Much has been written about motherhood and transition to parenting from various perspectives such as health, sociological and psychological. Professionals (in all their guises) write about motherhood and the challenges of parenting adaptation, as do other experts – including mothers themselves. I have previously written about women’s recovery following childbirth and how, in undertaking research, I have found that the postnatal period is a starting point for many mothers (Wray 2006, 2009). In other words, it is the beginning of being a mother and parent – certainly not the endpoint.

Despite the notion that recovery from birth is located within time parameters, traditionally six weeks (puerperium) (WHO 1998, Marchant 2003), for many mothers the reality is that it takes much longer than this. At varying points over time women will say, ‘I am feeling like my old self again’ and typically this comment is articulated both before and after the magic six weeks, but primarily it is after. In this article I seek to provide some insights into how women self care and manage their own health and wellbeing by having some ‘me time’ and ‘getting out and about’ after childbirth.

**Self care**

Within this trajectory of recovery, women experience ‘self care’ and manage their own health and wellbeing as they strive to get back to normal (whatever that is). Troy and Dalgas-Pelish (2003), in looking at postnatal fatigue, found that, for many mothers, self care prevailed over time. Certainly in my own study I found that learning to manage one’s own health and wellbeing alongside becoming a mother is no easy task. Indeed, it can be a lonely and challenging process from both a physical and emotional perspective. Of interest has been the discovery that new mothers crave to be able to go out and about as soon as possible after childbirth, more so having had a hospital stay irrespective of the type of birth (Wray 2009, 2010). Women can be desperate to go out and about as their confinement has the potential to impact on their personal freedoms. As one mother said:

> I was confined to the house and I felt quite cooped up.

The sentiment of caring for the self through ‘getting out and about’ has much appeal and can facilitate recovery in the early days and weeks. A real sense of wellbeing can be achieved in ‘being able to get out and do things’. Such comments have resonated with community midwives who, on the one hand, can be critical of women when on arriving for a home visit find there is no one in; yet on the other hand there is an understanding among midwives that expecting women to stay in can be most challenging.

**Independence**

The notion of being cooped up, for some women, connected with their loss of independence. Clearly there are physical gains from being able to get out and about but the personal sense of triumph and control associated with doing so can be equally beneficial for new mothers. I found that mothers really appreciated and took pleasure in going out without their babies; as one mother said, ‘It’s nice to get out of the house and not be with the baby’. That said, many told me how they felt weird or guilty going out without their babies and thus would frequently phone home to check how they were. Importantly, women can feel relieved from the cooped-up feeling by going out with their baby, too.

**Learning to manage one’s own health and wellbeing alongside becoming a mother is no easy task. Indeed, it can be a lonely and challenging process from both a physical and emotional perspective**

‘Me time’

A feature of getting out and about connected to what was often termed ‘me time’. So, in fact, it might be that women...
craved some quiet time alone or some private time to consider the self in some way. Having some time out away from one’s baby was a desire of many women, as having some time off helped in feeling well and achieving a good recovery.

As one mother said:
‘It’s nice sometimes to get a break. It’s nice to feel that you don’t have to do it all the time, ’cause I went out with my sister and a friend the other night, so that was nice to sort of just go out and forget for an hour or so that you’ve got children.’

Intriguingly, I found that in the first few weeks, and months for some women, permission to consider the self was kept rather private and contained, only to be shared with close family and/or friends who could be trusted. A fear lay in being found to be selfish, a non-devoted mother or thoughtless. This, to me, was a strong indication of the nature of privacy in relation to the subject of the self. Women made efforts to protect against public opinion concerning their desires to go out alone. As such, there existed a real tension between the needs and wants of the self in having some personal space against being judged as selfish. Furthermore, as many of the women involved in my study (Wray 2010) had invested much time and thought in taking responsibility for their own wellbeing, such a tension added to their decision making.

Conclusion
In summary, it is important that we consider carefully our judgements and views about how mothers recover after birth. I would argue that feeling cooped up and trapped in one’s own home is not conducive to making a good recovery. A desire of many new mothers in the early days and weeks is to be organised, dressed and able to go out, with or without their baby. This is a basic aspiration and need during the recuperation event such as childbirth. Mothers should feel supported in their quest to get out and about; we should not be critical but celebrate their achievement. TPM

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References