

Transition to the Second Child: from Health to Public Policies

Transição para o Segundo Filho:
da Saúde às Políticas Públicas

(PT: 139-157)

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DOI: 10.33167/2184-0644.CPP2020.VVIN1/pp.123-137

ABSTRACT

In Portugal there has been a decline in fertility and birth rates, and its recovery is currently related to the transition to the second child, which requires concerted action by those involved. However, the evidence illustrating this phenomenon is scattered in the literature.

This article aims to outline how the transition experience inherent to the birth of a second child presents itself in national and international scientific research, and also the challenges posed to research, clinical practice and public policies.

It was found that the birth of a second child emerges as a transition in parenting with implications for health and quality of life, with scant research characterizing it. Its study is recommended, as well as the operationalization of a specific professional human career. Public policies can play a relevant role in creating a favorable environment for couples to decide to have more children.

Keywords: Parenting, Family nursing, Second child, Public policy

Article received on 01/05/2020 and approved for publication by the Editorial Council on 20/05/2020.

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RESUMO

Em Portugal tem-se verificado um declínio da fecundidade e natalidade, sendo que a sua recuperação está atualmente relacionada com a transição para o segundo filho, que requer uma intervenção concertada dos seus intervenientes. Contudo, a evidência que retrata este fenómeno encontra-se dispersa na literatura.

O presente artigo surge com o objetivo de enunciar como é que na produção científica nacional e internacional, se apresenta a experiência de transição inerente ao nascimento de um segundo filho, bem como os desafios que se colocam à investigação, à prática clínica e às políticas públicas.

Verificou-se que o nascimento de um segundo filho emerge como uma transição na parentalidade com implicações na saúde e qualidade de vida, sendo escassas as investigações que a caracterizam. É recomendado o seu estudo, assim como a operacionalização de um cuidado humano profissional diferenciado. As políticas públicas podem ter um papel relevante na criação de um ambiente favorável à decisão dos casais em terem mais filhos.

Palavras-chave: Parentalidade, Segundo Filho, Enfermagem, Política Pública

1. Introduction

In Portugal, as in Europe, despite most people wishing for a first child, the decision has come to be delayed until they are older, which conditions the birth of a subsequent child or children (Tomé, Magalhães, & Ribeiro, 2018). We live, thus, in a country and in a current situation, in which the birth-rate and fertility have, incrementally, worsened, and we are heading for a future in which uncertainty faced with the current economic situation, considering, moreover, its worsening with the reality of the pandemic, becomes a leading factor and will, for sure, bring a recovery in the birth-rate, in more concrete terms in the decisions by couples to have a second child.

In 2013, the Instituto Nacional de Estatística & Fundação Francisco Manuel dos Santos (*National Institute of Statistics and the Francisco Manuel dos Santos Foundation*) collated information on the fertility of the Portuguese, as well as on their intentions and incentive, whether wishing (or not) to make a concrete transition to parenthood, as well as for conceiving more children. According to the information collated, in Portugal, children wished for surpassed children born, or rather, on average, people wished to have 2.3 children, they considered 2.38 children the ideal number of children for a family and they expected to have 1.8 children, but, in reality, they had on average 1 child, a level far below the minimum of 2.1 for a renewal of the population (Instituto Nacional de Estatística & Fundação Francisco Manuel dos Santos, 2014). The differences identified between the fertility wished for, intentional fertility and actual fertility, could be to do with individual reasons, such as those related to financial situations, jobs, timing, schooling or to the couple (Tomé et al., 2018).

After the Second World War, in countries of greater economic prosperity, the model of the man-breadwinner and the woman-housewife and carer, based on paid and non-paid work became widespread. The Social State followed this model for couples, the man being the breadwinner and the principal target of public policies (Cunha, 2018). Despite this, in the 60s and the 70s during the last century, whether because of financial constraints, along with the feminist struggle for franchise and financial independence, a decline came about of the man-breadwinner and the woman-housewife model, and the couple model of the “two incomes” or the “income and a half” transpired (Cunha, 2018). These models are sustained in different visions by the Social State. In the “two incomes” model, both of the couple work full-time, a characteristic in countries with policies which promote gender equality, with a public network or subsidized by crèches and kindergartens, promoting the participation of women and men in the jobs market. In the “income and a half” model, the man is in full-time work and the woman works part-time, usually where there are young children, characteristic in countries with family policies based on the idea that “it falls to the mother to have ultimate responsibility for the children until they go to school, offering long maternity leave and/or benefits to look after them at home” (Cunha, 2018, p. 93).

Tomé et al. (2018) refer that the increase in the levels of schooling, together with women’s participation in the job market, and, consequently, the personal and professional desires and aspirations of women, can, apparently, condition the incentives and the intentions of women and men, influencing the number of children and the age those children are conceived at, which leads to a subsequent delay in conception. Changes, which clearly bring challenges to public policies and also for healthcare practices based on evidence.

Effectively, age becomes one of the key factors in the intention to have another child, the delay in having the first child meaning maybe that the transition to the second child could be compromised (Oliveira, 2012; Tomé et al., 2018). Thus, for the recovery of fertility in Portugal currently being linked to the increase in births of second children (Tomé et al., 2018), it is important to understand the experience relating to the second transition in parenthood, currently under-researched and left out in scientific material, together with identifying the challenges that face research, clinical practice and public policies. This work will contribute to gathering existing knowledge in different areas which influence the phenomenon, just as will identifying missing areas or new actions to be undertaken, in a concerted manner, and which can have an impact on the decision to conceive by couples and/or in the transition triggered by the birth of the second child.

In this sense, this article of narrative revision of literature presents itself as an objective announcement of how, in national and international scientific output,

the experience of the transition to the birth of a second child presents itself, as do the challenges faced by research, clinical practice and public policies, in order to promote this transition. To construct it, bibliographical research was undertaken in databases (ResearchGate and SCielo Portugal and Brazil), search engines (EBSCO and Plataforma B-On) and data repositories (RCAAP and *Repositório Comum*) with the defined keywords (mother*, women, female, parent*, father*, becoming a mother, transition*, transition to parenthood, second child, second-time, two children, public policy) adapted to Portuguese and Spanish.

2. Transition to the Second Child

The transition to the second child, representing a singular moment in time, of transformation and greater vulnerability, demands an adaptable trajectory and (re-)finding a new equilibrium (O'Reilly, 2004), which is characterized at the outset by the sibling subsystem (Vivian, 2010; Pereira & Piccinini, 2007). The transition to the second child also involves a change towards new roles and responsibilities, with implications, whether in the health and the quality of life of the individual(s), as with conjugal and family relationships, and the physical and healthy emotional development of the child(ren). According to Chick & Meleis (1986), the transition leads to new knowledge being absorbed, regarding changes in behavior and a new definition of "self".

From the revision undertaken, only a few studies were identified which described the experience of this transition, whether from the woman's point of view, not focusing solely on gestation, the post-natal period or in the weeks immediately following the birth (Stewart, 1990; O'Reilly, 2004; Holditch-Davis & Miles, 2012; Rodrigues & Velez, 2018), but also on the man's experience (Oliveira & Lopes, 2010) or on that of the firstborn (Piccinini, Pereira, Marin, & Lopes, 2007).

The literature consulted was predominantly made up of international studies from the 80s, showing a slight come-back in the 90s and in 2000 (Pereira & Piccinini, 2007; Rodrigues & Velez, 2018). In Portugal, as well as internationally, research had been undertaken regarding the transition to parenthood and on exercising the maternal/paternal role, but without focusing on the transition experienced with the birth of the second child.

In the integrating revision of literature undertaken by Gage, Everett and Bullcock, (2006), with the objective of critically synthesizing and analyzing the research into parenthood in nursing, it was discovered that the majority of research was on the study of children with physical or developmental disabilities, with no reference at all to studies on the transition to parenthood with regard to the birth of the second child.

The birth of a second child emerges, according to the literature consulted, as a personalized, specific and singular experience (Dessen, 1997; Kojima, Wakita, & Irisawa, 2005).

Despite this, in demanding new ways of interaction resulting from the expansion of a unit with three players to a unit with four, the presence of a second child also increases the complexity of those interactions, and requires the reorganization of the established family unit (O'Reilly, 2002), there not only being the relationship between the couple, but also between parents/children and between siblings (Stewart, 1990).

With regard to family relationships, there is a consensus in the scientific literature that shows changes occur in different dimensions, such as “in the father/mother/oldest child relationship, in the couples’ relationship, in the mother/first-born, father/first-born relationship” amongst others (Oliveira & Lopes, 2010, p. 104). Despite this, the mother-child relationship is the one which, according to most studies, is the most affected (Oliveira & Lopes, 2010; Piccinini et al., 2007). This condition, with the father only being included in the sample in a few of the studies, together with the fact that the arrival of a second child coming as a moment of “rupture” in the relationship, as does the redefinition of the maternal role (Oliveira & Lopes, 2010, p. 99), a result of the changes which occurred during pregnancy, while being away from home in hospital and the demanding, long-term care required by the newly-born (Piccinini et al., 2007). O'Reilly (2004) also highlights that women who become mothers of a second child, tend to report feeling more stress than those who become mothers for the first time, or than those who have three or more children. This maternal stress appears to arise from the difficulties in caring for the first-born, as well as from a constellation of factors relating to the relationship with the partner, to the situation at work or to both (Stewart, 1990). The changes experienced can, in this way, be demanding and wearing, leading to a rise in issues such as depression, anxiety, anger, tiredness or stress (Möller, Hwang, & Wickberg, 2006; Krieg, 2007).

From the scientific literature identified, there are several studies on this phenomenon. Walz and Rich (1983), for example, studied the behavior of 14 post-natal women, with a view to understanding how the second child became incorporated into the woman's life, as well as into the other child's life. They identified six groups of behavior which involved: (a) promoting the acceptance of the newborn by the first child; (b) the struggle with the loss of the exclusive relationship with the first child; (c) planning the inclusion of the second child within family life; (d) reformulating the relationship with the first child; (e) the identifying of the second child in comparison with the first, and (f) self-assessment regarding the ability to nurture affection simultaneously for both children. It was found that in this early

post-natal period, the women focused almost exclusively on the dyad relationship with the first child. It was also concluded that in order for this transition to succeed, it was fundamental for the mother to accept her new identity as a mother of two children.

In turn, the study developed by O'Reilly (2004) with the objective of describing the experience of transition in parenthood from the perspective of the woman who is a mother for the second time, identified seven themes with elements common to the lives of the participants: *balancing the positive and the negative elements of the first weeks after the birth, knowing what to expect, establishing a new routine, maintaining the couple's relationship, taking a break, looking for support, nurturing the relationships between family members* (O'Reilly, 2004, p. 455). The women were concerned with their relationships with each child, with their relationship with the father of the children and with the children's relationship. The author concludes that the majority of the mothers found that the addition of a second child to the family was a positive experience, independently of the effort it took them to accommodate the needs of the two children in their lives. This study also underlines, that despite second-time mothers coping with this transition with a great range of skills, they may have issues which go unnoticed by nurses (O'Reilly, 2004).

In her doctorate, Vivian (2010) studies the process of becoming a mother to a second child, from gestation to the second year of the child's life, looking to discover the impact of the "sibling unit". The researcher found that the woman: changed her mind about the second child being easier; understood that the progressive creation of more space for another child was a challenge; that the relationship with her own mother changed, and that her relationship with her husband was deeply impacted by support for caring for the first-born. The author suggests this phenomenon should continue to be studied.

In 2013, Vivian, Lopes, Geara, and Piccinini published a study in which they researched the expectations and feelings of women expecting a second child, in relation to the first-born. The results showed different maternal expectations regarding the second child, in relation to its gender and name, as well as regarding the emotional and physical characteristics, with comparisons that were made with the first-born standing out. According to the authors, the significance of becoming the mother of a second child should continue to be researched.

Stewart (1990), by not focusing exclusively on the mother, and by way of a longitudinal study, analyzed the adjustments in the relations between parents and children, between siblings and between couples. The first assessments were undertaken during the third trimester of the second pregnancy and the subsequent assessments were undertaken during the first year of the second child's life. The

analysis showed, that despite the birth of a second child being a stressful event for both parents, the mothers experienced higher levels of stress and of a greater variety than their partners.

Other studies were also identified which interlinked the experience relating to the transition to a second child and the questions of gender, relationships and conjugal satisfaction.

In the study developed by Krieg (2007), with the objective of understanding how having a child affects women who are mothers for the first time and for the second time, it was found that those who were mothers for the second time reported not feeling a greater capability to care for the second child and felt more stress pre-natal than post-natal. Despite this, the mothers for the second time reported that over time, the positive aspects of the quality of conjugal life diminished, showing that one month after the birth, the number of domestic chores for which they were responsible had increased.

For their part, Möller, Hwang, and Wickberg (2008), in researching whether satisfaction with the couple's relationship, during the transition to parenthood, was related to domestic chores, found that for women who have a second child, there is a significant correlation between the amount of domestic chores and the quality of the relationship of the couple. In a society such as in Sweden, where the study was undertaken, with a high level of equality between men and women, domestic chores and stress appeared as indicators of happiness for women recently becoming mothers for the second time.

Hakulinen, Paunonen, White, and Wilson (1997) looked to describe the family dynamic during the third trimester of a healthy pregnancy, in families with a first or second child, in the south-east of Finland. Mothers for the second time reported more role conflict and isolation, suggesting an increase in the complexity of the roles which occurs with each birth and with daily demands, in relation to the modifications of previously defined routines.

In turn, Katz-Wise, Priess, and Hyde (2010) examined the changes in attitudes in the part played by gender and in behavior during the transition to parenthood for the first time and after the birth of the second child. The authors found that attitudes relating to the role played by gender became more traditional, from pregnancy until 12 months old, keeping those who were parents for the second time within this study. It was also found that the family assumed more importance than work.

Parenthood, being in a couple and the support received when there is a second child were also studied. Möller et al. (2006), in looking to examine the association between types of bonding and the relationships in couples after the transition to

parenthood, found that for second-time mothers, an insecure bond with her partner was significantly associated with dissatisfaction with the couple's relationship.

The studies developed by Gottlieb and Mendelson (1995), Dessen (1997), Pereira and Piccinini (2007), Krieg (2007), Barnes (2013), Park (2012), Martins (2013), highlight the influence of various factors of living through this transition, which increase the family unit, including amongst others the extended family, friends, neighbors and health institutions.

Gottlieb and Mendelson (1995) researched the relationship between the different states of mind and social support afforded to 50 married mothers who were expecting a second child, both pre- and post-natal. They found that those mothers who were depressed, irritated and/or tired said they received inadequate support. It was also concluded that different types of support performed different functions, before and after the birth. In turn, the mothers who were satisfied with the support they received were less susceptible to depression or anger.

Barnes (2013), in the study he carried out in the USA, and which had as its objective to clarify how mothers for the first time and for the second time decide on the length of their maternity leave, found that the women who were pregnant for the second time who took part in the study were more confident and took different decisions from the others. Apart from this, the women shared, on the one hand, the belief that six weeks paid maternity leave was insufficient, and on the other, the wish for the same to be increased, that their husbands should also have the right to it and that there should be more flexibility. The women also demonstrated that they adjusted their leave to their family situation, which was seen as an example in order for better planning of pregnancies.

The birth of the second child representing, as described, a complex moment of transition, brings challenges for all the subsystems which make it up, as a lack of adequate conditions and support can impact this experience, surmising that it could influence the decision by the couple to have more children.

3. Path(s) to Follow

As described in the various studies consulted, the investigation into the transition to the second child should continue to be investigated within the Portuguese context, with a view to better understanding the phenomenon. This knowledge will allow, on the one hand, the development of care practices based on evidence, just as it can contribute to identifying the strategies for incentivizing fertility and births, or, the definition of policies which minimize the difficulties and reinforce the advantages identified in experiencing this transition of parenthood. It will be, certainly, a concerted strategy in various areas, which will influence or create favorable conditions so that the transition can pass from desire to reality.

The following considerations are presented only as contributions for reflection on paths to follow in research, in clinical practices and in public policies as identified within the scientific material consulted.

3.1 The Research

In order for the phenomenon inherent to the experience of the second transition in parenthood to be properly understood, the literature identified suggests that studies should be undertaken to allow an in-depth understanding of the perspective of women who become mothers for the second time within the Portuguese context (Rodrigues & Velez, 2018), just as for the father (O'Reilly, 2002; Krieg, 2007), so that this transition is extensively understood and experiencing it is made easier.

Oliveira & Lopes (2010) highlight the importance of the development of new research, which could “contribute to the understanding of the repercussions of the birth of the second child on the emotional development of the first-born and, above all, on the matters of psychological or emotional separation as regards those who care for them” (p.105).

Dessen & Braz (2000) suggest that the influence of grandparents on the development of the child should be studied more concretely, regarding the part they play in the periods of family transition once the grandchildren are born.

Szabó, Dubas, and Aken (2012) also highlight that, since families are open systems, it would be important to know how the arrival of a second child leads to the reorganization of the family. With this thinking in mind, Krieg (2007) suggests that future studies should include mothers and fathers, together with information regarding the marriage and the division of labor in the home. These studies would permit a more precise assessment of the family dynamic of participants, helping to clarify the impact of contributions as understood by each of the parents in relation to their own actual contribution to domestic chores, as well as giving an analysis of the family as a system. Also, O'Reilly (2002), apart from the investigation of the father's experience during the transition to parenthood for the second time, recommends a study of the effect of paternal participation in the care of the child and his satisfaction with the division of labor.

Piccinini et al. (2007), in turn, highlight the need for studies to be undertaken to investigate this transition within the family context in different social classes, allowing a much deeper understanding of this period. Just as with undertaking studies which assist in founding support and educational programs for families for the period when their children are born.

In 2012, Mendes, in an article with the heading “Decline in fertility, delaying and the ideal number of children in Portugal: the role of political measures”, published in the *Roteiros do Futuro* – Conference “Being born in Portugal”, coor-

minated by the Casa Civil consultancy of the President of the Republic, also highlights the importance of more studies being developed on the Portuguese people's approach to fertility. As with the need to "understand how far the decision for fertility is associated with the idea of the desired or considered ideal size of the family, and the circumstances which, gradually, will transform them into intentions and, finally, into births" (Mendes, 2012, p. 108). The researcher further emphasizes that this assessment must be carried out as a cohort study and not by using the indicator of time.

3.2 Clinical practices

From the studies consulted, the transition triggered by the conception and birth of the second child can lead to specific health issues (O'Reilly, 2002; Möller et al., 2006; Krieg, 2007), associated to factors linked to the need to reorganize the family and the adjustments for each of those involved, presenting itself as a period of greater vulnerability (Pereira & Piccinini, 2011).

The easing of the transition processes is focused on the area of nursing (Meleis & Schumacher, 1994; Meleis, Sawyer, Im, Hilfinger, & Schumacher, 2000; Meleis, 2010; Basto, 2012), in which care presents itself as a process which eases successful transitions (Meleis, 2010). According to Rodrigues & Velez (2018), this change in parenthood calls for a professional human carer to reinforce skills and resources and to lessen vulnerability.

In the studies identified, suggestions for clinical practices are presented. O'Reilly (2004) in her research, suggests that nurses involved in assisting the adjustment of women, when faced with the actual transition, emphasize the depth of skills and experience they possess, just as with a suitable adaptation for them to undergo from the birth of the first-born. It is also suggested that these professionals provide, following discharge from hospital, the support required for lactation in a way that any stress underlying these issues with early breastfeeding is minimized. The writer also suggests bringing forward discussion regarding sleep patterns of children and infants, which implicates that nurses and other professionals should have updated skills on the various approaches for adequate sleep hygiene, and that they have an individualized assessment of each child and family, in order to ensure that preconceptions do not get passed on to the parents.

In the study undertaken by O'Reilly (2004), those taking part reported that, at times, they hesitated before sharing their ideas with other parents, for fear of getting negative feedback. In this way, the researcher suggests that nurses should discuss the topic with women, reinforcing, together, the possibility of the existence of different parental approaches and options, making them aware of the importance of respecting other women's decisions. According to the researcher, this approach

can contribute to creating an environment of mutual support, to the detriment of a destructive context towards one another (O'Reilly, 2004). The discussion on the importance of free time, of the construction of a support network, encouraging the father's skills in caring for the child and establishing priorities, is also portrayed in the implications for putting this study into practice (O'Reilly, 2004).

Szabó et al. (2012) suggest actions to be put in place for the parents of a (second) child with a difficult temperament, as well as discussion on matters relating to co-parenting, with cooperation between the parents to deal with the stress they feel with having a difficult child.

The growing evidence of research into the conflict of roles within the second transition in parenthood, leads Lorensen, Wilson and White, (2004) to suggest that actions should impact support for negotiation to deal with the changes in roles following the birth of a child, but focusing on concrete behaviors, namely the carrying out of tasks equally as well as a way of arriving at an agreement as to how to share said tasks (Lorensen et al., 2004).

Regarding resources and strategies to be adopted in order to reply to needs, O'Reilly (2004) also proposes post-natal sessions, support groups and online material on relevant themes, with links to further sources of information, right from the first week after the birth, as well as during the first year of life, also suggested in this study. Despite this, the assessment of learning needs and the personalization of teaching is cited as paramount, taking into consideration the physical and cognitive situation of each woman (O'Reilly, 2004).

Along this line of thinking, Rossato Pereira & Piccinini (2011) also propose the creation of specific programs for parents expecting their second child, where guidelines should be available regarding the changes hoped for in behaviors and in the structure of family relationships, from the start of the gestation period until the arrival of the second child. Hakulinen et al. (1997), having studied the contribution of nursing directly regarding the use of resources, highlights that families hope nurses will give specific care and consider the family as a whole and as a greater unit than before, with isolation and role conflict being attended to, as well as recommended resources.

In this regard, Hakulinen et al. (1997) also suggest that nurses should include courses which cover the basic ideas of family communication, such as listening and expressing feelings, and the use of strategies which allow the resolution of matters in an advantageous way for all parties. The mobilization of applicable and significant material for family life, and recourse to role-playing also being highlighted as paramount.

Despite this, it is important to report that the effects of the birth of a second child cannot be generalized. The implications can be very varied and complex, and

depend as much on the parents as on the first-born (Park, 2012), being central to them the development of personalized actions based on evidence (Hakulinen, et al., 1997).

3.3 Public Policies

As previously referred to, Portugal currently has an ageing population structure, a result of living longer, having fewer children and with less people being in active life (Tomé et al., 2018). The low birth-rate emerging as a dynamic and complex social phenomenon, entails the articulation of different perspectives, and the aggregation and compromising of efforts by various parties (Cunha, 2018).

We know that the incentive and the decision to have only one child or to go beyond the first, conditions the fertility and rejuvenation of the parents (Tomé et al., 2018). According to Mendes et al. (2016), in the Portuguese aged between 30 and 39, the incentive to have more children appears to be to do with the age of the person, their financial situation, whether co-habiting or married, with the size of their own family (those with more siblings want to have more children), just as with the age at which they left their own family (Mendes et al., 2016). Tomé et al. (2018) refer that for approximately 30% of young people up to the age of 30, matters relating to where they live bear weight on not wanting to have more children. Added to this, also, is the fact that smaller homes lead to smaller families, the current scenario in our country not seeming favorable for incentivizing fertility or births.

Simultaneously, on entering the job market late and with the increase in levels of schooling returning with difficulty, the current framework can only be altered in situations where the couple enjoy enough economic and social stability to have (more) children, which implicates they enjoy the conditions they consider ideal for having the children they wish and when they want them (Tomé et al., 2018) .

In parallel to this, immigration could have an impact on the increase in fertility and birth-rate in Portugal. Despite this, we know from various studies, that second generation immigrants adopt fertility patterns very similar to those of their countries of origin, so that the best strategy would be, therefore, to ensure those residing here are offered conditions which are favorable for them in order to conceive the number of children that they wish for (Tomé et al., 2018).

Implementing (re-)attraction measures to the emigrants who left Portugal between 2011 and 2015, who were mostly single, young, active people, or getting them to settle, is another strategy which is also noted as relevant to an increase in the birth-rate (Tomé et al., 2018), in the measure that the number of Portuguese who did this was quite high and the tendency for them to remain permanently in their countries of destination and to have their children there, to the detriment of Portugal, is very strong. In this sense, according to Tomé et al. (2018), it would

be important for these individuals to be offered satisfactory working conditions, with salaries compatible to their existing expectations in relation to their level of education and professional qualifications.

Apart from the creation of the socio-economical conditions referred to above favorable to the Portuguese (residing – or not – within national territory), in order for them to conceive the number of children they wish for, scientific material also identifies the difficulties regarding reconciling professional life with family life, as set out in the areas where actions are required. The results of the International Social Survey Programme (ISSP) – “Family and the role of gender undergoing change”, published in the “*Livro Branco Homens e Igualdade de Género*” (White Book – Men and Gender Equality), reveal that:

Despite a high prevalence of *double incomes* in Portuguese life, gender inequality shows itself in the different amount of hours that women and men dedicate to paid work and, principally, to unpaid work. With effect, domestic chores, looking after the family and reconciling professional life — elements which are less visible and tangible in daily family life and socially less valued — continue to fall, in the main, to women (Cunha, 2018, p. 104).

However, we are also beginning to see signs in Portugal of some generational changes by both sexes, which come down to a lessening of female over-burdening (Cunha, 2018). Effectively, gender inequality patent in paid work, unpaid work and in the reconciliation of the two spheres of life, is not reflected by article 13 of the Constitution of the Portuguese Republic, it being a recurring theme in the agenda and of the actions of political decision-makers, social partnerships and public organizations for years (Cunha, 2018).

In this regard, the adoption of protective public policies could have an impact on the collective change of attitudes, for example, regarding the deconstruction of gender stereotypes, hugely responsible for the role conflicts that women and men face both as parents and professionally. Also, the challenge to change the predominant work culture, more concretely relevant to the needs for reconciliation of families and for the recognition that male employees are, themselves as well, responsible for the reconciliation of family-work, as potential carers. As well as the

“consolidation and coherence of protective public policies of ‘double incomes’ and the reconciliation of family/work, what is needed in order to reinforce as much the responsibilities of men within the framework of parental leave, as the network of public or subsidized facilities for childhood, still openly insufficient and territorially unequal could be the focus of attention of public policies (Cunha, 2018, p. 106).

However, let us not forget that national fertility is based on countless individual decisions taken by couples as part of their specific circumstances and being influenced by distinct factors, which could be modified with the passing of time (Mendes, 2012). Along this line of thought, Mendes (2012) reports that the “policy measures wishing to be effective in the creation of a favorable environment for the fertility decision by couples, cannot be established universally, but before the event, taking into account the target population which (still) wishes to have children”, as well as being “directed towards the factors which could bring about changes of behavior in this population group”. The author adds that policy measures cannot take on a unique and universal character, since much of the time, this is where their ineffectiveness stems from (p. 108).

Thus, the policies adopted must not be an incentive to fertility, but come into play before the event, to “*create a favorable environment* for the parents to have (more) children if and when they desire” (Mendes, 2012, p. 103). The author adds that “actions which allow the pattern of family life to improve, increase disposable income, decrease costs for the children, ensure education and health, and, promote equality between men and women in the job market and at home, will contribute decisively towards an increase in fertility” (Mendes, 2012, p. 106).

According to the author, the macro level of these actions could lead to measures which, in general, could reduce unemployment and job insecurity, reduce uncertainty, as well as generate a favorable outlook for young people, in the measure that the promotion of a friendly environment for families could have influence on decisions taken by couples (Mendes, 2012).

4. Conclusion

In Portugal, the transition to parenthood continues to be a reality in the lives of most of the population. Given the high proportion of only children, the transition to the second child shows signs of being more difficult to achieve each time, despite the ideal number of two children continuing to be the clear wish of the Portuguese.

The identification of scientific output on the experience of the transition regarding the birth of the second child, and the challenges faced by those involved, made a contribution to the ordering of knowledge and to the identification of missing areas and actions to be developed, in a concerted fashion by the different parties, with a view to promoting this transition.

The birth of a second child emerges as an experience which is qualitatively personal, specific and singular, and which involves the taking on of new roles and responsibilities, with possible implications for the health and the quality of life of the individual(s), as well as for conjugal and family relationships and for the

physical and emotionally healthy development of the child(ren). Issues regarding gender are frequently associated with this transition, with a focus on the greater overburdening experienced by women, as with the existing impact on conjugal relationships and satisfaction. The influence of the family and the social support network, as important resources to this transition, are also portrayed.

In Portugal, research has been carried out regarding the transition to parenthood, but not on understanding the transition experienced with the birth of the second child. There are a number of researchers who suggest this phenomenon should continue to be studied.

This transition requires a professional human carer to be made operational in order to help people acquire greater independence and abilities to adapt to their new roles. Nursing, being focused on facilitating transition, is well placed to act alongside those involved, to accompany them through this period of the cycle of life and to help them successfully overcome the transition.

The off-set between the ideas and the reproductional behavior of the Portuguese create a way-in for birth-rate policies, with a view to creating a favorable environment for those couples who wish to have a second child, as well as for those elements which could influence changes in behavior in these individuals.

Thus, faced with the complexity inherent in this transition and its impact on the rejuvenation of the parents, the realizing of different perspectives and endeavors is paramount, at a strategic level as concerns public policies, as well as through specific health and holistic care based on evidence.

