Good Practice Points for Health Visitors

Understanding Fathers’ Mental Health & Wellbeing during their transition to fatherhood

Transition to parenthood and perinatal mental health have recently been identified by the UK government as two of the six high impact areas where Health Visitors (HVs) can really make a difference (DH 2014).

HVs are ideally placed to support fathers during this transition, with routine access to all mothers and babies following birth, through referrals from maternity services.

- Men go through a multitude of complex changes when they become fathers, making the transition to fatherhood a particularly important, yet vulnerable, time in a man’s life. A meta-analysis reported postnatal depression in about 10% of fathers after birth (Paulson and Bazemore, 2010).

- A literature review, of thirty two studies (between 1989 – 2008) on men’s psychological transition to fatherhood, found the postnatal period to be the most challenging time due to having to balance the various demands placed on fathers including:
  - personal and work-related needs;
  - the new role of fatherhood;
  - emotional and relational needs of the family;
  - societal and economic pressures.
  (Genesoni and Tallandini, 2009).

- As part of the new birth visit and now at the antenatal visit, HVs should routinely enquire about fathers’ mental health and wellbeing, and offer appropriate support and advice to fathers, as well as mothers.

- Factors that are linked with paternal depression in the postnatal period:
  - a history of depression,
  - unsupportive marital relationships,
  - unemployment,
  - unplanned pregnancy
  - social deprivation.

- HVs need to have a good understanding of these gender-specific differences between mothers and fathers in order to provide the right support to fathers. Men have specific risk factors for mental distress in the postnatal period, which may manifest as hostility, conflict, and anger, rather than the more broadly recognised sadness (Condon et al, 2004). Fathers may withdraw or engage in escape activities such as overwork, sports, sex, or gambling. They may self-medicate for their depression by drinking alcohol (Veskrna, 2010).

- It is imperative that HVs assess fathers’ mental health as well as mothers, as part of their role of ‘family workers’, in order to achieve best outcomes for children. The mental health of fathershas an impact on the child’s cognitive, social and behavioural development (Goodman, 2004). Ramchandani et al (2005), in a prospective cohort study found that severe postnatal depression in fathers was associated with high levels of emotional and behavioural problems in their children at age 3.5 years, particularly in boys.

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How Health Visitors can promote fathers’ mental health and wellbeing:

- Routinely ask fathers about their experience of becoming a father at the new birth visit and explore feelings and expectations.
- Discuss the complex changes that men may go through during the transition to fatherhood, allowing fathers to open up about any difficulties that they may be experiencing.
- Educate both mothers and fathers about postnatal depression so that they are able to access help if they notice any of the signs and symptoms in themselves or their partners.
- If the mother is depressed, ensure that the father has adequate support systems in place as maternal depression increases the risk of depression in fathers.
- It is very important that fathers are enabled to seek help if they are suffering from postnatal depression. Help is available in different forms including self-help advice, talking therapies, such as cognitive behavioural therapy (CBT), and antidepressant medication.
- Fathers could also be given the following self-help measures/advice to improve their mental health and wellbeing following birth and reduce the risks of postnatal depression (Baldwin and Kelly, 2014):
  - Recognise that you may sometimes feel down or low about being a parent.
  - Allow time for yourself, away from work and family.
  - Make sure to talk to your partner, family and friends about how you are feeling.

- Focus on the enjoyable aspects of parenting.
- Try to maintain any important hobbies or social events.
- It is also important to avoid negative coping strategies, such as drinking too much or working too hard and staying away from home.
- Take regular exercise.
- Don’t try to be “Superdad”. Don’t try to do everything at once. Make a list of things to do and set realistic goals.
- HVs should provide fathers with details of local support groups, such as Fathers’ groups (often run in Children’s Centres at weekends) or national help lines for advice and support. They therefore need to be aware of all local and national services/resources available for fathers. See the iHV parents tips for fathers for helpline websites and numbers bit.ly/12QENP2

Useful Resources:

NHS Choices:  
bit.ly/1yCYxBA

The Fatherhood Institute:  
bit.ly/1oxtrsr

Fathers Reaching Out: A support group/network for men whose wives or partners are suffering from post natal depression  
bit.ly/1zA5iiX

Mind:  
bit.ly/1wMEMrP

Mind telephone:  
0300 123 3393

References


Department of Health (2014) Early Years High Impact Area 1 – Transition to Parenthood and the early weeks. bit.ly/1s0OtXv Accessed 30th (October 2014)


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