## In this issue

### AUSTRALIAN FATHERHOOD RESEARCH SYMPOSIUM 2019

- Page 3

### ON THE WEB

- DAD (Direct Advice for Dads) Analysis of Company Support for New Dads
- Page 4
- Where’s the Daddy? Fathers & Father Figures in UK Datasets
- Page 5
- Why Fathers’ Care Matters: Enabling Gender Equity in Care & Work
- Page 6
- Fathers’ Depression & Parenting
- Page 8
- Fatherhood Research Bulletin Online
- Page 9

### PROGRAMS AND FATHER INCLUSIVE PRACTICE

- Working Out Dads
- Page 9
- Support for Dads
- Page 10
- Groups for Dads
- Page 10
- Aboriginal & Torres Strait Islander Fathers Special Edition of the Fatherhood Research Bulletin
- Page 11

### CONFERENCES WEBINARS COURSES

- Canadian National Father Involvement Conference
- Page 12

### RESEARCH

- Research on Fathers in the Perinatal Period WAIMH Conference Papers
- Page 12
- Non-Resident Fathers
- Page 16
- Assessing Fathers’ Depression
- Page 18
Researchers examining fathers, fathering or fatherhood are invited to contribute to the fourth symposium on Fatherhood Research in Australia to be held at the city campus of Deakin University on 2nd and 3rd May 2019.

ABOUT THE SYMPOSIUM
The symposium is an annual opportunity for researchers to build and consolidate collaborations with other researchers and practitioners who work with fathers. The event is co-hosted by the Family Action Centre, The University of Newcastle and the Centre for Social and Early Emotional Development, Deakin University. A range of disciplines are represented.

On the first day 2nd May keynote presentations will alternate with poster presentations.

Confirmed keynotes:
Laureate Professor Robert John Aitken FRSE, FRSN, FAHMS, FAA, Pro Vice Chancellor Faculty of Health and Medicine, University of Newcastle, NSW. Professor Aitken is a global leader in reproductive biology and was awarded the 2012 NSW Scientist of the Year. He will present The Science of Fatherhood – toxins, trends and treatments

Professor Paul Ramchandani is LEGO® Professor of Play in Education, Development and Learning at Cambridge University, UK. He leads a research team investigating the role of play in children’s early development. He also works as a Consultant Child and Adolescent Psychiatrist in the UK National Health Service. He will present live from the UK.

At the second symposium in 2017, the Australian Fatherhood Research Consortium was founded and much progress has been made by consortium working groups in their investigations into their first domain of enquiry, fatherhood and postpartum sleep. In 2019, we will be calling for expressions of interest for new collaborations to be formed. Although professionals and the public accept fathers’ contribution to the care and education of infants and children, there remain major gaps in our understanding of fathering, and we lack effective ways in which to engage with fathers.

We invite you to save this date to join us to build effective collaborations so that we may further the evidence base on fathering. Deadline for poster abstract submissions and registration to be announced.

Venue: Deakin Downtown: Level 12 / Tower 2, 727 Collins Street Melbourne Victoria 3008
ON THE WEB

DAD (Direct Advice for Dads) analysis of company support for new dads

DAD webpage and email service is supported by HBF an Australian not-for-profit health insurer to offer information and advice on fathering. The site recently published an analysis of the ‘20 Best Australian Workplaces for New Dads 2018’, the first report of its kind in Australia.

With research consultancy CoreData, DAD analysed the policies of Australia’s largest 500 companies by revenue, according to IBISWorld, and worked with parenting and workplace experts to determine what benefits were most important for new dads.

To qualify for consideration companies had to offer a minimum of two weeks paid secondary carer’s leave, 12 weeks paid primary carer’s leave and flexible work practices. Importantly, primary carer’s leave had to be made available for a minimum of 12 months after the birth, allowing dads to avail of it should their partners return to work. Once the above criteria were applied, a list of 44 eligible workplaces emerged.

From there, companies were ranked by their length of paid secondary carer’s leave, which was deemed the most important benefit for new dads. They were then judged on their length of paid primary carer’s leave, flexible work policies, leave uptake rates among dads, childcare, and parenting workshops to attain a final top 20.

See the list and compare your own workplace at:


Where’s the daddy? Fathers and father-figures in UK datasets

Rebecca Goldman & Adrienne Burgess

The Challenge

Only 11% of British men aged 70 years or older have never fathered a child or played a significant fathering role in the life of a child. Yet the information we have about many of these fathers and father-figures is meagre—despite the fact that Britain is in proud possession of some remarkable datasets that reveal vital information about family life, and on which a range of national and local policies and interventions are based.
What we did

We investigated how sixteen large-scale repeated cross-sectional and longitudinal datasets identify, differentiate and collect data about British fathers.

Firstly, we wanted to assess how these datasets take account of and differentiate men in different fathering relationships to dependent or adult children (birthfathers, adoptive fathers or ‘social’ fathers such as step-fathers and foster fathers). Secondly, recognising that the usual dichotomous classification of fathers who do not live full-time with their children as either ‘resident’ or ‘non-resident’ was limiting understanding and investigation, we developed a new typology to describe fathers’ full-time co-residence, part-time co-residence and non-residence with their children (rather than with their children’s mothers as in most of the research literature on separated families). This allowed us to differentiate a range of residence patterns of fathers, for example when a father, while not cohabiting with his child’s mother, was part-time resident with his child through regular overnight care.

What we found

Many UK datasets continue to use the ‘full-time resident adults and children in one household’ as the basis for questionnaire design and data collection about families, despite the increasing prevalence of second addresses and of couples/families split across households.

Some of the datasets, or studies based on them, fail adequately to differentiate the men in a household who are birth fathers, adoptive fathers, foster fathers, stepfathers, a mother’s boyfriend or partner of another parent (usually mother).

Datasets also commonly fail to identify parent-child relationships across households: for example, children who regularly stay overnight and so live part-time in their other parent’s household; parents with children residing full- or part-time elsewhere; or partners who parent children together, while not cohabiting full-time. Key cross-sectional datasets such as the Census and Labour Force Survey do not identify as fathers those men whose children do not primarily live with them. The datasets rarely use explicit definitions when presenting terms such as ‘own child’, ‘step-parent’, ‘lives with’, ‘main residence’ or ‘shared care 50-50’ to research respondents in fieldwork instruments. Instead, research respondents use their own interpretations of the meaning of these terms when selecting a category, sometimes guided by the interviewer’s instructions.

Fathers and father figures are far more likely to be overlooked in social surveys than mothers. This is because they are less likely to be full-time co-resident with their dependent birth child, and because UK cohort studies have not followed fathers who leave the household in which they once resided with their child and their child’s mother.

The overlooking of fathers in cohort studies also results from the fact that they are less likely to be interviewed than mothers. The interviewer may have a brief interview with only one parent (or even, specifically, the mother). Time allocated for father/partner interviews is usually much shorter than for mother-interviews. Much of the information we have about fathers is not gathered from the men themselves, but from their partner and sometimes their children. By contrast, most information about mothers is gathered directly.

Continues next page
Why this matters

Policy devised on the back of partial information, particularly when the ‘missing’ fathers are vulnerable (for example young, poor, ‘new arrivals’, suffering from health/mental health deficits or a combination of the above) may fail to address key issues, and to meet parents’ and children’s needs.

The dichotomous classification of fathers as either ‘resident’ or ‘non-resident’ masks a wide range of care-and-contact patterns: for example no-contact, daytime care, minority overnight care (one or two nights a week), equal overnight care, majority overnight care, living part-time in the child’s household, temporary longer-term non-residence with the child.

Identifying and studying the full range of fathers and father-figures in, and attached to, modern families could provide nationally representative data about the men’s health, wellbeing, employment, caretaking, social attitudes and finances, and their impacts on children and mothers, so usefully informing both policy and practice. Where small sample sizes prevent detailed analysis, establishing population numbers for categories of fathers is an important baseline for future demographic change.


WHY FATHERS’ CARE MATTERS: ENABLING GENDER EQUITY IN CARE AND WORK

Summary and Consensus Statement

This was the first forum in Australia to unite on this key contemporary issue. The forum was held at The Australian National University (The ANU) on August 9, 2018 and was sponsored by The Gender Institute (The ANU) and the Judith Lumley Centre (La Trobe University). The forum was organised by Dr Liana Leach (The ANU) and Dr Amanda Cooklin (La Trobe University). Participants were researchers and scholars; industry representatives; policy-makers; those working in both government and non-government sectors; fathers, mothers and the general community.

The goals of the forum were to:

- Share our knowledge of why fathers’ care matters;
- Identify barriers that limit fathers’ participation in combining work and care;
- Derive a consensus statement about key issues, actions and priorities to promote organisations’, fathers’ and the broader community’s support of gender equity and fathers’ involvement in work and care

Professor Jan Nicholson (La Trobe University) chaired the first session and was invited to discuss implications and importance of the focus on fathers for family and child wellbeing.

Associate Professor Richard Fletcher (The University of Newcastle) highlighted the experiences of fathers, including the ongoing ‘invisibility’ of fathers in the workplace. Fathers often default to two weeks leave provision following the birth of a baby, and are not yet taking ownership of longer leave, or are not widely supported to do so. This challenges the formation of warm and supportive attachment in the early weeks and months, which is a critical time for bonding and family relationships.

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**Dr Jenny Baxter** (Australian Institute of Family Studies) used national data, including from the Census, to track fathers’ work and care patterns over recent decades. She noted that time in work and care in Australia remains markedly split by gender. Fathers work long hours; and this is similar before and after the birth of a child. Mothers’ work hours ‘dip’ dramatically, without a full recovery over time. Although interest in ‘stay at home’ dads has burgeoned, the proportion of dads being in full time care of infants and children remains low (4%). Paid parental/paternity leave is unevenly distributed across industries (e.g. 10% in retail/hospitality, up to 85% in public administration). Many fathers remain unaware if paid parental leave is even available to them.

**Professor Lyndall Strazdins** (The ANU) highlighted the myriad of ways in which time is a problem for fathers, with long work hours taking them away from time with children. One in four fathers work weekends in Australia; over half report ‘missing out’ on family activities due to work; and 20% say family time is less fun and more pressured due to work. Not only does this have adverse implications for fathers’ health and wellbeing; children and adolescents long for more time with their dads; with many saying that their dads work ‘too much’.

**Dr Amanda Cooklin** (La Trobe University) and **Dr Liana Leach** (The ANU) presented a snapshot of their collaborative research focussing on fathers’ work and its links with mental health. Fathers who work long hours, have inflexible, demanding or insecure work are more likely to report work-family conflict and its adverse effects on mental health, including stress and anxiety. These effects flow on to undermine parenting, couple relationships and children’s mental health too.

Three fathers shared their experiences in taking leave and an industry and policy panel fielded questions on current practices.

**Consensus Priorities: Setting the Action, Research and Policy Agenda**

Ideas from all panels and discussions across the day are summarised below. Participants also joined in a final brief workshop to highlight novel ideas and strategies.

- Getting the conversation right. Ensure all genders are part of the conversation in workplaces about equity, work and care, as it is not just a mother’s problem. Encourage fathers’ voices and keep men in the messaging and information used in organisations to promote flexible work options and parental leave (e.g. include images of fathers in toolkits/communications).

- Recognising and rewarding great initiatives and outcomes in organisations. Introduce a Gender Equity Scorecard for organisations, to keep employers competitive to consumers and as an employer of choice, and to drive momentum for continual improvement in industry.

- Reposition gender equality. In addition to the gender pay gap, require employers to record and report the gender leave gap (differences in leave provisions and leave utilisation by gender).

**Industry and Policy Panel Discussion**

Amanda Cooklin introducing Emma Walsh, CEO of Parents at Work to chair the panel. Invited panellists were key industry and government experts discussing recent initiatives in their own organisations. Panellists were Rachel Ranton (Westpac), Helen Karatasas (WGEA), Jane Dickinson (Dept. Social Services), Gina DeGeorge (Deloitte), Cate Leyland (ANU), and Geoff Tattam (ANU).
• Share stories amongst peers, colleagues and families to normalise fathers’ caring, and create a visible presence and community of support for dads.

• Remove language that positions dads as ‘helping’ or as secondary carers, to ensure both parents have responsibilities and rights to caring for their children; and that parenting is a shared job. This includes in health, community and parenting services which often are aimed at mothers only.

• Showcase in organisations the benefits of all employees’ involvement in care. Managers and leaders can champion ongoing messaging, examples and support of fathers taking leave and flexible working options.

• Highlight the benefits of flexible work options to all employees and broaden their relevance beyond parents to reduce flexibility stigma.

• Good balance between work and care is a workplace safety issue. Ensuring healthy and productive workers should be a priority for organisations.

• Continue research that shows the social and mental health benefits for employees (and their families) of organisations offering flexible work options, parental leave and other initiatives aimed at managing both work and care responsibilities. Encourage research into imagining new, innovative ways of combining work and family.

• Continue public discourse, debate and advocacy. Policy-makers have the opportunity to reflect on the current parental leave scheme and consider other international initiatives (e.g. Share the Joy campaign for shared parental leave, UK); and have the capacity to respond to a robust public discourse that keeps gender inequities in work and care open to ongoing discussion and debate.

• Make the future of work The Future of Work and Family to keep the caring, child-rearing and wellbeing of all employees at the centre of the agenda.

This is an edited version of the Summary prepared by Dr Amanda Cooklin, Dr Liana Leach, Dr Lou Farrer & Dr Stacey Hokke.


Contact a.cooklin@latrobe.edu.au and liana.leach@anu.edu.au for more information on the forum.

Fathers’ depression and parenting

The Victorian Parenting Research Centre released a Focus on Fathers research brief from a population representative survey of 2600 parents, 1044 of whom were fathers in time for father’s day this year. The media release stated:

One in five Aussie dads experience depression or anxiety after having kids

One in five fathers say they have suffered symptoms of depression or anxiety since having children. And of these, nearly one in 10 feel they have experienced postnatal depression, according to findings from one of the largest groups of Australian fathers ever surveyed on parenting.
The findings, part of a new analysis of research of 2600 parents and more than 1000 fathers conducted by the Parenting Research Centre, found levels of depression and anxiety in equal measure – with 18% of dads reporting depression and 19% reporting anxiety since having children.

“The best fathers’ day present we can give Australian dads this Sunday is to consider as a nation how we can better help men make the transition to parenthood,” said Parenting Research Centre Principal Research Specialist Dr Catherine Wade.

The report can be accessed at:

The Fatherhood Research Bulletin Online

The Fatherhood Research Bulletin is published 4 times a year as a pdf sent to subscribers. The Bulletin is free. Please email family@newcastle.edu.au with your name and email to subscribe.

The Bulletin can also be accessed on the Fathers and Families Research Program websitehttps://www.ffrpweb.com/

PROGRAMS AND FATHERS INCLUSIVE PRACTICE

Working Out Dads

Working Out Dads - For Dads Living & Working Around Wyndham and Melton VIC

Working Out Dads combines 1 hour of facilitated group discussion with a 30 minute guided gym workout. The program is for dads with a child under 4 years of age and is run by a male facilitator,

Program:
- Developing parenting skills and confidence and building positive relationships with your child
- Juggling the needs of your family, work and your own needs
- The changing dynamics of relationships and how to maintain positive adult relationships
- Managing stress and pressure and practical ways to cope when things get tough
- Focussing on the future for you, your child and your family

Working Out Dads is being run as a collaboration between Tweddle and the Murdoch Children’s Research Institute. Dads taking part in the program will be asked to complete 3 surveys, 1 before they begin the program, 1 after they complete the program and the final survey 3 months later.

If you would like to attend or for more information please phone Tweddle on (03) 9689 1577 or visit www.tweddle.org.au
Support for fathers

Relationship Australia’s Support for Fathers project has launched a national survey to gather information and feedback about issues affecting fathers in Australia, and how services can support fathers to develop and strengthen healthy family relationships. Fathers, partners of fathers and professionals who work with families are invited to share their views.

To complete the survey, go to: https://www.surveymonkey.com/r/SupportForFathers

For more information about Support for Fathers, or to get involved, please contact Dom Alford: SupportforFathers@rav.org.au

Groups for Dads

In 2014 my wife and I found out we were going to have a baby. This wasn’t something we had planned to do that year. We had planned the next two years of travel around South America and then Europe. However life served us up a beautiful little change of plans and I soon discovered how much I didn’t know about ‘how to dad’.

One thing I experienced when exploring support services for new families was a lack of understanding of exactly where a new father fits into the framework. Like most new fathers I was excited, scared, confused and bewildered all at the same time. There was one thing that I do remember was a ‘game changer’ for me and that was the day I spent some time with a couple of other new fathers with their babies. It was only an hour or so but in that short time I learned more from my peers than any book or video had taught me and it struck me that this is exactly what is missing from the modern new family support framework... a place for fathers to feel connected into the parenthood in a way that wasn’t so... clinical, programmed and sterile.

So ‘Dads Group’ became an idea, then a project and for the next 4 years we trialled and tested and sought feedback and updated and iterated and modified and redeveloped until finally we had a program, a crew and an organisation ready to help new fathers and families navigate the unknowns of parenthood... Dads Group.
Today, Dads Group Incorporated (not-for-profit) has established over 60 new dads groups across Australia. We have developed a father centric leader training and support program. We have designed programs to specifically and intentionally support new mothers through consultation and feedback with the mums. We have Engaging Fathers Program Packages that can be implemented by councils and community organisations and Federal, State and Local governments across Australia have been increasingly supportive of Dads Group Inc. (DGI) and our programs for new families. We host Australia's largest event for new fathers called “Man with a Pram”.

Comments from the dads

“I think DGI has given me the confidence to get in there and have a crack. Talking and meeting other blokes modelling a healthy relationship with not only their children but there partners is inspiring. “

“Dads group has helped me connect with other Lads going through the same major transition in life which is parenthood.”

“Before joining Dads group I felt a lot more isolated in my role at home and had no one to talk to about the ever changing environment and journey ahead.”

“I would say to other Dads that DGI is a great way to connect with other blokes going through a similar journey and pressures of life and family. Weather it’s a 20min coffee once a week or a day out together, mentally it has been a saving grace for me and my family.”

www.dadsgroup.org

Aboriginal and Torres Strait Islander Fathers Special Edition of Fatherhood Research Bulletin

In November we will be producing a special edition of the Fatherhood Research Bulletin focused on research and programs with Aboriginal and Torres Strait Islander Fathers.

The special edition will be co-edited by Charlie Faulkner, Chairperson of Awabakal Aboriginal Corporation, Craig Hammond, Senior Coordinator, Indigenous Projects, Family Action Centre, Faculty of Health and Medicine at The University of Newcastle, and Richard Fletcher.

The issue will be sponsored jointly by the Indigenous Health Equity Unit, Melbourne School of Population and Global Health, The University of Melbourne and The Fathers & Families Research Program, Family Action Centre, Faculty of Health and Medicine, University of Newcastle.

Please send any descriptions of the programs, perspectives and research involving Aboriginal and Torres Strait Islander fathers to richard.fletcher@newcastle.edu.au
CONFERENCES

Canadian National Father Involvement Conference Feb 28 & Mar 1, 2019 ~ Ottawa

Fatherhood Matters in the Early Years will focus on supporting and engaging fathers with relevant and effective services, programs, or resources. Our goal is to help provide fathers with the knowledge and support needed around the healthy development of children.

Highlights:

• Dr. Stuart Shanker - Self-Regulation and Fathers
• Dr. Cindy-Lee Dennis - Emerging Fatherhood - father involvement and co-parenting
• Dr. Andrew Howlett - The Mental Health of Fathers: it matters to everyone
• The Dads’ Panel
• Evening Networking Social hosted by The Movember Foundation
• Reflections from the Canadian Father Involvement Survey
• Knowledge Sharing Forum
• Ottawa’s “Flash Your Badge” program

Venue: The Delta Ottawa City Centre ($119 per night)

For more information and to register: store.dadcentral.ca/side-by-side-conference-2019

Any questions: conference@dadcentral.ca

RESEARCH

Research on fathers in the perinatal period - WAIMH Conference papers

The World Association of Infant Mental Health conference for 2018 attracted 1750 delegates from 72 countries including over 100 from Australia. The presentations below give an idea of how fathers are being researched across the infancy period with a focus on clinical applications. The titles below were copied from the proceedings of the conference if they included the word ‘father’ in the title. Many other presentations also reported research on fathers.

All of the abstracts for the conference appear in the supplement to the Infant Mental Health Journal. The document is available online at: https://www.waimh.org/files/Congress/2018/IMHJ_WAIMH%20Congress_Abstracts_2018.pdf
PW01.2
MOTHERS’ AND FATHERS’ STRESS, EDUCATION, CULTURAL BELIEFS AND PARENT-CHILD PLAY INTERACTIONS Garcia K.*, Cabrera N., Mittone D.

PW01.7
PARENTING, MOTHER’S AND FATHER’S PLAYFULNESS AND INTRUSIVENESS: A STUDY WITH SPANISH FAMILIES WITH CHILDREN WITH DISABILITIES Vilaseca Momplet R.M., Cerro Villanueva J.

PW01.8
PARENTAL PLAYFULNESS OF FIRST TIME FATHERS AND MOTHERS WITH THEIR 14 MONTH-OLDS: FROM DISCIPLINE TO FREE PLAY Basilio M., Laverty C.*, Hughes C.

BOP07.1
PATERNAL TRAUMA FOLLOWING CHILDBIRTH: FATHERS’ EXPERIENCES AND SUBSEQUENT IMPACT Bristow F., Iles J.*, Pote H.

S06.2
PATERNAL SUPPORTIVE BEHAVIOUR OF FATHERS WHO GREW UP IN OUT-OF-HOME CARE: DIFFERENCES BETWEEN SELF-ASSESSED AND OBSERVED SUPPORTIVE BEHAVIOUR AND CORRELATIONS WITH CHILD’S ATTACHMENT Nowacki K.*, Mielke V., Remiorz S.

S06.5

BOP03.6
DEPRESSIVE SYMPTOMS AND PARENTAL STRESS IN MOTHERS AND FATHERS 25 MONTHS AFTER CHILD BIRTH Johansson M.*

S36.2
ARE FATHERS AT HIGHER RISK FOR ANXIETY AND DEPRESSIVE SYMPTOMS Atzaba--Poria N.[1], Gueron--Sela N.[1], Meiri G.[2], Kyla M.[2]

S36.4
SMS4DADS – A TEXT-BASED PROGRAM ADDRESSING THE MENTAL HEALTH OF NEW FATHERS: A RANDOMISED CONTROLLED TRIAL Fletcher R.*[1], May C.[1], Attia J.[2], Garfield, C

S36.5
FATHER AND MOTHER DEPRESSION AND TODDLERS’ SOCIAL SKILLS: THE MEDIATING ROLE OF DYADIC SYNCHRONY Hennigar A.*, Cabrera N.

S34.2
THE CONCEPT OF CO-PARENTHOOD CONSTELLATION AS THE BASIS OF THE TRIADIC FATHER- INFANT-MOTHER PSYCHOTHERAPY Keren M.

S40.4
FATHERS’ EXPERIENCES WITH THEIR PRETERM BABIES ADMITTED TO NEONATAL INTENSIVE CARE UNIT: A MULTI-METHOD STUDY Stefana A.[1], Padovani E.M.[2], Biban P.[2], Morelli M.*[1], Lavelli M.

S41.2
HOW RELIABLY DOES THE TRADITIONAL STRANGE SITUATION PROCEDURE CAPTURE FATHER- CHILD ATTACHMENTS? Piskernik B.*, Ahnert L.

S41.3
IS BLOOD REALLY THICKER THAN WATER? VARIATIONS OF CLOSENESS IN FATHER- AND STEPFATHER-CHILD RELATIONSHIPS Teufl L.*[1], Euler H.[2], Ehlert U. E.[3], Ahnert L.[1]

S41.4

S41.5
LIKE FATHER LIKE SON? GENDER-SPECIFIC INTERGENERATIONAL TRANSMISSION OF INTERNALIZING SYMPTOMS Klein A.*[1], Anna A.[1], White L.[1], Sierau S.[1], Perren S.[2], von Klitzing K.[1]

S45.2
A TRIADIC VIDEO-FEEDBACK INTERVENTION ORIENTED TO MOTHER-FATHER-CHILD WITH SOCIO- EMOTIONAL PROBLEMS Olhaberry M.*[1], León M.J.[2], Escobar M.[3], Iribarren D.[1]

Continues next page
THE FATHER FRIENDLY INITIATIVE: EVALUATING THE EFFECTS ON HEALTH PROFESSIONALS OF AN INTERDISCIPLINARY PROGRAM SUPPORTING INVOLVED FATHERHOOD WITHIN FAMILIES  
Demontigny F.*, Gervais C., Dubeau D.

S46.3

EXTENDING FATHERING INTERVENTIONS INTO HEALTH SERVICES: REACHING IN WHILE REACHING OUT WITH MOBILE TECHNOLOGY  
May C., St Georges J., Fletcher R.*

S46.4

PRESENT FATHERS, SUCCESSFUL CHILDREN WORKSHOPS: SUPPORTING FATHERS IN IMPROVING THEIR RELATIONSHIP WITH THEIR CHILDREN AND THEIR NETWORK  
Gervais C., Demontigny F.*, Garneau J., Dubeau D.

S46.5

BECOMING A FATHER IN THE CONTEXT OF DOMESTIC VIOLENCE: HOPES AND CHALLENGES  
Domoney J.*, Trevillion K.

S71.4

STUDY 3: THE EMOTIONAL PATHWAY TO PARENTHOOD: THE MEDIATING ROLE OF PARENTAL MENTALIZING IN THE ASSOCIATION BETWEEN ALEXITHYMIA AND PARENTAL SELF EMOTION REGULATION IN FATHERS AND MOTHERS TRANSITIONING INTO PARENTHOOD  
Mc Devitt--Shai D.*, Szepenwol O., Lassri D.

S77.3

HOME VISITING IN HIGH-RISK FATHERS ASSESSED BY PAPA: A PROTOCOL FOR EARLY INTERVENTION IN AN ITALIAN MENTAL HEALTH SERVICE  
Caretti V.[1], Ducci G.[2], Di Cesare G.[2], Caciopppo M.[1], Terrone G.*[3]

S77.4

DEPRESSION AND ANXIETY DURING THE POSTNATAL PERIOD: ASSOCIATIONS BETWEEN MOTHERS AND FATHERS  
Giannotti M.*[1], Facondini E.[2], Cena L.[3], Ancora G.[2], Chirico G.[4], Baldoni F.[5]

BOP29.4

MOTHERS’ AND FATHERS’ EMOTION REGULATION: MANAGING DISTRESS IN THE FIRST 24 MONTHS  
Russell B.*, Hutchison M.

S70.4

FATHER POSTPARTUM DEPRESSION MODERATED THE EFFECT OF MOTHER PRENATAL DEPRESSION ON TODDLERS’ PSYCHOLOGICAL PROBLEMS  
Figueiredo B.*[1], Pinto T.M.[1], Rocha M.[1], Field T.[2]

BOP34.1

PATTERNS OF DEPRESSIVE SYMPTOMS AND ANGER IN MEN AT THE PEAK AGE FOR ENTERING FATHERHOOD: ASSOCIATIONS WITH POSTPARTUM PATERNAL-INFANT BONDING  
Macdonald J.*, Harrison T., Youssef G., Di Manno L.

BOP34.2

TEXT MESSAGING KENYAN FATHERS IN THE PERINATAL PERIOD TO IMPROVE MATERNAL HEALTH AND INFANT DEVELOPMENT  
Temmerman M.[1], Comrie--Thomson L.[2], Lim M.[2], Fletcher R.*[3]

BOP34.3

A SIGN OF SUCCESSFUL LONG-TERM, FATHER-CHILD ADAPTATION? IMPROVED SYNCHRONY BETWEEN FATHERS RATINGS OF PRETERM-CHILDREN'S BEHAVIOR-PROBLEMS AND OWN PARENTING STRESS ACROSS CHILDHOOD  

BOP34.5

THE FAN AND FATHERS: EXAMINING THE FLOW OF THERAPEUTIC ENGAGEMENT WITH FATHERS OF FUSSY BABIES  
Isarowong N.*

BOP34.6

FATHER-INFANT INVOLVEMENT IN EARLY INFANCY: CONTRIBUTIONS TO BEHAVIOURAL OUTCOMES AT 24 MONTHS FROM A LONGITUDINAL UK STUDY  
Lancaster R.*, Barker B., O”Farrelly C., Ramchandani P.

BOP34.7

THE IMPORTANCE OF THE PERCEIVED FATHER-ROLE FOR PARENTAL STRESS: TAKING PARENTAL LEAVE AND PERCEIVING THEMSELVES AS AN EDUCATOR REDUCES PARENTAL STRESS IN FATHERS  
Smoydzin L.F.[1], Rüther J.N.[1], Fiedler S.[2], Krüger N.[1], Smoydzin L.F.*[1]

S93.3

HOW DOES THE CIRCLE OF SECURITY INTERVENTION FOR MOTHERS WITH POSTPARTUM DEPRESSION AND INFANTS AFFECT FATHERS?  
Ramsauer B.*[1], Mühlhan C.[2]

BOP41.7

THE ROLE OF PARENTAL REFLECTIVE FUNCTIONING ON CHILD ADJUSTMENT IN MOTHERS AND FATHERS OF PRE-SCHOOLER CHILDREN  
Mazzeschi C.*, Buratta L., Raspa V., Delvecchio E., Pazzagli

P01.18

Continue next page
DISCIPLINE, ATTACHMENT, AND BEHAVIOR PROBLEMS AMONG TODDLERS AND PRESCHOOLERS ADOPTED BY GAY FATHERS Gaudreau M.*, Allaire M., Aliya M., Feugé E., Louise C., Chantal C. 

P01.29

ASSESSMENT OF ATTACHMENT IN MOTHERS AND FATHERS: COMPARING SELF-REPORT QUESTIONNAIRES AND DMM-ADULT ATTACHMENT INTERVIEW Baldoni F.*[1], Minghetti M.[1], Facondini E.[2], Cena L.[3] 

P01.72

IMPROVING INFANT MENTAL HEALTH: WHY FATHERS SHOULD BE INVOLVED FROM THE START Ibrahim R., Malcolm R.* 

P01.77

MOTHERS’ ENCOURAGEMENT OF FATHERS’ INVOLVEMENT IN FAMILIES WITH INFANTS Kato M.*, Kamiya T. 

P01.82

FATHER AND MOTHER READING AND CHILD VOCABULARY IN LOW-INCOME MINORITY FAMILIES Cabrera N.*, Avery H., Reich S. 

P01.128

SUPPORTING NEW FATHERS WITH MESSAGES DELIVERED TO THEIR SMARTPHONES: A FEASIBILITY STUDY OF SMS4DADS Fletcher R.*[1], Kay-Lambkin F.[1], Chris M.[1], Oldmeadow C.[2], Attia J.[1], Leigh L.[1] 

P01.173

FATHERS AND THE FAN MODEL: (AT)TUNING IN TO FATHERS OF INFANTS AND YOUNG CHILDREN Kasovac N.*[2], Isarowong Phd Lcsw N. 

P02.34


P02.35

MATERNAL DEPRESSION AND CHILDREN’S CONDUCT PROBLEMS: FATHER POSITIVITY AS A PROTECTIVE FACTOR Prime H.*[1], Jenkins J.[2] 

P02.50

EXECUTIVE FUNCTIONS OF SOCIOECONOMICALLY DISADVANTAGED CHILDREN (3-5 YEARS): THE IMPORTANCE OF FATHER-CHILD RELATIONS Heider N.*[2], Sabourin--Guardo É.[2], Lessard M.[2], Cyr C.[1], Bernier A.[3], Dubois--Comtois K.[2] [1] 

P02.66

AN EXAMINATION OF MOTHERS’ AND FATHERS’ SELF-REPORTED PARENTING STYLES IN PREDICTING CHILDREN’S SOCIAL AND EMOTIONAL BEHAVIOURS Martinovich V.*, Rinaldi C. 

P02.72

FATHERS’ INVOLVEMENT IN CHILD CARE AND SELF-REGULATORY ABILITIES OF PRESCHOOLERS Breidokiene R., Jusiene R.* 

P02.83

PREMATURITY AND PARENTAL STATES OF MIND: A COMPARISON BETWEEN MOTHERS AND FATHERS Trumello C.*, Candelori C., Babore A., Marino V., Cofini M., Armenio B. 

P02.130

ANXIETY AND DEPRESSION IN PRETERM INFANTS’ MOTHERS AND FATHERS DURING THE FIRST YEAR OF LIFE: THE EFFECTS ON INFANT DEVELOPMENT Agostini F.*[1], Neri E.[1], Monti F.[1], Minelli M.[1], Stella M.[2] 

P03.12

MENTAL HEALTH SCREENING FOR MOTHERS AND FATHERS OF MEDICALLY COMPLEX INFANTS IN THE U.S. Hoffman--Craven C., Patterson C., Njoroge W.* 

P03.21

TRANSITION TO FATHERHOOD: PROCESS AND CO-CONSTRUCTION Noël R.*, Laurent C., Athénaios B., Mégan T., Boyer A., José Tomas A. 

P03.25


P03.38

GETTING READY TO PARENT: PERSPECTIVES FROM EXPECTANT FATHERS AND MOTHERS ON PATERNAL PREPARATION Walsh T.*[1], Tolman R.[2], Lariance L.[2]
Non-resident fathers

**FRB Comment by Dr Elizabeth Duursma, School of Education, The University of Wollongong.** The following studies focus on non-resident fathers from different perspectives. Although research in the field of fathering has grown exponentially, still little is known about non-resident fathers. In the study by Schänzel & Jenkins (2017), the researchers looked at the experiences of non-resident fathers’ holidays with their children. The authors interviewed eight non-resident fathers residing in Auckland, New Zealand. All fathers enjoyed spending time with their children on holiday. Interestingly, some fathers felt a responsibility to provide an outdoor or overseas holiday experience for their children when the mother did not provide it. Poole et al. (2016) looked at data on non-resident fathers from a large UK survey (Understanding Society Wave 1). They identified four groups of non-resident fathers: engaged, less engaged, distance, disengaged. Level of engagement was related to economic wellbeing with fathers who were employed fulltime and provided child support, more likely to be engaged. Although Fly In, Fly Out (FIFO) fathers are not considered non-residential fathers in the technical sense, these fathers do spend considerable time being non-residential. Dittman et al. (2016) examined family relationships and child outcomes among FIFO families and compared them with community families. FIFO workers and their partners reported greater levels of stress and anxiety and were also more likely to use harsher punishments.

**Non-resident fathers’ holidays alone with children: experiences, meanings and fatherhood.**

The notion of family has undergone significant changes in the world in the past thirty to forty years (Australian Institute of Family Studies, 2003). The OECD (2011) reported the percentage of all children in the OECD who in 2007 were living with only one parent at rates ranging from 23.7% in New Zealand, 16.8% in Australia, to 12.3% in Japan, 15% in Germany and 5% in Greece. Holidays are important aspects of time families spend together (Shaw, Havitz, & Delemere, 2008). However, little is known about non-resident fathers’ travel with their children who do not engage in daily family activities. This exploratory study examined the experiences of eight non-resident fathers (ages 45-54 years, all tertiary educated with children ages 6-22 years) who go on holidays alone with their children. This study specifically looked at what fathers do when they are on holiday alone with their children. How do fathers experience and remember their time on holiday with their children and what meanings do these holidays have for the fathers, in particular in terms of fathering? Participants were eight non-resident fathers residing in Auckland, New Zealand, and who had recently travelled on holidays alone with their children.

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All fathers embraced the opportunity to spend extended time with their children but in different ways. Non-resident fathers who had less contact with their children felt more of an emphasis of making the most of the extended time period. Fathers felt less of a responsibility to provide certain holiday experiences when mothers provided them for them. However, fathers felt a responsibility to provide outdoor or overseas holiday experiences for their children when mothers were unable or unwilling to do this. Holiday experiences of children and fathers in this study were greatly influenced by fathers’ incomes and contact arrangements. Leisure, recreational and travel dimensions of fathers’ engagement with their children can offer a rich focus for research on what fathers do with their children, and in better understanding fathering in diverse contexts and settings.


Who are non-resident fathers?: A British socio-demographic profile

Although there has been an increasing interest in the role of fathers, still little is known about non-residential fatherhood. This study used data from the Understanding Society Wave 1, a nationally representative survey of over 30,000 households in the UK, with 1,070 men identifying as having a non-resident child under 16 years old. Data in this study was directly collected from the fathers. This study provides a cross-sectional profile and investigation of non-resident fatherhood. Results showed that employed fathers had higher odds of being in contact than unemployed. Geographical distance also influenced contact with those fathers living less than half an hour away having three times higher odds of being in contact than those who live further away. Those fathers with new relationships and new children saw their children less frequently. Latent class analysis identified four non-resident father groups. Engaged fathers were the most involved, had regular overnight stays and provided child support. They tended to live close to their children and were most likely to be single. The less engaged fathers were involved but had less frequent contact and overnight stays. They tended to live further away. Disengaged fathers were the least involved with their children, with some not having any contact at all. Most of them do not provide child support. These fathers are most likely to be living with new partner and children. Distance fathers live more than an hour away from their children and report rare contact and only a minority have overnight stays. Most of these fathers do provide money for child support. Engaged and less engaged fathers were in better economic positions, more likely to be working full-times, more likely to be home owners and more likely to have formal education qualifications. Distance fathers had higher proportion of ethnic minority fathers. Many of the distance fathers were not born in the UK (40%) and 43% reported that their non-resident children did not live in the UK. There was no difference in mental health among the groups. This research suggest that non-resident fathers are a diverse group. The three factors associated with contact include economic and social resources, family situation and repartnering, and location. The disengaged and distance fathers are most likely to be a challenge for new policies in the UK aimed to increase involvement and family-based arrangements in the absence of any father-child relationship and lack of economic resources.

When a non-resident worker is a non-resident parent: Investigating the family impact of fly-in, fly-out work practices in Australia

Non-resident work practices (often called Fly-in, Fly-out or FIFO practices) which are quite common in natural resources, mining, construction and energy companies, have a major impact on family and relationship well-being. This study examined the impact of these work arrangements on children and families and aimed to identify family-related and employment-related factors that influence child and family outcomes. Anonymous surveys were conducted with 232 partners of FIFO workers, 46 FIFO workers and a comparison group of community parents (294 mothers and 36 fathers). The authors also assessed child behavior problems and emotional difficulties and family relationships using standardised measures. FIFO workers reported greater levels of alcohol use and family conflict and were more concerned about their partners' personal wellbeing. FIFO partners reported higher levels of depression, anxiety and stress and were also more concerned about their partners' wellbeing compared to community mothers. FIFO partners had higher levels of depression, stress and anxiety than community partners, even after controlling for socioeconomic factors. Children in FIFO families did not differ in their levels of behavior problems or emotional difficulties compared to community families. However, FIFO parents tended to use more harsh discipline practices such as shouting, smacking and slapping. As there is little research on the impact of FIFO on family relationships and child development, this study provides a good insight into the parenting practices and relationship qualities of FIFO families.


Assessing fathers’ depression

There is a steady stream of papers published identifying the rates of antenatal and postnatal depression among fathers in various populations. Philpott & Corcoran (2018), report a rate of 12% in an Irish sample using the Edinburgh Postnatal Depression Scale (EDPS). Underwood et al. (2018) used the EPDS antenatally and the Patient Health Questionnaire (PHQ-9) postnatally to measure depression in New Zealand fathers, finding rates of 2.3% and 4.3% respectively. Both the New Zealand and Irish researchers point to the lack of evidence on father’s mental health compared to the wealth of studies on mothers. Phillpott, for example states “Paternal Postnatal Depression (PPND) is not widely acknowledged and not well researched. In general, the mental health of fathers in the perinatal period is often not considered” (p121). Both papers call for fathers’ mental health to be assessed alongside that of mothers. However, for screening of fathers to be widely supported requires confidence in the measures used and there has been continuing debate as to the ability of self-report measures such as the EPDS to capture male depression. Father’s may not want to admit to behaviours such as crying (which is asked in the EPDS) and may express depression through irritation and anger which is not assessed. Psouni et al. (2017) recruited a sample of Swedish fathers of infants 0-18 months to compare their responses to the EPDS, the Beck Depression Inventory-II (BDI-II), a standard depression measure and the Gotland Male Depression Scale (GMDS) which contains ‘depressive-equivalent’, items asking about anger and impulsivity. They found high concordance between the three measures. With the BDI-II as a reference they then combined the 10 item EPDS and 13 item GMDS items using exploratory factor analysis to form a new scale with 12 items which contained some of the depressive equivalent questions. They found that the new scale correctly identified more of the fathers with at least mild depression (assessed with the BDI-II) than the EPDS alone without any increase in falsely identifying well fathers as depressed. While the new measure will require further studies to be accepted as an improvement on the existing scales the development of an instrument attuned to fathers’ expression of depression may speed the acceptance of assessing fathers’ mental health in the perinatal period.
Paternal depression symptoms during pregnancy and after childbirth among participants in the growing up in New Zealand Study

Antenatal and postnatal depression are known to be common and associated with poor outcomes for women and their children. There is little evidence on depression symptoms among men during the perinatal period. To identify characteristics associated with depression symptoms among men whose partners were pregnant and subsequently gave birth. A longitudinal cohort study provided data from a demographically diverse sample of 3523 New Zealand men who completed interviews during their partner’s pregnancy and 9 months after the birth of their child. Participants were drawn from a cohort whose partners were pregnant women with a due date between April 25, 2009, and March 25, 2010, who were enrolled in the Growing Up in New Zealand study. Data analysis was conducted from September 1, 2015, to January 8, 2016. Depression symptoms were measured using the Edinburgh Postnatal Depression Scale and the 9-item Patient Health Questionnaire; elevated depression symptoms were defined as scores higher than 12 and 9, respectively. The mean (SD) age of the participants at the antenatal interview was 33.20 (6.25) years (range, 16–63 years). Elevated antenatal paternal depression symptoms affected 82 fathers (2.3%) and were associated with perceived stress (odds ratio [OR], 1.38; 95% CI, 1.30–1.47) and fair to poor health during their partner’s pregnancy (OR, 2.06; 95% CI, 1.18–3.61). Elevated postnatal paternal depression symptoms affected 153 (4.3%) of fathers and were associated with perceived stress in pregnancy (OR, 1.12; 95% CI, 1.08–1.17), no longer being in a relationship with the mother 9 months after childbirth (OR, 6.36; 95% CI, 2.28–17.78), having fair to poor health at 9 months (OR, 3.29; 95% CI, 2.10–5.16), being unemployed at 9 months (OR, 1.86; 95% CI, 1.11–3.10), and a history of depression (OR, 2.84; 95% CI, 1.69–4.78). Expectant fathers were at risk of depression symptoms if they felt stressed or were in poor health. Rates of elevated depression symptoms were higher during the postpartum period and were associated with adverse social and relationship factors. Identifying fathers most at risk of depressive symptoms and when best to target interventions (antenatal or postnatal) may be beneficial to men and their families.


Paternal postnatal depression in Ireland: Prevalence and associated factors

Background: it is well established that fatherhood has a long term positive and protective effect on men’s health. However, there is also evidence that the transition to fatherhood can be complex and demanding and can lead to distress, anxiety and increased risk of depression.

Objective: this study aimed to investigate the prevalence of paternal postnatal depression, and to examine associations with a range of demographic and clinical factors.

Methods: a cross-sectional study design was used to collect primary data from 100 fathers, whose partner gave birth to an infant in the previous 12 months. Data were collected using the Edinburgh Postnatal Depression Scale.

Results: the prevalence of paternal postnatal depression was 12% using the Edinburgh Postnatal Depression Scale cut off score of 12 or above, when the cut off score was reduced to 9 or above the prevalence was 28%. The factors found to increase the risk of paternal postnatal depression included having an infant with sleep problems, a previous history of depression, a lack of social support, poor economic circumstances, not having paternity leave and not being married.
Conclusion: the results add to the growing body of evidence that paternal postnatal mental health is a significant public health issue, and indicates a need for assessment and support for fathers during this life stage.


**Symptoms of depression in Swedish fathers in the postnatal period and development of a screening tool**

Methods for detecting depression in fathers after the birth of their child are scarce. The *Edinburgh Postnatal Depression Scale* (EPDS), used to screen mothers for postpartum depression (PPD), lacks somatization and externalizing items. This potentially decreases its sensitivity in detecting depression in fathers, as many men actually express depression with somatization or externalizing symptoms. The present study assessed depressive symptoms in fathers of children 0–18 months old, and evaluated whether addressing both typical depression and externalizing, so-called “depressive equivalent” symptoms, might be more suitable for such assessment. The Beck Depression Inventory-II (BDI-II), EPDS, and Gotland Male Depression Scale (GMDS) were responded to by 447 Swedish fathers online. Among participants, 27% reported depressive symptoms above the BDI-II cut-off suggestive of depression. Most fathers reported both traditional and depressive equivalent symptoms and a subgroup expressed exclusively depressive equivalent symptoms. Consistently, a scale combining items from the EPDS and GMDS showed higher sensitivity than the EPDS alone in identifying fathers with elevated depressive symptoms, at equal levels of specificity. Our findings suggest that a combination of EPDS and depressive equivalent symptom items results in a more suitable instrument for screening for depression in fathers during the postnatal period.