The influence of fathers on children’s mental health

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‘Recent research shows fathers are now as important to the mental health of babies as the mother. The prevalence of depression and anxiety in fathers during the postnatal period is significant and the children of fathers experiencing mental health issues face an increased risk of adverse emotional and behavioural outcomes, independent of maternal mental health. Most importantly fathers can protect children from the consequence of maternal mental health problems’

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The idea that fathers can have a key influence on a child’s emotional and behavioural development may seem obvious to many, but it has taken many decades of research to provide the scientific evidence to overturn socially accepted dogma. Even today, the idea is not necessarily reflected in the work that practitioners do with parents and infants. However, as delegates heard at the recent Association of Infant Mental Health (AIMH) annual conference, evidence to support the significant role of fathers is now coming from a range of studies and is underpinning new interventions aimed at supporting positive parenting.

**Key Speaker** Paul Ramchandani, Professor of Child and Adolescent Mental Health at Imperial College London, gave historical background on the role of the father, which continues to shift even today. He quoted John Bowlby who in 1953 saw the role of the father as ‘providing for and supporting the mother to enable her to devote herself, without restriction, to care for the infant’. Bowlby later believed that fathers play a more direct role and provided an alternative attachment figure, according to Ramchandani.

Ranchandani talked about the Overton Window, originally a political concept, which frames the acceptability of public discourse around a new idea, ranging from being ‘unthinkable’ to ‘popular’. In the case of the role of fathers, the shifting of the frame over time has permitted discussion and research on the topic. Moving onto current research, Ramchandani summarised the results of studies in three key areas:

**Father involvement and interaction and child outcomes**

- A father’s involvement and engagement results in a range of positive outcomes for the child, including reduced behaviour problems, reduced psychological problems and increased cognitive outcomes.
- Fathers engage with children differently from mothers; a high percentage of the engagement is play time and physical activity.
- A father’s increased involvement with the child is associated with a range of positive outcomes for the child: fewer behavioural issues, fewer psychological issues and enhanced cognitive development.
- Studies suggesting that father-infant relationships are affected by the father’s gender preference for sons are questionable, according to Ramchandani, and more research is needed.
- The influence of father-child interactions means that interventions to promote positive parenting by fathers, and policies aimed at encouraging fathers to spend more time with their young children, have significant potential.
- A father’s ability to perceive and understand their baby’s signals (paternal sensitivity) may have a greater effect than maternal sensitivity on cognitive development at 18 months and language development at 36 months.

Even with these advances in understanding the influence of the father on child development, Ramchandani admitted that there is still a lot of work to do to clarify what, how and where are the most important aspects of the father-child interaction.
Depression and anxiety in fathers

One father in every 20 suffers from depression in the perinatal period, which may also significantly affect the developing infant. Ramchandani referred to a recent study by Darwin and colleagues demonstrating how depression in fathers at eight weeks post birth, can particularly affect behavioural outcomes at 3.5 years of age. Similarly, Ramchandani’s own work shows that postnatal depression in fathers is associated with adverse emotional and behavioural outcomes in children aged 3.5 years and an increased risk of conduct problems in boys.

Overall, depressed fathers are less involved and less engaged with their children, and have a higher risk of conflict in the couple relationship, which is often overlooked scientifically, according to Ramchandani. It means that men are in need of support: they struggle with the transition to fatherhood, with defining their role as partner and father, with returning to work and all of life’s ‘normal’ stresses. However, there are few outlets for fathers to verbalise their stress and learn to manage it. This makes it all the more important that the couple relationship, so vital for positive child outcomes, should be protected.

Practitioners could do more to involve fathers

There is a lack of involvement of fathers in parenting programmes despite studies showing that involvement of both fathers and mothers improves the outcome for the child. This is where some practical adjustments could make a difference. Often, practitioners don’t bother to involve fathers; classes and sessions are held during a working day, and fathers are not invited to participate. Ramchandani pointed to studies suggesting that practitioners should adapt to engage fathers by amending locations and timing of sessions; specifically focusing on and including fathers from the start. They should also aim to improve ‘fathering’ skills, help fathers become better fathers, not make them more like a mother or improve their ‘mothering’ skills.

Practical tips for all practitioners include:

• Openly invite the father to come along
• Ask the mother about the father
• Write to the father
• Leave your contact details for the father
• Reflect on your own family experience
• Use materials that include pictures of fathers and infants not just mothers and infants.

Support for dads

The importance of fathers having the opportunity to interact with their babies was highlighted by Richard Fletcher, Associate Professor, University of Newcastle, New South Wales.

Author of ‘The Dad Factor: How the father-baby bond helps a child for life’, Fletcher has conducted research with fathers for over 20 years and believes that if fathers or partners are important then they should be involved with their babies. He stressed that fathers want to be involved but may not have time, might not be familiar with the health service or invited to be involved with pregnancy care.
Fletcher outlined a pilot Australian initiative called **SMS4dads** that aims to engage and inform fathers about the benefits of parent-child interaction, postnatal depression, how attachment works and ‘the couple effect’ on the developing child.

SMS4Dads is not an App requiring the user to login, it is a phone-optimised website that sends regular automated texts to registered fathers on their mobile phones. These give information and tips that are keyed to their baby’s development and support the father to connect with his infant/child. Every three weeks a ‘mood checker’ text is sent asking the father ‘how is it going?’ to which the father can answer – ‘it’s going well’, or ‘it is difficult right now’; the father’s answer will trigger a ‘can we call you’ text and then, if agreed, the father receives a call from a support worker.

Results from the pilot are favourable: 92% of fathers reported improved couple relationships, 92% said it helped their transition to fatherhood, and 22% indicated their distress and received support. Fathers responded more positively to hints and tips rather than the term ‘support’. Further initiatives are in the pipeline – SMSdadsnmums, SMSfamilies. Following his presentation several delegates wanted to talk with Professor Fletcher with a view to setting up a similar project in their health trusts.

### In the absence of a father

A different perspective was provided by **Sebastien Kraemar**, Honorary Consultant, Tavistock & Portman NHS Trust, London, with a presentation titled ‘There is no such thing as a father’ or a more scientific title, ‘Fathers exist in a context of mothers and babies’. This certainly made everyone sit up and listen! Kraemar called on us to consider the mother, infant, ‘other’ triad where the mother and ‘the other’ are a partnership to whom the baby attaches. A father’s absence does not impact on the baby’s survival, but a positive triadic relationship can benefit social competence.

Kraemar referred to the work of developmental anthropologist **Sarah Blaffer Hrdy**, whose observations of traditional societies indicate that paternal function may not be carried out by the father at all, but by other women in the village, or anyone who provides care for the infant on a regular basis; babies who develop several attachment relationships of varying degrees are better able to integrate multiple mental perspectives. However, historically hunter-gatherer and farming communities have shown that whilst paternal function may be carried out by whoever closely cares for the baby, the biological parents do have a significant function.

A key element, according to Kraemar, is that babies at a young age are very observant of, and concerned for, the relationship between his/her caregivers and will even become the ‘marital therapist’ at the risk of their own social development. Their ‘triangular capacities’ are used to relieve tension between parents, to the detriment of their own development. Kraemar’s message was ‘please look after each other so that you can look after me’, making it clear that the couple relationship during the perinatal period is a very important one.
Other notable presenters included several practitioners who work with fathers in the field, particularly using Video Interaction Guidance (VIG). Hilary Kennedy, for example, a freelance educational psychologist and leading developer of VIG, provided an overview of its use with parents. VIG is a relationship-based intervention that aims to promote positive parenting based on communication between baby and parent. It has been shown to create a partnership between the caregivers (parents), and build family relationships. A Dutch study\(^{14}\) has shown it has an impact on parent-infant bonding where there has been a traumatic birth. Fathers whose babies are in NICU and who used VIG have benefited from this with regard to depression. VIG has also been used as a preventative intervention in abusive relationships.

Raquib Ibrahim from Mellow Parenting (Mellow Dads) explained how Mellow Dads formed because fathers were not engaging with Mellow Parents, a Scottish organisation set up to research, develop and implement evidence-based parenting programmes. It is a series of workshops specifically for fathers, engages fathers and is dad-friendly. The aim is to encourage the father-child attachment relationship and develop nurture and containment. To provide modelling, a team of both male and female facilitators nurture the dads in a safe and sharing environment. The course includes a session in which babies and children are cared for in a separate room, lunch with the children, and an interactive parent-child afternoon session. The feedback from participants is positive.

Joanna Tucker, parent-infant psychotherapist with Oxford Parent Infant Project (OXPIP), finished the conference with a moving case study about how ‘a neglected and abused dad’s motivation to be with his baby was the catalyst for change’. Tucker and psychoanalytic psychotherapist Sue Gerhardt worked with a family using VIG ‘against the odds’ to make significant changes in the lives of three vulnerable people. Thankfully in this instance there was a happy ending, but there wasn’t a dry eye in the house. Tucker’s key message was that there is ‘fear in the system’ — parents fear their children will be removed from their care. The infant’s triangular competence, she noted, means s/he is capable of communication with two other people, making the co-parenting relationship key.

As NCT practitioners, we felt challenged to reflect on how we include and value fathers in all our work with parents, and protect the couple relationship.

References


**Resources**

Mellow Dads

SMS4dads
[https://www.sms4dads.com](https://www.sms4dads.com)