



MSU Graduate Theses

Fall 2016

A Qualitative Study On The Meaning Of Having A Child For Mothers Who Were Abused In Their Childhood

Maki Shigematsu

As with any intellectual project, the content and views expressed in this thesis may be considered objectionable by some readers. However, this student-scholar's work has been judged to have academic value by the student's thesis committee members trained in the discipline. The content and views expressed in this thesis are those of the student-scholar and are not endorsed by Missouri State University, its Graduate College, or its employees.

Follow this and additional works at: https://bearworks.missouristate.edu/theses



Part of the Child Psychology Commons

Recommended Citation

Shigematsu, Maki, "A Qualitative Study On The Meaning Of Having A Child For Mothers Who Were Abused In Their Childhood" (2016). MSU Graduate Theses. 3045.

https://bearworks.missouristate.edu/theses/3045

This article or document was made available through BearWorks, the institutional repository of Missouri State University. The work contained in it may be protected by copyright and require permission of the copyright holder for reuse or redistribution.

For more information, please contact bearworks@missouristate.edu.

A QUALITATIVE STUDY ON THE MEANING OF HAVING A CHILD FOR MOTHERS WHO WERE ABUSED IN THEIR CHILDHOOD

A Masters Thesis

Presented to

The Graduate College of

Missouri State University

In Partial Fulfillment

Of the Requirements for the Degree

Master of Science, Early Childhood and Family Development

By

Maki Shigematsu

December 2016

Copyright 2016 by Maki Shigematsu

A QUALITATIVE STUDY ON THE MEANING OF HAVING A CHILD FOR

MOTHERS WHO WERE ABUSED IN THEIR CHILDHOOD

Childhood Education & Family Studies

Missouri State University, December 2016

Master of Science

Maki Shigematsu

ABSTRACT

The purpose of this research is to understand what having a child means for mothers who experienced child abuse, how their children affected the motherhood positively, and how the mothers tried to overcome their child abuse experiences. Three mothers were found as participants for the study. The data were collected by qualitative, open-ended interviews. Each of the mothers had one interview that lasted around 1-1.5 hours. The mothers' lived-experiences are portrayed with analysis and in-depth interpretation. The study shows how child abuse experiences impacted the participants' lives and parenting, how the participants made progress in their experiences growing up, and how raising their children had a positive effect on their lives. All the mothers faced and analyzed their present parenting. This research develops a fuller understanding of the brightness of their motherhood. These results will help and inspire other professionals, such as social workers, to understand people who have had similar experiences.

KEYWORDS: child abuse, emotional child abuse, overcoming from child abuse, phenomenology method, essentialist portraiture, narrative method, life stories of the motherhood

This abstract is approved as to form and content

David R. Goodwin, PhD Chairperson, Advisory Committee Missouri State University

A QUALITATIVE STUDY ON THE MEANING OF HAVING A CHILD FOR MOTHERS WHO WERE ABUSED IN THEIR CHILDHOOD

 $\mathbf{B}\mathbf{y}$

Maki Shigematsu

A Masters Thesis
Submitted to the Graduate College
Of Missouri State University
In Partial Fulfillment of the Requirements
For the Degree of Master of Science, Early Childhood and Family Development

December 2016

ppro	oved:
	David R. Goodwin, PhD
	Joan E. Test, EdD
	James A. Meyer, PhD
	Julie Masterson, PhD: Dean, Graduate College

ACKNOWLEDGEMENTS

The completion of this study had many individuals' influence, support, and assistance. I would like to thank and acknowledge the support that encouraged me.

First, I would like to appreciate the mothers who contributed this research as participants. They opened mind, made time, and shared their life stories for this research. It was precious to listen to their stories, and it was meaningful to me. Their efforts and stories inspired me significantly to study about child abuse issues. I was truly encouraged by their strength, bravery, faith and hope.

I want to thank the parenting facility's executive director and social workers. They helped me find the participants through their connections. They tried to support what I needed for this research, asked and explained to the mothers about my research and me, took me to the mothers' houses, and encouraged my research. Without their help, it would have been significantly difficult to find participants for my research.

I want to thank my advisor, Dr. David R. Goodwin, for providing me the knowledge and directions for understanding deeper meaning of the participants and analyzing them. He always encouraged and made time for me and my research. His encouragement saved me many times when I had to face to understand reliably the mothers stories.

A huge thank my committee members, Dr. Joan E. Test and Dr. James A. Meyer, for making their time and effort in the completion of my thesis. I also want to thank my first advisor, Dr. Joanna J. Cemore Brigden for making my foundation of the research. Dr. Brigden taught me about the phenomenology method and encouraged me to do qualitative research for finding my research questions. Without all the help, I might not have been able to finish this research. I significantly appreciate all above support, kindness and encouragement.

TABLE OF CONTENTS

Introduction	1
Purpose and Design	3
Significance	
Assumptions and Limitations	
Definition of Terms	
Literature Review	
Definitions and Types of Child Abuse	
The Impact of Child Abuse	
Relation Child Abuse Experiences and Parenting	
Care and Support for Prevention of Child Abuse	
Conclusion	24
Methodology	28
Research Design	
Site and Participant Selection	
Data Collection Procedures	
Interview Approach	
Data Analysis	
Establishing Trustworthiness	
Amalassia	11
Analysis	
Mother (M1)	
Mother 2 (M2)	
Mother3 (M3)	00
Discussion and Conclusion	.101
Negative Impacts of Child Abuse on the Participants and Their Parenting	.102
The Importance of Support (from Their Family and Outside)	
Breaking Their Negative Cycle of Child Abuse	
The Brightness of Their Motherhood	
Conclusion	.120
Limitations and Recommendation	
References	.123
Appendices	
Appendix A. Examples from Each of the Mother's Transcripts	
Appendix B. Example of a Timeline	
Appendix C. The Missouri State University Institutional Review Board (IRB).	
Appendix D. Informed Consent Document	
Appendix E. Letter for a Person Who May be a Witting Participant	.135

Appendix F. Letter for a Person Who May Help to Find Participants	136
Appendix G. Questions of Demographics	138

INTRODUCTION

According to the Institute of Medicine and National Research Council (2012), child abuse and neglect issues have been explored by researchers, social workers, teachers and other professionals who have been involved with children for the past two decades. Many forms of research, support, and prevention activities have been proposed for this issue. However, most of the research on child abuse is often quantitative research, and the research focuses on how child abuse affects people's lives (Berlin, Appleyard, & Dodge, 2011; Dixon, Browne, & Hamilton-Giachritsis, 2005; Fujiwara, Okuyama, & Izumi, 2012; Kim & Cicchetti, 2010; Simon et al., 2009). Dixon, Browne, and Hamilton-Giachritsis (2005) examine the negative effects of abuse on children that results in a cycle of abuse. It is commonly thought that the cycle of child abuse is more likely to repeat in the next generation. Child abuse happens not only due to family history, but when there are mixed and complicated reasons behind the abuse, such as poverty, mental illness, substance abuse or alcoholism (Barth, 2009). However, it was very difficult to find research that studied how abused mothers get on with their own lives with their children, how they try to overcome their negative childhoods as mothers, and how they interact with their children in their daily lives in qualitative research.

There are mainly four types of child abuse: sexual, physical, emotional (psychological), and neglect (Child Welfare Information Gateway, 2013) All types of child abuse and neglect are important to study and have a significant impact on child development and their later life (Crosson-Tower, 2008). Details on the types of child abuse, how child abuse will impact victims, and their future parenting, as well as care and

support are discussed in my literature review. I originally intended to focus on emotional child abuse because I experienced that type of abuse while growing up. Due to examining my experience, I wanted to know how having and raising children affects the mothers who have experienced child abuse through using the qualitative interview approach.

Emotional child abuse is defined as when children are hurt emotionally, such as through constant criticism, threats, or rejection, and lack of love, support, or guidance from parents or caregivers (Child Welfare Information Gateway, 2013). Emotional child abuse is more likely to affect the molding of the abused children's characters, making or having relationships with people, and mental health issues (DeRobertis, 2004; Giardino, 2007; Kim & Cicchetti, 2010; Simon et al., 2009). Also, child abuse may negatively affect the victims' future parenting (Dixon, Browne, & Hamilton-Giachritsis, 2005). The abused parents may be more likely to repeat child abuse with their own children (Dixon, et al.). Fujiwara, Okuyama, and Izumi (2012) mentioned that abused mothers tend to have mental health issues, such as depression, which reduced their parenting quality. The reason for focusing on emotional child abuse for this study is that there is not enough research and care that is specialized for emotional child abuse (Leeson & Nixon, 2010). However, Shannon (2009) mentioned that emotional child abuse often appears with other types of child abuse, such as sexual, physical, or neglect.

This qualitative research employs open-ended interviews (Creswell, 1998; Van Manen, 1990) and in-depth analysis (Witz, Lee, & Huang, 2010), to listen to mothers who experienced child abuse and what having a child means for them. This study helps in understanding how having children affects the mothers who grew up with abuse in their own childhood households. In addition, this research focuses on their resilience through

raising their children as mothers, even though they had experienced child abuse. This study sheds light on understanding how the abused mothers are struggling to overcome their traumatizing experiences. Mother1 is trying to be "a good mother." Mother2 is trying to be "better" at handling her mental health and substance abuse. Mother3 is trying to "heal" emotionally. Understanding those mothers could encourage other victims of child abuse to overcome childhood trauma. This study may also support parents who have had similar experiences to understand how abuse impacts motherhood, by providing authentic individual cases. Moreover, this research may inspire other professionals, such as social workers, by showing positive aspects of the mothers.

Purpose and Design

The purpose of this study is to explore the meaning of having a child for mothers who were abused emotionally in their childhood. This study also examines how child abuse experiences impact the mothers' lives, and how their experiences affect their childrearing. However, this study focuses more on how the mothers tried to overcome their negative experiences through their parenting.

The grand tour (main) question (Creswell, 1998) of this research is: What does having a child mean for mothers who were abused emotionally in their childhood? This study addressed the answer of the question through interview data and in-depth interpretation. Details of methodology of this study, such as other interview questions, place, sample size, participants, and qualitative research methods, will be discussed in the methodology chapter. Through this research, I found results that I discussed in the conclusion chapter of this research (discussion and conclusion): (a) negative impacts of

child abuse on the participants and their parenting, (b) the importance of support (from their families and outside), (c) breaking their negative cycle of child abuse, (d) the brightness of their motherhood.

This study uses qualitative interview research and mixed methods: phenomenological method (Creswell, 1998; Van Manen, 1990), essentialist portraiture approach (Witz, Lee, & Huang, 2010), narrative method (Gay, Mills, & Airasian, 2012). I worked with three mothers, and conducted open-ended interviews with each of the mothers for about one and half hours. I made transcriptions for each interview and analyzed their lived-experiences (Van Manen, 2014) with in-depth interpretation.

Significance

It is important to understand how mothers who have experienced child abuse are interacting with their children and overcoming their traumatic experiences in their daily lives. There is not much qualitative research that focuses on mothers lived-experiences or tries to understand the brightness (positive aspects) of motherhood. Many studies of child abuse that I found for my literature review (e.g. DeRobertis, 2004; Giardino, 2007; Kim & Cicchetti, 2010) focused on the negative impact of child abuse issues. It is understandable that child abuse affects children negatively since the incidence itself already is traumatic and unhealthy. The negative impact of child abuse should be researched to provide more effective support, care, and prevention. However, on the other hand, how child abuse victims try to overcome, heal, and deal with the experiences should be researched as well to give others hope and encouragement. Also, understanding

their lived-experience will help to improve treatments, support, and programs for the victims and their families.

Assumptions and Limitations

It is assumed that participants shared accurately and truthfully their personal experiences for the interview questions. As a limitation, I did not have control over how the participants answered the interview questions. As someone who has had child abuse experiences, I tried to focus on more positive aspects than negative aspects from my participants. This attitude would emphasize the mothers' positive experiences when I portrayed their motherhoods, and it could be considered a limitation of my research.

Definition of Terms

For a clearer understanding of this study's definition of terms, I have explained below:

- 1. *Child abuse* can describe four types, which are sexual, physical, emotional (psychological), and neglect in this study (Child Welfare Information Gateway, 2013).
- 2. Grand tour question is a main question or central question that I try to answer in this study. According to Creswell (1998), the grand tour question is unrestricted and is used various ways to conduct the interviews from "tell me about yourself," to more specific questions" (p. 99).
- 3. Lived-experiences is a term of the phenomenological method, and is the individuals' experiences that "explore directly the originary or prereflective dimensions of human existence: life as we live it" (Van Manen, 2014, p. 39). According to Van Manen, the English word for experience does not contain the meaning "lived." However, the German word for experience, *erlebnis*, includes the word, *leben*, which means life or to live, and as a verb *erleben* means "living through something," so lived experience is this active and passive living through experience" (Van Manen, p. 39).
- 4. *Higher aspects* is a term that came from Witz, Lee, and Huang (2010) in a study about an approach of essentialist portraiture. Higher aspects is essentially the central motivation

of a person's life, and it includes "moral-ethical, metaphysical, social and spiritual (including religious) higher principles, values, and ideals and experience ..." (p. 397). This study did not include all of the above elements, but I used the word to portray the participants' humanity and subtle pervasive consciousness.

LITERATURE REVIEW

This literature review focuses on how child abuse impacts the child's behaviors, mental health, and lives. This study focuses mainly on emotional child abuse. However, it was difficult to find research that talks about only emotional child abuse since emotional child abuse is often linked to other types of child abuse. Hence, this literature review refers to basic types of child abuse: physical, emotional and sexual child abuse and neglect, but this review tends to focus more on emotional abuse, how it affects later life, and what prevention of future child abuse is for future generations.

The first section on definitions and types of child abuse explains types of child abuse and the differences between them. The second section addresses the impact of child abuse, for example, how children would be mentally affected by the experiences, and how they reflect on these experiences in their lives. The third section focuses more on parenting, especially how mothers' parenting affects children. The fourth section examines how the abused children and parents who have abuse experiences should be cared for and included in discussions of future child abuse prevention. The conclusion presents the questions formed and answers found through this literature review and discusses future studies of the issues.

Definitions and Types of Child Abuse

According to the Child Welfare Information Gateway (2013), there are four types of child abuse: physical, sexual, emotional (psychological) abuse and neglect. Physical harms, such as hitting and kicking, will be physical abuse. Sexual abuse is when children

are molested by adults (e.g. caregivers or parents), such as fondling a child's genitals, penetration, sodomy and rape, and forcing children to do a sexual act, such as child pornography. Besharov (1990) mentioned that all types of sexual abuse are also considered serious psychological abuse. Neglect is identified when children are ignored physically, medically, educationally and emotionally. The Child Welfare Information Gateway defined emotional abuse as when children are hurt emotionally, such as through constant criticism, threats, or rejection. In addition, lack of love, support, or guidance from parents or caregivers may be emotional abuse (Child Welfare Information Gateway, 2013).

Shannon (2009) mentioned that there are cases that are only emotional child abuse, but emotional child abuse usually appears with other child abuse, such as physical, sexual abuse or neglect. The author categorized types of emotional child abuse and explained how the child abuse negatively affects children's cognitive, emotional, psychological, and social development. Shannon also divided emotional child abuse into seven types: ignoring, rejecting, isolating, exploiting or corrupting, verbally assaulting, terrorizing, and neglecting the children. Ignoring: Parents or caregivers do not respond to their children physically or emotionally, and they may not call children's name or look at the children. Rejecting: Parents or caregivers refuse to respond to the children's needs, such as providing affection. Isolating: Parents or caregivers make children avoid having normal social interactions with family members, peers, and adults, and this may include confining and limiting children. Exploiting or corrupting: Children will be faced, taught, or encouraged to develop inappropriate or illegal behaviors. The development or behaviors may involve by self-destructive or antisocial actions, such as stealing or forced

prostitution. Verbal assault: Making children feel constantly belittled, shamed, ridiculed, or threated verbally. Terrorizing: Parents or caregivers create a climate of fear by threating or bullying. This can include placing something children love, such as a sibling or pet, in a dangerous situation, or threating to harm the children if the children do not meet unrealistic or rigid expectations. Neglecting the child: Educational neglect mental health neglect, or medical neglect may be included in this type of abuse. Educational neglect is when parents and caregivers refuse or do not provide for children's educational needs or services. When parents or caregivers deny or ignore the children's need for psychological treatment, it is mental health neglect. Medical neglect is when parents or caregivers avoid taking care of children medically.

Besharov (1990) explained how people could recognize child abuse in his book. Detections of child abuse will help rescue children. He introduced a checklist for suspicious situations, the way that people can report, explanations of child abuse, and differences between discipline and child abuse. According to him, all cases of punishing or disciplining children should be "reasonable." This means that disciplining should not have any of the characteristics in the above lists.

Crosson-Tower (2008) introduced comprehensive child abuse issues, such as historical perspective child abuse, definition and system of a family, child development, and all types of child abuse issues in her book. Discipline is always a controversial topic because corporal punishment might mean putting children in a mold of "moral, Godfearing, respectful human being" (Crosson-Tower, p. 3). According to the Child Welfare Manual from the Missouri Department of Social Services website, discipline "is a positive learning experience that sets behavioral limits and guidelines to lead children to

and through adulthood" (Section 7, Chapter 3, n.d.). They said that discipline does not create children's shame or guilt, but discipline helps children to think, learn, grow intellectually and emotionally, and enrich their self-confidence and self-image. Parents can discipline children without any emotional or physical violence and pain. Besharov (1990) said that if there are acts, such as inadequate nurturance, habitual scapegoating, belittling, taunting, or rejecting behaviors from a parent to a child, it will be thought of as emotional child abuse.

Shannon (2009) mentioned that emotional child abuse will happen because a parent or caregiver has stress, not enough parenting skills, social isolation, a poor support system, or improper expectations for their children. Also, Shannon said, "emotional abused children often grow up thinking that they are deficient in some way. A continuing tragedy of emotional abuse is that when these children become parents they may continue the cycle with their own children" (p. 171).

The Impact of Child Abuse

All types of child abuse will affect victims negatively since child abuse itself is already a negative incidence. Emotional child abuse, especially long-term emotional child abuse, seemed to affect the molding of abused children's characters, relationships with people, and mental health issues (DeRobertis, 2004; Giardino, 2007; Kim & Cicchetti, 2010; Simon et al., 2009).

DeRobertis (2004) studied that how long-term emotional child abuse by one's maternal figure impacts victims. The author used a phenomenological method for the study. He found five participants, who were age 18 to 20, and took a one-hour interview

with each of them. The research showed that emotional child abuse causes the victims resultant self-blame, isolation, self-destructive behaviors, low self-esteem, depression, aggression, self-directed anger, a sense of shame, a sense of resignation and abandoning, or a sense of disempowerment. DeRobertis (2004) stated that "the participants were often predisposed to isolate themselves from human contact in order to seek sanctuary from these [being put-downs by verbally] attacks" (p. 40) because the victims experienced the attack in their daily lives. He also pointed out that following inadequate opinions of victims' maternal figures, the victims started to have self-doubt that they were not good enough, and could not be loved, and accepted. The victims suffered a sense of disempowerment because no matter how they tried hard to satisfy their maternal figures, the victims would never succeed, and the victims felt they could not make any good decisions, or succeed in doing things. Parent refusal and verbal maltreatment made the victims lose "interest in activities that they loved or found fulfilling and suffered depressed affect" (Derobertis, p. 41). The participants in the study had self-destructive behaviors, such as smoking cigarettes, marijuana, or experiencing substance abuse to cope with themselves. Derobertis explained that there were primarily two purposes of the behaviors including (a) expressing their anger towards their maternal figures, and (b) looking for help from their maternal figures or others. According to the study, the victims thought that people are either abusers or victims because they were exposed to disempowerment situations as victims for a long time. Also, emotional child abuse made the victims aggressive.

Gelles (2007) introduced family violence in a chapter in a book titled *The*Cambridge Handbook of Violent Behavior and Aggression. The chapter had sections,

such as definitions of family violence, domestic violence, social isolation, and intergenerational transmission. According to the author, if children have strong and secure attachments with their caregivers, they will have secure attachments in their later lives, but if they do not, they will have insecurity that will continue into adulthood. This finding fits what DeRobertis (2004) found in his study. Childhood lacking affection and experiencing negative or inadequate treatments by their parents or caregivers will significantly impact victims' behaviors, characters and lives long-term.

Besharov (1990) mentioned, "emotional abuse is an assault on the child's psyche, just as physical abuse is an assault on the child's body" (p. 114). The research argues that emotional abuse may have psychological effects and cause mental problems such as depression.

Giardino (2007) studied how parents and teachers could increase their awareness to save children from abuse. The book covered physical, sexual, emotional child abuse and neglect. Also, the author included more issues that were related to child abuse, such as dating violence, mandated report by teachers and schools, and childcare issues.

According to Giardino, emotional child abuse often results in reducing cognitive and emotional functions. Giardino listed 13 characteristics as some behavioral indicators of emotional child abuse:

- Difficulty in forming relationships
- An inability to relate and bond to other children
- Lack of self-confidence and emotion
- Extreme shyness

- Being victimized and exploited by other children
- Fatigue and listlessness
- Helplessness and hopelessness
- Feeling of inadequacy
- Pessimism and preoccupation
- Difficulty concentrating on school activities
- Self-denial
- An inability to engage in and enjoy pleasurable activities
- Self-injury (hair pulling and twisting, nail biting, accident prone)

(Giardino, p. 66)

It seemed that emotional child abuse impacts children's behaviors negatively, but how the abuse influences children would change depending on children's developmental stages, children's age, relationships with the abuser, and time span (Giardino). Holmes (2013) studied how intimate partner violence would affect children who were exposed to that, and the author also pointed out the importance of different developmental stages of a child. He also mentioned that exposure to Intimate Partner Violence (IPV) "at different ages may result in different outcomes" (p. 521).

Abused children will be more likely to have difficulties in controlling their emotions because they usually have anger and sadness caused by irrational responses

from their parents. The children usually have mental problems such as depression and anxiety (Giardino, 2007). Kim and Cicchetti (2010) did quantitative research to learn about emotional regulation, peer relations, and psychopathology among children who experienced child abuse. They collected data on 215 abused and 206 non-abused children (age 6 to 12 years) from low-income families to compare how child abuse affects abused children. They found that physical, sexual child abuse, or neglect "had detrimental effects on emotion regulations development" (Kim & Cicchetti, p. 712). They said that abused children would be more likely to have problems with their peers because the children tend to reject their peers, so the children would have difficulty forming normal relationships with their peers like other children do. Children who had only emotional child abuse did not show significant differences on emotion regulation compared to nonabused children (Kim & Cicchetti). However, the researchers pointed out that emotional child abuse "involved persistent or extreme thwarting of children's emotional needs including the needs for psychological security and acceptance" (Kim & Cicchetti, p. 712). According to the research, emotional child abuse will affect the development of one's self-system more than one's ability to regulate emotional arousals. Thus, emotional child abuse will pose greater risks for emotional dysregulation (Kim & Cicchetti).

Giardino (2007) also pointed to similar aspects that if children are rejected by their parents in their daily lives, especially in their early childhood, children tend to have some negative consequences, such as being less tolerant of stress, less emotionally stable, more defensive, and more angry. They may also experience psychiatric disorders (e.g. depressions, borderline personality disorder), developmental delay (e.g. language, cognitive, or motor skills), relationship problems, low self-esteem, failure to thrive, or

learned helplessness. It does not mean all emotional abused children will have those consequences, but it seems that emotional child abuse significantly affects children's mental health, development and cognitive skills in a negative way.

Simon et al. (2009) studied how physical, emotional, sexual child abuse and neglect would be related to a poorer quality of life and social anxiety disorder (SAD). The researchers collected 103 participants (age 18 and older) who have the generalized subtype of SAD (GSAD) by using DSM-IV criteria for GSAD, and their social anxiety "was the primary mental health problem" (Simon et al., p. 1028). The participants' experiences of child abuse were measured by the self-rated Childhood Trauma Questionnaire (CTQ). As a result, the researchers found that 70% of the GSAD participants experienced at least one type of child abuse or neglect, and the most common abuse was emotional child abuse (56%). They said, "self-reported childhood maltreatment, and specifically emotional abuse and neglect, are associated with greater severity and poorer function, resilience, and quality of life" (Simon et al., p. 1029). Stressful childhood experiences would be associated with greater anxiety and sensitivity (Simon et al., 2009). Thus, having child abuse experiences will be more likely to contribute to mental issues, such as SAD.

In this section is argued that most of the time child abuse significantly impacts victims in a negative way. Emotional child abuse will be more likely to cause mental issues, such as depression and social anxiety disorder (Besharov, 1990; DeRobertis, 2004; Giardino, 2007; Simon et al., 2009). Also, victims of child abuse tend to be isolated because they have difficulties in creating healthy relationships with people (Giardino, 2007). Thus, it is no wonder that child abuse experience affects the victims' child rearing.

Relation Child Abuse Experiences and Parenting

It was already mentioned in a previous section, but child abuse seems to negatively impact victims' mental health, cognitive skills, social skills, and behaviors. Also, the consequences seem to continue for a long time in the victims' lives. Thus, it is thought that the childhood-traumatized experiences would affect their parenting abilities. But, having child abuse experiences does not mean that abused people will abuse their children. It does means there are many more stressors (e.g. unstable mental health, PTSD) in comparison with people who do not have child abuse experiences (Crosson-Tower, 2008). This section discusses issues that child abuse experiences bring about which can challenge abused parents' child rearing.

Dixon, Browne, and Hamilton-Giachritsis (2005) studied the intergenerational cycle of child abuse. The data was collected through a part of the "health visiting" service of nurses community in the U.K., and across 4351 families. In the 4351 families, 135 (3.1%) families had a parent who experienced child abuse. The researchers compared families where the parent(s) experienced physically and/or sexually abused and families where the parents had not abused experiences in their childhood. Through the study, Dixon et al. found that abused parent(s) families (AP families) who have child abuse experiences abuse their children are four times more likely than no abused parents families (NAP families), and if the AP families have three significant risk factors, which are a parent under 21 years old, a parent having a history of mental illness or depression,

and residing with a violent adult, the risk of children abuse will increase. The research showed that if AP families planned later pregnancies, the rate of child abuse or neglect occurrence would reduce. The researchers also mentioned that secure relationships would diminish stress and encourage positive coping strategies. Therefore, if abused parents did not experience secure relationships with their own parents, the abused parents would be more difficult to reduce their stress, and the difficulties could lead them to abuse their own children as a result.

Fujiwara, Okuyama, and Izumi (2012) studied that how child abuse history, domestic violence and mental health symptoms impact parenting among mothers in Japan. The data collected 304 mothers and 498 children, and a self-administered questionnaire survey was used. The survey evaluated child abuse experiences of the mothers, domestic violence experiences, current mental health symptoms, and "parenting behaviors after moving into the homes to separate from a violent husband or partner" (p. 530). The researchers noted that if the mother has dissociative and depressive symptoms, the mother plays with her children less often than the mother who does not have these problems, and if mothers have mental problems, this reduces their parenting quality. Also, physically abused Japanese parents tend to think that their children should survive by themselves without any interactions from the parents, such as praise (Fujiwara et al.).

Dubowitz et al. (2001) studied how the physical and sexual abuse of mothers affected them and their children. In the study, data was collected from 419 mothers and their children who were 6 to 7 years old. The researchers focused on how mothers' victimization during both childhood and adulthood would influence them, such as their likelihood to have depression and their parenting ability. The researchers also found that

abuse could impact mothers differently depending on the age when the victimization occurred. In addition, Dubowitz et al. mentioned that severe physical punishment experiences during childhood would contribute to similar parenting behavior.

Berlin, Appleyard, and Dodge (2011) studied how physical child abuse and neglect would impact the next generation and prevent the cycle of abuse. They found 499 mothers and their infants, and examined how mothers' childhood physical abuse affects the next generation, and the mothers' mental health, social isolation, and social information processing patterns. According to their research, there was a strong positive association between mothers' childhood physical abuse and their children abuse, but there was not a significant association between mothers' childhood neglect and their children neglect. Also, Berlin et al. found that mothers who experienced physical child abuse tended to have mental health issues, and mothers' childhood neglect would cause more social isolation. In addition, they said that people who have been abused might be less likely to have babies because they realize that they may abuse their children. The comparison among mothers who did not have experiences of physical child abuse and mothers who had the experiences "were 20 % more likely to have children who were victimized by the age of 26 months" (Berlin et al., p. 170). Dixon et al. (2005) also found that abused parents families (AP families) were "more likely to abuse their own child in the first 13 months of life" (p. 53). However, Berlin et al. noted most mothers of the study did not abuse their children by 26 months old, so having a history of physical abuse does not mean that they will abuse their children, but the abused experience increases their children's risk of victimization. Having mental problems that affect communication will isolate the mothers in the society, and they may become stuck in a situation that is

more likely to cause them to abuse her children (Berlin et al.). Mothers' mental problems may strongly affect their rearing; additionally, if a mother has had child abuse experiences, that mother's children are more likely to be reared negatively, since the mother may have mental problems (Berlin et al.; Fujiwara et al., 2012).

Abused parents will be also less likely to know a good model of a parent because they grew up with dysfunctional families. Barrett (2009) researched how childhood adversity, mainly sexual child abuse, impacts their adulthood parenting among 483 African-American mothers. In the study, the researcher found that mothers who had physical abuse experiences have higher rearing stress than mothers who do not have the experiences. Berlin et al. (2011) also mentioned that a mother who was physically abused in her childhood might be aggressive and physically abuse her children. The mothers who had child abuse experiences tend not to know how to form a healthy relationship with their children, since their parents were negative models for them. Therefore, if the mothers did not have proper treatments for their abuse experiences in their childhood, they may have difficulty being involved with their children in proper ways. Ehrensaft, Knous-Westfall, Cohen, and Chen (2014) also studied how child abuse experiences influence parenting the next generation. They focused on physical and sexual abused people, and they followed their participants for approximately 30 years. The research showed that parents who were sexually abused in their childhood would be more emotionally distant with their children and tend not to care about their children's behaviors.

It seems having child abuse experiences will be more likely to impact parenting negatively. It is not simple that there is a cycle of violence, but if parents have child

abuse experiences, they tend to have mental health issues (Besharov, 1990; DeRobertis, 2004; Giardino, 2007; Simon et al., 2009), and unstable mental states could affect their parenting quality (Dubowitz et al., 2001; Fujiwara, Okuyama, & Izumi, 2012). It means there are high risks for child abuse and neglect to occur due to these experiences. Therefore, it is important to improve care and support for abused parents to prevent child abuse and neglect.

Care and Support for Prevention of Child Abuse

Providing care and support is the most important way to prevent child abuse and neglect. However, there is not enough care and support for victims. Leeson and Nixon (2010) studied about therapies for emotionally abused children in Australia. They mentioned that there were not empirical and valid therapy programs specialized for emotional child abuse. Therefore, they studied how emotional child abuse impacted children. Also, they commented on how there are many specialized therapies for sexually and physically abused children and claimed that there should be more therapy programs for emotional child abuse. They claimed that more direct specialized therapies for emotional child abuse should be provided for victims.

Giardino (2007) mentioned that multiservice interventions should be provided, and the interventions include "a combination of the following: individual, group, and family counseling; social support services; behavioral skills training; and parenting education, including family safety, accident prevention, and nutrition" (p. 69). Crosson-Tower (2008) also mentioned that it is good for the people who were abused in their childhood to have some sort of therapy, such as individual, group, self-help groups and

writers' groups. According to Crosson-Tower, therapy helps the victims to talk about their experiences and learn how to deal with their stress and trauma or improve their social skills. However, it seems that there is a lot of information, therapy or care for sexual abuse, such as the Child Sexual Abuse Treatment Program (Crosson-Tower), but I could not find many other child abuse treatments, especially for emotional child abuse. This lack of treatment issue connects to the claims made in the Leeson and Nixon (2010) study.

For abused children, educational services and support should be considered too, because abused children may have developmental delays due to their traumatized experiences (Giardino, 2007). All parents should be able to reach resources of parenting, and prenatal coaching, home visiting and parent support programs will be helpful for them (Giardino). Berlin, Appleyard, and Dodge (2011) also mentioned that home-visiting programs would help to reduce risks of child abuse. One of the reasons home-visiting will be in effect is because mothers will not be isolated.

Howard and Brooks-Gunn (2009) studied the role of home-visiting programs for the prevention of child abuse and neglect. They reviewed nine home-visiting programs worldwide, and researched how those programs works for pregnant women, parents, and early age children (they did not include the programs for children of preschool or later). Supporting mothers, especially those who have infants will be an effective technique of preventing child abuse and neglect because child abuse is more likely to occur when children are infants (Berlin et al., 2011; Dixon et al., 2005). The research also focused on home-visiting programs for pregnant women (Howard & Brooks-Gunn). Programs for pregnant women will be significantly important especially for young mothers who are

under 21 years old. Dixon et al. mentioned that abused parents under 21 years old would be more likely to abuse their children. Therefore, supporting those pregnant women will help to reduce the risk of future child abuse and neglect. Some programs that Howard and Brooks-Gunn researched served especially at-risk mothers or families, and depressed mothers, such as the Hawaii Healthy Start Program (HSP), the Healthy Families of America (HFA), the Queensland Study, the Netherlands Study and Early Start. For example, the Queensland, Australia, home-visiting program served for at-risk for poor parenting mothers by nurses, and the goals of the programs are "to build trusting relationships among family members, improve parenting self-esteem and parenting efficacy, provide information about child health and development, and link families to other resources in community" (Howard & Brooks-Gunn, p. 127). Gelles (2007) mentioned that if people are socially isolated, they are more likely to be violent in their home. If someone visits parents, especially those at-risk of child abuse due to mental health issues and/or child abuse histories, the visitation will be an effective approach to support those parents.

Barth (2009) researched parent training for the prevention of child abuse and neglect. The research focused on four common risk factors that would lead to child abuse: substance abuse, mental illness, domestic violence, and child conduct problems. The researcher mentioned that improving parenting is significantly important to prevent child abuse, so home-visiting programs that are specialized for those at-risk families would be effective in prevention and would improve their parenting. Barth also claimed the importance of the parents' motivation and positive behaviors for improving, learning, or changing their parenting. However, Barth mentioned that parent education cannot

succeed if family problems are not addressed. Families' problems (e.g. parents' mental health needs, substance abuse recovery, finance issues) should be addressed first, and parent education should be focused upon as a next step (Barth). After addressing families' issues, taking parent education programs can help parents to develop appropriate expectations for their children and learn how to raise them with empathy and nurturing, as well as how to use proper discipline instead of corporal punishment.

Hibbard, Barlow, and Macmillan (2012) made a clinical report of emotional child abuse to aid pediatricians, but this article would be informative for anyone wanting to learn about emotional abuse. In their article, they suggested that all children and their parents or caregivers should have opportunities to be interviewed about the relationships between children and parents, experiences of discipline, feelings of self-worth, safety and being loved. Hibbard et al. also mentioned that the interview should be done individually because if there is child abuse going on, children may not talk about it in front of their parents or caregivers. They noted, "the pediatrician needs to be aware of risk indicators for psychological maltreatment, such as parental psychiatric illness, including depression and substance abuse, among others" (Hibbard et al., p. 375) that other professionals, who work with children, such as teachers, child care personnel or social workers, also should be aware of in order to prevent child abuse. Giving opportunities to talk about the daily lives and relationships between the child and parent will help professionals, who work with children, notice that there is child abuse or predictors of emotional child abuse. After the interviews, professionals should share the information so they will take actions to protect children (Hibbard et al.). However, Hibbard et al. mentioned that there are not enough approaches for the prevention of emotional child abuse among the older age

groups as compared to infants and younger children. They also mentioned that childparent psychotherapy programs need more research.

Siegel (2013) studied how breaking the links of intergenerational violence from the emotional regulation perspective. Through the study, Siegel found, "when family violence is viewed through a systemic lens that highlights emotional regulation, there are ample opportunities to break the links" (p. 174). This study would be helpful when professionals and victims think about how they can prevent intergenerational child abuse. Siegel mentioned some alternative treatment approaches, such as dialectical behavioral therapy, mindfulness, yoga and breathing strategies. Those above approaches should be expounded upon among professionals who work to prevent child abuse issues, and the approaches should be studied more.

From this section, supporting and educating parents, especially families who have risks of occurring child abuse is significantly important. Home-visiting programs seem to be one of the effective approaches to preventing child abuse. However, like Barth (2009) mentioned that if families have their own issues, such as mental health needs, substance abuse treatment, and therapies for abused parents, the families' issues should be addressed as much as possible before the families start taking parent education and home-visiting programs.

Conclusion

The literature review explained child abuse's definition and showed that child abuse affects children's mental health, behavior, and future child-rearing. It also discussed how to prevent future child abuse.

Any type of child abuse will influence victims negatively, and these experiences tend to negatively affect the victims' characters, their relationships with people, and their mental health (Derobertis, 2004; Dubowitz et al., 2001; Giardino, 2007; Kim & Cicchetti, 2010; Simon et al., 2009). Derobertis mentioned that abused victims were more likely to have feelings that they were not good enough, could not be loved, or accepted. Derobertis's study also showed that victims who had emotional abuse would have negative results, such as self-blame, isolation, self-destructive behaviors, low self-esteem, aggression, and depression, which could impact victims long-term. Giardino's research found similar results. The study found that there were 13 characteristics that occurred often due to emotional child abuse experiences, such as difficulties making relationships, lack of self-confidence, or feelings of inadequacy. Similarly, Kim and Cicchetti found that emotional child abuse might cause risks for emotional dysregulation. Also, any type of child abuse may lead victims to have mental disorders, such as social anxiety disorder (Simon et al.).

The literature review also showed that there was relation between child abuse experiences and future parenting of the victims because research often showed that child abuse experiences would negatively affect the victims' parenting (Derobertis, 2004; Fujiwara, Okuyama, & Izumi, 2012). Compared to other people, parents who have been abused as a child can cause many stressors, such as unstable mental health or PTSD (Barrett, 2009; Crosson-Tower, 2008). Parents who abuse their children are more likely to have had child abuse or traumatic experiences in their childhood (Dixon et al., 2005; Berlin et al., 2011). In addition, Dixon et al. found that parent(s) who experienced child abuse were more likely to abuse their children. Berlin et al. found that mothers who were

abused physically in their childhood tended to have mental health issues, and mothers who had experienced neglect in their childhood were more likely to be socially isolated. However, Berlin et al. mentioned that most mothers of their study did not abuse their children before 26 months old. Having experiences of abuse does not mean that the victims will abuse their children in the future, but the experiences may cause additional stress associated with child-rearing, and it may contribute to the increase of children's risk of victimization (Berlin et al.).

It seems there are still not enough preventative approaches, therapy and studies of emotional child abuse (Hibbard et al., 2012; Leeson & Nixon, 2010; Barth 2009). The lack of treatments, services, or support for all types of child abuse should be researched and provided as challenges of the future. For example, treatments, therapies and some home-visiting programs should be specialized to apply to all types of child abuse. There still needs to be more accurate information about child abuse in future studies, such as researching paternal relationships, improving and specializing treatments, and expanding home-visiting programs. It seems most home-visiting programs provide for pregnancy and families who have young children, but it would be important to expand the programs for families who have older children too. Connecting communities and organizations that provide support and services for child abuse and parenting resources is significantly important. The connections will be helpful to reduce the risk of child abuse because families will be able to reach support easily, and child abuse would be more easily detected by professionals. Local communities should also provide group therapies, meetings in which people can share their experiences, and parenting programs that encourage parents who do not have a good parent model. Dixon et al. (2005) mentioned

that abused parents under 21 years old would be more likely to abuse their children. Thus, encouraging abused people to make a later plan of pregnancies will help to reduce reoccurring child abuse and neglect. On the other hand, if there are abused parents who are under 21 years old, extra services and support will be needed for the parents to prevent intergenerational child abuse. Also, some articles talk about the mother and child relationship or impact instead of the father and child relationship (Fujiwara et al., 2012; DeRobertis, 2004). The father and child relationship should be studied more.

METHODOLOGY

This qualitative interview research explores the meaning of having children for mothers who were abused emotionally growing up. The aim is to understand how the mothers were involved with their children, how they have been living as a mother, and the individual meaning of motherhood. I realized that the study of those these mothers, required an in-depth qualitative approach. I decided to use the phenomenological method (Creswell, 1998; Van Manen, 1990) to understand the mothers' lived experiences. I also used the essentialist portraiture approach (Witz, Lee, & Huang, 2010) to portray participants' lives and the meaning that developed in relation to children. Since this study focused on understanding detail of each participant's experience, I also used the narrative method (Gay, Mills, & Airasian, 2012). However, this study did not follow strictly each of the above methods. This study combines the approaches of phenomenology, essentialist portraiture and narrative method.

Research Design

In this research, I explored what having children means for mothers who had emotional child abuse experiences through an open-ended interview (Creswell, 1998). I worked with three mothers with emotional child abuse experiences as interviewees. Some mothers experienced other types of child abuse too, such as physically or sexually, but I focused mainly on emotional abuse.

There are two analytical processes that have gone into this study. First is the indepth analysis of the interview data which is discussed later. Second is the how to write up the insights in order to evoke in the reader the higher aspects which are central to the core meaning of parenting for the participants the narrative format (Witz et al., 2010).

Understanding each mother's humanity and essence of their lives up to the time of the interviews as a mother needs to be understood with attention to details of the mothers' experiences and stories. Van Manen (1990) explained, "phenomenology is, in a broad sense, a philosophy or *theory of the unique*; it is interested in what is essentially not replaceable" (p. 7, emphasis in original). The phenomenological approach "is the interpretive study of human experience" (Seamon, 2000, para. 5). Phenomenology is one of the methods used to understand people's experiences without bias and demands that the researcher have a fuller connection to the participants. Van Manen (1990) stated, "phenomenological human science is the study of lived or existential meanings; it attempts to describe and interpret these meanings to a certain degree of depth and richness" (p. 11). The method contributes to deepening awareness and understanding of the mothers' lived experiences based on the interview data. As a phenomenological researcher, I want to lead readers into the world of the participants' experiences highly detailed descriptions (Seamon, 2000).

Throughout this study, I focused on "higher aspects in a person" that "most people lived by moral-ethical, metaphysical, social and spiritual (including religious) higher principles, values, and ideals and experience corresponding moral, metaphysical, religious, and other feelings" (Witz et al., 2010, p. 397). I have portrayed the mothers not as victims or survivors, but to understand them as persons with high

character and humanity taking into account related higher aspects. Essentialist portraiture was used for this study because I would like to portray each mother's unique life story (Witz et al.). Essentialist portraiture significantly helped me to describe each mother. Witz, Goodwin, Hart, and Thomas (2001) indicate that "The methodology is suitable for a study whose aim is to explore and acquire an insight into the nature, or essence, of human phenomena, effects, or relationships" (p. 199). This study's purpose is to help people understand with in-depth interpretation of how the mothers overcome challenges in order to live their lives positively. According to Witz, et al. (2010), "[the methodology aims]. . . . to understand and portray the phenomenon studied from the point of view of how it is experienced by the participant and how it "exists in her" at the time of the interviews" (p. 398). Through this study, I wanted to know how having children affected the mothers' lives, including what kinds of positive aspects the mothers gained through raising their children even when they had difficulties that came from their childhood experiences. Using this methodology, I portrayed each mother's lived experiences, and I tried to capture how having their children contributed to their self-development and how their child-rearing approach positively impacted their lives.

Gay, Mills, and Airasian (2012) explained that narrative research is "the study of how different humans experience the world around them, and it involves a methodology that allows people to tell the stories of their 'storied lives'" (p. 400). Learning about how the mothers were involved with their children through the interview is listening to their "storied lives." This study focused on individual mothers, listening to their story of life, and re-telling their stories with the researcher's in-depth interpretation.

Site and Participant Selection

This study took place in a large city in Missouri. Purposeful sampling was used to find the three mothers who had experienced child abuse growing up (Gay, Mills, & Airasian, 2012). Gay et al. stated that a researcher selects a sample based on the researcher's knowledge and experience of the group that is going to be sampled, and the researcher needs to provide clear criteria. This sampling method fits my research because I needed to find a small number of specific people. By using the sampling method, two mothers were found through an organization, which is the Parenting Support Center (PSC, the center's name is a pseudonym for the sake of the participants' privacy). The organization is located in the city, and they have strong connections with some mothers through the Healthy Families America Program. I also found one more mother through my personal connection in the same city. However, I kept in mind that "the main weakness of purposive sampling is the potential for inaccuracy in the researcher's criteria and resulting sample selections" (Gay, et al., p. 141). I named them for this study Mother 1 (M1), Mother 2 (M2) and Mother 3 (M3).

I wanted to study mothers who have emotional child abuse experiences, because there is not enough research about that type of child abuse. A lack of studies of emotional child abuse, including clinical research such as therapies, was already mentioned in my literature review (e.g. Leeson & Nixon, 2010). Therefore, paying more attention to emotional child abuse will contribute to understanding abused people and help prevent the occurrence of future child abuse issues.

Data Collection Procedures

I did an open-ended interview for each mother. The interviews happened where the participants felt comfortable, such as their homes, and each interview lasted around an hour and a half. The mothers were mainly interviewed about their experiences of motherhood, for example, how they felt about being a mother and how having and raising their children affects them positively. I also asked about their childhood during the interview because it would connect to their current lives. After the interview, I transcribed the audio record of the interview, and made a timeline from the transcription (one example of each mother's transcription attached as Appendix A). Each mother's timeline was sketched on a large paper (size: 44.6×84 cm, see Appendix B) showing childhood experiences up to their current lives that the participants discussed during the interview. The timeline, as part of the initial data analysis, included notes that showed where in the transcript each experience was located as well as memos and initial reflections. Making timelines from the transcript helped me to see the flow of each life more comprehensively (Witz et al., 2010). I also wrote down my thoughts about the meaning of the significant experiences included in the timeline and listed key words as I coded the interview data. After that, I tried to understand deeply their lived experiences by analyzing significant passages from the transcript and by re-listening to how the participants spoke, assessing emotional content and prosodic flow to help me feel more deeply for what the participant was saying.

The study was approved by the Missouri State University Institutional Review Board (IRB, see Appendix C) in December, 2015 (study number: 16-0231). Data were collected starting in January, 2016. After I got the approval, I sent an email to the Parenting Support Center (PSC)'s executive director and attached introduction and informed consent letters that introduced me and the study (see Appendix D). I also attached letters for a person who might be willing to be a participant, and a person who would help me to find the participants (see Appendix E and Appendix F). I made an appointment and visited the center and talked with the executive director after massaging by e-mails several times. The director asked social workers who worked in the center, and they introduced me to some mothers who would be willing to be participants for my research. I then visited two of the mothers with the social workers present.

The first time when I met each mother, I just explained the purpose of my study, what I wanted to know, what kind of interview I would do, and also introduced myself. I brought a letter that was for the participant (see Appendix E), which was written about my research. The participants were also given the "informed consent document" (see Appendix D) and on it is information, such as procedures, risks and benefits of my research study. The participants' privacy is protected, and I, as a researcher, respect their individual human dignity. I also explained the interview would be recorded, and before I started the interview I got the interviewees' permission to record again.

In addition, I explained the document and told them to take time to read and think about being a participant because there was a possibility that the interview might be a trigger for them to remember their trauma. I needed to make sure that the participants understand the information, and they put their signature at the end of the paper for

agreeing being participants. If the participants needed more details, I would answer their questions at any time. I was also open to talking about myself, for example, all the participants wanted to know why I started to study this topic and what my childhood was like, so I opened myself up to talk with them. If the participants did not want to talk about their experiences because they felt uncomfortable, participants would not have to continue. I made sure to tell them that they could stop talking at anytime.

I asked the mothers to meet with me several times before the interview to make sure that they felt comfortable to talk with me and trust me to share their lived experiences. At the end of the interview, the mothers were given a paper that asked for their basic demographic information (see Appendix G).

The interview was open-ended, so I asked the mothers general questions such as "Tell me about your family" and "What does having a child/children mean for you?" (see interview questions below). I followed whatever the participants wanted to say in response to the questions about their lived experiences. During the interview, I asked them for details of the experiences. I respected their privacy and would stop if they were uncomfortable talking about growing up, but all the mothers talked about their lives naturally. I recorded the interviews using a digital voice recorder. I transcribed the interviews verbatim and sent the transcription to the mothers to make sure that they felt comfortable sharing what they talked during the interview and to check with them that the transcript was acceptable.

Interview Approach

The grand tour question (main question) of this research is: "What does having a child mean for mothers who were abused emotionally in their childhood?" The grand tour question was included as one of interview questions. My interview questions focused on the participants' experiences of being a mother. I also asked about their childhood in the interview because it connected to their current lives. I wrote my interview questions below.

I started with the question, "Tell me about your family." I followed where they wanted to go and listened to their experiences without commenting. Knowing how they think about their families is related to other questions and my grand tour question.

However, after I interviewed the first mother, I added the word "current" to the question, so the second and third mothers were asked, "Tell me about your current family." Family, in this question, meant their own current families including their children and husbands or boyfriends, but not just their parents and childhood. I wanted to know how they talked about their current family before I listened to their childhood including their parents.

After I listened to them talk about their family, I asked my grand tour question: "What does having a child/children mean for you?" I followed how they thought about their children, and I asked more questions about the details of their experiences as mothers. Some of the additional detailed questions were:

- Tell me about when you decided to have your child/children?
- Could you describe more about when you got pregnant?
- How do you describe during your pregnancy? (emotionally)
- · After you delivered your baby how did you feel about it?
- How is/was it a challenge to be involved with your children?
- What kind of emotional feeling did you have usually after your children were born?

• How do you feel about being a mother? (what do you think about being a mother?)

After I listened to them talk about their family and children, I also asked about their childhood and how their parents were involved with them. I started with this general question, "Could you talk about your childhood?" to find out about their experiences in their childhood. Then, I asked them this question: "Could you describe your relationship with your parents?" This question is very sensitive to people who have had child abuse experiences. Therefore, I asked the mothers this question toward the end instead of the beginning of the interview. However, it is important to ask how their parents were involved with them because it will connect to their child rearing. Also, I asked them more detailed questions like these below:

- Tell me about the relationship between you and your parents.
- · Tell me how they were involved with you.
- Tell me about when you faced any difficulties with your parents.

At the end of the interview, I asked them: "Are there any other thoughts or feelings you would like to share with me to help me understand? Anything at all you would like to add?" If the mothers did not have anything to share or add to the interview, the interview was finished.

Data Analysis

I analyzed the interview using notes and the voice recordings that were taken during the interview. First, each interview was transcribed verbatim (see Appendix A). I read them carefully several times. After that, I started to make timelines for each mother because the timeline helped me to see each mother lives from childhood to their current

easier. The timeline was written on a large paper (size: 44.6×84 cm, Appendix B). I also wrote my thoughts about each mother on their timeline.

After I made a timeline, I printed the transcript with space (5 cm) on the right side, and I read the transcription again while writing down my thoughts and coding. I introduced what kinds of words I used for coding for each of the mothers below. For M1, I developed 13 words and phrases. These are listed as follows: M1's mother; during pregnancy; care; help; frustrated as a mother; after delivered her baby; child mean for the mother (recovering, healing by raising her child); who am I? (self-image, what she did for herself); confidence in herself; be loved; her childhood (including relationship with her parents); motivation; and hope for her son. For M2, there are 12 words and phrases that I developed: finding herself; negative feeling to herself; M2's mother; M2's father; schooled (by her children); frustrated as a mother; substance abuse; who am I? (selfimage, being a mother); positive feeling for her children; be loved by her children; love her children; and being better. For M3, I developed 14 words and phrases through the data: issues of her mother; meaning to have children for her; forgiving; feeling during pregnancy; how to be involved with her child; positive effect having her child; the ways M3 grew up; her parents' parenting; M3's husband (support); healing; feeling or thoughts herself; communication; being a mother; and M3's father.

The coding helped me to understand each of the mothers lived-experiences easily because I captured important events of their lives. I coded their life-events to understand each mother and what most significantly affected them. I explained about coding in the methodology section instead of analysis section, because the analysis section is more

about in-depth interpretation of each of the mothers rather than describing characteristics of the participants.

After I wrote a description of the experiences, and I constructed the meaning of descriptions and the essence of the experiences (Creswell, 1998, p.150). Finally, I wrote what the experiences of having their children meant to the mothers and the essence of the experiences of being a mother. I also followed Creswell's (1998) framework of data analysis using the phenomenological approach. The process is as follows: data managing, reading and memoing, describing, classifying, interpreting, and representing and visualizing. Data managing, I organized the data of the interview and transcribed the audio recorded interview. Reading and memoing, I made the margin note of the transcription and read the transcription to form initial codes. Describing, I described the meaning of the experiences of this study. Classifying, I found and listed codings of meaning for individuals and grouped the codings into meaning units. Interpreting, I developed a textual description, a structural description of hoe the phenomenon was experienced, and an overall description of the experience, the essence. Representing and visualizing, I presented narration of the essence of the experience and used tables or figures of statements and meaning units.

Establishing Trustworthiness

It is important to consider how to establish trustworthiness in qualitative research. According to Creswell (1998), "The naturalistic researcher looks to conformability rather than objectivity in establishing the value of the data" (p.198). Therefore, qualitative research uses the terms credibility, transferability, dependability, and conformability

instead of internal validity, external validity, reliability, and objectivity for quantitative research (Lincoln & Guba, 1985).

Creswell (1998) stated that there are eight verification procedures: prolonged engagement, triangulation, peer review, negative case analysis, clarifying researcher bias, member checks, rich thick description, and external audits. He said that qualitative researchers should use at least two verification procedures in their study, so I used three procedures in this research: clarifying researcher bias, rich thick description and member checking.

Clarifying the researcher's interpretive framework is important, so readers understand the researchers' positions and any biases or assumptions that shape the data analysis (Merriam, 1988). Therefore, I should write about my experiences, biases, and prejudices towards this topic to clarify my position on this study because it would connect to my interpretation and approach to this study.

Rich thick description is also very important for the qualitative study because if a researcher writes details of the participants and the settings of the study, that detailed description would regard transferability (Creswell, 1985). Therefore, the researcher wrote details what she saw, learned and interpreted from the mothers, so readers can know about the participants, their feelings, up-bringings, effects of the phenomenon, and also the settings of the study through rich thick description. What the readers could learn from the research would be transferred to their lives. Lincoln and Guba (1985) also explained:

[...] the naturalist cannot specify the external validity of an inquiry; he or she can provide only the thick description necessary to enable someone interested in making a transfer to reach a conclusion about whether transfer can be contemplated as a possibility (p. 316)

Member checking is "the member check, whereby data, analytic categories, interpretations, and conclusions are tested with members of those stakeholding groups from whom the data were originally collected, is the most crucial technique for establishing credibility" (Lincoln & Guba, 1985, p. 314). The participants were their interview transcription, and drafts of their analysis to be verified what I wrote about them. Each of the mothers were given a draft of their write-up and were asked to provide feedback for the research. However, the mothers would not be forced to answer the feedback, but if they wanted to say about their opinion for the research, the research would listen and change if she needed.

ANALYSIS

This section discusses each mother's biography and in-depth interpreted. Each mother is divided into small sections, so there are three sections for all the participants: Mother1 (M1), Mother2 (M2) and Mother3 (M3). First, I described how I made rapport for each mother before interview. Second, I wrote their biography that I learned from the interview data. I cited the block quotes from each of the mothers' transcripts, but since the biography was introducing background of each of the mothers, I did not cite small quotes under 40 words. Finally, I discussed, in-depth, an interpretation of how the mothers have been affected by having their children, and cited all of these quotes since they were used as data of analysis.

Mother1 (M1)

I met her through the PSC connection. I went to her home with a social worker who worked at the center. When I met her the first time, it was the middle of spring of 2016. She was Caucasian and was turning 21 years old soon. She lived with her son and her husband in an apartment. She was very mature and calm talking to me. The first time

we met, I explained my research and the papers, which were the informed consent form and a letter for a person who may be willing to be my participant. I told her that I was hoping that she would become my participant, but I also told her that it was completely acceptable to deny being a participant. She listened and said she was willing to be my participant. She asked several questions, such as why I started this study and my country of origin (Japan). Also, she told me she wanted her social worker to stay while she was taking the interview, and I agreed.

Before the interview, I met her twice. The second time I went to see her was also in March. That time, she talked about the history of her life. I did not ask her to talk about it positively because I did not want to make her feel uncomfortable before I was sure to have confidential rapport with her. She talked mainly on what happened in her life, but she told me the same information during the interview. I introduced her life story in chapter IV, which is analysis. Also, at that time, she gave me the informed consent with her signature for agreeing to be a participant for my study.

Both of times when I went to M1's place, I visited her with her social worker. The social worker was meeting with her regularly once a week, so I asked them if I could visit sometimes before the interview. Each time when I saw her before the interview, I spent time with her around one hour. At the apartment there was M1, her social worker, me, and M1's child who was 18 months-old. Her child was very friendly, and he seemed to not have anxiety being with a stranger. I played with her child, and we talked general topics, such as our school life. M1 usually needed to talk with her social worker, so during that time I was quiet or played with her child.

M1 had an experience telling her story in a facility of parenting recently, so she was not hesitant to share her life story, and she hoped telling her life story would help other people. Also, because she already had the experience telling her life story, she organized what she was going to say, and she was aware of herself well.

I interviewed her in the middle of the year 2016. The interview started in the morning and lasted one hour, one minute, and 54 seconds (1:01:54). There was M1, her social worker, and me in the home. Her son was in a nursery care facility because her husband had to stay in a hospital due to his mental issue. That was my first time interviewing my participants for this study. I brought three digital recorders. Before the interview, I chatted a little with her to make sure she was ready. She looked a little tired because her current situation (at the time of the interview) was a challenging (working full-time), but she was calm and responded politely to me during the interview. After the interview, I appreciated her and told her that I was going to make a transcription of the interview and, when I finished, I would send it to her. I also thanked the social worker who spent her time during the interview and made the interview possible with M1. I left M1's house with the social worker.

Biography of M1. When I interviewed her, she had just turned 21 years old. M1 was born in the Southwest region of the United States when her parents were in their mid-twenties. When she was 5 years old, her younger sister was born. Her mother then developed severe postpartum depression. As a result, M1 took care of her sister mostly because her mother was not able to do that. Her parents divorced when she was 7 years old. M1's mother, her sister, and M1 then moved to live with her grandparents on her mother's side. Her father tried to visit and keep in touch with his daughters over the next

few years, but he had drug and alcohol issues. He was usually intoxicated or high when he came to visit: "He eventually stopped coming when he started doing crack." However, he was still trying to send letters and contact them, but her mother kept this from M1 and her sister:

What I didn't know is that he was sending us letters to like, find out how we're doing and tried to contact us and he would send presents, but my mom would take all that stuff away. So, we thought that he just abandoned us. (line: 36-38)

At this point, she would start to feel abandoned.

M1's mother suffered from depression, bipolarism and Post Traumatic Stress

Disorder (PTSD). Thus, the family (M1's grand-parents, M1 and her sister) needed to

deal with the mother's unstable mental cycle between manic stage and depressive stage.

With my [mother's] bipolarism, you have really high highs, you feel fantastic, you hardly sleep, you wanna get everything done. And when you get into the depressive state, it's awful. You wanna sleep all the time, you can't get out of bed. You feel horrible, suicidal thoughts. So, we, uh, whenever she was depressive, she would try to take her meds. But, once she got back into the manic stage, she felt "Fine," so she..."Okay, well, I don't need to take my medication anymore." Well then, she'd get back into the depressive cycle, and at first she wouldn't have her meds so it would be really, really, bad. (lines: 21-27)

When her mother was in the manic stage, she felt great and she thought that she didn't have to take medicine. However, when she was in the depressive stage, it made her feel horrible, and if she didn't take medicine, it made her worse. M1 said, "...my grandma didn't understand how to handle stuff like that. She gets really overwhelmed very quickly." Addressing the mother's mental issues was difficult for the family especially for the grandmother who had to deal with her husband with Alzheimer's at the same time, "so there was a lot of stress in the house."

When M1 was 8 years old, "my mom was roller-skating with us and she fell and broke her back." The injury of the back was serious. "She was always in pain after that," and "she never fully recovered." The incidence led them to poverty because M1's mother could not work anymore.

So we ended up really, really, really poor. We went to the food bank every week. We got hand-me-down clothes from other friends. We didn't have anything extra really, if the car broke down we had to wait months to fix it. (line: 18-20)

M1 was spanked by her mother until she was 14. Her mother did not like that M1 wore some kinds of shoes or clothes, such as boots or V-necks. "I got myself some boots for my 14th birthday and she said, "Are you trying to get raped?" A shirt like this, a V-neck, she would have taken it, burned it, spanked me." When M1 was a high school student, her mother did not allow her to have a phone and Internet. The mother kept her away from the world. "So, I was really, really, sheltered for a long time." Her mother made M1 think of herself very negatively. "I was terrible person. I thought that I was absolute shit for so long, truly." Her mother became addicted to her medication such as vicodin or morphine. When M1 was 15 years old, her mother died from an overdose: "She ended up taking too much one night and she never woke up." Before she died, she sometimes left her children and went somewhere.

She had always talked about leaving just going whenever she was upset and she would take the car and drive and we never knew if she was gonna come back. So, honestly when my grandma said "your mom is gone," I thought, "Okay, she finally left us." (line: 249-252)

After she lost her mother, her father decided that he did not want to take care of M1 and her young sister, so they kept staying with her grandparents. She wanted to go to college after she graduated high school, but she could not get her father's tax information

that she needed to turn in if she wanted to apply to the Free Application for Federal Student Aid (FAFSA). She was told if she wanted the FAFSA:

I had to either wait until I had a child, wait until I had a husband, or wait until I was 26. Even when I moved to Missouri they still wanted my dad's tax information even when I was living with someone completely different, and he had not helped me financially whatsoever. So, I wasn't allowed to do anything for college until I got married. (lines: 56-59)

She moved to Missouri to live with her paternal grandparents after she graduated high school. She had birth control access before she moved, but she had to get a prescription for that in Missouri. Her paternal grandparents were very pro-life, so they didn't allow her to get that. It caused her to feel depression and loneliness, "...I was incredibly depressed and lonely because I wasn't supposed to be here in Missouri anyway. And I didn't wanna come here." She started to work, and at the place she was working, she met her husband who was 9 months younger than she. They started dating. She was lonely and depressed since she did not want to come to Missouri and her paternal grandparents did not help her to get contraceptives, "when I met my husband, I just didn't care what happened honestly." She asked him about condoms, "he said he was really scared to try and do that, to try and get them. I had no way because I didn't have a car." She got pregnant, when she was 18 years old. M1 and her husband once decided to abort their baby because it was too early for them. She went to the pregnancy care center to get help for her abortion. "Well, we went to the pregnancy care center, and they're extraordinarily pro-life, and they really, really, guilted me" She was trying to go to another clinic, which was located in St. Louis:

So, the only way that I was gonna be able to do it anyway is if I took a week off for work; I would have to get a hotel, and I have to find a ride there. And no one would allow me to do that and I didn't have the

resources myself. So, I was basically forced into it. I didn't particularly want it to happen, I wanted...I could at some point, but I didn't want one this early. (lines: 153-157)

Because she did not have enough resources, such as a car or place to stay, she could not have an abortion. Her paternal grandparents did not allow her to stay at their house anymore when she told them that she was pregnant.

They didn't have room. I was already staying in a computer room on a couch. So, me being pregnant there, they wanted me... I mean, I think they had good intentions by saying this, but they kinda went about it the wrong away. They wanted to make sure that I was in my own space rather than that back computer room. (lines: 174-177)

She needed to leave the house.

Over the pregnancy, she tried to make herself excited:

I tried to make myself excited and it was definitely an interesting experience. I had decided that I was going to go as long as possible without medication. I decided that I was going to try to use a birth ball. I was gonna try and use different pushing techniques. (lines: 190-193)

At the same time, she was strongly frustrated because she felt like "no one valued me," and:

I felt like I was basically a walking incubator. No one cared what I had to say about my own body. They just wanted the thing inside of me. A lot of people say that they are pro-life, but I think that they're pro-birth because they don't wanna help with Medicaid, they don't wanna help with other resources, they don't wanna help with food stamps or anything like that. They just want the baby to be born. They don't care about the moms. That's really how I felt throughout the pregnancy. (lines: 160-165)

Because of those feeling, she was depressed for most of the pregnancy. She also worried about a miscarriage her baby because her husband's mother miscarried once.

During her labor, M1 needed to get an epidural after 11 hours. The clinic nurses gave her Pitocin to speed up her labor. She did not want to get an episiotomy, this is

where a doctor will cut the area of muscular tissue between the vagina and the anus for making a vaginal opening for delivery, but her doctor decided to do that to her. After she delivered her baby, he swallowed meconium (excrement), and he needed to go to the Neonatal Intensive Care Unit (NICU). She could not realize what was happening exactly because the clinic nurses did not explain about the NICU and the situation.

I didn't realize exactly what was happening at the moment. They didn't say anything about NICU. So, they let me see him and then they took him away before I could say that I wanted to breastfeed him. And the thing is, the nurses that they were at that time, had not touched my birth plan. (lines: 206-209)

She wanted to breastfeed directly after deliver, but she could not do it because of that.

Taking away her baby made her upset and have doubts and disconnects feeling to her baby. It would be part of reason why she had postpartum depression:

So, I was really upset about that I didn't realize that my child has the NICU, I asked "Okay, well, how long is he gonna be gone?" they said about an hour and half. It ended up being four and half hours. And, I feel like because there was such disconnect and I was so unhappy with the experience, when I saw him...I just, I didn't connect. (lines: 220-223)

The disconnected feeling she had from the birth experience did not subside, so she went to a doctor to deal with what she felt was postpartum depression. "I went to a doctor and I told him that 'You know, I think I have postpartum depression, I'm having great deal of difficulty convincing myself that this is my baby that it's not somebody else's." The doctor suggested her to take a paternity test, and she thought listening what the doctor said to her did not help to deal with her postpartum depression and disconnect feeling. Also, he prescribed a medication that was not safe for breast-feeding, so she went to a different doctor and she gave her an anti-depressant that was safe for breast-feeding. "So, I took that for a month and I felt much, much, better." She got the medication, and

she tried to do breast-feeding and co-sleeping to bond with her baby. These approaches succeeded to make her connected with her baby.

What really honestly saved us, I think, was breast-feeding co-sleeping. . . . so, even though I was absolutely terrified because of what everybody had said about SIDS [Sudden Infant Death Syndrome] and then rolling over on top of your baby. I ended up bringing him into our bed, and all of a sudden I felt so much better because I was sleeping four to six hours a night. And, once he finally started sleeping through the night, we really started to be able to bond. (lines: 234-242)

She ended up deciding to deliver her baby, and 9 days after she delivered her baby, M1 and her boyfriend got married:

We ended up getting married 9 days after my son was born because in this Missouri, if you are not married within 9 months of your child being born, the father does not get rights to his child unless he goes through a very lengthy and expensive legal process. So, we thought "Okay, that's kinda stupid, we wanna get married eventually anyway. So, why don't we just do it now." So, we went down to the courthouse and got married. (lines: 72-76)

There was a person who helped her since she was pregnant with the baby. It was her husband's mother. The mother-in-law sometimes supported her; for instance, when M1 brought back her baby from the hospital, she felt at a loss and she called her husband's mother. She came in the middle of the night to help M1.

The night that we took my son home, he needed to get changed and I decided okay I'm gonna have to do it finally. I'm gonna have to change him and he ended up peeing on me and all over the floor and his brand new bathtub and I just sobbed. I thought, "We have to give him up, we have to give him up for adoption. I can't do this. I'm a terrible parent. I can't do this." And we ended up calling my husband's mom and she came over and God it was like 2 in the morning and she had to work the next day but she did help with that, that was really awesome. (lines: 305-310)

Besides her baby, M1 mentioned that she had another issue with her husband. He had some mental issues, such as depression and anxiety. Also, he had Attention Deficit

Hyperactivity Disorder (ADHD). M1 and her husband tried to get the proper mental care for him. "But with the insurance that we have, with jobs, trying to deal with having a child, it's been extraordinarily difficult to get him the proper care." Also, He had a thyroid issue, "so he gained a lot of weight very quickly. He was lost, lethargic. He didn't feel good. He was irritable." They got his thyroid in check, and they got medication for him. However, the medication did not work so well for weight loss since he gained too much weight. He also had problems with a stomach valve that never closed, and it made it difficult for him to deal with his diet because he could not eat many foods due to that. "So, he can't eat fish, he can't eat potatoes, he can't eat most vegetables. It really limits his diet, and currently the way that he's able to cope with life's by eating."

When I interviewed her, the husband's mental health was worse, and he had to stay at a hospital to have treatment for his mental issues. Because of that, he lost his job. M1 said:

Because we're so young, because we have very little work experience and we still don't hold degrees, we make very little money. So, we're trying to feed three people, currently on 9.50 an hour and it is really difficult, and it is really stressful. (lines: 107-110)

She thought that situation gave him pressure and affected his mental health. She was hoping that her husband would find someone whom he could trust and get a plan together for his long-term duration hospital stay. Also, she was hoping that he would get medicine that would work for him. Because her husband was not able to work at that time, she was working full-time. She was busy with work and no one was able to take care of her baby, so she left the child in a crisis nursery house that is open 24 hours 7 days a week, and she can visit him whenever she wants. When I interviewed her, she was alone in her home.

Meaning of Having Her Child. This section discusses the meaning of having her child for M1. The core meaning is the most important aspect when considering the meaning of having her child. In addition, there are three aspects that are connected to M1's core meaning: (1) motivation that came from having her child, (2)expanding herself by being a mother, and (3) the mother's supporter.

Core Meaning of Having Her Child. Having the child changed and expanded M1 and opened her up to the world and tapped into a deeper motivation to contribute to the world in a positive way. This is the core meaning of having her child. When I asked her "What does having a child mean for you?" she answered this question quickly. I counted how long she took to respond to the question because how quickly she gave the response would prove the meaning of having her child. She took four seconds to respond to the question, and after she started to talk about it, it was with confidence, comfortable and natural feeling for her:

R: Okay. May I ask, what does having a child mean for you? (16:39)

M1: Having my child? (16:40)

R: Yes. (16:40)

M1: (16:44) More reason to stay motivated, and an opportunity to help the world by raising a good person who can point out the things in society that are wrong and try to fix them and understand that, Hey, women are valuable, the earth needs to be treated with respect. And you know, make sure that. My hope is that someday he can do more than I can for society and the planet. (lines: 126-132)

This is her core meaning of having the child. She expects that her son will do more than she did for society, but she wants to contribute to the world by raising him. "By raising a good person" (lines: 129-130) is the key role for her life, and because of that, she started to connect to the world more than before, and she gained her motivation.

51

Motivation that Came from Having Her Child. Before she had a child, her aspiration to try to live her life in a positive way was originally high. She described how she had lived her life. There were tough and challenging events in her life. "I remember thinking there I've done everything right. I never drink, I never smoked, I never did drugs. I wasn't even late to school" (line: 60-61). She had kept her life from getting worse. She tried to do "everything right" (line: 60), and she was clear that "I never gave in" (lines: 351-352):

Being completely honest but I never gave in...yeah I don't think that I ever really gave in. I mean, I was incredibly depressed, but I always tried to combat it. I tried to get with friends. I tried to have more interests. I would watch movies. I would write. I would draw. (lines: 351-354)

She tried to improve her quality of life even before she had the child. She did not mention how she wrote or drew, but it would help her to improve her mental state. This effort to keep her attitude of positivity would be connected with her core meaning of having her child, which was "raising a good person" (lines: 129-130).

She had an ability to see herself comprehensively and objectively. She showed that at the end of the interview when I asked if there was anything she wanted to add:

R: Do you want to add or share anything about like your family, child...if you want?

M1: I'm really surprised that I turned out so okay (laugh). I feel a lot more level headed than I think I should be which kind of concerns me and makes me think, "What I if I'm not as level headed as I think I am." I mean that, yeah, we have problems, yeah, I have issues, but I'm kinda impressed with myself every now and again because of we're doing okay. (lines: 339-344)

I did not ask her feelings about the interview, but she surmised how she felt, and how she thought about herself in her current life. Then, she encouraged herself by saying that she was doing okay even though her current situation was challenging, that her husband had

to stay at the hospital for his mental health issues and that he lost his job. She tried to find positive aspects in her life, herself and her situations. She showed that also when she mentioned her child the first time, before the researcher asked her "what does the child mean," she said a positive comment about her child:

M1: Luckily enough though, my child is a fantastic child. I'm not sure what we've done to help him other than just trying our best. But, we're really trying to help my child be a good person and enjoy life and so far he's rewarded us with being really fantastic. I think my child's pretty good, right? (Directing her question to her social worker through the Healthy Families America Program)

Social worker: Yeah, absolutely.

M1: Yeah, he's pretty awesome kid. He loves everybody very much.

(lines: 98-104)

It was in the beginning of the interview, but she already mentioned that she was raising a good person before I asked about her son. How to be better and how to become good or raise a good person are keys to understand her. Here she is recognizing that she was raising a good person, which gives her more motivation to raise her child with a positive feeling.

After she mentioned that her child was "pretty awesome" (line: 104), she continued, "On top of all of this we're also trying to better our education, so I'm going to college now, now that I can afford it. I'm working fulltime now" (lines: 104-106). When she was talking about her core meaning of her son, she said that her son would be able to do more than she did in the future. She mentioned that she was a feminist, so she felt there were limits in her life as a woman, and also there were limits because she had her son at a very young age. However, she recognized that her son gave her more motivation for her life:

And, also for me, having him has a lot of motivation to be able to get up and out of bed, to be able to do dishes, to be able to get a job and try to better my education. Definitely motivation and hope for his future. (lines: 135-137)

Having the child encouraged more motivation in her life. Trying to raise a good person gave her a larger purpose in her day-to-day activities. Listening to her story made me recognize that there were significantly positive aspects of having the child for her. One of the positive aspects of having her child was gaining her motivation, and there is one more aspect that can be captured from her interview, that is expanding herself.

Expanding Herself by Being a Mother. Before mentioning about expanding herself, it is important to understand three aspects of being a mother for her: feeling disconnected, gender conformity and herself before she had the child. About herself, it was already mentioned in a previous section that she always tried to find positivity and goodness in her life. However, here it would focus more about what is being a mother for her even before she had her son.

Feeling disconnected with her son occurred right after she delivered him. It was already mentioned in her biography that her son was taken to the NICU because he swallowed his meconium. She explained that moment:

So, I was really upset about that I didn't realize that my child has the NICU, I asked "Okay, well, how long is he gonna be gone?" they said about an hour and half. It ended up being four and half hours. And, I feel like because there was such disconnect and I was so unhappy with the experience, when I saw him...I just, I didn't connect. I had no feelings for him whatsoever. I just...I could not care. I was not capable of caring and there was so much disconnect that I felt like "Okay, well, he [a doctor] took him away for so long, what if he's not the same baby?" So, throughout the first month, I was really trying...I knew that logically it didn't make sense. I knew that he was the same baby, but I still had issues with trying to reconcile, "Okay, this is your baby, not somebody else's," and so it was really difficult to try and bond with him. (lines: 220-228)

Because her son was taken to the NICU, it was understandable that she had uncomfortable feelings for the situation and felt a disconnection with her son. However, M1 herself had already felt a disconnection that came from her childhood experiences. She said that because her parents, especially her mother, left her and her sister many times, she had doubts and mistrust:

M1: I know how hard was for me having both of my parents leave me. She had always talked about leaving just going whenever she was upset and she would take the car and drive and we never knew if she was gonna come back. So, honestly when my grandma said "your mom is gone," I thought, "Okay, she finally left us."

R: When you heard when she died?

M1: Yeah. I thought she had truly taken the car and just driven away and she wasn't gonna come back. So, it's really difficult for me to be able to connect with people and be so open. I mean now it's like, I'm able to make friends rather easily which is a newfound thing for me. But, being truly vulnerable with them is incredibly scary for me. (lines: 249-257)

She looked back at herself and her past during the interview. She recognized that she had difficulties with connecting to people and being open. She mentioned that being vulnerable is scary for her. Being open and connecting with people gave her uncomfortable and scary feelings because she was afraid that people were going to leave her. It connected her childhood trauma. Her mother left her so many times without explanation even though M1 was a child who was vulnerable and needed affection and protection. M1 missed an opportunely to learn how to trust people when she was a child, and she got the feeling that people would abandon her. The feeling that came from her childhood increased her disconnected feelings with her child:

But it took an incredible amount of effort and time for me to be able to actually say, "Okay, yeah, he's definitely our baby and it's okay to like him. It's okay to love him. It's okay to connect with him and be vulnerable." I still struggle with it sometimes because considering all the things that have happened in my life with people abandoning me, or

perceived abandonment. I'm really, really, scared to get close to him in case something happens to him. (lines: 243-247)

Having the child made her aware of her feelings of fear and mistrust with people more clearly. She wondered to herself why she felt strong difficulty connecting even with her own child. Having the child made her re-think her issues.

Also, she mentioned gender conformity. When she was pregnant, until she found out that the baby was a boy, she expected to have a girl:

Up until I found out that he was a boy, I was pretty excited. And then, I had been so set on having a girl because I honestly missed the connection that I had with my mom. And I was really wanting to be able to repeat that. I thought maybe I would start feeling better. (lines: 266-269)

This expression appeared because she missed a healthy relationship with her mother. She wanted to recreate a healthy relationship with her daughter that she could not have when she was a child. However, she found out her baby was a boy, and through raising her son, she learned gender conformity. She explained that:

I found out he was a boy and honestly it was really devastating. Now I'm okay with it. I mean...I've learned a lot about gender conformity, since then and realized that. You know, we can still have tea parties and it's okay. He can still wear dresses if he wants to and that's okay. We are not limited to monster trucks and mud although those are...those are fun. But, I could still have that relationship with him even though he's a boy. It's okay. So, it took me a couple week after that to...realize that it was gonna be all right. I feel bad about it now (laugh). (lines: 269-275)

Having her son expanded her world to learn about gender conformity, and it gave her confidence that she could have an attachment to her son and she realized that she can still recreate a healthy relationship with her son as a mother.

Herself before she had her son could be read when I asked her "How do you feel about being a mother? What do you think about being a mother?" (line: 323). She

immediately, taking only two seconds, responded, "I always have been" (line: 324) because she got her sister when she was five years old, and her mother had postpartum depression, so she had to take care of her sister since she was that young age. She gave an explanation:

R: How do you feel about being a mother? What do you think about being a mother? (40:40)

M1: (40:42) I always have been. When my sister was born my mom had extraordinarily bad postpartum depression. She taught me how to change diapers. She taught me how to warm up a bottle for my sister. And...she'd lock herself in her room to cry so I took care of my younger sister and I took care of her when my mom was sick. I took care of her when we left our dad. I took care of her after my mom died so I have always helped raise my sister. (lines: 323-329)

Taking care of someone was already usual for her. She also mentioned "I don't feel particularly different just because it's what I've been doing for so long. I've just always taken care of people. That's just what I do" (line: 332-334). However, because she got her own child, her world expanded more to explore herself, and she started to feel a responsibility to raise a good person by being a mother to her son. She started to recognize herself as a mother more than just taking care of someone:

I'm not a mom right now, what I do with myself. So, it's not too much of a change like in the sense of who I am as a person and what I do with myself, it's more a change of how I'm going about doing so. (lines: 336-338)

Having the child did not change who she was, but gave her direction how she was going to do for her life. That phenomenon gave her more reasons to live toward positivity.

She became aware of how she would be able to connect with the world, and it gave her better self-esteem. Having the child also gave her confidence to speak out about her experiences and feelings to help other people. M1 said that she wanted to help people anyway:

I'm a very, perhaps overly so, empathetic person. If I see that somebody needs help or they need care, I am going to go out of my way to help them. I can't stop myself even if it's at the expense of me. (lines: 329-331)

This is when she was talking about how she was feeling being a mother. However, her desire to help people progressed into advocating for other women. I asked her what kind of feeling she usually has after she got her son.

R: So, what about now, what kind of emotional feelings do you usually have after he was born? (36:17)

M1. Depend to may see 2(26.17)

M1: Regard to my son? (36:17)

R: Yes. (36:18)

M1: Like how everything went?(36:20)

R: Hm-mm. (36:20)

M1: (36:23) It makes me wanna advocate for other women particularly in Missouri, because there may be somebody in the same position that I was in that has even less information than I did. And, perhaps she has less support than I did. So, I wanna be able to help other women here. In any shape or form, but I was able to talk to [a clinic] and they're going to take my story and hopefully be able to do something with it. (lines: 290- 294)

I counted how long she took to respond to that, and this aspect, to advocate for other women, came out naturally and with confidence from her mouth. Advocating for other people would be a new aspect for her. Because she had her child, she was encouraged to think in that way. There were not so many choices for her when she decided to have the child, but the experience encouraged her to help other people as a result.

Having all my choices taken away from me has made me really determined to have all the choices now. So, there's nothing that I can do about it now that he's here other than try and make sure that other women are more informed than I was and that they're more confident than I was. (lines: 296-299)

Also, she started to have better self-esteem herself. She did not have enough self-esteem because her mother put her down so many times and she thought, "I was terrible person. I

thought that I was absolute shit for so long, truly" (lines: 388-389). However, through raising her child, she started to have more confidence in herself:

So, I eventually just stopped caring and having a baby really helped with that because I was naked in front of a lot of other people and breast-feeding. So, it was just like...why should I care now? I'm married, nobody else wants to look at me, so if...as long as I'm okay. Particularly, for me it was how I looked, I had really bad acne back then too which I still have some but it was really bad then, but just my son loves me, my husband loves me. That's good enough. (lines: 366-371)

Her comment reminded me when she asked me what I thought about breast-feeding when I met her the first time. She was wondering what people thought about breast-feeling her child even though he was old enough to stop. I said that even though other people think your child does not need breast-feeding anymore, if you think it is good for your child and your child seems to need that, it is okay to continue that. She looked glad that I said a kind of positive comment for her. However, it was just confirming for her because she already had confidence about it like she said above. She gained self-esteem because she had her child. Of course, she still needed someone to back her up.

<u>The Mother's Supporter.</u> Mostly, when she was frustrated, she did not have enough resources to raise her child.

So, it's incredibly frustrating now that we don't have the resources that we expected. And, money is a big issue when you have a kid, and we just didn't realize how...that it was gonna be. Pretty frustrating. (lines: 186-188)

She was talking about her husband's mother who, she thought, was going to help her more. She did not feel significant frustration about having the child itself, but she felt financial stress and a lack of support from others. Having someone who supports her would help to reduce that stress, encourage her to raise the child and stay positive. She

mentioned that the existence of the social worker was really helpful to encourage her parenting:

Now whenever I have difficulty with, you know, trying to think am I going to be a good parent? The thought of adoption doesn't come to me nearly as much. For me I'm just so self-deprecating. I'm so..."Oh you're a terrible person all the time." I feel like in those moments I'm not gonna to be a good parent and he deserves better than me. But, uh, it definitely helps having the social worker comes because she's able to say, "Yeah, he's totally on target with everything. He's really happy. He's enjoying reading. He's signing." So, having that reassurance every now and again that okay we are on track he is doing okay. That's really, really, helpful. (lines: 310-317)

Having someone who could encourage her helped her to raise her child with more confidence. She needed to verify that she was doing okay for herself and her child, but it was a challenge for her to do it by herself, especially because she was self-deprecating and that came from her childhood experiences. Also, she mentioned that social media helped her to gain better self-esteem. Connecting with society and other people who have different thoughts and learning about other people's thoughts and perspectives helped her to improve her self-esteem. Also, knowing different ideas and thoughts like that made her expand her perspective of the world, and connect herself and people or society by seeing good in people and her:

I guess before I really hated myself, but actually, surprisingly, getting on to social media really helped me because I saw a lot of posts from friends who are feminists and there were a lot of incredible ideas that I had never thought about like, "If someone, if a guy likes me I don't owe him anything." That concept had never crossed my mind in my life before. "Not having to impress anybody else, just trying to love myself." All these ideas that I got from social media helped me so much. Whenever I was able to expose myself to that, so it's not like, you know, I was addicted to Facebook or anything, but being able to see some of those, different posts especially because I was put down by my mom and my grandma so much. It helped incredibly to see that other people could see the good in themselves and they were trying to help me see the good in me. (line: 357-366)

Mother2 (M2)

I met M2 also through the PSC's connection. I visited her home with another social worker from the center when I first met her in early in 2016. She was 32 years old, Native American, and had two children who were 10 years old and 21 months old. A couple, friends of M2, was living with her along with M2's son, her daughter, and her boyfriend. M2 was friendly and listened to my explaining about the research. It was the same procedure that I did to M1, so I brought the informed consent and the latter that were used when I explained about the study to her. She read those papers and signed the informed consent of the first time. She asked me why I am interested in this study and my up bringing. When I was talking with her, the social worker played with her son (her daughter was not there; I did not ask where she was, but I assumed the daughter was in a school), so I could have a relaxing and calming conversion with M2. I stayed at her house around 40 minutes the first time.

When I met her the second time, it was several months since I met her last time. Somehow, I could not have enough communication with the social worker who introduced me to M2, so I could not visit her with him when he went to her house. The social worker finished going to see her constantly, so I contacted M2 directly and made an appointment to see her again. I was worried that M2 changed her mind to be a participant because we did not see each other several months, but when I met her again in May, she was still willing to help me out by being an interviewee.

When I went to her house the second time, one of her roommates was sitting on a sofa in the living room. M2 came back home almost at the same time I arrived to the

house. M2 said that she wanted me to wait a little, so I sat down on a sofa in the living room and chatted with her roommate. M2 was moving around and saying things like "I'm sorry my house is messy. I cleaned up this morning because my child..." and asked me if I wanted to drink something or not. I replied that the house was not messy, and I was okay without any drinks. There was M2, M2's son, her roommate, and me. After M2 came back to the living room, we talked about what we were doing during the time when we did not see each other, such as our spring semester. I then asked her if she was still willing to be my participant, and I confirmed that her will did not change. She had several questions about my research, such as the purpose of the study. She also was interested in culture differences of child abuse between Japan and the U.S. I talked about the information I knew. She mentioned that she felt child-rearing was easier than in the past because she had her first child when she was 18 years old, so she said she was too young to have a child. We talked about one hour, and I made an appointment for the interview.

I interviewed her on early summer of 2016. When I visited her house, the couple, M2 and her son were there. M2 was busy cleaning up her house. She took me to the kitchen and made her son sit in a child chair that was next to me. She was telling me that she was busy that day. She gave her son a snack that was sausage. Her son was smiling to her and me, and ate all of his snack. M2 and I moved room to room several times because she wanted her son to play during the interview. We started the interview around 30 minutes after I came into the house. We started the interview at the bathroom (I was sitting down on a chair in front of the door of the bathroom, and M2 was sitting down on a chair in the bathroom) because her son liked to play with water. At the beginning of the

interview, her boyfriend, who was her son's father, came back from work. M2 introduced me to him because he had never met me, and M2 and I continued the interview.

The interview was a little hard to concentrate on all the time for M2 and me because we sometimes had to pay attention to M2's son, and there were people back and forth in the house. After her son played with water in the bathroom, M2, her son and I moved to the living room and continued the interview. M2 seemed not used to telling her whole life story, so her direction of her story was back and forth or skipped. It actually affected me when I was writing my interpretation. My thoughts were back and forth when I was writing down about her in this analysis section. The interview lasted one hour, 35 minutes, 54 seconds (1:35:54).

Biography of M2. When I interviewed M2, she was 32 years old. She had one 10 year-old daughter and one 21 month-old son and lived with her boyfriend. She sometimes worked at her friend's restaurant, but mostly stayed in her home and took care of her children. She had gone to college, and when I interviewed her, she had finished her third semester.

M2 was born as the youngest daughter in her family. She had one older brother and one sister who were about 12 years older than she, and she had another older sister who was two years older than she is. Her first memory was when she was around preschool age: her father or brother put and left her in a tree, and she was scared because she could not get down by herself.

I couldn't get down. And I'm like crying and freaking out. I was scared because it was really high up. And they were just like laughing at me and just like left me in the tree for a really long time. I think that's where my fear of heights stems from. Yeah, that's my first memory. (lines: 220-223)

M2's father was working all the time; "My dad, he worked all the time. . . . He was gone traveling a lot for work and stuff." Her mother also worked; "My mom, she worked, she wasn't home like until 5 or whatever. That was more when I was a older kid like 10, 11." According to M2, her mother was an abusive person. M2 remembered when she was around five years old, her mother was chasing her and her siblings with a knife:

She was chasing us from the house with this knife. And, I remember, I was so small. I was just like running around this and I'd run and slide under my bed. And she was just like, 'I'm going to fucking kill you. Waaaaa!' you know. (lines: 228-230)

M2 learned how to cook when she was around eight years old. "First thing I learned how to cook was spaghetti. . . . So, I could cook for myself when I got home." Her parents, especially her mother, drank a lot until she was 10 or 11 years old.

When I was growing up, she was a severe alcoholic. She'd have beer in her tea cup driving us to school in the morning or driving home from the library. . . . They drank, drank, drank, drank...their whole life revolved all around drinking. (lines: 152-156)

Her mother did not admit she was an alcoholic, but M2 thought her mother drank all the time until she was 10 or 11 years old. "She won't ever admit to it, she was like, 'Yeah, I know, I drank a lot but I never needed to have it." The parents quit drinking after they moved to the south side.

M2's mother abused her children physically and emotionally. According to M2, her father did not usually spank M2, but he was a part of the abusive situation: "He was the bark and then my mom was the bite." He hit M2 for the first time when she was 13 years old. Before that, he had never hit her, but she was afraid of him more than of her mother.

But, for some reason I was more afraid of him and he never...he didn't never hit me until I was 13 years old was first time that he hit me. But, I was more afraid of him, for some reason, than I was of her. (lines: 366-368)

With her father, she did not communicate deeply until she was around 18 years old. "My dad...I didn't have like a real adult conversation with him until I was like 18 years old. So, I didn't know really like anything about the guy." Because he was at work a lot, they did not have enough time to communicate and "I think that he didn't know how to relate to me." Later in life, her father tried to be involved with her more than he was when she was a child.

M2 enrolled in high school, and she got to know her current boyfriend. They were just acquaintances through their friends when they were high school students. She ran away from her house when she was 16 years old. "Yeah in high school I ran away from...and I was 16." She said that she did not want to deal with her problems with her family, such as difficulty communicating, so she left for a year. She hitchhiked and hopped trains across the country. She remembered that time:

[I] just met a lot of really interesting people and totally relied on the kindness of other people to get by. It was almost like a spiritual thing. I mean, I wouldn't say that like I believe in God or...like that whole thing, but I definitely did leave like my fate into the universe or whatever. I learned a lot about myself and other people, did a lot of people watching. (lines: 286-290)

Her parents, especially her mother, were upset that she ran away from the house and hitchhiked. Even M2 tried to talk with them on the phone, but they refused to talk with her.

My mom would just be like, "I just can't talk to you." She would hang up on me. She would just be like, 'I don't wanna talk to you, I'm not ready talk to you.' She would hang up on me. (lines: 294-295)

When M2 was 18 years old, she got together with the man who is her daughter's father. The man was nine years older than she was, and she got pregnant when she was

18 years old. She aborted her first pregnancy. "I wasn't ready to be a mom. I was like, 'I can't do this, like, I'm a teenager. I'm selfish right now." Three months later after she had the abortion, she got pregnant again and she decided to deliver her daughter because she thought: "And I was like, 'Well, it's meant to be...you know, I'm meant to have this kid." Her mother did not allow her to stay in the house when she found out that M2 was pregnant. "She kicked me, my daughter's dad, and then my daughter's dad's son was staying with us. And she kicked us all out in the middle of night in the rain and when she found out." She said that was hard. She needed help because she was trying to quit drugs but her mother did not help her:

It was really stressful and I was trying to come off of, you know, drugs and that's what I was initially asking my mom for help like, "I need help." And she was like, "Well, you got yourself into this, so you can get yourself out" kind of the attitude. (lines: 63-66)

At the same time, she said that she did not care because she made the decision to deliver the baby. M2 started to stay at her best friend's house, and the best friend's mother helped her a lot while she was pregnant:

She would drive into town everyday, take me to my appointments or whatever, paid for, out of pocket, paid for the medicine that I needed every month which was like...\$350. She paid for that like out of her own pocket, out of her own bank account, made sure that I got to my appointments and had everything that I needed and just...did what a mom, you know, I think would do. (lines: 73-78)

Because the best friend's mother helped M2, it made her delivery easier, but the help would make her mother hurt;

I think that hurt my mom. I think that she was, she kinda seen you know like...Oh, when I showed her like that first ultrasound picture of my daughter, then she wanted to turn around and be "Oh, I'm gonna be a grandma...you know, I'm your mom and blah, blah, blah, blah..." and I think it's almost like she was trying to compete with my best

friend's mom, because she paid the double deposit on this apartment that we were needing to rent. (lines: 80-85)

M2 felt sorry for her mother because she thought about how her life made her mother into the person she was, but at the same time, she felt that her mother walked away from her and did not help her, especially financially.

When M2 delivered her daughter, she was happy, but her boyfriend who was the daughter's father did not help her with changing diapers or feeding their daughter. She stressed out about taking care of her daughter by herself. She mentioned that she was young and did not have much patience, and she had her boyfriend's added expectations that she would raise the child. She fought with her boyfriend and had concerns about being a mother because she felt she was not adequate for her daughter.

I was a kid and just we were always fighting about her, and also, I was scared. I felt very inadequate. I didn't feel deserving of like this tiny little thing that's just gonna love you unconditionally. I kinda felt jipped. I was like, I don't get that, my kid doesn't even like me...It was just, I had this fairy-tale in my head of what it was gonna be like and it wasn't like that. (lines: 93-96)

She started to resent her daughter and when M2 was around 21 years-old and her daughter was around two and half years-old, she left her daughter to her parents. She then hitchhiked and backpacked again around the U.S.A. for 9 or 10 months because she felt her living situation was not the best for her daughter. She did not want her daughter reliving her mistakes or to be in a dangerous situation. One example of a dangerous situation was when she mentioned that she wanted to break up with her boyfriend and her boyfriend started stalking her:

My living situation wasn't like the best. When I had asked my parents to help me, take over...because it wasn't fair to her to have to live in my mistake. I mean...or put her in any kind of danger or anything. (lines: 100-102)

M2 was very aware of what she could do or could not do. She wanted to protect her daughter, but she felt that she was not able to do it at that time, so she decided to leave her daughter with her parents.

During her travels, her parents took care of her daughter and M2 broke up with her boyfriend who was her daughter's father. M2 said that she was thinking about her daughter all the time while she was staying away from her. She tried to contact her daughter, but her parents did not allow her to reach her daughter. "I would try and call to talk to her and stuff and they wouldn't...They wouldn't let me talk to her or anything. I wrote letters and stuff but I don't think that ever reached her." When she came back to her daughter, she was afraid that her daughter might forget about her:

When I had finally come and seen her, and she had just grown so much and I had missed that. It just like really hit me whenever my mom was like, "Do you know who that is?" And I was like, oh my gosh she doesn't even, you know...she's so small. She might not remember me. That hadn't even occurred to me. But then, she sat there and she goes, she was like this (M2 was gesturing like little shrug) and she was smiling and she was like "mm-hmm, that's mama." I was like, "Hi daughter (M2 said her daughter's name)" got down and she was just kinda shy and she just threw her arms around me and just held on so tight. And that's when I was just like..."I love you." It really, it was amazing. (lines: 103-110)

From that point, M2 started to bond and love her daughter strongly, and she started to live with her daughter, but she spent money on alcohol until she quit drinking later. She said that she was poor, so she could not provide enough food:

Like with my daughter, we were so poor. I would make dinner and there wouldn't be enough food. I would feed her and she would say, "Well, aren't you gonna eat, mama?" I'd be like, "No, no. I'm gonna wait 'till later." I was snacking when I was eating. But, it was like everything in the house. It just went to her. She was the only one eating because I would spend my money for like booze...or whatever. (lines: 158-162)

It was hard to admit for her about her situation, but she mentioned that she also had done a lot of treatments and programs. When M2 was 28 years old, her parents divorced. They were together since they were teenagers. They divorced after all their children grew up. M2 talked about the divorce because of her mother's infidelity. M2's father was upset when he divorced, and he had doubts that M2 was his biological child because her oldest brother was not his biological child. When M2 was around 25 years-old, she found out that her oldest brother was not a biological child of her father. She did not know because her father did not treat him differently. The divorce made her father into a different person from the one M2 had known.

He became a completely different person after they divorced. It was kinda rough at first...But, I'm still not exactly sure like what happened, but I think it, it was some kinda infidelity on her part or something, but he told me stuff like, he's like, "There's some things that have come to light, you may not be my biological daughter. I just want you to know that no matter what, I'm not gonna treat you any differently or love you less." And I'm like, okay...like this is all just out of nowhere. (lines: 335-340)

Her father cursed that if he did not have children, his life might have been better. He drank for a few months after the divorce: "I'd never heard him act like this or even be noticeably drunk like my dad...he drank a lot, but he was never like a drunk or, physically, noticeably drunk." She felt weird and uncomfortable to talk with her father about this issue, especially when he was cursing, and she told him that she could not talk with him about it. After several months, he apologized to her. "But he apologized and I don't know...we just kind of like bonded oddly." When M2 was 29 years-old, she went to jail for four months due to her second account of assaulting a police officer. Around that time, she mentioned that she had alcohol and drug issues: "that's when I was drinking a

lot...had some alcohol and substance abuse issues." Her dad visited her while she was in jail. "He came and visited me every week. He put money on my commissary every week. He wrote me letters, like we wrote letters back and forth." After she got out of jail, she quit drinking and stayed with her father and her daughter. Her current boyfriend also helped her when she was out of jail, "he was like the first person that got ahold of me." M2 and her current boyfriend talked on the Internet and started hanging out. When she was 30 years old, she and the boyfriend got pregnant with her son. She was worried to talk with her father about the pregnancy because she thought that her father might not allow her stay in the house anymore. She also was afraid to talk about it to the boyfriend: "I was more nervous about telling him because we hadn't been together that long and I was afraid of how he was gonna react." She called him to tell about her pregnancy, and he said that he would be by her side whatever she chose to do. "And he was like, and then had insinuated, that like, he was like, 'Yeah, let's do this." She found out her pregnancy at around 9 weeks, so her boyfriend and she had a lot of time to prepare for the delivery. He went to all her prenatal classes and doctor appointments with her. While pregnant, she was taking the General Educational Development (GED): "I got my GED when I was pregnant with my son. Actually, I was like 9 months pregnant, like ready to pop and I went and took the tests and stuff."

When I interviewed M2, her daughter was 10 years old, and she was struggling to deal with her daughter because her daughter was becoming a teenager. "She's in that, she's about to be a teenager. She kinda has that attitude, sassy. But, she's in this stage now where you can't tell her anything like...she knows everything. It's kinda

frustrating." M2 seemed like to look for how to handle her daughter who was a teenager. Her daughter made her tired sometimes because she wanted to play Mine craft with her.

She wanted me to play with her and I'm like I have played this with you. I'm just, I'm not interested in playing the Minecraft especially since you've been on it for five hours. You know, it's time to get off of it and you need to do something else. She's just honest, she's brutally honest. She has no problems tellin' me like how it is. That's kinda hard. (lines: 459-463)

At the same time, M2 mentioned that her daughter affected her positively and led her to expanding her life. The positive aspects of having her children are talked about in the section below.

Meaning of Having Her Children. From the interview data, there are five aspects that are connected to M2's core meaning of having her children. These five aspects are titled: (1) missing out on something, (2) feeling of unimportance and dilemma, (3) positive aspects of having her children, (4) her identity by being a mother, and (5) reflection and expansion of herself through her children.

Core Meaning of Her Having Children. Having her children made her better and gave her motivation to be better. This is her core meaning of having her children.

Because of her children, she tried to be better and expand her world and reflect on herself. She mentioned that children made her life better when I questioned her "how do your children affect you?" (line: 376). She took four seconds to respond to the question at first, and then there was a one-minute pause, but her voice was confident when she came back and responded to me. Her response is the core meaning of having her children.

R: How do you think how do your children affect you? (1:10:29)

M2: Like emotionally? (1:10:32)

R: Yeah, emotionally. (1:10:33)

M2: (1:10:34) Um...(1:10:38) Well, it's definitely for the better...you know it's just stuff like that. ((1:10:52-) Her son was wearing a box for

a hat and dancing and M2 went to look for drinks for her son and her. She came back to the room. (-1:12:01)) They definitely affect me for the better...especially, you know, my daughter, she's just so wise, and she's just has these, you know...just her vision of the world and the world around her is, it's amazing. (lines: 376-382)

She described positive aspects that she had been gotten by being mother. At the end of the interview, she mentioned that she was struggling to deal with her daughter recently because her daughter was a teenager and always against M2. However, when I asked how they affected her life, she commented positive aspects about her children primarily. How her children had affected her is discussed later sections. Before focusing on the details of how her children affected her life, it is important to understand the issues she had with herself that are related to her childhood.

Missing Out on Something. During her story, she mentioned, "missing out on something" (lines: 278-279) that she felt mainly when she was a child. She said the phrase when she was telling me that she went hitchhiking for the first time. She was 16 years old and a high school student. She could not talk about her issues with her parents. She could not get help from her parents emotionally because when I asked "Tell me about when you faced difficulties with your parents in your childhood" (lines: 265-266). She responded that she was always in trouble, and she wanted to run away from her problems instead of dealing with them. She could not feel that she could get help from her parents:

I didn't ever feel that I could talk to them like what was going on in my life or if I was in trouble or needed help. I didn't feel, like, that I could go to them and they would help me. (lines: 270-272)

It was difficult to concentrate on studying or keep going to school, and she decided to do the trip for around a year by herself. She told why she did the trip, and then she mentioned missing out.

I felt like I was missing out on something like life or I didn't even know what. But like sitting at school and just with the same people who had been an asshole to me all through like elementary school, middle school and stuff. I just had enough and I was...was over it, I was gone. (lines: 278-281)

When I interpreted her interview, I thought missing out on something could be thought of as importance of her existence. When she was talking about her childhood, and even when she was talking about her relationship with her children, she said that she sometimes felt that she was not important. She used abandon and burden to express herself where she could not feel her existence was important. She mentioned that she felt abandoned and a burden during the interview, when she was talking about a relationship with one of her sisters who was the best behaved in her family:

I was always abandoned or my sister was too cool to hang out with me or whatever. I was like a burden, I was, always felt like burden on my family. Then, that was hard and not that it affected my self-esteem a lot later, you know in life and school and stuff, just like very closed off and withdrawn. But, I just didn't feel important. (lines: 240-243)

According to M2, she always made trouble, and one reason for that, she said, "I wouldn't do my homework. I got more attention for not doing my homework than doing my homework" (lines: 273-274). She needed more attention and affection from her parents, especially from her mother. The lacking of her needs caused her to make trouble when she was a child. When I interviewed her, she still hoped to get love from her mother, but at that same time, she had conflicted feelings about why she needed to care about her mother:

I want to make her happy or proud. And it's just like why do I care what this woman thinks? I haven't been anything that she's ever expected, like a constant disappointment. For some reason, I want her to accept me and love me and understand me...and it drives me crazy because I'm just like, "Why do I care?" (lines: 299-302)

It was part of the missing out feeling that she had since she was a child. She wanted to be loved by her mother, but she could not feel that, and she wondered why she needed to think about her mother who did not meet her needs. Her mother took care of M2's daughter when M2 hitchhiked a second time. Her mother spent a lot of time with M2's daughter, and she seemed like she was trying to be a good grandmother for M2's daughter. However, M2 expressed her feelings about her mother when she took care of M2's daughter for a long term.

She spends a lot of time with my daughter and that kinda bothers me because...it only bothers me, not the fact that she's being an amazing grandma, you know, like mom kind of person to her like what she should have been like towards me, so understanding, unconditional love, you know, all of that. (lines: 302-305)

She felt that her mother should have given her understanding and unconditional love too. Even though her mother helped her to take care of her daughter during the time, her mother's attitude bothered her. M2 was missing out on understanding and unconditional love from her mother, and she felt, "I am not important" (line: 250).

Feeling of Unimportance and Dilemma. The previous section already quoted some of M2's feelings that related to her negative self-esteem. During the interview, she said several times that she felt she was missing out on her needs. Her negative self-esteem caused a dilemma when she faced being involved with her children. She felt that her children would not need her:

Sometimes, I feel like...oh they'd be better off without me or like...I'm just making their life worse...they don't need me or...it'd be, it'd give

them a better character like if...you know, if they had felt I was gone or something. They would have some story about their mom abandoning them...you know, just...thoughts like that. And that's really hard to...depression and stuff and to make yourself not think those things like, it's not true. But still there's just that little thing that's like in the back of your head that I'm not important. I don't...They don't need me or...I'm not worthy. (lines: 245-250)

The feeling came from her childhood because she could not feel that she was loved or understood by her family, especially by her mother. That was difficult to believe in herself that she was enough because she felt that since her childhood. It was mentioned as the core meaning of her having the children, because of her children, she tried to be better, to rid herself of negative feelings. She tried writing and talking with her friends.

R: So...when you have that feeling how do you deal with that emotional feeling?

M2: Oh, somedays are better than others...Sometimes it could spiral into, making it a bigger problem or issue than it is. Being bipolar...just manic depressive...like...sometimes I'm better at snapping myself out of it than others...you know like...writing it down, that helps...talking about it...(lines: 252-256)

She tried to get better for her mental state to be stable to face her children. She was aware that she had feelings like, "I'm not worthy" (line: 250). However, she was saying to herself, "it's not true" (line: 249).

Sometimes she needed to step back from her children emotionally:

I don't want these guys to ever feel like that like they don't matter or they're not important enough for my time or love, and it's just like...this like cycle because I feel like that. And then, I know that I've got to somehow have to be emotionally neglecting them, you know, when I'm feeling like that or in that kind of mindset you know. So, it's just kinda like a weird catch 22. I want them to feel important and that like they could do anything. And I love them no matter what. And but then in the same breath I'm not...I'm nothing...just like, you know...it's confusing. (lines: 258-264)

This complicated mix of feelings made her depressed. Having her children made her face those mixed feelings. Her children motivated her to get better, which was already mentioned as the core meaning of having her children, and through the interview, she told me a lot of times about the positive aspects of her children.

Positive Aspects of Having Her Children. During the interview, M2 talked about how her life was challenging. She was struggling with drinking and drug issues that she inherited from her parents. She had her daughter when she was at a young age and she needed help, but her mother turned her back on M2. Even though there were many challenges for her, she talked about brightness in her life with her children.

When she was talking about how hard being a mother is because she had her own issues such as drinking. She also did not know how to deal with her children, "especially when the kids are being like crazy" (line: 165). She also had finance issues, but there were still moments where she felt fulfilled.

Sometimes, it just seems like...especially when the kids are being like crazy, you know, It's just like everything, it's just like weighing on you. There's like all these financial problems...kids being crazy. They don't even wanna listen to you. But then there's just those...in between moments where, they stopped, and they'll just hug you out of nowhere. Just like, just makes it all just worth it, you know just that smile that hug or...of course watching when they're sleeping. Being all calm. (lines: 164-169)

The moments comforted her, reduced her stress and made her feel like it was worth it.

Receiving hugs and affection from her children out of nowhere had filled in her missing out feelings. The moments affected her positively, and it had occurred in front of her repeatedly. When she talked about when she got her GED during her pregnancy, she mentioned that her children taught her about herself.

Despite all my obstacles, I got my GED when I was pregnant with my son. Actually, I was like 9 months pregnant, like ready to pop and I went and took the tests and stuff. That was like a big moment for me because I had put it off for so long. But being able to learn as much off of them as they from me. They definitely have taught me a lot about myself. (lines: 183-187)

Like she said that her children made her life better, she wanted her children to be proud of her and that made her put effort to take her GED even almost she was going to deliver her baby. It would affect her self-esteem positively, and at the same time, she was aware that her children helped her to learn about herself. Learning about herself through raising her children is one of the positive aspects of having her children.

Her Identity by Being a Mother. She talked about her thoughts about being a mother. She was struggling where she felt pressure that she would have to erase her identity to be a mother that fit a conventional image of mothers in society.

I think I struggled a little bit with like that identity of just being a mother. Like is this what I'm going to be like from now on is just a mother? Am I gonna be referred to as my son's mom or my daughter's mom and I'm not gonna be myself? So, yeah I mean like this being a mother mean that you lose who you are? And then you're transformed into this new identity. (lines: 173-176)

Being a mother made her think about her identity. She was afraid that she was not going to be herself if she was going to "love to serve your kids and your family" (line: 177) that would be a conventional image of a mother in society. She mentioned several times that she did not follow the conventional way. For example, when she was talking about how her current boyfriend, who was her son's father, was doing well with her and her son, she mentioned that they did not follow conventional way:

We are definitely do things our own way, or definitely not conventional, normal, kind of family...but we have a lot of love for each other, and...We have our own problems just like any other couple and stuff. (lines: 45-47)

Since she was a child, she had been thought about her identity and she could not accept her new identity that was her existence unconditionally for her family. Even when she became a mother, she struggled with conventional images of being a mother. Having the children made her rethink it, and she answered for herself what was being a mother for her:

I think that you have to be yourself and hold on to, you know, pieces of you to show your kids. Like, I don't know...how to be an individual, be proud of you are. And you know like, you don't have to fit this mold just because society says that, you know, you have to be a certain way. But, I think that it's important. It's very important to be a mom and I'm proud of that. I'm very proud of my kids. I want my kids to be proud of me someday." (lines: 179-183)

Being herself before being a mother and being proud of herself were difficult for her because she had a feeling of missing out. Having her children made her feel better to be proud of herself for being a mother, even though her way did not follow the conventional society. She became aware that she was worthy to her children. That feeling came from being proud of her children, and she made a goal for herself to make her children proud.

Reflection and Expansion of Herself Through Her Children. Her daughter helped improve M2's awareness of self. When she talked about her daughter she said:

And there's a lot of wisdom and the things that she's taught me, or even like...turning it, like the things that I've tried to teach her. She's schooled me on like, "Oh nope, you said, you gotta be like this." (lines: 383-385)

M2 was schooled by her daughter, and that made her reflect on herself. She then told one story that she remembered specifically about when she fought with her ex-boyfriend, who was her daughter's father, over the phone. Her daughter was just four-years-old at that

time. After M2 hung up the phone, her daughter asked about her attitude toward the exboyfriend:

I finally I got off the phone and she was like, "Mama..." she was like, she goes, "Is my dad your friend?" and I said, "Well, yeah" and she was, "Well, why you talk to your friend like that? You always told me, you gotta be good to your friends and love your friends, no matter what." And I'm like, "You're right." I can't...I have no rebuttal. She made me call him and apologize to him for talking to him like that. (lines: 387-391)

Because M2 was telling her daughter to be nice to other people especially her friends, and when M2 could not do that in front of her daughter, the daughter picked up on what M2 did and it made her reflect on her attitude. This reflection made her aware about herself, and that connected with the core meaning of having her children; "They definitely affect me for the better" (line: 381).

M2 was also talking about her daughter expanding her world. During the interview, M2 played music from her smart-phone, and her son was happy to listen to and dance to the music. She talked about her daughter who also liked listening to music. M2 mentioned that her daughter expanded M2's world through listening to music:

And she's actually the one that got me listenin' to like top 40 music and stuff. Actually, I can enjoy it, open my horizon and that because before that I was kinda like a music snob. I wouldn't listen to like country music or rap music, but just broadening my horizon, you know. (lines: 405-408)

Because of her daughter, M2 started to listen to top 40 music or other music that she did not listen to before. Widening her horizon made her life richer. She also mentioned that listening to different music connects her with other people, which she already realized when she was a teenager.

I know when I was 17 or 18 or something, I had kinda decided that the more different types of music that you listen to, the more people that

you can be open to and like connect with more, so by limiting your music, your music tastes, you know you're really just limiting your...your humanity. (lines: 408-411)

She realized that if she did not limit her life, she would connect with more new people and have more experiences.

Around the end of her interview, she mentioned that she was struggling to deal with her teenage daughter. Her daughter wanted to play games with M2 and complained when M2 did not play with her. M2 tried to guide her daughter, but her daughter sometimes did not listen to her.

But, I guess that's another, could be another like...how that emotionally effects me. I can't constantly entertain her. So then I'm getting on to her for her complaining or whining and stuff because she does this "Ugh!" and she'll kick her legs and like "boom" (M2 kicked the floor) stuff like that. And I'm like, "Stop it, why are you acting like this? You're 10 years old, you're not a little kid." That wears on me that I gotta be that, "Mom," but it's like all of the time, you know, like, constantly getting on to her because she just...she just doesn't listen...doesn't listen...just very frustrating. (lines: 442-448)

M2 mentioned that even when her daughter had an attitude and had a tantrum, she did not want to punish her daughter.

You know, I really, I hate punishing her, for anything really and that's because, you know, I know what it's from...It's from me being absent for so long. I don't want to, like I feel guilty. I don't want her to feel...It's just like weird...I feel bad. (lines: 453-455)

She felt uncomfortable punishing her daughter because of her own childhood, and she also felt sorry that she could not stay with her when her daughter was a baby. From the interview, it could be learned that she was getting better because of her children, and she reflected and expanded herself and her world through raising her children. I found the goal of her life with her children from the interview. Even though her life had a lot of challenges, she was trying to tackle herself and her own issues. Because of this goal she

had in mind, she tried to be better for her children and for herself: "But, I think that it's important. It's very important to be a mom and I'm proud of that. I'm very proud of my kids. I want my kids to be proud of me someday" (lines: 182-183).

Mother3 (M3)

I found M3 through my personal connection. I have known her end of spring 2016. We started to hang out since then as a friend. That time her son was three years old, and she lived with her husband and her son. I did not know she had emotional child abuse experience. When I was looking for one more mother for the study, I asked her if she knew someone who might be willing to be a participant for my study. She said that she would be able to become a participant, so I explained the details of the study, and she accepted to help me out as a participant.

We already knew each other and had rapport as friends, but I explained the study twice before the interview to make sure that she would not feel pressure to help me out because of our friendship. She said that talking about her story would help her heal, and she also wanted to contribute to the field of the study. Second time when I talked with her about the research, she gave me the informed consent with her signature.

Early summer of the same year, I interviewed her in my apartment. She came to my apartment alone, so there was M3 and me. We chatted before the interview, and after we talked for around 20 minutes, we started the interview. The interview lasted one hour, 40 minutes and 10 seconds (1:40:10). M3 talked about her life that I did not hear before, and because I was her friend, I tended to talk more to M3 than the other mothers during the interview. M3 mentioned that she was not good at expressing her feeling verbally, so

sometimes she seemed to be having difficulties to find the words to tell me her feelings. However, that did not affect my research negatively. After we finished the interview, we chatted again a little and she went to back to home.

Biography of M3. When I interviewed her, M3 was Caucasian and going to turn 29 in a few weeks. She lived with her three-year-old son, who was about to turn four-years-old, and her husband and was going to college to get her bachelor's degree. She was born in the Southwestern part of the United States.

When she was a child, she lived on a farm and raised sheep with her family. Her early memories were good, "the first 4 years of my life that I remember, um, were good." She is the oldest child in her family. She has two younger sisters and two younger brothers. When she was three years old, her first sibling (her younger brother) was born. Her parents are both religious, and she and her siblings were home-schooled and isolated growing up, "how my mom and dad raised me, like, they didn't want outside influences and stuff"

Her mother was an abusive person, and the mother spanked her children including M3. M3 said, "if there was a problem, she would just grab somebody and start spanking and then like, she didn't even find out what was really going on." Her mother did not try to know what happened. She just started to spank her children without listening to their feelings or finding out what happened. Sometimes her mother spanked the children even though they did not do anything, and the abuse made M3 mad:

I felt like all of us, all of the siblings and myself got spankings, you know, wrongfully, you know like we didn't even do anything. In fact, I remember I stopped my mom one time from spanking one of my sisters, I'm like, "She is not even the one that did that." And she told me leave like she...I'm like, "Okay." And I got mad and I like stormed

out of the house and I got in trouble just because I was mad. (lines: 406-410)

M3 also explained why her mother spanked the children, "when she would, um, spank us, she would say, "I'm gonna keep spanking you until you stop crying." Basically, you would stop crying because you couldn't breathe anymore, you know." M3 said when she was 11 years old, her mother also spanked her because her mother thought that M3 needed to cry since M3 was in a cranky mood:

I just felt emotional and cranky and I just didn't want to talk about anything like...um, and in those situations, I mean, you've probably felt like that before and feeling that way now, and have someone just come up to me and just "Hug me" or saying "It'll be okay" you know, "Are you okay?" But, my mom decides that I need to cry. So, she spanks me. (lines: 431-434)

M3 wanted to be hugged and loved by her mother, but she ended up getting spanked. M3 also mentioned that her mother was unstable. M3 expressed, "I basically grew up under a rock like I wasn't allowed to be the normal teenager." Her mother wanted M3 to do everything that her mother expected, and there was no option to go to school.

M3's mother also had some violent issues with her husband, who is M3's father, "she would punch him and stuff." M3 mentioned that her mother also experienced abuse when she was a child:

I mean she had a lot of trauma growing up like she was abused and her mom left her like totally abandoned her when she was like 13. So, I mean I can see. You know, but I don't think he understood how to help her. (lines: 583-585)

Her mother's experiences might have led to her abusive attitude to other family members including M3's father, and he did not know how to help her. Because M3's father did not know how to help his wife, he felt the stress that came from dealing with her. It then ended up creating other abuse issues between M3's father and mother:

Well...it's hard to explain. Um, yes, I think there was abuse, but honestly I don't think that he meant it that way. I think he...he didn't know how to deal with my mom's...um, like the effects from her abusive childhood. And, so yes, I think there was abuse there, but my mom also likes to play the victim like 110%. (Lines: 614-617)

M3's mother abused her children, and her husband did not how to support her. M3 mentioned that her parents yelled a lot, and M3 did not like how her parents always yelled in the house.

From the time M3 was 13 years old until she was 17 or 18 years old, her mother started leaving the family, "My mom started leaving, like just...leaving, like she disappeared." The family members usually did not know where she went. M3's mother sometimes went to California and to her own foster mother's house, and nobody knew when she was coming back: "Sometimes she would be gone a few days or a week. And then, she started leaving for like a month or so at a time." Because of that, M3 had a lot of pressure to manage her siblings and households, such as cooking:

I ended up having to take over all the responsibility of like cooking, watching the kids, making sure they did their school work and whenever my mom would come home if there was like anything out of place, um, I would get trouble. (lines: 578-589)

At the same time, M3 wanted to make her mother happy by doing housework for her. She mentioned that through those experiences, she started having Obsessive Compulsive Disorder (OCD) tendencies because M3's mother was never satisfied with what M3 was doing:

I think that might be part of reason I have some OCD tendencies because I like trained myself like it was one of the things I could control like, "Okay, do these dishes and it'll make my mom happy," you know, "Sweep the floor, organize the pantry; she'll be happy." But, nothing ever pleased her, you know. (lines: 589-592)

All the children were home-schooled in the family, and M3 talked about how she got sex-education when she was 12 years old, but the sex education taught by her mother did not properly educate her about sex:

When I was like 12, my mom read me this book (laugh) and my husband, he recently found it. He's like, "Oh, no wonder you didn't know anything about sex" (laugh). Because it was...it was talking about the beauty of a relationship between a man and a woman. But, it wasn't any kind sex, like actual sex education and...So, my mom reads me this book and thinks she's done like telling me about the stuff. (lines: 495-499)

Because of that, M3 did not know correct information that was related to sexual activities, such as what condoms were or how to use them. Because her mother did not tell her about her body or any type of sexual behavior, M3 did not even know what to call inappropriate touching. This lack of information affected her later in life when her father abused her sexually.

When M3 was 17 or 18 years old, her parents divorced, and all of the children went to stay with her father because the mother had a history of violence toward family members. During the divorce, her father started to abuse M3 sexually, "he touched me inappropriately." M3 could not realize what he was doing exactly because she was lacking information.

She got sick when she was 20 years old. She had lots of pain in her gut area and bleeding every time when she went to bathroom, "I got so sick like, I couldn't eat and I was in so much pain I'm in severe pain and I'm really like gushing blood every time I go to the bathroom." Even though she was suffering, her father did not take her to a hospital. She said that he was having an affair with a married woman whose house M3's father, her siblings and M3 were living in after the divorce. M3's cousins, aunts and

uncles took her to a hospital for medication. When she got to the hospital a doctor said she could die soon if she had not come in, "And the doctors there said that I was within a couple days of dying basically because, I mean, my organs had started shutting down and things." Because she went to the hospital, she found out that she had Crohn's disease. At the same time, she started to realize her father touched her inappropriately, so she stayed to aunts and uncles' house and reported to her father. She said that she did not want to put him in jail, but she wanted to protect her other sisters, "I honestly didn't want it to go that far. I just, I just wanted to protect my sisters." After she reported her father, she did not see him for seven years because he was in jail and then had probation.

The year she turned 21 years old, M3 started to live with her mother again since she could not live with her father anymore. Because lots of events happened to M3 such as physical and mental abuse, divorce, sexual abuse and her disease, she had a counselor to talk to about her feelings. She was not able to work mentally and physically, mainly because of her sickness, but her mother wanted her to work. M3 was upset that her mother was saying that and pressuring M3, so M3 emailed her counselor, "So, I emailed my counselor to tell her this. I'm like, 'I'm scared. I don't know what to do. It's really stressing me out. What do I need to do?" Somehow M3's mother could read the email and the mother was mad about it:

She got in my email and read it. For some reasons she was mad. I don't know. I mean, I'm not the kind of person to bad mouth anybody. But, just...all I was saying to my counselor was, "I'm scared. My mom says 'go get a job.' I don't know what to do. I'm not up for this yet, mentally or physically," and so, my mom reads it and comes storming up the stairs. (lines: 58-62)

M3's mother was yelling at M3 and grabbing her in her face, and the mother locked M3 in a room. "I was like fighting her to get away. And she was trying to shut me in my

room and lock the door." M3 got outside, but when she was trying to get out, she broke her finger. She was able to get her keys and drive to a hospital by herself. In the hospital, people were telling her to file a report. She refused, "I'm like, "I'm not doing that." I just don't wanna do that. She's my mom, you know, she's stressed out," but her mother called the police and the mother said to the police, "She (M3) attacked me." M3 explained what happened to the police and she decided to move to her maternal grandmother's house after that.

When M3 was 23 years old, she passed her General Educational Development (GED) and started to go to community college. She also met her husband that year in a church, and at the end of the same year, she married him. Before M3 and her husband got married, they talked about how they want to raise their children in their future. Both of them had parents who yelled a lot, but they did not want to be like those kind of parents. After they got married, she also talked with her husband about herself and her concerns, such as her health condition and her abuse experiences. Before she had her baby she said "I wanted to get to know my husband a little better before we had kids. So, we waited about a year before we made any decisions plus my health hadn't been very good."

When she was 25 years old, she got pregnant with her son. During the pregnancy, she felt, "It was really cool. But, also really weird like...I'm like, 'There's a human being inside of me." She also felt that she was beautiful, "I feel like and...I feel like my self-image changed too like I actually felt...beautiful, like it was weird." During pregnancy, she was basically having those positive feelings about herself, but she mentioned that she also had some aggressive emotions that she did not have before. She expressed that mama-bear instincts kicked in, "Well, if you get between a mama-bear and her baby bear.

She's gonna like totally tear you apart. So, that kind of kicked in." This emotion was not negative to her because having that feeling helped her to express herself well that she could not do so much before, "It's like it helped my emotions come out better to be pregnant because usually I'm a stuffer like, I don't let that out." She had a concern about taking her medication during her pregnancy because she had Crohn's disease, but she got medication that she could take during her pregnancy.

M3's husband and M3 went to birthing classes, and the morning of the day after she went to one of the classes her water broke:

And the next morning, I had gotten up fairly early to use the bathroom and so I had just used the bathroom basically. But, I felt like, hopefully this isn't TMI, but anyway like, "leaking." And I'm like, "I just went to the bathroom. How can I be like leaking?" And I stood up, and my water broke. And I'm like, "Ah, that was not pee." (laugh) (lines: 154-157)

It was a few days before she hit 32weeks pregnant, and she did not expect her baby to come that early. After her water broke, "I started having like really severe...it was like menstrual cramps. And I think they were contractions, anyways, it was scary because he was eight weeks early." She went to a hospital and a doctor gave her medicine to reduce the contractions, but when she had a contraction, her baby's heart rate dropped, so she had to have a C-section delivery.

They put me on some medicine and...you know, to help get rid of the contractions and the catheter was the worst part of that whole visit. Anyway, they were monitoring his heart over night and then, the next morning...I was still having, I guess, some slight contractions, even though at that point I couldn't feel them because they had me on medicine, I guess. Anyway...but every time I would have a contraction, his heart rate would drop really low. So, they were like, "Okay, we need to get him out" because they were...I mean if he was gonna come. They were gonna let me do it naturally but it turned out to be more of an emergency situation. Because his heart rate was dropping. (lines: 167-174)

After she had the C-section, she went to recovery room directly after delivery. Her baby had to be in a Neonatal Intensive Care Unit (NICU) for four weeks. Her mother visited her, and M3 talked with her mother. M3 seemed a little emotional at that time possibly because she had to have a C-section, or because she had to give her son to NICU, or it might be that just delivering her baby made her emotional:

She (M3's mother) came into the recovery room with me. And there were a couple of other people there and I just lost it. I didn't even know why, but I just started sobbing like...anyway. Anyway, so, after they watched me for...I don't know...it was a couple of hours, or an hour or something. They took me back to see my son and they let me kiss his head at least. And I was just a wreck. It's like...some of it didn't even show, you know. I'm really good at hiding it. But, so anyway...I got to kiss his head and they took me up to the room, cried some more...(laugh) (lines: 284-289)

Right after she delivered her baby, she did not realize that she had postpartum depression. She started to feel, "I didn't know what was wrong like everything was just so dark and my body hurt." She also felt anger, but there was no specific person she was angry at. She had anger after she delivered her child, "and it was just like boiling water almost inside just constantly recycling through me this hot, painful like physically painful feeling." She was depressed, and she tried to hurt herself:

I actually tried to like hurt myself. Like in the past, I tried to before, I'm not really brave when it comes to that but basically I felt like maybe if I cut myself, the pain would help lessen the rest of the pain, you know. (lines: 684-686)

Her husband was worried about her, and he said that they should find counseling because he thought M3 needed help. They found a counselor and the counselor helped M3 to feel better. M3 did not mention how the counselor helped her feel better, but the counseling benefited her. So, she started to feel more confidence in herself.

M3 still has issues with her family, especially with her mother because her mother was hurting M3 by talking about what happened between M3 and her father. One day, M3's husband said that M3 should not talk with her mother anymore:

She's even told me recently that I initiated the whole, um, sexual thing that happened between me and my dad. And I'm like, "No. You do not say that kinda thing to me." I mean, my husband is pretty forgiving but it was at that point that he was like, "You're not talking to her anymore" because I mean he saw what it did to me. He's like, "I feel like I need to step in and help like protect you more" because he was letting me try and try and keep trying to prepare and try to maintain a relationship with my mom. But it always ended up with her saying something like that or getting mad at me for something I didn't do. (lines: 623-629)

M3's mother thought that M3 was on the father's side after she started to contact him again. M3's mother used this misinterpretation about M3's intentions to hurt M3's feelings. M3 had reduced contact with her mother and grandmother.

M3 mentioned that her husband and her mother-in-law supported her son significantly. Because M3 had Crohn's disease, she would be tired easily, and if she did not have a good day, she could go to the mother-in-law's house to get help from her:

I've been really grateful for my mother-in-law because of my health I don't have, I think, as much like energy as some people have. I wear out pretty easily. Um, and so if I'm having a bad day or I just don't wanna deal with my son by myself I'll go over to her house and just let him play or whatever while I...relax. So, it's been nice. (lines: 383-38)

She had support, but she still had health issue because of the Crohn's disease at the interview.

Meaning of Having Her Children. From the interview data, five aspects were found that are connected to her core meaning. These five aspects are titled: (1) fulfilled her life through having her child, (2) having support and communication, (3) refusal to be like her parents, (4) holding justice and bravery, and (5) healing and inner growth.

<u>Core Meaning of Having Her Child.</u> Having her child helped her heal herself. She mentioned that when she was talking about disciplining her child:

You know, seeing it come to a better end after each time we have to discipline. It's really, I think it's helped me heal a lot. So, and I'm just thankful for my son, yeah (laugh). He's helped me in so many ways, so, yeah and my husband too (laugh). (lines: 639-641)

I will explain the detail why this is her core meaning below, but her child helped her improve her mental state and re-create a healthy relationship between parent and a child that she could not have when she was a child. She mentioned that she learned about proper parenting instead of spanking her child like she grew up. Her child affected her positively in many ways. One of positive results having her child is fulfillment.

Fulfilled Her Life Through Having Her Child. Having her child gave her fulfillment. She mentioned that how she felt while she was pregnant and becoming a mother, "I felt like, I was...fulfilling my calling in life, almost. I don't know. I just felt like...I was where I was supposed to be and I just, I felt pretty and...I just, I felt so much better" (lines: 232-233). She was fulfilled because having her child connected to her dream from when she was a child that she said, "where I was suppose to be" (line: 233). That means her dream was not only having her child, but also having a place where she could feel relaxed, belonging, and peaceful as one of family members that she was wishing since she was a child, and having her child gave her the place she was looking for by becoming a mother.

She also mentioned that to me when I asked her what it meant for her to have the child:

R: Okay. So...I want to know what does having a child mean for you? (10:01)

M3: (10:02) Um, it means like everything. Um, it's something that I've wanted since I was little. I don't know even how to describe it. But it's a blessing and it's definitely a learning experience. (lines: 87-89)

She gave me the response very quickly; she took one second to answer, and she said that with comfort and confidence. Her response was also natural. She did not exactly say the word fulfillment here, but "it's something that I've wanted since I was little" (line: 88). Her response meant that she felt fulfilled by raising her child, and she wanted to have since she was little. When she was a child it was difficult to feel fulfillment because her family did not have a healthy relationship most of the time. Having her child gave her fulfillment, even though she was still struggling to deal with her negative experiences from her childhood, and because she had support, especially from her husband, she also had an additional sense of fulfillment.

Having Support and Communication. It is important to understand that M3's husband supports her. When I tried to understand her and the core meaning of having her child, M3 mentioned many times that her husband supported her. When I asked about her family, she talked about her husband at first, and she said, "he's pretty awesome" (line: 24-25).

It was already mentioned in her biography when she had postpartum depression after she delivered her baby that her husband tried to help her and suggested that she go to counseling. Her husband always tried to support her, especially when she was in negative situations. She appreciated how he helped her all the time, and it positively affected her child-rearing and her mental health. For example, she talked when she was frustrated with her child:

Usually if I'm frustrated about something that my son did and my son is in trouble if it's just too much and I'm just getting too upset by it. Then, daddy will come in and put him timeout and talk to him while I go take a chill pill (laugh). You know, just go take a walk or something for a minute. (lines: 332-335)

Her husband was involved strongly in taking care of their child together, and they supported each other in raising their children. M3 had traumatized memories that come from her childhood, and she sometimes stressed out easily. She mentioned that after she talked about how her mother spanked M3 and her other siblings without reason or explanation: "I do get very frustrated [by parenting her child] sometimes and whenever emotions like that kick in, it's like reminiscent emotions from childhood sometimes" (lines: 328-329). When she was taking care of her child, there would be triggers to remind her of her childhood's negative memories.

Having a lot of support from her husband helped her even when she remembered her negative experiences. Her husband would come to help, so she could calm down. "I'm thankful that I have my husband, he's like, 'You know, just calm down. I'll take care of it' you know, because sometimes I'm just like so frustrated, I'm like, 'I can't deal with this" (lines: 324-326). She sometimes would be overwhelmed easily, but having the support would strongly affect her mental health positively.

Having support from her husband helped her to calm and raise her child in a healthy way. She also mentioned that having communication with her husband and her son was significantly important for her. Through raising her child, she realized the importance of communicating with her family. She mentioned that she communicated well with her husband:

I'm really thankful that I have that [communication] with my husband too. And I think it's really helped our marriage and it almost sounds

maybe weird but we still, in almost six years have not had a fight in like the whole marriage. We're just really open and communicate and we've gotten into some discussions, you know, where I'm like, "I'm tired of this" or "I don't want you to do this any more" or whatever, you know, but it's, we balance each other out really well, first of all and then the communication is really good thankfully. (lines: 356-361)

They would respect and trust each other, so they could communicate positively. Having open communication, in which they talk about their feelings and ask for help, encouraged M3 to raise her child more positively. This healthy relationship between M3 and her husband related to her core meaning of having her child because she felt uncomfortable when her mother was angry and spanking M3 and her siblings without reason or explanation. She has a family where she can listen and communicate to heal her painful childhood memories.

When she was a child, she mostly could not have communication with her mother. Her mother spanked M3 or M3's siblings without listening to or finding out what happened, so M3 did not know how to be involved with her child in a healthy way, "if they get in trouble then, they get a spanking. That's the way I grew up. And so, I thought, oh well, I guess that's the way you do it" (lines: 302-304). However, her husband said that M3 and her husband should approach in a different way, such as communication with their child:

But, my husband felt like, we needed a more, I guess, gentle approach to...because in my family, especially my mom like you couldn't explain what was going on. You were just immediately shut down and got a spanking like there was no communication. But, you know, my husband told me he felt like we needed a more, we need to communicate more with him. I mean, even though he's not very verbal yet, you know, just approach it from that direction, do more timeout if you can. (lines: 304-309)

Through raising her child, she started learning how she could communicate with her son and having communication with her son made her feel better because she did not want to be like her parents, who did not communicate with M3 and M3's other siblings.

Trying to have communication with her son gave her another way to be involved with her child positively. When she was a child, she could not get an apology from her parents, especially her mother, but she thought apologizing to her child was significantly important when she acted negatively toward her child:

I felt like it's really, really, super important that if I yell at my son, like if I get angry or something that I apologize because I...my parents, my mom especially, she just put her hands on everything and was okay, you know, and it's like you hurt me, you know, what you're gonna do about it? But, I never got that as a child or even recently it's, it's pretty non existent. But, I just, I feel like, it's really healing to do it myself even though my mom didn't do it. It's like, "Okay, my son, mommy shouldn't have yelled at you. I'm sorry." I mean, he's really forgiving. But anyway, I just, I feel like that's really, really important for me and for him, of course. (lines:335-341)

She thought apologizing was important because when she was a child, she wondered why her parents addressed M3 and her other siblings in that way. She wanted to know the reason. Through raising her child, she realized having communication was important for herself and her child. Making the time to say what was wrong and accept her negative approach toward her child helped her healing. Having verbal communication with her child and her husband made her reflect on herself too because she needed to think her approach was okay or not, what she did to her son, what was inappropriate discipline.

Explaining and apologizing what she did make her feel more connected with her son. She could confirm that her approach toward her son was okay or if she felt it was wrong, she could apologize: "I feel like we connect better with our child when we, you know, talk with him about what's going on, what happened, what did you do, you know,

and timeout versus just spanking for everything like I grew up with" (lines: 317-319). When she was a child, she felt lots of irrational moments because her mother spanked her without explanations or reasons. Through having more communication with her son made her heal because she could avoid the irrational moments like when she was a child, and she would have more confidence about communicating with her child in a positive way.

Refusal to Be like Her Parents. M3's refusing being like her parents was already mentioned in her biography. M3 and her husband did not want to become like their parents who were yelling all the time in their house. She mentioned that she did not want to be like her parents when I asked her about her feelings when she was pregnant:

R: So...Can I ask how do you describe your pregnancy emotionally? Did you feel any emotional feeling for your child and yourself about being a mother?

M3: Yeah, it was exciting but it was also scary because, I mean, growing up...how I did...I mean I know, I'm a different person than both my mom and dad. But, I was hurt and, you know, am I gonna do these same things? You know, I don't ever wanna be like that. You know, and I...I wanna be my child's best friend. (lines: 222-227)

She wanted to be a friend with her child. She did not explain what exactly what friends meant when she mentioned that, but in general, friends would respect, think, be kind and communicate well each other. Her parents, especially her mother, did not give those positive interactions, and that was why she "felt emotional and cranky" (line: 431) when she wanted to have affection from her mother when she was 11 years old.

When she grew up, she felt her parents wanted to control their children by fear. She wanted to be respected and loved by her child, instead of her son obeying her by fear because she obeyed her parents by fear, "It's just, it's more of a fear thing when you spank a child, I think like they fear you rather than love and respect to you" (lines: 319-321). She did not want to give fearful feeling to her son for obeying her that the way she

wanted her parents to behave toward her. Through raising her child, she realized that controlling her child by fear was not a positive interaction with her child. She told me one story about when she swatted her child once:

So, whenever he was like one and half, like he wouldn't quit pulling my hair, and I was like, "No," you know, "Stop that." And he wouldn't quit and I just felt kinda angry. I don't know but I was like, I'm just gonna see what this feels like or like what this does. And I just swatted his leg. And he cried and I just about died. I was like, "I'm not doing that," I don't know how my parents were able to do that. I mean (sigh), yes, the child might obey you faster, but honestly it's out of fear. It's not out of respect, in my opinion. (lines: 310-315)

When she swatted her child once, she recognized that she obeyed her parents by fear, and she realized that was a negative approach as a parent. Refusing being like her parents made her realize how she wanted to be treated by her parents, and she wanted to treat her child like how she wanted to be treated.

Holding Justice and Bravery. It is important to understand that she was trying to hold justice and be brave since she was a child. Because she felt lots of time that her mother did not treat M3 and her siblings fairly, she felt injustice, and the feeling connected to her bravery. That could be seen when she was talking about she stopped her mother one time because her mother was angry M3's sister even her sister did not do anything wrong:

I remember I stopped my mom one time from spanking one of my sisters, I'm like, "She is not even the one that did that." And she told me leave like she...I'm like, "Okay." And I got mad and I like stormed out of the house and I got in trouble just because I was mad. (lines: 407-410)

She knew she would get in trouble if she stopped her mother as a child, but she could not stop herself to combat the injustice what her mother did to M3's sister. That would be connected to current her parenting because she did not want to abuse her child like she

grew up. She knew that was wrong even she did not think about justice consciously. It could be seen when she reported her father because he abused M3 sexually when she was 17 years old. Reporting her father, especially he used to be her hero when she was a child; "he was basically my hero. I mean, he was my best friend" (Lines: 449-450), was not easy for her, but she did it because she wanted to protect her sisters:

That was really tough. I mean, putting your own dad there [jail], I mean, especially with the kind of love I had for him. It's like, "Oh...(sigh)." I didn't even want it to go that far I just wanted to make sure that my sisters weren't in danger. (lines: 561-563)

She also tried to understand her parents and why they behaved negatively toward M3 and her siblings. When she talked about what her father had done with her, she still questions the reason, "I just didn't...I don't like holding grudges and I...I don't know. I always loved my dad so much, you know. I wanted to really understand what happened. It's like 'Why did you do this?" (lines: 555-557). She had bravery to face the issue by trying to understand what happened to him.

She also behaved the same way to her mother, too. That could be seen when she was talking about her childhood. Her father did not know how to deal with her mother's violent behavior toward the family, and her mother started leaving them:

She said that my dad was really...like possessive and things and that he didn't deal with her problems very well. And I can see that, I mean she had a lot of trauma growing up like she was abused and her mom left her like totally abandoned her when she was like 13. So, I mean I can see. You know, but I don't think he understood how to help her. (lines: 581-585)

She was trying to understand and seek reasons why her parents acted negatively towards their children. Trying to understand what happened would be connected with her parenting. Through having her child, she also learned communicating and apologizing

were strongly important, and when she did those, she felt better because that what was she needed since she was a child. Even she could not get those interactions from her parents, by doing that for her child helped her heal her memories of injustice and unfairness.

Healing and Inner Growth. Having the child was healing to M3, especially when she communicate and apologized to her child and accepted her mistakes in parenting. She also mentioned that having her child itself healed her mentally: "I don't even know how to put it into words, I guess, just um...having him. I don't know, I don't even know what I would say because I just...it's taught me so much, um, to have him and honestly it's helped me to heal" (lines: 632-634). Because of her child, she had to try to be stable mentally, leaning about parenting that was different from her experiences, communicating with her husband, her child and herself. Also, reflecting on her parenting would help to improve her self-esteem and heal her negative experiences of the past. Through raising her child, she realized it was important to tell her child what he can do or cannot do. She also should say what her negative approach was as an apology, if she had those, toward her son.

She mentioned that when she felt that her and her husband's approach to their child worked, she felt fulfilled and healed. Involving with her son in a positive way that she could not get when she was a child opened a door of realization that discipline itself was not negative, and loving her child was simply healing her because she could recreate a healthy relationship between a mother and a child. Having her child contributed to her mental stability because she was willing to have the healthy relationship with her child:

You know, and I wanna...I wanna give him...the best things that I can and stuff in life and make sure he doesn't go through what I went

through. So, and I think part of that for me, you know, to give him that it means that I have to work on me, to try to find that place where I can be stable for him. So... (lines: 89-92)

Since she had her child, she started to feel fulfilled and she improved her self-image positively. She mentioned that when she was talking about her pregnancy, "I feel like my self-image changed too like I actually felt...beautiful, like it was weird" (lines: 229-230). Having her child also helped her to express herself more than in the past. She mentioned that she could not express her feelings or she tended to hide her feelings, and when she was pregnant, she started to feel that she could express herself better, "It's like it helped my emotions come out better to be pregnant because usually I'm a stuffer like, I don't let that out" (lines: 245-246). She could not express her opinion because her parents shaped her that way. If she said something that her parents thought was offensive she would get a spanking. She felt fearful to express herself. However, she was becoming better at expressing herself because she is now a mother, "It was like it opened the door for me to start expressing my opinion and...I don't know. I think becoming a mother really changed that for me" (lines: 260-262) Being a mother also made her confident, and the confidence helped her say "No" to her mother:

I finally, you know, not only got over some of that feeling, but I felt like I'd healed enough where I could stand up and tell my mom, "No" like, "We're not doing this. You're not gonna treat me this way anymore." (lines: 703-705)

She could say this because she was taking counseling sessions too. However, having her child significantly helped her face to her mother.

Through having her child, she could heal her abused experiences, try to be stable, and face her issues, such as dealing with her mother. It not only happened due to having

her child, but also because she had justice and bravery since she was a child. Having her child encouraged her more to tackle her issues and improve her inner growth.

DISCUSSION AND CONCLUSION

The aim of this study is to understand how having children affects the three mothers' lives through using qualitative interviews. The grand tour (main) question of this research is "What does having a child mean for mothers who were abused in their childhood?" The analysis in the previous section addressed this question directly through individual portraits. The portraits showed how the mothers were involved with their children, how the mothers dealt with their children and their traumatized experiences, and how the children affected the mothers' lives today at the time of the interviews. From portraying and interpreting their lives from their interviews, four aspects stood out: (a) how their own child abuse impacts the participants and their parenting negatively, (b) the importance of support (from their family and outside), (c) breaking their negative cycle of

child abuse, and (d) the brightness of their motherhood. I wrote a brief summary of each aspect here. Section (a) discusses how the mothers' childhood abuse experiences affected their lives and their parenting negatively. The characteristics of child abuse from the referred literature review explain how the abuse affected the mothers' lives including raising their children. Section (b) talks about how having support was important for the mothers, and how having the support affected the mothers positively and encouraged their childrearing. Section (c) mentions how the mothers tried to break their negative cycle of child abuse with their children through overcoming their struggles. The section also talks about what kinds of efforts those mothers tried for themselves to improve their mental stability. The last section, (d), refers to the positive aspects of motherhood. However, I picked the word "brightness" because having their children is not simply a positive aspect for the mothers. Having their children gave the mothers motivation and improved their self-esteem and feelings of love and being loved. The impact of having children stabilized their mental health, but more than that the phenomenon impacted them emotionally and spiritually. Thus, I chose the word "brightness" to describe the positive aspects of motherhood.

The literature review is used to describe the mothers' characteristics of child abuse for (a), (b), and (c) sections. However, I could not find research that talks about brightness of mothers who experienced child abuse, so the last section, which is (d), talks about what I found from the interview data using Witz, Lee, and Huang's (2010) study of understanding human life and experiences and Van Manen's (2014) information about human science.

Negative Impacts of Child Abuse on the Participants and Their Parenting

The impact of child abuse was documented in the literature review. In this section is discussed the relation between the characteristics reported literature review and this study's participants. For example, the literature review showed that abused victims tend to have some combination of unstable mental states, negative thoughts, negative self-image, or low self-esteem which create difficulties in having healthy relationships long term (Fujiwara, Okuyama, & Izumi, 2012; Kim & Cicchetti, 2010; Simon et al., 2009). Some negative impacts of child abuse could be seen in each participant of this study.

M1 had difficulties making relationships with people. She mentioned that she had difficulty trusting and connecting deeply with people: "being truly vulnerable with them [her friends] is incredibly scary for me" (M1, lines: 256-257). Feeling mistrust made having healthy relationships with people come from her past. For example, she mentioned, "I was put down by my mom" (M1, lines: 364-365) and because of her mother her self-esteem was low. M1 described herself as "self-deprecating" (M1, line: 312) and felt like a "terrible person all the time" (M1, line: 312-313). The negative image of her and difficulties connecting with people also made it difficult to connect with her child. Dixon et al. (2005) said, "[...] parents with a history of childhood abuse may be associated with difficulties in parental bonding and relationship with the child" (p. 65). This difficulty could be seen initially from M1's interview when she described when her son was taken from her after he was born to put in the NICU (Neonatal Intensive Care Unit). She felt disconnected from her son:

I was really upset about that I didn't realize that my child has the NICU, I asked "Okay, well, how long is he gonna be gone?" they said about an hour and half. It ended up being four and half hours. And, I feel like because there was such disconnect and I was so unhappy with the

experience, when I saw him...I just, I didn't connect. I had no feelings for him whatsoever. I just...I could not care. I was not capable of caring and there was so much disconnect that I felt like "Okay, well, he [a doctor] took him away for so long, what if he's not the same baby?" So, throughout the first month, I was really trying...I knew that logically it didn't make sense. I knew that he was the same baby, but I still had issues with trying to reconcile, "Okay, this is your baby, not somebody else's," and so it was really difficult to try and bond with him. (M1, lines: 220-228)

M1 had a difficulty connecting with her son not only because the son was taken to the NICU. Taking away her son was one of the reasons she had a feeling of disconnection, but having feelings of self-doubt, which came from her past, would result in a difficulty to connect with people that now seemed to include her son.

M2 also talked about negative psychological impact that came from her child abuse history. She felt that she was unimportant: "I'm not worthy" (M2, line: 250). Even though she became a mother, she still felt that way for her children. She expressed, "Sometimes, I feel like...oh they'd be better off without me or like...I'm just making their life worse...they don't need me or...it'd be, it'd give them a better character" (M2, lines: 245-246). Dubowitz et al. (2001) mentioned that children who have abused experiences might be depressed adults, which would impair their parenting abilities. It would be understandable that the mothers who were abused in their childhood would be struggling to raise their children. M2 was struggling to raise her children sometimes because her feelings of being unimportant kept coming back while parenting. When the feeling came back to her strongly, she needed to make distance from her children:

I don't want these guys [M2's children] to ever feel like that like they don't matter or they're not important enough for my time or love, and it's just like...this like cycle because I feel like that. And then, I know that I've got to somehow have to be emotionally neglecting them, you

know, when I'm feeling like that or in that kind of mindset you know. (M2, lines: 258-261)

M2 expressed that staying away from her children was a "catch 22" (M2, line: 262), and she suffered because she wanted to love her children, but at the same time she needed to stay away from them psychologically. Believing that she was worthy of her children was difficult for her since she had long felt that she was not worthy nor important.

DeRobertis (2004) pointed out that "having acquiesced to their maternal figures' opinions that they were inadequate, they were filled with intense self-doubt in their ability to be good enough to be loved and accepted" (p. 40). This aspect could be seen in M1 and M2. M2 did not say what exactly her mother specifically commented on as being inadequate or how she put down M2, but it seemed M2 from her description that she felt unworthy a lot of the time. M1 also mentioned that her mother tried to put her down. Both of the mothers had intense self-doubt because of their abuse experiences, and they had difficulties thinking that they were good enough for their children as mothers.

Barrett (2009) mentioned that mothers who were abused physically in their childhood would be more likely to have higher child-rearing stress than mothers who do not have such experiences. M3 said that she was easily frustrated while raising her child because parenting her children sometimes made her reminiscent of her own negative childhood memories:

I do get very frustrated sometimes and whenever emotions like that kick in, it's like reminiscent emotions from childhood sometimes and it's like...And most of the time he's a pretty good kid. So, we haven't had a lot of issues but there have been moments. (M3, lines: 327-329)

M3 felt overwhelmed raising her child sometimes because of her past trauma experiences. It did not mean that she did not love her child, but she sometimes struggled not to be overwhelmed. She explained about the struggling:

I think before we [M3 and I (the researcher)] started recording, we were talking about like the different cycles I still go through with depression and I mean it's, it's still a daily struggle sometimes to be me, to be a wife and a mom. It's, it's hard. I mean, I'm sure it's hard anyway because having a kid is, um, taxing, I mean it's good but it's, it's...um, it's responsibility and you have to care for this little person (laugh). But, when you add PTSD and depression and stress and stuff on the top of that, I just sometimes wanna flip out like, "I can't do this" (laugh). (M3, lines 670-675)

M3 was aware that anyone who had a child would be struggling to raise the child. However, at the same time, she mentioned that if a mother had issues, such as PTSD and/or depression that made her parenting more difficult. DeRobertis (2004) mentioned, "Tormented by a sense of disempowerment stemming from their maternal figures' unattainable standards of perfection, the participants felt unable to make good decisions or do things successfully" (p. 41). This aspect could be seen in M3, and it could be assumed that was one of reasons she felt "I can't do this" (M3, line: 675) when she was parenting her child. The sense of disempowerment could be seen when she was talking about how she was trying to make her mother happy even though M3's mother had left her in her childhood:

She would leave and I, I ended up having to take over all the responsibility of like cooking, watching the kids, making sure they did their school work and whenever my mom would come home if there was like anything out of place, um, I would get trouble. And so, I think that might be part of reason I have some OCD tendencies because I like trained myself like it was one of the things I could control like, "Okay, do these dishes and it'll make my mom happy," you know, "Sweep the floor, organize the pantry; she'll be happy." But, nothing ever pleased her, you know. (M3, lines: 586-592)

Even though M3 tried hard to make her mother happy, "nothing ever pleased her" (M3, line: 592). Failing to make her mother happy led her to feel disempowered, grief and numbness.

All three mothers had experiences of child abuse that affected their mental health, resulting in things such as depression and poor self-esteem. The abuse experiences also sometimes affected them negatively as mothers. However, through listening to all the mothers' stories, I learned that all the mothers tried to overcome their abuse experiences and do their best for themselves and their children. Trying to find the positivity is the meaning of this section.

The Importance of Support (from Their Family and Outside)

It is important to understand that having support, such as emotionally from their family members or having resources from social workers, would help parents who were abused in their childhood. Child abuse would be more likely to happen between generations, and people who have experienced abuse tend to have mental issues, such as depression or anxiety. These were aspects already mentioned in the previous section.

Gelles (2007) also mentioned that if people are socially isolated, they are more likely to be violent in their home. If people were able to call someone, such as friends and family, for help or assistance, the support would significantly help to reduce their stress (Gelles).

M1 mentioned support during the interview. The night M1 brought her son home from the hospital (because her son was in NICU after she delivered him), she was lost on how she could treat her baby. She said, "I'm gonna have to change him and he ended up peeing on me and all over the floor and his brand new bathtub and I just sobbed" (M1,

lines: 306-307), and she had negative thoughts that she could not take care of him. However, she was able to call her mother-in-law: "she came over and God it was like 2 in the morning and she had to work the next day but she did help with that, that was really awesome" (M1, lines: 309-310). Having someone who might be able to help her would calm her and comfort her. M1 also mentioned her social worker's support:

For me I'm just so self-deprecating. I'm so..."Oh you're a terrible person all the time." I feel like in those moments I'm not going to be a good parent and he deserves better than me. But, uh, it definitely helps having the social worker because she's able to say, "Yeah, he's totally on target with everything (39:25). He's really happy. He's enjoying reading. He's signing." So, having that reassurance every now and again that okay we are on track he is doing okay. That's really, really, helpful. (M1, lines: 312-317)

The social worker could watch M1 and help her feel confident about her parenting. The social worker would be significantly helpful because M1 did not have enough confidence due to her experiences of child abuse. Through having support, M1 would learn how she could rely on support and services that she could use as resources. Before the day of the interview, she put her son in a nursery facility to work full-time:

Because I'm working full time we have our child at a nursery facility (actual name is hidden), which is a crisis nursery. They're 24/7, and I'm able to visit my child whenever I like. In fact, I actually dropped by last night at 12:15am. So, I could nurse him and they allowed me to do that. So, that was really helpful. (M1, lines: 115-118)

Having this support benefited M1strongly and encouraged her parenting and life. Especially, having the social worker who visited her around once a week significantly helped M1's parenting. Berlin et al. (2011) mentioned that home-visiting programs help to reduce child abuse risks because mothers will not be isolated. Through learning about M1, a home-visiting program was not only helping to prevent child abuse, it also

benefited M1 emotionally because someone would be able to watch her parenting and give encouragement.

When M2 was going to deliver her daughter, she had support from her best friend's mother who let M2 stay at her own house, and the friend's mother was significantly supportive of M2: "She would drive into town everyday, take me to my appointments or whatever, paid for, out of pocket, paid for the medicine that I needed every month which was like...\$350" (M2, lines: 74-76). The support encouraged M2 to become a mother. M2 also had some support from her parents when she hitchhiked when her daughter was around two years old. M2 wanted to protect her daughter because "My living situation wasn't like the best" for her daughter, so M2 "asked my parents to help me, take over [her daughter]" (M2, lines: 100-101). She would not always have support from her parents, especially financially, because she mentioned that her mother did not help her financially when she was pregnant with her daughter and being helped by the friend's mother: "She'd (M2's mother) never given me any money or done anything like that for me before" (M2, line: 85). However, she was still able to have some support from them like babysitting. I did not ask her during the interview about having a social worker, but she was having a social worker visit her house about once a month to talk to her, see her children and bring some resources, such as diapers.

It was already mentioned in M3's portrait, but M3 had significant support from her husband and mother-in-law. When M3 was frustrated, her husband would come help take care of their child: "I'm thankful that I have my husband, he's like, 'You know, just calm down. I'll take care of it' you know, because sometimes I'm just like so frustrated,

I'm like, 'I can't deal with this'" (M3, lines: 323-325). Also, when she had depression after she delivered her son, her husband encouraged her to find counseling:

I was like super depressed. I didn't realize I had postpartum depression and I actually tried to like hurt myself. Like in the past, I tried to before, I'm not really brave when it comes to that but basically I felt like maybe if I cut myself, the pain would help lessen the rest of the pain, you know. But my husband got so worried and he's like, "Okay, we're finding a counselor." or "We're gonna take you to doctor and find some help because it's not normal" like, um, he was really worried. (M3, lines: 683-688)

My literature review did not cover relations between spouses, but Barth (2009) mentioned that parent education would progress when family problems were addressed. Having a good relationship between M3 and her husband supported in her decision going to counseling sessions easily. If they did not have a positive relationship, raising and being involved with her child might be more difficult for her.

These case examples of the mothers illustrate that having strong and constant support would help parents with experiences of child abuse to be involved with their children in a healthy way. Having support affected their parenting in a positive way.

Breaking Their Negative Cycle of Child Abuse

Child abuse would be more likely to happen between generations (Dixon, Browne, & Hamilton-Giachritsis, 2005; Appleyard & Dodge, 2011). Berlin et al. (2011) mentioned that there are negative results to raising a child by abusive parents because child abuse affects the victims' lives significantly for the long-term. An example could be seen in M3 when she found out her mother had child abuse experiences: "And I can see that, I mean she [M3's mother] had a lot of trauma growing up like she was abused and

her mom left her like totally abandoned her when she was like 13" (M3, lines: 582-584). M3's mother had these traumatized experiences, and the experiences affected her negatively when she raised her child (M3), and it also affected the relationship with her husband in a negative way. For example, according to M3, it seemed her mother was sometimes violent toward her husband (M3's father): "You know, but I don't think he [M3's father] understood how to help her. And in order to protect us kids sometimes it got loud or you know, even violent, I mean she would punch him and stuff" (M3, lines: 584-586). However, this study showed that all the mothers tried to break their negative cycle of abuse.

First of all, all three mothers tried to heal themselves to overcome their experiences of child abuse. According to the interviews, M2 and M3 had counseling sessions, and M1 had tried to treat herself. M1 mentioned, "I was incredibly depressed, but I always tried to combat it. I tried to get with friends. I tried to have more interests. I would watch movies. I would write. I would draw" (M1, lines: 352-354). Some researchers, such as Giardino (2007) noted that art therapy would be effective to heal and help victims to express their feelings. M2 also mentioned that she would write and draw when she was stuck emotionally:

R: So...when you have that feeling how do you deal with that emotional feeling?

M2: Oh, some days are better than others...sometimes it could spiral into, making it a bigger problem or issue than it is. Being bipolar...just manic depressive...like...sometimes I'm better at snapping myself out of it than others...you know like...writing it down, that help...talking about it...

R: To your friends?

M2: Yeah. That helps. . . . (M2, lines: 252-258)

During the interviews, I did not ask what kind of therapies or counseling sessions they had attended, but M2 mentioned that she had some treatments: "I've gotten...I've done a lot of treatments and completed several programs" (M2, lines: 163-164). According to M3's interview, she had counseling at least twice before and after she had her baby. Before she had her baby when she was 22 years old, she was talking with her counselor: "So, I was meeting with a counselor at that point because of some...you know, traumatic issues, abuse and stuff that had happened to me by both parents" (M3, lines: 52-53). After she had her baby, she had postpartum depression: "I had postpartum depression and I actually tried to like hurt myself" (M3, line: 684). Because of that she found a counselor to deal with the depression:

My husband was really worried. He's like, "Okay, we need to do something about this. It's not like, you're not okay. You need some help." So, anyway because I don't know, I would...I would go outside, um and just sit under a tree and cry like I didn't know what was wrong, what is wrong with me. And then, I found a counselor. (M3, lines: 699-702)

Secondly, the participants were able to explain and be aware of what happened to them, how they felt, how they could cope, and how they thought about their experiences. All the mothers could identify their thoughts and feelings, and were able to recognize what happened to other people, such as their parents. For example, M1 described her feelings well of when she was pregnant with her son: "I was 18, and I was 19 when he was born. But, throughout the whole pregnancy I was so frustrated. I felt like no one valued me. I felt like I was basically a walking incubator" (M1, lines: 159-160). Also, even when M1 was a child, she remembered details of the relationship between her mother and her grandmother, and how her grandmother thought about M1's mother:

My grandma didn't understand how to handle stuff like that [M1's mother's bipolarism: cycle of depression and manic stages]. She gets really overwhelmed very quickly. She's the type of person where, she doesn't like bugs so she's not even capable of touching a picture of a bug. So, she was super overwhelmed with that. (M1, lines: 28-30)

M1 observed that her grandmother could not deal with her mother well. According to M1, she was living with her mother and grandmother from the time she was 7 years old to 15 years old (M1 lived with the grandmother until she finished high school, but her mother died when she was 15 years old). Thus, her observations were made during those age periods.

M2 was also aware of her situations and capabilities. An example was when she was talking about how she had to leave her daughter with her parents as she was aware that her situation would not be good for her daughter:

My parents took care of her for a while cause I had left her dad, I broke up with him. My living situation wasn't like the best. When I had asked my parents to help me, take over...because it wasn't fair to her to have to live in my mistake. I mean...or put her in any kind of danger or anything. (M2, lines: 99-102)

M2 observed her situation, and how she could take care of her daughter in the best way. She then decided to put her daughter up with her parents. Also, M2 thought well about her mother even though her mother did not give her unconditional love that M2 could feel: "I felt kinda sorry for her that she could be like that, too. What happened in her life to make her like that" (M2, lines: 87-88). M2 also observed, when she was pregnant, how her mother felt about M2's friend's mother who was significantly helping M2 during her pregnancy:

I think more lovingly because she [M2's friend's mother] knew what it was like to be in that kind of situation and stuff, and then also for it for to be like, my best friend's mom. I think that hurt my mom. I think that she was, she kinda seen you know like...Oh, when I showed her like

that first ultrasound picture of my daughter, then she wanted to turn around and be "Oh, I'm gonna be a grandma...you know, I'm your mom and blah, blah, blah, blah..." and I think it's almost like she was trying to compete with my best friend's mom. . . . (M2, lines: 79-84)

M3 also was able to observe and analyze her situation well and described her feelings and thoughts. M3 could recognize that her father did not know how to help her mother. Also, she mentioned that she identified that her mother had traumatic experiences, and the experiences affected her mother's attitude and mental health:

I can see that, I mean she had a lot of trauma growing up like she was abused and her mom left her like totally abandoned her when she was like 13. So, I mean I can see. You know, but I don't think he understood how to help her. (M3, lines: 582-585)

The awareness that I learned from the mothers could connect to Siegel's (2013) mindfulness idea. Mindfulness is "accept[ing] situations, thoughts and physical experiences without judgment" (Siegel, p. 171). Siegel also argues that if abused people practice mindfulness, mindfulness would reduce their anxiety and emotionally charged reactions toward their past experiences and future worries. Awareness would be a key to break the negative cycle of child abuse because that would affect the mothers' mental health in a positive way, and if they could be stable emotionally, they would be better parents to their children. From the interview, that could be seen when the mothers had high self-awareness and an ability to think about themselves, people who were close to them, and their situations comprehensibly. Awareness would help the mothers to break negative cycles of violence and abuse. All the mothers still struggled (at the interview time) to deal with their traumatized childhood and childrearing, but at the same time, they were aware of the positive aspects of having their children. It might be that because M1 and M2 had social workers to help them, they were able to be more aware of themselves

and their situation. M2 and M3 had counseling sessions or treatments that might have contributed to the improvement their mindfulness. These supports could be connected to their awareness and may have helped them to overcome their experiences. The combination of awareness and trying to overcome can be understood as parts of the brightness of their motherhood.

The Brightness of Their Motherhood

Having their children benefited all the mothers to heal and help them mentally. The benefits cannot just be labeled like "positive aspects" because having their own children and trying to be better is more expansive with a deeper meaning in their lives. Van Manen (1990) introduced the words of Diogenes (who was a Greek philosopher in the fourth century BC): "a human being is not just something you automatically *are*, it is also something you must try to *be*" (emphasis in the original, p. 5). When I read this phrase, it reminded me of all the mothers, especially M1, and how she replied to my interview question: how she felt about being a mother. When I asked the question, M1 described that she was always taking care of someone, such as her sister, since her mother had postpartum depression and mentioned same concept captured by Diogenes words:

R: How do you feel about being a mother? What do you think about being a mother?

M1: I always have been. When my sister was born my mom had extraordinarily bad postpartum depression. She taught me how to change diapers. She taught me how to warm up a bottle for my sister. . . . I don't feel particularly different just because it's what I've been doing for so long. I've just always taken care of people. That's just what I do. . . . So, it's not too much of a change like in the sense of who I am as a person and what I do with myself, it's more a change of how I'm going about doing so. (M1, lines: 323-338)

She had a sense, that Diogenes mentioned, that a human being has value herself. M1's personality, who she is as a person before or after she had her child has not changed. However, how she lived with her life changed due to her child.

Higher aspects also could be seen in the three mothers throughout this research (Witz et al., 2010). Trying to be and becoming mothers who raise their children in a healthy way showed the central motivation, humanity, and subtle pervasive consciousness of their lives (Witz, Lee, & Huang). The mothers had that motivation and tried to actualize being a mother who was not like their parents by trying to break their cycle of child abuse. M1 tried to treat herself by doing positive things, such as making friends and drawing; M2 and M3 had counseling sessions for becoming a stable parent. Also, the mothers realized how they felt and thought, their capabilities (how they dealt situations), and what kinds of parents they want to be. Those higher aspects of them contributed to each mothers' brightness. The details of description of each mothers' brightness unfolded below.

For M1, having her child gave her more motivation to live her life. She also had motivation to raise a good person. She said that phrase (raising a good person) twice during the interview. The first time she mentioned that she was talking about her husband who was struggling his mental and health issues:

So, he's (M1's husband) really gained lot of weight and it's starting to effects his health. So, that's something we're also having to deal with. Luckily enough though, my child is a fantastic child. I'm not sure what we've done to help him other than just trying our best. But, we're really trying to help my child be a good person and enjoy life and so far he's rewarded us with being really fantastic. (M1, lines: 96-100)

She and her husband wanted to help their child be a good person. Even though she was dealing with her husband's health issue, that she hoped to help her son be a good person, and she tried to do her best for that. The second time she mentioned it she was talking meanings of having the child for her:

R: Okay. May I ask, what does having a child mean for you?

M1: Having my child?

R: Yes.

M1: More reason to stay motivated, and an opportunity to help the world by raising a good person who can point out the things in society that are wrong and try to fix them and understand that, Hey, women are valuable, the earth needs to be treated with respect. (M1, lines: 126-131)

I did not ask her whether she was a feminist or not, but from this comment, I thought she would call herself a feminist. She wanted to contribute to society by raising a good person, and the sense of strong responsibility mixed with her identity as a woman. This sense of responsibility affected her self-esteem positively and encouraged her to improve interact society. She also mentioned that having her child helped her self-esteem:

Having a baby really helped with that (her self-esteem) because I was naked in front of a lot of other people and breast-feeding. So, it was just like...why should I care now? I'm married, nobody else wants to look at me, so if...as long as I'm okay. Particularly, for me it was how I looked, I had really bad acne back then too which I still have some but it was really bad then, but just my son loves me, my husband loves me. That's good enough. (M1, lines: 367-371)

Having motivation and feeling loved affected her deeply, so that she became more content with herself. That brightness supported her positive outlook and helped her to stay stable for her child.

Brightness for M2 was being better for her child and herself. M2 had low selfesteem like M1 because of child abuse experiences. M2 had felt that her existence was unworthy. She still has that feeling while she was raising her children. However, her children gave her moments where she could feel being filled with love and being loved. For example, when she was talking about how raising her children was hard sometimes, she mentioned a moment like that:

But, I don't know, there's just, it's just times are hard. . . . There's like all these financial problems...kids being crazy. They don't even wanna listen to you. But then there's just those...in between moments where, they stopped, and they'll just hug you out of nowhere. Just like, just makes it all just worth it, you know just that smile that hug or...of course watching when they're sleeping. Being all calm. (M2, lines: 164-169)

Her children would hug her "out of nowhere"; that moment she also would feel that her children needed her as a parent. She felt her life was important even in the midst of the suffering emotionally.

The dilemma, staying away from her children emotionally, happened because she tried to deal with her negative thoughts of herself as unworthy. DeRobertis (2004) mentioned that abused victims developed a negative self-image: "devastating distortion of their self-images" (p. 41). However, M2 recognized that her children needed her, and she wanted to make them happy:

Sometimes, I feel like...oh they'd be better off without me or like...I'm just making their life worse...they don't need me And that's really hard to...depression and stuff and to make yourself not think those things like, it's not true. But still there's just that little thing that's like in the back of your head that I'm not important. I don't...They don't need me or...I'm not worthy. (M2, lines: 245-250)

The awareness, "it's not true" (M2, line: 249), was part of brightness that she got through raising her child. By raising her child, she would feel fulfilled that she mentioned: "they'll just hug you out of nowhere. Just like, just makes it all just worth it, you know just that smile that hug or...of course watching when they're sleeping. Being all calm" (M2, lines: 168-169). She wanted to be better because of her children, and that

motivation could be seen when I asked her how she felt being a mother. She said that it was important to be individuals even after she became a mother, and she mentioned her desire to be better: "I think that it's important. It's very important to be a mom and I'm proud of that. I'm very proud of my kids. I want my kids to be proud of me someday" (M2, lines: 182-183).

For M3, having her child helped her to heal. Through raising her child, she could compare how she wanted to be parented as a child, and what she felt was the right way to raise a child. Experiencing parenting awakened her, so she could parent her child in a healthy way, and it healed her:

And so, doing it the right way, hopefully the right way, I mean we're doing our best as parents. But disciplining our children in the way that we feel is right versus how I grew up. You know, seeing it come to a better end after each time we have to discipline. It's really, I think it's helped me heal a lot. (M3, lines: 637-640)

The meaning of the right way is that she communicated with her son well; she would apologize to him if she need, and she used timeout instead of spanking him. She could not change how she grew up, but she realized she could choose a different way to raise her child. It then helped her to heal her traumatic experiences because she could comfort the traumatized experiences by avoiding repeating how she grew up and finding a healthy way, through sufficient communication. She wanted to have the healthy family relationship since she was a child. How she chose to be different from her parents, especially her mother and try to be a mother who interacted with her child in a healthy way is seen here when she was talking about apologizing to her child:

My parents, my mom especially, she just put her hands on everything and was okay, you know, and it's like you hurt me, you know, what you're gonna do about it? But, I never got that (apologizing) as a child or even recently it's, it's pretty non existent. But, I just, I feel like, it's

really healing to do it myself even though my mom didn't do it. It's like, "Okay, my son, mommy shouldn't have yelled at you. I'm sorry." I mean, he's really forgiving. (M3, lines: 336-340)

Reflecting on what she had done to her son and apologizing to him helped her to recognize how her parents parented her wrongly and helped to be aware her feeling was hurting: "it's like you hurt me. . . . what you're gonna do about it?"(M3, lines: 337-338). In addition, gaining that awareness helped her break the devastating distortion of her self-image (DeRobertis, 2004) because she recognized her pain and found comfort by parenting her child in a different way from how she grew up. M3 had a sense of justice and bravery since she was a child, but the sense toward facing fairness and holding justice were getting stronger through raising her child. The brightness is that being a strong individual person grew in relation to having her child, but the shine originally came from her inner self.

All the participants became more self-aware because they had to face their own up-bringing and parenting, how to raise their children, and what kind of mother they wanted to be. Having experiences of child abuse impacted their lives negatively, and it also sometimes influenced their own parenting. However, more than the negative impacts, having their own children and experiencing being a parent positive affected to their lives significantly. Through this study, I could see all the participants tried to live in a proactive manner as a person and parent. They still had some of issues, such as depression, and needed support, but each of the participants showed their brightness by being involved with their children.

Conclusion

According to Van Manen (2014), phenomenological study's aim is, "to collect examples of *possible human experiences* in order to reflect on the meanings that may inhere in them" (emphasis in the original, p. 313). I wanted to collect stories of lived experiences about how mothers who have had experiences with abuse lived with their children. This study also focused on how the mothers lived with their lives even when they were still struggling with their negative childhood experiences. It is significantly important to understand the brightness of each of the participant's motherhood because it will encourage other people who have similar experiences. As someone who has had similar experiences as them, I was encouraged by knowing how the mothers face their lives and their parenting, but not only as a victim. Learning about their brightness by having their children helped me understand how people can break their cycle of child abuse and try to stay in a positive way.

According to my literature review, child abuse and neglect would impact negatively the victims' future parenting (Berlin et al., 2011; Dubowitz et al., 2001; Holmes, 2013). The negative impacts could be seen to all the participants to a greater or lesser degree. However, all of the participants were well aware of themselves, their feelings, and their experiences of abuse. The awareness would be a key that they were breaking inter-generational child abuse and healing their childhood traumatized memories through experiencing having their own children. However, I could not find research that focused on brightness of parenthood and portraits of parents' life stories who have child abuse experiences.

This study could find some negative impacts of child abuse that verified what the study from the literature review found, such as depression, from all the participants.

However, this research is advanced to portray each of the participants' parenthood and lived experiences. According to Witz et al. (2010), "the whole nature of such moralethical, metaphysical and so on "higher aspects" is a central problem in the study [phenomenon studied] of human life and experience" (p. 398). Through the interview data and trying to understand each of the mothers' lived-experiences, the mothers' higher aspects were revealed. Through this study, I found each of the mothers had the higher aspects of being and becoming better, healed, and a good mother for their children. The brightness is the power to live with their lives in a proactive way even though the participants had severely difficult lives in their past.

Limitations and Recommendation

Lack of the literature review is one of limitations of this study. Also, as a limitation, I could not have enough feedback from the participants. I sent a transcript, first draft, and second draft of their analysis to each participant, and asked them if they had any feedback. However, I could talk only to M3 after that, but she did not have many comments because basically she agreed with what I wrote about her. I asked M1's social worker that I begged asking the social worker if M1 had any feedback, but it seemed M1 did not have any comments. I tried to reach M2 by texting and calling her cellphone after the days she was supposed to get those papers, but M2 did not answer them. Both of the mothers, M1 and M2, were asked several times after I sent the transcription and drafts.

As a future study, fathers who have child abuse should be researched more.

Including my research, there are many studies that talk about mother and child relationships, but not fathers usually. However, it is important to focus on how father

roles are important to prevent child abuse issues and how child abuse experiences impact fatherhood as a future study. Also, there should be more qualitative research of child abuse and neglect that especially focuses on learning about their lived experiences, since it was difficult to find those research.

REFERENCES

Barrett, B. (2009). The impact of childhood sexual abuse and other forms of childhood adversity on adulthood parenting. *Journal of Child Sexual Abuse*, *18*(5), 489-512. doi:10.1080/10538710903182628

Barth, R. P. (2009). Preventing child abuse and neglect with parent training: Evidence and opportunities. *Future of Children*, *19*(2), 95-118.

- Berlin, L. J., Appleyard, K., & Dodge, K. A. (2011). Intergenerational continuity in child maltreatment: Mediating mechanisms and implications for prevention. *Child Development*, 82(1), 162-176. doi:10.1111/j.1467-8624.2010.01547.x
- Besharov, D. (1990). *Recognizing child abuse: A guide for the concerned*. New York: The Free Press.
- Child Welfare Information Gateway. (2013). What is child abuse and neglect? Recognizing the signs and symptoms. Washington, DC: U.S. Department of Health and Human Services, Children's Bureau. Retrieved (March 22, 2016), from https://www.childwelfare.gov/pubs/factsheets/whatiscan/
- Creswell, J. W. (1998). *Qualitative inquiry and research design: Choosing among five traditions*. Thousand Oaks, CA: Sage.
- Crosson-Tower, C. (2008). *Understanding child abuse and neglect* (7th ed.): Boston, MA: Pearson.
- Dixon, L., Browne, K., & Hamilton-Giachritsis, C. (2005). Risk factors of parents abused as children: A mediational analysis of the intergenerational continuity of child maltreatment (Part I). *Journal of Child Psychology & Psychiatry*, 46(1), 47-57. doi:10.1111/j.1469-7610.2004.00339.x
- Derobertis, E. M. (2004). The impact of long-term psychological maltreatment by one's maternal figure: A study of the victim's perspective. *Journal of Emotional Abuse*, 4(2), 27-52. doi:10.1300/J135v04n02_02
- Dubowitz, H., Black, M. M., Kerr, M. A., Morrel, T. M., Hussey, J. M., Everson, M. D., & Starr, J. H. (2001). Type and timing of mothers' victimization: Effects on mothers and children. *Pediatrics*, 107(4), 728.
- Ehrensaft, M. K., Knous-Westfall, H. M., Cohen, P., & Chen, H. (2014). How does child abuse history influence parenting of the next generation? *Psychology of Violence*, doi:10.1037/a0036080
- Fujiwara, T. T., Okuyama, M. M., & Izumi, M. M. (2012). The impact of childhood abuse history, domestic violence and mental health symptoms on parenting behaviour among mothers in Japan. *Child: Care, Health and Development*, *38*(4), 530-537. doi:10.1111/j.1365-2214.2011.01272.x
- Gay, L. R., Airasian, P. W., & Mills, G. E. (2012). *Educational research: Competencies for analysis and applications (10th ed.)*. Boston, MA: Pearson.
- Gelles, R. J. (2007). Family violence. In D. J. Flannery, A. T. Vazsonyi, & I. D. Waldman (Eds.), *The Cambridge Handbook of Violent Behavior and Aggression* (pp. 403-417). New York, NY, US: Cambridge University Press.

- Giardino, A. P. (2007). Helping children affected by abuse: A parent's and teacher's handbook for increasing awareness. St. Louis, MO: G.W. Medical Pub.
- Hibbard, R., Barlow, J., & Macmillan, H. (2012). Psychological maltreatment. *Pediatrics*, 130(2), 372-378. doi:10.1542/peds.2012-1552
- Holmes, M. R. (2013). Aggressive behavior of children exposed to intimate partner violence: An examination of maternal mental health, maternal warmth and child maltreatment. *Child Abuse & Neglect*, *37*(8), 520-530. doi:10.1016/j.chiabu.2012.12.006
- Howard, K. S., & Brooks-Gunn, J. (2009). The role of home-visiting programs in preventing child abuse and neglect. *Future of Children*, *19*(2), 119-146.
- Institute of Medicine and National Research Council. (2012). *Child maltreatment research, policy, and practice for the next decade: Workshop summary*. Washington, DC: The National Academies Press.
- Kim, J., & Cicchetti, D. (2010). Longitudinal pathways linking child maltreatment, emotion regulation, peer relations, and psychopathology. *Journal of Child Psychology & Psychiatry*, 51(6), 706-716. doi:10.1111/j.1469-7610.2009.02202.x
- Leeson, F., & Nixon, R. V. (2010). Therapy for child psychological maltreatment. *Clinical Psychologist*, 14(2), 30-38. doi:10.1080/13284207.2010.500311
- Lincoln, Y. S., & Guba, E. G. (1985). *Naturalistic inquiry*. Beverly Hills, CA: Sage.
- Merriam, S. (1988). *Case study research in education: A qualitative approach*. San Francisco. CA: Jossey Bass.
- Missouri Department of Social Services (n.d.). *Child welfare manual: Glossary/Reference (section 7), parenting and discipline (chapter 3).* Retrieved (Oct, 2, 2016), from https://dss.mo.gov/cd/info/cwmanual/section7/ch1_33/sec7ch3.htm
- Seamon, D (2000) phenomenology, place, environment, and architecture: a review of the literature. Retrieved May 26, 2016, from http://www.arch.ksu.edu/seamon/articles/2000_phenomenology_review.htm
- Siegel, J. P. (2013). Breaking the links in intergenerational violence: An emotional regulation perspective. *Family Process*, 52(2), 163-178. doi:10.1111/famp.12023
- Simon, N. M., Herlands, N. N., Marks, E. H., Mancini, C., Letamendi, A., Zhonghe, L., & Stein, M. B. (2009). Childhood maltreatment linked to greater symptom severity and poorer quality of life and function in social anxiety disorder. *Depression & Anxiety* (1091-4269), 26(11), 1027-1032. doi:10.1002/da.20604

- Shannon, J. B. (Eds.). (2009). *Child abuse sourcebook* (2nd ed.). Detroit, MI: Omnigraphics.
- Van Manen, M. (1990). Researching lived experience: Human science for an action sensitive pedagogy. Albany, NY: Suny.
- Van Manen, M. (2014). *Phenomenology of practice: Meaning-giving methods in phenomenological research and writing*. Walnut Creek, CA: Left Coast Press.
- Witz, K. G., Goodwin, D. R., Hart, R. S., & Thomas, H. S. (2001). An essentialist methodology in education-related research using in-depth interviews. *Journal of Curriculum Studies*, *33*(2), 195-227. doi:10.1080/002202701750062989
- Witz, K. G., Lee, H., & Huang, W. (2010). Consciousness in the study of human life and experience: "Higher aspects" and their nature. *Qualitative Inquiry*, 16(5), 397-409. doi:10.1177/1077800410367477

APPENDICES

Appendix A: Examples From Each of the Mothers Transcripts

Mother1 (lines: 126-149)

- R: Okay. May I ask, what does having a child mean for you?
- 127 M1: Having my child?

- 128 R: Yes.
- M1: More reason to stay motivated, and an opportunity to help the world by raising a good person who can point out the things in society that are wrong and
- try to fix them and understand that, Hey, women are valuable, the earth needs to
- be treated with respect. (17:10) And you know, make sure that. My hope is that
- someday he can do more than I can for society and the planet. For me, I'm really
- eco-friendly. I'm really sick and tired of misogyny and such. As a boy, at least for
- right now, he has more say than I do and perhaps he won't have a family as early
- as I do. So, he might be able to do something to help people. And, also for me,
- having him has a lot of motivation to be able to get up and out of bed, to be able
- to do dishes, to be able to get a job and try to better my education. Definitely
- motivation and hope for his future. (18:02)
- R: Could you describe a little bit more about when you got pregnant?
- 141 M1: I was living with my grandparents and they were very pro-life. I had birth
- 142 control when I came here, and I was not able to get a prescription for it because I
- didn't have health insurance and I didn't have a doctor here. So, I asked for them
- to take me to Health Center (the facility's name is a pseudonym for the sake of the
- participants' privacy), they said, "No." They said, "Good girls don't need plan
- parenthood, they don't need contraceptives" (19:00). And I was incredibly
- depressed and lonely because I wasn't supposed to be here in Missouri anyway.
- And I didn't wanna come here. And, when I met my husband, I just didn't care
- what happened honestly.

Mother2 (lines: 252-277)

252 R: So...when you have that feeling how do you deal with that emotional feeling? 253 M2: Oh, somedays are better than others...sometimes it could spiral into, making it 254 a bigger problem or issue than it is. Being bipolar...just manic 255 depressive...like...sometimes I'm better at snapping myself out of it than 256 others...you know like...writing it down, that helps...talking about it... 257 R: To your friends? 258 M2: Yeah. That helps because I don't want these guys to ever feel like that like they 259 don't matter or they're not important enough for my time or love, and it's just 260 like...this like cycle because I feel like that. And then, I know that I've got to 261 somehow have to be emotionally neglecting them, you know, when I'm feeling like 262 that or in that kind of mindset you know. (47:21) So, it's just kinda like a weird 263 catch 22. I want them to feel important and that like they could do anything. And I 264 love them no matter what. And but then in the same breath I'm not...I'm 265 nothing...just like, you know...it's confusing. (47:50) 266 R: I see...May I ask...Tell me about when you faced difficulties with your parents 267 in your childhood? 268 M2: It was just like everything. I was always getting into trouble. It was just 269 like...I don't know, just never did enough or...(M2 went to get drink for her son 270 and her) um...yeah, I mean...I run from my problems like actually like will 271 physically run away from my problems instead of like... deal with them. So, that 272 always created a problem because I didn't ever feel that I could talk to them like 273 what was going on in my life or if I was in trouble or needed help. I didn't feel,

like, that I could go to them and they would help me. They were just gonna freak
out on me and like not help me or just not be there like how parents should
be...So yeah, that created a lot of problems. I wouldn't do my homework. I got
more attention for not doing my homework than doing my homework.

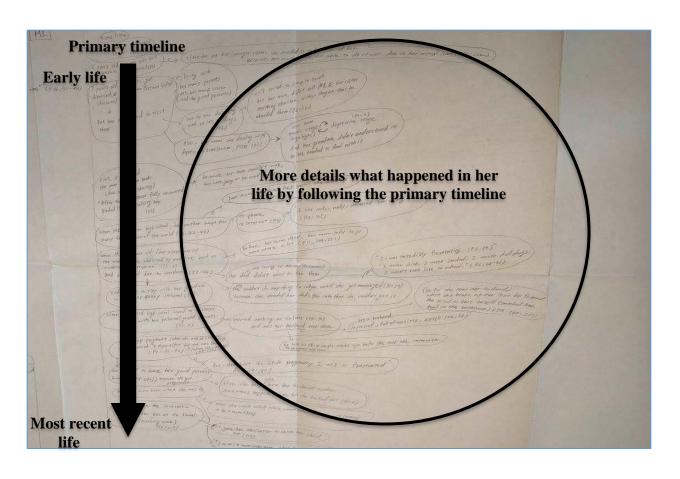
252

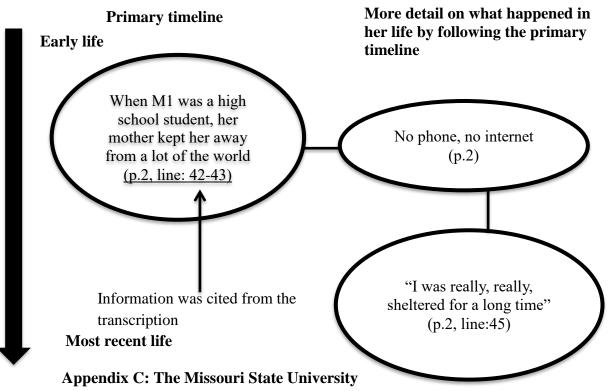
Mother3 (lines: 222-249)

222 R: So...Can I ask how do you describe your pregnancy emotionally? Did you feel any 223 emotional feeling for your child and yourself about being a mother? 224 M3: Yeah, it was exciting but it was also scary because, I mean, growing up...how I 225 did...I mean I know, I'm a different person than both my mom and dad. But, I was 226 hurt and, you know, am I gonna do these same things? You know, I don't ever wanna 227 be like that. You know, and I...I wanna be my child's best friend. So...yeah, I mean, 228 I...It's weird, loving somebody that you have never seen but it's like you get to know 229 them when they're there, you know. And...so there was...I feel, like, definitely, an 230 expanding of my love capacity. I feel like and...I feel like my self-image changed too 231 like I actually felt...beautiful, like it was weird. 232 R: To yourself? 233 M3: Hm-mm. Like, I felt like, I was...fulfilling my calling in life, almost. I don't 234 know. I just felt like...I was where I was I suppose to be and I just, I felt pretty and...I 235 just, I felt so much better. Like being pregnant, I went into remission for my disease. 236 So, I felt, I felt so good. Oh, but, oh my gosh. I experienced a lot of emotions I hadn't 237 felt before too like...in Walmart, like, I felt like, I could...I don't know, it was like, it 238 was like mama-bear kicked in. Do you know what I mean?

- 239 R: No, sorry...is that idiom or expression?
- 240 M3: ...sort of, but...you know what a bear is, right?
- 241 R: Hm-mm.
- 242 M3: Okay. Well, if you get between a mama-bear and her baby bear. She's gonna like
- totally tear you apart. So, that kind of kicked in.
- R: I understand.
- 245 M3: Yeah...like this guy, he was an older guy and I was in line at Walmart to
- 246 purchase my things. He has a case of beer and he cuts in in front of me and I'm just
- 247 like, "Excuse me?" (laugh) Anyway, I didn't say anything, but I just, I felt just...mad
- like I don't know. It's like it helped my emotions come out better to be pregnant
- because usually I'm a stuffer like, I don't let that out.

Appendix B: Example of a Timeline





Institutional Review Board (IRB)

IRB Notice

IRB [irb_no_reply@cayuse.come]

Sent: Tuesday, December 8, 2015 12:56

To: Breault, Donna Cc: Shigematsu, Maki

To: Donna Breault Childhood Ed and Fam Studies 901 S National Ave Springfield MO 65897-0027

Approval Date: 12/08/2015

Expiration Date of Approval: 12/06/2016

RE: Notice of IRB Approval by Expedited Review (under 45 CFR 46.110)

Submission Type: Initial

Expedited Category: 7. Surveys/interviews/focus groups

Study #: 16-0231

Study Title: Having a child means for women who were abused emotionally in their childhood

This submission has been approved by the above IRB for the period indicated. It has been determined that the risk involved in this research is no more than minimal.

Investigator's Responsibilities:

Federal regulations require that all research be reviewed at least annually. It is the Principal Investigator's responsibility to submit for renewal and obtain approval before the expiration date. You may not continue any research activity beyond the expiration date without IRB approval. Failure to receive approval for continuation before the expiration date will result in automatic termination of the approval for this study on the expiration date.

You are required to obtain IRB approval for any changes to any aspect of this study before they can be implemented (use the procedures found at http://orc.missouristate.edu). Should any adverse event or unanticipated problem involving risks to subjects or others occur it must be reported immediately to the IRB following the adverse event procedures at the same website.

This study was reviewed in accordance with federal regulations governing human subjects research, including those found at 45 CFR 46 (Common Rule), 45 CFR 164 (HIPAA), 21 CFR 50 & 56 (FDA), and 40 CFR 26 (EPA), where applicable.

CC: Maki Shigematsu, Childhood Ed And Fam Studies

Appendix D: Informed Consent Document

Title of Study: What having a child means for women who were abused emotionally in

their childhood-- Phenomenological Qualitative Research Study

Investigators: Maki Shigemtasu

MS. Candidate: Dr. David R. Goodwin, Research Supervisor

This is a research study. Please take your time in deciding if you would like to participate. Please feel free to ask questions at any time.

INTRODUCTION

The purpose of this study is to explore how emotional child abuse affects women's lives. You are being invited to participate in this study because you are a mother who has a history of emotional child abuse.

DESCRIPTION OF PROCEDURES

If you agree to participate in this study, your participation will last for approximately two hours. During the study you may expect the following study procedures to be followed. First, you need to read the Informed Consent Document to learn about the research, human dignity and privacy protection of the study. After you agree to this document, you will be contacted to make an appointment for the interview by the researcher. The interview will take approximately two hours. The interview will be audio recorded. During the interview, you do not have to answer the questions if you feel uncomfortable, and you can stop taking the interview at anytime. The audio records will be used only for this research and will be kept confidential. After the interview, the researcher will make a transcript about what you said during the interview from the audio record. Then, the researcher will send your transcript to you to make sure that you are willing to share what you said. If there are any statements that you do not want to share or be written on the paper, you can tell the researcher, and the researcher will not share your statements. Also, you can quit being a participant at anytime even after the interview. If you want to quit being a participant after the interview, your information will not be on the research, and the researcher will discard any information about you.

RISKS

The interviews may be a traumatic trigger for you because you will talk about your personal experiences as a mother and as an adult following your own emotional child abuse.

BENEFITS

You may be better able to understand yourself and your thoughts by taking an openended interview, but there will be no guarantee of a direct benefit. It is hoped that the information gained in this study will benefit society by providing valuable information about child abuse issues.

COSTS AND COMPENSATION

You will not have any costs from participating in this study.

PARTICIPANT RIGHTS

Your participation in this study is completely voluntary, and you may refuse to participate or leave the study at any time, even after the interview. After the interview, your transcription will be sent to you to make sure that you will be willing to share what you said. If there are any statements that you do not want to share or be written on the paper, you can tell the researcher that you do not want to share the statements. Also, if you decide not to participate in the study or leave the study, it will not result in any penalty or loss of benefits to which you are otherwise entitled. If you want to quit being a participant after the interview, your information will not be on the research, and the researcher will discard any information about you.

CONFIDENTIALITY

Records identifying participants will be kept confidential to the extent permitted by applicable laws and regulations and will not be made publicly available. However, the Institutional Review Board (a committee that reviews and approves human subject research studies) may inspect and/or copy your records for quality assurance and data analysis. These records may contain private information.

To ensure confidentiality to the extent permitted by law, the following measures will be taken. The researcher will use pseudonyms instead of participants' names in the paper. Also, the records will be converted to computer files and kept in a computer with password protection. The questionnaire will be kept in a box that can be locked. If the results are published, your identity will remain confidential.

QUESTIONS OR PROBLEMS

You are encouraged to ask questions at any time during this study. For further information about the study contact Maki Shigematsu at (417)766-9041. Also, you can contact Dr. David R. Goodwin, research supervisor, at her office number (417)836-4244. If you have any questions about the rights of research subjects or research-related injury, please contact the Office of Sponsored Research and Programs, 401 Carrington Hill, (417)386-5972.

~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	<u> </u>
SUBJECT SIGNATURE	
Your signature indicates that you voluntarily study has been explained to you, that you have and that your questions have been satisfactor signed and dated written informed consent processing the statement of the signal of the statement of the signal of the statement of the sta	we been given the time to read the document ily answered. You will receive a copy of the
Subject's Name (printed)	
(Subject's Signature)	(Date)
MAILING ADDRESS (Please include your mailing address if you v study).	vould like a copy of the results from this .
INVESTIGATOR STATEMENT	
I certify that the participant has been given as study and all of their questions have been ans understands the purpose, risks, benefits and t study and has voluntarily agreed to participat	swered. It is my opinion that the participant he procedures that will be followed in this
(Signature of Person Obtaining Informed Consent)	(Date)

Appendix E: Letter for a Person Who May be a Willing Participant

Dear Madame,

I am a grad student from Japan studying at Missouri State University. Currently, I am working on my thesis learning about mothers' experiences as an adult after facing childhood emotional abuse by their parent(s). Thus, I am looking for people willing to be interviewees for my qualitative research.

If you are willing to be an interviewee for my research, it would be a great help to me. I would like to learn about your lived experience as an adult mother. Your personal experiences are essential to my understanding of this phenomenon. You will need to read the human subjects protection application and informed consent document from my university. They are written about basic information such as procedures, risks, benefits etc. of my research. The most important point is confidentiality because I will ask you about very personal experiences through the interview. Please read those documents, and if you have any questions, please feel free to call, text or email me. I would love to answer any questions regarding concerns about giving the interview.

Thank you,

#### **Contact Information**

**Investigator**: Maki Shigematsu

Missouri State University

Childhood Ed and Family Studies

(417)766-9041

Maki1110@live.missouristate.edu

**Research Supervisor**: David R. Goodwin, Ph.D.

Missouri State University

Reading, Foundations, & Technology

(417)836-4244

DavidGoodwin@missouristate.edu

## Appendix F: Letter for a Person Who May Help to Find Participants

Dear Sir or Madame,

I am a grad student from Japan studying at Missouri State University. Currently, I am working on my thesis about learning lived experiences from mothers who are adults have a history of emotional child abuse. The study is qualitative research. I am looking for people willing to be interviewees for my research. I need to find three women who are adults have emotional abuse experiences in their childhood as my interviewees. I would like to learn about lived experience through the interviews using the phenomenology method (see definitions).

It is important to learn about how mothers who have emotional child abuse experiences are involved with their children as qualitative research. This research may help to show what kind of services and supports the mothers may need and how they face their children in their daily lives. Qualitative research will contribute to deeply understanding the mothers' feelings and the meaning of the experiences.

If you know someone who may be willing to be an interviewee for my research, please let me know. If the person will be a participant, she will need to read the human subjects protection application and informed consent document from my university. They contain basic information such as procedures, risks, benefits etc. of my research. The most important point is confidentiality because I will ask her very personal experiences through the interview.

If there are any concerns and questions, please feel free to call, text or email me. I would love to answer any questions about my research.

Thank you,

### **Contact Information**

Investigator: Maki Shigematsu

Missouri State University

Childhood Ed and Family Studies

(417)766-9041

Maki110@live.missouristate.edu

Research Supervisor: David R. Goodwin, Ph.D.

Missouri State University

Reading, Foundations, & Technology

(417)836-4244

DavidGoodwin@missouristate.edu

### **Definition**

Qualitative research

"The collection, analysis, and interpretation of comprehensive narrative and visual data to gain insights into a particular phenomenon of interest" (Gay, Mills and Airasian, 2012, p.630).

Phenomenology method

"Phenomenological study describes the meaning of the lived experiences for several individuals about a concept or the phenomenon" (Creswell, 1998, p.51). "Researchers search for the essential, invariant structure (or essence) or the central underlying meaning of the experience and emphasize the intentionality of conscious where experiences contain both the outward appearance and inward conscious based on memory, image, and meaning" (Creswell, 1998, p.52).

# **Appendix G: Questions of Demographics**

1.	Name
2.	Date of Birth
3.	Age
4.	How many children do you have?
5.	Children's dates of birth and ages
6.	What is your race?
	White/ African-American/ Asian/ Hispanic/ Native American/ Other
7.	Marital Status
	Married/ Single / Divorced / Other
8.	Employment
	Employee/ Part-time job / No working / Other
9.	What kind of job are you doing, if you work?

10. What is the highest educational level you have completed? (circle)	
Middle School/ Some High School/ High school/ Some college/Associate degree /	
Bachelor's degree/ Masters/ Doctorate	
11. Any comments?	