

RESEARCH

Dyadic expectations of cooperation and support in the transition to parenthood

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Funding information

This work was supported by Fundação para a Ciência e a Tecnologia (SFRH/BD/145924/2019); Fundação para a Ciência e a Tecnologia (<https://doi.org/10.54499/UID/00050/2025>); Fundação para a Ciência e a Tecnologia (2022.13549.BD); Research Council of Finland (Grant Number 323492).

Abstract

Objective: The purpose was to examine dyadic (in)congruent expectations of first-time expectant parents regarding future coparental cooperation, caregiving responsibilities, and partner support, and explore how gendered assumptions and structural factors (e.g., parental leave) shape these expectations.

Background: The transition to parenthood involves major psychological, relational, and practical changes. Although previous research has emphasized coparenting after birth, less is known about how expectant parents anticipate and construct shared or divergent roles before their child arrives.

Method: This qualitative study is part of the CopaGloba longitudinal project on coparenting. Semistructured individual interviews were conducted with 34 Portuguese heterosexual couples ($N = 68$) in the third trimester of pregnancy. Thematic and dyadic interview analysis were used to identify shared and divergent expectations.

Results: Five coparental representation patterns emerged. Congruent patterns were (a) Partners in Learning and (b) Mentor–Mentee, and incongruent patterns were (c) Mother-as-Mentor/Father-as-Partner, (d) Mother-as-Partner/Father-as-Mentee, and (e) Ambiguous couples. Gendered caregiving assumptions, breastfeeding, and leave policies shaped these expectations.

Conclusion: Expectant parents hold diverse representations of future cooperation, shaped by gender norms and policy contexts.

Abbreviations: EU, European Union; OECD, Organisation for Economic Co-operation and Development.

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Implications: These findings highlight the importance of addressing coparental expectations during the prenatal period. Supporting couples in articulating their roles, responsibilities, and mutual support can strengthen early coparenting dynamics and inform the development of preventive, family-focused interventions.

KEYWORDS

coparenting, gendered parenting, parental expectations, thematic analysis, transition to parenthood

Parental and coparental experiences are shaped by a combination of personal histories, relational dynamics, and sociocultural frameworks. The birth of the first child marks a major developmental transition that can reshape identities and couple dynamics (Doss et al., 2009). During this transitional period, new parents must learn to navigate the competing demands of caring for an infant, while maintaining financial stability and sustaining their own relationship. These challenges can place considerable strain on both psychological well-being and relational satisfaction (Doss et al., 2009). Recent meta-analytic evidence confirms a typical decline in relationship satisfaction from pregnancy to the first postpartum year, with smaller but continuing declines into the second year (Bogdan et al., 2022). Broader cultural discourses and social norms can also help shape how these parental roles and expectations are constructed (You, 2023). Intensive-parenting norms, for example, especially salient for mothers, encourage sustained emotional and material investment and can reinforce gendered dynamics despite egalitarian ideals (Nomaguchi & Milkie, 2020; OECD, 2025a). Early biological processes can further shape what care arrangements feel feasible. In particular, on-demand, day-and-night breastfeeding, recommended to be exclusive for roughly the first 6 months (World Health Organization, 2023), creates time-sensitive, high-frequency care that often reorganizes couples' routines and sleep in the first months postpartum. These demands are linked to maternal sleep disruption in early postpartum (Witkowska-Zimny et al., 2024). At the same time, when partners are engaged in practical ways (e.g., bringing the baby to nurse, handling night tasks, managing housework) and offer encouragement, mothers are more likely to start breastfeeding, keep it exclusive, and continue longer (Blixt et al., 2024). Finally, leave conditions shape breastfeeding continuation after return to work, underscoring the relevance of structural context (Brugaillères et al., 2024). Fathers' active involvement often begins in pregnancy (Eddy & Fife, 2021), yet caregiving remains gendered across most families, reflected in time-use and labor indicators and linked to maternal stress and work–family conflict (OECD, 2025a).

In the Portuguese context, parental leave policies reflect both efforts to encourage shared caregiving and the continued reinforcement of traditional caregiving roles. At data collection, mothers were entitled to 120–150 days of paid leave (first 42 mandatory); fathers to 28 days within 6 weeks plus 7 optional days (Government of Portugal, 2025). Proposed expansions were not yet implemented. Although leave can be shared, women comprise the clear majority of initial beneficiaries in Portugal, mirroring EU patterns (Instituto Nacional de Estatística, 2025; OECD, 2025b), and Portuguese women perform substantially more unpaid care than men (OECD, 2025a). These arrangements, combined with norms, help explain anticipations and reversion to traditional divisions postbirth. In an attempt to explain these persisting differences, family-economics theories view specialization as efficiency-seeking when external demands intensify postnatally (Perales et al., 2018). Complementing this perspective, bounded-rationality frameworks suggest that such divisions do not always stem from optimal decision-making, but rather everyday heuristics and limitations, including cognitive limitations, incomplete information, and ingrained habits that shape how couples divide labor (Todd & Gigerenzer, 2003). We

argue that these shifts are further influenced by prevailing social norms and ongoing negotiations within the couple's relationship, which influence how partners interpret, accept, and justify their evolving roles in the household. Role adaptations do not begin at the moment of birth but are preceded by a period of expectation-setting during pregnancy (Estlein & Shai, 2024; Lindroos et al., 2026). How parents anticipate dividing responsibilities, the emotional and practical support they expect to need, and the extent to which their expectations align with their partner's before and during pregnancy may significantly influence their postpartum adjustment (McHale & Rotman, 2007). We draw selectively on the capability approach, using capabilities in Sen's narrow sense of "real opportunities" available to people given resources, information, and norms (Sen, 1999). From this vantage point, what appears as "choice" versus "ambiguity" can partly reflect variation in feasible options shaped by context (e.g., service availability, work schedules, and familistic arrangements in Portugal). In addition, anxiety about becoming a parent can foster avoidance-oriented coping linked to poorer perinatal adjustment (Guardino & Dunkel Schetter, 2014), whereas parental self-efficacy relates to more engaged practices and better maternal adjustment (Leahy-Warren & McCarthy, 2011).

The potential for personal and interpersonal dissonance

The transition to parenthood may bring about discrepancies between prenatal expectations and postnatal realities, making emergent differences more salient as families reorganize (Roy et al., 2013). These discrepancies can be intrapersonal (i.e., misalignments between personal beliefs/self-concept and the lived demands of care), and they can be interpersonal (i.e., divergent expectations between partners; Nomaguchi & Milkie, 2020). Cognitive dissonance (Festinger, 1957) theory predicts psychological discomfort when expectations conflict with experience, helping explain emotional strain when anticipated roles meet actual caregiving. Empirically, such mismatches are linked to confusion, unmet support needs, distress, and relationship difficulties (Nomaguchi & Milkie 2020; Yavorsky et al., 2015). Discrepancies between "what is" and "what ought to be," such as unmet expectations around the division of caregiving and household tasks, have been linked to psychological distress in both mothers and fathers (Van Egeren, 2004). When partners lack mutual support or hold misaligned representations of parenting, couples report more conflict and lower satisfaction (Seefeld et al., 2024) and heightened stress (Bogdan et al., 2022; Estlein & Shai, 2024), often prompting role renegotiation/belief revision as expectations meet constraints (Doherty et al., 2025). Although emerging evidence supports these assertions, existing studies primarily rely on retrospective designs; thus, prospective research is needed to more clearly elucidate these dynamics (Lindroos et al., 2026).

The coparenting relationship: Importance of a dyadic perspective

The coparenting relationship has been conceptualized as a distinct and multidimensional subsystem within the family system. Feinberg's (2003) framework emphasizes both the affective and behavioral components of coparenting, including support versus undermining, shared parenting responsibilities, agreement on child-rearing, and joint management of family dynamics. Building on this, Van Egeren (2004) further distinguished between an internal dimension (i.e., each parent's perceptions of validation, cooperation, and commitment) and an external dimension (i.e., observable behaviors such as harmony, hostility-competition, and discrepancies in coparenting practices). Supportive coparental relationships and high relationship satisfaction have consistently been identified as protective factors, buffering the adverse effects of discrepancies between anticipated and actual caregiving roles and promoting individual well-being (Van Egeren, 2004). Parents who perceive their partners as emotionally available and responsive

report lower postpartum distress and greater relationship satisfaction (Seefeld et al., 2024). Partners' practical involvement in childcare and household responsibilities is likewise linked to smoother adaptation and reduced stress (Wang et al., 2023). In contrast, a lack of support from one's partner has been associated with increased stress, parental burnout, and marital dissatisfaction, particularly for mothers, who often assume the greater burden of caregiving in the postpartum period (Hochschild & Machung, 2012). Early coparenting also involves invisible forms of work, such as sustaining emotion, anticipating needs, and coordinating everyday logistics (Daminger, 2019). A full understanding of adjustment to parenthood, therefore, requires examining both expectant mothers' and fathers' attitudes, wishes, and expectations simultaneously (Volling & Cabrera, 2025). As Perry-Jenkins and Claxton (2011) have suggested, "Clearly, mothers' experiences of marriage are intricately intertwined with fathers' experiences, and both must be assessed simultaneously for a clear picture of marriage" (p. 26). Scholarship has increasingly moved beyond mothers' perspectives to document fathers' distinctive contributions and the importance of coparenting processes in the transition to parenthood (Cabrera, 2020; Volling & Cabrera, 2025). Despite the growing recognition of the importance of dyadic perspectives, there remains a scarcity of data-driven studies that allow prospective parents to freely and spontaneously share their perceptions about the transition to parenthood. Notably, Estlein and Shai (2024) emphasized the predictive value of prenatal coparenting interactions on postpartum outcomes, underscoring the need for research designs that capture the mutual linkages between both parents' behaviors and experiences. The dyadic perspective is valuable as it enables the identification of similarities, discrepancies, and complementarities in each partner's perceptions, while also uncovering hidden meanings that may emerge when partners' narratives are considered together (Eisikovits & Koren, 2010). Exploring these overlaps and differences can provide insight into meaning-making processes as they unfold within the complexity and fluidity of dyadic change (Manning & Kunkel, 2014, 2015). This study was guided by the following four research questions:

1. How do first-child expectant parents construct their prenatal expectations for interparental cooperation, caregiving responsibilities, and partner support at this early stage of family development?
2. How do gendered assumptions and perceived biological imperatives (e.g., pregnancy, breastfeeding), as well as structural and contextual factors, shape partners' expectations for coparenting roles and the division of caregiving responsibilities?
3. What patterns of congruence and incongruence exist in couples' prenatal expectations for interparental cooperation, and how are these patterns characterized?
4. How do couples articulate their anticipated needs for emotional and practical support?

METHOD

Participants and procedure

The data were collected through interviews with couples transitioning to parenthood in the scope of the CopaGloba project. Three countries participated in the CopaGloba project: Finland, Japan, and Portugal. In the present article, we focus only on the Portuguese data. The study was approved by the Ethics Committee of the University of Porto, Portugal. A snowball sampling methodology was used via contacts with maternity health care clinics, Facebook groups for mothers to be, and university mailing lists. Data collection occurred between September 2020 and June 2021. All participants provided informed consent prior to the interviews. All interviews were held individually with each couple member via Zoom, Teams, or similar software with audio recording to support later transcription. Interviews lasted 45–

150 minutes, were audio recorded, and were transcribed verbatim. Interviews were conducted by four researchers: two master's students and two PhD students in psychology, all female. The researchers received project-based workshop training in semistructured interviewing and inductive analysis. Participants were interviewed separately. Each individual interview was moderated by one interviewer (female) using the same semistructured guide. The primary analyst for this study is a clinical and health psychologist with experience counseling couples and parents in transition. Throughout analysis we followed reflexive thematic analysis good-practice guidance, using team reflexive discussions and analytic memos to surface positionality and assumptions, document decision trails, and iteratively develop themes as patterns of shared meaning, rather than topic summaries (Braun & Clarke, 2021).

Participants were included in this study if both couple members were expecting their first child in the third trimester of pregnancy, were part of a cohabiting two-parent family, and were fluent in Portuguese. Although the inclusion criteria placed no restrictions regarding parents' gender, all participating couples in this study identified as heterosexual. This study included 34 couples (68 participants), with expectant mothers' age ranging from 23 to 39 years old and expectant fathers from 24 to 41 years old. Among mothers, seven had completed high school or less, 13 had an undergraduate degree, and 14 had a master's degree or higher. Among fathers, 17 had completed high school or less, 10 had an undergraduate degree, and seven had a master's degree or higher, indicating a higher educational attainment among mothers. In terms of employment, most participants were working, with 30 mothers and 33 fathers employed at the time of the study, and four mothers and one father being unemployed. Household income varied, with 16 couples earning less than €1,800 per month, nine couples earning between €1,800 and €2,400, and nine couples earning more than €2,400. Regarding place of residence, 17 couples lived in urban areas, three resided in rural areas, and the remaining couples did not provide information about their location. Compared to national averages, this sample is representative in terms of age distribution and urban residency. However, it reflects higher educational attainment and employment rates, particularly among expectant mothers, which should be considered when interpreting the findings and assessing their generalizability.

The initial interview script was developed in English in the context of the larger project, and later translated and adapted to the Portuguese language. The interview script covered a wide range of topics related to the anticipation of coparenting. Individual interviews were conducted with the members of the couple using a semistructured format, allowing for flexibility in probing and follow-up questions based on participants' responses. In this study, we used only data obtained through the following questions:

1. How do you imagine being a parent together with your partner?
2. How would you like your cooperation to be? How do you think you will organize the tasks associated with caring for the baby (e.g. taking care of the baby, playing with him/her)? What about the domestic work, how do you plan to organize it?
3. What kind of emotional and practical support do you expect to receive from your partner?

Although only responses to these questions were included in the analysis, the full interview transcripts were read in their entirety to maintain a full understanding of the context and meaning in participants' narratives.

Assessment and data analysis plan

As part of the broader CopaGloba project, the present study focused specifically on the Portuguese subsample and employed a multistep qualitative analytic process. Initial coding was conducted by the first author, followed by collaborative discussions with a second team member to

review and refine the coding framework. The emerging themes and structure were then presented to the wider research team for further discussion and validation. These stages were conducted iteratively, allowing for the progressive refinement and consolidation of the thematic framework. Our analysis was guided by the six-phase approach to thematic analysis proposed by Braun and Clarke (2006, 2021), which includes familiarization with the data, generating initial codes, searching for themes, reviewing themes, defining and naming themes, and producing the final report. We followed a reflexive, interpretive orientation, attending closely to meaning-making within and across individual accounts (see Braun & Clarke, 2006, 2021, 2022). Rather than aiming to capture the full breadth of participants' representations of the transition to parenthood, we focused on providing a detailed account of two key dimensions: interparental cooperation and partner support. Although the research questions were informed by existing theory and prior literature, the coding scheme and major themes emerged inductively from the data through close engagement with participants' narratives. Both surface meanings (i.e., what was explicitly stated) and underlying meanings (i.e., implicit assumptions, relational dynamics, and patterned interpretations) were considered during the coding process. Surface-level content was identified through participants' direct responses to the interview questions, and underlying meanings were explored through close attention to language use, tone, contradictions, and the emotional weight of certain topics. Particular focus was given to how participants positioned themselves and their partners, the values embedded in their expectations, and how these may reflect broader sociocultural narratives around parenting and couple dynamics. This layered reading allowed us to identify not only what participants said but also how they made sense of their anticipated roles and interactions within the coparental relationship. We began with a preliminary analysis of 20 interviews (10 couples), from which an initial coding scheme was developed. This scheme was iteratively refined through team discussions as we extended the coding process to the remaining interviews. In the first stage of analysis, we applied a dyadic thematic analysis to explore couples' expectations regarding interparental cooperation. Throughout, we adopted a dyadic coding lens (Eisikovits & Koren, 2010) to capture points of convergence and divergence in each couple's narrative. Individual interviews were first coded separately, after which dyadic case summaries were created to identify patterns of agreement, complementarity, or asymmetry between partners. Particular attention was given to how each partner positioned themselves and their coparent in relation to caregiving responsibilities, as well as to the emotional tone and underlying assumptions embedded in their descriptions. This process allowed us to move beyond individual-level themes to uncover shared representations and relational dynamics shaping how couples anticipated cooperating in parenthood. In the first stage of analysis, we aimed to identify typologies of expected coparenting cooperation at the couple level using an inductive approach. As the typologies of coparenting cooperation began to emerge, we noticed variation in how couples described their wishes for practical and emotional support. This observation led us to conduct a targeted, exploratory analysis to investigate whether patterns of support wishes were associated with particular typologies. In this second round of analysis, using the same dyadic thematic analysis approach (Braun & Clarke, 2006), we coded all interviews for support-related content, first identifying recurring support themes (e.g., practical assistance, emotional reassurance). When a participant mentioned the same theme multiple times during the interview, it was counted only once for coding purposes. We conducted this analysis at both the individual and dyadic levels. First, we coded each partner's transcript separately to allow for comparisons by gender. Second, we aggregated codes at the couple level, in alignment with the five couple typologies developed in the prior stage of analysis. A theme was considered present for the couple if at least one partner referred to it. We then compared these support expectations across the five typologies and by gender to determine whether patterns of support wishes aligned with the broader cooperation typologies or reflected more universal expectations.

RESULTS

Our analysis proceeded in two steps: First, we derived five couple-level typologies of expected coparenting cooperation; second, we coded partners' emotional and practical support expectations and compared their distribution across those typologies. The five distinct typologies of expected coparenting cooperation were identified at the couple level, based on patterns of (in) congruence in partners' anticipated roles. Two typologies reflected congruent expectations (i.e., Partners in Learning and Mentor–Mentee) where both partners articulated similar assumptions about their future roles. The remaining three typologies captured incongruent patterns: Mother-as-Mentor/Father-as-Partner, Mother-as-Partner/Father-as-Mentee, and Ambiguous couples characterized by unclear or unaligned expectations. Among the 34 couples, 12 were classified as Partners in Learning, eight as Mentor–Mentee, six as Mother-as-Mentor/Father-as-Partner, two as Mother-as-Partner/Father-as-Mentee, and six as Ambiguous. The following sections describe each of these typologies, illustrated with quotes from both partners. All names used in participant quotes are fictitious and were assigned to protect anonymity.

Partners in Learning couples

Couples referred to as Partners in Learning were characterized by a specific style of cooperation wherein both parents anticipated they would be learning together as equals in this transition to the new parenting role, which entailed demands requiring adaptation from both of them:

I think it's going to be pretty much the same as it already is in our current life, as a couple and in managing the house and our finances ... Everything that we do as a couple is based on mutual support ... mutual learning as well ... We are both going to learn, not only from each other but also from the baby.

(Teresa, partner of Paulo)

I wish we can effectively divide the tasks! I wish she would not be one of those mothers [who think]: "It's my son, I have to take care of him, he's my responsibility, I'm the one who knows best and I have to do [everything]." I think there has to be room and the opportunity for both of us to be parents.

(Paulo, partner of Teresa)

For these couples, there was typically a high degree of congruence between partners' perceptions:

I know my husband will help a lot. He is not one of those men who leaves things to his wife to do. As it has been up to now, I hope it continues to be. ... I hope I can divide up all the tasks involved with the baby.

(Ana, partner of Pedro)

I am here to help her, and she is here to help me. It is on this basis that we have built our relationship and that we will raise our daughter.

(Pedro, partner of Ana)

Parents who saw themselves as partners often acknowledged that both they and their partners had individual strengths and limitations. By working together as a team, they believed they could complement one another, balancing differences and making the most of their combined resources as a parental unit. As Maria (partner of Luis) explained, "It's not a team made up of

two identical partners because ... because we're not. But we complement each other, and we get the best of each other." Similarly, Ricardo (partner of Olívia) noted, "We managed to split the tasks and make up for what might be each other's shortcomings, she for mine and I for hers."

The idea of complementarity is also mentioned in connection with the optimization of resources and the wish to prevent exhaustion and the feeling of being overwhelmed for both partners:

We are going to do everything possible to divide the tasks between the two of us. Because one partner shouldn't overburden the other. ... I don't think only one of us should be left [with the responsibility], if there are two of us at home. The child was made by two people, with love.

(António, partner of Laura)

Confidence that this cooperative approach would continue after the baby's arrival often stemmed from how these couples had already navigated everyday responsibilities before the pregnancy. As Olívia (partner of Ricardo) explained, "Everything else, the way it's going to work, I think it's going to work as it has worked so far. We will share the tasks without really realizing that they are tasks." Similarly, Miguel (partner of Rita) stated, "I want things to continue as they are, when we can, we do things together. Regarding housework, it will stay the same!"

Mentor–Mentee couples

Mentor–Mentee couples are characterized by congruent expectations that the mother, due to perceived biological bonds with the child, greater knowledge, or socialization, would lead in child care, whereas the father will serve as a helper, a mentee, or a student, under the mother's guidance. As Amélia (partner of Nuno), described,

By force of circumstance and biological reasons, at an early stage, I think the mother always feels naturally more involved ... Also, because the baby is already part of our body ... In some way, I always see this relationship, even from a biological perspective. ... Mothers tend to be a little more ... how shall I put it, to avoid using an unpleasant word ...? Possessive ... towards the baby ... Because of breastfeeding, culturally and socially, we are also brought up with this idea ... And all these perceptions end up emerging in this experience.

Amélia's partner, Nuno, echoed this expectation:

I don't know if it's because I'm a bit irresponsible, but when I make the mental picture of it happening, I see [my wife] [leading the way] more. Mind you, I don't want to sound sexist, even for a second. But I imagine her doing it and teaching me. Because I want to learn.

Similarly, Sandra (partner of Eusébio) explained, "I imagine that he will come, for example, to have lunch with us and that he will stay for a little bit ... But during the week I [will be the one] who is usually with her and who does everything." Eusébio acknowledged this imbalance, saying,

I think [my wife] will probably call the shots more because she's much more informed about the baby stuff than I am. I think she'll probably decide more things, I'll want to intervene at some point and she'll probably say ... well, she won't say it, but it'll be implied ... that she thinks I don't have as much authority because I'm not there.

As suggested in the previous quotes, some Mentor–Mentee couples anticipated that the mother's greater presence in the early stages would not only shape caregiving routines but also position her as the primary figure in setting rules, disciplining, and guiding the child's development. Sofia (partner of António) reflected on how this dynamic might unfold in her own experience: "I'm going to be with [the baby] longer. [...] so I think that the reference, for everything good and bad, ends up being more associated with me, as the mother."

The perceived biological imperative of breastfeeding and the experience of pregnancy were frequently cited as reasons for a special bond between mother and baby, positioning the father as a secondary figure who must make a conscious effort to become involved. In many of these accounts, the unequal distribution of early caregiving was also linked to parental leave arrangements, which were expected to be taken entirely by the mother in all participating couples. Notably, no participants mentioned or considered an alternative distribution of leave. As Luísa (partner of José) explained,

In the beginning, the mum's at home a lot longer, isn't she? So what we thought is that I'm going to have a much more present role in the beginning and when he comes home from work, he'll want to have as much time with him as possible, and then I'll rest.

Her partner, José, similarly stated, "I can't do everything. I know that the mother at an early stage has to give a lot more of herself, that's natural, that's nature. I will be there in the background always to support her in anything and everything."

In some cases, the perceived "special bond" between mother and baby was identified as a potential source of tension within the coparenting relationship. Although both partners recognized the demands of breastfeeding and the mother's heightened early involvement, concerns emerged about how caregiving roles might become unbalanced or lead to resentment. In particular, some Mentor–Mentee couples anticipated a functional division in which the mother would assume primary responsibility for the baby, while the father would focus on domestic tasks. As Ana Maria (partner of Patrício) explained,

The mother breastfeeds and the father does the rest. Because breastfeeding is a full-time job. And for the other things, the father is not insignificant. A lot of people think that the father is useless at this stage, but no, the father is useful for a lot of things. And the father has to keep the house running ... to take the burden off the mother.

Her partner, Patrício, expressed a concern about how breastfeeding might be used to justify an uneven distribution of responsibilities: "Whether my wife breastfeeds or not, I don't think that can be used for abuse of power. I mean, she could think 'I am already breastfeeding our child, so you do everything else'" (Patrício, partner of Ana Maria).

Another important factor in Mentor–Mentee dynamics was the commonly held belief that mothers have more experience with babies, often due to exposure through family, friends, or earlier caregiving experiences. Some fathers, in contrast, tended to express more uncertainty about what to expect, even when they held hopeful or optimistic outlooks. As this mother shared,

I always liked children, and I have a sister who is only 18. So, when she was born, I was 16, she was already my little baby ... I remember that phase very well, and I remember how my mother cared for her, so it's something that I already recognize.
(Paula, partner of João)

Her partner, João, reflected a more tentative stance: “I don’t know what awaits me ... I believe that there will be [tough] moments. There have been difficult moments in the past ... We managed to overcome them ... I think we will manage to overcome them.”

While many Mentor–Mentee mothers expressed a willingness, or even a preference, to take primary responsibility for caregiving in the initial months, they often expected this distribution to shift toward greater equality once they returned to paid employment.

Mother-as-Mentor/Father-as-Partner

In a subset of couples, we observed incongruence between partners’ expectations regarding early parenting roles. Mothers often anticipated taking the lead in child care, positioning themselves as the primary caregiver or “mentor,” while fathers envisioned a more equal, collaborative approach from the start. As Júlia (partner of Henrique) explained, “Maybe women and mothers have that intuition of doing it themselves first, right? In the first stage, I will probably do it myself and then I want to integrate [my husband].” In contrast, Henrique imagined a balanced approach from the beginning:

The baby care tasks will always be 50/50, meaning whatever my wife does, I will be prepared to do ... The baby is for both of us, not just one. That’s how we have to think. It came out of the belly of one, but it belongs to both of us anyway.

In one couple, the father reflected on his own upbringing, describing a distant paternal figure and expressing a strong desire to be more emotionally present with his child.

I still come from a generation where the father was always a more absent figure ... My father was more detached and very focused on work ... I tend to be a bit like that and I don’t want to be. I want to create a closer relationship with my baby.

(Tiago, partner of Camila)

Tiago’s partner, however, took a more cautious stance. She explained that she intentionally kept her expectations low to protect herself from disappointment and potential psychological strain, especially in light of concerns about postpartum mental health: “I’m just trying to keep my expectations low [on how much my partner will help me] ... Also because of [the danger of] postpartum depression” (Camila, partner of Tiago).

In this case, the father’s narrative stood out for its depth and personal reflection, with expectations rooted in a desire to break intergenerational patterns. In contrast, several other fathers who expressed hopes for equal involvement offered shorter, less elaborated responses, suggesting that, for some, these expectations may reflect more generalized ideals of equality rather than deeply considered intentions or plans.

In one case, the father expressed a generalized desire to be actively involved in parenting and conveyed enthusiasm about sharing responsibilities. However, both partners acknowledged that his job might limit his availability, an issue especially emphasized by the expectant mother, who worried she might lack support during challenging moments due to his work demands.

[My partner’s] work is really more important and requires more continuity. I can take some days off from my work and nothing happens to me, I come back whenever I want and pick up where I left off. [...] I’m a little bit afraid that I might need him but he can’t stop working at that stage and that’s it.

(Micaela, partner of Filipe)

Although the father briefly mentioned work-related constraints, his tone was notably more optimistic and unconcerned: "I think it'll always be both of us in all the activities. Unless it's not possible for work reasons ... But I think we'll try to organize ourselves to make it happen, because we're really, really excited."

Mother-as-Partner/Father-as-Mentee

In two couples, partners expressed incongruent expectations about their future roles, but in the reverse direction of what was observed in the Mother-as-Mentor/Father-as-Partner pattern. In these cases, it was the mother who anticipated a more equal division of child care, similar to a Partners in Learning dynamic, whereas the father positioned himself in a more peripheral or supportive role. As Manuela (partner of Maurício) explained, "The division should be complementary and equal. Understanding and empathy for each other's circumstances and needs are important. I don't think the opposite, being selfish, will happen." In contrast, Maurício placed more emphasis on the mother's central role, saying, "The baby will need her mother a lot in the early days. But I also want to be present in my family's moments."

In one case, the expectant mother emphasized the importance of teamwork and complementarity, grounded in the belief that their baby would benefit from different strategies and temperaments brought by each parent:

I want us to share the responsibilities. [...] It's not the baby who should adapt to us, we have to adapt to the baby. We already know that some babies respond better when one parent gives the bath rather than the other, or because one of us is better at transmitting calmness ... babies are very sensitive to these things.

(Catarina, partner of Marcelo)

Her partner, Marcelo, expressed a more passive attitude, suggesting that he would defer to his partner's authority: "When we are in disagreement, I think [my partner] will be right and I will follow her! ... There are some tasks I will do for sure and others I will do if she lets me!"

Ambiguous couples

In six of the analyzed couples, we found high levels of ambiguity in how one or both partners anticipated the transition to parenthood. This ambiguity could be congruent, with both partners expressing uncertainty, or incongruent, where one partner had clearer expectations whereas the other did not. It was typically expressed through short, vague answers, an absence of detailed thought or discussion about future roles, and difficulty articulating potential challenges. As Simone (partner of Alexandre) described, "We are naturally very practical and very uncomplicated people ... I think it's going to be very much on that basis ... We haven't thought much about it." Her partner's account echoed this lack of elaboration: "When one of us can do something, they'll do it ... When we cannot, we'll ask the other one. The same straightforwardness [that we have now] to say yes or no will be maintained."

In some cases, ambiguity from the father was met with more elaborated expectations from the mother, often reflecting a Mentor–Mentee dynamic in which the mother anticipated being the primary caregiver. In at least one of these cases, the lack of clear involvement from the partner appeared to contribute to the mother's expectation of loneliness, not only in a physical or logistical sense, but also emotionally. Laura (partner of Marco) expressed a strong sense that she would face early motherhood largely on her own. Her partner's ambiguous stance could, in

this case, reinforce her belief that she would be solely responsible for interpreting and responding to the baby's needs:

Despite what people say and despite the support [mothers] can have from the father, I think it's a very lonely journey. Pregnancy itself and being a mother are always very lonely. Because firstly, in pregnancy, only we know what it is that we feel. Only we feel our baby, only we know, for example, that he was more restless today, that he was calmer yesterday ... The father doesn't have that perception ... And I feel [it will continue like this], because then ... [The baby] is going to be born ... I will be the one who will be alone with him all day ... [My partner] will have to go to work. And then he will depend on me for everything. If I decide to breastfeed him, [my partner] may even wake up at night to go and fetch him, but I have to give him the breast because he can't feed him. So, I think it's going to be a journey ... Although I'm accompanied, I'm aware that we make a lot of that journey alone and that women are much stronger than men because of this.

(Laura, partner of Marco)

Marco, in contrast, expressed a lack of clear expectations: "I think it's going to be a bit of discovery ... it depends on what the tasks are, it depends on what time it is, it depends on a lot of things."

A similar dynamic appeared in the couple Marta and José, where the mother anticipated taking primary responsibility while hoping her partner would become more involved over time:

There are certain things that only the mother can do and ... it really is like that ... there's no other way, he can't do it. In other things, I will call him to help me or to do things together with me ... He always told me that newborn babies scare the heck out of him ... I think he's going to have to lose that fear because I'm going to need help.

(Marta, partner of José)

Her partner admitted to having little clarity:

I could even say that I would take over the housework or the baby, or the other way around ... But the reality is that we haven't [talked much about it] ... I can't say something like that, because I don't know. I don't know what is going to change.

(José, partner of Marta)

In both of these couples, the mother had reflected more deeply on the transition ahead and was already anticipating the demands of her new role. The father, on the other hand, expressed uncertainty and acknowledged a lack of preparation or communication. For the remaining four couples in this group, both partners provided vague, brief responses, often indicating that they had not thought much about the transition to parenthood or discussed it as a couple. Their narratives lacked detail and reflection, making it difficult to identify clear patterns or assign them to any of the other typologies. These couples appeared to be approaching the transition with a low level of anticipation or planning, whether by choice, disposition, or self-protection.

Wishes for practical and emotional support

In addition to expectations around cooperation, we examined how expectant parents anticipated their needs for support from their partners during the transition to parenthood. Each

participant's transcript was coded for mentions of practical and emotional support themes. Multiple mentions were counted only once per theme, and codes were aggregated at both the individual and dyadic levels. The distribution of themes across the five couple typologies is summarized in Supplemental Table S1. We then examined (a) the most frequently emphasized practical and emotional supports, (b) differences across the five categories, and (c) gender differences in support expectations. Across all categories, participants frequently emphasized the importance of dialogue, emotional support, availability, and understanding. These themes were often linked to the broader desire for mutual cooperation, even among couples with unequal expectations of caregiving roles. Notably, dialogue appeared in every category, reflecting its central role in how couples conceptualize support, regardless of their level of clarity or congruence. Themes such as intuition, patience, and positivity/tranquility were also noted across multiple groups, though with varying frequency.

Couples classified as Partners in Learning showed the highest number of distinct support themes, including the most mentions of dialogue (8), emotional support (6), practical support (5), and understanding (4). This reinforces their narrative emphasis on shared caregiving and reciprocity. This group was also the only one to include references to nonreprehension, teaching, and trust, indicating more diverse and reflective considerations of what supportive partnership entails. In contrast, the Ambiguous group showed the fewest overall themes, often with only one or two mentions per category. Their responses were typically vague or general, with limited articulation of specific needs. Still, the presence of dialogue, availability, and validation suggests that some core relational needs are recognized, even if not extensively elaborated upon. The Mentor–Mentee groups showed less variation in support themes. Among these, practical support appeared consistently, but emotional support was usually described as directed toward the mother, in line with the caregiving asymmetry described earlier. In both Mother-as-Mentor/Father-as-Mentee and Mother-as-Mentor/Father-as-Partner couples, themes like “only mother needs help” further illustrate a one-sided framing of support. In Mother-as-Partner/Father-as-Mentee couples, the themes of “personal time/to be left alone” and “understanding unavailability” appeared with some regularity. In these cases, some mothers expressed a wish for personal time or space during the postpartum period, whereas fathers more frequently referred to the possibility of being unavailable, particularly due to work-related demands. These patterns suggest that although mothers anticipated sharing caregiving responsibilities, they also acknowledged the potential need for time to themselves. Fathers, in turn, described circumstances that might limit their involvement and emphasized the importance of their partners understanding these constraints.

Furthermore, to examine gender differences in support expectations, we analyzed the frequency with which each theme was mentioned by expectant mothers and fathers. The number of individuals who mentioned each theme at least once is provided in Supplemental Table S2, illustrating potential gender differences in anticipated and prioritized support. The distribution of themes by gender highlights both shared and distinct patterns in how expectant mothers and fathers articulated their support needs. Although some expectations appeared across both groups, such as availability, dialogue, emotional support, patience, and understanding, the frequency and framing of these themes varied. Mothers more frequently emphasized the need for practical and emotional support, with 10 mentions of practical support and eight mentions of emotional support, compared to only one and four, respectively, among fathers. Mothers also placed greater emphasis on intuition (8), understanding (9), and positivity/tranquility (6), suggesting a focus not only on logistical help but also on maintaining emotional balance during the transition. Notably, mothers were the only ones to mention themes such as personal time, offers of personal time, initiative, and validation, possibly reflecting an anticipation of emotional labor and the desire for space or recognition in their caregiving roles. The theme concerns about postpartum depression also appeared exclusively among mothers (5), pointing to their greater awareness or concern about the recovery period following birth. Fathers, in contrast,

mentioned dialogue more frequently than mothers (10 vs. 5) and more often referred to the desire for continuity (9 vs. 1), suggesting a stronger hope that their life as a couple would remain stable after the baby's arrival. They also referenced themes such as active listening, teaching, and trust, and uniquely mentioned needing understanding about work-related unavailability (2), as well as the idea that "only the mother needs help" (6). These themes suggest that some fathers saw their role more in terms of supporting their partner or adapting around their work responsibilities, rather than expressing direct personal support needs. Overall, although both mothers and fathers valued emotional connection and open communication, the data suggest that mothers tended to anticipate more concrete and emotionally layered forms of support, whereas fathers more often expressed generalized or partner-directed forms of support, sometimes paired with expectations of reduced availability.

DISCUSSION

This study aimed to explore how expectant parents anticipate interparental cooperation and partner's support in the transition to parenthood. Using a qualitative dyadic approach, we interviewed third-trimester couples to examine how beliefs, gendered assumptions, and relational histories shape expectations for coparenting roles. By analyzing both individual perspectives and couples' (in)congruence, we identified five major patterns of anticipated interparental cooperation: Partners in Learning couples, Mentor–Mentee couples, Mother-as-Mentor/Father-as-Partner couples, Mother-as-Partner/Father-as-Mentee couples, and Ambiguous couples. Partners in Learning couples held congruent expectations about coparenting as a mutual learning experience in which both partners take an active role in caregiving. These couples emphasize teamwork, dialogue, and emotional support, aligning with evidence that mutual engagement and communication aid the transition. Prior studies have shown that coparental cooperation and partner support are associated with better relationship outcomes (Volling & Cabrera, 2025), and that relationship quality shapes how partners navigate the transition to parenthood and divide caregiving responsibilities (Hiekel & Ivanova, 2023; Martin et al., 2023). Longitudinal research has further demonstrated that supportive coparenting and father involvement can follow distinct yet interconnected trajectories, with each influencing the other during the transition to parenthood (Park et al., 2025). Mentor–Mentee couples, on the other hand, are characterized by the concordant perception that the mother holds more expertise, whereas the father assumes a supportive, learning role. This structure is consistent with recent evidence that, despite rising father involvement, mothers continue to perform most daily child care and unpaid care and comprise the majority of parental leave users in Europe (OECD, 2025a, 2025b). Perceived biological imperatives (e.g., breastfeeding) and leave structures were frequently cited. Institutional arrangements can scaffold gendered expectations (Nomaguchi & Milkie, 2020). Even when couples expect later rebalancing, gendered divisions often persist over time (Nomaguchi & Milkie, 2020).

The contrast between Partners in Learning and Mentor–Mentee couples is also evident in their support language. The former emphasize "helping each other" and "mutual adaptation," and the latter frame fathers as helping mothers, effectively recentring maternal primary care, patterns consistent with Europe-wide leave uptake and time-use indicators (OECD, 2023, 2025a, 2025b). Such patterns are not always deliberate preferences. They often emerge as adaptations to external constraints (e.g., income and job security, leave uptake dynamics, and entrenched social norms; Hiekel & Ivanova, 2023; Martin et al., 2023; Perales et al., 2018; Todd & Gigerenzer, 2003). From family-economics and bounded-rationality perspectives, postpartum specialization may appear efficient under postpartum constraints, yet can be linked to unequal allocations (Goldin et al., 2024; Perales et al., 2018).

A key challenge arises for incongruent couples, particularly those in which mothers anticipate taking on a mentor role while fathers expect an egalitarian partnership. These mismatched expectations introduce coparental dissonance, which may contribute to heightened stress and relational strain. Research suggests that gaps between anticipated and actual parenting roles can create psychological discomfort and prompt role renegotiation (Bogdan et al., 2022; Doherty et al., 2025; Roy et al., 2013). When partners hold conflicting gender-role attitudes, couples report lower relationship satisfaction and greater difficulty adjusting to parenthood (Goldberg & Perry-Jenkins, 2004; Hiekel & Ivanova, 2023; Martin et al., 2023). Maternal gatekeeping (i.e., beliefs/behaviors shaping fathers' involvement) may emerge in these contexts (Schoppe-Sullivan et al., 2008), potentially reinforcing asymmetry when mothers perceive greater competence. In couples where fathers express a desire for active involvement but are perceived by mothers as needing guidance or lacking competence, gatekeeping behaviors, intentional or not, may reinforce asymmetrical dynamics and limit opportunities for truly shared caregiving. This dynamic can exacerbate relational tensions, particularly when fathers feel excluded or when mothers experience an increased burden from maintaining primary responsibility. Conversely, the relative infrequency of incongruence in the opposite direction, where mothers expect equal sharing but fathers adopt a more passive, learning-oriented stance, suggests that many fathers, at least in principle, endorse egalitarian caregiving roles. This may reflect a broader shift away from traditional assumptions, with fewer fathers presuming that their partner will take sole or primary responsibility for child care. Although this trend points to increasing alignment with more egalitarian ideals, the actual implementation of shared parenting may still be shaped by other factors. For instance, differences in prior caregiving experience, perceived maternal expertise, or subtle, internalized beliefs about parenting competence may lead fathers to take a secondary role in practice, even when their stated intentions reflect equality. In other words, although many fathers aspire to equal caregiving, they may not always anticipate the challenges that arise in practice, such as initially deferring to their partner's greater familiarity with infant care. Meanwhile, mothers, even those who value equality, may expect to take on more responsibility due to their own prior caregiving experiences. Social pressure toward "involved fatherhood" can yield egalitarian rhetoric without concrete plans (Nomaguchi & Milkie, 2020). Postnatally, confidence and skill gaps can prompt default maternal responsibility, and dual-earner couples may retraditionalize divisions despite prenatal ideals (Yavorsky et al., 2015).

As for ambiguous patterns, they need not equal "low planning." Ambiguity can signal constrained agency (e.g., connected to limited resources, information, or supportive norms; Sen, 1999) and/or avoidance coping under pregnancy-specific anxiety (Guardino & Dunkel Schetter, 2014; Miller et al., 2024) alongside lower parenting self-efficacy (de Moor et al., 2023). These mechanisms can also co-occur—one can have limited capacity to plan and make decisions, due to context-specific limitations, and implement avoidance-coping strategies as a way to mitigate experienced anxiety. Future work should measure capabilities, coping, and self-efficacy to distinguish constraint- versus avoidance-driven ambiguity (Brunton et al., 2021).

The perception of motherhood as an inherently lonely experience, described by one participant partnered with an Ambiguous father, raises broader concerns about emotional isolation in the early parenting period. This narrative aligns with previous research showing that caregiving, particularly in its early stages, is often experienced as isolating, even in dual-income households. Loneliness can be common postpartum, linked to reduced social contact, identity shifts, and intensive mothering norms (Nowland et al., 2024), with mental-health costs (Adlington et al., 2023). Framing support needs as emotional and mental load (Daminger, 2019) clarifies why couples must share not only "doing" but also anticipating and monitoring in coparenting; asymmetries in this invisible work relate to strain and lower time quality (Craig & Brown, 2017).

Our findings further suggest that expectations for support during the transition to parenthood are shaped by gendered patterns, even among couples who express egalitarian ideals. Mothers in Partners in Learning most often articulated concrete practical support needs, consistent with findings that mothers remain primary coordinators even in shared arrangements (Nomaguchi & Milkie, 2020) and shoulder disproportionate coordination and time burdens (Craig & Brown, 2017; Daminger, 2019). By contrast, fathers frequently frame their role as supporting the mother (e.g., emotional encouragement or structural and around-the-edges help) rather than specifying direct caregiving tasks (Eddy & Fife, 2021). These patterns point to the importance of addressing not only role expectations but also the subtle ways in which caregiving identities are internalized and expressed. Fathers, especially those identifying as mentees, often positioned maternal support as the priority, deferring their own needs. Although this dynamic may serve as a temporary buffer for mothers in Mentor–Mentee couples, providing them with necessary support during the early postpartum period, it also carries the risk of reinforcing long-term inequalities in parental workload and emotional labor.

In terms of limitations, the sample for this study was recruited using a snowball sampling method, which, although effective for reaching expectant parents, may have led to a sample that is not fully representative of first-time parents in Portugal. Future studies could use stratified or random sampling. This study also focused exclusively on the Portuguese context, meaning that the findings are shaped by the country's specific sociocultural and policy framework. Self-report interviews may involve social desirability. Fathers, in particular, may have overreported their intention to participate equally in caregiving tasks, given the increasing social emphasis on involved fatherhood. At the same time, mothers' responses may also reflect social desirability biases, particularly those tied to the cultural ideal of good motherhood, which valorizes emotional centrality, self-sacrifice, and constant availability. As such, mothers might emphasize or accept caregiving primacy not only as a practical arrangement but as a reflection of internalized norms or moral expectations. Although conducting individual interviews minimized partner influence on participants' responses and allowed for the exploration of personal perspectives, this method also limited insight into how expectations are negotiated in real time. Future studies could complement interview data with observational methods to capture interactional dynamics. Finally, our sample skewed toward higher educational attainment and included many employed expectant mothers. Maternal employment is common in Portugal (OECD, 2023) and higher education in our sample may be associated with greater reflexivity. Endorsement of egalitarian roles is also widespread across the EU (European Commission, 2024), but the actual capacity to enact ideals can vary according to resources available (e.g., flexible work, leave, child care, social support). Future work should recruit across socioeconomic status or regions, differentiate endorsement versus feasibility, and follow couples from late pregnancy to 12–18 months postpartum to test whether (in)congruence, support, and coping predict divisions of labor, distress, and coparenting satisfaction (e.g., latent profile/transition or mixed-effects models).

CONCLUSION

Overall, our findings illustrate multiple pathways through which expectant parents prepare for and anticipate the coparental transition. These dynamics are shaped by individual belief systems, dyadic relational histories, and broader sociocultural expectations, reinforcing the need to examine coparental adaptation from a dyadic perspective (Van Egeren, 2004). Methodologically, dyadic approaches have been emphasized in relationship research (Eisikovits & Koren, 2010), highlighting the value of capturing both partners' perspectives when analyzing coparental experiences. Our study contributes to existing research by emphasizing the importance of considering both partners' expectations in understanding postnatal adjustment based

on prenatal expectations. Prior research suggests that coparental congruence, where partners share similar expectations about caregiving, can foster relational stability and psychological well-being postpartum (Van Egeren, 2004). Studies on the division of labor and coparental cooperation also highlight the benefits of clearly defined and mutually agreed-upon expectations for caregiving roles (Goldberg & Perry-Jenkins, 2004). Future interventions should help expectant parents articulate and negotiate these expectations, particularly in cases where implicit gendered norms may create hidden dissonances.

These findings further highlight that expectant couples organize their expectations for cooperation and support in distinct patterns, suggesting that interventions can be tailored to each configuration while emphasizing open communication. For couple therapists, a prenatal session can help partners articulate implicit assumptions, map convergences and divergences in expected caregiving, and translate shared values into concrete routines. A simple worksheet “What I expect/What you expect/What we will try/Backup plan” can make expectations visible and negotiable, preventing the accumulation of hidden resentments. Discussing both practical and emotional support needs is essential, given that mothers often articulate needs for reassurance and rest, whereas fathers emphasize dialogue and continuity in couple life. For prenatal educators and policymakers, these insights can inform structured modules and leave designs that promote genuine coparenting. Short expectation-setting exercises in prenatal classes and policies that guarantee protected, nontransferable second-parent leave can translate intentions of equality into daily practice. Because patterns of cooperation are already visible before birth, early dialogue and concrete planning can help couples move from ideals of shared parenting to sustainable, lived equality.

ACKNOWLEDGEMENT

Open access publication funding provided by FCT (b-on).

DATA AVAILABILITY STATEMENT

Research data are not shared.

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SUPPORTING INFORMATION

Additional supporting information can be found online in the Supporting Information section at the end of this article.

How to cite this article: Melim, B., Matias, M., Garraio, C., Walper, S., & Matos, P. M. (2026). Dyadic expectations of cooperation and support in the transition to parenthood. *Family Relations*, 1–19. <https://doi.org/10.1111/fare.70097>