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## **A bond with a child during pregnancy and the self-efficacy of mothers**

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#### Abstract

The basic direction of monitoring and analyzing the process of procreation, getting pregnant, its course, possible complications and delivery is a medical, biological perspective. Psychology has entered medical areas practically with all its basic research directions. Many publications from the fringe of psychology and obstetrics draw attention to the magnitude of possible factors affecting the quality of the relationship of the mother and her newborn child. Preliminary conclusions were based on a pilot study - it included 43 pregnant women. The study was conducted among patients in hospitals, specialist counseling centers and gynecological surgeries, and clients of birthing class. The respondents filled out the following questionnaires: Author's sociometric-medical survey, Maternal Fetal Attachment Scale (Cranley); General Self-Efficacy Scale (Schwarzer and Jerusalem). Statistical analysis (Pearson correlation coefficient) of selected variables showed statistically insignificant ( $p > 0.05$ ) correlations from very weak to high. A high correlation occurs between the week of pregnancy and a sense of bond with the child ( $r = 0.792$ ) and a week of pregnancy and a sense of self-generalized effectiveness ( $r = 0.847$ ).

#### Introduction

The basic direction of monitoring and analyzing the process of procreation, getting pregnant, its course, possible complications and delivery is a medical, biological perspective. E. Mazurek notes that the course of human life is being made more medicalized. A delivery can be planned and carried out in accordance with the doctors' vision and recommendations, regardless of the forces of nature. However, thanks to the achievements of medicine, it is now also possible to observe this area of human life from the point of view of sociology and psychology. [1, 2, 3]

#### Purpose

The basic social aspect are the views, attitudes and rituals related to procreation shaped by the environment, but also enter into topics that are controversial, and as a result of the functioning

of the entire society - such as abortion, in vitro fertilization. Psychology has entered medical areas practically with all its basic research directions; issues related to the pathology of procreation, including postpartum depression, and post-traumatic stress disorder were addressed. According to some researchers, for several years now we can talk about a new field of science combining medicine (gynecology and obstetrics) with psychology: the psychology of procreation. Many publications from the fringe of psychology and obstetrics draw attention to the magnitude of possible factors affecting the quality of the relationship of the mother and her newborn child - and increasingly also to this relationship still during pregnancy. The psychological life of future parents is increasingly an area of interest for researchers, since the solution of possible psychological problems already during pregnancy can ensure proper relationships in the family and the appropriate style of child attachment. [4, 5, 6, 7, 8, 9, 10]

#### Material and methods

Preliminary conclusions were based on a pilot study - it included 43 pregnant women. The study was conducted among patients in hospitals, specialist counseling centers and gynecological surgeries, and clients of birthing class. The respondents filled out the following questionnaires:

1. Author's sociometric-medical survey (questions about mother's age, mother's education, information whether she is currently in a relationship, the week of pregnancy, the course of pregnancy, information on additional health problems of the mother during pregnancy);

2. Maternal Fetal Attachment Scale (Cranley);

It is used to test the representation of the mother's relationship with her unborn child.

It allows you to determine the mother-child relationship in five dimensions:

- taking a parental role,
- treating a child as a separate entity,
- making interaction with the child,
- assigning characteristics to it,
- subordination to the interests of the child.

3. General Self-Efficacy Scale (Schwarzer and Jerusalem);

It contains 18 statements and captures beliefs about generalized expectations in three dimensions of the location of health control, that is:

- internal - control over your own health depends on me
- the influence of others - own health is the result of the impact of others, especially medical personnel
- accident - the condition determines the accident or other external circumstances

This scale finds application in programs promoting health, in prophylactic interactions.

#### Results

Initial statistical analysis (Pearson correlation coefficient) of selected variables showed statistically insignificant ( $p > 0.05$ ) correlations from very weak to high.

A high correlation occurs between the week of pregnancy and a sense of bond with the child ( $r = 0.792$ ) and a week of pregnancy and a sense of self-generalized effectiveness ( $r = 0.847$ ).

The studied group allows for preliminary statistical analyzes, however, it is small - hence the statistical uncertainty of the observed correlations. It is possible to see a trend in the continuation of research - the more advanced the pregnancy, the stronger the bond with the child and the greater the sense of one's generalized effectiveness.

Table 1. Analysis of Pearson's correlation between the variables tested.

		<b>Week of pregnancy</b>	<b>Sense of self-generalized effectiveness</b>
<b>Week of pregnancy</b> correlation (bilateral)	Pearson's significance N	1 43	,030 ,847 43
<b>Sense of self-generalized Effectiveness</b> correlation (bilateral)	Pearson's significance N	,030 ,847 43	1 43
		<b>Week of pregnancy</b>	<b>Sense of bond with the child</b>
<b>Sense of bond with the child</b> correlation (bilateral)	Pearson's significance N	1 43	,041 ,792 43
<b>Week of pregnancy</b> correlation (bilateral)	Pearson's significance N	,041 ,792 43	1 43

Source: own study.

### Discussion

The research is to point out the possible directions of work for specialists with mothers - psychologists, but also hospital staff. Thanks to the observation of the attitudes of pregnant women towards children, as well as the sense of their own effectiveness and location of health control, a team of specialists will be able to provide the largest possible and individually tailored support. [11, 12, 13]

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