kalmijn, 1999; Levy-Shiff, 1994). However, whilst father involvement serves as a buffer to marital dissatisfaction, marital satisfaction predicts the extent of father involvement (Blairr, Wenk & Hardesty, 1994; Lee & Doherty, 2007).

It has been shown that fathers play a critical role in the development of their child as their involvement impacts the child positively in several spheres including improved cognitive development, intelligence and academic achievement (Lamb, 2010; Yogman, Kindlon, & Earls, 1995), decreased delinquency and decreased emotional distress (Harris, Furstenberg & Marmer, 1998). Overall, a child tends to show better health and well being when they have an involved father (Garfield & Isacco III, 2012).

Intimacy plays a significant role in marital relationships and has been linked to marital satisfaction (Boden, Fischer, & Niehuis, 2010; Erikson, 1963). Sexual intimacy has also been identified as holding more significance for the male gender in building intimacy (Hatfield Sprecher, Pillemer, Greenberger, & Wexler, 1988). As the current literature in the field is

inconclusive regarding male perceptions of intimacy after the birth of the first child, and is limited to Western and Asian populations, it would be of interest to expand the current literature by focussing on a South African population and giving a voice to first time fathers, so as to understand their perceptions of intimacy in their marital relationship.

1.2 Aims

The aim of this research project is to gain an in depth understanding of marital intimacy from the perspective of the father following the birth of the first child. This will be unpacked by exploring how the birth experience and presence of the baby influences the father's perceptions of his wife's desirability of marital intimacy and how sexual intimacy fits into the relationship post birth of the baby. The research project will also explore fathers' perceptions of fatherhood and the meaning he attributes to this new title.

1.3.Research Questions

1.) What are father's perceptions of marital satisfaction post birth of the first child?
2.) What are father's perceptions of marital intimacy and sexual satisfaction post birth of the first child?
3.) How does the birth experience impact on the sexual relationship?
4.) What meaning do father's attribute to their own fatherhood?

1.4. Rationale

It is well known that the transition to parenthood is a challenging phase for individuals, as is any developmental phase (Cox et al. 1999). As the focus postpartum shifts dominantly to the new baby, the marital relationship may deteriorate if not addressed and aided in the adjustment from the dyad to the triad.

Many of the studies conducted on the transition to parenthood have focussed on the impact of a transition on the marital relationship. These studies have indicated that there is a distinct decline in marital satisfaction across the transition to parenthood (Ahlborg, 2004; Belsky, 1985; Cowan & Cowan, 1995; Cox et al. 1999; Crohan, 1996; Figuerdo et al. 2008; Glade et al. 2005; Glenn & McLanahan, 1982). On the one hand the reason for such decline has been attributed to the individualistic culture favoured in most Western societies. In such a society individual needs are prioritized and in respect of a marriage, this may involve the transition to

parenthood impinging on individual emotional and sexual needs (Glenn & McLanahan, 1982).

In contrast, cultures which give importance to collectivism place greater value on the emotional, familial and socioeconomic value of children (Zheng & Shi, 2004). There also tends to be a greater assistance in managing new additions to the family, thereby providing new parents with more support during such a transition (Wendorf, Lucas, Imamoglu, Weisfeld & Weisfeld, 2011). This suggests that collectivist cultures should not experience a serious decline in marital satisfaction. However, in spite of these cultural differences with regard to collectivism and individuality, marital decline has been found to increase with the number of children across cultures and the paramount decline occurs in the period of the transition to parenthood (Wendorf et al. 2011).

Intimacy has been found to be a significant part of a romantic relationship and has been linked to success and satisfaction within a marriage (Boden st al. 2010; McCabe, 1999). Intimacy can encompass both sexuality and sensuality and each of the genders identify different aspects as increasing their view of intimacy. For men sexual intimacy is important, as it becomes the pathway for their attainment of intimacy. Their approach is therefore "body-centred" requiring the attainment of physical gratification (Hatfield et al. 1988 p. 40).
In the transition to parenthood the decline in intimacy tended to be greater for men, who noted a distinct reduction in the attention they received from their wife (Halle et al. 2008). They also often felt jealous of their newborn who was now taking first priority (Raphael-Leff, 1991). Wendorf et al. (2011) conducted a study across three countries namely Turkey, United States and the United Kingdom. In the said study it was found that the decline in marital satisfaction for men across these countries were similar. This suggests that even cross-culturally men may feel more dissatisfaction regarding the marital relationship after the introduction of children into the family. The emotions of abandonment felt amongst new fathers in the transition to parenthood, coincides with the oedipal complex in early development, where the same feelings of being displaced were born (Ahlborg, 2004).
Literature examining the intimate and particularly the sexual relationship after the birth of the first child is rather limited. The impact of sexual intimacy on declining marital satisfaction is at this stage ambivalent. The studies found concur that there is a decline and dissatisfaction with sexual intimacy after the birth of the baby (Ahlborg, 2004; Von Sydow, 1999). However, the link between sexual satisfaction and marital satisfaction is uncertain. In spite of

acknowledging dissatisfaction sexually, fathers are not necessarily dissatisfied with their marital relationship overall. This may be due to ambivalent feelings arising after the birth of the baby. On the one hand fathers may feel protective over the mother and child, while on the other hand they experience being outcast from the closely bonded mother-infant dyad (Long, 2007).

The marital relationship is significant as it plays a role in fostering good parent-child relations, especially for fathers (Bradford & Hawkins, 2006; Cox et al. 1989; Cummings & O' Reilly, 1997; Frosh, Mangelsdorf & McHale, 2000; Howes & Markman, 1989). The reasons for the marital relationship being more significant for the father-child relationship have been suggested to be due to the role of the mother, acting as a mediator in this relationship (Cath, 1986).

As fathers play a significant and important role in the development of their child, it would be important to document transitional experiences from their perspective. The significance of the marital relationship for father-child interactions has been confirmed (Bradford & Hawkins, 2006; Frosh et al. 2000). Noting the importance of sexual intimacy for men (Hatfield et al. 1988), it would be of interest to explore their perceptions in this regard before and after the birth of their baby and how these perceptions influence their view of their marital relationship.

In understanding the perceptions of men in this area, professionals may better be able to assist them in the transition and an awareness can be generated antenatally. Creating an awareness of the relationship changes, may counter the subjective views of marital dissatisfaction after the birth of the baby. Whilst there is extensive research on the transitional experience and its impact on the marital relationship (Ahlborg, 2004; Belsky, 1985; Cowan & Cowan, 1995; Cox et al. 1999; Crohan, 1996; Figuerdo et al. 2008; Glade et al. 2005; Glenn & McLanahan, 1982), there are limited studies of this nature which has been conducted on a South African population. It would be of interest to note differences and commonalities in the South African population given that South Africa is a culturally diverse country with both patriarchal and egalitarian attitudes.

CHAPTER TWO
LITERATURE REVIEW

2.1 Transition to parenthood

The transition to parenthood has been noted as a developmental milestone in one's adult life. The term transition has been defined by the Oxford dictionary as a passage, a change from one place, state or set of circumstances to another. According to the Shumacher and Meleis (1994) nursing theory, this passage usually involves changes in "health status, role relations and expectations or abilities" (as cited in Ahlborg, 2004, p.13).

In a nuclear family the transition involves the movement from the couple, a dyad, to the family, a triad with the alteration of roles from just a spouse, to both spouse and parent. The nuclear family is classically defined as consisting of the mother, father and their children living in a single dwelling (Nam, 2004). As with any transition, difficulties are expected in the transition to parenthood (Cox et al. 1999). Some of the changes expected in the transition encompass adjustments, that will be required at both the individual and the relationship level (Mizāne & Bite, 2006), as the couple cater to the needs of the new member in the family. Significantly, it is how this transition is overcome that is important and a failure to resolve the difficulties experienced in the transition could result in strained relationships between parent and child (Cox et al. 1999).

There has been a greater emphasis on exploring the transition to parenthood from the mother's perspective (Biehle & Mickelson, 2011; Bogels & Phares, 2008; Deave & Jhonson, 2008; Dew & Wilcox, 2011; Krieg, 2007, Nelson, 2003; Winson, 2009; Williams et al. 1987). This is to be expected as tradition and history have often placed the mother at the foothold of child bearing and child rearing. Thus, in preparation for fatherhood, men have a very different experience as much of the institutional support along with cultural norms place emphasis on the mother (Henderson & Brouse, 1991). However, the fathers' perception is equally important as they too play a significant role in the child's life.

Each of the parents tends to react differently to their children and foster very different attachment bonds. In this regard the father tends to offer more "playful, physically arousing experiences" which can "facilitate the development of exploration and independence through toddlerhood" (Cath, 1986, p.68). It has also been found that when fathers are involved with

their children, such involvement impacts the child positively in several spheres including improved cognitive development, intelligence and academic achievement (Lamb, 2010; Yogman et al.1995), decreased delinquency and decreased emotional distress (Harris et al. 1998). Overall children tend to show better health and well being when they have involved fathers (Garfield & Isacco III, 2012). In addition from a psychoanalytic perspective fathers play a crucial role for their children through the course of the oedipal complex, a significant stage in Freud's psychosexual stages of development. It is during this stage that children begin to identify with the same sex parent and overcoming this stage is a crucial milestone with regard to the development of the child (Hook & Watts, 2002). Therefore, the involvement of the father is valuable for the developing child.

2.2 Impact of the transition to parenthood on marital relationships

A vast amount of literature has indicated a decline in marital satisfaction following the birth of the first child. The transition to parenthood has been referred to in the literature as a crisis for couples, as it has the potential of being a risk factor, threatening relationship distress and a decline in the quality of the marital relationship (Cox et al. 1999). Feinberg (2002) concurs that the changes that are bound to occur in the transition have a negative effect on the couple's relationship. Several studies have confirmed a decline in marital satisfaction post birth of the baby (Ahlborg, 2004; Belsky, 1985; Cowan & Cowan, 1995; Cox et al. 1999; Crohan, 1996).

In a study by Lawrence, Cobb, Rothman, Rothman and Bradbury (2008) this decline was measured against matched childless couples that were married for the same duration. The findings indicated that the decline in marital satisfaction was greater for new parents than the normative decline found in the childless couples.

Lawrence et al. (2008) proposed that the effect of the transition to parenthood on the marital relationship tended to follow one of two pathways. The first involves a shift in the couple's relationship, which is often adverse in nature and tends to persist over time. As such, the changes in the marital relationship are said to be of a qualitative nature. In contrast, the second perspective tends to see the change in the marital relationship as being rather transient and temporary. In this regard, changes in the marital relationship are seen as quantitative and not qualitative as with the first perspective (Lawrence et al. 2008). The study concluded by

finding more merit in the second perspective and thereby advocating that the changes are transient and due to stressors involved in the transition period.

Glenn and McLanahan (1982) have suggested that one of the reasons for the decline in marital satisfaction may be due to the high priority given to an individualistic culture. Marriage is then expected to involve a high degree of emotional and sexual intimacy to meet individual needs but this declines naturally after the birth of a baby. This decline in marital and sexual intimacy may result in individuals expressing reduced marital satisfaction. Figueredo et al. (2008) informs that it is both the time of pregnancy and the postpartum period which pose challenges for the marital relationship and the psychological adjustment of each of the partners. He posits that the reasons for the strain on the marriage may involve the decreased proximity and communication of the partners, along with increased conflict and ambivalence regarding the novel situation requiring adjustment.

Partners who have good problem solving and communication skills between them were not as adversely affected by the transition into parenthood (Cox et al. 1989). Communication skills have also been reported to be a reliable predictor of relationship satisfaction (Troy, 2000). Whilst many studies indicate marital decline, for some couples the arrival of the baby had strengthened their relationship. They reported an increasing interdependence between the couple along with expanding feelings of cohesion and unity (Miller & Sollie, 1980). An additional factor which has been seen as possibly buffering the effects of marital decline is the level of involvement fathers choose to have with their child. As such, men that are more involved in caring for their child tend to report not only no decline, but also greater marital satisfaction (Cowan & Cowan, 1992).

However, when fathers choose to be involved with the care-giving of their child, some fathers still tend to report feeling alienated from and jealous of the mother-infant bond, specifically when mothers were breastfeeding, as this had often left fathers feeling excluded and with no role to play (Anderson, 1996). Feelings of jealousy and exclusion may translate into dissatisfaction in the marriage as the baby takes on primary importance. In spite of the acknowledgement that the transition to parenthood requires several adjustments and fathers' recognition of the change in their marital relationship, not all fathers report a decline in marital satisfaction (Cowan & Cowan, 1992; Fägerskiöld, 2008; Miller & Sollie, 1980). However, studies suggesting no marital decline post birth of the baby are limited and may

have been influenced by other buffers to marital decline such as a planned pregnancy or good communication skills between the couple. Fathers who were able to develop strong attachment bonds to their child antenatally experienced reduced distress and anxiety post birth of their child (Hjelmstedt & Collin, 2008). In addition more realistic approaches to parenthood may lead couples to acknowledge the challenges apparent in the transition. This would then allow couples to prepare for the upcoming adjustments and changes in lifestyle and may lead to reduced dissatisfaction within the marriage (Miller & Sollie, 1980).

In collectivist cultures there tends to be a greater value placed on having children. A study by Zheng & Shi (2004) concluded that in collectivist cultures there was an increased emotional, familial and socioeconomic value of children. As there is greater value placed on having children, it would be anticipated that such cultures experience the transition to parenthood more smoothly. It has also been suggested that in collectivist cultures there is greater support for marriages. Parents would tend to live close to family members who assist with child rearing thereby easing possible anxieties felt during the transition (Wendorf et al. 2011). In spite of these expectations, marital decline after children has also been found in collectivist cultures such as Turkey (Wendorf et al. 2011).

However, having support from family or alternative sources does ease the transition for couples. Couples have found that taking advice from others has been beneficial in helping them to prepare for their baby. Support structures also allow couples to take time out, away from the baby, which assists them in coping with the strains of the transition. When parents are able to rely on support from each other, this too allows each parent time away from the baby, which helps ease some of the stress associated with the transition (Miller & Sollie, 1980) Glade et al. (2005) found support from family as acting as a protective factor in that it alleviates the stressors involved in the transition. Modern society tends to isolate many couples from familial support due to geographical constraints. In such circumstances, good communication between spouses is vital to avoid conflict and increasing marital strain (Ahlborg, 2004).

It is well known that a majority of women may suffer from “baby blues”. This is the term given for the transient “down” mood experienced by new mothers. Significantly, the “baby blues” are a transient mood state and therefore it is expected that the woman would recover by the 10^{th} day postpartum and the changed mood state should not impinge on her ability to

function (Wisner, Parry & Piontek, 2002). In cases where there is the more severe onset of postpartum depression, this may have implications for the relationship between partners, which in turn may increase the risk of depression for men (Figueredo et al. 2008). When postpartum depression is a consequence, increased marital dissatisfaction is reported. In these circumstances the marital dissatisfaction tends to be greater in fathers whose spouses suffer from postpartum depression.

Most of the reasons suggested for the decline in marital satisfaction, as discussed above, centre on reduced intimacy between the couple which is exacerbated by depression, which may occur as a postpartum consequence. Whilst good communication between the couple is seen as effective in buffering against the strains of the transition, the intimacy between the couple would impact on such communication. As such, intimacy would appear to play a vital role in both marital satisfaction and dissatisfaction.

As the decline in marital satisfaction seems to be reported as a more common occurrence, knowledge regarding this disruption could assist with the manner in which couples navigate their marital relationship during this transitional period (Lawrence et al. 2008). A study by Deave, Johnson and Ingram (2008) indicated that couples were unaware antenatally of the possible changes that may affect their relationship adversely. In the study, fathers informed that they would appreciate knowledge on this decline antenatally, so that they would be better equipped to deal with the upcoming marital challenges.

2.3 Experience of fatherhood

The transition into parenthood is a developmental milestone that entails the taking on of new identities and roles as parents. It has been found that in adapting to their new roles as parents, women tend to distinguish clearly between their two roles of mother and wife and they place priority on their maternal role, whilst fathers have a more unified experience of their new role as husband and father (Blairre et al. 1994). Furthermore, women tend to withdraw from their role as partner or wife during the transition, whilst fathers do not withdraw as drastically (Glade et al. 2005). This has implications for the marital relationship as men may expect more attention and engagement with their spouse, than women are able to give with their shift into a dominant maternal role.

The ease with which men embrace their role as a father, is related to their expectations and readiness towards this new identity. Factors contributing to fathers' readiness towards the transition to fatherhood include, "the intention to have children, a sense of stability in the couple's relationship, financial stability, and closure from a childfree life" (Jordan, 1990, p. 11).

With regard to having an intention to have children, it has been found that fathers who had children through unplanned pregnancies tend to exhibit more distress, as well as "feeling more powerless in adapting to the arrival of a new infant" (Clinton, & Kelber, 1993, p.442). A lack of preparedness has been suggested to induce unnecessary stress on fathers, thereby limiting their ability to be involved in forming a relationship with their child (McBride, 1989). Preparedness can be related to the planning of the pregnancy but extends further into planning for the arrival of the infant. As such planning can involve reading books or attending classes, all in preparation for the arrival of the baby (Miller & Sollie, 1980). In a study by Doherty and Erickson (2006) it was found that when partners received an intervention centering on educating them on the arrival of the baby, fathers tend to be more involved with their child. The level of preparedness for their child can lead to the birth as causing a major disruption in life, or result in the transition being rather smooth (Bradley et al. 2004).

Many of the studies examining fathers' reactions to the birth of their baby had indicated positive feelings amongst fathers (Clinton & Kelber, 1993) where fathers reported feelings of elation and joy at the birth of their child (Anderson, 1996; Fägerskiöld, 2008) along with profound feelings of love for their new child (Chalmers & Meyer, 1996; Hall, 1995; Lamb, 2010). Fathers noted that at times being a father was "tough too" (Fägerskiöld, 2008), especially when they returned home with their new baby and came in direct contact with the realization of the many adjustments that would need to be made in terms of time, space and energy (Hall, 1995). In spite of these difficulties, fathers tended to focus on the more positive aspects of fatherhood (Fägerskiöld, 2008). The rewards of fatherhood thus far outweighed the trials and tribulations.

A common experience amongst fathers in the transition to parenthood was the immediate onset of an increasing sense of responsibility towards their partner and their child

(Fägerskiöld, 2008; Glade et al. 2005), who was seen as helpless and needing their care and protection (Anderson, 1996). For fathers, the responsibility of fatherhood along with the recognition that accompanied the role had brought joy to them (Dartnell, Ganguly & Batterham, 2005; St John, Cameron & McVeigh 2005).

2.4 Father's involvement in childcare

The idea of fatherhood has been changing over the course of time and this change has had global influence due to modernization and technological advances that have led to global intimacy. Significant changes that have occurred with the move into the 21st century include an increased number of women entering the work force (Cabrera, Tamis-LeMonda, Bradley, Hofferth & Lamb, 2000; Lamb, 2010). This has resulted in a changed perspective on the traditional gendered domains of females, as the homemaker and caregiver of children and males as the breadwinner. Significantly, with more egalitarian perspectives, the involvement of fathers in child care has also changed, as they are seen as becoming more involved in child care activities. In describing fathers, Russells (1983) discussed four types of fathers, categorized according to their interactional styles with their child or children. These are: (as cited in Palm & Palkovitz, 1989)

- **The uninterested and unavailable father:** This type of father has very little interest or time for his children and tends to be physically and psychologically absent.
- **The traditional father:** This type of father maintains a strong commitment to family. His dominant role involves being the breadwinner. However, he does engage in some participation with his children and fosters a responsibility towards them.
- **The assistant-parent father:** Holds the same responsibilities as the traditional father but his level of involvement is not limited to traditional domains. As such this type of father is seen as a mother's helper. He is capable of taking over sometimes but does not share equally in the tasks and responsibilities of child rearing.
- **The co-parent father:** An ideal in many dual-career families is the co-parent father as it reflects an egalitarian spirit. This type of father shares in an equitable manner in the care-giving and responsibility of day to day care and he publicly rejects traditional notions of fatherhood.
- **Primary parent father:** This type of father is the sole custodian of their child or children.

As mentioned above, with the changing course of time fathers are moving away from the traditional domains of fathering towards the "co-parent father" (Lamb, 2010). The expectations placed on men are changing in that they are expected to share equally in the care of their child (Yeung, Sandberg, Davis-Kean & Hofferth, 2001). Fathers increased involvement is most evident in childbirth where their presence and participation is expected (Burghes, Clarke & Cronin, 1997; Clinton & Kelber, 1993; Shulman & Seiffge-Krenke 1997). In the study by Yeung et al. (2001) it was found that fathers are spending an increased amount of time with their children, 67% as much time as mothers during weekdays and 87% as much time as mothers over weekends. However, even in co-parenting mothers are still found to be more involved, as the care-giving tasks are not equally shared (Cabrera et al. 2000). Fathers thus still tend towards roles that involve play orientated activities with their child, as opposed to care-taking activities (Clarke-Stewart, 1978; Craig, 2006; Hossain, Field, Pickens, Malphurs & Del Valle 1997; Lamb, 1976; Lamb, & Lewis, 2010; Yeung et al. 2001). As fathers opt for more 'fun activities' with their child, Craig (2006) suggests that fathers in intact families do not necessarily spend much alone time with their child, and hence they do not substitute time that would have been spent with their wife. Barclay and Lupton (1999) found that even though fathers want to be more involved they find this difficult without having had previous role models. They may also feel excluded and opt for more playful engagement with their child due to their inability to partake in care giving activities such as breastfeeding (Barclay & Lupton, 1999; de Montigny & Lacharité; 2004). In the premises, whilst fathers are more involved with their children, the time they choose to spend with their child often takes the form of triadic relating as the mother is always involved.

As an increase in paternal involvement is evident, the role which the mother plays in influencing such involvement are contradictory. Cabrera et al. (2000) suggests that the mothers' role as gatekeeper of paternal involvement is seen as diminishing, as fathers become more involved and active in their child's life. However, Jordan (1990) found that fathers' involvement and confidence in paternal care was greater when such involvement was encouraged by their spouses and environment (Lamb & Lewis, 2010). The obstacles to paternal involvement thus include not only the mother's encouragement but also that she does not feel threatened by the paternal relationship and hinder its development. Additional influences on paternal involvement excluding the mother include the availability of role models for fathers as well as encouragement from their family of origin which would be

closely tied to cultural expectations (Watson, Watson, Wetzel, Bader & Talbot, 1995). Providing recognition and encouragement can thus impede or develop paternal involvement.

Factors that encourage paternal involvement in addition to encouragement from their spouse include fathers' involvement antenatally. It has been found that fathers that are encouraged to be involved in activities prior to the birth of their baby often tend to be more involved after the baby is born (Fein, 1976) Father participation during delivery may help fathers to bond with both their wife and child (Watson et al, 1995). Antenatal interventions aimed at the needs of fathers to be and on preparing them adequately, have been shown to result in greater paternal involvement post birth of their baby (Watson et al. 1995).

Studies have shown that fathers want to be involved in active relationships with their children as they find these relationships rewarding (Anderson, 1996) and they exhibit pride in their capabilities with regards to child care (Fägerskiöld, 2008). However, in spite of this longing for more participation with their child, fathers still saw the mother as the main parent, who knew their child best (Anderson, 1996; Fägerskiöld, 2008). From a biological perspective it has been found that fathers also produced the hormone "oxytocin" known to be the *caring hormone.* As such, biologically parenting is not a quality unique to women (Swaab et al. 1993).

2.5 Fatherhood in South Africa

With South Africa being a racially, culturally and religiously diverse country, fathers in South Africa differ in terms of their experiences due to their cultural, racial or religious orientation. However, with globalisation many men are influenced by global trends of fathering and fatherhood. As this study focussed on fathers that were involved in heterosexual marital relationships, many sects of fathers in South Africa were excluded, including, adolescent fathers, cohabiting fathers, fathers in polygamous marriages and fathers that were not in a relationship with the mother of their child.

South African studies suggest that fathers do not seem too interested in playing an active paternal role and this is most evident in that they do not always attend the births of their children (Morrell, 2006). In addition, when women want their husbands to be present for the birth, the reasons for such presence is to ensure that they are not blamed should anything go wrong, rather than the expectation of support (Morrell, 2006). This lack of involvement and

support from fathers may be limited to fathers that hold more traditional views as opposed to egalitarian ones. Significantly, the concept of fatherhood is something that is culturally prized especially amongst African culture where having a child is associated with the status of manhood (Morrell, 2006). A South African father described the onset of fatherhood as, "It was my first child, a sign that I am a man and capable of getting children" (Mkhize, 2006).

In South Africa, the role of fathers tends to be associated with financial provision and at times this extends to fathers playing an auxiliary role in parenting through supporting their wife. It has been found that men spend less than one tenth of the time that women do in performing child care tasks for children under the age of seven (Richter, 2006). However, with the emergence of the 'new age' man, this is changing as fathers have been reported to be more involved with their child. Although most of the studies on the 'new age man' are not from South Africa (Clinton & Kelber, 1993; Yeung et al. 2001), Clowes (2006) suggests that African culture also prides the involved father. She notes that depictions of the male figure in the South African magazine *Drum* during the 1950's and prior, showcased the male figure as being surrounded by his children and involved in child care activities (Clowes, 2006). In addition in a representative sample of South African men and women 70% of adults between the ages of 18-34, voiced the opinion that adulthood entails a "state in which a person is able to look after and care for his children" (Richter, 2006, p.58). Together with young adults recognising the importance and significance of parenthood, so too there are increasing reports of South African men wanting to be involved with their child (Richter, 2006).

Significantly there are very few studies which focus specifically on South African fathers' perceptions during the transition to parenthood (databases searched included PsychInfo, Pubmed and Psychiatry Online with the following keywords *"Transition to parenthood" Fathers' perceptions of their baby", "First time fathers", "New age fathers", "Involved fathers"*).

2.6 Significance of intimacy in marriage

Intimacy has been labelled as being significant in a relationship and has an impact on physical and psychological well-being. Marital intimacy encompasses various aspects which include sexual intimacy, spending time together, sharing one's thoughts and feelings and so forth (Ahlborg, 2004). Hook, Gerstein, Detterich and Gridley (2003) informs that intimate

relationships tend to enhance an individual's self satisfaction. In addition a link has been found between intimacy and happiness (Hook et al. 2003). Intimacy and emotional support between partners has also been found to increase an individual's subjective well-being (Diener, Gohm, Suh & Oishi, 2000).

Intimacy has further been noted as being a necessary and significant component of a successful marriage (Boden et al. 2010). Erikson (1963) informed of the significance of intimacy in a marital relationship by stating that without intimacy "marriage is meaningless" (p. 148). In a study by Olson and Olson (2000) it was found that 96% of happy couples reported that their spouse had known how they felt and expressed a comfort in being able to share these feelings.

There are many ways in which to define intimacy. In terms of the Oxford dictionary intimacy involves a closeness that can exist between friends, romantic partners etcetera. Erikson discussed intimacy as being part of a developmental phase. During this phase individuals are looking for romantic relationships that provide them with "a healthy, well balanced, and developed sense of love" (Hook, 2002, p.285). For Erikson, intimacy can be defined as a mutual psychosocial closeness and devotion, that involves genital maturity, where one is able to commit to another person and remain loyal to them (Erikson, 1968). Prager (2000) has described two dimensions of intimacy. In the first dimension, intimacy involves a positive affect that is, feelings of pride, warmth, love, affection, gratitude or attraction. The second aspect entails one's perceptions or understandings of intimacy, that is the perception that one is liked, understood, loved and so forth.

For the purpose of this research project intimacy entails a closeness between two individuals in a romantic relationship and can involve both sensuality and sexuality. In addition, intimacy is understood from the two dimensions identified by Prager (2000), the first involving the individual's feelings whilst the second their perceptions.

However, the understanding of such intimacy differs between the genders as men and women place different significance on the various aspects of intimacy.

2.7 Experience of intimacy different for the sexes

It has been suggested that there is a strong association between marital and sexual satisfaction (McCabe, 1999). In a study by McCabe (1997) it was found that sexually dysfunctional males and females reported reduced intimacy in their relationships as opposed to sexually functional individuals. It would appear that sexual satisfaction does play a role in relationship satisfaction. However, the different genders tend to emphasize different aspects of their relationship, which result in an increased sense of intimacy.

In assessing the interrelationship between sexuality, intimacy and relationship functioning, McCabe (1999) found that the genders tended to differ on the sexuality scale. Males reported high scores on their own attitudes towards sexual intimacy but reduced scores for their female partners. The reasons suggested for these gender differences have been attributed to the socialization process. Women are therefore more likely to be committed in relationships and are more in favour of monogamous and meaningful sexual relations. In contrast, males are more likely to condone both premarital and extramarital sex (Hatfield et al. 1988). This socialization process identifies females to focus more on love and closeness in their sexual relationship, desiring lots of foreplay and after-play. In contrast, males are dominated by a "body-centered approach" where the desire is physical gratification (Hatfield et al. 1988 p. 40).

Men tend to express intimacy through actions, providing help, doing activities together and initiating sex (Ridley, 1993). For men, sexuality seems to be a means of attaining intimacy while women require intimacy to achieve sexuality (Kohler-Riessman, 1990). Patrick and Beckenbach (1999) found that although many men report a high priority and significance of the sexual relationship, sexual intimacy was not a vital component of intimacy for all men. In addition it was found that contrary to popular belief the experience of intimacy is broadening for males as they report expressiveness and emotional and verbal sharing as also being significant indicators of intimacy.

This suggests that a decline in sexual intimacy is experienced as a change in the level of marital intimacy for men. However, a study by Hatfield et al. (1988) found that while males tend to report a desire of more sexual initiative from their partners, they do not necessarily report relationship dissatisfaction (Hatfield et al. 1988). This leaves the question pending as to the role of sexual intimacy in fostering good relationship bonds.

2.8 Impact of transition to parenthood on intimacy

There is a limited amount of research that tackles the impact of the transition to parenthood on marital intimacy between the spouses. However, it has been indicated that, as part of the transition, couples report less satisfaction when it comes to closeness and sexuality (Ahlborg, 2004). A decline in intimacy between the couple tends to begin before the birth of the baby. It has been indicated that in the first trimester of pregnancy the women's sexual interest wanes slightly and by the third trimester sexual interest for both partner's declines. Ahlborg (2004) also reports that sexual interest seems to continue in the mode of decline for several months post delivery as opposed to the sexual level attained either pre-pregnancy or during pregnancy. Women are also more likely to suffer from sexual health problems after childbirth which impact on their sexual desire. In contrast to waning desire on the female's part, men tend to initiate sexual encounters more often.

This decline in intimacy whilst related to the transition to parenthood may also occur as part of the couple's progression through the various phases of intimacy. As such Andersson (1986) describes the process of intimacy as initiating with the "passionate phase", where the couple is in love and overlooks the flaws of the other (Andersson, 1986 as cited in Ahlborg 2004). The second phase, the "hesitation phase" occurs when couples differentiate from each other. In this phase, the partner's faults are no longer overlooked. In the final phase, the "mature phase" partners accept each other as whole individuals with both good and bad qualities (Andersson, 1986 as cited in Ahlborg 2004). The second phase tends to be the most challenging and successful movement through this phase involves constructive conflict resolution along with the partner's ability to voice their own individual needs. Often the transition to parenthood occurs as couple's progress through the second phase, highlighting the significance of open communication and constructive conflict resolution in maintaining marital satisfaction (Ahlborg, 2004).

Although couples do indicate dissatisfaction with the sexual relationship in their marriage, they do not always expose a complete dissatisfaction with the marriage on the whole. Raphael-Leff (1991) suggests that there are various methods of showing intimacy other than sexual intimacy. These including kissing or cuddling and engaging in these activities can refresh a couple's intimacy. In a qualitative study conducted by Ahlborg (2004) it appeared that the dissatisfaction seemed to be compensated by substituting sensuality for sexuality.

However, Raphael-Leff (1991) found that even tenderness in these alternate forms was found to be decreasing, specifically when mothers had experienced birth complications. Von Sydow, (1999) also reports that it is not only sexual intimacy that declines, but mutual caressing also declines amongst the couple from six months into the pregnancy, till three years after the delivery of the baby.

In spite of some studies showing a decline in sexual intimacy during pregnancy and the transition to parenthood, a study by Mizāne and Bite (2006) showed that men had a higher satisfaction with their partnership if the partner was pregnant, especially for planned pregnancies. Halle et al. (2008) also found that post delivery men tended to find their partners more attractive, whilst women felt less attractive.

The literature is thus inconclusive, as in some instances men seemed more attracted and satisfied with their partners and their relationship (Halle et al. 2008; Mizane & Bite, 2006), whilst in others the marital relationship was declining and both parties were not satisfied with the sexual intimacy within the relationship (Ahlborg, 2004; Von Sydow, 1999).

Fathers have identified a distinct change in the attention they received from their partners post birth of the child (Halle et al. 2008). Whilst the marriage is not always identified as being any worse, fathers have described their relationship with their partner as having changed, specifically in that there were constrained on time and spontaneity now that the child's needs had to take precedence (Fägerskiöld, 2008). Men also tended to feel jealous of the new baby as they felt abandoned by their wife who spends more time with the baby (Raphael-Leff, 1991). This is significant for the male, as it is the second time they receive rejection from a loved object. In their own early childhood they were rejected by their first love which is their mother. The focus of the wife's attention on the baby, may re-surface earlier feelings of rejection and abandonment, experienced during the oedipal complex in the phallic phase of psychosexual development (Ahlborg, 2004). This will be discussed more in depth later.

2.9 Decline in marital satisfaction and strained parenting

As one of the most significant changes in many couple's relationship after the birth of the first child involves a decline in marital satisfaction, the implications of this on strained parent–child relationships needs to be considered. Many studies have linked the quality of the marital relationship to parent-child interactions. Eiden, Teti and Corns (1995) found a positive relationship between marital quality and the quality of the relationship between parent and child. This is in line with the Family Systems Theory which suggests in its Spill-over Hypothesis that better marital quality would lead to more positive parenting (Carlson, Pilkauskas, McLanahan & Brooks-Gun, 2011). In relation to this, a negative correlation was found between a stressful and dissatisfied marital relationship and positive parenting (Carlson et al. 2011). Several studies have confirmed the spill over hypothesis thereby supporting its theory (Carlson & McLanahan, 2006; Grysch, 2002; Krishnakumar & Buehler, 2000). A poor marital relationship may also directly impact the child due to stress and tension which surface in the household (Eiden et al. 1995).

2.10 Influence of intimacy on fatherhood

Bradford and Hawkins (2006) suggest that the intimate relationship between partners lays the foundation for parents to develop a caring relationship with their children. In this light it is the loving and committed relationship between the partners which creates the context in which traits of caring parenting are likely to be learned (Bradford & Hawkins, 2006). This learning model of caring parenting was explained in terms of Sternberg's (1986) theory of triangular love. In accordance with this theory, love encompasses intimacy, commitment and passion (as cited in Bradford & Hawkins, 2006). Developing sound foundations of these three components in a marital relationship allow for these components to be modelled in parenting relationships, thereby fostering caring parenting (Bradford & Hawkins, 2006). In accordance with Sternberg's (1986) theory, a sound and successful marital relationship would have a positive influence on the relationship between parent and child (as cited in Bradford & Hawkins, 2006).

It has also been found that the quality of the marital relationship before and after the birth of a child is related to child attachment and security (Howes & Markman, 1989). For both parents, the quality of the marital relationship has an impact on parent-child relationships. As such in

harmonious marriages, good mother-infant and father-infant relationships can be found (Cummings & O'Reilly, 1997).

Bradford and Hawkins (2006) found a longitudinal moderate relationship between intimacy and competent fathering. A longitudinal study by Frosch et al. (2000) found that positive marital engagement was significantly associated with more secure father-child attachment. Cox et al. (1989) indicated that fathers tend to have more positive attitudes towards their child when they rate their marital relationships positively. Although there is not much research informing on the significance of the sexual relationship and fatherhood, a study by Heath (1976) indicated that there is a positive association between frequency and pleasure of marital sex and later paternal competence.

Marital satisfaction also impacts on fathers' involvement with their child. It has been suggested that there is increased paternal involvement when men perceive their marital relationship as satisfying (Blairr et al. 1994; Lee & Doherty, 2007). When fathers had spent less time with their patners and indicated poor marital quality they tended to spend less time involved with their children (Blairr et al. 1994). Furthermore, in satisfying marriages, fathers may spend more time with their children so as to please their wife, especially amongst couples where the wife places value on co-parenting (Lee & Doherty, 2007).

The significance of the marital relationship with regard to parenting is aptly explained by Cath (1986) who describes what she terms as the "alliance of couplehood" (p. 67). It is the quality of the alliance between the couple that tends to "extend into an alliance of pregnancy, and then into an alliance of parenthood" (Cath, 1986, p.67).

It is clear that good marital relations are significant for fostering caring parents and the significance of this relationship is greater for fathers than for mothers. A decline in the marital relationship can lead to more excluded paternal involvement whilst the mother – infant bond is more independent of the marital relationship. The reasons that have been posited for the relationship between paternal involvement and the marital relationship stem from the role of the mother in the triadic relationship (Cath, 1986). From this perspective, the mother is seen as a mediator portraying certain representations of the father to the child. The mother can assist in establishing positive or negative reactions towards the father, through her use of subtle and overt expressions. Fatherhood and paternal involvement can only thrive

with the mother's assistance (Cath, 1986). Therefore, a sound marital relationship will ensure that the mother fosters positive paternal attitudes in her child.

2.11 Theoretical Underpinning

This section of the literature review will undertake to ascertain the importance of psychodynamic developmental theory in understanding the transition to parenthood for the father. The aforementioned theory will be used to understand any unconscious processes which may also impact on fathers' experiences of intimacy in the marital relationship and their experiences of fatherhood. The unconscious can be defined as the deepest layer of Freud's theory of the mind (Freud, 1924). The unconscious involves "complex psychological processes [that operate] outside of awareness" (Shevrin, & Dickman, 1980, p.421). The focus will be placed on three key theorists in psychodynamic theory namely Freud, Klein and Winnicott. The fathers' role and the influence of the marriage on the developing child will be considered in relation to the ideologies of the aforementioned theorists. The oedipal complex will also be discussed as it is during the oedipal complex that the fathers' role and influence on their child is brought to the fore. In addition there are key similarities between this developmental phase and that of the transition to parenthood, specifically the possibility of oedipal anxieties resurfacing in the transition to fatherhood as a result of abandonment by the loved object.

Psychodynamic theory in essence positions the father in a triadic relation to his child, whilst the mother enjoys both dyadic and triadic relating. Freud, the father of psychoanalysis saw the father as playing a very significant role in the development of the child. However, this role came into play during the course of the oedipal complex, which only comes to the fore when the child is between the ages of three to five years old (Freud, 1924). Prior to this, the role of the father has little to no impact on the child.

Melanie Klein placed the focus of her theory on very early infancy (Klein, 1926). Yet again the fathers' role in relation to their child only comes into play through triadic relating which occurs during the oedipal complex. Klein saw the child as being able to only form dyadic relationships early in infancy with the primary caregiver, usually the mother, initially (Klein, 1926). However, she suggested that the oedipal complex occurs much earlier than was

previously suggested by Freud. For Klein, oedipal tendencies were seen to present from the end of the first year and the beginning of the second year of the child's life (Klein, 1928)

At large both these theorists emphasized the fathers' role as entailing a triadic relationship with their child whilst the mother enjoyed dyadic relations. From a triadic relational perspective, the importance of the marriage or relationship between the couple would be significant as it would impact on the relationship between the father and child. Barrows (2004) notes that whist the fathers' role in the development of the child has been noted to be critical, it is the "parental couple" that the child encounters. Hence, good marital relations would play a significant role in child development.

Whilst the focus of Winnicott's theory does not place centrality on triadic relating, the dyadic relationship between mother and infant is significant. During this initial phase of mother-infant bonding the father too plays a role, but his role is not in relation to the baby, but rather in relation to his wife. As such the father facilitates a healthy relationship between mother and baby by providing a supportive and secure environment for the mother (Winnicott, 1960).

It is clear from these psychodynamic theories that the fathers' role is limited and only comes into being at a later stage in their infant's life. In this regard theoretically fathers are not seen as being central in the early development of their child. Simultaneously, various studies have noted that whilst fathers play a significant role in the development of their child, their entrance into the child's life comes at a later phase. Fathers tend to engage with their child in more adventurous and playful activities (Clarke-Stewart, 1978; Craig, 2006; Hossain et al. 1997; Lamb, 1976; Lamb & Lewis, 2010; Yeung et al. 2001) which require a certain level of development of their child in order for them to adequately respond.

From the three theorists discussed above, it is evident that the focus of early infant life is placed on the relationship between the mother and their baby. The father only relates through a triadic relationship (Freud, 1924; Klein, 1928), or facilitates the mother's role in caring for the baby by caring for her (Winnicott, 1960). As the mother's attention is placed on her baby and the father's attention on his wife, it is likely for him to feel unsatisfied in the marital relationship. To further unpack this idea, the oedipal complex and its relationship to fathers in the transition to parenthood will be considered.

In psychoanalytic theory the oedipal complex is an important and significant aspect to overcome, which marks a milestone in the development process. Whilst for different psychoanalytic theorists the onset time for the oedipal complex, which occurs in the phallic phase, may differ, there is consensus on the significance of this phase.

The oedipal complex is named after the Greek mythology whose main character is a boy, by the name of Oedipus Rex. In accordance with the myth Oedipus Rex, is given away as a little boy due to the predictions of a fortune teller. As an adult, and unknowing of his true identity Oedipus ends up killing his father and marrying his mother (Hook & Watts, 2002).

The manner in which Freud described the playing out of this mythology in the phallic phase of psychosexual development will be discussed hereunder.

Children become keenly aware of their genitals in the phallic phase. They possess a scopophilic drive which is acted out through forms of voyeurism or exhibitionism, thereby allowing them to discover the anatomical sexual differences between the sexes (Freud, 1924; Hook & Watts, 2002). Little boys enter the oedipal phase loving their mother and desiring her as a sexual object. It is natural that this love be focussed on the mother, as she has been caring, feeding and nurturing the little boy for as long as he can remember. During this stage little boys also begin to recognise the relationship between their father and mother. As the father possesses what the little boy wants he begins to hate his father and feels aggressive towards him (Freud, 1924; Hook & Watts, 2002). The inner and unconscious wish of the little boy is to destroy his father and have his mother all to himself. These unconscious feelings of hatred towards the father can become so intense, that the little boy begins to feel guilty for the harbouring of such ill feelings. As the oedipal complex occurs in the phallic phase, the little boy is aware of the lack of a penis in little girls. Knowing that his father will not allow him to be with his mother and noticing the castration of the penis in little girls, the little boy develops castration anxiety (Freud, 1924; Hook & Watts, 2002). He fears that the father will castrate him in order to prevent him from engaging sexually with his mother. It is this castration anxiety which forces the little boy to give up his mother as a sexually desired object (Freud, 1924; Hook & Watts, 2002).

Whilst initial views on the oedipal complex seemed to suggest that it resolves itself during the phallic stage, it has been suggested that the struggles found in the oedipal complex do not resolve, but rather "go on unabated to reverberate and to be repeated multigenerationally in all later developmental phases" (Cath, 1986, p.70). From this point of view it can be expected that oedipal struggles will play out again in the transition to parenthood, as the father, like the young boy, has to give up his desired love object, the mother.

A common thread between the early developmental conquering of the oedipal complex and the transition to parenthood is that in both stages of life, the male figure is presented with a triadic relationship. For Brickman (1993), it is the experience of a triadic relationship that marks development. From this perspective "the Oedipus complex would consequently be viewed as a culminating developmental stage in a continuum of triadic experience" (Brickman, 1993, p. 909). Thus, in the event of fatherhood, the same oedipal concerns tend to resurface. Yet again the male figure is being abandoned by his love object. Initially it was the little boy who had lost his love object in the mother, as she took her rightful place beside his father. Now in the transition to fatherhood, the father is abandoned by his wife, whose attention focuses on the needs of the new infant in their family (Ahlborg, 2004). The father may then unconsciously experience this abandonment as the mother rejecting his desire for her again.

Cath (1986) suggests that in the transition to fatherhood, men are given an opportunity to re-examine old oedipal issues and resolve them on a deeper level. Diamond (1986) also considers the oedipal complex as being significant in the transition to fatherhood. The resolution of the oedipal complex results in the little boy identifying with his father and wanting to be like him (Freud, 1924; Hook & Watts, 2004). This identification plays out in adulthood where the boy is able to compete with his father and have a child of his own, becoming a father himself. Where the aggression towards the father has been too strong and unresolved, the adult male with these unresolved issues, may then try to inhibit or prevent his own fatherhood by not having children or by adopting a negative oedipal position thereby identifying with a homosexual identity (Diamond, 1986). Whilst this view suggests homosexuality to be a pathological condition, it is important to note that this view has been challenged and is not universal.

It has been noted that difficulties arising in the oedipal complex may resurface at later developmental stages, specifically in the transition to parenthood. Furthermore, the similarity in triadic relationships of mother-father-child, occur in both the oedipal complex and the transition to fatherhood. As the transition to fatherhood is the second time in which the male loses his love object, similar concerns of abandonment and loss may resurface in the transition to fatherhood. Moreover it would appear that the resolution of the oedipal phase is significant for ensuing fatherhood. It would therefore be helpful to examine the transition to fatherhood using psychoanalytic developmental theory, specifically that of the oedipal complex which emphasizes triadic relationships.

CHAPTER THREE
METHODS

This section will discuss the methods employed in conducting this research project. It will first elaborate on the paradigm used, followed by measures for collecting and analysing data and a description of the sample used. It will conclude with a section on ethical considerations.

3.1 Paradigm

This study was conducted using the underpinning of a qualitative paradigm. Qualitative research facilitates the study of people in their natural settings and not experimentally-adapted environments. This allows for an "open system" where the conditions themselves interact and change (Willig, 2008, p.9). This paradigm is suitable for the research project, as the aim is to explore fathers' perceptions of intimacy in the marital relationship after the birth of the first child. "Qualitative research aims to address questions concerned with developing an understanding of the meaning and experience dimensions of human's lives and social worlds" (Fossey, Harvey, McDermott & Davidson, 2002, p.717).

3.2 Sample

A non-probability, purposive, snowballing sampling strategy was employed. The participants consisted of eight fathers, five Caucasian males and three Indian males all currently married in a heterosexual relationship. The length of the marital relationship ranged from two years and four months to nine years. At the time of the interviews all except one of the father's were employed. The children ranged from the ages of 18-24 months. Three children were 18 months old, one was 19 months old, two were 22 months old and two were 24 months old. Research has found that in the first year of the child's life marital dissatisfaction is at its peak, specifically at one year postpartum. However, this dissatisfaction seems to improve in the child's second year. In the age category chosen for the child in this study one would not expect extreme dissatisfaction with the marital relationship. The age of the child was specifically chosen so as to reduce the effects of child rearing and the adjustments thereof on the marital relationship. Literature has indicated that a "child's developmental status… affects the appraisal of how the child's presence influences marital relations and family life" (Belsky, Spanier & Rovine, 1983, p. 568). This developmental stage of the child is focussed more towards their independence as they learn to walk and talk.

3.3 Procedure

The first step taken towards conducting this research project involved an application[1] submitted to the Ethics Committee of the University of the Witwatersrand for approval to conduct the research. This ethics clearance was obtained (MCLIN/12/004 IH). The researcher then approached fathers with children using the snowballing sampling strategy. Fathers who met the inclusion criteria were verbally informed of the research project. A convenient time and place for the interview was then set up with the respective fathers who chose to participate.

Prior to administering the interview, participants were given a letter describing the nature and purpose of the research project[2]. They were then asked to complete a form[3] consenting to participate in the study and a second form[4] authorising the interview to be recorded. The interview process lasted approximately one hour and took place in an area convenient to the participant, either at their homes or their offices. On commencement of the interview, the researcher introduced herself and welcomed the participant with the aim of making the participant feel as comfortable as possible. Participants were once again taken through the nature of the study after which the interview followed the semi-structured interview schedule[5].

3.4 Measures

Data was collected through the use of a semi-structured interview schedule[6] and the duration of the interview was approximately one hour. Interviews were chosen as this has been proclaimed as a good method to use when the research question involves "subjective understanding" (Seidman, 2006, p.11). The questions on the interview schedule were open ended, which provided the advantage of a "flexible and somewhat conversational" interview (Whitley, 2002, p.323). A weakness of the interview method is that it can create artificiality in the conversation as the researcher who will be a stranger to the participant will be posing confidential and intimate questions. Participants may have therefore felt uncomfortable in

[1] Appendix A
[2] Appendix B
[3] Appendix D
[4] Appendix E
[5] Appendix F
[6] Appendix F

engaging with the researcher (Myers & Newman, 2007). To try and alleviate this discomfort the researcher was friendly with participants and tried to make them feel comfortable through introducing herself and the study prior to commencing with the interview.

When conducting the interview the researcher simultaneously audio-taped the interview and took notes. The researcher chose to take notes in order to keep a record of non-verbal cues that could not have been captured in the recording. The advantage of audio-taping is that it ensures accurate reporting by preventing interpretive filtering (Speer & Hutchbey, 2003). However, a distinct disadvantage of this method is that it may result in participants feeling uncomfortable or nervous resulting in reactivity effects (Speer & Hutchbey, 2003).

The interview schedule[7] was created by the researcher and her supervisor and has been inspired by existing literature in the field. The interview schedule consisted of primarily open ended questions focussed to address the aims of the research. The questions were divided to address the following areas:

- Father's approach to fatherhood and feelings towards the baby (Questions 4-6)
- Challenges presented after the birth of the baby (Questions 5)
- Father's understanding of intimacy in their marital relationship (Questions 8)
- Father's perceptions of their marital and sexual relationship (Questions 9-10)
- The impact of the birth experience on the sexual relationship and desirability of partner (Questions 11-12)

A few close ended questions were also asked so as to attain some basic factual information regarding age and gender of the child and the duration of the marital relationship.

3.5 Data Analysis

In analysing the data Thematic Content Analysis was applied. This method of analysis is preferable as it is a flexible method that provides rich and detailed analysis of data (Braun & Clarke, 2006). Thematic content analysis has been described as a method of "identifying, analysing and reporting patterns (themes) within data" (Braun & Clarke, 2006, p.79). The

[7] Appendix F

aim of employing this method is to reduce the bulk of the data set and ensure that the limited information presented is a rich description of the findings (Braun & Clarke, 2006).
The method for analysis began by transcribing, reading and re-reading the data in order for the researcher to become familiar with it. Then various aspects of interest were selected from the data set and systematically coded. The coded data was then refined to fit into broader categories of themes. In choosing which themes were appropriate, relevant and important, a flexible approach was maintained, as Braun & Clarke (2006) advised against rigidity. The data was then thematically mapped in order to obtain a visual representation, for the purpose of easing the analysis of themes and the relationships that may be found between them. The chosen themes were then reviewed and refined so as to obtain a coherent fit between the themes and the data extracts. The analysis did not occur in a linear fashion as analysis has been specified to be recursive, involving "a constant moving back and forward between the entire data set, the coded extracts of data that you are analysing and the data that you are producing" (Braun & Clark, 2006, p.86). Finally, themes were reviewed, defined and given a detailed written analysis for the research report.

Although there has been research exploring the transition to parenthood and marital dissatisfaction, the findings from existing research were inconclusive and the population explored in this research project was novel. The researcher was therefore open to the data and some of the themes that arose were inductive and spontaneous.

3.6 Ethical Considerations

Here follows an outline of the ethical considerations that were followed when conducting this research project.

Firstly, ethical clearance was obtained, protocol number MCLIN/12/004 IH[8], from the Ethics Clearance Committee at the University of the Witwatersrand. Once ethical clearance had been obtained, the researcher then followed through with the data collection procedures.

All volunteers for this project were informed regarding the nature of the study both verbally and through the use of a letter[9] outlining the study. This letter remained with the participant.

[8] Appendix A

The interview process did not commence until informed consent had been received from the participants[10]. Participation in the research project was voluntary and participants had the right to withdraw from the study at any point without penalty. Participants also had the right to refuse to answer any of the questions during the course of the interview. Anonymity could not be attained. However, confidentiality was maintained through the research process, as the researcher allocated a pseudonym to each participant. These pseudonyms were used in the transcriptions and the final report, thereby removing all identifying features of participants. Participation in this research project did not advantage or disadvantage any of the volunteers. Consent was also obtained from participants in order to record the interview[11]. The tapes and transcripts from the research project were only processed by the researcher and her supervisor. Data will be kept safely for a period of six years in a locked cabinet at the residence of the researcher. This data will remain the property of the University of the Witwatersrand for this period of time. Electronic versions of the transcripts will be kept indefinitely by the University of the Witwatersrand.

The researcher is keenly aware that in exploring aspects of intimacy in a relationship, she may be delving into areas where distressing emotions may surface. To cater for the surfacing of such distressing emotion, the researcher ensured that she provided participants with details for services that can assist with the containment of such emotions. Contact details for the Emthonjeni Centre at the University of the Witwatersrand and the Family Life Centre were provided so that participants would be able to access face to face counselling[12]. Participation in the study may also have evoked marital discord as participation would involve that of the husband only and the area of research may be sensitive within the marital relationship. Couples counselling services could also have been attained through the Family Life Centre. However, these services would not have been able to cater for immediate distress as they may be waiting periods prior to individuals accessing these services. Therefore, the number of Lifeline was also provided. Lifeline offers both telephonic and face to face counselling and their telephonic counselling service would have been able to contain for immediate distress. All these services have minimal costs involved and for the telephone service this involves the cost of the telephone call.

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[9] Appendix B
[10] Appendix D
[11] Appendix E
[12] Appendix C

CHAPTER FOUR
RESULTS

4.1 Introduction

This chapter presents the results obtained from the eight interviews conducted with the first time fathers. To ensure that anonymity is upheld, the fathers are referred to by pseudonyms.

Four dominant themes emerged from coding the data using thematic content analysis as described by Braun and Clarke (2006). These themes will be listed here under along with the sub themes of each of these dominant themes,

- **The experience of fatherhood**
  The onset of fatherhood evokes a strong sense of responsibility
  Fathers' want to be involved in the daily care of their children
- **Fathers perceptions of the marriage changes**
  New challenges to the Marriage
  As the baby grows older the challenges reduce
  The influence of the baby on the marital bond
- **Participants' experience of sexual intimacy in the relationship broadens**
  Sexual intimacy in the relationship reduces
  As the baby becomes more autonomous fathers experience an increase in sexual intimacy
  Fathers' hold more positive perceptions of intimacy when they have access to support systems
- **Fathers' perceptions of their wife's desirability after the birth of the baby**

The demographic details of the participants are presented in the table below followed by the themes which emerged from the data. The type of birth has been included in the Demographic table for the interest of the reader.

4.2 Demographic Details

Participant:	Marriage length:	Sex of child:	Age of child: (months)	Type of Birth:	Race of Father:
1	4 years	Boy	18	C- Section	Indian
2	28 months	Boy	22	C- Section	Caucasian
3	6 years	Girl	19	Natural	Indian
4	3 years	Girl	18	Natural	Caucasian
5	9 years	Girl	22	C- Section	Caucasian
6	4 years	Girl	18	C- Section	Caucasian
7	8 years	Girl	24	C- Section	Caucasian
8	5 years	Girl	24	Natural	Indian

4.3 Themes and Citations

4.3.1. The experience of fatherhood.

"Fantastic" & *"It's scary."*

All of the fathers described being excited and thrilled at the arrival of their baby. This excitement was regardless of the sex of the baby. The fathers also explained that the pregnancy had been planned and as such, the idea of fatherhood was something they had given thought to.

Four of the fathers explained the arrival of their baby as being a positive experience. As such fatherhood was a role which they had whole heartedly embraced and would not be willing to change.

"I'm very happy I became a father. I never ever regretted it. I think we, it was quite planned." (Participant 1)

"It's the best thing that's happened with me so far. Brilliant." (Participant 2)

"Um, no I'm ecstatic. I love her, she's fantastic, you know. It's new challenges, but she's amazing," (Participant 4)

"I love her to bits. I think it's the best blessing that could ever happen to us." (Participant 8)

Two of the fathers described the baby as encompassing an extremely important part of their lives,

"He is my life. I would literally, I would kill for him." (Participant 5)

"She's my world. Really, to describe it, a few sentences would not do justice to that feeling that you get as a father." (Participant 3)

While Participant 6 showed his endearment by saying, *"Love the baby, gotta love the baby, she's so cute."*

The arrival of the baby was exciting and filled fathers with love for their baby. However, the idea of being a father whilst evoking emotions of joy, also left some fathers feeling slightly anxious initially. Three of the participants explain these anxieties,

"Initially it was quite a daunting thought." "I think it was just scary, am I ready for it, or am I responsible enough for it?" (Participant 8)

"It's scary." (Participant 4)

"A little bit of a nervous thing to start with. Because I've never been one, to handle other people's children, they must keep them. But I think with your own it's fantastic." (Participant 7)

Participant 6 described his anxiety as being somewhat of a shock and the prospect of being a father as being a rather depersonalising experience, *"It's an interesting experience... In fact those four days in hospital you stick around, I was there; it was great, and everything. But it's almost like a depersonalization experience. You stand there and you are like I'm a father. Me. They allowed me to have a kid. You're like looking at yourself going who in their right mind was sane enough to organize this. So it has that aspect to it, it's a little bit surreal but it's fantastic at the same time."*

4.3.1.1. The onset of fatherhood evokes a strong sense of responsibility.

"a whole life that you're responsible for"

Fatherhood tended to evoke feelings of responsibility in different ways for different fathers. It clearly emerged from the interviews that central concerns for these fathers were responsibility in terms of having a child who required their care and protection. The idea of having a little new person, left them with feelings of intense responsibility to cater for all their child's needs. Two of the participants describe this all encompassing role of responsibility,

"It's a very, the onset of responsibility comes almost immediately. It's a change in mindset that has to happen. And it automatically happens as soon as you see the baby come out. I don't think you can not feel that sense of protectiveness that you would have immediately." (Participant 3)

"I was never a father before, just the freedom I had and my lifestyle. Just that responsibility, it's a whole person, a whole life that you're responsible for, from taking care of, to bringing up, developing and nurturing. I think it was just scary, am I ready for it, or am I responsible enough for it?" (Participant 8)

Participant 4 added that along with the responsibility he also felt an immense sense of pride at having been given such an important role in his little child's life. *"It's scary. Because you now obviously have a lot of added responsibility, which you never even. I mean you perceive them, but only to the extent that you can imagine. But actually to experience it, is at a whole other level. But it's scary also in terms of planning for the future. But also, it's very rewarding knowing that there's this person that's running around in the world that has you and her mom. No one else really will care for her. It's very rewarding that way, to know that you're responsible for this person's life."*

Two of the participants referred to their concerns of responsibility as specifically encompassing financial responsibility, *"A lot more responsibility... Finance. Time, you put a lot of energy into the kid"* (Participant 6). At the time of the interview Participant 5 and his wife were trying for the second child, and he spoke of the need to take into consideration finances when planning for a baby, *"So we had to put number two on hold because I said I'm*

not prepared to bring another child in, with more responsibility if I'm not sure I've got a job."

4.3.1.2. Fathers' want to be involved in the daily care of their children.

"just with me and her, nobody else"

Fathers describe themselves as being involved with the daily care-taking of their baby and are proud of this involvement. Most of the fathers are happy to partake in any activity with their baby and seem to prioritise making time for this, so as to be involved in caring for their baby.

"I want to help as much as possible. I try to fill in any gap that I possibly can... In terms of helping out with what the baby needs. I try and you know help with as much as I can." (Participant 4)

"I try and get involved as much as I can, so at bath times and dinner times, and putting him to sleep at night. I try and get as involved as I can." (Participant 5)

Whilst all of the fathers indicated wanting to spend time with their children and being more than willing to help out, four of the fathers had developed set routines that allow specifically for father-child bonding.

"I'm happy to do anything. Changing, feeding, bathing. I actually try to make sure that bath time is my time with her every day. Unless I'm busy I will bath the child, change her at night, so I can spend that half an hour, 45 minutes dedicated, just with me and her, nobody else." (Participant 3)

"Bathing, at least once a week I go fetch him at my mother in law, bring him home. I do the bathing and feeding. Whatever needs to be done, I'm more than willing." (Participant 2)

"I bath, I change nappies, dress her. We have a routine. Basically on the weekend, on a Saturday my wife sleeps late, and on a Sunday I do. On a Saturday morning she's up half past six, moving around there. I get out of bed and I sort out the bottle, we go downstairs and we spend the morning together, I give her breakfast and play and watch TV and draw and do

all those kinds of things. My wife sleeps, so I'm very comfortable looking after her." "I like to spend time with her. What's the point of being absent." (Participant 6)

"The bathing the routine is, we run the bath, her and I run the bath, so for the first half we play, she plays more with dad and then mom would come and wash. Specially washing hair. So everything is done." (Participant 7)

Participant 1 emphasized that being involved with his child was something that had not been accepted by the older generations in his family. However, the idea of being an involved father was far more appealing than not being involved, *"I am very proud of being very involved. The old people laugh at me [unclear] but I think it made me realize that it's a lot of work ... I want to be a father, like I said who is able to look after their child, who is able to have a different relationship with his child. Like I want to be quite involved in his life and I just want to take part in the things he does, and I want to be, I want to be a part of the moment. Be there – I think I'd describe myself as a father, as an active, active father."*

Although all the fathers were keen on helping out, two of the fathers had still seen the feminine role as being more important in child rearing. Participant 4 stated *"I think mothers naturally have a lot more energy when dealing with babies, than men do. I think guys get tired a lot quicker when it comes to playing or entertaining the baby."* For Participant 8 he had felt that certain parts of child rearing were not within his role and hence these would automatically lie with the mother, *"But I'm not the nappies type and not very hands on."* Significantly both these participants come from conservative religious backgrounds. In addition both these women are stay at home mums and they highlighted their limited time with their children due to their work commitments in the following excerpts,

"I think due to work commitments etc, I just don't get to spend enough time." (Participant 8)
"... obviously with work, I can't be here all the time." (Participant 4)

4.3.2 Father's perceptions of the marriage changes .

"Different - not different bad or good, just different."

After the birth of the child, fathers do not describe their marriage as having shifted to neither a more positive relationship nor one that is more negative. In spite of being unable to necessarily pin the change, all the fathers' responses in the transcripts indicated that they strongly feel that the dynamics of the marriage had changed after the birth of the baby and that the relationship had required adjusting to.

Three of the fathers discuss this change as involving the adjustment in the time available between them and their spouse which changes dramatically after the baby.

"So in terms of our marriage, I wouldn't say it suffered, but I would say it changed. The dynamic between us, not in a bad or in a good way but it just required us to rearrange our time. To rearrange how we communicated, when we did things with each other and when we found time and stuff. So it was quite difficult in the beginning." (Participant 1)

"she tries to make time, but it's difficult. It's even difficult for me to make time for her with "baby" around. Because he's always there, his always needing something, bathing, feeding, bottle, bed, nappy change. Life changes and it's different in the sense that we don't give each other the amount of time that we used to, but we also understand that you can't spend the same amount of time as we used to. So it's not strained or under pressure or anything like that. It's just something that both of us had to accept, that bringing a child into the world, you need to share your time." (Participant 5)

"If she only goes to sleep at 9pm, we have very little time for us to chat. We don't want to chat because then she is all ears. So we want to, I would like if she could go down at 7pm, my wife and I have got more time to have supper together and just sit and talk, but with her only going down just after 9 o clock, it's late already and then we want to go to bed and then we have no time at all, you know just for us." (Participant 7)

Participant 2 simply indicated that an adjustment in the relationship was necessary and made a strong statement that the relationship has changed to a large extent, "*That has changed a lot*

(the marriage). Up until he was born, it was just the two of us, although we knew with him coming and planning before that, it's a huge adjustment."

Participant 6 was unable to pinpoint specifically how the change had come about but also indicated that the marital relationship had required adjustment. He said *"Different marriage. Initially more strained, not now any more. We've adjusted ... Different - not different bad or good, just different."*

For Participant 4 this adjustment involved maturity where as parents the couple were expected to be mature. As such the more relaxed and easy going couple phase had ceased, he said *"You know I think before, it's more fun and games, and you know – you like just care about each other and that's it. Now you mature a bit, I think. It has changed, it has moved from the fun realm to more of a serious realm."*

4.3.2.1 New challenges to the marriage.

"now your life is totally dominated by this little individual"

Whilst there were challenges in the marriage, the fathers indicated that these challenges were not great enough to cause major disruption or fall out within the marriage.

The most common challenge amongst the fathers was the alteration in the spontaneity of their relationship. As a couple, the relationship involved the needs of two adults which allowed for a lot more flexibility in terms of spending time together and going out.

Four of the fathers emphasized the lack in spontaneity and control over their time as a couple. They also informed that an adjustment was necessary, as when the couple planned an activity together the needs of the baby had to be considered,

"I think the biggest challenge was trying to adjust to life after the child. So it was, before we were married it was just the two of us so we could do things in our own time, if we wanted to go out we'd go out, if we wanted to go for a movie, we would go. But after the kid came, you know. Lots of people joke, they say you must go out before you have children, because after then you have to go with your nappy bag and your pram, so you have to adjust you know. You

have to adjust everything because now it takes you, instead of 10 minutes to get out of the house, it takes an hour to get of the house. So you have to adjust to life, because it becomes, now it becomes about the baby." (Participant 1)

"Well not as free anymore because of circumstances. I finish here just after six, and in those days I'd phone my wife and say I'll be home in 15 minute, feed the dogs and we are going out to dinner and we'd do it. Just like that we're gone. None of that any more, all of that's changed. The day that stick turns pink, your life changes. It's just the beginning, but your life does change. So the marriage changes with it. It can't be what it was. We don't have the time to sleep till 10 in the morning, it's a luxury." (Participant 6)

"I suppose, you know before the kid comes along you can decide to go to a 10pm movie on a random Wednesday night, or go out for drinks and not worry you know about finding a baby sitter, or if the baby sitter's fallen asleep while the baby's playing with blades. You know that kind of thing. The only thing is that one should learn, your date life is very limited, so you have very little time to spend with each other." (Participant 4)

"Previously you could do anything that you wanted at any time, really without consideration for children, now your life is totally dominated by this little individual. I mean anything, whether it be going out to a movie, going out to a restaurant, going out to see family and friends, everything is just O' what about baby. So it becomes, ja, they do, we haven't tried to, we've never been too much into the social scene. We're not party animals at all. So we still do what we wanted to do. But we're very conscious of her. And we don't go out at night anymore because she just, you know. We don't go out at night." (Participant 7)

Two of the fathers specifically emphasized that their time with their spouse had been limited since the arrival of the baby. For Participant 2 the couple routine had changed in that he and his wife were no longer able to go to bed together as she had needed to sleep earlier to enable her to attend to their child when he woke, *"it's not going to bed at 10 o clock at night the two of us, it's go to bed and sleep with me sleeping and really not waking up, unless my wife wakes me up, she's the one getting up at night and. In that sense it's changed because she goes to bed at 8 in the evenings, to get some sleep before he wakes up the first time, so it's changed a lot."* Whilst for Participant 5 the challenge was the overall limitation in having

quality time exclusively between him and his wife. *"It's the, being able to sit down and just talk or just spend adult time together. That's what I probably miss the most."*

4.3.2.2 As the baby grows older the challenges reduce.

"The beginning is difficult"

Fathers reported that the challenges had been far greater when their baby was younger. However, these challenges seemed to have reduced as the baby grew older and settled into more of a routine. Significantly, as the baby was becoming more autonomous, fathers felt that they were able to have more flexibility in their marital relationship,

"The beginning is difficult. And the first three or four months, it's an adjustment in so many different ways. Sleep's a big one. Routine. I used to come home at the end of the day, slump down on the couch, eat some dinner, talk to my wife, watch some TV. (Whistles) Bye bye, out the door. There's lots to do and there's lots to learn. It's not just a matter of re-establishing and adjusting to a new routine. It's trying to figure out what that routine is. Especially in the beginning, it changes quite a bit ... It makes a big change in your life, when they're sleeping, you're sleeping, your life really does change. You're not tired all the time." (Participant 6)

"She's become less dependent. When she was breastfed, she needed the mother, so you couldn't consider maybe leaving her with someone, or not being close to her at a certain point in time because you never know when she needs you. But now that she's grown older, she's off breast milk etc., she's definitely become a lot more independent. Where you can also just be doing your own thing, just sitting watching TV, she's playing with her toys. She doesn't mind, she doesn't need you as frequently as she used to I guess, because she's growing up as well." (Participant 8)

For two of the fathers, unique circumstances had led them to find the initial period of their child's infancy rather taxing and strenuous on the marriage. For Participant 1, having to complete a Masters degree and having his wife working a full day, had left them with little to no time for each other, *"I used to study at night, because night was the only time it was quiet. I used to study at night and mostly sleep in the day and she used to go to work in the day. So we didn't really see a lot of each other in the day I suppose. And the night was the only time*

we could be together. But we had to see to the baby and then on top of it you know we go to eat twice a week at my in-laws and by mother twice a week.... So it was up and down every day with the baby so by the time we actually get home, there's not really time for anything. We just put the child to sleep, maybe we watch TV for a little while or something and next day. So it was very difficult, the first six months were very hard and it takes a strain on the marriage." Participant 5 had moved out of his bedroom when his baby was brought home. Although this decision was taken by the couple in the interests of their child, it had created more challenges as opposed to when the baby had grown older and moved into his own room, allowing Participant 5 to return to the marital bed, *"So my wife was breastfeeding so he'd sleep with her and I'd sleep in the spare room. But it wasn't anything between my wife and myself. It was a decision that I made based on the fact that I'm a smoker and I didn't want to endanger him by smoking. That I'd say was one of the biggest things. Other than that, I suppose it's a normal thing that guys normally complain about is the fact that my wife doesn't have time for me anymore, because it's time for the baby."*

4.3.2.3. The influence of the baby on the marital bond.

"keeps our bond stronger" & *"you have to learn to share the love"*

The bond that fathers tend to feel with their wife differed amongst the different fathers. For some of the fathers, the presence of the baby had strengthened the closeness they felt to their spouse whilst for others, the connection diminished.

Two of the fathers had found that the baby had increased the connection they felt towards their spouse as the baby represented something which was exclusively shared by the couple.
"I think it definitely strengthens your bond. ... because now you have something linking you two, not just a piece of paper. It's now something physical and something you can quantify and see in front of you every day. And I think that gets you closer together." (Participant 3)

"I think it's wonderful because I think she has given us every reason to be by each other's sides. It's had its challenging moments like we spoke about when she was sick. That's the most common thing that we have. We come from different background. We did commit to each other as a couple getting married. But the most common thing between us is baby, she is the only thing that we share completely dependently. I think it's been a blessing to the marriage that we have something that we are common in and we live for. So regardless of

other challenges, I think every marriage might have an argument here and there. But we will do anything for her. It just keeps us, keeps our bond stronger." (Participant 8)

In contrast Participant 1 felt that as there was such a limited amount of time available for him to spend with his partner, his connection and bond towards her felt reduced, *"So you have to adjust to life, because it becomes now, it becomes about the baby. So in a way you do lose some of that connection between you and your wife, because now you have to learn to share the love basically."*

4.3.3 Participants' experience of sexual intimacy in the relationship broadens.

"Getting some alone time just with my spouse"

In all of the interviews fathers indicated that physical intimacy was a very important aspect of the relationship. However, in their description of intimacy, it was far more encompassing than just the physical aspect of sexual intimacy.

Five of the fathers indicated that intimacy involved more than just sexual intimacy. Intimacy thus broadened to include having a connection with their spouse and being able to spend quality time with her, even when this did not entail sex,

"It's not just a physical thing, it's also a very unspoken thing that happens. Even spending quality time alone in the evening, watching 'Greys', that would be an intimate time for us. You know just spending quality time together would fall into that category." (Participant 3)

" ... but as far as myself and my wife are concerned, okay, you've got your physical side. But more than that it's the connection, making time for each other. It's the, being able to sit down and just talk or just spend adult time together. That's what I probably miss the most." (Participant 5)

"Connection, we'll take the physical side as given ... Understanding, physical connection, emotional connection, spiritual connection, everything and being able to talk to your partner. We've had our moments and being able to talk to each other through those moments is where the connection comes in." (Participant 6)

"Intimacy I think is very important. In any marriage, I think one of our strongest points was our intimacy and our connection to each other. So just, you know, not sexual intimacy, but intimacy in different forms, you know. It's umm, whether sitting and watching TV together or just doing something together, you can be intimate with each other. I think the intimacy, it takes you through a lot of things in a marriage, it takes you through a lot of problems and it lets you deal with things quite differently." (Participant 1)

Two fathers differed from this overall view of intimacy where physical intimacy was significant and important but was not all encompassing, as intimacy included other aspects of bonding as well. Participant 2 had included his child into the intimacy he experienced with his wife. As such his understanding of intimacy had broadened. However, the significance of physical intimacy was not highlighted, *"The focus has changed away from intimacy between the two of us to intimacy between the three of us, and I almost want to say less sex and more love if you can put it that way."* And in direct contrast Participant 4 had indicated that physical and sexual intimacy was incredibly important and that physical intimacy encompassed his understanding of intimacy, *"It's priority number one, you need it. There's no question about it. You have to make sure, otherwise you're just two people living under the same roof looking after a kid. You need to be on the same page all the time and in order to do that you have to maintain all aspects of marriage."*

4.3.3.1 Sexual intimacy in the relationship reduces.

"It has decreased drastically"

The frequency of sexual intimacy does reduce after the arrival of the baby and this reduction was reported by all of the fathers.

"It's basically fallen away for now. But the focus is on him. We never planned even when we got engaged and started planning on that, discussed that the sex is going to carry on, it was all depending on what the circumstances are going to be. He's unfortunately got a sleeping pattern like me, he sleeps very little and when he wakes up he stays awake. So, everything has to be lived around him." (Participant 2)

"It has decreased drastically. I'm a man, I'm not happy about it." (Participant 5)
"It becomes very difficult sometimes, it puts a lot of strain on you, or like on the intimacy basically it becomes very difficult ... and it did go down, our sexual activity, it did go down after the child. Most definitely." (Participant 1)

Participant 8 had felt that although there was a reduction in sexual intimacy, he had been understanding of this reduction and had found it inevitable considering the number of adjustments the couple had to make after the arrival of their baby. He stated *"I guess when she was just born, we talk about the first few weeks or months, perhaps but I guess when you have so many other things on your mind, so many other responsibilities, with a whole new baby and a whole new lifestyle, and all the sleepless nights etc. I think it overcomes every other need of yours, so maybe initially for the first few weeks or months, especially with the wife just going through childbirth, you, or I didn't expect anything else other than that. So I guess it was (reduced) initially but understandably so."*

In addition to understanding the reduction in sexual intimacy Participant 3 reported that he and his wife were able to substitute sexual intimacy with other forms of intimacy during this period, *"it was a difficult pregnancy. It took six to seven months for her to heal. In that way it was difficult, but it wasn't something that we couldn't overcome. It didn't have to be purely sexual all the way sort of thing, you know."*

In spite of reporting a reduction in frequency of sexual intimacy, two of the fathers described their sexual relationship as improving,

"I think after that honeymoon period, some sort of lull that you go through but I think you start taking each other for granted for a bit, you take your relationship for granted for a bit and then it gets, I mean we, five years, you start working and things become different. But I think after the baby, I think for some reason it improved. I noticed it, I'm sure she did as well." (Participant 3)

"No different. Possibly better now, I mean, if I can put it like this, nothing's changed, but the fact that I feel like sort of more of a team, that's made it, that's added to it. It increases the intimacy that you were talking about earlier." (Participant 4)

Only Participant 1 had felt that the sexual relationship between him and his wife had deteriorated and that it would never be as it had been before the birth of the baby, *"I think psychologically in the back of her mind always, you know on some level she's afraid to get pregnant again. Because it was so difficult for her to be pregnant, she went through a whole lot of complications etc. you know. So I think it was quite scarring on her to give birth, have a baby. It did go down, our sexual activity, it did go down after the child. Most definitely. And then it started to pick up slowly slowly after the first year. It started to pick up. But, I don't think it will ever be the same again."*

Significantly, this father had experienced stressors in their marriage prior to the birth of their child. These included financial strain as a result of complications in his wife's pregnancy leaving her unable to work, he stated, *"I found that during the pregnancy, it was quite difficult because my wife had, you know complications. A little bit of complications, so it became difficult because, now I had to look after her and make sure that she's resting and all of that. It puts a lot of strain on our marriage, then she wasn't working as well. You know I was studying and she was not working so it became a bit difficult sometimes, financially."*
The most common challenge with sexual intimacy was similar to the challenge within the marriage itself in that the couple had lost the spontaneity in their sexual intimacy. The following excerpts describe this loss in spontaneity,

"You see after, to be spontaneous was very difficult because you have to be spontaneous on a clock." (Participant 1)

"Before when my wife was home before me and she'd be waiting for me, I'd walk into the house and she'd be waiting with sexy lingerie, you can't do that now. So it's just with another little person in the house, there are certain things that you just can't do ... before "baby" was born she was a hell of a lot more interested in initiating and it was spontaneous and it was like – I can't think of the right word. It was spontaneous and it was more both of us initiating an equal amount of times." (Participant 5)

Participant 7 had indicated that a sexual relationship without spontaneity was not ideal, but that he had become accustomed to it prior to the baby as he and his wife had been trying for their baby through various IVF methods, *"Well look I think we understand, because we were so desperate for her, that it's for the greater good almost. It may be lacking, if you want to,*

get involved and say you no, no, no, you can't because it's not the right time, you understand it, but it's probably not 100 percent ideal."

4.3.3.2 As the baby becomes more autonomous fathers experience an increase in sexual intimacy.

> *"It makes a big difference as the child gets older. Major major major. It does get better."*

When the fathers were asked regarding their perceptions of their sexual relationship and if these were any different from prior to the birth of their baby, most fathers indicated that the relationship had improved as the baby grew older. Similar to fathers reporting a reduction in marital challenges as the baby became more autonomous and settled into a routine, so too the challenges in sexual intimacy reduced as parents had more available time for sexual intimacy,

"I think much better (now), because now it's more, we are more used to it, we've adjusted and we've found our stride and groove. (Sexual intimacy) It becomes very difficult sometimes, it puts a lot of strain on you, or like on the intimacy, basically it becomes very difficult ... as time progresses, it gets better, the baby grows up, he comes into a pattern. Your life comes into a pattern, and then it becomes easier." (Participant 1)

"She sleeps through the night or whatever, so we don't have any problems with that." (Participant 3)

"Now he's going to sleep in his own cot, it's actually become better, because we go to bed in our own bed now without him being there. So it's become a lot easier doing that. ... So actually it is getting easier as he is getting older." (Participant 5)

"It took 14 months to get her to sleep through the night. We sleep trained her, four or 5 times. For the last four months she's slept at least, 6:30 or 7 at night until six or half past six. It makes a big change in your life, when they're sleeping, you're sleeping, your life really does change. You're not tired all the time and the first three or four months, 20:30, you just want to climb into bed and sleep, you are so tired, and you know that you're going to get woken up during the night too. Now we go to bed 10, we sleep through until 6, you're getting 8 hours

sleep, you've got some time to talk some time to watch some TV, do some stuff." (Participant 6)

4.3.3.3 Father's hold more positive perceptions of intimacy when they have access to support systems.

In this study fathers were not directly asked regarding their accessibility to support systems and their perceptions of support systems with regard to their marital relationship. However, it emerged from the transcripts that support systems were seen as being vital in aiding the couple to achieve private time, in which they were able to spend time exclusively with each other, not in the presence of the baby. Fathers that had such support mechanisms through relatives or nannies, felt that such support had greatly assisted in improving their intimate relationship with their wife.

Two of the fathers had made concerted effort in their relationship to allow for this private time,

"But thankfully with us we always try and make time for us and we have good social support like our families help us out. Like what happened with the baby also, after the baby came, he would go to his Granny and that would give us that time again, you know, to be husband and wife again." (Participant 1)

"But what we do try and do is once a month we try and make time to go on a date, my mom babysits. It's just a case of we try and go on a date night once a month. My mom will actually look after baby for the night. We will go out to dinner, go out to movies, and just spend some quality time together. And then with the nanny that we've got living on the property, she babysits two nights a month. So we get to go out even if it's just dinner and a movie and then go home, the nanny's already put him to sleep and has done what needs to be done. So we still try and make time and we fortunate that we can make the time." (Participant 5)

Participant 7 indicated that support systems were not readily available to afford him and his wife private time. However, he recognised that these would have been helpful to keep the marriage healthy, *"My wife's mom and dad are far ... You do need to have time for yourself,*

which we don't have at the moment.... We do need quality time. We need to spend us time as well. For the sake of the relationship, not that it's in any jeopardy, but I think it's healthy."

4.3.4. Fathers' perceptions of their wife's desirability after the birth of their baby.

"She's hot"

All of the fathers that were interviewed had been present for the birth experience. Presence at the birth did not impact fathers' perception regarding the desirability of their wife. All of the fathers, apart from one, indicated that they found their wife as desirable after the birth of their baby if not more desirable.

"I almost want to say more than before."(Participant 2)

"I find her very desirable, at the moment very desirable, even while she was pregnant." (Participant 1)

"Very desirable, that has not changed." (Participant 5)

"As in on a scale from 1 to 10, from before to now, 12 out of 10." (Participant 4)

Significantly three of the fathers indicated the importance of their wife's physical appearance and often their responses on desirability were linked to such physical appearance. These fathers showed pride in their wife's ability to lose the weight gained from the pregnancy,

"She's still, I still find her very desirable, she keeps her shape nicely." (Participant 3)

"She's hot. Again not to sound like a male chauvinist pig but my wife is somebody who takes pride in her appearance and she is a dietician by profession she lost a lot of weight and not that I want to sound that way, but she looks fantastic. She looks better than before. She wanted to lose more weight than before she had the kid, she looks fantastic."(Participant 6)

"*I think as desirable as always. I think she's been good enough to keep herself in good shape etc for me so she hasn't lost it so I can't complain."* (Participant 8)

Participant 7 had felt that even though he found his wife desirable she did not look the same as she had before the baby, In this regard he felt that, *"She needs to lose a bit of weight"*.

4.4 Conclusion

The results all have particular relevance to this study and the above-mentioned themes will be discussed in the next chapter in conjunction with the literature reviewed.

CHAPTER FIVE
DISCUSSION

5.1 Introduction

This chapter discusses the results presented in chapter three. The aim of this research was to gain an in-depth understanding of marital intimacy from the perspective of the father along with his perceptions of fatherhood following the birth of the first child. The themes that emerged from the data will be discussed hereunder and have been divided into four dominant categories namely: 1.) The experience of fatherhood, 2.) Fathers' perceptions of the marriage change after the birth of the baby, 3.) Participants' experience of sexual intimacy in the relationship broadens and 4.) Fathers' perceptions of their wife's desirability after the birth of the baby. The aforementioned themes are discussed in relation to the literature that was reviewed.

5.2 The experience of fatherhood

Fathers that participated in this study had found the experience of being a father both *"fantastic"* (Participant 7) and *"scary"* (Participant 4). Fathers were thrilled and elated at seeing their newborn infant and were overwhelmed with emotions of love and happiness *"Love the baby, gotta love the baby"* (Participant 6). Fathers had found that the rewards of fatherhood and the joys of interacting with their child far outweighed the difficulties in parenting, which was found in the study by Anderson (1996). As such, fathers' responses towards the baby were often positive, which is in line with the literature (Fägerskiöld, 2008; Clinton & Kelber, 1993; Lamb, 2010; Chalmers & Meyer, 1996).

In this study all of the fathers had reported that the pregnancy was planned and they were looking forward to the arrival of their baby, *"It was a planned pregnancy and we waited a long time for her"* (Participant 7). The level of preparedness with regards to the planning of the pregnancy and the perception of stability within the marital relationship are among the factors that contribute to fathers' readiness for fatherhood (Jordan, 1990; Bradley et al., 2004). In addition, some of the fathers had indicated that they prepared for their infant by reading up and attending antenatal classes, *"we had gone for a significant amount of classes and done enough reading and research ourselves to know what we were doing"* (Participant

3) and *"my wife got a lot of books and information from her sister, and we've got family that's got kids, so we pretty much knew what was coming"* (Participant 2). These excerpts indicated that fathers were prepared for the arrival of their infant which, according to the literature (Bradley et al., 2004), may have played a role in buffering the relationship against the negative consequences of the transition to parenthood on the marital relationship.

Together with feelings of elation and joy, the idea of being a father had also left fathers feeling somewhat concerned and anxious in that they had now moved into a realm of being responsible for a little child. These feelings of anxiety, linked with fatherhood, were also found in the study by Glade et al. (2000). The "scary" part of fatherhood often involved feelings of responsibility along with a sense of surprise and achievement at the idea of being allowed to take on such a mammoth task. Fägerskiöld also described fathers feeling overwhelmed as the task of fatherhood was "enormous, much bigger than you could imagine" (Fägerskiöld, 2008, p.66).

Feelings of responsibility thus seemed very much tied in with the idea of fatherhood and the definition of what it means to be a father, *"I think it was just scary, am I ready for it, or am I responsible enough for it"* (Participant 8). All of the participants felt that the very onset of fatherhood had brought with it an immediate sense of responsibility and protectiveness over their newborn. These feelings of responsibility were not limited to financial provision as has been suggested by Morrell (2006), but they also included nurturance, care and protection over the baby. This all-encompassing responsibility was also indicated by participants in previous studies (Anderson, 1996; Fägerskiöld, 2008; Glade et al., 2005).

The fathers in this study did not report feelings of envy towards the relationship between mother and baby. This is in contrast to the study by Anderson (1996) where fathers reported feeling envious of this relationship, specifically when it came to breastfeeding. In these circumstances fathers felt cast side and unable to participate in the bonding process (Anderson, 1996). The fathers in this study seemed to create a space which allowed them to bond individually with their child. As such they were not relying on the mother to create a triadic relationship with their child, but instead they created a dyadic relationship between just them and their child: *"just with me and her, nobody else"* (Participant 3). This type of relationship moves away from common psychodynamic developmental theory in psychology,

as the father is no longer seen as only a support to the mother's exclusive relationship with her baby (Klein, 1927; Freud, 1924; Winnicott, 1960).

At large both Freud and Klein emphasised the fathers' role as entailing a triadic relationship with their child whilst the mother enjoyed a dyadic relationship (Freud, 1924; Klein, 1927). The fathers' role in this triadic relationship is significant, but it only comes to the fore during the oedipal complex. For the most part, the fathers' role in their child's life is sidelined till the child is ready to enter into a triadic relationship. For Klein, this can occur from between the end of the first year to the beginning of the second year of the child's life (Klein, 1927), whilst for Freud triadic relating only occurs when the child is between the ages of three and five (Freud, 1924). Winnicott in contrast allows the fathers to enter into their child's life from the very beginning. However, fathers do not enter the child's life as a central object, as for Winnicott it is the dyadic relationship between mother and infant that is of utmost importance. During this initial phase of mother-infant bonding fathers do play a role, but their role is not in relation to the baby, but rather in relation to their wife. Fathers are responsible for facilitating a healthy relationship between mother and baby by providing a supportive and secure environment for the mother (Winnicott, 1960). In relation to this study, it is difficult to fit the theory to the fathers' reports, as they indicate playing a central role in their child's life where they tend to engage in a dyadic relationship with their child.

Whilst the children in the study were between 18-24 months and already far more autonomous than the immediate postpartum period, fathers had indicated participating in activities such as bathing from early on, *"I think from the first month, I think just when she was born, I was a bit apprehensive about hurting her but once I got the hang of holding her, then I could bath her like from the first month and change her, from the first month as well"* (Participant 3). This statement aptly portrays the contrast between the fathers' reports and the psychodynamic theories as the relational dynamic between father and child is dyadic and occurs from very early on in the child's life.

In this study, most of the fathers described themselves as being very *hands on* with their child and partaking in activities such as bathing, feeding, and so forth. Fathers not only partook in these activities of daily care but also ensured that they created the time in their lives for such participation: *"what's the point of being absent"* (Participant 6). Anderson (1996) pointed out that fathers wanted to be involved with their children both psychologically and physically, as

they had felt there were many rewards to be gained in such a relationship. This increased participation of the father in child-rearing has emerged with the increased participation of women in the workforce. "New age" fathers no longer limit the domains of fatherhood to the traditional role of being the "breadwinner" (Palm & Palkovitz, 1989). This shifting role of fatherhood has been described as the "co-parent" father, where fathers share in the day-to-day responsibilities and care-giving of their child (Lamb, 2010). The modern father is thus differentiated from traditional fathers in that they are far more present in the lives of their child (Barclay & Lupton, 1999; Burghes et al. 1997; Clinton & Kelber, 1993; Yeung et al. 2001). Previous research has suggested that the focus of the time spent between father and child often involves partaking in activities. Fathers take on the role of playmate, guide and friend and these activities took precedence over childcare (Barclay & Lupton, 1999; Craig, 2006; Lamb, 1976; Clarke-Stewart, 1978; Hossain et al. 1997; Lamb, & Lewis, 2010; Yeung et al. 2001).

In the present study, fathers not only engaged in activities with their children but were actively involved in childcare routines. As fathers took on a more nurturing role, this allowed them to develop a bond much earlier in their child's life. The literature has indicated that as a child's responsiveness and hence ability to partake in activities only develops later, fathers that focus on spending time through activities with their children are only able to develop a relationship later in their child's life (Barclay & Lupton, 1999). As the participants in this study opted for a more nurturing role with their child, this allowed a relational bond to develop much earlier.

Two of the participants in this study had felt that the mother's role was still more significant in parenting, which was found by Anderson (1996) as well. Despite this belief, it is significant to note that these two fathers were willing to partake in some care-giving activities albeit not many, *"but I'm not the nappies type"* (Partcipant 8). These two fathers come from more conservative and traditional religious backgrounds where their respective wives were stay-at-home mothers. Anderson (1996) has suggested that with more traditional fathers who do not partake as much in the care-giving activities with their child, they may feel some alienation from the mother-infant dyad (Anderson, 1996). These fathers also report struggling to juggle work with time for their child which may influence the extent of their involvement with their child. The level of involvement with their child may thus have contributed to their view of the mother as the main parent (Fägerskiöld, 2008).

5.2.1. Renegotiating Oedipus.

In this study, fathers did not report feeling envious of the bond between mother and infant. This may have been as fathers assumed a very involved stance on fatherhood, where they made time to spend with their baby. However, there was some indication that fathers had felt neglected as the baby took first priority in the couple's lives, *"So you have to adjust to life, because it becomes now, it becomes about the baby"* (Participant 1). During the oedipal complex little boys are presented with a triadic relationship and fathers are also presented with a triadic relationship in the transition to parenthood (Ahlborg, 2004; Diamond, 1986). In both these developmental trajectories, men tend to experience the loss of their loved object. During the oedipal complex, this loved object is the mother (Freud, 1924). Feelings of abandonment by the loved object may resurface in the transition to parenthood as the father may feel abandoned by his wife (Ahlborg, 2004; Diamond, 1986). Whilst fathers did not directly discuss these feelings of rivalry, these were evident as fathers in the study indicated that they have been cast aside with the baby, in some cases, taking their place. For Participant 5, he had moved into the spare room whilst the baby enjoyed the comfort of sleeping with its mother in the main bedroom, *"So my wife was breastfeeding so he'd sleep with her and I'd sleep in the spare room."*

Fathers also experienced the baby as imposing on their time with their spouse. "Y*ou can't spend the same amount of time as we used to... because he's always there, he's always needing something, bathing, feeding, bottle, bed, nappy change"* (Participant 5). The adjustment from dyad to triad was thus experienced as difficult as fathers felt as though they had to share the love which was once exclusively their own, *"So you have to adjust to life, because it becomes now, it becomes about the baby. So in a way you do lose some of that connection between you and your wife, because now you have to learn to share the love basically"* (Participant 1), and *"The focus has changed away from intimacy between the two of us to intimacy between the three of us"* (Participant 2).

Although fathers had recognised the change of focus from their loved object (their wife) after the arrival of their baby, the manner in which they negotiated this triadic relationship differs from the negotiation of oedipal complex in the developmental trajectory. As a little boy, the loved object is forsaken and replaced by internalised social prohibitions (Freud, 1924). In contrast, in the transition to parenthood fathers in this study did not feel abandoned by their

love object. Instead it would appear as though the marital couple together makes room for the new baby. Perhaps since fathers in this study were actively involved in their child's lives, this may have contributed to their lack of envy towards the mother-infant dyad as they too were active together with their partner in transitioning to the triadic relationship. As the transition is then embraced together, the connection between the spouses is not perceived to be completely lost. Unlike in the initial oedipal complex, fathers seem to renegotiate the triadic relationship in the transition to parenthood. In this renegotiation, the task of triadic relating is taken on by both parents where each has to adjust in order to incorporate the baby. This differs greatly from the initial oedipal phase as fathers are not passive, like the little boy in the earlier developmental trajectory. In addition in this triadic relation the father does not seem to lose his loved object.

In relation to sexuality, the fathers in this study had recognised that their own desires were subject to the needs of the baby. Participant 1 had felt that after the baby the sexual relationship in his marriage had decreased, *"and it did go down, our sexual activity, it did go down after the child. Most definitely"*. Participant 2 also recognised this and pointed out that the baby has been the result of the change, *"It's basically fallen away for now. But the focus is on him"* (Participant 2). Just as in the oedipal complex where their desires were denied as their mother chose their father (Freud, 1924), here too the baby's needs took precedence over their own sexual desires. Although fathers do not seem envious of the mother-infant relationship, they are keenly aware of their own neglect. However, such neglect is viewed as occurring from both partners, thereby the oedipal triad seems to be regarded as having an impact on both the mother and the father. This is aptly noted in the following statement by Participant 5 where he speaks of mutual neglect, *"It's different in the sense that we don't give each other the amount of time that we used to. But we also understand that you can't spend the same of amount time as we used to. So it's not strained or under pressure or anything like that. It's just something that both of us had to accept, that bringing a child into the world, you need to share your time".*

Whilst none of the fathers had directly indicated that fatherhood was linked to the virility and their perceptions of *manhood* as suggested by Morrell (2006), the expanding perceptions of intimacy as indicated by fathers in this study may be connected to their confidence in their virility concretised in the form of their child. Therefore, as fathers renegotiate Oedipus

differently, the new triadic relationship may leave them with feelings of empowerment and virility as opposed to feelings of loss and castration experienced during the first oedipal stage.

5.3 Fathers' perceptions of the marriage change after the birth of the baby

Fathers reported a distinct change in their marriage, *"Different - not different bad or good, just different"* (Participant 8). The transition to parenthood is seen as a developmental milestone for couples as the family moves from the dyad to a triad. As with any transition, changes and adjustments are evident which occur at both the individual and the relationship level (Mizāne & Bite, 2006). Participant 2 indicated that in spite of planning for their child, the adjustment was still found to be huge, "*although we knew with him coming and planning before that, it's a huge adjustment".* In the study by Fägerskiöld fathers spoke of the changes after the arrival of the child as being "unpredictable" and a "revolution" (Fägerskiöld, 2008, p.66).

Although fathers reported a difference in their marriage they did not report a distinct decline in their marital relationship following the birth of their child. This is in contrast to the dominant literature where several studies have indicated that after the child's birth, couples feel more dissatisfied with their marriage (Ahlborg, 2004; Belsky, 1985; Cowan & Cowan, 1995; Cox et al. 1999; Crohan, 1996; Figueredo et al. 2009; Glade et al. 2005; Glenn & McLanahan, 1982; Lawrence et al. 2008; Wendorf et al. 2011). However, some studies indicated that the partners did not experience a decline in marital satisfaction following the birth of their child, but they did find the marriage to be different (Fägerskiöld, 2008; Cowan & Cowan, 1997; Miller & Sollie, 1980), which was the outcome of this study too. Fathers had reported that their marital relationship had changed in that the needs of their child had to come first and as such the marital relationship was dominated by the needs of their child, *"So you have to adjust to life, because it becomes now, it becomes about the child"* (Participant 1).

As the marriage had changed and felt different for fathers they reported that changes and adjustments were necessary. Areas which required adjusting involved the amount of time they had to spend as a couple and the manner in which they communicated, *"it just required us to rearrange our time. To rearrange how we communicated, when we did things with each other and when we found time and stuff"* (Participant 1). It has been found that good problem

solving and communication skills between the partners can serve as a buffer against declining marital satisfaction (Cox et al., 1999). Therefore, recognising that an adjustment was required may have led to fathers being more optimistic about their marriage. One of the fathers described the adjustment as involving a maturity as the partners moved from a carefree state to one that required them to be more responsible.

Six of the fathers in this study had girls and only two had boys. Overall, fathers did not report a decline in marital satisfaction and this was across all participants regardless of the gender of their child. In the study by Cox et al. (1999) it was found that fathers of girls tend to report more marital dissatisfaction as their child grows older. The discrepancy in results may have occurred as the participants in the Cox et al. (1999) study were from a rural area in the United States of America and they had low levels of education. In contrast, the fathers in this study were from urban areas and most of them had tertiary qualifications. Two of the fathers that had girls tended to emphasise the father-daughter bond as being special, as they made reference to the uniqueness of the bond as well as the cliché term *daddy's little girl*. The following excerpt aptly describes this, "*a father just has this special bond with a daughter, I think. I don't have a son, but I know with my daughter, I really have a strong bond"* (Participant 3). With the movement towards more equality in gender relations, the trend may be towards placing equal value on boys and girls (Lundberg, 2005). In addition, four out of the eight fathers reported currently trying for a second child; three of these fathers had daughters and was hoping for a boy. It has been noted that parents tend to have a preference for balance in the gender of their offspring, thereby hoping for both a boy and a girl (Lundberg, 2005).

Whilst no decline in marital satisfaction was reported in this study, fathers had reported that one of the greatest challenges to the marriage involved the reduced amount of available time to spend on their own, *"It's the, being able to sit down and just talk or just spend adult time together. That's what I probably miss the most"* (Participant 5). This challenge to the marriage has been supported by the literature (Bouchard et al., 2006; Fägerskiöld, 2008).

The most significant challenge for fathers in this study thus involved the adjustment from the life of a couple with flexibility in terms of time and activities spent together which was now *"totally dominated by this little individual"* (Participant 7). Simple activities like going out to dinner or a movie needed to take the needs of the baby into consideration. The spontaneity

that couples experienced in terms of leisure activities prior to the baby had changed drastically. Leisure activities which couples partake in have been noted to decline following the birth of the baby (Claxton & Perry-Jenkins, 2008). Furthermore, sharing in leisure activities has been related to marital satisfaction (Claxton & Perry-Jenkins, 2008; West & Merriam, 1970), suggesting that a decline in marital satisfaction may be associated with the decline in leisure activities of the couple. Whilst all the fathers found that spontaneity in their leisure activities with their partner had changed, they still did not report a decline in marital satisfaction. This may have been because the state of the marriage prior to the baby's birth has been significant in providing resilience for the marriage through the transition (Claxton & Perry-Jenkins, 2008). Where the marriage was in a positive state prior to the arrival of the baby, even with reduced leisure time postnatally, the couple would be able to sustain the marriage without a drastic decline in marital satisfaction (Claxton & Perry-Jenkins, 2008).

Although fathers had found the transition challenging in certain aspects, they also reported that as the baby grew older they were provided with more space and time,

"She's become less dependent. When she was breastfed, she needed the mother, so you couldn't consider maybe leaving her with someone, or not being close to her at a certain point in time, because you never know when she needs you. But now that she's grown older, she's off breast milk etc., she's definitely become a lot more independent. Where you can also just be doing your own thing, just sitting watching TV, she's playing with her toys. She doesn't mind, she doesn't need you as frequently as she used to I guess, because she's growing up as well." (Participant 8)

As indicated by Lawrence et al. (2008) the negative changes in the couple's relationship are transient as they involve the immediate stressors apparent when their child arrives and gradually decrease as the child grows older. The children in this study were between the ages of 18-24 months which may have contributed to fathers not reporting a decline in marital satisfaction as children become autonomous as they grow older (Cox et al., 1999) and the "child's developmental status... affects the appraisal of how the child's presence influences marital relations and family life" (Belsky et al., 1983, p.568).

Fathers in the study had found that the beginning was really difficult and had required several adjustments to be made, *"The beginning is difficult. And the first three or four months, it's an*

adjustment in so many different ways" (Participant 6). However, gradually and as the child grew older and developed a routine, things improved: *"Major difference. Major major major. It does get better. People say six months, then things really start to improve. It's true"* (Participant 6).

For two of the fathers, the unique circumstances they were faced with at the time of the child's birth had a huge impact on the time they had available with their spouse. For the one participant, he had moved into a separate bedroom as he was a smoker and taking into consideration the health of the baby such separation was required. Another father had unique work and studying circumstances which led to him and his spouse having little time for each other as she slept in the evenings and he slept during the day. Specifically for these couples the child's growing autonomy had a major impact on their marital relationship. As the child became accustomed to sleeping through the night and moving into his or her separate bed the couple was allowed to reunite and gain more time together as a couple.

Although the baby had impacted drastically on the amount of time couples had to spend with each other, the baby was seen by some fathers as strengthening their relationship with their spouse. The baby was regarded as a concrete symbol that connected the couple for life, *"I think it definitely strengthens your bond. ... because now you have something linking you two, not just a piece of paper. It's now something physical and something you can quantify and see in front of you every day. And I think that gets you closer together"* (Participant 3). This finding is supported by previous studies (Fägerskiöld, 2008; Miller & Sollie, 1980).

In contrast, one of the fathers had found that the addition of the baby had reduced his connection with his wife as the love in the relationship was no longer exclusively between the couple but now had to be shared between three people, *"in a way you do lose some of that connection between you and your wife, because now you have to learn to share the love basically"* (Participant 1). Participant 1 had described himself as a hands-on father who had spent a lot of time exclusively with his baby and often performed caregiving activities with his child. However, this involvement did not completely buffer against the negative aspects of the transition.

In this regard intimacy may play a part in attaining closeness and a connection between the spouses, as Participant 1 had been the only father to report a decline in sexual satisfaction

postpartum. He spoke of the changes in sexual intimacy in the relationship as, *"it started to pick up. But, I don't think it will ever be the same again".*

5.4 Participants' experience of sexual intimacy in the relationship broadens

In this study, all of the fathers had indicated that sexual and physical intimacy played an important role in their understanding of intimacy, *"It's priority number one, you need it ... you have to make sure, otherwise you are just two people living under the same roof looking after a kid"* (Participant 4). Intimacy has been found to be a significant aspect of a marriage (Boden et al., 2010; Erikson, 1963) that influences couples' perceptions of happiness and satisfaction within the marriage (Ammons & Stinnet, 1980; Hook et al. 2003; Greef & Malherbe, 2001; Olson & Olson, 2000; Terman, 1938). Previous studies have confirmed that men tend to approach intimacy with a strong emphasis on sexual intimacy (Clarke & Hatfield, 1989; Hatfield et al. 1988; Kohler-Riessman, 1990; Peplau, 1983; Ridley, 1993), which was indicated in this study as well: *"we'll take the physical side as a given"* (Participant 6). The significance of sexual activity for men has further been noted in that men tend to engage more often in sexual relationships and have an increased desire for intercourse as opposed to women (Ard, 1977; Baumeister, Catanese & Vohs, 2001; Johannes & Avis, 1997; McCabe, 1987). Fathers' perceptions of intimacy indicated that they held a broad view of what intimacy encompassed: "*Understanding, physical connection, emotional connection, spiritual connection, everything, and being able to talk to your partner"* (Participant 6). Fathers' understanding of intimacy in this study was thus not limited to sexual intimacy and encompassed other facets of emotional sharing too. These included spending time together in various activities and feelings of connection. This broadening perspective of intimacy was also reported in the study by Patrick and Beckenbach, (1999).

All of the fathers had reported a decline in sexual intimacy after the birth of the baby: *"It has decreased drastically"* (Participant 5). This finding was also reported by the participants in the study by Ahlborg (2006). In this regard, some of the fathers had attempted to substitute different forms of intimacy in order to attain closeness without sexuality *"It didn't have to be purely sexual all the way sort of thing, you know"*. Raphael-Leff (1991) had suggested that other forms of intimacy could be used such as cuddling or kissing. However, in previous studies there have been contradicting findings with regard to the use of compensatory forms of intimacy postpartum. Ahlborg (2004) reported sensuality being substituted for sexuality in

his sample whilst Raphael-Leff (1991) had found a reduction in both sexuality and sensuality after the birth of the baby. Perhaps as fathers' perceptions of intimacy broaden, as indicated in this study, they would be more willing to engage in alternate forms of sexual intimacy. Fathers also indicated a more realistic perspective on adjustments that would be required postpartum and changes in sexual intimacy were then anticipated: *"I didn't expect anything else other than that. So I guess it was (reduced) initially but understandably so"* (Participant 8). In this regard Miller and Sollie (1980) suggest that realistic expectations of the changes required in the transition may further buffer the negative effects of the transition to parenthood on the marital relationship.

In this study, two fathers reported an improvement in their sexual and intimate relationship with their wife. For one of the fathers, the baby had renewed their affection as he felt that prior to the birth of the baby the sexual relationship had already reached a slump, *"I think after that honeymoon period, some sort of lull that you go through but I think you start taking each other for granted for a bit ... But I think after the baby, I think for some reason it improved"* (Participant 3). Research has suggested phases of intimacy with the transition to parenthood often occurring in the "hesitation phase" where maintaining marital satisfaction is a struggle as partners no longer overlook each other's flaws (Ahlborg, 2004). In this regard, as Participant 3 had been married for six years, perhaps a natural decline in sexuality within the marriage occurs during this phase. The birth of the baby may then introduce a new and exciting element to the marital relationship, thereby influencing perceptions of intimacy positively and allowing the couple to progress into a different phase of intimacy.

Participant 4 had also reported an improvement in his sexual relationship which was related to his feelings of an increased bond with his wife. Miller and Sollie (1980) had found a renewed relationship between the couple as the baby had strengthened their relationship with increasing feelings of unity and cohesion. This movement of perceptions of intimacy in a positive direction is in direct contrast to Ahlborg's (2004) study which indicates a continued mode of decline in sexuality between partners for several months postpartum. However, Mizāne and Bite (2006) showed increased partner satisfaction in men with pregnant partners, suggesting that there are some positive responses to sexuality during this period.

The most challenging aspect for fathers with regard to their sexual intimacy was the lack of spontaneity which emerged after the birth of their baby. In this regard fathers felt that

spontaneity within their sexual relationship was no longer possible as the baby dictated their free time: *"You see after, to be spontaneous was very difficult because you have to be spontaneous on a clock"* (Participant 1). Whilst declines in marital satisfaction were not reported, changes in the marital relationship were noted, one of these encompassed the constraints on sexual intimacy (Fägerskiöld, 2008). Although fathers had indicated that the baby had somewhat intruded on their free time and hence the spontaneity of their sexual relationship, they were not expressly jealous of the time spent between mother and baby. This is in contrast to the findings from previous studies where such jealousy was evident (Anderson, 1996; Raphael-Leff, 1991). This may have been influenced by the time that the fathers had created for themselves in relation to their infant, thereby resulting in fathers being more satisfied in the marital relationship. Cowan and Cowan (1997) also suggest that fathers that are more involved with their children tend to be more satisfied with their marital relationship. This lack of jealousy may have further been influenced by fathers' renegotiation of oedipus where the triadic relationship was tackled as a couple with each member of the couple having to adjust and make room for the baby. In this regard it is not just the father that has to give up his time alone with his spouse but similarly the mother is seen as having to give up her time with her spouse so that the couple is able to accommodate their child. Furthermore, as both spouses spend time in a dyadic relationship with their child, the basis of envy would then seem to fall away.

The strains on intimacy within the marriage are seen as transient as fathers report a significant increase in their sexual relationship with their spouse as the baby grows older, *"It makes a big difference as the child gets older. Major major major. It does get better"* (Participant 6). The children in this study ranged between the ages of 18-24 months, which may have impacted on the level of stressors placed on the marital relationship postpartum. Cox et al. (1989) found that in the second year of a child's life, the relationship dissatisfaction reduces slightly as the maximum number of adjustments required occurs in the first few months postpartum. As such, relationships do improve as the baby grows older.

Fathers that had access to support systems had indicated that this had allowed them to spend time exclusively as a couple. Being afforded this time and space was something fathers were grateful for, *"But thankfully with us we always try and make time for us and we have good social support like our families help us out... that would give us that time again, you know, to be husband and wife again"* (Participant 1). Support systems have been seen to buffer the

strains placed on marriage post-partum (Glade et al., 2005; Miller & Sollie, 1980). Fathers that did not have access to support systems also indicated the significance of these systems in promoting a healthy relationship between the married couple. In the following excerpt, Participant 7 speaks of the value of having support systems, as he and his wife did not have immediate access to these systems, they were unable to benefit by having time alone, away from the baby, *"We do need quality time. We need to spend us time as well. For the sake of the relationship. Not that it's in any jeopardy. But I think it's healthy".*

Significantly it has been indicated that in the transition to parenthood some couples tend to focus their energies on the parental role resulting in the neglect of the partner or lover role (Cowan & Cowan, 1992). Whilst this focus applies mainly to mothers (Glade et al., 2005) the fathers in this study indicated that the use of support systems enabled the couple to place some focus on nurturing the partner or lover role as well.

5.5 Father's perceptions of their wife's desirability after the birth of the baby

All of the fathers had expressed the same or increased levels of desirability towards their wife compared to prior the birth of the baby. Mizāne and Bite (2006) indicated that men tend to feel more satisfied with their partners and their relationship when their partner is pregnant. They suggest that this may be due to the additional care which partners place on each other during this period, especially when the pregnancy was planned. In this study satisfaction with and desirability of partners continued postpartum. For two of the fathers this desirability was increased, *"As in on a scale from 1 to 10, from before to now, 12 out of 10"* (Participant 4). This increased desirability may have been as a result of the baby deepening the affection and companionship between the couple, who now shared a common goal in terms of raising their baby (Ahlborg, 2004). In addition, Mickelson and Joeseph (2012) found that both partners tend to report greater satisfaction with their partners' bodies, even greater than their partners perceived satisfaction. As intimacy has been related to body satisfaction (Hoyt & Kogan, 2001; Mickelson & Joeseph, 2012, Seal et al., 2009), in this study fathers' desirability of their spouses may have been influenced by their perceptions of their sexual relationship which in this study was dominantly referred to as having been adjusted to and not negative.

In relation to their wife's desirability, most fathers commented on the ability of their wife to attain and maintain a good shape and as such desirability focused on the aesthetics of their spouse. In a study by Hames (1980), 33% of men participating in the study had found their wife more attractive once she had regained her slim weight. From an evolutionary perspective men tend to place value on females that embody health with regard to weight, as this would then imply fertility. It has been shown that men that seek short-term relationships tend to prioritise the weight and attractiveness of their partner more than males in search of long-term relationships (Maner et al., 2003; Maner, Galliot, & DeWall, 2007). However, Swami, Miller, Furnham, Penke, Tovée, (2008) found that the difference between restricted (seeking long-term committed relationships) and unrestricted (seeking short-term uncommitted relationships) males were small, suggesting that both types of males tend to seek mates that are slim and signify health and fertility. It is however significant to note that cultural variations do occur (Swami et al. 2008). In spite of cultural variations the impact of globalisation has also resulted in the once Western concept of attractiveness embodying a slim female (Tiggerman, 2004) as increasingly becoming a global trend.

All of the men in this study were present for the birth and whilst most of the births were C-sections, presence during birth did not seem to interfere with feelings of desirability. In contrast Odent (1999) suggests that presence during the birth whilst increasing the comradeship between partners reduces their sexual desirability. However, this claim has not been substantiated by research. Whilst there is limited research exploring the effects of the presence of the father at child birth on sexual desirability, the sexual relationship between spouses was found to resume sooner when the birth process was a C-section (Hyde, DeLamater, Plant & Byrd, 1996). As no impact on desirability was found between the C-section and natural delivery, the findings in this study may thus have been influenced by the extent of time that had passed since the birth as the healing process for the wife was long over. *"I probably don't even remember the detail of the childbirth other than the baby herself"* (Participant 8). Sexual intimacy within the relationship was also increasing, allowing feelings of desirability to be acted upon, which may have further increased such desirability reported by fathers.

In spite of this emphasis on aesthetics, two of the fathers indicated a greater respect for their wife after the birth of their baby: *"She is a much stronger person than I thought she was. She really endured a very difficult period and she came through it. I respect her a lot more for the*

amount of pain and everything she had to go through" (Participant 3), and *"I probably appreciate her a lot more after seeing what she goes through"* (Participant 8). An increased respect for their spouse has been found, especially when fathers are present during childbirth (Chandler & Field, 2010). It can thus be said that whilst aesthetic desirability is very significant for fathers, some fathers develop an added respect post-partum after witnessing their wife during childbirth. Interestingly fathers that had reported an increased respect for their wife, had witnessed the birth of their child by natural delivery.

CHAPTER SIX
CONCLUSION

The transition to parenthood has been known to be a significant milestone for the couple which has an impact on the marital relationship. In the literature the impact of the transition on the marital relationship has been dominantly negative (Ahlborg, 2004; Belsky, 1985; Cowan & Cowan, 1995; Cox et al. 1999; Crohan, 1996). However, a few studies have indicated no marital decline in the transition to parenthood (Fägerskiöld, 2008; Cowan & Cowan, 1997; Miller & Sollie, 1980) which is in line with the findings of this study. This study contributed to the current body of literature on the transition to parenthood by focussing on a South African population and giving preference to the experiences of fathers. The research explored fathers' experiences of fatherhood as well as their understanding of marital intimacy, specifically exploring how the birth experience and presence of the baby influences fathers' perceptions of their wife's desirability, of marital intimacy and how sexual intimacy fits into the relationship following the birth of the baby. Fathers were thrilled and excited at the onset of fatherhood. However, they simultaneously felt an overwhelming sense of responsibility which was not limited to but included the financial care of their child. This responsibility also extended to feelings of protectiveness and care for their child. Whilst fathers indicated no decline in marital satisfaction, there was a distinct decline in sexual intimacy. Fathers seemed to compensate by broadening their perceptions of intimacy and suggested that spending time alone with their wife was equally important. Fathers also seemed to have more realistic expectations of fatherhood and its challenges, which may have caused them to anticipate changes in their sexual relationship. Fathers indicated that they have been planning and preparing for their baby and were involved fathers, all of which may have buffered against the negative impact of the transition to parenthood on the marital relationship (Hjelmstedt & Collins, 2008; Miller & Sollie, 1980).

Whilst Morell (2006) suggested that in South Africa fathers do not seem that interested in playing an active paternal role, the results from the study indicated that South African fathers are becoming more involved in their parental role. This may be due to globalisation and the decreasing gap between various cultures. Fathers tend to create an individual space between them and their baby which is in direct contrast to the psychodynamic theories of Freud, Klein and Winnicott which discuss the father as involved in a triadic relationship with his child and hence relating only through the mother. In this regard psychodynamic theories would need to

take into account such dyadic relating between father and infant as these theories do not provide for the developmental significance of such a relationship. The theoretical implications of such revisions are potentially enormous and therefore require a lot more research into the dyadic relationship between fathers and their children so as to unpack the ways in which this may influence psychological development.

Furthermore, as the sample in this study was restricted and the population not diverse enough to be representative of the South African population, further research in this area is required with much larger samples in order to ascertain whether fathers are making this exclusive space between them and their infant and whether this dyadic relationship between father and infant occurs universally.

6.1 Limitations of the study

The sample size for this study was small but considering the qualitative nature of the study, a sample of nine would be sufficient for the purposes of this study. The use of a non-probability sampling strategy would also impact on the findings as extraneous variables cannot be ruled out.

The sample consisted of both Caucasian and Indian fathers. However, this is not a representative sample of the South African population. In addition, most of the fathers were from middle to upper socioeconomic backgrounds, resulting in the outcomes not being representative overall of the South African population in all its diversity.

Participants were volunteers and it is suggested that the population of volunteers may have certain characteristics that differ from the general population, further reducing the generalisability of the findings.

A limitation of the interview method was that the researcher was a stranger to the participants and the interview engaged with a sensitive topic. As such participants may not have felt comfortable enough to converse openly on the topic and therefore a study in which participants can remain anonymous may provide richer data.

6.2 Recommendations

As the research focussing on the transition to parenthood from the perspective of the father is limited with regards to the South African population, future studies in this area would benefit in exploring this population.

There is also a limited body of research exploring fathers' perceptions of the desirability of their partner after the birth of their baby - this should be further explored.

This study was limited in that the participants were not representative of a South African sample. Future studies would therefore need to be conducted, taking into consideration the various racial, cultural and socioeconomic differences amongst the South African population. These differences may have an impact on how fathers view their fatherhood and the role they play in relation to both their spouse and child.

The results from the study also suggest that having witnessed the childbirth, fathers' feelings of respect towards their spouse may have increased. As this was not reported by all fathers and there is limited research in this area, future studies may be able to determine the reasons for the development or lack of development of these feelings.

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APPENDIX A

UNIVERSITY OF THE WITWATERSRAND, JOHANNESBURG

HUMAN RESEARCH ETHICS COMMITTEE (SCHOOL OF HUMAN & COMMUNITY DEVELOPMENT

CLEARANCE CERTIFICATE	**PROTOCOL NUMBER: MCLIN/12/004 IH**
PROJECT TITLE:	The father's perceptions of intimacy in the marital relationship after the birth of the first child.
INVESTIGATORS	Omar Fatima
DEPARTMENT	Psychology
DATE CONSIDERED	27/03/12
DECISION OF COMMITTEE*	Approved

This ethical clearance is valid for 2 years and may be renewed upon application

DATE: 17 May 2012

CHAIRPERSON K. Cockcroft
(Professor K. Cockcroft)

cc Supervisor:

Renate Gericke
Psychology

DECLARATION OF INVESTIGATOR (S)

To be completed in duplicate and **one copy** returned to the Secretary, Room 100015, 10th floor, Senate House, University.

I/we fully understand the conditions under which I am/we are authorized to carry out the abovementioned research and I/we guarantee to ensure compliance with these conditions. Should any departure be contemplated from the research procedure, as approved, I/we undertake to submit a revised protocol to the Committee.

This ethical clearance will expire on 31 December 2014

PLEASE QUOTE THE PROTOCOL NUMBER IN ALL ENQUIRIES

Appendix B: Participant Information Sheet

UNIVERSITY OF THE WITWATERSRAND, JOHANNESBURG

School of Human and Community Development

Private Bag 3, Wits 2050, Johannesburg, South Africa

Tel: (011) 717-4500 Fax: (011) 717-4559

Dear Sir

My name is Fatima Omar and I am conducting a research project for the purposes of obtaining my Masters degree in Clinical Psychology at the University of the Witwatersrand. My area of interest is an exploration of father's perceptions of intimacy and marital satisfaction after the birth of the first child. It is hoped that this research will shed light on the relationship between intimacy, marriage and parenting. I would like to invite you to participate in this study.

Participation will involve a one on one interview to be conducted by me. I will conduct the interview at a time and place suitable to you. **The interview will last approximately one hour** and it will be recorded with your permission. The questions I will be asking will centre on your emotions and feelings regarding your marital and intimate relationship. If you feel uncomfortable with any of the questions you have, the right to refuse to respond or to withdraw from the study.

Participation in the study is voluntary. No person will be advantaged or disadvantaged in any way by choosing to participate or not in the study. All responses will be regarded as confidential and only be viewed by myself and my supervisor, although your identity will be protected from all third parties. No information that could identify you in any way will be included in the research report. The interview material (tapes and transcripts) will be kept safe in a locked filing cabinet for 2 years should publications arise or 5 should none arise and will be destroyed thereafter. In addition, on writing up the research report all participants will be referred to by fictional names so as to ensure confidentiality and any identifying information will be excluded.

Should you consent to participate please complete the two forms that follow. If you have any further queries regarding the study please feel free to contact me or my supervisor, Renate Gericke, these contact details are provided below. Should you require feedback regarding the results of the study, these will be made available to you upon request.

Your participation in the study will be greatly appreciated. This research will contribute to a better understanding of male perspectives of intimacy and the marital relationship and how it is influenced by the birth of the first child.

Thanking You

Fatima Omar
(Researcher)
fatima.b.omar@gmail.com
0823165169

Renate Gericke
(Research Supervisor)
gericke.renate@wits.ac.za
(011) 717 4555

Appendix C: Facilities to obtain counselling

UNIVERSITY OF THE WITWATERSRAND, JOHANNESBURG

School of Human and Community Development

Private Bag 3, Wits 2050, Johannesburg, South Africa

Tel: (011) 717-4500 Fax: (011) 717-4559

Dear Participant

Thank you for taking part in this research project. Your contribution is greatly appreciated. Should you wish to view this research, a copy will be kept at the University of the Witwatersrand in the Psychology Department. You may contact the researcher if you would like a copy to be made available to you.

In addition if you would like to speak to a trained mental health professional, please contact one of the following organizations:

Wits Emthomjeni Centre
011 717 4513

Family Life Centre
011 833 2057

Lifeline
086 132 2322

Fatima Omar
(Researcher)
fatima.b.omar@gmail.com
0823165169

Renate Gericke
(Research Supervisor)
gericke.renate@wits.ac.za
(011) 717 4555

Appendix D: Participants consent form (participation)

UNIVERSITY OF THE WITWATERSRAND, JOHANNESBURG

School of Human and Community Development

Private Bag 3, Wits 2050, Johannesburg, South Africa

Tel: (011) 717-4500 Fax: (011) 717-4559

I _____ hereby give consent to Fatima Omar to conduct an interview with me for her study "Father's perceptions of intimacy and the marital relationship after the birth of the first child". I am fully aware of and understand the following:

- My participation in the study is completely voluntary
- I have the right to withdraw at any time during the course of the interview
- All information obtained from the interview will remain confidential as all identifying features will removed from the data
- I have the right to refuse to answer any questions that I am not comfortable with
- Data will be kept in a safe place and will only be accessed by the researcher and her supervisor
- The results may involve direct quotes from your responses. However these will remain completely anonymous.
- This research project may be published in an academic journal
- If you wish to access the results from the study, the researcher can be contacted and will make these results available to you upon completion of the study.
- I am informed as to the aims and implications of the research project
- I understand that there are no risks or benefits involved with participation

Signature: _____ Date: _____

Appendix E: Participants consent form (recording)



UNIVERSITY OF THE WITWATERSRAND, JOHANNESBURG

School of Human and Community Development

Private Bag 3, Wits 2050, Johannesburg, South Africa

Tel: (011) 717-4500 Fax: (011) 717-4559

I _____ give consent to my interview with Fatima Omar on the "Father's perceptions of intimacy and the marital relationship after the birth of the first child" being tape-recorded. I understand that:

- All tapes and transcripts will be processed only by the researcher and her supervisor
- All recordings will be destroyed on completion of the research project
- No identifying information will be in the transcripts or research project and the participant will be referred to by a fictitious name throughout.
- Data will be kept in a safe place and will only be accessed by the researcher and her supervisor
- The results may involve direct quotes from your responses. However these will remain completely anonymous.

Signature: _____ Date: _____

Appendix F: Interview Schedule

Before commencing the interview, the researcher will introduce herself, thank the participant for volunteering to be a part of the research and ensure that the participant is comfortable.

1.) How long have you been married for?
2.) How old is your baby now?
3.) Is it a boy or a girl?
4.) How do you feel about the baby?
5.) How do you feel about being a father?
6.) How would you describe yourself as a father?
7.) What challenges have you been presented with in your marital relationship post birth of the baby?
8.) What does intimacy mean to you in your relationship?
9.) How do you perceive your marital relationship post birth of your baby?
    - Was it any different before the baby arrived?
10.) How do you perceive your sexual relationship post birth of the baby?
    - Was it any different before the baby arrived?
    - How does the presence of the baby impact on your intimate relationship, if at all?
11.) How did the birth experience, if at all, impact your sexual relationship?
    - Where were you during the birth?
    - What kind of birth experience did you have?
12.) How desirable do you find your partner now?
    - In what way is this different, if at all, to how you viewed her prior to the birth of your child?