

# Fatherhood

## Research Bulletin

Australian Fatherhood Research Network Bulletin 39 June 2017

### Fathers at home



Source: <https://aifs.gov.au/publications/stay-home-dads>



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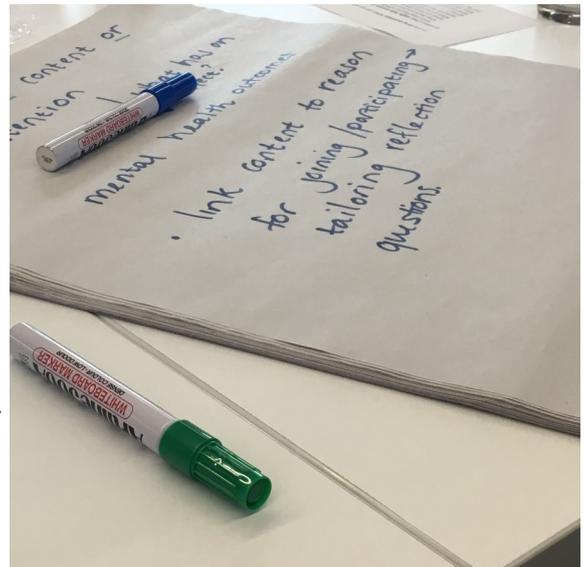
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## NEWS

### The Australian Fatherhood Research Consortium

The Australian Fatherhood Research Consortium was established in April, 2017 with 4 working groups focused on understanding, investigating and communicating knowledge about paternal postpartum sleep and fathers’ role in infant sleep. The Data & Analysis Working Group, comprising 8 researchers from 6 institutions, held a teleconference on May 26th. Member of this group are now compiling a list of standardised sleep scales and we are reviewing options for secondary data analysis from Australian community cohort studies. We have acknowledged that studies predominantly focus on maternal sleep patterns and maternal behaviours associated with infant sleep. Nevertheless, we have identified and have permission to use data from at least two studies and are continuing to investigate others. Our aim is to describe Australian men’s appraisals of their own and their infant’s postpartum sleep and to report on correlates of subjective sleep quality. The remaining working groups, focusing on Literature Reviews, Interventions and Scientific Communication plan to meet in the coming the weeks.



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## ON THE WEB

### The New Dad: The Career-Caregiving Conflict

**FRB comment:** The Boston College Center for Work & Family has been researching the changing roles of fathers in the workplace and in the home for nine years. Their latest report, the eighth in The New Dad series, uses data collected between 2011 and 2015 to characterise Millennial, Generation X, and Babyboomer fathers. An extract from the report is produced below. The full report can be downloaded from the Center website at <http://bit.ly/2ts3yOB>

Fathers today want to be active and engaged with their families, with more than 2-out-of-3 expressing a desire to be an equal parenting partner. Unfortunately, our research shows less than one-third are able to achieve that goal, leaving many fathers feeling conflict between personal and professional life. The Boston College Center for Work & Family has explored the changing roles of fathers in the workplace and in the home over the past nine years, led by Professor Brad Harrington, the Center’s Executive Director. In our latest report, the eighth in The New Dad series, we analyzed data from more than 850 fathers collected between 2011 and 2015.



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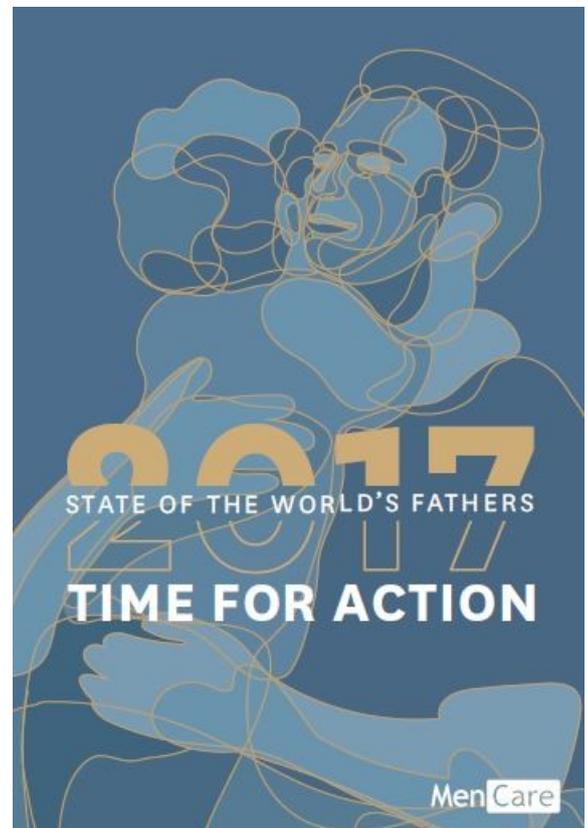
Exploring three generations and three types of fathers In analyzing the results, we looked at the fathers from two distinct perspectives. We are frequently asked about whether differences among fathers when it comes to career and caregiving are mainly the result of the age/generation of the fathers. So our first means of analysis was by generation, looking at differences and similarities between Millennial, Generation X, and Baby-boomer fathers. The second grouping we identified related to the predispositions of the fathers with regards to their career and their caregiving responsibilities. This analysis yielded three distinct “fatherhood types.”

The first group thought caregiving should be divided equally with their partners and it was. These are the Egalitarian fathers. The second group felt caregiving should be divided equally with their partners but admitted their partners did more than they did. These we labeled the Conflicted fathers. The third group of fathers felt their partners should do more caregiving and in fact that was the case. These are the Traditional fathers.

## State of the World's Fathers report

**FRB Comment:** *State of the World's Fathers: Time for Action* comes two years after the inaugural *State of the World's Fathers 2015*, launched at the United Nations Headquarters in New York, United States. The 2015 report was translated into multiple languages and inspired regional and country adaptations, including Australia where Save the Children produced *Transforming Fatherhood in Australia*. This month, *State of the World's Fathers: Time for Action* was launched in Belgrade, Serbia. Below an extract from the foreword by Gudlaugur Thor Thordarsson, Minister for Foreign Affairs, Iceland is reproduced.

Nothing can prepare you for meeting your children for the first time: you are overwhelmed by a feeling of responsibility for their happiness and well-being, and you are determined to do your absolute best in this new role. The influence your parents have had on you, both good and bad, dawns on you: their successes, which should be replicated and their mistakes, which should be avoided. When we in Iceland put in place a paternity leave policy in 2000, through which new fathers are allotted three non-transferable months of leave (alongside three non-transferable months offered to mothers, and a remaining three to split), it was nothing less than a broad-sweeping effort to address gender inequality in Iceland. This policy, in many ways, served to level the playing field at work and at home: eliminating the penalty women often face at work when they take maternity leave, and getting men to shoulder the responsibility of child-rearing at home. The effects have been massive. It has changed norms and behaviour in a meaningful way, enabling and encouraging men to fully participate in their children's lives. We see the positive impact of this not only for newborns, but also as children grow older. It has become increasingly clear that positive father-child relationships bring benefits for all involved: for women and children, and we also see that involved fatherhood makes men themselves happier and healthier. By taking on a larger share of care work and domestic work, involved fathers are promoting gender equality through their actions. That is what *State of the World's Fathers: Time for Action* is all about: how to make gender equality a reality, through actionable, concrete steps.



The full *State of the World's Fathers* report can be downloaded from <http://sowf.men-care.org/>  
And *Transforming Fatherhood in Australia* can be downloaded from <http://bit.ly/1hPfeVn>

## Supporting fathers to be ‘home alone’ - an international comparison

**FRB comment:** *The Fatherhood Research Bulletin does not usually include books of research however Comparative Perspectives on WorkLife Balance and Gender Equality, which is edited by Margaret O’Brien and Karin Wall is published as open access so each of the chapters can be downloaded at no cost as if it were a journal paper. The book examines the lived experience of fathers taking up leave to be ‘alone’ with their child or children while the mother works while also attempting a comparative perspective examining father’s experiences of leave alone in differing policy contexts. Below some extracts from the opening chapter are presented.*

### Main Aims and Theoretical Issues

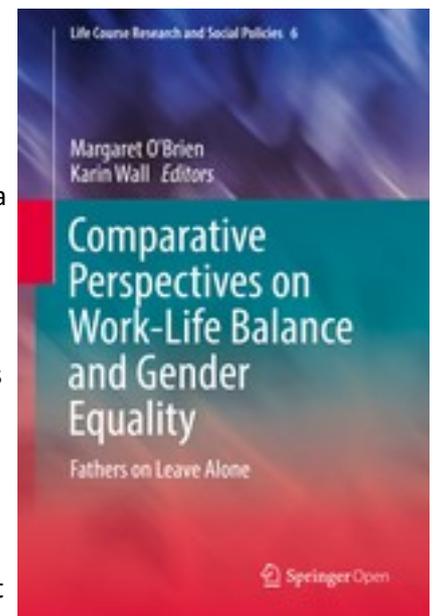
The aim of this book is to present original research findings on the experiences of fathers taking “home alone leave” in different country policy contexts. It seeks to illuminate fathering experiences of work-family balance and the gendered divisions of parental responsibilities in diverse countries across Europe, North America and Asia, specifically Japan....

### Developments in Fathers and Leave Policies: Research Messages

National policy developments provide fathers with different entitlements and opportunities for work-family balance, encapsulated by Gregory and Milner (2008) as “fatherhood regimes”. In this book, we compare specific countries (Norway, Sweden, Finland, Iceland, Canada, Portugal) which have introduced generous fully-compensated leave entitlements for fathers, such as well-paid paternity leave and explicit father-targeted policy schemes (daddy months, bonus month) allowing fathers to take up one or more months of paid parental leave on a full-time or part-time basis, with countries where policy developments have focused weakly on the enhancement of fathers’ entitlements to leave (UK, Spain, France, Switzerland, Japan). The former set have been characterised by O’Brien (2009) as a “premier league” in that they offer both high income compensation with father-care sensitivity design. Comparison between countries with different policy profiles and pathways allows us not only to understand the impact of social and policy context but also to explore how the latter influence fathers’ experiences and their negotiation of leave with employers and within families.

Although Sweden was the first country in 1974 to introduce parental leave open to fathers as well as mothers, Norway was the first country in 1993 to reserve 4 weeks of well-paid parental leave exclusively for fathers – the non-transferable “daddy month” (Haas and Rostgaard 2011). Sweden and Iceland followed suit, and the so-called “fathers’ quota” came to symbolize the Nordic gender equality model (Eydal et al. 2015). Since then nearly all European countries and many others across the world, have introduced new individual and non-transferable leave rights for fathers, mainly in the form of ‘paternity leave’, that is the right to a few days of paid leave taken with the mother after child-birth (ILO 2014).

Comparative Perspectives on Work-Life Balance and Gender Equality can be accessed at <https://link.springer.com/book/10.1007%2F978-3-319-42970-0>



## PROGRAMS AND FATHER INCLUSIVE PRACTICE

### Developing work with fathers in child protection

The Children's Protection Society (CPS) based in Melbourne provides targeted services including: family support, sexual abuse counselling and treatment services, support services tailored for mothers, fathers and other carers such as grandparents, early education expertise, child and family centres, ChildFIRST and Services Connect referral services.

Over the past decade, CPS has established programs in Melbourne dedicated to working with fathers. More recently, CPS has broadened the focus of its work with fathers to more specifically address the needs of new fathers and fathers of young children via individual counselling, father-only parenting groups, building father inclusive practice in the community sector and piloting a group program for fathers with a history of family violence.

Through the Fathers and Family Relationships Program (FFRP), CPS provides a free child-focused counselling service to fathers. We also deliver a range of evidence-based parenting programs where dads are included:

Dads Tuning in to Kids has been developed specifically for fathers and covers the important role fathers play in their children's development, importance of play, responding to anger and sadness and managing sibling conflict. This dads-only program has run 3 times in the last 12 months. Participant numbers ranged from 12 to 5.

Bringing Up Great Kids ran once with 4 dads. We modified content using a variety of storybooks featuring dads and babies/kids, different mindfulness activities and content on the fathering role and messages from the past and broader culture on fathering. We fed these modifications back to staff at The Australian Childhood Foundation who are currently revising the program to make it more father inclusive.

Tuning in to Teens ran over 7 sessions in an evening with 9 dads. The content was modified to include more on the role of fathers and responding to anger in self and teen. There was a lot of father/child conflict in this particular group - so safety planning was included. The current Tuning in to Teens group is mixed (4 dads and 2 mums) and is run in the evening.

Male and female facilitator for every group - except for the most recent Tuning in to Teens which had 2 female facilitators.

A distinctive feature of the parenting programs for fathers is the invitation to a "booster" session three months after program completion, enabling dads to check-in, re-group and review key program content. Staff also invest time in supporting other initiatives which provide opportunities for fathers to make connections in their communities and/or access other parenting resources. Overall, the FFRP aims to provide fathers with practical support and information to build their parenting capacities at key stages of the family lifecycle, and especially in the early years of adjustment to parenthood.

The FFRP has also invested time in developing the Father Inclusive Practice Network (FIPN) - a network of professionals who seek to build capacity and practice wisdom in working with fathers across a range of community settings. Established in March 2016, the FIPN has grown to over 170 members and meets quarterly for guest speaker presentations from fatherhood practitioners, to network and share practice tools and program information. Many practitioners engaged with the FIPN also communicate and share information on a Facebook group; the Fatherhood Practitioners Group, located at <https://www.facebook.com/groups/1066266626776693/>.

Finally, the latest addition to the FFRP's suite of programs is the Australian pilot of *Caring Dads*. *Caring Dads* originating in Canada is a 17-week group program for fathers with a history of family violence. CPS is being funded by the Victorian State Government and Gandel Philanthropy to be the first to trial *Caring Dads* in Australia over the next three years at three sites. The program will be delivered by CPS and UnitingCare ReGen in the North East metropolitan area, by Anglicare Victoria and IPC in the Inner Western metropolitan area and by Anglicare Victoria in Gippsland. *Caring Dads* will be evaluated by the University of Melbourne.

For further information on CPS and the Fathers and Family Relationships Program, please see <http://www.cps.org.au>.

## POLICY

**FRB comment by A/Prof Richard Fletcher:** *It is difficult to know whether to be dismayed at how little attention is given to fathers in policy documents or to be pleased that they are mentioned at all. The Effective mental health care in the perinatal period: Australian clinical practice guideline has recently been released and is open for public consultation until 4 July 2017. A brief glance at this comprehensive review will make it clear that this is about maternal mental health. At the request of the review committee an appendix was added to outline, in two pages, the situation for paternal mental health in the perinatal period (see p66). While the minimal status of fathers is perfectly clear, including a summary of the research is a step forward from the original guidelines which simply mentioned that the fathers' role should be addressed at some point in the future. Other guidelines, such as those of The Royal Australian and New Zealand College of Obstetricians and Gynaecologists, also provide the briefest reference to half of the parenting team. Their 2016 standards publication includes the direction "Health professionals should recognise the important role of partners/fathers and [where the woman wishes] make sure they are encouraged and supported to take a full and active role in pregnancy and childbirth". The caveat in this statement points to an important complication in advocating for father inclusion in policy documents addressing pregnancy and childbirth; fathers' inclusion needs to be developed so that it supports mother's centrality in the process of birthing. Nevertheless, given that such policies and guidelines profess to be evidence-based it would be encouraging to see the strong evidence linking paternal mental health to the wellbeing of mother and infant acknowledged.*

The RACGP Standards of Maternity Care in Australia and New Zealand can be found at: <http://bit.ly/2twM9EI>  
Effective mental health care in the perinatal period: Australian clinical practice guideline is available at: <http://cope.org.au/about/review-of-new-perinatal-mental-health-guidelines/>

## CONFERENCES WEBINARS COURSES

### Working with Vulnerable Fathers

Enrolments are open for the third Trimester course Working with Vulnerable Fathers. This 10 unit course which is entirely online forms part of the Masters in Family Studies available through the Family Action Centre at the University of Newcastle. Students from a range of backgrounds including social work, psychology, Early Childhood and School education, child protection, probation and parole and family work have enthusiastically endorsed the learning. Go to this link to enrol in a single course, <http://www.newcastle.edu.au/future-students/undergraduate-study/other-pathways-and-study-options/non-award-admission> . Or consider enrolling for the Master of Family Studies Degree, <https://gradschool.edu.au/programs/overview/master-family-studies-12277>

## Fathers who use violence: “Whole of family” approaches where there is ongoing contact with children

Cathy Humphreys and Monica Campo

Thursday 6 July 2017, 1.30pm - 2.30pm AEST.

This Child Family Community Australia webinar will explore the controversial issue of intervening in families where fathers who use violence continue to live with the family, or continue to have extensive contact with children.

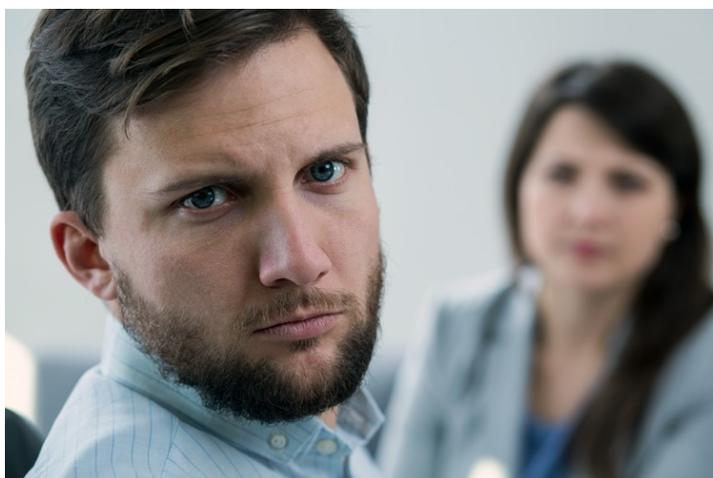
Our service system has been configured on the basis that separation is the most effective safety strategy, and that gender specific services for men or women and their children are the interventions of choice. However, many women and children may not be in a position to separate from their abusive and violent partners, and some women and children’s wellbeing and safety may not be enhanced by separation.

This webinar will explore evidence from five different areas of the service system that have substantial contact with families where fathers who use violence remain living in the home:

- nurse home visitation;
- restorative justice and family group conferencing;
- couple counselling;
- family services; and
- child protection.

The webinar will outline emerging practices, with a focus on the developing area of "whole of family" approaches. A range of strategies to address the needs and safety of women and children who continue to have contact with fathers who use violence will also be explored.

Go to <http://bit.ly/2sBweVV> to register



## Australasian Marcé Society Conference 2017 Focus on Fatherhood

The conference at the Brisbane Convention Centre 26-28 October will include a plenary address on paternal perinatal mental health by Associate Professor Richard Fletcher and Dr Matthew Roberts.

“The theme this year at the Biennial Scientific Conference of the Australasian Marce Society for Perinatal Mental Health is ‘When the bough bends, resilience in the perinatal period’. There is a great interest in supporting mothers in the perinatal period but fathers are often forgotten at this time. The Marce Society is very pleased to promote this opportunity to have further education into how to promote resilience for fathers in the perinatal period.”

Dr Lyndall White, President, Australasian Chapter

Go to <https://www.marcesociety.com.au/Conferences.asp> to register.

## Webinar: Rethinking engagement with fathers

Richard Fletcher, Jennifer StGeorge & Chris May

Wednesday 26<sup>th</sup> July 2017, 1.30pm - 2.30pm AEST.

This seminar, which is being sponsored by CFCA and ARACY will draw from a number of research projects to offer new insights into how services foster father engagement across the variety of male parenting. The material will build on the presentation [Refining the Task of Father Inclusive Practice](https://aifs.gov.au/cfca/events/refining-task-father-inclusive-practice) broadcast March 2015 and available at <https://aifs.gov.au/cfca/events/refining-task-father-inclusive-practice>

Interested in participating in the webinar? Email Jody Crouch at [jody.m.crouch@newcastle.edu.au](mailto:jody.m.crouch@newcastle.edu.au) for the invitation

## RESEARCH

### When fathers are at home

**FRB comment by A/Professor Richard Fletcher:** *Men staying at home to care for their infant or child is an attractive idea, not only does it signal a shift in the pattern of gendered caring but it also may increase fathers' connection to their child. For attachment (bonding) to occur, it is clear that fathers will need to spend some time caring for their infant or child. There is a long way to go, however, in developing a good understanding of the processes influencing fathers' behaviours and the optimal arrangements for sharing the care of children. An area of enduring confusion in this discussion is the notion of 'stay-at-home' dads. While the phrase is catchy, and regularly features in media coverage, pinning down the extent of fathers' caring is not easy. In her fact sheet for AIFS on Stay-at-home dads **Baxter (2017)** provides a summary from two large-scale studies of the number of families where fathers and mothers have reversed the usual arrangement. The numbers are low, partly due to the strict definitions employed (a point acknowledged in the report) nevertheless, the figures provide a basis for policy and service design. One group of profoundly affected stakeholders who rarely contribute to the discussion are the children of fathers. **Strazdins et al (2017)** have analysed the responses of almost 3,000 children aged between 10 and 13 years and their fathers. The results are not really surprising. A third of the children said that their father worked too much, and one in eight wished that he did not work at all. These figures suggest a possible point of motivation for fathers. By giving children a larger voice in the debate around work-life balance fathers may find ways to spend more time on care and less on work. A more intricate question in this area is how the time spent by fathers leads to the type of positive bonding that studies have shown to produce optimal child outcomes. Here we are just beginning to see investigations of the processes involved. Quantitative analyses, which have been a strength of the fathering research area, both in Australia and internationally have limited applicability here. **Brady and colleagues (2017)** interviewed 100 fathers to identify their understanding and experience of early bonding. Unfortunately, the study fails to deliver on its intended purpose to "elicit a finely grained account of the activities fathers felt helped them to connect with their infant". The theory-driven dichotomisation into 'physiology-focused' and 'time-focused' fathers provides very little insight into the complexities of new parents' bonding and leads to the simplistic policy proposal 'challenge gendered/physiological discourses'. Using a more nuanced approach to qualitative analysis of interview material, **Rominov et al (2017)** describe new fathers' views of the support they received or would wished to have received. The detailed discussion situates the fathers' perceptions within the multitude of interacting pressures surrounding the new family formation. These papers point to the need, not just for more research, but more high-quality research on the pathways to facilitate fathers' engagement in caring and the processes involved in his developing connection to his children.*

## Stay-at-home dads



It's generally perceived that "stay-at-home dads" are becoming more common, as modern families strive to juggle their work and care responsibilities. This Families Week fact sheet takes a close look at the data, to see if that perception matches reality. We have confined our analysis to two-parent, opposite-sex families; this allows us to compare and contrast stay-at-homefather families with stay-at-home-mother families. And because we are focussing on that comparison, other family forms, such as single-parent and same-sex-parented families, are not covered in this fact sheet. What is a stay-at-home dad? We will refer to a father as "stay at home" if he has children aged under 15 years living with him, he is not working, and he has a spouse or partner who is working some hours.<sup>1</sup> Smaller scale studies on stay-at-home fathering tend to rely on fathers' self-reports of being stay-at-home fathers. We, on the other hand, are relying on data from two large-scale studies: the Australian Population Census and the Household, Income and Labour Dynamics in Australia (HILDA) study. We also recognise that some of the fathers counted here may not consider themselves to be stay-at-home dads (e.g., they may identify as being temporarily unemployed). And others who are in limited employment—perhaps for just a few hours a week—may consider themselves to be stay-at-home dads but do not fall under our definition of stay-at-home dad.

Baxter, J. (2017). Stay-at-home dads (Facts Sheet). Melbourne: Australian Institute of Family Studies.

## "Getting help for yourself is a way of helping your babe:" Fathers' experiences of support for mental health and parenting in the perinatal period



The need for services targeting fathers in the perinatal period is increasingly apparent. To maximize engagement, such interventions need to be father focused, but men's experiences and needs around support have not been adequately examined. Therefore, the aims of this qualitative study were to explore men's experiences of seeking support for their mental health and parenting in the perinatal period, and identify their specific support needs during this time. Australian fathers (N = 20) who were expecting or parenting an infant less than 2 years of age participated in individual semistructured face-to-face or telephone interviews. Thematic content analysis was used to analyze the data. Five broad themes were explored: experiences of support, support needs, barriers to support, facilitators to support, and timing of support. Several subthemes were identified within each category, illustrating a diverse range of issues that fathers experience across the perinatal period. The findings

have implications for our understanding of fathers' help-seeking behaviors, their perinatal support needs and for the development of resources, services, and interventions aiming to engage fathers in maternity health services.

Rominov, H., Giallo, R., Pilkington, P.D., & Whelan, T.A. (2017, April 13). "Getting help for yourself is a way of helping your babe:" Fathers' experiences of support for mental health and parenting in the perinatal period. *Psychology of Men & Masculinity*.

## Long hours and longings: Australian children's views of fathers' work and family time



Using two waves of paired data from a population sample of 10- to 13-year-old Australian children (5,711 father-child observations), the authors consider how the hours, schedules, intensity, and flexibility of fathers' jobs are associated with children's views about fathers' work and family time. A third of the children studied considered that their father works too much, one eighth wished that he did not work at all, and one third wanted more time with him or did not enjoy time together. Logistic regression modeling revealed that working on weekends, being time pressured, being unable to vary start and stop times, and working long hours generated negative views in children about fathers' jobs and time together. The time dilemmas generated by fathers' work devotions and demands are salient to and subjectively shared by their children.

Strazdins, L., Baxter J.A., Jiahghong L., (2017) Long hours and longings: Australian children's views of fathers' work and family time *Journal of Marriage and Family*. DOI:10.1111/jomf.12400

## You can spend time... But not necessarily be bonding with them: Australian fathers' constructions and enactments of infant bonding



Governments are increasingly implementing policies that encourage early father-infant bonding. However, to date, research has not systematically examined fathers' perspectives and experiences of early bonding. Using a social constructionist embodiment perspective we argue that paternal bonding is best conceived as a process of repeated, embodied performances that are shaped by gendered parenting discourses. Drawing on 100 semi-structured interviews with a diverse group of Australian fathers of young infants, we argue that most men believe they are capable of developing early strong bonds. They assume that bonding is a product of spending sufficient time with a child, irrespective of the parent's gender. In contrast, a sizable minority of fathers assert that physiology means fathers are 'largely useless' to very young infants, and tend to remain distant in the early

months. We conclude that social policies promoting early paternal bonding must engage with and challenge gendered/physiological discourses.

Brady, M., Stevens, E., Coles, L., Zadoroznyj, M., & Martin, B. (2017). 'You can Spend Time... But not Necessarily be Bonding with Them': Australian Fathers' Constructions and Enactments of Infant Bonding. *Journal of Social Policy*, 46 (1), 69-90.

## Fathers, babies and sleep

**FRB comment by Dr Jacqui Macdonald:** *The fitful sleep-wake cycle of infancy is a normative challenge of parenthood but can also be a precursor to postpartum psychopathology. So critical is sleep to emotion regulation, clarity of thought, energy to persevere, and basic judgement that at the Fatherhood Research in Australia Symposium II in April, there was consensus about the need for an investigation of fathers and postpartum sleep. The newly formed Australian Fatherhood Research Consortium committed to furthering understanding of the effects of sleep disturbance on paternal wellbeing, as well as fathers' roles in settling their infants. New evidence from an Australian community cohort study of 102 fathers indicates that infant sleep problems at 4- and 6-months are not only associated with fathers' own reduced sleep quality and quantity but also with fathers' increased depressive symptoms and anger toward their infants (Cook et al., 2017). In this study, approximately 55% of fathers indicated that their infant's sleep was a problem. From a different perspective, paternal involvement is associated with positive sleep outcomes for families. Tikotsky et al. (2016) found that when fathers were more involved in daytime and nighttime caregiving at 3 months postpartum, both mothers and infants had more consolidated sleep at 6 months postpartum. The importance of understanding the family as an interacting system cannot be overstated. Saxbe et al. (2016) tracked family sleep quality and depressive symptoms from 1- to 12-months postpartum. They found that mothers' and fathers' depressive symptoms at 1 month predicted their own poor sleep quality at 6 months, which was subsequently related to their own depressive symptoms at 12-months. This is a shared problem with Saxbe et al. reporting mothers and fathers sleep problems to be correlated at each time point. While postpartum sleep studies that include fathers are still small in number, the evidence leans towards a whole-of-family solution to dealing with sleep deficiency during this period with the potential for flow-on effects of reduced depressive symptoms and improved parent-infant relationships.*

## Depression and anger in fathers of unsettled infants: A community cohort study.



**Aim:** To examine the relationship between unsettled infant behaviour and fathers' depressive symptoms, cognitions surrounding infant sleep (anger, doubt), and personal sleep, in a community cohort.

**Methods:** Data were collected from 102 fathers of healthy infants at 4 weeks, 4 months and 6 months of age. Measures included father report of infant sleep and crying problems, depressive symptoms, cognitions about infant sleep and own sleep quality and quantity. Data were analysed using adjusted regression models.

**Results:** Sleep problems at 4 months of age were associated with increased depressive symptoms (adjusted mean difference 2.64 (1.27–4.00)), doubt (adjusted mean difference 1.82 (0.40–3.25)), anger (adjusted mean difference 1.86 (0.51–3.20)), poor personal sleep quantity (adjusted odds ratio (OR) 0.21; 95% confidence interval (CI) 0.09–0.51) and quality (adjusted OR 0.20; 95% CI 0.08–0.51); and at 6 months of age, with increased depressive symptoms (adjusted mean difference 2.56 (1.28–3.84)), anger (adjusted mean difference 1.63 (0.40–2.87)), poor personal sleep quantity (adjusted OR 0.14; 95% CI 0.05–0.38) and quality (adjusted OR 0.28; 95% CI 0.11–0.72). Infant cry problems at 4 months were associated with increased anger (adjusted mean difference 1.98 (0.60–3.36)) and doubt (adjusted mean difference 1.55 (0.05–3.05)); and at 6 months, with increased depressive symptoms (adjusted mean difference 3.04 (1.59–4.69)), anger (adjusted mean difference 2.73 (1.29–4.17)) and less personal sleep (adjusted OR 0.22; 95% CI 0.07–0.71).

**Conclusion:** Fathers of unsettled infants reported greater anger towards their infant and increased depressive symptoms

Cook, F., Giallo, R., Petrovic, Z. Coe, A., Seymour, M., Cann, W., & Hiscock, H. (2017). Depression and anger in fathers of unsettled infants: A community cohort study. *Journal of Paediatrics and Child Health*, 53, 131–135.

## Infant sleep development from 3 to 6 months postpartum: links with maternal sleep and paternal involvement



The aims of this longitudinal study were to examine (a) development of infant sleep and maternal sleep from 3 to 6 months postpartum; (b) concomitant and prospective links between maternal sleep and infant sleep; and (c) triadic links between paternal involvement in infant caregiving and maternal and infant

sleep. The study included 57 families that were recruited during pregnancy. Maternal and infant sleep was assessed using actigraphy and sleep diaries for 5 nights. Both fathers and mothers completed a questionnaire assessing the involvement of fathers relative to mothers in infant caregiving. The results demonstrated moderate improvement in infant and maternal sleep percent between 3 and 6 months. Maternal sleep percent at 3 months significantly predicted infant sleep percent at 6 months. Greater paternal involvement in infant daytime and nighttime caregiving at 3 months significantly predicted more consolidated maternal and infant sleep at 6 months. These findings suggest that maternal sleep is an important predictor of infant sleep and that increased involvement of fathers in infant caregiving responsibilities may contribute to improvements in both maternal and infant sleep during the first 6 months postpartum.

Tikotzky, L., Sadeh, A., Volkovich, E., Manber, R., Meiri, R., & Shahar, G. (2015). Infant sleep development from 3 to 6 months postpartum: links with maternal sleep and paternal involvement. *Monographs for the Society of Research in Child Development*, 80 (1), pp. 107-24.

## Sleep quality predicts persistence of parental postpartum depressive symptoms and transmission of depressive symptoms from mothers to fathers



**Background:** Early parenthood is a time of chronic sleep disturbance and also of heightened depression risk. Poor sleep quality has been identified both as a predictor of postpartum depressive symptoms and as a consequence.

**Purpose:** This study sought to clarify causal pathways linking sleep and postpartum depression via longitudinal path modeling. Sleep quality at 6 months postpartum was hypothesized to exacerbate depressive symptoms from 1 month through 1 year postpartum in both mothers and fathers. Within-couple associations between sleep

and depression were also tested.

**Methods:** Data were drawn from a low-income, racially and ethnically diverse sample of 711 couples recruited after the birth of a child. Depressive symptoms were assessed at 1, 6, and 12 months postpartum, and sleep was assessed at 6 months postpartum.

**Results:** For both partnered mothers and fathers and for single mothers, depressive symptoms at 1 month postpartum predicted sleep quality at 6 months, which in turn predicted depressive symptoms at both 6 and 12 months. Results held when infant birth weight, breastfeeding status, and parents' race/ethnicity, poverty, education, and immigration status were controlled. Mothers' and fathers' sleep quality and depressive symptoms were correlated, and maternal sleep quality predicted paternal depressive symptoms both at 6 and at 12 months.

**Conclusions:** Postpartum sleep difficulties may contribute to a vicious cycle between sleep and the persistence of depression after the birth of a child. Sleep problems may also contribute to the transmission of depression within a couple. Psychoeducation and behavioral treatments to improve sleep may benefit new parents.

Saxbe, D. Schetter, C., Guardino, C., Ramey, S., Shalowitz, M., Thorp, J., & Vance, M. (2016). Sleep quality predicts persistence of parental postpartum depressive symptoms and transmission of depressive symptoms from mothers to fathers. *Annals of Behavioral Medicine*, 50(6), 862-875.