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Fatherhood Research Bulletin

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NEWS from the Australian Fatherhood Research Network

NEWS from the Australian Fatherhood Research Network

During 2012 the idea of a national Paternal Perinatal Depression Initiative was presented at the Australian Men's Health gathering in Brisbane and at the Family and Relationships Services Conference in Canberra.

This year pre-proposals were called for from Movember for large-scale projects to improve the mental health of men and boys. The AFRN, with support from a team of national and international experts has submitted a pre-proposal targeting paternal perinatal depression. Invitations from Movember to submit a full proposal by June 16th will be issued in April. If AFRN is invited to submit a full proposal there will be an opportunity for Bulletin subscribers to be involved in this major initiative. Watch this space.

PROGRAMS AND FATHER INCLUSIVE PRACTICE

Program P

In Mid-November 2013 the Inter-American Development Bank (IDB) and Promundo launched Program P ('P' for Padre in Spanish, meaning "Father"), as a targeted response to the need for concrete strategies to engage men in positive, active caregiving from their partner's pregnancy through their child's early years. The main focus of Program P which is run in association with MenCare is to engage men through the health system, especially during prenatal visits and well-baby check-ups. The program's manual provides the tools



**YOU ARE THE STRONGEST MAN I KNOW.
YOU ARE MY FATHER.**

You know how powerful the arm over the shoulder can be. You can use it to show them you care. Use it to make them feel safe. Use it to teach them something. Use it to share a secret. Even use it to gently correct them if they're misbehaving.

That's real power... without using violence.

You can create a peaceful life for yourself and your family. Sometimes all it takes is simple, caring touch. It will always do more than physical violence.

For more on fathers & violence: www.Men-Care.org

MenCare

MenEngage

Gender Justice Network

Promundo

needed by health care staff to achieve this. It also offers methods for educators and organizations that want to work with mothers and fathers to promote co-responsibility in child rearing, parenting skills that promote healthy and loving relationships without violence, and socialization that provides the same opportunities to their sons and daughters by modeling equality in the couple's relationship.

The program was piloted in Nicaragua and other countries outside the region. It is currently being adapted for implementation via the health sector, training providers to engage constructively with men on the topics of sexual, reproductive, maternal and child health and facilitating reflection sessions with fathers as part of health services.

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PROGRAMS AND FATHER INCLUSIVE PRACTICE



This work with fathers proved to be a key entry point to addressing sensitive issues such as alcoholism and violence and how these situations affect the family. Program participants reported better relationships with their children and partners, greater participation in housework and child care, lower consumption of drugs and alcohol, and above all, they acknowledged the immense benefit of being involved in the lives of their children

For more on the manual visit

<http://www.men-care.org/data/Final%20Program%20P%20-%20Single%20Page.pdf>

Getting Fathers to Parenting Groups (without really trying) – my experience with Parent Effectiveness Training (P.E.T.)

Larissa Dann

I have been teaching Parent Effectiveness Training (P.E.T.) in Canberra for the past 16 years, with over a thousand participants. During that time I have noted a high attendance rate (35%) of men (fathers, step-fathers and foster parents). Intrigued, I sought to examine possible reasons for the interest of men attending P.E.T. courses in Canberra, and to look at some outcomes for participants over time.

P.E.T. takes a Rogerian, relationship-based, democratic approach to parenting (in contrast to a behavioural approach). The 24-hour course (over 8 weeks) teaches relationship skills in the form of respectful communication. P.E.T. helps parents empathise with their children, to look beyond the child's behaviour to their need, thus aiding a change in attribution of intent.

I designed a 10-question survey designed using the on-line tool "SurveyMonkey", and sent it to 61 men who had participated in P.E.T. courses from 2008 to 2010. The survey was anonymous, and responses could not be linked with participants. Thirty-two (53%) of the men surveyed responded. 90% of the respondents had attended the course more than six months previously. Active listening was the skill most commonly retained and utilised by the participants (90%).

Participants reported they:

- had better communication with their children, through utilising the skills of active listening and conflict resolution (taught in P.E.T).
- had better insight into the other's perspective/behaviour, and greater empathy.
- were "less authoritarian"

Participants found:

- they had calmer, more peaceful, cooperative and harmonious households
- there was a benefit of a consistent P.E.T. approach to parenting with their partner.
- They had a better relationship with their children,

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PROGRAMS AND FATHER INCLUSIVE PRACTICE

It was clear that these fathers wanted an alternative to being, or being seen as, authoritarian or the 'disciplinarian'. Survey participants valued the P.E.T. approach, with its emphasis on relationship skills and listening skills. Interestingly, respondents retained many of the communication skills taught in P.E.T. – well beyond six months. Fathers emphasised the significance of relationships with their children (and partners). These survey results support the importance of a course such as P.E.T. being available to fathers. For Contact: <http://parentskills.com.au/>

Current Programs for Fathers in Australia

In 2013, as part of Australian Men's Health Forum Conference (AMHF) <http://www.amhf.org.au/conferences/>, the Men and Vulnerable Families Sector Development Group conducted a survey of fathering programs that operated across Australia. Snowball sampling was used to ensure the widest network for obtaining feedback regarding any relevant programs. These results only focused on programs provided for men and family relationship (fathering) issues. Men's health programs or behaviour change programs were not included.

The document can be accessed at

<http://www.amhf.org.au/storage/pdfs/2013%20Australian%20Fathering%20Programs%20Overview.pdf>

All In: Supporting Fathers In NICU

Dr Olivia Wong, A Prof Carl Kuschel, A Prof Frances Thomson Salo, Prof Fiona Judd
Royal Women's Hospital Melbourne Victoria

The Royal Women's Hospital is committed to family-focused care including in the neonatal intensive care unit (NICU). Interventions such as breast-feeding and family rooms, information packs, access to social work and psychological support, and education sessions with a physical therapist have been established for mothers and parents. However, there have been no father-specific interventions.

In reviewing the literature we found qualitative studies showing that fathers perceive their role to be different to mothers, that they want to master the new situation of a premature infant while being the guardian of the family. One study showed fathers want to share their experience, and for it to be understood as normal. Another survey showed that over half of the fathers wanted father-specific interventions such as baby-care seminars; internet chat rooms; psychological counselling; males within the psychological team; and a meeting place for fathers.

To support these needs, we established an open format group for fathers with infants in the NICU. It is run once a fortnight in the evening in NICU, facilitated by a psychiatrist and a neonatologist. There are no exclusion criteria.

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PROGRAMS AND FATHER INCLUSIVE PRACTICE

We found that fathers discussions in our groups correlated with those found in previous studies. There is an early roller-coaster of emotions, where fathers tackle new knowledge to gain a sense of control of the NICU environment. Those with sick partners find it hard to juggle caring for two family members. They are indeed guardians and gatekeepers, often having to work, care for other children, and pass on information to other family or friends.

We have qualitative feedback from telephone interviews with approximately half of all the fathers who have attended. They have found the group helpful in sharing their experience and new knowledge in a peer setting, as well as in acknowledging and appreciating other aspects of their experience beyond the father-infant relationship.

We hope to continue this group. We have set up a fathers' facebook page as another forum in which to meet and interact. We have plans to ask fathers after their infant has been discharged from NICU to attend the group, to share their experience with the new fathers.

For further information

contact Frances Salo fvtalo@optusnet.com.au

African Dads and Kids camp



The African Dads and Kids program were established by CatholicCare in 2007 when it was realised that for African fathers, acknowledging that 'My culture is African but my child is Australian' involved a lot of renegotiation of their traditional role within the family. The African Dads and Kids program was designed to acknowledge and celebrate the importance of African fathers in the lives of their children, and reiterate the critical leadership role that they play in helping their families adapt in Australia, even though many feel their roles in the family have been turned upside down. The program now involves many African communities including: the South Sudanese, Ethiopian, Eritrean, Egyptian, Sierra Leone and those from Somalia. Over the years people within these communities have attended the camps as well as provided important feedback, reviews, assessments and training of the volunteer staff. Their input is highly valued as they are a part of the program and its future. The Fathers feel they have a responsibility to be involved in putting back into these camps and family days.

PROGRAMS AND FATHER INCLUSIVE PRACTICE

The 2009 African Dads and Kids Camp at Phillip Island was run by CatholicCare Catholic Family Services in partnership with Victoria Police. Nine African men and nine of their children aged between nine and 16 years took part. Most of the participants were from Sudan and had escaped situations of conflict and brutality.

"This camp explored the differences and similarities between being a father in Australia and being a father in Africa. It was an opportunity for fathers to discuss how to address the many challenges their children face in adapting to this new culture, and how to renegotiate their roles as fathers in Australia," Kate McKernin, CatholicCare's program coordinator said.

"The camp activities included learning how to surf. This was a true achievement, considering this was the first time many of these fathers and children have ever swum in the ocean," she said.



Victoria Police's Multicultural Liaison Officer, Leading Senior Constable Richard Dove also said the camp was important for many reasons. "It's a common mistake to believe that once a refugee family arrives in Australia that all will be well. Many find when they arrive that the greatest battle facing them now is keeping their family together and adjusting to a foreign culture. Creating stronger bonds in the family unit is imperative to enable refugee families to successfully settle here"

For further information contact:

Kate McKernin, Project Co-ordinator, CatholicCare kate.mckernin@ccam.org.au www.ccam.org.au

RESOURCES ON THE WEB

Explaining and disseminating fatherhood research

FRN comment: McGill University, a leading Canadian University, published a report in early December 2013 on the importance of fathers in the development of both the neurobiology and behaviour of their offspring.

The research described appeared in *Cerebral Cortex*, a highly technical specialist journal. However the ideas in the paper were explained with commentary from the researchers on the University webpage.

RESOURCES ON THE WEB

Dads: how important are they?



Even with today's technology, it still takes both a male and a female to make a baby. But is it important for both parents to raise that child? Many studies have outlined the value of a mother, but few have clearly defined the importance of a father, until now. New findings from the Research Institute of the McGill University Health Centre (RI-MUHC) show that the absence of a father during critical growth periods, leads to impaired social and behavioural abilities in adults. This research, which was conducted using mice, was published today in the journal *Cerebral Cortex*. It is the first study to link father absenteeism with social attributes and to correlate these with physical changes in the brain.

"Although we used mice, the findings are extremely relevant to humans," says senior author Dr. Gabriella Gobbi, a researcher of the Mental Illness and Addiction Axis at the RI-MUHC and an associate professor at the Faculty of Medicine at McGill University. "We used California mice which, like in some human populations, are monogamous and raise their offspring together."

"Because we can control their environment, we can equalize factors that differ between them," adds first author, Francis Bambico, a former student of Dr. Gobbi at McGill and now a post-doc at the Centre for Addiction and Mental Health (CAMH) in Toronto. "Mice studies in the laboratory may therefore be clearer to interpret than human ones, where it is impossible to control all the influences during development."

Dr. Gobbi and her colleagues compared the social behaviour and brain anatomy of mice that had been raised with both parents to those that had been raised only by their mothers. Mice raised without a father had abnormal social interactions and were more aggressive than counterparts raised with both parents. These effects were stronger for female offspring than for their brothers. Females raised without fathers also had a greater sensitivity to the stimulant drug, amphetamine.

"The behavioural deficits we observed are consistent with human studies of children raised without a father," says Dr. Gobbi, who is also a psychiatrist at the MUHC. "These children have been shown to have an increased risk for deviant behaviour and in particular, girls have been shown to be at risk for substance abuse. This suggests that these mice are a good model for understanding how these effects arise in humans."

In pups deprived of fathers, Dr. Gobbi's team also identified defects in the mouse prefrontal cortex, a part of the brain that helps control social and cognitive activity, which is linked to the behavioural deficits.

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RESOURCES ON THE WEB

“This is the first time research findings have shown that paternal deprivation during development affects the neurobiology of the offspring,” says Dr. Gobbi. These results should incite researchers to look more deeply into the role of fathers during critical stages of growth and suggest that both parents are important in children’s mental health development.

<http://www.mcgill.ca/medicine/channels/news/dads-how-important-are-they-231936>

Evaluating Programs for fathers

FRN comment: *The Child Family Community Australia (CFCA) information exchange is hosted by the [Australian Institute of Family Studies \(AIFS\)](#). The evaluation of programs for fathers was the topic for a recent brief article in CFCA Connect.*



The article can be accessed here:

<http://aifs.govspace.gov.au/2013/11/13/evaluating-programs-for-fathers/>

What Were We Thinking – promoting confidence and reducing distress in first time fathers and mothers

Heather Rowe and Jane Fisher, Jean Hailes

Research Unit School of Public Health and Preventive Medicine Monash University Melbourne Australia

Many men are closely involved during their partner’s pregnancy. Some attend antenatal visits and Child-birth Education classes and most men attend the birth. However, after parents are discharged from hospital, infant care can become “women’s work”, even though men and women both have high learning needs in the early weeks of their baby’s life. A new mental health promotion program at Monash University is designed to fill this gap.

What Were We Thinking (WWWT) is an innovative psychoeducational program offered by Maternal, Child and Family Health (MCFH) nurses to small groups of fathers, mothers and their 4-week old babies, supported by a booklet and worksheets. WWWT provides knowledge and skills about sustainable strategies to settle a baby to sleep, and for enhancing parents’ responses to their changed emotional needs. There is good evidence from a before-and-after controlled study that WWWT can prevent the onset of anxiety and depression by addressing these two neglected risks to mental health. WWWT is currently being implemented in Victorian MCFH centres in a NHMRC-funded cluster randomised controlled trial. Anonymous surveys completed by men and women after participating in the program show that WWWT is highly salient and acceptable to new parents.

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RESOURCES ON THE WEB

WWWT is a universal intervention, and it is therefore essential that it be accessible to all first-time parents, regardless of their circumstances. Accessibility is being promoted by an interactive website (www.whatwerewethinking.org.au), cultural adaptation for families of Aboriginal or Torres Strait Islander, Vietnamese and Sri Lankan backgrounds, and a filmed segment using actors on DVD. The Teleweb initiative, funded by the Australian government e-mental health measure in partnership with Jean Hailes for Women's Health, aims to extend WWWT reach using social media. The WWWT phone app is in preparation and we have launched the WWWT blog.

For the WWWT blog, men and women with their first baby do the WWWT program with a MCFH nurse facilitator in two one-hour videoconferencing sessions (eg Skype). Parents then blog about using the WWWT ideas and strategies in their new family life, until their baby is about 6 months old (<http://www.jeanhailes.org.au/jh-blog-home/wwwt-blog>). Blogs and public comments are moderated before being posted. The Teleweb initiative is being independently evaluated.

We are seeking first time parents, especially fathers, of varied backgrounds and contexts. We hope that bloggers will promote the WWWT concepts and ideas to a large and diverse audience, including from rural and remote Australia. Participation as bloggers provides new parents with access to the evidence-based WWWT program supported by a MCFH nurse facilitator, connection with others at the same life stage, and a small gift in recognition of their contributions.

For further details or to participate please contact James Shirvill james.shirvill@jeanhailes.org.au

And see the report by these researchers titled "Common mental disorders in women and men in the first six months after the birth of their first infant" in the Research section below.

ONGOING RESEARCH

Dads tuning in to Kids – update November 2013

This Bulletin has previously described the Tuning in to Kids parenting education program that targets parent emotion socialization of young children, and also reported on a pilot study of a modified version of the program specifically for fathers: Dads Tuning in to Kids (DadsTIK). The pilot evaluation of DadsTIK is now in press, and DadsTIK is currently being evaluated in a randomised controlled trial with 150 fathers (131 fathers enrolled to date). The RCT includes pre-, post- and 6-month follow-up questionnaire measures for fathers to complete (child behaviour, fathers' parenting confidence, emotion socialisation beliefs and practices, and their emotional well-being) with child outcomes additionally reported on by mothers and preschool teachers. The anticipated completion date for this trial is February 2015.

For further information please contact Dr Katherine Wilson wilk@unimelb.edu.au

ONGOING RESEARCH

The New Dad Studies

Over the past five years, much of the research of the Boston College Center for Work & Family's has focused on the changing role of fathers. An under-researched area within the work-life field, recent evidence suggests that working fathers may experience as much or more work-family conflict than their female counterparts. As a result, the Center has undertaken and released the results of four unique studies that focus on the lives of these men:

The New Dad: Exploring Fatherhood within a Career Context (2010)

http://thenewdad.org/the_new_dad_research/the_new_dad_exploring_fatherhood_within_a_career_context_2010

The New Dad: Caring, Committed, and Conflicted (2011)

http://thenewdad.org/the_new_dad_research/the_new_dad_caring_committed_and_conflicted_2011

The New Dad: Right at Home (2012)

http://thenewdad.org/the_new_dad_research/the_new_dad_right_at_home_2012

See <http://www.thenewdad.org/>

Boston College center for work & family paternity leave survey

If you are a father of a child under 18 years of age and are willing to spend fewer than 10 minutes of your time to participate in a short survey, please click on the link below. The survey is anonymous and confidential. Your participation will greatly assist the Boston College research team to help us provide guidance to organizations and fathers about paternity leave.

Boston College Paternity Leave Survey link: https://bc.qualtrics.com/SE/?SID=SV_3E4FvYD9gllx3q5

Pacific fatherhood measurement scale

My current research project involves the development of a Pacific fatherhood involvement measurement tool to enable the collection of accurate and relevant information from Pacific fathers about their fathering behaviours and practices. An examination of many of the fathering measures and scales currently available and utilised nationally and internationally, has revealed their lack of appropriateness and suitability for use with Pacific populations. This is evidenced in their non-consideration of cultural values and beliefs, and the experiences of being a migrant or minority father raising their children in a different country.

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ONGOING RESEARCH

Key policy and research priorities outlined by the NZ Families Commission, and the Health Research Council of New Zealand, identify a clear need to enhance our understanding of health issues involving effective parenting, fathering roles, and family support structures which promote resiliency and positive development outcomes amongst children and young people. Professionals working with Pacific families have expressed the difficulties of operating in systems where relevant data are lacking. The development of this measurement scale will provide agency end-users and policy makers with more accurate and reliable information concerning Pacific fathers and their families.

This project will be undertaken as part of the Pacific Islands Families (PIF) Study, a longitudinal birth cohort study of Pacific fathers, mothers, and their children, which regularly collects information encompassing a holistic range of psychosocial factors. Given the size of the PIF Study, this research project also provides an ideal opportunity to provide a more in-depth investigation of ethnic specific differences in contemporary Pacific fathering practices and behaviours.

For more information contact:

Dr El-Shadan Tautolo, Associate Director, Pacific Islands Families (PIF) Study, Auckland University of Technology (AUT) 09 921 9999 x7527 | 021 120 7523 dtautolo@aut.ac.nz

Fathering children with autism: needs, practices and services use

I am a Senior Lecturer at Leeds Metropolitan University, England and have been involved in fatherhood research since 2005. In previous studies, colleagues and I have been concerned with issues of father inclusion and service use in areas of socio-economic disadvantage. Specifically, we undertook research on inclusive approaches to engaging fathers in preschool family services and later, in early learning transitions, from nursery to reception class. My focus in the field has shifted this year, with the award of a two year Leverhulme Research Fellowship to study the experiences of fathers of children with autism in the UK.

Autism is acknowledged as a severe and lifelong disability, having a range of significant impacts on individuals, families and society. Parenting support is reported as one of the most effective approaches to both preventing and addressing difficulties. However, unsurprisingly, very little is known about the parenting needs, practices or service requirements of fathers of children with autism. Therefore, a national survey of these fathers will be undertaken during the first year of the Leverhulme study, to be followed by c30 semi-structured interviews during the second, to explore themes emerging from the survey in more depth. Key areas to be explored will relate to dimensions of father involvement, identified by Hawkins et al (2002). In addition, a range of autism specific questions will be included, focusing on father interactional and communication strategies, especially important, since children with autism can be particularly receptive to the rough and tumble type of play (Wing, 1996) which has been found to be more characteristic of fathers' interaction than mothers (Crawley and Sherrod, 1984).

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ONGOING RESEARCH

Fathers' use of services will be explored, with a focus on those strategies and approaches which have been most and least helpful. I hope that findings from this research will be of benefit to policy makers, practitioners and parents, particularly in informing the future development of provision for fathers across education, health and social care, as well as indicating directions for further research.

For further information, please contact Carol Potter: c.a.potter@leedsmet.ac.uk

RESEARCH

Fathers influence on adolescent's problem behaviours

FRN comment: *In the two decades since Vicky Phares published her landmark paper "Where's poppa? The relative lack of attention to the role of fathers in child and adolescent psychopathology" in the American Psychologist there has been a gradual shift to include male parents in research on childhood problems (although see her follow up paper "Still looking for Poppa" published in 2005). The papers included below focus on the father's role in the development of ADHD, externalizing and internalizing behaviour, conduct problems and depression. The papers by Wang and Kenny and Lansford and colleagues both use longitudinal data from US parents to map fathers' autonomy-relevant parenting and their harsh verbal discipline on adolescent's behaviour problems. The Chang et al study compared Taiwanese fathers and their children with ADHD to examine the possible effect of ADHD on father's parenting and father-child interaction.*

Longitudinal links between fathers' and mothers' harsh verbal discipline and adolescents' conduct problems and depressive symptoms

This study used cross-lagged modelling to examine reciprocal relations between maternal and paternal harsh verbal discipline and adolescents' conduct problems and depressive symptoms. Data were from a sample of 976 two-parent families and their children (51% males; 54% European American, 40% African American). Mothers' and fathers' harsh verbal discipline at age 13 predicted an increase in adolescent conduct problems and depressive symptoms between ages 13 and 14. A child effect was also present, with adolescent misconduct at age 13 predicting increases in mothers' and fathers' harsh verbal discipline between ages 13 and 14. Furthermore, maternal and paternal warmth did not moderate the longitudinal associations between mothers' and fathers' use of harsh verbal discipline and adolescent conduct problems and depressive symptoms.

Wang, M. T., & Kenny, S. (2013). Longitudinal links between fathers' and mothers' harsh verbal discipline and adolescents' conduct problems and depressive symptoms. *Child development*.

RESEARCH

Mothers' and fathers' autonomy-relevant parenting: Longitudinal links with adolescents' externalizing and internalizing behaviour

The goal of this study was to advance the understanding of separate and joint effects of mothers' and fathers' autonomy-relevant parenting during early and middle adolescence. In a sample of 518 families, adolescents (49 % female; 83 % European American, 16 % African American, 1 % other ethnic groups) reported on their mothers' and fathers' psychological control and knowledge about adolescents' whereabouts, friends, and activities at ages 13 and 16. Mothers and adolescents reported on adolescents' externalizing and internalizing behaviors at ages 12, 14, 15, and 17. Adolescents perceived their mothers as using more psychological control and having more knowledge than their fathers, but there was moderate concordance between adolescents' perceptions of their mothers and fathers. More parental psychological control predicted increases in boys' and girls' internalizing problems and girls' externalizing problems. More parental knowledge predicted decreases in boys' externalizing and internalizing problems. The perceived levels of behavior of mothers and fathers did not interact with one another in predicting adolescent adjustment. The results generalize across early and late adolescence and across mothers' and adolescents' reports of behavior problems. Autonomy-relevant mothering and fathering predict changes in behavior problems during early and late adolescence, but only autonomy-relevant fathering accounts for unique variance in adolescent behavior problems.

Lansford, J. E., Laird, R. D., Pettit, G. S., Bates, J. E., & Dodge, K. A. (2013). Mothers' and Fathers' Autonomy-Relevant Parenting: Longitudinal Links with Adolescents' Externalizing and Internalizing Behavior. *Journal of youth and adolescence*, 1-13.

Father's parenting and father-child relationship among children and adolescents with attention-deficit/hyperactivity disorder.

Objective: Western literature documents impaired father-child interactions in addition to strong evidence of impaired mother-child interactions in children with attention-deficit/hyperactivity disorder (ADHD). However, the parenting process of fathers and their engagement in the Asian family with children with ADHD remain unexplored. The authors compared fathering and father-child relationships between children with ADHD and those without ADHD and identified the correlates of these paternal measures. **Methods:** Fathering and father-child relationships were compared between 296 children with attention-deficit/hyperactivity disorder (ADHD) and 229 children without ADHD in Taiwan. All child participants and their parents received psychiatric interviews for the diagnosis of ADHD and other psychiatric disorders of the children, and their fathers were assessed for ADHD, anxiety and depressive symptoms. Both the fathers and children reported on the father's parenting style, father-child interactions, behavioral problems at home, and perceived family support. **Results:** The results showed that children with ADHD received less affection/care and more overprotection and authoritarian control from their fathers.

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RESEARCH

They had less active interactions with their fathers, more severe behavioral problems at home; and perceived less family support than children without ADHD. Correlates for impaired father–child interactions included childhood ADHD symptoms, any comorbidity, age at assessment, and the father's neurotic personality and depressive symptoms. In addition, the children reported more negatively on fathering and father–child interactions than the fathers. Conclusions: Our findings suggest the negative impacts of ADHD on the father's parenting style and father–child interactions. Clinical interventions aimed at improving father–child interactions warrant more attention.

Chang, L. R., et al. (2013). Father's parenting and father–child relationship among children and adolescents with attention-deficit/hyperactivity disorder. *Comprehensive psychiatry*, 54(2), 128-140.

Anxiety more common than depression in postnatal mothers and fathers

FRN comment: *Researchers wishing to promote public attention to new parents' mental health (and gain funding for further research) understand that using the term 'depression' helps garner support for what is seen as a serious problem. Yet researchers also acknowledge that depression is only part of the picture and that anxiety and distress should be considered when addressing mental health in new families. Studies such as the one reported here, by Wynter and colleagues should assist in transitioning from the fixation on depression to a broader and more realistic framework for helping new parents stay mentally healthy.*

Common mental disorders in women and men in the first six months after the birth of their first infant: A community study in Victoria, Australia.

Studies of postpartum mental health have focused predominantly on women and on depression. There is limited evidence regarding men's postpartum mental health and about other common mental disorders, such as anxiety and adjustment disorders, which may also be relevant at this life phase. The main aim of this study was to establish the period prevalence of depression, anxiety, and adjustment disorders in primiparous women and their male partners in the first six months postpartum. Methods: English-speaking couples were recruited in five local government areas in Victoria, Australia. Women and men completed separate telephone interviews which included the Edinburgh Postnatal Depression Scale (EPDS) and selected Depression and Anxiety modules of the Composite International Diagnostic Interview. DSM-IV criteria were used to classify adjustment disorders, based on subclinical symptoms not meeting criteria for diagnoses of major or minor depression or generalised anxiety disorder. The main outcome was any common mental disorder (depression, anxiety or adjustment disorder) in the first six months postpartum. Results: Complete data were available for 172 couples. The 6-month period prevalence of mental health problems was 33% for women and 17% for men.

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RESEARCH

The most common diagnosis in both women and men was adjustment disorder with anxiety symptoms. Limitations: Unpartnered women and men, women whose partners were not willing to participate and those who did not have sufficient English fluency to complete the interviews were excluded from the sample. The results of this study cannot be generalised to these populations. Conclusion: The most common postnatal mental health problem in both women and men in this community sample was anxiety.

Wynter, K., Rowe, H., & Fisher, J. (2013). Common mental disorders in women and men in the first six months after the birth of their first infant: A community study in Victoria, Australia. *Journal of affective disorders*, 151(3), 980-985. doi: 10.1016/j.jad.2013.08.021

Stretching the science: Overnight care of young infants

FRN comment: *In the July 2013 Bulletin (19) we reported on the study by Tornello and colleagues of overnight care and attachment among separated parents in the US Fragile Families population. Their conclusion, that frequent overnight stays with separated fathers leads to more insecure attachment (to mothers) was widely reported. Debate has continued however about the reasonable interpretation of these findings with accusations of unscientific reasoning being applied to the studies' authors and their critics. The abstracts below, in order are: the Tornello paper, the critique Miller & Kruk, and the response by Tornello and colleagues. A critique of the original study was also published on the website of the Platform for European fathers <http://europeanfathers.wordpress.com/2013/08/05/32/> . One of the points in the debate is the assumption that the infant-mother attachment measure is the only one that matters. The following investigation by Lickenbrock and colleagues reports on a longitudinal study of toddler's temperament, attachment and compliance (thought to indicate toddler's social competence). The infant's attachment to the mother, measured at 1 year did indeed predict toddler's compliance at 20 months. However the study also found that the link between infant-mother attachment and compliance depended on infant-father attachment security. Unfortunately the issue of infant attachment when parents separate is complicated. Although policy-makers, practitioners and judges need evidence-based guides for making decisions about parent-infant contact, we are still struggling to describe the complexity of infant's attachment to both mothers and fathers.*

Overnight custody arrangements, attachment, and adjustment among very young children.

Large numbers of infants and toddlers have parents who live apart due to separation, divorce, or non-marital/noncohabiting childbearing, yet this important topic, especially the controversial issue of frequent overnights with nonresidential parents, is understudied. The authors analyzed data from the Fragile Families and Child Wellbeing Study, a longitudinal investigation of children born to primarily low-income, racial/ethnic minority parents that is representative of 20 U.S. cities with populations over 200,000.

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Among young children whose parents lived apart, 6.9% of infants (birth to age 1) and 5.3% of toddlers (ages 1 to 3) spent an average of at least 1 overnight per week with their nonresident parent. An additional 6.8% of toddlers spent 35% – 70% of overnights with nonresident parents. Frequent overnights were significantly associated with attachment insecurity among infants, but the relationship was less clear for toddlers. Attachment insecurity predicted adjustment problems at ages 3 and 5, but frequent overnights were not directly linked with adjustment problems at older ages.

Tornello, S. L., Emery, R., Rowen, J., Potter, D., Ocker, B., & Xu, Y. (2013). Overnight custody arrangements, attachment, and adjustment among very young children. *Journal of Marriage and Family*, 75(4), 871-885.

Maternal attachment, paternal overnight contact, and very young children's adjustment: comment on tornello et al. (2013)

We are compelled to respond to Tornello et al. (2013) because of concerns about measures and theory and because some findings of their study were misleadingly presented. Their results, as described in the abstract and discussion section, were reported in news media aimed at the general public in the United States ("Divorce Study," 2013; Hallas, 2013; HealthDay News, 2013b) and overseas (Asian News International, 2013; Furness, 2013), physicians (HealthDay News, 2013a; Scutti, 2013), and psychologists (British Psychological Society, 2013; Wood, 2013), making these inaccuracies more serious in their impact. We critique the measure used for attachment in Tornello et al.'s study, the results of the investigation with respect to attachment and adjustment, and the authors' argument about a burden of proof. Finally, we summarize our concerns with this highly publicized yet problematic article.

Millar, P., & Kruk, E. (2014). Maternal Attachment, Paternal Overnight Contact, and Very Young Children's Adjustment: Comment on Tornello et al. (2013). *Journal of Marriage and Family*, 76(1), 232-236. doi: 10.1111/jomf.12071

Rejoinder to Millar and Kruk (2014): who assumes the burden of proof when there is no neutral null hypothesis?

We welcome the chance to respond to Millar and Kruk's (2014) comment primarily because this gives us an opportunity to expand on an issue that we think deserves broader consideration: Where does the burden of proof lie when there is no neutral null hypothesis? Tests of statistical significance continue to rely on the null hypothesis testing premise. Scientists do not reject the null hypothesis unless statistically significant ($p < .05$) support is found for some alternative. But the null hypothesis is not empty substantively when one is addressing many questions of interest to social scientists. This includes the topic of our research: whether frequent overnights in both mothers' and fathers' households are beneficial or harmful to very young children (Tornello et al., 2013).

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As a result, advocates of one position or the other often try to capture the null hypothesis, shifting the burden of proof on to the other side. Millar and Kruk do precisely this in their comment, as they have attempted to do elsewhere (e.g., Kruk, 2012; Millar, 2009). They say, "Thus, we should have the expectation that, absent evidence to the contrary, visitation and attachment to a father will, on average, be in children's best interests" (p. 234). We suggest that Millar and Kruk are free to advocate for this position on any ground they wish, except for one: the weight of scientific evidence. Before elaborating, we summarize our study and discuss several questionable and simply wrong assertions made in the Millar and Kruk commentary.

Emery, R. E., & Tornello, S. L. (2014). Rejoinder to Millar and Kruk (2014): Who Assumes the Burden of Proof When There Is No Neutral Null Hypothesis? *Journal of Marriage and Family*, 76(1), 237-240. doi: 10.1111/jomf.12070

Early temperament and attachment security with mothers and fathers as predictors of toddler compliance and noncompliance

This longitudinal study (n=106) examined associations between temperament, attachment, and styles of compliance and noncompliance. Infant negative temperamental reactivity was reported by mothers at 3, 5 and 7 months. Infant attachment was assessed (Strange Situation) at 12 (mothers) and 14 months (fathers). Toddlers' styles of compliance/noncompliance were measured using two laboratory contexts (cleanup/delay) at 20 months. Results indicated that temperament and attachment predicted toddler behaviour. Toddlers who were secure with mothers and low in temperamental negative reactivity showed more committed compliance than those who were insecure and low in negative reactivity or secure and high in negative reactivity. In addition, interactions revealed that relations between infant-mother attachment and defiance depended on infant-father attachment security, temperament and context. Findings highlight the differential and complex roles of temperament and attachment as potential precursors of later social competence.

Lickenbrock, D. M., Braungart-Rieker, J. M., Ekas, N. V., Zentall, S. R., Oshio, T., & Planalp, E. M. (2013). Early Temperament and Attachment Security with Mothers and Fathers as Predictors of Toddler Compliance and Noncompliance. *Infant and Child Development*, 22(6), 580-602. doi: 10.1002/icd.1808

Fathers support for mothers giving birth in non-western contexts

FRN comment: *The role of fathers during a mother's labour and birth is one of the areas where we have seen considerable change in Western Europe, north America and in Australia. These two reports, one from Nepal and one from Kenya suggest that the globalization of family life, where western notions of parenting become accepted across all cultures, is continuing even where this runs against strongly held beliefs.*

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Impact on perceived postnatal support, maternal anxiety and symptoms of depression in new mothers in Nepal when their husbands provide continuous support during labour

Background: when a husband provides continuous support during his wife's labour, his presence is considered effective in reducing her dissatisfaction with the child birth process. The impact of this on the postnatal well-being of a new mother, however, is not clear. Objective: to examine the impact on postnatal support, maternal anxiety and symptoms of depression experienced by new mothers in Nepal when their husband supported them continuously during labour. Method: the study involved 231 Nepali women, of whom 77 were supported continuously by their husbands, 75 by female friends, and 79 were not supported by any companion during childbirth. They were contacted at six to eight weeks postpartum, when postpartum support questionnaires, a state-trait anxiety inventory and the Edinburgh postnatal depression scale were administered. Structural equation modelling was conducted. Findings: observations showed that continuous support from a husband during his wife's labour was related to a greater degree of postnatal support than those who were not supported by their husband during labour ($\beta=0.23$, $p=0.001$). Similarly, the more the women considered they were being supported, the less likely they were to experience maternal anxiety, which in turn was associated with a lower level of depression. These findings were consistent, even after adjustments for the effect of female support during the postnatal period. Conclusion: the study suggests that continuous support from husbands during labour has a direct impact on the perceived postnatal support, and an indirect impact on anxiety and depression in new mothers in Nepal.

Sapkota, S., Kobayashi, T., & Takase, M. (2013). Impact on perceived postnatal support, maternal anxiety and symptoms of depression in new mothers in Nepal when their husbands provide continuous support during labour. *Midwifery*. doi: 10.1016/j.midw.2012.11.010

Perspectives of men on antenatal and delivery care service utilisation in rural Western Kenya: a qualitative study

Poor utilisation of facility-based antenatal and delivery care services in Kenya hampers reduction of maternal mortality. Studies suggest that the participation of men in antenatal and delivery care is associated with better health care seeking behaviour, yet many reproductive health programs do not facilitate their involvement. This qualitative study conducted in rural Western Kenya, explored men's perceptions of antenatal and delivery care services and identified factors that facilitated or constrained their involvement. Methods: Eight focus group discussions were conducted with 68 married men between 20-65 years of age in May 2011. Participants were of the Luo ethnic group residing in Asembo, western Kenya. The area has a high HIV prevalence and polygamy is common. A topic guide was used to guide the discussions and a thematic framework approach for data analysis. Results: Overall, men were positive in their views of antenatal and delivery care, as decision makers they often encouraged, some even 'forced', their wives to attend for antenatal or delivery care.

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Many reasons why it was beneficial to accompany their wives were provided, yet few did this in practice unless there was a clinical complication. The three main barriers relating to cultural norms identified were: 1) pregnancy support was considered a female role; and the male role that of provider; 2) negative health care worker attitudes towards men's participation, and 3) couple unfriendly antenatal and delivery unit infrastructure. Conclusion: Although men reported to facilitate their wives' utilisation of antenatal and delivery care services, this does not translate to practice as adherence to antenatal-care schedules and facility based delivery is generally poor. Equally, reasons proffered why they should accompany their wives are not carried through into practice, with barriers outweighing facilitators. Recommendations to improve men involvement and potentially increase services utilisation include awareness campaigns targeting men, exploring promotion of joint HIV testing and counselling, staff training, and design of couple friendly antenatal and delivery units.

Addressing fathers in the domestic violence area

FRN comment: *While there has been increased attention to the impact of domestic violence (also known as intimate partner violence) in children, a large part of our approach to father's role in situations of family violence focuses on removing the father from his children. This program, in the initial stages of development, provides a welcome example of tackling the issue of fathers' connection to their children while addressing.*

Fathers for change: A new approach to working with fathers who perpetrate intimate partner violence.

Legal and social service systems rarely acknowledge the status of men as fathers in the conceptualization and delivery of interventions for intimate partner violence (IPV). Large percentages of men who are arrested and mandated to intervention programs for IPV are fathers who continue to live with or have consistent contact with their young children despite aggression and substance use. There are currently no evidence-based treatments that address co-morbid substance abuse and domestic violence perpetration with emphasis on paternal parenting for fathers. This article will describe the components of a new intervention, Fathers for Change, which addresses the co-morbidity of substance abuse, domestic violence, and poor parenting in fathers of young children. Fathers for Change is unique in its focus on the paternal role throughout treatment. A case example and initial feasibility of the intervention will be described to provide an understanding of the key ingredients and the gap this intervention could fill in the field once tested in efficacy trials.

Stover, C. S. (2013). Fathers for Change: A New Approach to Working With Fathers Who Perpetrate Intimate Partner Violence. *Journal of the American Academy of Psychiatry and the Law Online*, 41(1), 65-71.

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