

Original Article

Journaling as an occupational therapy resource for mothers of babies in the Neonatal Intensive Care Unit

Escrita em diário como um recurso terapêutico ocupacional junto às mães de bebês em Unidade de Terapia Intensiva Neonatal

Sarah Lionay Borges Lima^a , Lorena Azevedo Correia^a , Alice Santos Dias^a ,
Gabriela Alves Melo^a , Érika da Silva Dittz^a 

^aHospital Sofia Feldman - Belo Horizonte (MG), Brasil.

How to cite: Lima, S. L. B., Correia, L. A., Dias, A. S., Melo G. A. & Dittz, E. S. (2026). Journaling as an occupational therapy resource for mothers of babies in the Neonatal Intensive Care Unit. *Cadernos Brasileiros de Terapia Ocupacional*, 34, e3740. *Cadernos Brasileiros de Terapia Ocupacional*, volume, elocation. <https://doi.org/10.1590/2526-8910.cto288037402>

Abstract

Introduction: The birth of a newborn requiring hospitalization in a Neonatal Intensive Care Unit (NICU) generates feelings of uncertainty, insecurity, and helplessness in families, in addition to changes in their daily lives and routines. The occupational therapist provides support to the mother and family during the baby's hospitalization and can use writing as an intervention resource, which has been recommended to support coping with the hospitalization of newborns.

Objective: To investigate the use of diary writing as a resource in the occupational therapy support of mothers of babies hospitalized in the NICU. **Method:** A qualitative, descriptive study was conducted in a philanthropic hospital specializing in women's and children's care in Belo Horizonte, Minas Gerais. Eleven mothers of newborns hospitalized in the NICU participated. Data were collected through semi-structured interviews and subjected to thematic content analysis. **Results:** The following empirical categories were identified: "Mother's motivations for diary writing"; "Mother's use of a diary as a means of expressing feelings and reflections" and "The maternal daily life expressed in diaries." **Conclusion:** Writing in a diary helped mothers cope with situations during their baby's hospitalization, allowing them to record memories and process feelings, as well as reorganize their new daily routine.

Keywords: Occupational Therapy, Neonatal Intensive Care Units, Mothers, Qualitative research.

Received on Jan. 9, 2024; 1st Revision on Aug. 30, 2025; Accepted on Feb. 20, 2026.



This is an Open Access article distributed under the terms of the Creative Commons Attribution license (<https://creativecommons.org/licenses/by/4.0/>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Resumo

Introdução: O nascimento de um recém-nascido, com necessidade de internação em uma Unidade de Terapia Intensiva Neonatal (UTIN), gera sentimentos de incerteza, insegurança e impotência nas famílias, além de alterações no cotidiano e na rotina delas. O terapeuta ocupacional realiza o acompanhamento da mãe e da família durante a internação do bebê e pode utilizar a escrita como um recurso de intervenção, que tem sido recomendada para apoiar o enfrentamento da internação de recém-nascidos. **Objetivo:** Investigar a utilização da escrita em diário como recurso no acompanhamento terapêutico ocupacional das mães de bebês internados na UTIN. **Método:** Pesquisa de abordagem qualitativa, do tipo descritiva, realizada em um Hospital Filantrópico especializado na atenção à mulher e criança de Belo Horizonte, Minas Gerais. Participaram 11 mães de recém-nascidos internados na UTIN. Os dados foram coletados por meio de entrevista semiestruturada e submetidos à análise de conteúdo, modalidade temática. **Resultados:** Foram evidenciadas as seguintes categorias empíricas: “Motivações da mãe para a escrita em diário”; “Uso do diário pela mãe como um meio para expressão de sentimentos e reflexões” e “O cotidiano materno expresso nos diários”. **Conclusão:** A escrita em diário favoreceu às mães no processo de enfrentamento das situações no processo de internação do bebê, para o registro de memórias e elaboração de sentimentos, bem como reorganização de seu novo cotidiano.

Palavras-chave: Terapia Ocupacional, Unidades de Terapia Intensiva Neonatal, Mães, Pesquisa Qualitativa.

INTRODUCTION

The birth of a newborn who requires hospitalization in a Neonatal Intensive Care Unit (NICU) is considered a situation that leads members of the family group to deal with feelings such as uncertainty, insecurity, and helplessness, which may result in anxiety, stress, and depression (Jouybari et al., 2018). Added to the emotional aspects related to the newborn's clinical conditions and the fear of losing them, there are also changes in the mother's daily life, in family routines, and in the roles performed by each of its members (Zanfolim et al., 2018).

In the NICU context, mothers may have difficulty creating an emotional bond with the newborn due to the baby's clinical condition and the highly specialized care demanded by them. As a consequence, they may feel incapable of caring for the child, indicating the need for the team assisting the baby to be sensitive in developing actions aimed at favoring the bonding process between mother and baby (Dittz & Rocha, 2018). Offering emotional support to the mother/family, encouraging the presence of family members in the NICU, providing information about the child's clinical conditions, and including the mother in the baby's care may be strategies adopted in this process (Correia et al., 2019; Zanfolim et al., 2018).

Occupational therapy is one of the professions that monitors the mother and family during the newborn's hospitalization in the NICU through their involvement in meaningful occupations. In this way, the aim is to: create and strengthen the bond between the mother-child dyad; assist in adapting to the hospital routine; encourage the mother to look at the newborn's potential in order to understand their needs and the possibilities of assisting in their development (Dittz & Rocha, 2018).

In monitoring the mother of a newborn hospitalized in the NICU, the occupational therapist seeks to develop strategies to offer emotional support and coping with stress and anxiety. For this purpose, resources such as group sessions are used, which have enabled interaction among mothers experiencing a similar situation and the creation of bonds among them. Thus, promoting an expansion of their support network and contributing to dealing with the situations experienced during the baby's hospitalization process in the NICU (Correia et al., 2019; Duarte et al., 2013).

The use of writing as a resource to support coping with the hospitalization of a newborn in the NICU has been recommended as a way for the mother to express her feelings and seek answers to her most intimate questions and concerns (Macnab et al., 1998). In a study conducted with the objective of understanding the meaning of the baby's diary for mothers of premature newborns, it was found that this is a way for them to feel closer to their child and to be active participants in the recovery process and in the daily care routine. Diary writing proved to be a source of encouragement and support for mothers during the hospitalization process. It is noteworthy that the content recorded in the diary enables the family to access information about the newborn, which favors their recognition by family members, in addition to being a record of this family's history (Leite et al., 2016).

Another study aimed to investigate how expressive writing helps mothers during the hospitalization of premature infants and demonstrated that it makes it possible to mitigate depression and anxiety in mothers who accompany their children during prolonged periods of hospitalization. For the mothers participating in the study, the intervention was useful and made them feel satisfied with the result (Horsch et al., 2016). The use of narrative writing as a method for reducing stress in mothers with children hospitalized in the NICU showed that the use of writing favors the sharing of emotions and reflections about the feelings aroused. This allows the mother to be an active participant in the process of self-knowledge and coping with the situation (Tavasoli et al., 2020).

A point to be highlighted was the perception that writing favors interaction between mothers and the health team, since, by expressing their doubts, they promote understanding of their needs and improve communication between the team and the family (Leite et al., 2016; Tavasoli et al., 2020). Furthermore, by writing about her routine and the newborn, the mother contributes to recording unique memories of the experienced moment and to consolidating knowledge about the newborn, resulting in greater confidence for care at home after the possible discharge of the newborn (Leite et al., 2016).

Given the above, it is believed that diary writing by the mother of a baby hospitalized in the NICU may enable a process of resignification of events, seeking, in an individual and unique way, the strengthening and discovery of new potentialities. In this way, being part of the personal growth and maturation of this mother.

Considering that writing is an easily accessible resource that can be used by women according to their routines, it is necessary to understand its contributions as a resource to be used by mothers to deal with the stress and anxiety inherent to the situation of having a baby hospitalized in the NICU (Horsch et al., 2016; Tavasoli et al., 2020). From this perspective, this study aimed to investigate the use of diary writing as a resource in occupational therapy follow-up with mothers of babies hospitalized in a Neonatal Intensive Care Unit.

METHOD

This is a qualitative study conducted in a philanthropic institution located in Belo Horizonte, Minas Gerais, specialized in maternal and child care and that exclusively serves users of the Unified Health System (SUS). The institution has a total of 250 beds, of which 50 are NICU beds. Among the hospital beds, the institution ensures conditions for mothers to remain full time accompanying the newborn's hospitalization in the NICU.

Eleven mothers of newborns hospitalized in the NICU participated in this study, including only those over 18 years of age and literate. Women with alcohol and illicit drug abuse, psychological disorders, cognitive impairments, and emotional instability reported in the medical record were excluded. It should be clarified that the literacy criterion was considered even if the participant did not previously have the habit or preference for writing. It was taken into account that participation in the research could enable them to discover new interests and develop other skills.

For data collection, the semi-structured interview was used, guided by a script so that the research objective could be achieved (Minayo et al., 2002).

The study was divided into four stages. STAGE 1 consisted of the search carried out by the researcher, in a daily census listing the NICU hospitalizations, followed by research in medical records to identify mothers who met the inclusion criteria for the study. After identifying the mothers and carrying out the process of obtaining informed consent, STAGE 2 consisted of delivering the field diary. At this moment, the diary was personalized by the mothers using collage, drawing, and painting. In addition to delivering the lined paperback notebook with the guidance: "This notebook is for you to record your thoughts, ideas, events, and anything else you wish related to your experience of having a baby hospitalized in the NICU", three pens of different colors were also delivered to be used by the mothers. This stage was carried out individually or in groups, depending on the number of participants identified in the search, always conducted by the researcher and in an environment that ensured the privacy and anonymity of the participants. STAGE 3 consisted of a meeting between the researcher and the mothers, two to three days after receiving the diary, to clarify doubts and learn about how the process of diary recording had been.

STAGE 4 concerns the individual interview with the participants. When identifying that the newborn would be discharged from the NICU, during the daily shift handover, the researcher conducted the semi-structured interview guided by the following questions: "How was it for you to write in the diary during your baby's hospitalization in the NICU?"; "Did you have the habit of making written records previously?"; "What events did you seek to record in your diary?"; "What do you intend to do with this diary after your baby is discharged from the NICU?"; "Would you recommend the use of the diary for mothers in this situation? Why?". After the interview, the diaries were collected for digitization by the researcher and returned to the mothers.

In addition, data were collected that allowed the characterization of the study participants, such as occupation, age, level of education and parity of the mother, and the gestational age of the newborn. This information was obtained through consultation of the babies' medical records and validated during an interview with the mother.

Data collection was carried out from January to August 2022, after approval from the institution and approval by the Research Ethics Committee of Hospital Sofia Feldman, Opinion No. 5.003.432, meeting the determinations of Resolution No.

466/2012 and No. 510/2016. The participants were informed of the objective of the study and all signed the Free and Informed Consent Form. The interview was recorded and conducted in a safe location, ensuring privacy and confidentiality, and at a time chosen by the participant, so as not to compromise her participation in the care of the newborn or interfere with her daily routine. To preserve the anonymity of the mothers, the codes “M” followed by the order of participation in the study were used, up to the 11th participant (M1; M2; M3; ... M10; M11). The interruption of data collection occurred when saturation was verified, understood here as the repetition of information that enables the response to the research objective (Thiry-Cherques, 2016).

The data obtained in the interview of each participant were transcribed in full, organized in a Word file and submitted to content analysis in the thematic modality. A floating reading was carried out, followed by a detailed reading of the transcribed interviews, to enable the grouping of statements by thematic similarity, giving rise to the empirical categories.

In the development of this study, efforts were made to meet the criteria of credibility and reliability (Lincoln & Guba, 1985). Credibility was established through peer discussion, when two researchers shared their impressions about the interview data, expanding the understanding of the studied phenomenon and contributing to the data analysis process. For reliability, a detailed description of the entire research process was carried out, including the definition of participants, the stages of data collection, and the data analysis process.

RESULTS

Eleven women, aged between 21 and 39 years (mean age 29 years), participated in the study, and all met the inclusion criteria. Most of the mothers who agreed to participate were in a unit for women accompanying their baby during their hospital stay; except for one who was in the clinical care ward. Regarding the babies, the gestational age ranged from 25 to 38 weeks and 4 days, as shown in Table 1.

Table 1. Sociodemographic spreadsheet.

	Age (years)	Parity*	Education	Mother's occupation	Gestational age of the baby (weeks + days)
M1	21	G5 P3 A2	Completed Elementary Education	Housewife	38 + 4
M2	31	G3 P1 A2	Completed High School	Secretary	34 + 2
M3	31	G3 P3 A0	Incomplete Elementary Education	Shoemaking	34 + 5
M4	31	G1 P1 A0	Completed High School	Self-employed (Sales)	33 + 3
M5	28	G3 P3 A0	Completed High School	Housewife	29 + 2
M6	39	G1 P1 A0	Completed High School	Dressmaker	27 + 5
M7	38	G7 P5 A2	Incomplete High School Education	Self-employed (Pastry Chef)	37 + 3
M8	24	G2 P2 A0	Incomplete Elementary Education	Housewife	28
M9	23	G2 P2 A0	Completed High School	Housewife	28
M10	29	G4 P3 A1	Completed High School	Housewife	29 + 4
M11	31	G1 P1 A0	Completed High School	Nursing technician	25

*G =gestation; P = parturitions; A = abortion.

The analysis of the data collected through the interviews allowed for the configuration of three categories: “Mother’s motivations for writing in a diary”; “Mother’s use of the diary as a means of expressing feelings and reflections”; and “The maternal daily life expressed in the diaries.”

The category “Mother’s motivations for diary writing” encompasses aspects related to the motivations and desires to write, and what the writing process awakened in them. In other words, how the resource contributed to the elaboration and coping with the baby’s hospitalization process:

(...) everything we feel, we put out there, and it becomes much more detailed in the written notebook than when we speak. (M2)

The accounts also highlighted the practice of diary writing as a way to record the baby’s life story, creating concrete materials related to the period of hospitalization so that, in the future, it could be remembered together with their children.

Yes, because the diary is like the book of a life story, like a little chest to keep a story in. (...) When I was feeling down, and even when I had good news about him [the baby], it was a way to vent and so that when he grows up, he will know his story. (M3)

Rereading, you know, the events, remembering, you know, because it’s a different experience. I’ve never been hospitalized in my life. Not even when I was born at 32 weeks was I hospitalized. (M9)

Furthermore, the testimonies revealed a desire to continue documenting the baby’s life story, even after hospitalization:

I want to keep writing! Even when I go home and come back. When he [the baby] is older, I want to show it to him. (M7)

Ah! I’ll keep it safe, I’ll write some things down here too, when she [the baby] grows up I’ll show her. And that’s it. (M8)

The category “Mother’s use of a diary as a means of expressing feelings and reflections” addresses the feelings expressed by mothers as a result of their experiences having a baby in the NICU. Through writing, the women reveal emotions and feelings emerging from the hospitalization process:

For me it’s like a comfort, where you can vent everything that comes to your mind and you put it down, and it gives you a kind of relief, how many times I was kind of like that... I wrote and vented. It gave me relief. (M7)

Ah, it was very good, it helps to de-stress, we can keep our emotions quiet here. (...) (M8)

The participants revealed that journaling allowed them to express their anxieties, clear their minds, and organize their thoughts. They also reported a feeling of relief from journaling, as if they were conversing with another person.

Ah! It was good, because it was a relief. It helped me organize my thoughts, vent a little. It was good! (M5)

(...) it was good, it was a way to vent a little. Because there are things that we can't talk about with other people, and we don't have family nearby, so yes, it was very good. (M9)

And sometimes the notebook [diary] is better than talking to someone else. Sometimes you don't want to show what's happening with your baby, sometimes you and each child has their own development and you don't want to tell anyone, so the notebook [diary] is very important. (M11)

According to reports, journaling helped mothers have a way to record their daily experiences, as well as contributing to a better understanding of the situations they experienced during their children's hospitalization. This process of reflection contributed to maternal learning, since the women were able to gain a different understanding of how to deal with certain situations.

It was a way to report what was happening, not only with the baby, but our daily lives. (M9)

And it's a way to understand yourself, because you write today and tomorrow you can read, "Oh! This, this, and this happened, but I could have acted differently, done things differently, thought differently, not despaired." (M10)

Ah! It was great because I managed to write down everything that happened to her in 67 days in the NICU. (M11)

The accounts also showed how essential the support network was during this phase of the women's lives. And as a support network, they didn't just bring in family, friends, or staff. Many saw the diary as the source of comfort they needed at that moment. Furthermore, knowing that the baby needed them was an incentive not to give up and to continue.

Because I met many mothers who were going through the same thing and didn't have the courage to talk to a psychologist, they didn't have the courage to speak up, and when I talked to them about simple things, and there are things that can be avoided, like postpartum depression, it helps. When your family is supporting you, when your partner is supporting you, the process ends up becoming easier. You feel like giving up everything, but when you see a little person needing you, you can keep going. (M4)

So, it's very difficult being here, away from family, you know. But sometimes it was good, because sometimes the family doesn't give as much support, ends up saying things that hurt, that didn't need to be said, and that's it. (M9)

Furthermore, some women expressed a desire to encourage other mothers to use the diary as a coping tool during the hospitalization process.

I would recommend it, because just like when I was staying in the room, I did what I had to do with him [the baby] and then went back to the room and stayed

there. The day never ends in the hospital. But at home, time passes faster. I would recommend it because time passes faster. (M1)

I recommend it, I even recommended [the diary] when I was there in the [unit for mothers]. I told the woman to look for her [occupational therapist] because I saw her writing in a little notebook she had brought. (M5)

The category “The maternal daily life expressed in diaries” portrays situations and patterns experienced by mothers in their daily hospital routine. That is, it refers to activities that make up their routine as mothers of babies hospitalized in the NICU and situations related to the institution’s operating rules, which may influence and/or structure the maternal daily life in this environment.

No, I’m not much of a writer. So much so that sometimes I stop and think, “Wow, I picked up my notebook and haven’t written anything yet...” but it’s mostly because of all this rushing around. Just yesterday, I was recording an audio message to my aunt, and she said, “Oh! But we haven’t spoken today.” And I said, “Auntie, in here I wake up, I get up, brush my teeth, and go straight down to the NICU. I stay there, feed her, and if she’s awake, I don’t leave until she falls asleep and calms down. Sometimes I’d go into the NICU and stay for an hour or an hour and a half, waiting for her to calm down. Then I’d go upstairs, have breakfast, then go back to the NICU, then back upstairs. While I was upstairs, I’d give her father updates, and then I’d go back down to the NICU. That’s besides the times I’d go to pump breast milk. For the past few days, I haven’t been going because I’m not producing enough milk, so it’s been very hectic. Then I started picking her up every day. I go there at 1:40 PM, and they take her from me at 5:30 PM. They take her from me at 5:30 PM, but I leave at 6:30/6:40 PM, because I wait for the 6:00 PM milk to come, I wait to see her changing clothes, I wait for her to calm down, it’s very rushed. And when I stop, it’s already night. So much happens that we end up missing things. (M8)

In their diaries, the mothers expressed changes in their daily lives that began during pregnancy, continued through childbirth, and extended throughout the baby’s stay in the Neonatal Intensive Care Unit:

But what happened on the day he was born, but I still want to write from when I found out I was pregnant, because those eight months were quite complicated, but it was calm, except when I found out I had pre-eclampsia, which started to get difficult. (M4)

(...) From the day I had the ultrasound in [Governador] Valadares and found out that the amniotic fluid had decreased, I wrote that I had gone to the specialized high-risk pregnancy center, then I wrote about the ultrasound I had, I had a consultation on June 20th, I wrote here that I was hospitalized on the 1st, things from then until now. (...) Of course, day by day, there’s no way around it, there’s no way I can put 47 days here [in the diary], because, what kind of head would I have? Because to write every day correctly, it won’t be possible. (M8)

According to reports, the participants highlighted how significant writing was within the current context of their lives. It served both as a space for recording and for expressing

feelings understood as something very unique. Considering their particularities, these emotions were sometimes difficult for others to share and understand.

Writing about moments that happened with him [the baby], from the beginning of his life and our waiting. (M1)

Certainly, as I said, there's no way we can talk to other people, because sometimes the situation you're going through isn't the same as mine, it can be worse or better, so in the end nobody understands anyone. (M9)

Yes, very much... I think it's important, because I think not everyone has the courage to sometimes say what you're feeling (...) Everything that happened with her [daughter] and the news the doctors gave. (M11)

DISCUSSION

It is known that, in the context of hospitalization, mothers will have to re-signify their experiences, seek resources and meaning for their lives beyond the current moment of difficulty, and find new paths for the construction of subjectivity, their interests and their relationships (Matsukura & Salles, 2016). Occupational therapy practices, from a critical perspective, aim at welcoming, listening, dialogue, social and network articulation, and the joint construction of therapeutic projects with people who demand and/or need care and support for social participation and quality of life. Thus, actions in occupational therapy, aiming at the construction and transformation of everyday life, can contribute significantly, since the interventions consider and address the subject's engagement in understanding and transforming their processes (Galheigo, 2020). This, in turn, is fundamental for effective and quality care, since, according to Hagedorn (1999), processes of change only occur if they have active participation and are meaningful to the subject.

Some studies seek to report the recording of the life history of this baby and family, essential to assist in the preservation and recollection of experienced moments, which tend to be forgotten over time. In the reports cited in the results, the mothers explained the practice of diary writing as a way of leaving the life history of their babies recorded, in view of the desire that these children, in the future, become aware of this dedication. Creating concrete materials related to the period of hospitalization so that they could later be remembered together with their children. Thus, the diary becomes a true memorial and a valuable memory both for the family and for the babies. In addition, they expressed that the use of this resource contributed to coping with and elaborating the different feelings that arise during the hospitalization experience (Aires et al., 2022; Leite et al., 2016).

The reports also showed how diary writing contributed for mothers to have a resource to record their day-to-day experiences, express their concerns and feelings, as well as ventilate and organize their thoughts. The act of writing, according to the participants, contributed to a feeling of relief, as if they were talking to another person. According to Leite et al. (2016), this practice allows reflections on the lived process, welcomes the feelings that arise and promotes moments of greater security in coping with the hospitalization process, contributing to greater bonding between mother and baby.

In the puerperal period, the woman goes through a deconstruction of her identity and the reconstruction of a new “self”. This process often causes internal conflicts about her desires, anxieties and questions. The presence of a support network allows a better experience of this moment, providing greater functionality for the woman (Alves et al., 2022). The relationship with the support network was another point perceived in the interviews. Many of them saw the diary as the source of welcoming that they needed at that moment. For them, the diary assumed the role of an intimate confidant, since it provided a safe space to express feelings and emotions that may not be understood by those who have not gone through the experience of having babies hospitalized (Aires et al., 2022; Veronez et al., 2017).

Thinking about the therapeutic resource for individual follow-up, diary writing acts as a tool that facilitates or mediates the transformation of the individual within their everyday life. According to Galheigo (2020), everyday life can be defined as a space-time in which the subject, immediately and consciously or not, makes decisions, faces challenges, has access to opportunities and resources, creates mechanisms of resistance, assumes new ways of doing, being, and living. That is, everyday life is where the concrete construction of reality occurs. In this context, the use of the diary writing resource can be fundamental in the transformation of this woman and her routine, thus contributing to the re-signification of her occupational role (Leite et al., 2016).

The mothers expressed in the diary that changes in everyday life began well before childbirth, still during prenatal care, and extended after the birth of their children, during the babies’ hospitalization in the NICU. According to Salles & Matsukura (2013), the hospitalization process generates changes in the routine of its main caregivers. And in the case of babies hospitalized in the NICU, whether premature newborns or full-term, this rupture occurs in the everyday life of mothers (Salles & Matsukura, 2013).

In this sense, activities previously performed by them may no longer be part of the routine, in addition to varying in necessity and importance. This combination of new factors triggers what Heller (2000) named as the hierarchization of everyday life. That is, what was significant in the everyday life of these women becomes secondary in order to prioritize other choices. Their activities of daily living, such as brushing their teeth in the morning and eating, are now accompanied by moments of breast milk extraction and visits to the NICU, for example.

In addition, the use of the diary as a therapeutic resource was seen in a positive way by the mothers. In the reports, they evidenced the desire to continue recording the baby’s life history, even after hospital discharge. Some even stated that they would recommend the resource to other women in the same situation, as a way of helping them cope with the hospitalization process.

One of the limitations of this study is the fact of having a heterogeneous group of participants. Although they have the baby’s hospitalization in the NICU as a situation in common, the participants are mothers of babies with different gestational ages, lengths of hospitalization and diagnoses. This plurality favors the occurrence of conflicts of perspectives, dispersion of the main focus and superficial analysis of the results (Trad, 2009).

FINAL CONSIDERATIONS

Based on what was presented in this study, it is possible to perceive that diary writing favors the process of mothers’ self-knowledge for coping with the situations experienced

during the period of hospitalization of their babies. In addition to being an easily accessible resource, simple, low cost, practical, and adaptable to the hospital routine.

Considering the context of hospitalization as a critical and vulnerable period for the family and, above all, for the mothers, writing allows them to rewrite their stories and recreate their everyday lives, with the present changes and challenges. It also enables them to leave recorded memories, feelings, and events that may be valuable for coping with the experienced situation and for future moments.

Although the existing literature related to diary writing focuses on mothers of premature babies hospitalized in the NICU, it was found that the hospitalization of a newborn generates impacts on the mother's everyday life, regardless of gestational age at birth. In both situations, the mother needs to adapt to a new dynamic, determined by institutional routines and rules, in addition to the emotional aspects inherent to this situation. By making use of the diary writing resource, the mother, based on her memories, experiences, dreams, and expectations, finds possible support strategies in the difficult situation experienced.

It is necessary to further deepen the understanding of the use of diary writing as a tool in occupational therapy follow-up with mothers of babies hospitalized in the NICU, considering its possibilities of use in the composition of individualized therapeutic projects. Thus, providing better care, as well as offering possibilities for greater quality of life to these women.

REFERENCES

- Aires, J. F., Tallamini, E. C. Z., & Fraporti, J. D. (2022). "Amor Diário": um recurso terapêutico no contexto da prematuridade e na construção da parentalidade. *Revista da Sociedade Brasileira de Psicologia Hospitalar*, 25(2), 108-122.
- Alves, A. B., Pereira, T. R. C., Aveiro, M. C., & Cockell, F. F. (2022). Functioning and support networks during postpartum. *Revista Brasileira de Saúde Materno Infantil*, 22(3), 667-673.
- Correia, L. A., Rocha, L. L. B., & Dittz, É. da S. (2019). Contribuições do grupo de terapia ocupacional no nível de ansiedade das mães com recém-nascidos prematuros internados nas unidades de terapia intensiva neonatal. *Cadernos Brasileiros de Terapia Ocupacional*, 27(3), 574-583.
- Dittz, E. S., & Rocha, L. L. B. (2018). Terapia Ocupacional em unidades de terapia intensiva neonatal. In M. M. R. P. De Carlo & A. M. Kudo (Orgs.), *Terapia ocupacional em contextos hospitalares e cuidados paliativos* (pp. 311-328). São Paulo: Payá Eireli.
- Duarte, D. E., Dittz, E. S., Silva, C. N. B., & Rocha, L. B. L. (2013). Grupos de apoio às mães de recém-nascidos internados em unidade neonatal. *Revirene*, 14(3), 630-638.
- Galheigo, S. M. (2020). Terapia ocupacional, cotidiano e a tessitura da vida: aportes teórico-conceituais para a construção de perspectivas críticas e emancipatórias. *Cadernos Brasileiros de Terapia Ocupacional*, 28(1), 5-25.
- Hagedorn, R. (1999). *Fundamentos da prática em terapia ocupacional*. Rio de Janeiro: Dynamis Editorial.
- Heller, A. (2000). *O cotidiano e a história*. Rio de Janeiro: Paz e Terra.
- Horsch, A., Tolsa, J. F., Gilbert, L., Chêne, L. J. d., Müller-Nix, C., & Graz, M. B. (2016). Improving maternal mental health following preterm birth using an expressive writing intervention: a randomized controlled trial. *Child Psychiatry and Human Development*, 47, 780-790.
- Jouybari, L., Abbariki, E., Jebeli, M., Mehravar, F., Asadi, L., Akbari, N., Sanagoo, A., & Moradi, Z. (2018). Comparison of the effect of narrative writing and art therapy on maternal stress in neonatal intensive care settings. *The Journal of Maternal-Fetal & Neonatal Medicine*, 33(4), 664-670.

- Leite, C. C. de P., Souza, S. N. D. H., Rossetto, E. G., Pegoraro, L. G. de O., & Jacinto, V. C. B. (2016). O Diário do Bebê para a mãe de prematuro: apoiando o cuidado centrado na família. *Revista Enfermagem UERJ*, 24(1), 1-6.
- Lincoln, Y. S., & Guba, E. G. (1985). *Naturalistic inquiry*. Thousand Oaks: Sage Publications.
- Macnab, A. J., Beckett, L. Y., Park, C. C., & Sheckter, L. (1998). Journal writing as a social support strategy for parents of premature infants: a pilot study. *Patient Education and Counseling*, 33(2), 149-159.
- Matsukura, T., & Salles, M. M. (2016). *Cotidiano, atividade humana e ocupação*. São Carlos: EdUFSCar.
- Mínayo, M. C. S., Deslandes, S. F., Cruz Neto, O., & Gomes, R. (2002). *Pesquisa social: teoria, método e criatividade* (27. ed.). Petrópolis: Editora Vozes.
- Salles, M. M., & Matsukura, T. S. (2013). Estudo de revisão sistemática sobre o uso do conceito de cotidiano no campo da terapia ocupacional no Brasil. *Cadernos Brasileiros de Terapia Ocupacional*, 21(2), 265-273.
- Tavasoli, A., Akhoundzadeh, G., & Hojjati, H. (2020). The effect of narrative writing of mothers on their stress with care in the Neonatal Intensive Care Unit. *Complementary Medicine Journal*, 10(3), 196-205.
- Thiry-Cherques, R. H. (2016). Saturação em pesquisa qualitativa: estimativa empírica de dimensionamento. *Revista Brasileira de Pesquisas de Marketing, Opinião e Mídia*, 4(8), 20-27.
- Trad, L. A. B. (2009). Grupos focais: conceitos, procedimentos e reflexões baseadas em experiências com o uso da técnica em pesquisas de saúde. *Physis*, 19(3), 777-796.
- Veronez, M., Borghesan, N. A. B., Corrêa, D. A. M., & Higarashi, I. H. (2017). Vivência de mães de bebês prematuros do nascimento a alta: notas de diários de campo. *Revista Gaúcha de Enfermagem*, 38(2), 1-8.
- Zanfolim, L. C., Cerchiari, E. A. N., & Ganassin, F. M. H. (2018). Dificuldades vivenciadas pelas mães na hospitalização de seus bebês em unidades neonatais. *Psicologia (Conselho Federal de Psicologia)*, 38(1), 22-35.

Author's Contributions

All authors contributed equally to the conception of the article and approved its final version.

Data Availability

The data supporting the results of this study are available from the corresponding author upon request.

Corresponding author

Lorena Azevedo Correia
e-mail: lorenaazevedo744@gmail.com

Section editor

Prof. Dra. Regina Helena Vitale Torkomian Joaquim