



“THERE’S NOTHING WRONG WITH MY KID”: INVOLVING FATHERS IN TREATMENT OF CHILDREN WITH DISABILITIES



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CONTINUING EDUCATION WORKSHOP – 8TH ANNUAL EARLY CHILDHOOD MENTAL HEALTH “WE CAN’T WAIT” CONFERENCE SEPTEMBER 15TH, 2017

LEARNING OBJECTIVES

1. Identify important psychological dynamics for fathers of children with behavioral health disorders
2. Outline barriers to fathers’ involvement in their children’s mental health treatment
3. Cite best practices in how providers can better engage fathers of their patients aged 0-5 years

I hereby pinky swear that I have no involvement with industry and cannot identify any conflict of interest in this presentation!

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A COUPLE OF SHAMELESS PLUGS...

International Fathers' Mental Health Day –

June 18th, 2018

Web Page: <http://www.postpartum.net/get-help/resources-for-fathers/ifmhd/>

Twitter: @INTFathersMHDday

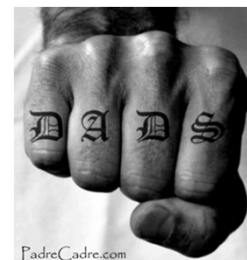
Facebook: www.facebook.com/IntFathersMHDday

Padre Cadre – Social Media Just for Dads

Web Page: <http://www.padrecadre.com>

Twitter: @padrecadre

Facebook: www.facebook.com/padrecadre



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TRADITIONAL MALE SOCIALIZATION

Traditional Masculinity (Brannon, 1976)

1. Antifemininity- “No Sissy Stuff”
 2. Status and Achievement – “The Big Wheel”
 3. Inexpressiveness and Independence “The Sturdy Oak”
 4. Adventurousness and Aggressiveness “Give ‘Em Hell”
- Dad’s Role Is To Support Mom And Earn
 - Uninvolved with Children 0-5

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GENERATIVE FATHERS (HAWKINS & DOLLAHITE, 1996)

“The task of establishing and guiding the next generation.”

Nontraditional Masculine Norms

Nurturing, Hands-On Care of Child

Emotionally Open to Mom and Baby

Few Models of Generative Fathers – “Generation Gap”

Mental Health Implications

Changing Roles Brings Stress/Uncertainty

One in 10 have depression; 2-18% have anxiety

History of MH Issues/Abuse/Trauma

Gender Role Conflict – ↑ MH probs, ↓ Help-Seeking

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POSITIVE MASCULINITIES (KISELICA & ENGLAR-CARLSON, 2010)

- **Male Relational Styles** – Fun, shared activities
- **Male Ways of Caring** – Caring, protection, and “action empathy”
- **Generative Fatherhood** – Developing kids
- **Male Self-Reliance** – Connected, yet “his own man”
- **Workplace/Provider** – Achievement, purpose, and meaning
- **Male Courage/ Risk-Taking** – Worthwhile, sensible risks
- **Group Orientation** – Identity in community
- **Humanitarian Service** – Social interest and common good
- **Humor** – Healing, coping, and connecting
- **Male Herosim** – Overcoming obstacles

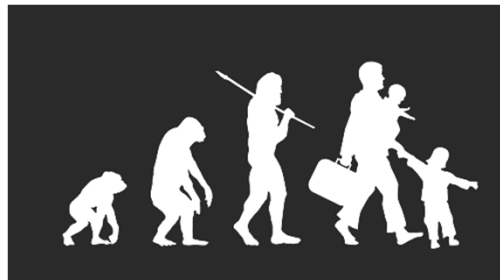
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THE FATHERHOOD ROLE

(ROSENBERG & WILCOX, 2006)

- Fostering a positive relationship with the child's mother
- Spending time with the child
- Nurturing the child
- Disciplining appropriately
- Serving as a guide to the outside world
- Protecting and providing
- Being a role model



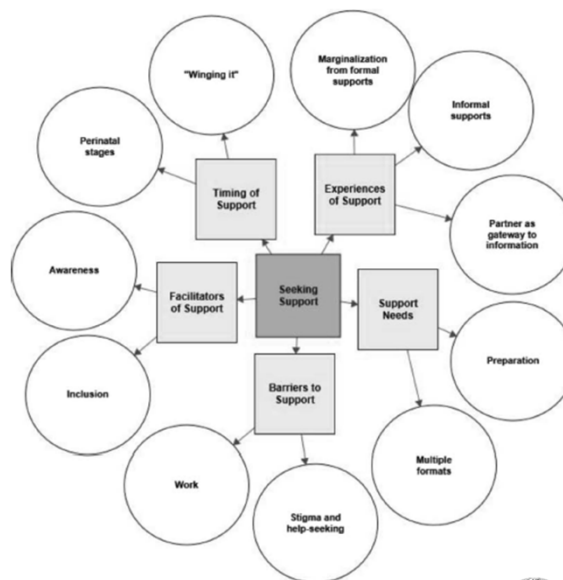
BE ACTIVELY INVOLVED WITH MOM AND BABY

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NEW DADS' SOCIAL SUPPORT – PARENTING/MH

(ROMINOV, GIALLO, PILKINGTON, & WHELAN, 2017)



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THE PATERNAL ACTIVATION RELATIONSHIP



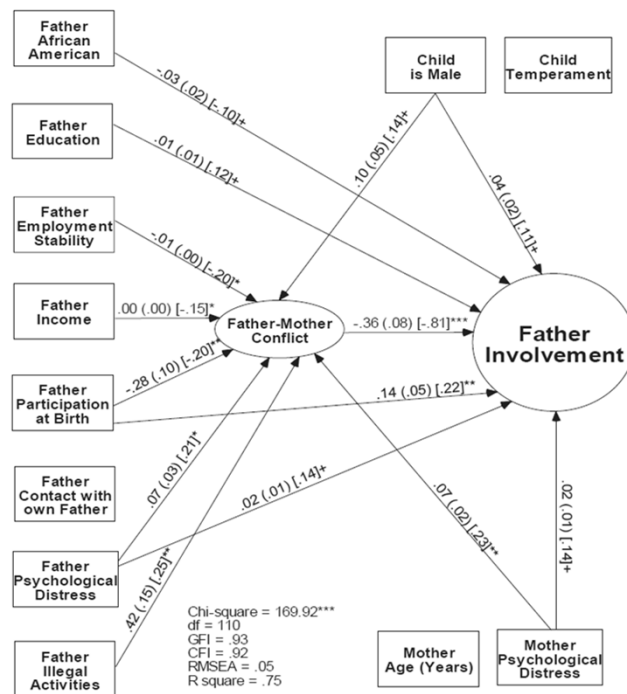
“The affective bond that enables children to open up to the outside world, focusing primarily on parental stimulation of risk-taking and control.”
(Paquette, 2013)

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PREDICTORS OF FATHER INVOLVEMENT (COLEY, 2006)

- Parental Conflict
- Father Psychological Distress
- Father Participation at Birth
- Father Employment Stability
- Father Illegal Activities
- Mother Psychological Distress



MALE “MASKED” DEPRESSION/ MDD – MALE TYPE

(COCHRAN & RABINOWITZ, 2000; POLLACK, 1998)

- | | |
|---|--|
| Lower stress threshold | Sleep problems |
| Substance use | Feeling anxiety –especially in the morning |
| Aggressiveness, low impulse control | Abusive, hyperactive, or antisocial behavior |
| Feeling of being burned out and empty | Depressive thoughts |
| Constant, inexplicable tiredness | Criticizing |
| Irritability, restlessness, dissatisfaction | The “withdrawal response” |
| Difficulty making ordinary everyday decisions | |

ANGER, ADDICTION, AND WITHDRAWAL

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PATERNAL ANXIETY DISORDERS

(LEACH, POYSER, COOKLINE, & GIALLO, 2016)

- Prevalence rates in the prenatal period range from 4.1% - 16.0%
- Postpartum prevalence ranges from 2.4% - 18.0%
- Contributing factors work/life balance, lower relationship satisfaction, fatigue, poor partner/infant health, witnessing birth trauma, and low parental self-efficacy
- High level of paternal anxiety predicts increased infant negative affect and child internalising
- Highly comorbid with depression, so recommend assessing/measuring both anxiety and depression

Anxiety is common for new dads – assess and support both partners!

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FATHERHOOD DIVERSITY FACTORS

Points to Consider

Protective Factors

- Familismo
- Multigenerational Homes
- Adoptive Dual Dads

Risk Factors

- Historical Trauma
- High AND Low SES!
- Rigid Masculine Socialization

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SCREENING – DO IT!

“We take a whole-family approach to your baby’s well-being.”

- Edinburgh Postnatal Depression Scale (Cox, Holden, & Sagovsky, 1987)
- Patient Health Questionnaire -2 and -9 (Arroll, Goodyear-Smith, & Crengle, 2010)

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FATHERS OF CHILDREN WITH DISABILITIES (BOSTROM & BORBERG, 2014)

Themes

1. An Integral Path – No longer taking things for granted
2. Being a good father – Self-perceptions of parenting child with ID/DD
3. Dealing with the unexpected – Fathers' ways of integrating, managing, and living with child's disability

Navigating stages of loss (grieving life with typically-developing child) at different rate than partner may relate to conflict and decreased marital satisfaction.

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NEW DADS' SOCIAL SUPPORT – PARENTING/MH

(ROMINOV, GIALLO, PILKINGTON, & WHELAN, 2017)

- More demands on men's psychological resources during transition to fatherhood increase their vulnerability to mental health issues.
- Further research regarding fathers' parenting support needs because their mental health is highly interrelated with their experience as a parent.
- Dads prefer supports which are:
 1. Informal – friends, family, work colleagues, online information
 2. From fathers themselves
 3. Supportive of a “winging it” – on-the-fly approach to seeking support

Dads' “winging it” contrasted with a more measured/proactive style may relate to perceptions of fathers' not being involved “the right way.”

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WHERE DADS GO FOR INFORMATION/GUIDANCE

(ZERO TO THREE 2016 ANNUAL REPORT)

Frequently/Sometimes:

- 40-50% - Internet and social media for parenting advice
- 28-35% - Medical professionals (e.g., pediatrician)
- 23-33% - Teachers or other child care professionals
- 20-24% - Portrayals of parenting on TV shows
- 67% wish more TV shows would do a better job portraying the realities of parenting young children

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EVIDENCE-SUPPORTED PARENT TRAINING

(GUTERMAN, 2013; LUNDAHL ET AL., 2007)

When fathers do participate, we see improvements in:

- Mothers' and fathers' stress
- Mothers' and fathers' report of partner involvement
- Child maltreatment risk

Including fathers in parent training is associated with more positive changes in children's behavior and parenting practices than moms alone



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RESOURCES

- Padre Cadre – www.padrecadre.com
- Life of Dad – www.lifeofdad.com
- FB Brand New Father Group - <https://www.facebook.com/groups/bnfsupport/>
- Postpartum Support International – www.postpartum.net **Dads Chat**
- The Good Men Project - <http://goodmenproject.com/category/families/>
- Daddit - <http://www.reddit.com/r/daddit>
- Dad Labs - <http://www.dadlabs.com/>
- National Fatherhood Initiative – www.fatherhood.org

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THANKS VERY MUCH!



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