The Couple's Experience of Intimacy during Pregnancy

Lucienne Perera Vega

Institute of Family Therapy Malta

A dissertation submitted in partial fulfilment of the requirements for the

Masters in Systemic Psychotherapy

Supervisor: Ms Geraldine Ellul Bonici

September 2021

1

Declaration

I, the undersigned, hereby declare that the work in this dissertation titled 'A study of

Grieving Parents' in partial fulfilment of the Master in Systemic Family Psychotherapy, was

carried out by myself. Appropriate citation has been included when referring to studies by other

authors.

Lucienne Perera Vega

ID No: 354582

Acknowledgments

First and foremost, I would like to take the opportunity to show my deepest gratitude and appreciation to my tutor Ms Geraldine Ellul Bonici for her encouragement, patience and valuable guidance which was instrumental throughout the whole process.

My appreciation also goes to Dr Charlie Azzopardi and Ms Karen Bishop for their constant understanding and compassion not only throughout the research process but throughout the four years of my studies. Thank you for believing in me and for your constant presence.

A special thanks goes to my loves ones, my husband who has encouraged me and stood by my side throughout my academic journey and my children Julia and Alicia who notwithstanding their young age they showed a lot of patience and supported me through their unconditional love. I would also like to thank my parents and sisters in particular Anne Marie who supported me throughout these four years.

I would also like to extend my gratitude to my work colleagues and friends, Zvetlana, Maria, Amy and Mariella for their kindness and support throughout the research process. Thank you for always encouraging and believing in me and for standing by myside even through the last few weeks of the research and for sharing valuable insight.

Last but not least I would like to thank all participants who made this research project possible and for trusting me with their intimate experiences.

Abstract

Background: Expectation and the birth of a child are considered as a major life transition in a couple's life. Local research has predominantly focused on the couple's relationship prior pregnancy and following birth. The expectation of a child already marks the adaptation which the couple start facing and marks different aspects in their life which effect how the couple engages together.

Aim: In this study I am interested in exploring how the couples experience intimacy during pregnancy. How does the couple's sense of closeness change and how does the expression of affection, and love adapt during the gestational period? This research focuses on understanding the experience of Maltese couples who experienced pregnancy within the last two years. Hence, I am interested in understanding how their intimacy evolved throughout their transition and what supported them throughout the process.

Method: I conducted this study through Interpretative Phenomenological Analysis through five in depth interviews with couples.

Results: The study produced five superordinate themes which were; Defining intimacy; Intimacy as a process; Contributing factors for intimacy; A containing presence and Shared responsibility. A detailed description of the superordinate themes and the respective subordinate themes were presented.

Conclusion: Results show that during pregnancy couples experienced an evolving process of their intimate connection which matured and deepened throughout the transition.

Keywords: Couples; intimacy; pregnancy; attachment; relationship

Table of Contents

Declaration	1
Acknowledgments	2
Abstract	3
Chapter 1: Introduction	8
1.1 Preamble	8
1.2 Research question	9
1.3 Aim of this study	9
1.4 Area of the study	9
1.5 Research rationale	10
1.6 Personal position	11
1.7 The conceptual frameworks	12
1.8 Systemic conceptualisation	12
1.9 Social Constructionism	14
1.10 Attachment theory	16
1.11 Definition of terms	16
Chapter 2: Literature Review	17
2.1 Introduction	17
2.2 Systemic perspective of romantic relationships	17
2.3 Attachment in Romantic couple relationships	19
2.4 Intimacy and gender differences	20
2.5 Constructs of romantic relationships	21
2.6 Existing concepts of Intimacy	22
2.7 Intimate relationships and love	23
2.8 The experience of pregnancy	24
2.9 Sexual intimacy and pregnancy	26
2.10 Romantic relationships in Malta	28
2.11 Conclusion	29
Chapter 3: Methodology	30
3.1 Introduction	30
3.2 A qualitative approach	30
3.3 Interpretative Phenomenological Analysis	32
3.4 Research Setting	

3.5 Ethical considerations	34
3.6 Confidentiality and anonymity of participants	35
3.7 Research design	36
3.7.1 Sample selection	36
3.7.2 Participants	37
3.7.3 Recruitment Criterion	37
3.8 Collection of data	38
3.9 Interview procedure	39
3.10 Data analysis	40
3.11 Translation of transcripts	41
3.12 Validity of data	41
3.13 Reflexivity	43
3.14 Conclusion	44
Chapter 4: Findings	45
4.0 Introduction	45
4.1 Participants	45
4.2 Defining intimacy	47
4.2.1 Physical	47
4.2.2 Emotional	48
4.2.3 Communication	49
4.2.4 Vulnerability	51
4.3 Intimacy as a process	52
4.3.1 The couple's intimacy before pregnancy	52
4.3.2 The couple's intimacy during pregnancy	54
4.3.3 Intimacy as an investment in the relationship	59
4.3.4 Time and space for intimacy	60
4.4 Contributing factors for intimacy	62
4.4.1 Attunement	63
4.4.2 Sexual satisfaction	64
4.4.3 Partner support	65
4.4.4 Sense of security	65
4.4.5 Knowledge	67
4.5 A containing presence	67

4.5.1 Expressing their needs	68
4.5.2 Attending to their needs	69
4.5.3 External factors	70
4.5 Shared responsibility	71
4.6.1 Husband/father's role	71
4.6.2 Wife/mother's role	73
4.6.3 Couple/parent's role	74
4.7 Conclusion	76
Chapter 5: Interpretation and discussion of findings	77
5.0 Introduction	77
5.1 Defining Intimacy	77
5.2 Intimacy as a process	83
5.3 Contributing factors for intimacy	85
5.4 A containing presence	88
5.5 Shared responsibility	90
5.6.0 Reflexivity	93
5.6.1 My personal reflections on the research study	93
5.6.2 My personal reflections on my process during the research	95
Chapter 6: Conclusion	97
5.7 Clinical implications	99
5.8 Limitations of this study	100
5.9 Recommendations for future research	102
5.10 Final thoughts	103
References	104
Appendices	115
Appendix A: The process of pregnancy	115
Appendix B: Information Sheet	116
Appendix C: Consent Form	121
Appendix D: Guiding questions	125
Appendix E: Excerpts in Maltese	127

Chapter 1: Introduction

1.1 Preamble

Coupling is at the core of human life, where the formation, conserving and remembrance of the couple's relationship is a central part of human existence (Holmes, 2001). Moreover, it is considered as a precondition of creating a child together (Clulow, 2009). Normative transitions such as expecting and the birth of a child result in restructuring of the entire family system as they need to accommodate the new member (Ramsdell, Franz, & Brock, 2020).

Local research by Attard Micallef (2015), has largely focused on the transition to parenthood following the birth of the child. Yet, one should not ignore that the expectancy of a child by itself already marks the changes and the adaptations which the family starts facing which leads to this major life event (Ramsdell, Franz, & Brock, 2020). In addition to the above, these researchers have also noted how this anticipatory period is expected to influence the way how a couple engage with one another.

Local research highlights the need for further understanding of the process of negotiation of a unified couple's identity and attachment. In this study, I am interested in exploring how does the couple's sense of closeness change and how does the expression of affection and love adapt during the gestational period. While in this study I acknowledge that the couple constantly continues to reconstruct their dyad relationship

(Yerby, 1995), I am interested in understanding how the experience of intimacy between the couple is being influenced during pregnancy.

1.2 Research question

This study is aimed at understanding the following research question: How do couples experience intimacy during pregnancy?

1.3 Aim of this study

This study is aimed at understanding how couples living in the Maltese context experience their intimacy during pregnancy. I am interested in understanding how does the couple's sense of closeness changes and how does the expression of affection and love adjusts during the gestational period. While in this study I acknowledge that the couple constantly continues to reconstruct their dyad relationship as it has been noted by Yerby (1995), I am interested in understanding how the experience of intimacy between the couple is being affected.

1.4 Area of the study

In recent years there were some studies based on relationships and within the Maltese context. Some of the local research focused on different areas of a couple's relationship, of which some studies addressed different stages in the formation of couplehood such as the initial years of couple formation and the couple's relationship

(Richards Chircop, 2017), the couple's expectations before and after the first year of marriage (Azzopardi, 2007) and the couple's transition to parenthood (Attard Micallef, 2015). Abela (2005; 2020) has also conducted seminal research on couples, intimacy and in relation to Maltese culture and beliefs. Hence, a research gap could be noticed in the area of pregnancy and the couple's intimate relationship. Other research on pregnancy were mostly focused on the mother which predominantly highlight the difficulties experienced during the gestational period in particular on mental health. It was also noted that research on the father's perspective and experience was very scarce. Thus, this study is focused on the richness of the unified experience of the couple and the meaning given to their intimate relationship during this life transition.

1.5 Research rationale

Relationships and understanding how they function are at the core of systemic practice and research. Numerous studies have been carried out historically in order to gain more understanding about different kinds of relationships in particular when it comes to couplehood and attachment (Richards Chircop, 2017). As indicated above, local research was focused on the formation of couplehood, marriage and transitioning parents into parenthood. This choice was also driven by the current increase of social conscience on pregnancy and mental health wellbeing. Existing literature points to the importance of relational support during pregnancy, hence this study would be based on the assumption that intimacy plays a fundamental role in enriching relational support. It also proposes that during pregnancy there is also a continuation of intimacy.

The current study is an Interpretative Phenomenological Analysis (IPA) (Smith, Flower, & Larkin, 2009) of the couple's experience of intimacy during pregnancy. IPA was chosen among other research methods as it encapsulates the couple's experience throughout this significant life event.

1.6 Personal position

My curiosity towards this subject may be drawn from my own personal experience, constructs and ideas about relationships. Since I met my husband in 2008, I have witnessed our story as a couple unfold and our intimacy mature and change throughout the years while co-constructing a unified couple's identity which is being renegotiated as we move through the different stages of the family life cycle together.

Experiencing pregnancy together with my husband and the beauty and challenges it brought along was a unique experience of growth for me and my family which we embraced together as a couple. Pregnancy enabled us to experience our intimate relationship in different ways which has enriched our intimacy as a couple during the different stages of our relationship. Thus, it is important that I acknowledge my experience and approach this study with openness. This may be done by keep exploring my biases and be curious to listen to the experience and look at it from the eyes of the participants which may be enhanced with an ongoing reflexive process.

As I look back, my training as a counsellor was more focused on understanding the individual subjective experiences of the clients. Through the systemic training, I am

interested in understanding the meaning the couples give to their intimate relationship during pregnancy. My training in systemic psychotherapy has also instilled further interest in me in relation to couple work with special interest in the intimate relationship of the couple.

1.7 The conceptual frameworks

The theoretical framework to approach this study are the social constructionist theory, the attachment theory and systemic theory as they were considered of most relevance to this research.

1.8 Systemic conceptualisation

Families are composed of individuals who are intimately involved together. Each member brings along their personal journey into their joint journey together which when these stories are weaved together they become the couple's family life (Minuchin, 1974). This idea of changing and evolving process may be captured in part through the concept of family life cycle which sheds light on different life transitions and changes in a couple's life such as the transition to parenthood. As mentioned by Dallos and Draper (2010), it has been argued in literature that continuous adaptation is fundamental as families move and evolve in these transitions. Hence, it is important in this research to understand the evolving and adjusting process of the couple's intimacy as the couple progress into this transition.

Dallos and Draper (2010) suggest how choices and attempted solutions couples resort to are also influenced by beliefs within the family system in relation to social, cultural and spiritual aspects embraced within the family system. This entails what is expected and accepted within the Maltese context including traditional values and what is considered as customary way of life even during pregnancy. Dallos and Draper (2010) note how familial aspects are also very important in the family system as it entails how individuals within a couple system jointly negotiate decisions which is also in part the internalisation process of cultural discourses and in part the joint process of couples as they go through the ongoing evolving process to jointly evolve a unique set of shared beliefs. Another important aspect which needs to be factored in are the individuals' unique set of personal beliefs which have been accumulated experiences throughout an individual's life (Minuchin, 1974). In this research such systemic thinking is essential in exploring ideas of intimacy through past histories with the extended family, friendships and experiences derived from past romantic relationships.

Building on the ideas of Byng-Hall (1985) on family scripts (repetitive and corrective scripts) it would be also interesting to note how these may have been passed onto the couples, or how the couples would like to correct an existing script following their experience within their family of origin or from other sub-systems such as friendships and pervious relationships in relation to intimacy.

From a structural perspective, the couple's relationship continues to evolve through mutual accommodation in everyday routines (Minuchin, 1974). This includes routines in relation to eating meals, sharing stuff, and very importantly routines in relation to the couple's intimacy which as stated in the previous paragraphs it also needs

to evolve during the perinatal period. Minuchin (1974) explains that during these patterned transactions, each partner monitors the responses and behavioural patterns of the other which is then influenced by the previous behaviour sequence and regulate the couple's situations. This is also in line with strategic perspectives such as Watzlawick (1967), who explained how every individual within a family system is related and dependent on the behaviour of other members of the family. A Watzlawick (1967) suggests, all behaviours are seen as communication which influences and is influenced by other members' behavioural responses. This is very pertinent to this study, as it would shed light on how intimate behavioural patterns can influence the other partner's intimate responses.

1.9 Social Constructionism

Social constructionism proclaims that society should take a critical position towards the way we presume the world to be true in the way we understand the world and also ourselves (Burr, 2015). Hence, social constructionism invites us to challenge conventional knowledge and ideas which are claimed to be based on objective, unbiased observations and truths of the world around us. Consequently, this view asserts that individuals living in a social context construct what is considered as knowledge and reality between them through daily interactions in the course of social life (Burr, 2015). Since the 1980s, systemic thinking has shown a significant move towards social constructionism, which added a significant consideration of the dominant ideas in different cultures (Dallos & Draper, 2015).

Dallos & Draper (2010) stipulate that without others to interact with we cannot have a self, thus making people fundamentally social. Through social interactions over time we build an enduring sense of self of who we are. The systems and subsystems we live in such as our parents start instilling in us common values, expectations, beliefs and culture. Hence, we start comparing our sense of self in relation to how we compare ourselves with our constructs (Dallos & Draper, 2010). Moreover, Carter, Garzia-Preto and McGoldrick (2015) explain how individuals observe and learn ideas about coupling from their families of origin, culture and also through media. Through these sources they start forming norms, values and start creating their ideas of a couple and start building expectations around those ideas.

When looking at intimacy from a social constructionist paradigm, it may be stated that the construction of intimacy is presumed to be a social process based on our experience of the phenomena. The experience of intimacy is interwoven with constructs of gender, power and sexuality (Weingarten, 1991). When defining meaning from this position, it is assumed that intimate connections take place when individuals share meaning and co-create intimate meaning together and reflect their mutual meaning making of intimacy through repeated intimate interactions which create the couple's co-constructed experience of intimacy (Weingarten, 1991).

This study aims to explore what constructs do the couples have in relation to intimacy and pregnancy and how these constructs are being experienced within the couple's relationship in particular during pregnancy.

1.10 Attachment theory

Attachment theory is seen as a fundamental perspective as part of the theoretical framework for this research as it is closely related to the intimacy created between individuals in a couple's relationship. Consequently, the relevance of attachment theory to my research is determined on the couple's expectations of the sense of closeness to each other and the couple's emotional accessibility and responsiveness in the relationship. Attachment theory operates from a systemic theory perspective which emphasizes on the couple's behaviour in context and explores communication patterns in the relationship (Cassidy & Shaver, 2016).

1.11 Definition of terms

Social GRRAACCEESS: An acronym developed by Roper-Hall (1998) and Burnham (1992, 1993, 2012 as cited in Yotsuka (2014) which was designed to support practitioners in being more mindful about a range of social differences which can support them in enriching their practice beyond their current abilities (Burnham et al., 2008). The acronym stands for; gender, geography, race, religion, age, ability, appearance, class, culture, ethnicity, education, employment, sexuality, sexual orientation and spirituality

LGBTIQ: This acronym which represents different sexual orientations and stands for lesbian, gay, bisexual, transgender, intersex, and questioning (LGBTIQ) individuals (Boulder County, 2021).

Chapter 2: Literature Review

2.1 Introduction

This chapter focuses on romantic relationships as they develop during pregnancy in accordance with the theoretical framework. While my focus in this research is aimed on pregnancy, I thought it was important to expand my curiosity about the couple's relationship prior conception. In this review I shall present literature pertaining romantic relationships, intimacy, pregnancy and how couples experience the transition from being a couple and their journey as a couple towards parenthood. Attention will be given to the social context, such as influential factors pertaining other systems the couple belong to such as the family of origin. This literature review will also take into consideration mental wellbeing of the couple and stressors which may impact the relationship.

2.2 Systemic perspective of romantic relationships

Understanding attachment's role in romantic relationships requires understanding how individuals are part of larger interactional systems with the family being at the core (Rovers, 2004). Dallos and Vetere (2012) conceptualise how triangulation can bridge and also connect attachment thinking to systemic ideas. This includes, intergenerational legacies of attachment, systems of attachment relationships within families and their extended kin, corrective scripts about attachment as well as understanding the

development of attachment from a systems theory perspective. This is achieved through an understanding of attachment in families and communities significant to the family.

This explains how the development of triangular relationship patterns can be replicated in other relationships even during adulthood.

According to a systemic perspective, one can see how these triangular patterns indicate how attachment processes can have cross-generational continuity (Hazan & Shaver, 1987). This show in mental representations of self in relation to a secure attachment figure where an individual will start developing a mental representation of traits, feelings, roles, behaviours and expectations which were experienced and recorded as memories while interacting with a significant attachment figure (Mikulincher & Shaver, 2007). From a neuroscientific perspective one may note how regions of the brain which are activated by maternal love are the same as those activated by romantic love (Fonagy & Campbell, 2016). This describes how attachment forms intimate connections with our primary care givers and continues to develop through other intimate relationships with others during our adult lives. Self-representations may also be based on identifying with a significant care giver and assimilating a significant attachment figure's soothing qualities through internal modelling. Thus, comforts individuals in a similar way the primary attachment figure used to cope or to comfort others (Mikulincher & Shaver, 2007).

The above may be linked to Bowlby (1969; 1972; 1980) who states that attachment is not a phenomenon which occurs during early childhood years only but it spans through different stages of the human's life cycle. Central to the attachment system are the internal working models which are modified by relationships with other systems such as partners during different life stages (Bifulco & Thomas, 2013). This idea can be associated to the theory of change, where change occurs in relational systems by people involved who accompany change within and for other people involved in the relationship (Dallos & Vetere, 2009). Studies by attachment researchers indicate that thirty percent of adults report changes in their attachment styles during a period of time, where such changes may be attributed to significant life events and new relationship experiences. Thus indicating that attachment styles are not static but can continue to evolve during our life through relational experiences (Kirkpatrick & Hazan, 1994).

2.3 Attachment in Romantic couple relationships

In the last decades advances in research have shown how attachment theory is not only rooted in biology but also in relationships. In the previous section we have seen how neuroscientific findings have shown how the mind, body and relationships are systemically connected together and coming to a conceptual whole (Clulow, 2007).

Inspired by the work of Bowlby, researchers Hazan & Shaver (1987) created a coherent framework on how love, lonliness and grief can be understood through attachment processes and through different stages in the human life.

Couple formation starts with the unification of two adults in order to start a new system, blending their two families of origin and realigning their respective relationships with them. The couple starts strengthening their intimate bonds, share and support each other's goals, and negotiate together the formation of a family (Carter, Garcia-Preto and McGoldrick, 2015). In addition, couples can both seek security from the other as well as be the providers of security and care (Hazan and Shaver, 1987).

2.4 Intimacy and gender differences

Social constructionism has studied how men and women are expected to behave in a manner considered appropriate for their gender and in accordance to their culture (Knudson-Martin & Rankin Mahoney, 2009). Since these gender ideas are socially created they survive and adapt through language, cultural practice and shared understanding in different cultural systems. Consequently, gendered ideas and practices tend to change over a period of time and across cultures (Knudson-Martin & Rankin Mahoney, 2009).

Even though egalitarian relationship ideals have become more popular in recent years, one can still uncover hidden gendered behavioural patterns which can create power inequalities among heterosexual relationships (Naveen & Knudson-Martin, 2012). In

today's social context, contemporary couples still experience power and gender differences as a primary struggle when forming love relationships and families (Knudson-Martin & Rankin Mahoney, 2009). Such gendered ideas are lived in an individual's everyday life, as a result these experiences are attributed to meaning to their life, thus touching aspects of love and intimacy in a romantic relationship (Feeney, 1999). Research on gender differences in relation to intimacy and closeness reports that there may be a sex difference in the couple's needs for closeness and distancing in a relationship which may be displayed in difference in behaviours among sexes (Feeney, 1999). Hence it is supposed that sex differences in needs for closeness may arise when a couple has different expectations and ideas about the meaning of closeness, where, men may attribute caring for the partner as a means to creating closeness with one another whereas women may connect closeness with emotional expressiveness (Feeney, 1999).

2.5 Constructs of romantic relationships

Apart from gendered ideas about romantic relationships, social constructionism has also faced different changes throughout history in relation to how romantic relationships were perceived and constructed. As Ferreira (2014) suggests, throughout history there where various recorded forms of relationships which has led to the idea of the intimate relationship formats we know of today. Modern marriages have faced a period of marriage transformation as they started incorporating historical characteristics based on socioeconomic contracts between families and modern perspectives on how relationships are formed (Ferreira, 2014). Nowadays, and in certain countries, marriage is

based on sentimental values, passion and alliance between the couple indicating that modern marriages comprise of shared projects between the couple and intimacy is built on new values based on friendship, love and sex (Ferreira, 2014). In addition, concepts such as those of infidelity, retirement, step parenting and re-marriage are also facing transformation due to changing social context which has led us to adopt a new pair of glasses regarding the concepts of love, intimacy, marriage, commitment, and child birth (Papp, 2000).

2.6 Existing concepts of Intimacy

Intimacy is considered as an important aspect in a couple's romantic relationship (Yoo & Bartle-Haring, 2014). The Merriam-Webster dictionary (n.d) defines intimacy as a state of familiarity which has personal and private value. It suggests closeness, inseparability, nearness and a sense of belonging. Sullivan (2012) describes intimacy as the validation of a couple's sense of self worth through adjustment of one's behaviour in order to foster collaboration and safety in a close relationship. This concurs with Erikson (1963) who postulates that intimacy is closely related to one's selfhood and the fusion of identities. From a social constructionist idea, intimacy is recognised as a universal experience which is widely influenced by culture and its expectations of how, when and with whom individuals can have an intimate connection. As emotions continued to gain more popularity and recognition even in the systemic modalities (Bertrando & Arcelloni, 2014), there was an enriched understanding that intimacy is shaped by emotional closeness, exposing one's vulnerability to one another through trust which enables these emotional bonds to be formed (Jankowiak, 2015).

2.7 Intimate relationships and love

The phenomenological nature of how intimacy is experienced between couples has significant importance for relationship quality as well as mental health (Frost, 2012). Bennett (2004) describes, there is a connection between our experiences of intimacy such as love, sexual connection and the longing to feel connected with one another. Krill (2008) postulates among other researchers mentioned in this study that, relationship intimacy is the tie that binds a relationship and it takes hard and persevering work in order to maintain and grow.

Siegel (2012), identified emotional communication as the primary ingredient for the development of a secure attachment within a relationship. For many, the most vivid representation of intimacy is revealed in the formation of a love bond (Jankowiak, 2015), which is seen as the result of a secure attachment bond in an adult romantic relationship (Hazan & Shaver, 1987). In line with Siegel, Richards Chircop (2017)'s local study indicated that emotional closeness and attunement were among the primary ingredients to create a secure relational space in which open dialogue is permissive thus enhancing a stronger emotional connectedness and deeper levels of intimacy.

Love is considered as a central aspect in the meaning of life which is filled with experiential value (Schulenberg, Schnetzer, Winters, & Hutzell, 2010). Theorists such as Bertrando and Arcelloni (2014) postulate the idea of emotions being connected to meaning making in relational interactions between one another. This point has been further emphasised by other researchers such as Jankowiak (2015) who shares the understanding that the belief of the authenticity of the partner establishes the foundation

of trust and is seen as another essential ingredient in the formation of emotional and salient meaningful relationships. This continues to strengthen the idea that closeness with one another, where each partner would show care and take responsibility for their partner's expression of emotional need will in turn strengthen the ties of relationship connection and intimacy (Fitness, 2015). This idea of closeness can be also seen in what Siegel (2012) described as attunement, which is a process where the couple are relationally present to one another and in order for presence to be established the couple need to build a strong level of connection between them together with the motivation to keep that connection (Sherman, 1993).

2.8 The experience of pregnancy

This section shall look at pregnancy from an experiential perspective by grasping ideas from different schools of thought such as postmodernism. Several feminist philosophers suggest that pregnancy encapsulates the difference between the male and the female bodies; where the male is seen as contained and autonomous, the female body is seen as more fluid with the capacity to reproduce another human body within itself and also with the ability to nourish the child through breast milk (Schmied & Lupton, 2001).

As mentioned in Appendix A, pregnancy brings a variety of changes were some may be related to the physiological, such as hormonal changes in the body which occur during each trimester. It is indicated by Hodgkinson, Smith, & Wittkowski (2014) that pregnant women tend to turn more conscious about physical changes such as gaining

weight and changes in their overall body which in turn can have an impact on how the couple look at the woman's body. Apart from that, during pregnancy, the couple are also adjusting through this major life changing experience and find a balance between work demands and family needs (The Australian Parenting Website, 2017). Couples also start assuming responsibility for their children and create space in the family system for them. They also start adjusting their relationship by renegotiating space between the couple while keep responsibilities towards each other (Carter, Garcia-Preto, & McGoldrick, 2015). A noteworthy aspect to take into account is that while the couple is transitioning from being two in a relationship, they also make space to include obstetricians as significant roles during this specific period, hence adding the medical aspect in the relationship (Barcellos Rezende, 2010).

As part of the couple's transition into parenthood, couples redefine their role within their family and within society (The Australian Parenting Website, 2017). Another important aspect of this transition is the timing of pregnancy. As mentioned by Simpson, Rholes, Campbell, Wilson, & Tran (2002) even though it is common that pregnancies can be planned and follow a sequence of stages which is discussed and negotiated between the couple. There are also couples where one or both of the partners might be worried about an untimely pregnancy and experience fear and concerns due to career or loss of independence and other issues (The Australian Parenting Website, 2017). During pregnancy, the couple are also adjusting through this major life changing experience and find a balance between work demands and family needs. (The Australian Parenting Website, 2017).

2.9 Sexual intimacy and pregnancy

Drawing from a social constructionist perspective, sexuality is considered as the language of intimacy, where a sexual act may be accomplished in a relational setting which enhances its meaning (Reynolds, 1992). In many cultures, sexuality is considered as an essential aspect of romantic relationships, where certain societies accentuates marital relationships as the primary relationship were sex takes place (Butzer & Campbell, 2008).

As it has been claimed by Clulow (2009), sex is an essential aspect of marriage and adult partnership which is at the core of the couple's identity and constitutes a fundamental representation of the couple's intimacy. Evidence indicates that greater sexual satisfaction envisages more commitment and fulfilment in the relationship as a whole for both partners (Harvey, Wenzel, & Sprecher, 2004). Clulow (2009), like Mikulincer & Shaver (2016), explains how sex can regulate closeness between the couple. Researchers add on that through sex, a couple can connect and disconnect from each other not only physically but also at a deep emotional level (Yoo & Bartle-Haring, 2014). When transitioning to parenthood partners may experience stress, guilt or feeling upset about the quality of their sexual relationship (Haugen, Schmutzer, & Wenzel, 2004). Since sexual satisfaction is considered to be closely related to relationship satisfaction, it is important that transitioning couples nurture this aspect in their rapport (Haugen, Schmutzer, & Wenzel, 2004)

As mentioned above, a satisfying sexual relationship is one part of the intimate relationship of couples and is an important aspect for couple satisfaction. Literature has

frequently shown that the more couples experience sexual satisfaction the more the couple would experience satisfaction and commitment in their relationship as a whole (Sanchez, Phelan, Moss-Racusin, & Good, 2012). In addition to this, Nezhad & Goodarzi (2011) and Clulow (2009) point out that conception and pregnancy are seen as the ultimate expression of intimacy in a couple's sexual relationship, as it intertwines a couple together in a knot which marriage cannot (Schwebel, 2008). The experience of conception may support the couple into seeing each other from a more mature perspective, and the partners would be enabled to look at each other as the "father/mother of my child" as well as the partner who is sharing the journey and overcoming difficulties of the new stage in the couple's life (Schwebel, 2008).

It has been already noted that, the transition to parenthood denotes a period which embraces some of life's most significant changes and adaptations (Haugen, Schmutzer, & Wenzel, 2004). When a couple is expecting a child, it is important to note that during this specific period the couple may experience various factors which can affect sexual intimacy which may be related to anatomical, physical, emotional and psychological changes that occur in pregnancy. In addition to these changes, the couple also faces social constructs around sexual intimacy and pregnancy which derive from cultural beliefs, myths and taboos on what is appropriate or inappropriate sexual behaviour during the gestational period (Nezhad & Goodarzi, 2011). In relation to this, many researchers reported that many couples experience a decline in sexual intimacy in the first trimester, following an increase in the second and another decline during the third trimester which continues during the postpartum period (Haugen, Schmutzer, & Wenzel, 2004).

Following this, research on sexual intimacy during pregnancy has largely focused on the deterioration of sex as pregnancy advances, while there was limited attention on how sexual intimacy during pregnancy can improve the couple's relationship (Ramsdell, Franz, & Brock, 2020). In fact, recent studies indicate that sexual frequency during the perinatal period is not indicative of the relationship quality between a couple. These studies suggest that there is a lower sexual frequency among couples who have a stronger and closer relationship bond. On the other hand, when couples use sex as a means to maintain relational support during this transition, the more the couple would feel the need to engage in sexual frequency (Lorenz, Ramsdell, & Brooke, 2020).

2.10 Romantic relationships in Malta

Abela (2005) stipulates that Malta is influenced by other European countries through cultural, economic and political ideologies. As a country Malta holds strong family values where the family system may be considered as an extension of the nuclear family. Hence, family system exerts a form of control over couples, which together with the Catholic Church's influence makes social change rather slow (Abela, 2005).

The Catholic church is still significantly predominant in certain European countries such as Malta, Italy and Poland, where for many, marriage is considered a life time commitment (Olàh, 2015). This position was also embraced by Azzopardi (2007) as his research on Maltese Catholic couples and their expectations of marriage shows a shift back to traditional values embracing responsibilities bestowed upon the couple when getting married. In their research Abela, Vella and Piscopo (2020) confirm that the majority of Maltese adults in their study still considered being in a committed

relationship a priority which was also linked to life satisfaction particularly by married couples in the research. In European research, Southern Europe including Malta is also experiencing a decline in marriage over the past years, where cohabitation may be seen as an alternative to marriage or transitional step prior marriage (Olàh, 2015).

Abela, Vella and Piscopo (2020) report that Maltese adults affirmed that relationship satisfaction was highly effected mostly by respect, followed by communication, trust and love. However, young and middle aged individuals predominantly deemed communication and trust as the most contributing factors in a romantic relationship. In addition, influential factors effecting stability in the relationship are shared responsibilities among gender roles, conflict resolution, sharing time together, attending to each other's needs and showing appreciation and love towards each other (Abela, Vella, & Piscopo, Couple Relationships in a Global Context: Understanding Love and Intimacy accross Cultures, 2020). The researchers above also indicate that for adult Maltese respect, communication, intimacy and love are the ideals which constitute a loving couple relationship.

2.11 Conclusion

This chapter started with a description of the experience of pregnancy and continued with a deconstruction of relationship intimacy and how it is effected during the transitional period of pregnancy. It also focused on attachment through infancy to adulthood and how attachment is systemically linked through different life stages.

Attention has also been given to social constructions of gender and relationships.

Chapter 3: Methodology

3.1 Introduction

In this chapter I shall present the research method and methodology used in this study which is then followed by a description on how participants were contacted and selected, ethical considerations, including confidentiality during the research as well as the process of data collection and interpretation for this study.

3.2 A qualitative approach

A qualitative approach was selected as it draws from the philosophies of phenomenology and social constructionism which are at the forefront of the theoretical framework of my research. This coincides with Dawson (2009) who states that the methodology is considered as the general principle which guides the research study. Qualitative research is also embracing a postmodern approach which favours the individual's interpretations and descriptions of their experiences, moving away from pretentions of generalisations or single truths and adopt the idea of multiple realities (Merriam & Tisdell, 2016). Qualitative research is interested in understanding how individuals interpret and give meaning to their experiences and how they construct their world through these (Leavy, 2014; 2017; Merriam & Tisdell, 2016). A deeper

understanding is aimed to be achieved in the research by deconstructing meaning individuals or groups give to situations and events in their life (Given, 2008).

In my research I am interested in delineating the process of meaning making and how couples describe their experience of intimacy during pregnancy which as Merriam and Tisdell (2016) describe, is a central aspect in the qualitative research approach. Another reason why I decided to use qualitative research over a quantitative research design is that the researcher is the primary instrument of data collection and analysis (Merriam & Tisdell, 2016), which can help me as a researcher expand verbal and nonverbal communication through immediacy, clarification and check with participants for accurate interpretation. Moreover, qualitative research is an approach which focuses on self-reflexivity and context, which can otherwise be missed when using quantitative research methods. In addition, qualitative research may lead to more trusting relationships which may encourage a deeper level of disclosure. Through the qualitative approach I would have the opportunity as a researcher to gain more insight and understanding on the intimate experience between couples even through the observation of nonverbal communication which can enrich the data being collected while also operating from a systemic view. Burke (2005) stipulates that many of the qualitative research designs are more suited in exploring pertinent research questions in the systemic field as they embrace the systemic framework.

This research is focused on understanding the experience of intimacy between couples during pregnancy. The adoption of a qualitative research approach would support this study to go in depth in the exploration of this human experience which is shared between the couple. Dawson (2009) explains that qualitative research is the methodology

used in order to explore behaviours, attitudes and experiences. As a result, the qualitative approach is better suited for my research as it is aimed at exploring and understanding the thoughts, feelings as well as interpreting processes and meaning of the experience as told by the participants (Given, 2008). In view of this, Interpretative phenomenological analysis was identified as the methodology of choice as it is focused at understanding how people experience particular phenomena in their lived experiences (Smith, Flowers, & Larkin, 2009).

3.3 Interpretative Phenomenological Analysis

Interpretative Phenomenological Analysis (IPA) was not the only research modality I looked into for my research. I deemed important to consider other research modalities in order to be truthful to the research presented in this dissertation. Two of the prospective qualitative modalities I considered adopting were Narrative and Discourse analysis which are both pertinent in the systemic field and embrace a social constructionist perspective.

Discourse analysis is focused on the analysis of language and how it is used, interpreted and understood in relation to social situations (Anderson, 2011). Even though language plays an important part in understanding the experience and would enrich my study, it was still not focused on the intimate experience but rather the language used to interpret the experience.

Narrative research relies on discourse analysis, thematic analysis and other frameworks (Josselson, 2011). It is founded on the idea that people live and understand their lives through stories and try to connect events in a way that the story has a beginning, a middle and an end (Josselson, 2011). It focuses on exploring the whole account of pregnancy which brings context to the research and enriches one's understanding of the story. Even though this study is focusing on intimacy during pregnancy, one should also take into account how the couple's intimacy prior pregnancy matured, and thus, I did not intend to look at the couple's intimacy as a chapter in their life as it is not static. This supported my choice in selecting IPA since it can provide a source of contact, connection and relationship between participants and the researcher through the use of words, meaning and understanding of experiences (Given, 2008).

As Smith, Flowers and Larkin (2009) state, IPA is interested in the in depth examination of personal lived experiences. Its main focus is to conduct this examination and allow the participants to express their experience in their own terms rather than in a predefined category system (Smith, Flowers & Larkin, 2009). Its foundations are based on three main theoretical underpinnings which are phenomenology, ideography and hermeneutics which is known as the theory of interpretation (Smith, 2007). Influenced by Husserl's phenomenology, IPA is interested in exploring experiences while acknowledging moving away from the personal biases of the researcher. Its ideographic nature helps the researcher to keep faithful to the personal experience of the participants and brings out the authenticity presented from each of the participants' account. Thus, creating an opportunity to visualise where participants meet in their experiences or drift away from each other (Smith, 2016). IPA validates that the search for the experience of

lived experiences is an attempt to interpret the experience of the participants' world by both researcher and participants (Smith and Osborn, 2015; and Smith (2016). Such positioning is in line with systemic thinking and the idea of circularity as it creates a hermeneutic circle in which both parts of the couple's experiences will come to a whole (Smith, 2007).

3.4 Research Setting

This research study was done in partial fulfilment of the Masters in Systemic

Psychotherapy with the Institute of Family Therapy- Malta. This research was conducted within the Maltese context and with couples living in Malta.

3.5 Ethical considerations

This research followed the fundamental ethical research principles of beneficence and nonmaleficence to prospective research participants. These ethical principles were adhered to by (a) obtained informed consent from participants, (b) minimization of any risk of harm, (c) respect towards participants' anonymity and protecting their confidentiality, (d) being transparent with participants throughout the research process, and (e) the right of participants to withdraw from the research (Dissertation Laerd, 2012).

Each prospective participant received an information letter explaining the aim, purpose of the study and the data collection process. Participants were informed that

participation to the research is voluntarily and the right to withdraw. Each participant was informed about the frequency and length of the interviews. The information letter and the consent form (appendices B and C) were sent to the couple via email and consent was obtained by the couple prior to commencement of the interview. Since interviews were held online due to COVID-19, the consent form was sent back via email. Recording of the online interview was done through Zoom which is the online platform chosen for the interview sessions.

3.6 Confidentiality and anonymity of participants

As per the General Data Protection Regulation (GDPR) issued by the European Parliament and the Council (2017), this research safeguards the principles and the rules of protection of every participant with regards to the processing and maintenance of their personal data. Consequently, pseudonyms were used throughout the research and no identifiable information was used during the course of the research or in the submission of the final dissertation. Participants were informed that disposal of any recorded and written material shall be in line with the GDPR regulations and the board of the Institute of Family Therapy.

3.7 Research design

3.7.1 Sample selection

IPA studies are focused on the sense of detail and the depth of the analysis and how particular experiences have been understood by specific individuals in a specific context (Smith, Flower, & Larkin, 2009). Hence, in line with IPA recommendations, a homogenious sample was purposively selected through snowball sampling.

As suggested by Smith and Osborn (2015), five couples allows for sufficient indepth engagement and would enable me to explore and observe similarities and differences in the data collection. In total thirteen couples living in Malta showed interest in participanting in this research, five of these participated in the study, one couple terminated contact following consent and four couples withdrew as partners were not feeling comfortable to participate. Another three couples were contacted following interest in participation but did not contact me back after I sent the information sheet and consent form. Pietkiewicz and Smith (2012), and Smith and Osborn (2015) indicate that there is no specific rule regarding sample sizes of participants in IPA. Yet, due to the idiosyncratic nature of IPA, small sample sizes are preferred as lager samples may also lead to a variety of meaning (Eatough & Smith, 2008; Brocki & Wearden, 2014).

3.7.2 Participants

Participants consisted of five couples living in Malta. For this research I was interested in interviewing couples who have been committed in a relationship for more than a year prior the pregnancy and who are living together. This research was open not only to new parents but also for parents who had already experienced childbirth and had already adapted their family system while readapting to make space for the second child within their family.

3.7.3 Recruitment Criterion

For the recruitment criteria I was looking at a homogeneous sample which is in line with the guidelines proposed by Smith and Osborne (2015) which indicates that IPA studies tend to favour homogeneous samples. For this reason, I was looking at the following criterion:

- a) Couples who were in a committed relationship for at least one-year prior the pregnancy. As indicated by Richards Chircop (2017), attachment and security in romantic relationships seems to be attained through the couple's commitment towards each other and the relationship. Corroborated by Singer and Skerret (2014) who define committed couples who cultivate a shared sense of mutuality towards the couple's relationship. In his research, Azzopardi (2007) among other researchers, postulates that the first year of marriage is a period of adaptation in the couple's relationship.
- b) *Heterosexual couples*. For this study I decided to interview heterosexual couples in order to eliminate other factors which even though they would add significant richness to the

study, it would add different factors which would affect the homogeneous factor of this research.

- c) Couples living independently in the same household. This criterion was established as couples with a different context such as those who are still living with their parents would provide a broader context and other systems which I believe that they would have a direct influence on the couple's relationship and intimacy.
- d) *Couples living in Malta*. Since the study is focused on the local context it was important that the couple would be living in Malta. In my opinion this would reduce the possibility of other cultural influences.
- e) Couple who have given birth within a twenty-four-month period. This time frame was considered to widen the pool of participants who may be eligible for this study.

3.8 Collection of data

Data will be collected through semi-structured interviews which, as indicated by Smith and Osborn (2015) is the optimal method to collect data in IPA research as it is a flexible instrument. Even though initial questions where used to guide me through the interviews (appendix D), it gave me the flexibility to modify questions and probe in areas which may arise during the interview. This is also in line with Smith (1990) who adds that by engaging the couple in the individual interview, the couple would enhance the intimacy of the space which adds further depth. This is achieved by enhancing a safer space for participants to process, speak and feel listened to. This enabled me to facilitate

a better rapport with the participants and contribute to further richness through the openness during the interview.

3.9 Interview procedure

Due to the global pandemic, all six interviews were conducted on zoom. The interview sessions were held during a four-week time frame according to the couple's availabilities. Interview sessions ranged between sixty to ninety minutes in duration. Prior starting the interview we engaged in a short discussion which supported in building a safer rapport. This enabled me to explore whether participants had concerns which needed to be addressed prior the interview. I believe that this also contributed to enhance safety which through concerns or added discomfort certain richness may not have been obtained during the process. As I interviewed the couples, I included the systemic aspects of circularity, neutrality and curiosity which as explained by Cecchin (1987), these are guiding principles in systemic practice. This was done through probing in aspects which were presented as significant for couples and making sure that I get the perspective of both participants throughout the interview.

Conducting the interviews online enhanced further flexibility for the couples as we could better cater for their individual needs and be flexible when scheduling appointments. It also enabled them to hold the interview from the comfort of their home which I believe it added safety and the couples seemed comfortable to get closer and intimate to each other as they were sharing their experience. This was observed as couples touched each other during the interview, and moved closer when needed. It also

enabled me to witness how they attuned to each other and how they supported each other in their present system such as when they needed to attend to their child. Holding the interview online removed certain hindrance such as the use of face masks due to Covid-19 which not only I believe it creates more distancing but it also covers facial expressions and would have added certain difficulty in understanding what the couples were saying, contributing to a level of loss in the expression of their experiences. I also believe that using face masks would have also reduced intimacy between the couples.

3.10 Data analysis

The research procedure including data, gathering, analysis and interpretation of data were in accordance with the IPA's guidelines as proposed by Smith, Flowers and Larkin (2009) and Smith and Osborne (2015).

Prior my embarkation to start data coding, each transcript was read and reread in accordance with Smith, Flowers and Larkin (2009), as it helped me immerse myself deeper in the analysis of data and familiarize as much as possible with the data and extract further insight after each reading. This was also supported through listening to the visual recording while reading the transcript more than once. Visual recordings enabled me to identify nonverbal communication between the clients which would not have been possible with the audio recording only. During the process, notes and comments were taken on transcript through which emergent themes from every couples' interview were extracted. During the final stage of coding, the core essence was narrowed down to encapsulate the core essence of the central meaning of the lived experiences in one or two

words. Thus, participants' responses were deconstructed without diminishing or losing as much as possible the core meaning of the responses. This enabled me as a researcher to identify the themes of this research (Alase, 2017). In conclusion, in accordance with Smith and Osborne (2015), superordinate themes where not selected as a result of their prevalence in the transcribed data, but the richness of specific passages which highlighted the experience were also taken into account.

3.11 Translation of transcripts

Maltese was the preferred spoken language by most of the participants, with the exception of one couple who held the interview mostly in English and some participants were switching from Maltese to English. While taking into consideration that translations are not literal but rather they are focused on keeping faithful as much as possible to the meaning expressed by the clients, an original copy of Maltese excerpts is listed in the appendix E.

3.12 Validity of data

Reliability and validity of a study are considered fundamental concepts. From a qualitative point of view, it has to be established through the research's trustworthiness (Golafshani, 2003). This process starts from the beginning of the research when designing the study and continues throughout including analysis and assessing the validity and reliability at the end of the study (Patton, 2014). A qualitative researcher

needs to conduct the research by recognizing patterns from beginning to the end by staying open to the data and keep an open perspective and a watchful eye for unexpected patterns which may be hidden within the data (Patton, 2014).

To ensure credibility in my research, throughout the study I engaged in a selfreflexive process in various reflexive discussions with my tutor who helped me reflect on my own biases and ideas which may affect the research. One cannot assume a position of an objective researcher due to our own experiences and cultural influences. Consequently, from the beginning of my research I started an ongoing process of evaluation on my biases and how these can impinge on my research. As Totsuka (2014) asserts, it is important our own process is included in our thinking, such as our own personal, social contexts including familial aspects which can impact our work. Throughout this process I also reflected the acronym Social GGRRAAACCEEESSS, developed by Burnham and Roper-Hall (as cited in Totsuka, 2014) which enabled me to be mindful about aspects of a range of differences throughout the research process. This supported me also when extracting themes and challenged further my thinking while keeping an open eye for any emerging themes which I may miss because of my own biases or emphasis due to my previous unfiltered predispositions. This enabled me to stay more with the meaning presented by the participants.

Triangualtion is also an important factor which was taken into consideration to add further validity and credibility to this research which rests within the paradigm of multiple perceptions about a single reality (Healy & Perry, 2000). Flaskas (2012) asserts that "part of reflexive thinking is having a space between the "I" who is thinking and the thoughts that I am having." Thus, this reflective space was created through journaling,

engaging in reflexive discussions with my tutor and also other professionals in the field who can support me with their feedback in understanding my biases and my contribution and influences in the processing of data. Triangulation was added through my research by being curious of different perceptions including external perception such as the family of origin through the voice of the participants. Triangulation was enhanced through the research criterion as different interpretations of a single reality could emerge.

3.13 Reflexivity

Reflexivity has been widely credited for enriching the rigor of qualitative research data rather than focusing only on ethical reflections stemming from the information derived from the research (Leavy, 2014). Social constructionism stems from the idea that discursive constructions are not a representation of the only truth but rather the representation is in itself one reality amongst other realities (Jørgensen and Phillips, 2002). Each of us brings our own moral compass into our research experiences which develop within a social context. From an Interpretative phenomenological perspective, values we bring to the research experience shapes every decision we make as they influence us in how we think and therefore how we act and what we say (Leavy, 2014). Being a mother of two children and experiencing pregnancy twice together with my husband has also contributed to my biases which are closely related to my research, ideas and experiences. This supported me to keep my focus on Rober (2016)'s idea on focusing

on what is present and accessible for self-reflection while enriching my understanding of the participants' experiences.

3.14 Conclusion

In this chapter I presented the research design and methodology used for this research.

Data was analysed from a qualitative methodology through IPA. Findings are presented in

Chapter four.

Chapter 4: Findings

4.0 Introduction

This chapter introduces the main research findings which shall be presented under five superordinate themes and the respective subordinate themes which are presented in the table below. During this presentation, transcripts from the interviews shall be used in order to enhance the meaning behind the participants' experience.

4.1 Participants

Participants' age in this study were ranging between late twenties and early thirties and were married. The majority of participants have a tertiary educational level and one of the participants has a secondary educational background. Even though it was coincidental, two of the female partners were in the helping profession, and two of the male partners and one of the female partners were in managerial positions, while one of the female participants worked in the educational field. The majority of participants are over thirty years of age which as it has been stipulated by Campinos Rodrigues and Mendes (2020) this phenomenon could be a result of women who priorities academic achievements, career, financial and marital stability. All couples, even though it was not a research criteria are married.

Super-ordinate themes	Sub-ordinate themes	
1) Defining Intimacy	1. Physical	
	2. Emotional	
	3. Communication	
	4. Vulnerability	
2) Intimacy as a process	The couple's intimacy before pregnancy	
,	2. The couple's intimacy during pregnancy	
	3. Intimacy as an investment for the	
	relationship	
	4. Time and space for Intimacy	
3) Contributing factors for	1. Attunement	
Intimacy	2. Sexual satisfaction	
	3. Partner support	
	4. Sense of security	
	5. Knowledge	
4) A containing presence	Expressing their needs	
,		
	2. Attending to their needs	
	3. External factors	

5) Shared responsibility	1.	Husband/father's role
	2.	Wife/mother's role
	3.	Couple/parents' role

4.2 Defining intimacy

Defining intimacy for the couple was an important theme which emerged throughout the five interviews. Couples defined intimacy as a combination of different forms of bonding which were encapsulated in four subordinate themes which are; the physical, emotional, communication, and vulnerable aspects.

4.2.1 Physical

Participants in this study used the term physical intimacy interchangeably with sexual intimacy throughout the interview process. The majority of the male participants prioritised sexual intimacy whereas only one female participant prioritised sexual intimacy over the other aspects of intimate connections.

Sarah: To me sexual intimacy is how I know if things are ok in the relationship or if there is a bit of a struggle ... to me it gives me an indication of how we are in all aspects of intimacy.

Kissing and cuddling was also an important intimate contributor for the couples' intimacy which was presented by two couples in the interview.

Mary: It starts from cuddles, the time when we hug, because we love to hug a lot, in the sense that we kiss, and then the time when we sleep together...we hug a lot as well, for us the physical hug with each other is very important throughout the day.

John spoke about the aspect of spirituality through sexual intimacy with his wife.

He described how being totally naked not only physically but also emotionally and spiritually led to a different level of intimacy for the couple.

John: "standing naked in front of her...and not just physically but seeing me naked at an emotional and spiritual level in front of her, for her."

The couple explained how they experienced each other less whole with one another when using contraceptives. The couple explained how they tried female contraceptives which effected the hormonal level of the wife and they felt less nakedness and vulnerability to one another when using male contraceptives.

4.2.2 Emotional

The findings in this study indicate that most female participants priorioritised emotional connection over other aspects of intimacy. It sets the tone for the other aspects

49

of intimacy as they consider them interconnected with one another. Without dismissing

the importance of sexual connection, Kevin emphasised on the significance of emotional

and cognitive connection between him and his wife.

Kevin: "I think I give it [sexual intimacy] a bit less of importance..for me...the

emotional connection, the kind of talking...to open and be honest with each other."

All participants emphasised on the bonding and connecting experience created

through intimacy.

Andrew: "the relationship which keeps the bond going."

Berta: "the connection, spending time together, enjoying bonding and it can vary

from being together and also when it comes to sex as well."

4.2.3 Communication

Throughout the interviews communication was frequently connected to emotional

intimacy by both male and female participants. Interviewees defined communication as a

way to connect their intimacy together.

Berta: "For me when we are communicating is also intimacy."

Kevin: "it's a broad set of things, it starts from physical intimacy, emotional intimacy, kind of being open and connected...on the same wavelength."

Findings indicate that couples address intimate difficulties through verbal communication. Three couples highlighted the importance to sit down and talk with one another.

Kyle: "we spoke about them...we spoke a lot about our difficulties."

Kevin: "talk to each other about it, talk to each other about what we expect out of each other."

Berta expressed the importance of timing during intimate communication.

Berta: "we have to be very cautious to find the right timing."

Two couples found communication essential also when planning physical and sexual intimacy. The couples expressed how they know through verbal and physical queues throughout the day when one of them wants to connect physically. Two couples also expressed the importance of having adult conversations in their relationship in particular after child birth when they are spending a long day connecting with children.

This enhances the significance of cognitive intimacy in which couples express the need to connect with each other as adults. All couples expressed their longing in going out and spending time together as a couple.

An interesting aspect which was presented by one of the participants was how he experienced his openness in communicating as a hindering factor at times. Kyle described how in his family of origin open communication was a must. Thus, he felt that he struggles to interpret underlying messages when communicating in different relationships.

Kyle: "they tell me something where there would be a hidden message which I would not be able to interpret most of the time because I am used to be straight and plain very direct."

His wife is more tentative and elaborative and they experienced difference in the way they express themselves. The couple explained how they needed time to adjust to the way each other communicated and deconstructed what each other means when communicating.

4.2.4 Vulnerability

The aspect of intimate vulnerability was presented, in particular by two couples.

Vulnerability was connected to emotional safety and being able to expose one's own

vulnerability to the other without feeling the risk of being hurt by the other. Couples spoke about the physical, emotional as well as the spiritual (as mentioned in the previous theme) aspects of vulnerability which was also linked to higher level of intimacy which was presented by the couple through being honest, authentic and genuine in their feedback to one another, and being very transparent and wanting to be dependent on one another.

Sarah: "as a couple, we are very honest with each other, we are very naked with each other in that respect."

4.3 Intimacy as a process

An important perspective which couples shared is how intimacy prior their pregnancy has supported them throughout their journey which continued to grow and evolve to the intimacy they had today. The couple's intimacy before pregnancy, the couple's intimacy during pregnancy and time and space for intimacy were extracted as sub-ordinate themes.

4.3.1 The couple's intimacy before pregnancy

All couples explained how their intimacy started before pregnancy and how much they have invested consciously to strengthen the relationship and the bond between them.

Kyle: "Before having children...fulfilling...not to compare before or after having children because I cannot compare that but I always felt fulfilled with Berta ... on all levels ... it evolved into something different."

Each one of them emphasised that their relationship prior pregnancy was already intimately strong.

Sarah: "I think I would say that we were always very intimate."

All couples recalled how spontaneous intimacy was prior pregnancy, in particular when it came to sexual intimacy.

John: "It was very beautiful... we did it [sexual intimacy] almost all the time...it was very good"

This shifted, mostly for couples who already had a child in the family and spontaneity had to be replaced with creativity as it helped the couples to find different ways how to connect.

Kevin: "before we had more freedom and more opportunity, you know... more time, it was more spontaneous, even sex was much more spontaneous. Now we have to fit everything into a schedule."

4.3.2 The couple's intimacy during pregnancy

Pregnancy was considered as an important transition as couples experienced and expressed intimacy in a different way than they used to prior conception. Four of the couples described how male partners showed intimacy through enhanced care for the wife and the baby, which enhanced attunement between the couple.

John: "I used to do it [cleaning floors] to make her feel loved in the sense it was an act of service"

Couples expressed how female partners were more expressive during pregnancy and communicated their needs more openly.

Berta: "during pregnancy, I was very clear, I was loud and clear. I need this, I need that...I felt more open."

The couple, in particular for Berta and Kyle experienced this as an enriching experience in their relationship which also continued to evolve following childbirth.

Kyle and Berta also experienced their intimacy during pregnancy as a step forward in their intimate connection which enhanced the attunement towards each other.

Berta: "it's like signals changed and we became more attuned. Nowadays we know each other and even with a glance we would know, so things evolved which is good as well."

A couple who had their second child described how they had to revert the sequence which led to their buildup of intimacy, starting from intercourse and proceeding with sensual touching, hugging and kissing. While men seemed less effected by the sequence itself, women in this study found it harder to adjust. On the other hand, husbands attuned to their wives' emotional needs and joined them in this experience of adaptation.

Four couples were sexually active throughout pregnancy; however, it could be noticed that two of the female participants engaged into sexual intimacy as it was a need for their partner. Two female participants also expressed a heightened level of sexual arousal throughout this period.

Monica: For instance, I did not want to have sex in the first three months, during the following months I kind of did it to please him, I was scared, so if I could I would have preferred to spend nine months without doing anything to make sure that nothing goes wrong.

Sarah: In my case my libido was very high when I was pregnant, more than normal.... No I was the insecurity you know, the gaining weight, feeling unattractive anymore...so for me it was this big thing. That was the problem in our relationship you know, which kept coming up in conversations.

Significant changes in intimacy and the need to attune to the couple's needs differently were reported by couples who had their second child. Hence, there were various factors contributing to these changes, such as the experience of a past pregnancy and childbirth, which meant that the couple was also navigating caregiving responsibilities with a child who has already joined the family system.

Fear and anxiety were prevailing mainly with couples going through first pregnancies as they did not know what to expect, as they perceive the unborn child as fragile. One couple who already had a young child shared how less anxious and less fearful they were during the second pregnancy as they already knew what to expect. Hence, they could focus more on their relationship and the first child. On the other hand, one couple had complications during the first pregnancy and thus, they were more fearful and concerned during the second pregnancy while also attending to the needs of their first born.

Berta: so it's like in the beginning I started experiencing fear and at first I was carrying that guilt that I could have done something during pregnancy because I kept on going. I still took out the dogs which are big during the first pregnancy.

At times I tell myself that during the first pregnancy I might have done something wrong.

Male partners were more task oriented and prioritized what needed to be done such as two husbands took care of selling their house and to move into new one with their

wives. Another two husbands experienced fears with their wife and tried to ground her.

According to the couple the experience in the second pregnancy evolved their intimacy
and brought along more quality in the relationship.

One of the most significant and visible changes the couples experience throughout pregnancy was the changes in the woman's body. Couples made various references to physiological changes. Such as those changes which are visible to the eye and may be noticed externally as well as internal changes which the body experienced such as constant back pains and feeling very tired. While couples shared that they did not experience significant changes in their intimacy, certain changes could be noticed due to physical and hormonal changes which escalated emotional sensitivity in pregnant women. These changes also evoked relational insecurities in expectant mothers due to the significant changes in their body shape.

Mary: "I used to feel ugly... looking at your [referring to self] big belly."

Couples expressed that the more the bump was pronounced the more they saw the presence of the unborn child. This seemed also like a constant reminder of their fear of vulnerability and of harming the child.

Andrew: "you see a tummy expanding, I mean without wanting, you do not worry but you pay attention and say "what if something goes wrong? What can happen?"

This experience of enhanced vulnerability was not only experienced by male participants but also by the majority of the females which resulted in a reduced interest in connecting sexually with the partner and prioritised emotional intimacy further.

Kevin: "I started getting this intense feeling of protecting Sarah...supporting Sarah...caring...and that initially kind of not killed the sex drive in the beginning but it effected it abit...all I was thinking was protecting Sarah."

Four out of five female participants experienced fear on "what if something happens?" It is important to mention that Monica experienced difficulty in the first trimester and Berta experienced the trauma of the possibility of losing a child, whereas Kevin and Sarah experienced a miscarriage. Even though Mary and Christine did not have complications, they still experienced fears and anxieties even though at lower levels. On the other hand, Sarah was experiencing fear in relation to the change in intimacy, as she experienced her husband as looking at her as a mother who needed protection. The couple attributed this overprotection to their previous experience of a miscarriage.

Kevin: "I started getting this intense feeling of protecting Sarah...supporting Sarah...caring...and that initially kind of not killed the sex drive in the beginning but it effected it abit...all I was thinking was protecting Sarah."

Even though the majority of the female interviewees welcomed additional care from the husband, Sarah found this attention as a threat to their relationship.

Sarah: "I was taken aback like do you seriously look at me and you think that "you must protect her?" Like No! I am more than that! you know."

Couples in the interview described how their relationship pre-pregnancy was a very important support as it helped them throughout their adaptation during and post pregnancy. They emphasized how having a strong intimate bond between them supported them when insecurities about their relationship surfaced. This was experienced particularly by female participants who experienced changes in their body and looked at themselves as less attractive during the process.

4.3.3 Intimacy as an investment in the relationship

A significant aspect which was mentioned throughout the interview process was the importance not to rush intimacy, also the importance of evolving as a couple together with their newly defined intimacy and the need to adapt in this process. A common adaptation among male participants is their active involvement in house chores and responsibilities. This was experienced as an intimate aspect by both partners in the relationship as females felt valued, cared for and appreciated, whereas male partners evolved to this kind of intimacy as an act of love and care towards the partner.

John shared, "to me it didn't make a difference whether the house was clean or not, but I used to wash the floor all the time out of love...and it used to make her happy."

4.3.4 Time and space for intimacy

Time and finding the right space was a predominant factor which effected intimacy significantly. Couples shared the importance to evolve together and adapt to the needs of their intimacy as otherwise it would be detrimental for the relationship.

Berta: If we did not evolve we wouldn't even speak or look at each other anymore...we would be filled with anger as we barely had time to talk...we had to be creative on how to intimately connect even during pregnancy, in particular during the second one.

The concept of time and space was also experienced between couples when they shared the need to find time and space for each other as a couple without children. All couples participating in this study emphasized the importance of not losing their intimate relationship as a couple and find time to nurture their relationship as lovers and not as parents. Four out of five couples highlighted the importance of having time to spend together as a couple to go out together without the children. Couples expressed the need to spend time together in an environment without children, which was difficult to achieve. Couple three tried to find more time together through clubbing, and were longing to go abroad as a family but was not possible due to the global pandemic. Couple two did not stress the importance to go out together, but they schedule weekly intimate time by introducing a marriage journal.

Sarah: Every Sunday, every day of the week we had like a list of questions that we would ask each other to check in how we are feeling, how's our sex life like, are there any arguments which have gone unresolved...and that's a really good communication tool for us.

John: Pero' we don't' see it as a performance for instance, we see it as love etc.

Intimacy, always starts at the dinner table, with coffee and tea leading to bed, so that's our intimacy

All couples stressed the importance of scheduling time for intimacy as otherwise they would not succeed.

John: Pero' we don't' see it as a performance for instance, we see it as love etc.

Intimacy, always starts at the dinner table, with coffee and tea leading to bed, so that's our intimacy

A couple shared that needs for intimacy prior first pregnancy were more tentative with more hinting in the process. The couple felt that they had the time to tease and take their time to engage intimately and cater for each other's individual's needs. During the pregnancy of the second child the couple experienced intimacy as more rushed. This was particularly felt by the female partner as she felt that the couple needed to adjust and adapt to what was experienced as intimacy by the husband who could tune into sexual arousal at a faster pace than his wife. As part of the changing process the couple had to adjust the sequence of intimacy whereas before they had time to build up intimacy.

4.4 Contributing factors for intimacy

Throughout this research it could be noticed that there were various contributing factors which effected the couple's intimacy. It was experienced in this research that intimacy does not exist on its own but is enhanced through different relational experiences which lead to the enhancement of the intimate process.

4.4.1 Attunement

Attunement was considered as a fundamental aspect in the relationship by both partners.

Alex: "the support between us, communication, everything, our thoughts. There is more bond."

Andrew and Christine described how both of them reached a point where they realized that they need to attune more to each other and thus showing motivation to keep that connection ongoing.

In this study, attunement was also linked to the buildup of intimacy which was mentioned by most participants in this research. It was also mentioned that male partners tune in more quickly than the female partners.

Mary: "our love language is also physical, therefore we try and spend a lot of time together, and a lot of intimate time together so that both of us feel that we are loved...for me the time for coffee is an important intimate time, for John the time we sleep together is a very important time."

It could be hypothesised during this research that in order for couples to attune to each other, both components of communication and sexual closeness are seen as an

important component for the couple's attunement to take place. This aspect was shared by the majority of participants in particular by couples who experienced a level of difficulty or levels of stress and insecurities during pregnancy.

4.4.2 Sexual satisfaction

Couples in this research explained how attending to each other's needs for intimacy enabled them to reach a higher level of relational satisfaction which also led to a higher level of sexual satisfaction.

Kevin: "So on Wednesday, we do something that was meant to be intimate but not sexual, to connect kind of physically, not intercourse, communication, talk to each other about it, what we expect out of each other."

This level of intimacy led to more intercourse according to Sarah. In relation to the above, Kevin and Sarah shared how the initial phases of pregnancy had hindered their emotional attunement which had created a lot of anxieties and fears in particular for Sarah. This lead to the couple to rediscover their attunement through commitment and motivation to rediscover and reconnect with each other relationally which indirectly helped them to reconnect on other levels of intimacy including sexually.

65

4.4.3 Partner support

Couples were able to communicate to each other their feelings and also

communicate what would support them in the process. This was noticed through the

majority of the interviews where husbands took the lead in supporting their wives as they

were adjusting through pregnancy but at the same time, when husbands were in distress,

the wives managed to take the role of a containing figure.

Mary: "what we do is carry each other."

From a structural perspective, couples looked at each partner as an equal presence

in taking care of the family when the other partner needs some time and space alone. It

could be noticed that couples seemed to have equal distribution of power and authority

within the family and a sense of dependence on each other's supportive figure. In

addition, couples shared that closeness to one another was strengthened through feeling

cared and experiencing their emotional needs by being validated and cared for by the

other partner even through small little things which comfort the couples.

4.4.4 Sense of security

Participants seemed to experience a high level of security in their relationship

with each other. This could be noticed in the safety couples expressed when talking about

66

their experience of intimacy, how they felt fulfilled and areas which they would like their

partners to work on. Attunement was strongly related to attachment between the couple,

that is, the more the couples attuned to each other the more they fostered a secure

attachment in their relationship.

Females expressed the importance of authenticity in the relationship which fosters

emotional security in one another.

Berta: "it has to be genuine and authentic"

Berta spoke about her experience of reparative attachment with her husband

which supports her in experiencing more containment and trust the relational process, in

particular during the challenging months of pregnancy. The comforting aspect was also

shared by Sarah.

Sarah: Like when I was pregnant and I really needed you to comfort me like when

I had some bad days, you really surprised me and telling me I drew you a bath...you

know that was the best way you could have comforted me by doing something for

me you know...and you have done that a couple of times like.

4.4.5 Knowledge

Majority of the couples expressed that they were well read on specific subjects related to pregnancy and the transition to parenting. Two of the couples were researching information on difficulties during pregnancy which were related to the specificity of their pregnancy. Another participant who came from the helping profession has experienced containment in her training as this helped her process her traumatic experience which resulted from the first pregnancy. Circularity of knowledge was also experienced between the couple where they shared how much the husband learnt through her studies as he listened attentively to her when sharing acquired knowledge during her training in the therapeutic profession. This helped her to enjoy her experience of the second pregnancy more. Attending therapy was also another way for the couple to attain knowledge as couples gained further understanding on each other's needs for intimacy during pregnancy.

Berta: So thankfully am open as a person and it is important that we grow in the field even at a personal level. So I processed it in a way that I could enjoy pregnancy. Otherwise I would not have if I allowed fear to take over...and I come from the therapeutic field and it was not that automatic.

4.5 A containing presence

A commonality among participants in this research was the need to have a containing presence during the perinatal process. This containing presence was also felt

in the way couples described the sense of team work and complicity between one another. Couples felt comfortable with one another to share their needs and attending to each other's needs. Couples also mentioned various factors which effected their needs.

4.5.1 Expressing their needs

The husband as a containing presence was significantly mentioned by both partners, particularly by wives who described them as very supportive. This was felt through the husband's constant presence throughout pregnancy. Wives commented on how they experienced their husbands as nonjudgmental and never took a shaming position towards the wife even during high levels of emotional difficulty.

Moira: "he always understood me. I never hid anything from him...he was supportive, so I knew that I could count on him."

This seems to have contributed in strengthening communication between the couple and assisted them in voicing out the wives' needs more clearly.

4.5.2 Attending to their needs

Women experienced themselves as very open when communicating with their husband during pregnancy, in particular when communicating their needs and emotional states. Female partners expressed how appreciative they were of their husband's understanding and support throughout the process.

Berta: I would be taking the medication during the second pregnancy in order to help with my condition, and he [Kevin] tells me "we are doing everything that we can do" so he is always offering me that sense of grounding which again that is intimacy for me as well.

Throughout the interviews it was mostly highlighted how the husbands supported their wife in their journey through pregnancy. Open communication with their husband has enhanced containment even for their husbands as they had a clearer understanding of how they could be of support to their wife. Through attunement wives could also attend to their husband's emotional needs.

Sarah: When it comes to comforting it is ultimately up to what he wants...so if he had a bad day and he wants to be comforted there's no point in me telling him what would you like to talk about...which is my go to...he tells me just "cuddle me" and I try to do that cause that's how he likes to be comforted.

4.5.3 External factors

It was interesting to note that one of the couples sought therapeutic support during pregnancy when they encountered relational difficulties which they felt they could not address on their own. The couple had maintenance sessions with their counsellor throughout the relationship as a source of enhanced support when they felt stuck in a situation. The educational aspect seems to also carry a level of containment for the majority of the participants. Another couple also found containment in spirituality as they shared how praying together was a source of spiritual support.

Two couples experienced the medical professional as a point of contact when they experienced concerns and needed further clarification. This supported the couples in assessing their reactions.

Alex: I felt a bit concerned as you don't know what might happen, but then the gynecologist's words gave me courage."

Couples also identified the medical professional as a support to help them overcome fears in relation to intercourse, fears about the child's development and help them assess whether they are being too over protective.

71

4.5 Shared responsibility

Aspect of gender was pronounced; through the roles each partner took during the

pregnancy. The subordinate themes shall present gender roles and responsibilities of each

partner in the relationship during the gestational period.

4.6.1 Husband/father's role

A salient aspect which was presented is the shared experience among male

participants who could not identify what were their needs during pregnancy. Husbands

were more task oriented and focused on what needed to be done during that moment.

Kyle: Then it happened one fine day where I fainted. So my body still would have

experienced the shock even though I would not be realizing that it is effecting my

life but at some point I collapsed for a few minutes and was back on my feet.

During this research the fathers' responsibility prevailed among feedback from

husbands as the majority of male respondents felt a sense of responsibility towards taking

care and protecting their wives and their unborn child.

Kevin: "My main focus was taking care of Sarah!"

Couples one and two mentioned that husbands were focused on selling and buying a new house, which also brings the idea of building the nest and preparing the home to start a family. This sense of care towards the wife and the unborn child was experienced among other participants, in particular by Alex who apart from experiencing this heightened sense of care mostly during the first three months of pregnancy which he experienced as "crucial", he also experienced his wife's fears and anxieties as he felt that they were passed onto him. Hence, he took the role to contain those fears in order to support his wife in the process.

Alex: "I spent sleepless nights but how can I say, I tried to give her support...when she is overwhelmed it is very difficult."

Husbands expressed a sense of helplessness, which was seen from how they put their needs aside and accompanied their wives throughout pregnancy. When huasbands were asked in retrospect about their needs during pregnancy, Alex, Kevin, Kyle and Andrew could not recollect as they were too focused on the wife, child and family's needs.

Kevin: "so looking back...honestly I don't think I had time to think about my needs."

Couples two, three, four and five explained how husbands made use of this helplessness and tried their best to be as productive as possible to support their wives throughout the process. It was evidenced that the majority of husbands tried to have a positive attitude which gave their wife reassurance and affirmation throughout pregnancy.

4.6.2 Wife/mother's role

During pregnancy women not only went through a major physical and emotional transition but were also introduced to a new role in their life, that of the expectant mother which felt as an added responsibility. This position was emphasized by Monica who shared that during pregnancy she refrained from doing any house chores out of fear that the baby could be harmed. Monica also shared that if she had to experience pregnancy again she would seek her mother's support rather than being overwhelmed with chores. Kyle and Alex have both supported their wife through a difficult pregnancy and they refrained from sharing their fears with their wife. Added responsibility may be linked to emotional experiences such as fear, anxiety, guilt on the female partners.

Berta: "Initially I felt that fear, and at first I was carrying that guilt that I could have something in pregnancy."

It was mentioned that this may impact the couple's mental health wellbeing.

Women seemed to have embraced their husband's role during pregnancy and they took a role where they seemed to feel entitled to make requests and allow their husbands to assist them in their needs. This brought a sense of sought dependency on the husband, in particular by Mary and Moira.

Mary: "that someone totally depends on somebody else not because the person needs to but wants to."

4.6.3 Couple/parent's role

Parental and relationship role emerged as couples were striking a balance between their role as a couple and their role as parents. This has created a sense of insecurity in the relationship such as with Sarah who experienced Kevin looking at her as a mother.

Sarah: I wanted him to see me as me you know, the Sarah he met and the Sarah he married you know, me as me not as a mum ...plus it's intimate because it's who I am, you know, because if you look beyond being a mum there is a human being there there's Sarah... seeing me for who I am is part of the intimacy, it's part of the sexual intimacy as well...it's like me that you want.

Couples also shared this sense of responsibility towards their relationship in order to keep it alive and keep each other's needs for intimacy as a priority in their relationship.

John and Mary felt intimate even through religion and spirituality during their pregnancy as the role they have taken was seen as "an act of service" and the "value of love".

John: "the value of love that came from the Bible...it is the same love we are trying to live as a family."

The couples shared how they would like to give a different script of what they experienced as romantic intimacy between a couple to their children. All couples wanted them to experience them as couples loving each other, showing intimacy within relational boundaries and allow their children to experience them not only as parents but also as a couple who have intimate needs between them.

Couples expressed the need to prioritize their needs as couples, without ignoring or neglecting their role as parents. Some participants shared that they wanted their lived experience of intimacy different than the one they witnessed between their parents.

Mary: I come from a broken family so I know that my mum gave up everything for her children, and I know that that was one of the causes for their marriage breakdown. So we make it a point that we always take care of our relationship.

Whereas, others, such as Kyle shared his wish to bring aspects of intimacy in his family which he learnt from his parents. He recollected how his father used to first greet his mother and intimately connect with her through hugging and kissing and then he used to focus on the children.

Kevin: definitely from my parents...they were always close. They used to argue but they always showed how to be close...and I think from my mum she was always physically affectionate with me as her son...like she's very caring, loving, so definitely from them.

John: "we want to continue loving each other more than our children...it is very difficult but first is the relationship and then come the children...it does not mean that we give less to our children...not at all."

4.7 Conclusion

In this chapter I presented the five superordinate themes and were accompanied by their respective subordinate themes. Excerpts reflecting the participants' experiences were added to enhance meaning. In chapter 5 I shall be focusing on the in depth discussion of the superordinate themes.

Chapter 5: Interpretation and discussion of findings

5.0 Introduction

In this section I shall present the interpretation and discussion of the themes supported with pertinent literature and personal reflections. The themes will be presented under five superordinate themes presented in the previous chapter which are; Defining intimacy; Intimacy as a process; Contributing factors for intimacy; A containing presence and Shared responsibility. In this discussion I will discuss how couples define their intimacy and their understanding of the process throughout their pregnancy. It also highlights each other's understanding of each other's needs during this transitional period and how it effects the relational process. Through their understanding of intimacy couples were able to attune to the couple's needs and act as a containing presence to each other as they lived through this transitional journey which also highlights how the relationship and pregnancy are a shared responsibility between the couple. This shared responsibility could be facilitated through the couple's investment and willingness to evolve their intimate connection as their roles changed in this transitional period.

5.1 Defining Intimacy

When intimacy was introduced, it could be noted how couples seemed to first think about sexual intimacy and then move towards other important aspects of intimacy which they considered equally or more important. It is possible that ideas about intimacy are a result of social constructs within the local scenario as I believe that it is very common in Malta that

society at large connects the word intimacy to a sexual connotation. These social constructs may also have religious connotations in particular when considering the religious influence on the Maltese islands where sexual intimacy was expected to be reached by married couples (Deguara, 2018). Living in the Maltese islands and also when doing therapy both as a counsellor and as a trainee family therapist, I am privileged to be in position to notice how people during therapy, including therapists at times refer to sexual intimacy through the word intimacy. Growing up on the island I realised how narrowly the term intimacy was used in conversations and I experienced it as using the term intimacy to speak about the unspoken aspects of intimacy related to sexual aspects. This construct may be also influenced through sexual education which was very scarce in the past decades. Possibly due to lack of funding and not being given importance in the academic curriculum.

As I grew up, there was this construct that the more one speaks about it the more one raises curiosity where society back then feared that it may lead to further sexual experimentation, which would also go against the Roman Catholic views which were very strong at that time. This scenario seems to be also present in the United States where Tiefer (2004) stresses the need for a more comprehensive sexual education, which includes media, literacy and also the importance of cross-cultural awareness. One may notice shyness and discomfort when talking about it locally especially when talking to someone not familiar such as during this research context. This aspect coupled with scripts of intimacy may have been a contributing factor for participants to participate in the study as couples who were comfortable talking about their intimate relationship and who looked at intimacy from a broader perspective showed more openness to participate. As Gergen (1999) outlined in his work, what we perceive as knowledge

of the world grows within relationships and is not embedded in individual minds but within interpretative and shared traditions.

During the interviews I was careful to find a balance on how to talk about intimacy. I did not want the participants to experience any hesitation from talking about sexual intimacy as a sign that as a researcher I was uncomfortable talking about it, nor did I want to decrease its importance. Rather I was focused on giving the couples the space to move into different aspects of intimacy which resonate with their relationship.

As I analysed the findings I could appreciate the circularity of intimacy which was presented by couples and how they managed to portray intimacy as relational. Even though each individual in the couple's relationship highlighted at first a specific aspect of intimacy over others, it was brought out from the interviews how one aspect of intimacy was connected to the other leading to harmony in the relationship. This made me reflect on how our own upbringing and ideas we bring from our experiences and ideas of intimacy can position us in giving priority to different aspects of intimacy. It was interesting to note how couples were using intimacy also as an assessment tool to identify how the relationship was doing at that moment. Possibly one may say that intimacy is also used to assess how attuned the partners are to one another. This may be also synonymous with how they experienced others assessing intimacy in other relationships such as parents and other couples in different systems, including exposure to media and social media which portrays different cultures and ideas of intimacy. Marshall (2008) states that within Western culture intimacy is often conceptualized as self-disclosure about personal feelings, thoughts and experiences to one another in a relationship. The way couples described intimacy during the research was concurrent with Sternberg (1997)'s idea of intimacy which encapsulates feelings of closeness, bondedness and connectedness in a close and romantic

relationship which are also concurrent to Richards Chircop (2017)'s study which is cited in this review.

Feeney (1999) indicated that there is a gender difference in need for closeness in which women may connect closeness with emotional connectedness and male through sexual connection. Linking to the above, it may be hypothesised that wives assess that the couple is close through how they talk and connect to each other, whereas the husbands understood that their partners where feeling emotionally engaged as they reach sexual intimacy together. This made me think about a dance, one movement preparing for the next one which creates a dance of intimacy between the couple. Scheinkman (2019) explains that intimacy can be experienced in different areas of a couple's romantic life which includes the sexual, intellectual, creative, spiritual, companionship and the emotional.

Physical intimacy such as touching and kissing is also related to sexual intimacy (Herbenicka, et al., 2019) and in comparison to intimate touching, oral sex and intercourse, kissing occurs far more frequently than other forms of touching (Welsh, Haugen, Widman, Darling, & Grello, 2005). Westernised countries, and in corroboration with other existing literature, romantic kissing plays a significant role in how the relational intimacy develops between the couple and it is also seen as an expression of love in romantic relationships (Thompson, Anisimowicz, & Kulibert, 2019).

Intimacy was also defined through vulnerability, which, as mentioned in this review,

Jankowiak (2015) highlighted how exposed vulnerability enriches the closeness to one another,
through trust and allows the formation of these emotional bonds with one another. This aspect of
nakedness and vulnerability between the couple resonates with the concept of we-ness which
was presented in a local study conducted by Richards Chircop (2017). This aspect was

experienced through the couples' narratives as they were reliving their experience together as they were describing how they co-created a safe and secure space for their intimacy to be nourished.

The presence of connectedness and we-ness could also be witnessed from the way couples used nonverbal communication to connect with one another. During one of the interviews the husband was caressing the wife and playing with her hair as she was sharing intimate experiences. Since interviews were held on an online platform, couples were connecting from the intimate and safe space of their home, the place where they experience their intimacy. Hence, I believe that this has supported the couples to connect together better.

Wades (1998) explains how sexual intimacy encapsulates a wholeness between the body, heart and the spirit through depth of knowing someone and connecting with one another. Wades also explains that in spirituality there is the element of mutuality, informality between the couple and also vulnerability and it is an intimate connection which brings you closer to God. As I attended a Roman Catholic wedding ceremony in Malta, I could experience the ritual of how the couples are introduced as two separate individuals who are merging into a relational whole. This was also done through a ritual when lighting two candles in the beginning of the ceremony and move on to light the candle which represents the unified couple after the vows have been said.

Communication was central in this research which was highlighted when couples shared differences among each other in relation to intimacy. It was interesting to observe how aware each partner was of the other partner's ideas of intimacy which indicated the level of communication the couples had between them. This reflects Sampaio Martins, McNamee and Guanaes- Lorenzi (2014)'s idea that families are created through social processes of negotiating

meaning, hence in line with this, one could experience the couple's unified idea of their relationship through their interactive moments.

There was a lot of comfort and openness among the couples from the way they were validating each other's sense of intimacy. I noticed that the couples were moving in a dance from speaking about the I and moving towards the Us in the relationship which evokes Erikson (1963)'s idea of intimacy which is cited in this review, where he discussed one's selfhood and the fushion of the couple's identities through the couple's own definition of intimacy. This is also emphasised by Baumeister and Bratslavsky (1999) who noticed that self-disclosure between partners increases the experience of closeness and connectedness and also resulted in an increase of sexual desire towards the partner (Murray & Milhausen, 2012).

The couple's nonverbal communication was evidenced through the couples' narratives as they relived their experience together while describing how they co-created a safe and secure space for their intimacy to be nourished. Gergen (1999) describes this process as collective remembering where memories are not seen as pertaining to the individual but are relational phenomena.

Communication turned intimate for the couples when there was emotional attunement. Understanding what each needs was seen as an intimate part of the relationship. Couples learnt how to communicate differently to one another and communicate at a relational level. From a social constructionist perspective, I could appreciate the richness of difference one brings into the relationship through previous experiences when living with the family of origin, friendships and past relationships. This was also evidenced by participants as they felt that all this richness has enabled them to experience the richness they have in their relationship now. Literature review cited in this study also accentuates neuroscientific research and attachment theory which as indicated

by Fonagy & Campbell (2016) intimate connections and maternal love are intrinsically connected. As evidenced by couples, participants tended to adopt intimate ways which they were exposed to during their childhood through their family of origin, extended family, and other relationships which helped them construct ideas of intimacy which continued to evolve in their relationship together and define their own definition of relational intimacy.

Couples explained how they needed time to adjust to the way each other communicated and deconstructed what each other wanted the other to understand when communicating. I could appreciate the importance of Derrida's concept of deconstruction of meaning. I was caught up by how easily we tend to assume that being open means that we are making ourselves understood better and how easy it is to devalue or exclude opposing ideas (Gregory, 2005). This could be also linked to linear thinking in particular when we are positioning ourselves in the I in the relationship. Hence, as Gergen (1999) suggests, meaning and emotions are not the private possession of the individual mind but are derived from the relationship itself. In relation to this Watzlawick (1967) explains how the way we communicate creates feedback loops to one another as the behaviour of one another effects the behaviour of the other in the relationship through either change or stability which is derived from the meaning which one perceives from what the other was communicating.

5.2 Intimacy as a process

The study showed how couples experience intimacy as a process from the beginning of the relationship and keeps evolving systemically. Intimacy is a relational process evolves through time as couples encounter new experiences in their life in particular during major transitions such as the perinatal period and parenthood. When couples join the experience together, it leads to a deeper level of relational intimacy. This concurs with literature which indicates that couples' relationships experience change overtime and has a ripple effect on their intimacy as couples prioritise needs in accordance with the needs of their life stage (Scheinkman, 2019). As explained in review, when a couple unifies together they start strengthening their intimate bonds, share and support each other's goals, and negotiate together the formation of a family (Carter, Garcia-Preto and McGoldrick, 2015).

While in the previous theme vulnerability was presented as an experience which enhanced relational closeness, in this theme vulnerability related physical aspects pertaining pregnancy. Even though ideas about fragility are being challenged through both medical expertise and also post modernistic ideas, vulnerability during pregnancy is still very engrained within the Maltese culture. This could be also passed from one generation to the next in particular from supporting systems such as families of origin and the extended families.

Pregnancy seemed to have affected how the couple regarded each other, how each partner looked at one's self, and how the couple looked at their needs for intimacy during this process which may affect the homeostasis of their intimacy in the relationship due to the changes being lived and experienced and their expectations around this experience. One may postulate that when partners view their wife from a vulnerable position, this may hinder the concept of separating the wife from the child and start looking at them as one fragile human being, which may impinge on the couple's relationship. This highlights the importance of renegotiating intimacy between the couple as they move from being intimate as partners prior pregnancy to a couple expecting a child. This involves feedback, in order to provide self-corrective patterns which would strengthen the relationship (Keeney, 1993). This also meant that couples, in

particular women had to let go of constructs about intimacy which were unrealistic for the couple during perinatal stage and during the transition to parenthood. This concurs with Scheinkman (2019) who explains that when couples are led by expectations of one another, disappointments may be experienced if these expectations are not met. As evidenced in this research, not embracing change meant the relationship was stuck, leading to resentment.

The couples embraced adaptation during pregnancy through enhanced communication in different aspects in their intimate relationship. I noticed how the couples reached a deeper level of intimacy as by time they managed to take their intimate communication to a meta-communicational level with each other. Couples adopted creative ways how to connect as they realised their intimacy was changing during pregnancy. This ability was seen in ways where husbands tried to show their love through showing intimacy in different ways such as when they did things which made a difference for their wife. Hence, couples managed to move away from divergent views of the same experience (Watzlawick, Beaven Bavelas, & Jackson, 1967).

Through this process of meta-communication, couples in particular female partners felt more valued in their relationship. This concurs with highlighted in literature as a contributing factor for couple satisfaction (Scheinkman, 2019).

5.3 Contributing factors for intimacy

Love has a central aspect in the experiential value (Schulenberg, Schnetzer, Winters, & Hutzell, 2010). Throughout this research couples, in particular females expressed the importance of authenticity in the relationship which fosters emotional security in one another, and in line

with Jankowiak (2015) establishes the foundation of trust and is seen as another essential ingredient in the formation of emotional and salient meaningful relationships.

Even though couples did not directly speak about love, it was very evident through their experience of intimacy and sense of security the couples felt with one another. The couple's ideas of love could be experienced from their narrations of their parental love and intimate relationships. Partners who experienced marital conflict between their parents, or who did not experience intimacy between their parents were adamant not to follow their parents' footsteps, especially since they could witness other forms of intimacy through other relationships such as siblings, uncles and aunts and others. On the other hand, partners who experienced a positive and intimate experience between the parents were hoping to bring that experience in their own relationship. In relation to this, Soloski, Pavkov, Sweeney, & Wetchler (2013) indicate that interparental conflict may have contributing factors for relationship outcomes in children exposed to the conflict.

Love is formed through the presence of three important factors in a relationship which are intimacy, passion and commitment (Sternberg, 1997). This aspect was pronounced throughout the interviews where each couple emphasised the importance of each element in the relationship which are discussed among themes in this research. Couples also emphasised how these elements contribute to emotional connectivity in the relationship, which concurs with Bertrando and Arcelloni (2014) presented in the literature review. The couples shared that their closeness was strengthened through feeling cared for and experiencing their emotional needs validated by their partner. Love, intimacy, security and attunement were pronounced evident at several points in the interviews. I experienced the interviews as a means to find space and listen to each other sharing intimate aspects which they were already aware of, but simply wanted to hear again, to

know that they are still connected and bonded to each other the same way as they experience their relationship.

Feeling valued and comforted by the partner continues to strengthen the ideas presented in the review regarding closeness, where each partner showed care and took responsibility for their partner and strengthen the ties of relationship connection and intimacy (Fitness, 2015). A major contributing factor towards intimacy was experienced in the way couples support each other, especially in moments of need. From a structural perspective, couples looked at each partner as an equal in taking care of the family when the other partner needs space alone. Couples seemed to have equal distribution of power and authority within the family and a sense of dependence on each other's supportive figure. This supports Hazan and Shaver (1987), as discussed in the literature review.

Communication and sexual satisfaction can result in relational satisfaction (Litzinger and Gordon, 2005). Thus, transitioning couples to parenthood need to nurture this aspect in their relationship (Haugen, Schmutzer, & Wenzel, 2004; Hazan and Shaver, 1987). This was in line with participant's accounts who experienced that through open communication and having physical closeness during pregnancy has also enriched and led to more sexual intimacy which resulted in more relational satisfaction.

Research indicates that there are a variety of factors which may contribute to increased sexual desire in women, which lead to emotional and mental presence during intercourse (Brotto, Basson, & Luria, 2008). This was evidenced by some of the female participants who apart from connecting this increase to hormonal changes, they also believed that this increase was a result of more attunement in different intimate components which gel their relationship together. This concurs with Basson (2000) which suggests that there are also relational factors such as

emotional closeness which can also contribute to sexual attunement in women. Literature presented earlier indicates that couples tend to be less active during pregnancy, in particular during the first trimester, then experience an increase in sexual intimacy which is then followed by another decline during the third trimester (Haugen, Schmutzer, & Wenzel, 2004). Couples contributed this decline in intimacy to fatigue for the female partner, as well as to the further pronounced presence of their unborn child which triggers thoughts related to risk of harming the child.

5.4 A containing presence

Literature indicates an increase globally in fathers involving themselves during pregnancy (Poh, Koh, Siew Lin, & Hui, 2014). During my research all fathers were very present during pregnancy, and were described as a containing presence for their partners. This was also evidenced by one of the participants who was adamant to go to therapy in order to be present and supportive even during childbirth. It was proven during the study that the togetherness of the couple during pregnancy seemed to have positive relational effects even postpartum, as couples described their intimacy to have become deeper, more mature and continued evolving as they experienced what they perceived as a challenging but beautiful life transition together.

Supportive partners during pregnancy promotes a higher level of psychological wellbeing (Giurgescu & Templin, 2015). This was indicative even during the research where expectant mothers felt contained and cared for by the husband's constant presence during the process through different forms of intimacy. However, in other countries such as in most of African countries, pregnancy is looked upon as an exclusively woman's affair where most male partners do not involve themselves in essential supporting factors such as emotional, physical and socio-

economical support (Sokoya, Farotimi, & Ojewole, 2014). Since all male participants were very present during pregnancy and were very intimate with their wives, it was not possible for this study to compare different findings. I was curious during the research whether less intimacy during pregnancy led to further involvement of other systems such as the extended family and friends, or whether it would have led to further isolation. I was also curious to know how intimacy would have been effected as new supporting figures may have been introduced or if the expectant mother may distance herself.

The containing presence of the couple, in particular that of the husband through pregnancy has led to a stronger bond and a more enriched intimate relationship postpartum. Participants reported how the husband was an instrumental support throughout the process, provided emotional containment and support, showed positive and reassuring attitude and responded to significant moments even by taking care of small details which made a lot of difference for the wives. As I hypothesized, the more the husband contained his wife the more the wife could focus on the relationship and give back. I notice that couples found a rhythm of containment within the relationship which was also experienced as intimate between couples. It was evidenced how each partner took turns to support the other, especially when they could experience the other partner tired. This was significantly noticed with couples who had the second child where partners allowed each other to have the space needed and took over parental responsibilities so that the other partner could find his or her balance again. This concurs with existing literature which states that through husbands' involvement, couples experienced a greater level of trust and love. It also enhanced communication and continued support (Brandon & Stephen, 2020).

5.5 Shared responsibility

During the perinatal period, parents are navigating a new care giving role (Ramsdell, Franz, & Brock, 2020), in strike a balance between their role as a couple and their role as parents. It is noteworthy to point out that there are indeed cultural differences as regards to gender roles which may influence perceived responsibilities (Courtland, 2013). Cultural differences about perceived perceptions and expectations may influence an individual's psychosocial development and consequently attributes of fatherhood are demarcated within cultural ideas of male socialisation in various cultural contexts (Goodnough & Courtland, 1996).

Post-modernistic concepts are gaining more popularity in certain societies including the local context. Hence, fatherhood may exist along a continuum between traditional ideologies and taking a more involved role within the couple's system (Goodnough and Courtland, 1996).

Literature suggests that gendered ideas about fatherhood is influenced by family, community interactions, values and beliefs and cultural realities (Goodnough & Courtland, 1996).

This sheds light on traditional perceived roles of men as providers and assuming protective roles within the family (Courtland, 2013). Male's responsibility and expectations were also discussed in literature which made me wonder the extent of responsibility society is expecting from the expectant fathers not only locally but also at a larger scale. From a social constructionist understanding, as cited in Gergen (1999), Mead suggested that one becomes conscious of oneself and what one truly is through role-taking as one develops a sense of self from others.

Throughout this research I could perceive the male participants taking the role of protectors and providers in the family, to the extent that in retrospect they could not identify

what were their intimate needs during pregnancy. This role has also solidified the aspect of a containing presence in the relationship which was discussed in the previous theme. Throughout the years the role of fatherhood was shifted from the traditional role of economical providers of the family, authoritative, being emotionally stoic and other ideas which encapsulate the traditional role (Elliott, 2015). This was experienced by the majority of the participants in the research in particular among male participants who could not identify with their father, both from the way they experienced their father related to the mother and also to the children. In recent years the idea of involved fathering has started to get more engrained into our culture.

Lamb (2010) described the role of an involved father as being accessible, engaged, showing responsibility and warmth. Hence abolishing traditional and past ideas in the Maltese context were fathers used to kiss their children when they were fast asleep as well as ideas were male partners distanced themselves from pregnancy and left the female partner to handle pregnancy on their own while they provided for the family. Recent conceptualization of fathering is moving towards advocating on the importance of emotionally involved fathers (Elliott, 2015). The fathers in this study seemed to embrace the role of what Elliott (2015) termed as caring masculinity prior the birth of the child. Couples believed that they carried the responsibility to expose their children to what they perceived as a strong and intimate relationship, not only as a couple but also as parents. Couples believe that the stronger their intimacy and love is towards each other as a couple, the more they will act as role models for their children, encapsulating what Dermott (2008) termed as intimate fathering where fathers value close bonding, perceiving love as a meeting minds between family members through continuous communication and self-disclosure.

Expectant mothers seem to take a new role which may be influenced by society's ideas and expectations about women. Looking at expectant mothers from a social constructionist perspective, there seems to be the idea that pregnancy denotes enhanced vulnerability in women this may be due to social education about the effects of stress on pregnant women (Lederman & Weis, 2020). In addition, there is also added responsibility towards the unborn child. Thus, such positions denote a need for support which when looking at my general hypothesis, this may add further responsibility on the husband who tries to take ownership of responsibilities which were generally shared between the couple. Within the local context, traditional ideas have widely accepted and at times expected that a pregnant woman involved herself in the least household duties as possible in particular when it comes to lifting, and getting tired.

From a systemic perspective, such ideas may reinforce the idea of helplessness, and also hinder communication processes which may create some distancing between the couple as husbands, did not share their concerns. Kyle and Alex both supported their wife during pregnancy and they refrained from sharing their fears. This may have been also the result of mental health awareness which is being advocated at a local level. Agius (2021) reports that around fifty to eighty percent of expectant mothers may encounter postnatal depression, which may be experienced by one out of four fathers. Hence, this may have possibly denoted mental health vulnerability during pregnancy and concern on both partners in particular on the expectant mother, which may have contributed to the fathers keeping concerns to themselves.

5.6.0 Reflexivity

5.6.1 My personal reflections on the research study

This study presented a homogeneous sample of five couples who were attuned and very close to one another. From the interviews and the extracted themes, I could notice that a positive aspect of how couples experienced their intimacy emerged. During this research I was wondering how intimacy would have been affected when interviewing couples who did not feel as close, who were not as attuned or who did not have a secure attachment. As I reflected, I could notice that participants' commitment in the relationship exceeded the one year criteria stipulated for this research. In addition, all participants were married. Linking to Azzopardi (2007), it is possible that married couples who have been together for a number of years may have already negotiated ideas and constructs of a coherent and unified story about their intimate relationship which may have contributed to safety for couples to participate. This may explain why participants were already familiar with their partner's responses. This evoked the idea of safety and security for participants to talk about intimate aspects in front of their partner when they do not feel intimately safe. It also helped me reflect about couples attending therapy, and how important it is for practitioners to establish safety in the relationship. Conducting individual interviews may have generated further interest in participating in the study and more safety for disclosure. In addition, couples seemed to all operate from a secure attachment, which they have worked on as they attuned to each other's needs. I was wondering how couples with different attachment styles would have contributed to this research.

An important aspect which I perceived as a contributing factor to intimacy was the therapeutic aspect. The majority of participants had therapeutic background either by profession

or by attending therapy which may have contributed to self-awareness and how their process impacts the relationship. Another commonality among participants is the exposure to higher education. The majority of participants had a tertiary educational level, whereas two participants were well exposed to the therapeutic field through their partner's studies. During the research I could notice that language and emotional literacy were very present in the participants' accounts. This makes me wonder whether it was a contributing factor in how couples communicated their intimate needs towards each other. The language aspect may have enabled participants to deconstruct their idea of intimacy at a deeper and relational level.

The research also exposed husbands' commitment and sacrifice which were new concepts for me. When looking at literature and even at local level, I felt more exposed to information about lack of involvement of husbands in the pregnancy process. In this study husbands took a front line position to support their wives which their constant presence was considered as one of the most contributing factors in the couples' intimate process during their transition to parenthood.

Even though the focus of this research was on intimacy during pregnancy, I could notice how two of the couples connected with the guilt, fear and difficulties experienced during pregnancy. Couples connected this aspect to their intimacy and their intimate relationship supported the process. Yet, I wondered how couples who do not feel intimately supported deal with emotional turmoil and how this may contribute to mental health difficulties during the perinatal period.

During the research interviews and as I was analysing transcripts I experienced participants indirectly defining love through different forms of intimacy including; connection, presence, commitment, and attunement to each other's needs. Their growth of intimacy which

was achieved while experiencing pregnancy together with the challenges and new experiences it brought seems to have supported the couples into evolving their meaning of relational love.

5.6.2 My personal reflections on my process during the research

The interview process was performed in what Rober (2005/2015) defined as a multi-actor process, where my "self' as a researcher and my inner conversations throughout the interview may have possibly influenced the interviewees. From a Bakhtinian perspective as cited in Rober (2005), I could see how rationality and relationships cannot be disengaged. I could not totally separate my thinking from the relationship with the participants, and ideas evoked as the participants shared their experience of intimacy. As I am writing my reflections I am recollecting certain points during the interviews such as with John and Mary who expressed that they need to love each other more than the children. It was a concept which never crossed my mind and I felt that I needed to stay with that and understand what was being said. Hence, I asked more questions around it in order to understand it better and understand the participant's interpretation of what was being said.

As a mother of two and I was blessed to experience pregnancy twice with all its challenges and rewards it brings. As I listened to the participants, their experiences resonated with mine, however I had to be careful not to interpret their experience through my own. As Gergen (1999) explains through a Bakhtinian point of view, every action we make represents our experience in past relationships and concurrently effects our movement in the current relationship. Hence, by carrying past dialogues into the present we also take an active responsive attitude towards what is being said (Gergen, 1999). I am aware that there is a small age

difference between me and some of the participants, and even though I experienced my last pregnancy nine years ago, I acknowledge that my experience and how I experienced my relationship with my husband during that process have contributed in how I experienced the interview and the participants. Yet, I was aware of the aspects which were resonating with my own experiences and other aspects which were different.

As a researcher I tried to give attention to all aspects being evoked during the interviews and also when processing the interviews, so that I would not allow my biases to hinder the research process. This was greatly supported with reflexive discussions with my supervisor who could challenge my biases and ideas about the research. Apart from that I took some time to distance myself from the research when needed so that I could focus more on my own process, constructs and ideas. This was also supported through literature, through keeping a journal of my own reflections and reflexive discussions with other therapists who could support me in the process of understanding my own process in the research.

Chapter 6: Conclusion

This study was aimed at gaining further understanding on the couple's intimate experience during pregnancy. An IPA was adopted for this study in order to acquire a retrospective view of the couple's recollected experience of their intimacy during pregnancy. Sample for this study was homogenous. The research was based in the local context and couples recruited for this study were Maltese. Five heterosexual married couples participated in the study of which three gave birth to their second child. Data was collected through semi-structured interviews with couples. Due to the global pandemic interviews were held on zoom.

Couples highlighted the importance of the intimate connection and bonding through their romantic relationship, which as described by participants, it does not start and end with pregnancy but starts with the formation of the couple's unified relationship and continues to evolve and deepen with every challenge and transition experienced together as a couple. It was highlighted how pregnancy enabled participants to reach a deeper level of intimacy which created a newness in what they perceived as intimacy. Possibly, during the gestational period even their intimacy was reborn and renewed as the couples could understand and appreciate different intimacies which they may have not experienced enough prior this life transition.

The participants in this study expressed how intimacy is also a relational process where one aspect of intimacy leads to another in a circular and interconnected way. Even though each partner was drawn to particular intimate aspects of the relationship more than others, in particular sexual intimacy, emotional intimacy, attunement and intimate communication, they showed awareness on the importance on attuning to their partner's needs. Hence, by validating and attending to the other partner's needs for intimacy, the partner responded through joining

their partner in their respective intimate need in return. This has contributed in creating a circular pattern of reciprocity where the more a partner gives to one another the more the partner will give in return. This may be related to strategic ideas such as Watzlawzick (1967) who suggested that every member of a family is influenced by the behaviour of another member.

Stemming from Minuchin (1974)'s structural perspective one may note how roles continue to adapt and change in particular during major life transitions such as pregnancy. It was noted that during this period husbands started embracing the father's role by protecting the child, trying to be in control of every situation. The study also shows how during pregnancy mothers started adjusting to the role of a mother, experiencing heightened responsibility towards the wellbeing of the unborn child. Both partners try to adjust to the roles of parents and partners at the same time which in the process has unbalanced the homeostasis of their relationship until the couple could renegotiate their intimate priorities at a relational level. This led to an adjustment to their intimate process and in their change in patterns which led to intimacy.

Couples also brought scripts about intimacy into relationship which were constructed through past relationships, family of origin and other experiences. It could be noted how partners narrated sexual scripts, relational and romantic scripts which influenced their relationship as they try to rewrite their script or when embracing them and reliving them in their intimate relationship. This was also reflected in how couples are trying to create an intimate script to pass on to their children.

5.7 Clinical implications

In recent years, perinatal period started gaining more social awareness and more education is being devoted to the matter. The clinical exploration of couple's relationship during the perinatal period is still emerging at a local level. This interest may be also related to the and growing mental health awareness which is being advocated locally and internationally.

Even though this research focuses on the intimate relationship of married couples, it can be of support to governmental officials and policy makers in addressing perinatal mental health as the research highlights how intimacy between the couple can strengthen the relationship and support each partner through the challenges which the perinatal period brings along. This research also indicates how intimacy is an ongoing process for the couples which needs to be taken care of throughout the relational process and not only during specific life transitions. Hence, more funding and accessibility for expectant couples to gain awareness and access therapeutic support during this transition may be taken into consideration. In addition, systemic collaboration between health and mental health professionals needs to be given further attention.

This research may also support therapists in gaining more awareness on the importance of therapeutic interventions in supporting couples in nourishing and building attunement on different aspects of intimacy. Therapists may also gain awareness on the importance in working retrospectively on the couple's intimacy during pregnancy which may have fragmented intimacy, which may still be effecting the relationship. The study also highlights the importance of timely therapeutic interventions through couple work which may support the couples in understanding each other's intimate needs more effectively, and hence reduce marital conflict which may

eventually lead to separation or divorce. By supporting the couples through the perinatal period may also support in sustaining mental health wellbeing of children.

As a final comment, this study also stresses the importance of the paternal presence during this transition and hence may support policy makers in gaining a better understanding of the evolving role of the father in today's society. Hence, governmental officials may take into consideration the importance to review parental leave and family friendly measures which cater for the couple's and family's needs.

5.8 Limitations of this study

Since the study is qualitative it enabled me to elicit the meaningful experiences of participants, but could not provide the quantitative data which may give further insight on the general population.

In addition, since the study was conducted among Maltese couples, it could not incorporate the richness of experiences of couples from different cultural backgrounds. In particular, when taking into consideration that in Malta there has been a relative increase in multi-cultural couples which may exhibit different needs for intimacy during the perinatal period. Another limitation of the study is that it does not represent different religions which are also present in the local context and which may have rich contributing information in understanding intimacy during pregnancy. The study also focused on heterosexual married couples, hence it does not represent intimate experiences from LGBTIQ couples, nor couples who were not married. Moreover, since couples were all around the same age group, the study

presents a limitation as it does not present the experiences of other couples from different age groups.

While in the beginning of the research I was planning to conduct a pilot study in order to gain more insight on the interviewing questions, due to the limited number of participants the pilot study could not be done. Nevertheless, I continued to review questions throughout the interviewing process, following IPA guidelines. The partners were interviewed together which undoubtedly shed more insight on the intimate relationship, yet, interviewing the partners separately would have also highlighted further insight from the individual perspective on the relationship.

Even though the interview process was held in the couples' home environment, participants may have still been careful on disclosing when considering that they were being observed by a researcher and also recorded. I was also aware that participants may have felt that they did not have permission to evoke certain aspects of intimacy in front of me, which undoubtedly would have contributed to the richness of the research. Participants may have also omitted aspects which they perceived as irrelevant for the study, or simply added certain detail as I may have certain characteristics which may help them perceive me as more understanding such being closer in age.

Since all male participants were very present during pregnancy and were very intimate with their wives, it was not possible for this study to compare different findings. It is possible that couples who did not feel secure enough to speak in front of each other about their intimacy in their relationship may have opted not to participate. Finally, conducting an adult attachment

interview as part of the research would have also enabled me to assess better the attachment styles of the participants and how this may have contributed to the couples' intimacy during pregnancy.

5.9 Recommendations for future research

As mentioned above, the study had various limitations which may be addressed in future research within the local context. Since the Maltese population is blending with different cultural contexts it is proposed to conduct studies about intimate relationships which include different cultures and ethnic groups.

It would be also helpful to gain more insight on intimacy within same sex romantic relationships and others. It would be noteworthy to highlight the importance to conduct local research on the needs of the expectant fathers as research tends to focus mainly on the needs of the expectant mothers. Yet, if expectant fathers are better supported even at understanding their own needs during this delicate period, they may be in a better position to be more emotionally present and more containing for their partners. Further research should also be dedicated to the effects of social media on the expectant couples and how this effects their expectations and constructs of intimate relationship.

Local research on couples who are not intimately attuned during pregnancy may shed more insight on the couple's needs for intimacy and how the relationship may be impacted. This may possibly generate further awareness on how the relationship may be effected during and post pregnancy and possibly gain further information on relationship discord.

It would be interesting to research how emotional literacy and fluency in language may impact the couple's negotiation of intimacy during different stages of the relationship, in particular when locally there is a higher demand towards achieving a higher educational level within the country (Gauci, 2021).

As a final recommendation, conducting longitudinal studies may support researchers in having deeper understanding of the process of intimacy through different stages of the couple's life cycle.

5.10 Final thoughts

As a concluding note to this research, the couples highlighted how understanding their needs of intimacy during pregnancy and carrying each other during challenging processes in this life journey enabled them to strengthen their love and intimate bond which enabled the couple not only to survive the challenges during pregnancy but their intimacy was bonded enough to endure beyond.

References

- Abela, A. (2005). Uncovering beliefs embedded in the culture and its implications for practice: the case of Maltese married couples. *The Association for Family Therapy*, 27, 3-23.
- Abela, A., Vella, S., & Piscopo, S. (2020). Couple Relationships in a Global Context:

 Understanding Love and Intimacy accross Cultures. Switzerland: Springer.
- Alase, A. (2017, April). The Interpretative Phenomenological Analysis (IPA): A Guide to a Good. *International Journal of Education & Literacy Studies*, 5(2), 9-19.
- Anderson, R. (2011). Intuitive Inquiry: Exploring the Mirroring Discourse of Disease. In F. J. Wertz, K. Charmaz, L. M. McMullen, R. Josselson, R. Anderson, & E. McSpadden, *Five Ways of Doing Qualitative Analysis: Phenomenological Psychology, Grounded Theory, Discourse Analysis, Narrative Analysis and Intiutive Inquiry* (pp. 243-272). New York: Guilford Press.
- Attard Micallef, H. (2015). Stories of Coupes during their transition to parenthood (Unpublished Masters Dissertation). Malta: Institute of Family Therapy.
- Azzopardi, C. (2007). Expectations of Marriage Before & After Marriage Among Maltese Catholic Couples. London: University of East London.
- Barcellos Rezende, C. (2010). The Experience of Pregnancy: Subjectivity and social relations.

 The experience of pregnancy: body, subjectivity and, 526-549.
- Basson, R. (2000). The female sexual response: A different Model. *Journal of Sex & Marital Therapy*, 26(1), 51-65.

- Bertrando, P., & Arcelloni, T. (2014). Emotions in the Practice of Systemic. *Australian and New Zealand Journal of Family Therap*(35), 123–135. doi:10.1002/anzf.1051
- Bifulco, A., & Thomas, G. (2013). *Understanding Adult Attachment in amily Realtionships:**Research, Assessment and Intervention. Canada: Routledge.
- Boulder County. (2021). Retrieved from Boulder County Public Health: https://www.bouldercounty.org/families/lgbtiq/lgbtiq-definitions/
- Brandon, P. E., & Stephen, T. F. (2020). Active Husband Involvement During Pregnancy: A

 Grounded Theory. Family relations. Interdisciplinery Journal of Applied Family Science,
 70(4), 1222-1237. Retrieved from https://doi.org/10.1111/fare.12486
- Brotto, L. A., Basson, R., & Luria, M. (2008). A Mindfulness-Based Group Psychoeducational Intervention Targeting Sexual Arousal Disorder in Women. *The Journal of Sexual Medicine*, *5*(7), 1646-1659.
- Burr, V. (2015). Social Constructionism (3 ed.). London: Routledge.
- Butzer, B., & Campbell, L. (2008). Adult attachment, sexual satisfaction, and relationship satisfaction: A study of married couples. *Personal Relationships*, *15*, 141-154.
- Carter, E. A., Garcia-Preto, N., & McGoldrick, M. (2015). *The Expanded Family Life Cycle* (4 ed.). England: Pearsons.
- Clulow, C. (2001). Adult Attachment and Couple Psychotherapy: "The Secure Base" in Practice and Research. London: Routledge.
- Clulow, C. (2009). Sex, Attachment and Couple Psychotherapy: Psychoanalytic Perspective.

 London: Karnac.

- Courtland, C. L. (2013). *Multicultural Counseling: New Approaches to Diversity* (4 ed.). United States of America: American Counselling Association.
- Dallos, R., & Draper, R. (2010). An Introduction to Famiy Therapy: Systemic Theory and Practice (3 ed.). UK: Open University Press.
- Dallos, R., & Draper, R. (2015). An Introduction to Family Therapy: Systemic Theory and Practice (4 ed.). England: Open University Press.
- Dallos, R., & Vetere, A. (2012). Systems Theory, Family Attachments and Processes of Triangulation: Does the Concept of Triangulation Offer a Useful Bridge? *Journal of Family Therapy*, 34(2), 117-137.
- Deguara, A. (2018). Between faith and love? : sexual morality and religious belief among LGBT and cohabiting Catholics in Malta and Sicily (Unpublished Doctoral dissertation). Malta:

 University of Malta. Retrieved from

 https://www.um.edu.mt/library/oar/handle/123456789/36977
- Dienhart, A. (1998). *Understanding Families: Reshaping Fatherhood* (Vol. 12). (B. N. Adams, & D. M. Klein, Eds.) London: Sage Publications.
- Dissertation Laerd. (2012). (Lund research Ltd) Retrieved from Principles of research ethics: https://dissertation.laerd.com/principles-of-research-ethics.php
- Dudgeon, M. R., & Inhorn, M. C. (2004). Men's influences on women's reproductive health: medical anthropological perspectives. *Social Science & Medicine*, *59*(7), 1379-1395.

- Edelstein, R. S., Wardecker, B. M., Chopik, W. J., Moors, A. C., Shipman, E. L., & Lin, N. J. (2014, December 15). Prenatal hormones in first-time expectant parents: Longitudinal changes and within-couple correlations.
- Elliott, K. (2015). Caring Masculinities: Theorizing an Emerging Concept. *Original Manuscript*, 1-20.
- Feeney, J. A. (1999, October 1). Issues of Closeness and Distance in Dating Relationships: Effects of Sex and Attachment Style. *Journal of Social and Personal Relationships*, 16(5), 571-590.
- Ferreira, R. T. (2014). Meaning in couples relationships. *Psychology in Russia: State of the art*, 7(3), 126-135.
- Fitness, J. (2015). Emotions in Relationships. In M. Mikulincer, P. R. Shaver, J. A. Simpson, & J. F. Dovidio, John, *APA handbook of personality and social psychology* (Vol. 3, pp. 297-318). American Psychological Association. doi:10.1037/14344-011
- Fonagy, P., & Campbell, C. (2016). Attachment Theory and mentalization. In A. Elliott, & J. Prager, *The Routledge Handbook of Psychoanalysis in the Social Sciences and Humanities* (1 ed., pp. 115-131). New York: Routledge.
- Frost, D. M. (2012). The narrative Construction of Intimacy and effect in relationship stories: Implications for relationship quality and mental health. *Journal of Social and Personal Relationships*, 30(3), 247–269. doi:10.1177/0265407512454463
- Gauci, T. (2021). An analysis of educational attainment in Malta. Malta: Central Bank of Malta.
- Gergen, K. J. (1999). An invitation to Social Construction. London: Sage.

- Gillath, O., Karantzas, G. C., & Fraley, C. R. (2016). *Adult Attachment: A Concise Introduction to Theory and Research*. London: Elsevier.
- Giurgescu, C., & Templin, T. (2015). Father involvement and psychological well-being of pregnant women. *MCN Am J Matern Child Nurs*, 40(6), 381-387. doi:10.1097/NMC.0000000000000183
- Given, L. M. (2008). *The SAGE Encyclopedia of Qualitative Research Methods* (Vol. 1 and 2). Los Angeles: Sage Publications, Inc.
- Golafshani, N. (2003, December 4). Understanding Reliability and Validity in Qualitative Research. *The Qualitative Report*, 8(4), 597-607.
- Goodnough, G. E., & Courtland, C. L. (1996). Contemporary fatherhood: Concepts and issues for mental health counselors. *Journal of Mental Health Counseling*, 18(4).
- Gregory, R. J. (2005). The Deconstructive Experience. *American Journal of Psychotherapy*, 59(4), 295-305.
- Harvey, J. H., Wenzel, A., & Sprecher, S. (2004). *The Handbook of Sexuality in Close Relationships*. London: Lawrence Erlbaum Associates, Publishers.
- Haugen, E. N., Schmutzer, P. A., & Wenzel, A. (2004). Sexuality and the Partner Relationship

 During Pregnancy and the Postpartum Period. In J. H. Harvey, A. Wenzel, & S. Sprecher

 (Eds.), *The Handbook of Sexuality in Close Relationships* (pp. 411-436). London:

 Lawrence Erlbaum Associates, Publishers.
- Hazan, C., & Shaver, P. (1987). Romantic Love Conceptualized as an Attachment Process. *Journal of Personality and Social Psychology*, 52(3), 511-524.

- Healy, M., & Perry, C. (2000). Comprehensive criteria to judge validity and reliability of qualitative research within the realism paradigm. *Qualitative Market Research: An International Journal*, 3(3), 118-126.
- Herbenicka, D., Fu, T.-C., Owens, C., Bartelt, E., Dodge, B., Reece, M., & Fortenberry, D. J. (2019). Kissing, Cuddling, and Massage at Most Recent Sexual Event: Findings From a U.S. Nationally Representative Probability Sample. *Journal of Sex and Marital Therapy*, 45(2), 159-172.
- Hodgkinson, E. L., Smith, D. M., & Wittkowski, A. (2014). Women's experiences of their pregnancy and postpartum body image: a systematic review and meta-synthesis. *BMC Pregnancy and Childbirth*, 1-11.
- Holmes, J. (2001). *Adult attachment and Couple Psyhotherapy*. (C. Clulow, Ed.) London: Brunner-Routledge.
- Jankowiak, W. (2015, April 20). Intimacy. In A. B. Whelehan, *The International Encyclopedia of Human Sexuality*. John Wiley & Sons, Ltd. doi:https://doi.org/10.1002/9781118896877
- Josselson, R. (2011). Narrative Research: Deconstructing and Reconstructing Story. In F. J. Wertz, K. Charmaz, L. M. McMullen, R. Josselson, F. J. Wertz, & E. McSpadden, *Five Ways of Doing Qualitative Research: Phenomenological Psychology, Grounded Theory, Discourse Analysis, Narrative Research, and Intuitive Inquiry* (pp. 224-242). New York: The Guilford Press.

- Kirkpatrick, L. A., & Hazan, C. (1994). Attachment styles and close relationships: A four-year prospective study. *Personal Relationships*, *1*, 123-142. doi:10.1111/j.1475-6811.1994.tb00058.x
- Knudson-Martin, C., & Rankin Mahoney, A. (2009). *Couples, Gender, and Power: Creating Change in Intimate Relationships*. New York, United States of America: Springer Publishing Company.
- Lederman, R. P., & Weis, K. P. (2020). Psychosocial Adaptation to Pregnancy: seven dimensions of maternal development. (4 ed.). Switzerland: Springer Nature.
- Lorenz, T. K., Ramsdell, E. L., & Brooke, R. L. (2020, January 10). A Close and Supportive nterparental Bond During Pregnancy Predicts Greater Decline in Sexual Activity from Pregnancy to Postpartum: Applying an Evolutionery Perspective. *Frontiers in Psychology*, 10(2974), 1-11. doi:10.3389/fpsyg.2019.02974
- Marshall, T. C. (2008). Cultural differences in intimacy: The influence of gender-role ideology and individualism-collectivism. *Journal of Social and Personal Relationships*, 25(1), 143-168.
- Masek, D. J., & Aron, A. (2004). *Handbook of Closeness and Intimacy*. London: Lawrence Erlbaum and Associates, Publishers.
- Merriam, S. B., & Tisdell, E. J. (2016). *Qualitative reserch: A Guide to Design and Implementation* (4 ed.). United States of America: John Wiley & Sons.
- Mikulincher, M., & Shaver, P. R. (2007). *Attachment in Adulthood: Structure, Dynamics and Change*. New York, United States of America: The Guilford Press.

- Minuchin, S. (1974). *Families and Family Therapy*. United States of America: Harvard University Press.
- Murray, S., & Milhausen, R. (2012). Factors impacting women's sexual desire: Examining long-term relationships in emerging adulthood. *The Canadian Journal of Human Sexuality*, 21(2), 101-116.
- Naveen, J., & Knudson-Martin, C. (2012). Building Connection: Attunement and Gender Equality in Heterosexual Relationships. *Journal of Couple & Relationship Therapy*, 11, 95-111. doi:10.1080/15332691.2012.666497
- Olàh, L. S. (2015). Changing families in the European Union:. Families and Socities, 44, 1-56.
- Papp, P. (2000). *Couples on the Fault line: New Directions for Therapists*. New York: The Guilford Press.
- Patton, M. Q. (2014). *Qualitative Research & Evaluation Methods: Integrating Theory and Practice*. United States of America: Sage Publications.
- Poh, H. L., Koh, S., Siew Lin, S., & Hui, C. (2014, June). First-time fathers' experiences and needs during pregnancy and childbirth: A descriptive qualitative study. *Midwifery*, *30*(6), 1-9.
- Ramsdell, E. L., Franz, M., & Brock, R. L. (2020, January). A Multifaceted and Dyadic Examination of Intimate Relationship Quality during Pregnancy: Implications for Global Relationship Satisfaction. *Family Process*, *59*(2), 556-570.
- Reynolds, E. M. (1992). Socially Constructing Sexuality: Toward a Postmodernist: Theory of Sexual Intimacy. *Theory & Philosophy*, *Pyschology*., *12*(1), 38-47.

- Rovers, M. (2004). Family of Origin Theory, Attachment Theory and. *Journal of Couple & Relationship Therapy*, *3*(4), 43-63. doi:10.1300/J398v03n04_03
- Rubin, R. (1984, December). Maternal Identity and Maternal Experience. New York: Springer.
- Sanchez, D. T., Phelan, J. E., Moss-Racusin, C. A., & Good, J. J. (2012, March 22). The Gender Role Motivation Model of Women's Sexually Submissive Behaviour and Satisfaction in Heterosexual Couples. *Personality and Social Psychology Bulletin*, 38(4), pp. 528-539. doi:10.1177/0146167211430088
- Scheinkman, M. (2019). Intimacies: An Integrative Multicultural Framework for Couple Therapy. *Family Process*, *58*, 550–568.
- Schmied, V., & Lupton, D. (2001, May 30). The externality of the inside: body images of pregnancy. *Nursing Inquiry*, 8(1), pp. 32-40.
- Schulenberg, S. E., Schnetzer, L. W., Winters, M. R., & Hutzell, R. R. (2010). Meaning-Centered Couples Therapy: Logotherapy and Intimate. *Journal of Contemporary Psychotherapy: On the Cutting Edge of Modern Developments in Psychotherapy*, 40(2), 95-102. doi:https://doi.org/10.1007/s10879-009-9134-4
- Schwebel, A. I. (2008, October 15). Pregnancy, Intimacy, and the Family Constitution. *Journal of Couples Therapy*, 8(2), 7-16. doi:10.1300/J036v08n02_02
- Sherman, R. (1993). Marital Issues of Intimacy and Techniques for Change: An Adlerian Systems Perspective. *Individual Psychology*, 49(3), 318-329.
- Siegel, D. J. (2012). *The Developing Mind: How relationships and the Brain Interact to Shape Who We Are* (2 ed.). New York: The Guilford Press.

- Skjothaug, T., Smith, L., Wentzel, L. T., & Moe, V. (2015). Prospective Fathers' Adverse

 Childhood Experiences, Pregnancy-Related Anxiety, and Depression during Pregnancy.

 Infant Mental Health Journal, 36(1), 104–113. https://doi.org/10.1002/imhj.21485. *Infant Mental Health Journal*, 36(1), 104-113. doi:https://doi.org/10.1002/imhj.21485
- Smith, J. A., Flower, P., & Larkin, M. (2009). *Interpretative Phenomenological Analysis:*Theory, Method and Research. London: Sage.
- Sokoya, M., Farotimi, A., & Ojewole, F. (2014). Women's perception of husbands' support during pregnancy, labour and delivery. *IOSR Journal of Nursing and Health Science*, 3, 45-50. doi:10.9790/1959-03314550
- Sternberg, R. (1997). Construct validation of a triangular love scale. *European Journal of Social Psychology*, 27, 313-335. doi:https://doi.org/10.1002/(SICI)1099-0992(199705)27:3<313::AID-EJSP824>3.0.CO;2-4
- The Australian Parenting Website. (2017). Retrieved from raisingchildren.net.au:

 https://raisingchildren.net.au/pregnancy/preparing-for-a-baby/relationships/healthy-relationships-pregnancy
- Thompson, A. E., Anisimowicz, Y., & Kulibert, D. (2019). A kiss is worth a thousand words: the development and validation of a scale measuring motives for romantic kissing. *Sexual and Relationship Therapy*, *34*(1), 54-74.
- University of California San Francisco. (2021). *The Three trimesters Obstetrics and Gynecology*.

 Retrieved from Pregnancy and the three trimseters:

 https://www.ucsfhealth.org/conditions/pregnancy/trimesters

- Watzlawick, P., Beaven Bavelas, J., & Jackson, D. D. (1967). *Pragmatics of Human*Communication: A Study of Interactional Patterns, Pathologies and Paradoxes. New York: W.W. Norton & Company. Inc.
- Weingarten, K. (1991). The Discourses of Intimacy: Adding A Social Constructionist and Femminist View. *Family Process*, *30*, 285-305.
- Welsh, D. P., Haugen, P. T., Widman, L. N., Darling, N., & Grello, C. M. (2005, December).
 Kissing is good: A developmental investigation of sexuality in adolescent romantic couples. Sexuality Reserch and Social Policy, 2(4), 32-41.
- Yerby, J. (1995). Family systems theory reconsidered: Integrating social construction theory and dialectical process. *Communication Theory*, *5*, 339-365.
- Yoo , H., & Bartle-Haring, S. (2014, November 24). Couple Communication, Emotional and Sexual Intimacy,. *Journal of Sex & Marital Therapy*, 40(4), 275-293. doi:10.1080/0092623X.2012.751072

Appendices

Appendix A: The process of pregnancy

Prior presenting literature on couples and pregnancy I felt it was pertinent to present this research with some understanding of pregnancy. This is aimed to support the reader in understanding the major changes the couples experience as presented in the literature that follows.

A full term pregnancy takes a period of forty weeks and is divided into three trimesters. During the first trimester (0 to 13 weeks) the expecting mother's body goes through major changes. These changes are generally related to a number of symptoms, commonly nausea, breast tenderness, tiredness and frequent urination. During the second trimester (14 to 26 weeks) the expectant mother tends to experience less unpleasant symptoms which were present during the first trimester. However, she may still experience other symptoms such as back pain and heartburns. It is common that when the expectant mother reaches 16 to 20 weeks, she starts feeling the baby's first movements. During the final stage of pregnancy (third trimester) the expectant mother may experience shortness of breath, varicose veins, hemorrhoids and constipation (University of California San Francisco, 2021).

Appendix B: Information Sheet

I would like to express my gratitude for showing an interest in participating in this study.

My name is Lucienne Perera Vega and I am a Masters student at the Institute of Family therapy (IFT-Malta). In partial fulfilment of my Masters in Systemic Family Therapy, I am conducting a research on couples who went through pregnancy and have an infant. Throughout this research I am under the supervision of Ms Geraldine Ellul Bonici (Systemic Family Psychotherapist).

The research question for my study is "how couples experience intimacy during pregnancy?"

The aim of this study is to explore retrospectively the intimate experience of the couple as they were expecting a child/children. My interest in this research is to gain a better understanding on what meaning do couples give to the intimate connection and how do couples experience closeness during this major life event in their lives.

In order to gain more knowledge on this research I shall be exploring the lived experiences of the couple through qualitative research and I shall be analysing information through interpretative phenomenological analysis. This shall be done through face to face or on line platform interviews. The interviews will be held with the couple simultaneously and shall be about 60 minutes duration. The interviewing session will be held only once unless there will be further areas which may need to be explored.

In order to participate in this study, both partners need to give a written consent. The interview session will be audio recorded. Due to the current global pandemic, if for safety issues face to face interviews may not be recommended, interviews can be held on an online platform and session will be recorded.

Each recording shall be kept and disposed of according to the General Data Protection Regulation

(GDPR) following completion of the study. The identity of participants shall be kept anonymous.

Any recordings shall be destroyed upon achieving a successful completion of results. Names and

other identifiable information shall be changed in order to protect anonymity of each participant.

Participation to this study is voluntary and each participant has the right to withdraw from the

study at any stage. During the planning of this research, it was important to ensure that participation

to this research would not lead to any harm to the participants. However, a session will be provided

for support by Ms Geraldine Ellul Bonici should participation in the research evoke any signs of

distress.

Should there be any questions or clarifications even following completion of interviews you are

encouraged to contact me personally on luciennepv@gmail.com and/or on my mobile number

79252277.

I would like to take the opportunity to thank you for your time in reading this information and for

considering participation.

Kind regards,

Lucienne Perera Vega

Karta ta' Informazzjoni

Nixtieq nesprimi l-gratitudni tieghi talli wrejtu interess li tippartecipaw f'dan l-istudju.

Jisimni Lucienne Perera Vega u jien studenta tal-*Masters* fl-Istitut tat-Terapija tal-Familja (IFT-Malta). Bħala parti mit-twettiq tal-*Masters* tiegħi fit-Terapija Sistemika tal-Familja, qed nagħmel riċerka dwar koppji li għaddew mil-proċess tat-tqala u għandhom tarbija. Matul din ir-riċerka ninsab taħt is-superviżjoni tas-Sinjura Geraldine Ellul Bonici (Psikoterapista Sistemika tal-Familja).

Il-mistoqsija tar-riċerka għall-istudju tiegħi hija "kif il-koppji jesperjenzaw l-intimità waqt it-tqala?"

L-għan ta 'dan l-istudju huwa li nesplora retrospettivament l-esperjenza intima tal-koppja hekk kif kienu qed jistennew tarbija. L-interess tiegħi f'din ir-riċerka huwa li nikseb għarfien aħjar dwar liema tifsira jagħtu l-koppji għall-intimita` u kif il-koppji jesperjenzaw ruħhom viċin xulxin matul dan l-avveniment tant importanti f'ħajjithom.

Sabiex nikseb aktar għarfien dwar din ir-riċerka se nkun qed nesplora l-esperjenzi li jgħixu l-koppji permezz ta 'riċerka kwalitattiva u ser inkun qed nanalizza l-informazzjoni permezz ta' analiżi fenomenoloġika interpretattiva. Dan għandu jsir permezz ta 'intervisti wiċċ imb'wiċċ jew fuq pjattaforma onlajn. L-intervisti se jsiru mal-koppja simultanjament u għandhom idumu madwar 60 minuta. Is-sessjoni tal-intervisti se ssir darba biss sakemm ma jkunx hemm oqsma oħra li jista 'jkun hemm bżonn li jiġu esplorati.

Sabiex jipparteċipaw f'dan l-istudju, il-koppja għandhom jagħtu kunsens bil-miktub. Is-sessjoni tal-intervista tkun irreġistrata bl-awdjo. Minħabba l-pandemija globali kurrenti, jekk għal

kwistjonijiet ta 'sigurtà intervisti wiċċ imb wiċċ jistgħu ma jkunux irrakkomandati, l-intervisti jistgħu jsiru fuq pjattaforma onlajn u s-sessjoni tiġi rreġistrata.

Kull reģistrazzjoni għandha tinżamm u tiġi mħasra skont ir-Regolament Ĝenerali dwar il-Protezzjoni tad-Dejta (GDPR) wara li jitlesta l-istudju. L-identità tal-parteċipanti għandha tinżamm anonima. Kwalunkwe reġistrazzjoni għandha titħassar malli nikseb b'suċċess ir-riżultati. Ismijiet u informazzjoni oħra identifikabbli għandhom jinbidlu sabiex tiġi protetta l-anonimità ta 'kull parteċipant.

Il-parteċipazzjoni għal dan l-istudju hija volontarja u kull parteċipant għandu d-dritt li jirtira mill-istudju fi kwalunkwe stadju. Matul l-ippjanar ta 'din ir-riċerka, kien importanti li jiġi żgurat li l-parteċipazzjoni f'din ir-riċerka ma twassal għall-ebda ħsara lill-parteċipanti. Madankollu, se tiġi ofruta sessjoni ta' sapport Mis-Sinjura Geraldine Ellul Bonici lil dawk il-parteċipanti li l-parteċipazzjoni tagħhom fir-riċerka bi xi mod qanqlet xi diffikultajiet.

Jekk ikun hemm xi mistoqsijiet jew kjarifiki anke wara li jitlestew l-intervisti int imħeġġeġ tikkuntattjani personalment fuq luciennepv@gmail.com u / jew fuq in-numru tal-mowbajl tiegħi 79252277.

Nixtieq nieħu l-opportunità biex nirringrazzjakom tal-ħin tagħkom fil-qari ta 'din l-informazzjoni u talli kkunsidrajtu l-parteċipazzjoni.

Tislijiet,

Lucienne Perera Vega

Appendix C: Consent Form

Following reading and understanding the information sheet provided prior the consent form, you are kindly asked to read the following statements carefully and sign if you agree with all statements.

I declare that I have fully read and understood the information provided in this sheet.

I understand that my participation in this research is voluntarily and that I can withdraw my consent at any time without having to give a reason to the researcher or to the Institute of Family Therapy.

The researcher has explained the purpose of the study and any concerns which I may have on this research including risks which may be incurred during the research process.

The researcher gave me the opportunity to ask questions and I am satisfied with the responses provided and any queries and or misunderstandings have been clarified.

I have been informed that identifiable information including names shall be kept confidential and that recordings shall be destroyed upon successful competition of the study

By signing hereunder, we are agreeing that we have discussed and agreed to participate in this study.

A copy of the consent form sha	If be given to me f	or my record.	
Name of Participant:		Signature:	
Name of Participant:		Signature:	
Researcher:	Date:	Signature:	

Formula ta' Kunsens

Wara li taqra u tifhem il-folja ta 'informazzjoni pprovduta qabel il-formola tal-kunsens, int ġentilment mitlub taqra d-dikjarazzjonijiet li ġejjin b'attenzjoni u tiffirma jekk taqbel maddikjarazzjonijiet kollha.

Niddikjara li qrajt u fhimt bis-shiħ l-informazzjoni pprovduta f'din il-folja.

Nifhem li l-partecipazzjoni tiegħi f'din ir-ricerka hija volontarja u li nista 'nirtira l-kunsens tiegħi fi kwalunkwe ħin mingħajr ma jkolli nagħti raġuni lir-ricerkatur jew lill-Istitut tat-Terapija tal-Familja.

Ir-riċerkatur spjega l-iskop ta 'l-istudju u kwalunkwe tħassib li jista' jkolli dwar din ir-riċerka inklużi r-riskji li jistgħu jiġu mġarrba matul il-proċess tar-riċerka.

Ir-riċerkatur tani l-opportunità li nistaqsi mistoqsijiet u jien sodisfatt bit-tweģibiet mogħtija u kwalunkwe mistoqsija u jew nuqqas ta 'ftehim ġew iċċarati.

Ġejt infurmat li informazzjoni identifikabbli inklużi l-ismijiet għandhom jinżammu kunfidenzjali u li r-reģistrazzjonijiet għandhom jinqerdu mal-kompetizzjoni b'suċċess tal-istudju

Bl-iffirmar hawn taħt, qed naqblu li ddiskutejna u qbilna li nipparteċipaw f'dan l-istudju.

Isem il-Parteċipant:		Firma:	
Isem il-Partecipant:		_ Firma:	
Riċerkatur:	Data:	Firma:	

Kopja tal-formola tal-kunsens għandha tingħata lili għar-rekord tiegħi.

Appendix D: Guiding questions

- 1. What is your idea of intimacy?
- 2. How would you describe your experience of intimacy before pregnancy?
- 3. How was your experience of intimacy during pregnancy?
- 4. During this transition, from being a couple to being a couple expecting a child, did you have to do any adjustments to your intimacy? What kind of adjustments?
- 5. How did you communicate your need for intimacy to each other?
- 6. In what way did your need for intimacy change if any throughout pregnancy?
- 7. From where did you learn how to be intimate in a relationship?
- 8. How did you learn how to take care of others?
- 9. What have you learnt from your families of origin about intimacy? What do you value or feel critical about in your families' relationships?
- 10. How did these values contribute to your intimate relationship?
- 11. How do you comfort your partner?
- 12. What do you want to do the same? What do you want to do differently?
- 13. How has your intimacy during pregnancy contributed to your intimacy following childbirth?
- 14. In retrospect, if you had to relive the experience, how would you like to experience your intimacy?
- 15. As you listened to each other during the interview, what have you learnt about each other's need for intimacy?

127

Appendix E: Excerpts in Maltese

Superordinate theme 1: Defining intimacy

Physical

Mary: Jiddependi l-fazi li nkunu fiha..em...jibda mil-fsied, il-hin li nitghanqu, ghax inhobbu

nitghanqu hafna f' sens ta' nitbewsu, imghad il-hin li norqdu flimkien...inhobbu hafna nitghanqu

wkoll, ghalina l-physical hug ma xulxin hija importnati hafna matul il-gurnata.

John: Inkun bil-wiegfa gharwien guddiemha...u mhux biss fizikalment imma anki tarani

gharwien fuq livel emozzjonali u spiritwali quddiemha...ghaliha..."

Emotional

Berta: Mela, l-idea taghna ta' intimita' tvarja hafna fil-fehma tieghi...tista'tevolvi em jigifieri

trid tkun vera subjective fil-fehma tieghi jiena narha u tvarja f'kullhadd anki fil-kopja u ghalija

hija connection, spending time together, enjoying, bonding, u tista' tvarja b' being together u

anka fejn jidhol sess ukoll. Ma nemminx li fejn jidhol intimita' huwa biss sess imma tvarja

hafna...it's a buildup, minn naha tieghi narha...

Communication

Berta: "Jiena ghalija wkoll jekk qed nikkomunikaw ghalija its intimacy."

Kyle: "Konna nitkellmu kif qaltlek, il-problemi konna niddiljawhom sew."

M: Imbaghad maghha kienet tigi dirett immense, jiena rrid hekk hekk u hekk...that's all I

need...gahx qed nghidlek verbalment qed nghidlek litteralment gahndi bzonn hekk hekk u

hekk...li gieli nsibha u nzertajt f'relazzjonijiet ohra hija li gieli titkellem ma nies jew pjuttost

nies ikellmuni, jghiduli xi haga li jkun hemm the hidden message li jiena miniex kapaci ninterpretah hafna drabi ghax jien imdorri straight and plain very direct "dejjaqtni itlaq l'hemm" "ghandi bzonn hekk hekk u hekk, gara hekk hekk u hekk" jiena vera directive

Superordinate theme 2: Intimacy as a process

The couple's intimacy before pregnancy

Kyle: Qabel it-tfal fulfilling, Mhux hux biex-tikkompara qabel u wara it-tfal ghax qiesni ma nikkomarahomx imma dejjem hassejnti fulfilled ma Berta biex nifthemu...f'kull livell....ma nikkumparax ghax qabel jew wara mhux qiesek ghandek gauge u tnaqqas u zzid imma evolviet f' xi haga differenti...qiesu dak li kont taf qabel it-tfal skrapjah u evolviet f' xi haga differenti wara. Qiesu xi haga totalment gdida

John: "It was very beautiful...erm...kwazi konna naghmlu l-hin kollu...it-was very good."

The couple's intimacy during pregnancy

John: "U kien, I used to do it to make her feel loved fis-sens it was an act of service u hekk."

Berta: Waqt it-tqala, I was very clear waqt it tqala loud and clear nahseb, ghandi bzonn hekk,
ghandi bzonn hekk...mhxu ghax inbdilt ta' imma hassejtni l-fatt illi qed ingorr baby hassejtni li

ghandi dritt li nghidlek isma da nil-baby taghna so mhux ghalija biss mela apprufittajt naqra hehe hassejtni iktar open.

Berta: qieshom is-sinjali inbidlu u gejna izjed attuned...nafu lil xulxin illum il-guranta u anki b'harsa ninduan llum il-gurnata so l-affarijeit ehe evolvew which is good as well...there is no right or worng narha jigifieri kelna naddattaw

Monica: Per ezempju s-sess l-ewwel tlett xhur ma ridtx xjn igifieri xhur ta wara qisna kont naghmel biex nikkuntentah ghalija bil-biza' igifieri li kieku stajt knt nippreferi naghmel disa` xhur b'xejn igifieri biex zgur ma jigri xejn.

Berta: So qiesu fil-bidu bdejt b'dik il-biza` u li l-ewwel kont ingorr dik il-guilt li stajt naghmel xi haga jiena fil-pregnancy ghax jiena dejjem bqajt ghaddejja, bqajt nohrog il-klieb tieghi kbar flewwel pregnancy. Kultant tghid li stajt ghamilt xi haga hazina.

Mary: Jiena ezempju kont inhossni vera kerha u hu kien jghidli kemm int sabiha, kemm int sabiha...so it helped me feel more into it...imma tara zaqqek kbira.... kif qed jghid...imma it was always important for us to feel intimate together

Andrew: tara zaqq speci tikber I mean... bla ma trid igifieri mhux tinkwieta ta imma you pay attention u tghid... ma nafx if speci if something goes wrong what can happen

Intimacy as an investment

John: Jien ghalija ma taghmilx differenza jekk id-dar tkunx nadifa jew le imma out of love kont naqbad il-hin kollu nahsel l-art u hekk. It used to make her happy.

Time and Space for intimacy

Berta: Li kieku ma tevolviex l-anqas nitkellmu jew naraw lil xulxin aktar ezempju kieku ghandna rabja tremenda fuqna ghax bil-kemm ikolna cans nitkellmu so we had to do that and we had to be creative how to intimately connect anki fit-tqala, fit-tieni wiehed specjalment

John: Pero` we don't' see it as a performance per ezempju, we see it as love etc...intimacy starts...dejjem tibda minn fuq il-mejda, minn fuq il-mejda tal-ikel, mill-kafe` u t-te` jigifieri sassodda, jigifieri that's our intimacy

Subordinate theme 3: Contributing factors of intimacy

Attunement

Alex: jien nahseb bhala l-istess, support li jkun hem bejnietna, komunikazzjoni, erm hsibijiet taghna hux, kollox...ikun hemm iktar, il bond tkun...

Mary: F' sens ukoll, il-love language taghna hija wkoll physical allura nipruvaw inqattaw hafna hin flimkien u hafna hin ta' intimita' flimkien so that both of us feel that we are loved...jiena ghalija l-hin tal-kafe' huwa hin ta' intimita' importanti hafna u ghal John il-hin li norqdu flimkien huwa hin importanti hafna...u vice versa wkoll imma minhabba li kif il-love languages taghna kif inhuma iktar inhossu dawk il-bzonnijiet

Knowledge

Berta: so thankfully jiena persuna open u fil-field importanti li nikbru u mhux biss fil-field imma importanti li anki maghna infusna so I processed it b'tali mod li I could enjoy the pregnancy...ghax li kieku l-biza' hakmitni ma kontx probabli...u jien gejja mill-filed therapeutic and it wasn't that automatic, li kelli nahdem fuqha.

Superordinate theme 4: A containing presence

Expressing their needs

Moira: Hu dejjem fehemni fis-sens illi erm qatt ma hbejt minnhu taf kif minn xiex jien ghadejja, kemm kont qed inhossni lonely erm kemm so dak nahseb li wasalna s'hawn qisu sforz kemm hdimna ghalih snin igifieri anke waqt it-tqala li specjalment hu l-aktar kellna, kien ta support ghalija so jien kont naf illi qisni fih nista' nafda I can be open he won't judge naf li fih insib support so nahseb f'dak is-sens ikontribwixxit.

Attending to their needs

Berta: nkun qed niehu l-medicina fit-tieni wiehed biex tghin..., li kelna naghmlu qed naghmluh...jigifieri dejjem qed jofrili dak is-sense of grounding li again that is intimacy ghalija wkoll...jigifieri avolja l-esperjenza ma kinietx daqshekk plain sailing qiesu xorta fil-mument ilfatt li kien prezenti ghalija ghenet u ofrili certu emotional support.

132

External factors

Alex: Kont inhossni naqra inkwetat ghax ma tafx x'jista' jigri fhimtni imma imbghad bil-kelma

tal-gynae kienet qisha ghamlitli l-kuragg

Superordinate theme 5: Shared responsibility

Husband/ father's role

Kyle: "imbghad giet one fine day fejn taghna hass hazin jigifieri l-qata' kollha gismi jkun hadha

kollha xorta ghalkemm ma nkunx qed nirealizza li qed taffetwali hajtni imma at some point

blum, nikrolla ghal ftit minuti u nerga nigi fuq saqajja, imbghad..."

Alex: "Kont naghmel l-iljieli ma norqodx imma kont kif taqbad tghid, kont intiha is support uu

nipprova. Imma kif qaltlek hi meta tkun, hi meta jkun qed jinkwetaha xi haga difficli hafna."

Wife/mother's role

Berta: fil-bidu bdejt b'dik il-biza` u li l-ewwel kont ingorr dik il-guilt li stajt naghmel xi haga

jiena fil-pregnancy

Mary: "Li xi hadd jista' jiddependi fuq xi hadd iehor totalment mhux ghax ghandu bzonnu imma

ghax irid."

Couple/parents role

Mary: Jiena gejja minn familja naqra broken allura naf li l-mummy tieghi tghat kollox ghat-tfal keinet, u naf li dak kien one of the causes for their marriage breakdown so we make it a point that we always take care of our relationship

John: Ahna rridu nibqu nhobbu lil xulxin izjed mit-tfal...it is very difficult imma l-ewwel hija r-relazzjoni imbghad it-tfal...ma jfissirx li we give less to our children...at all not