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Paternal Mental Health



What Can We Learn From Attachment?

- Children need attachment figures (Bowlby, 1970)
- Most literature is on mothers. Children also attach to fathers very likely in similar ways
- Most existing literature is on fathers' focus on provoking and challenging children to engage in physically arousing/exploration-inciting activities (Grossmann et al., 2008) aka secure base
- Studies using the AAI to assess fathers' attachment security have provided evidence that secure fathers typically have more harmonious relationships with their children than insecure fathers (Cohn et al., 1992; Grossmann et al., 2002; van IJzendoorn, 1995). In a recent longitudinal investigation, McFarland-Piazza et al. (2012) reported that secure fathers were more sensitive to their infants, whereas dismissing and unresolved fathers were more likely to engage in hostile caregiving.

* Insecurely attached fathers and relationship with children when mothering takes time/effort from their relationship with mother


Transition to Fatherhood

Perinatal period

- Modeling hypothesis
- Compensatory model

Post-partum period

- Sense of competence
- Lack of clarity about what the role is



Interaction of Paternal Competence and Parental Role Beliefs on Coparenting

Paternal Sense of Competence	Parental Role Beliefs	Likely Coparenting Outcome	Explanation
High	Egalitarian (shared parenting)	Collaborative coparenting	Fathers feel confident and role beliefs support their involvement, leading to coordinated and supportive triadic interactions.
High	Traditional (mother primary caregiver)	Higher risk of coparenting conflict or interference	Fathers feel competent and attempt to engage more, but traditional expectations limit their role, creating tension or competition.
Low	Egalitarian	Lower paternal participation but generally low conflict	Shared role beliefs exist, but fathers may withdraw due to lower confidence.
Low	Traditional	Mother-led caregiving, minimal paternal involvement	Traditional roles align with low paternal confidence, so fathers participate less and overt conflict is less likely.

A close-up photograph of an adult hand gently holding a baby's hand, symbolizing care and support. The background is softly blurred, showing a person in a white coat, likely a healthcare professional. The lighting is warm and natural, highlighting the texture of the skin.

Measuring Engagement and Infant Welfare

Paternal Mental Health

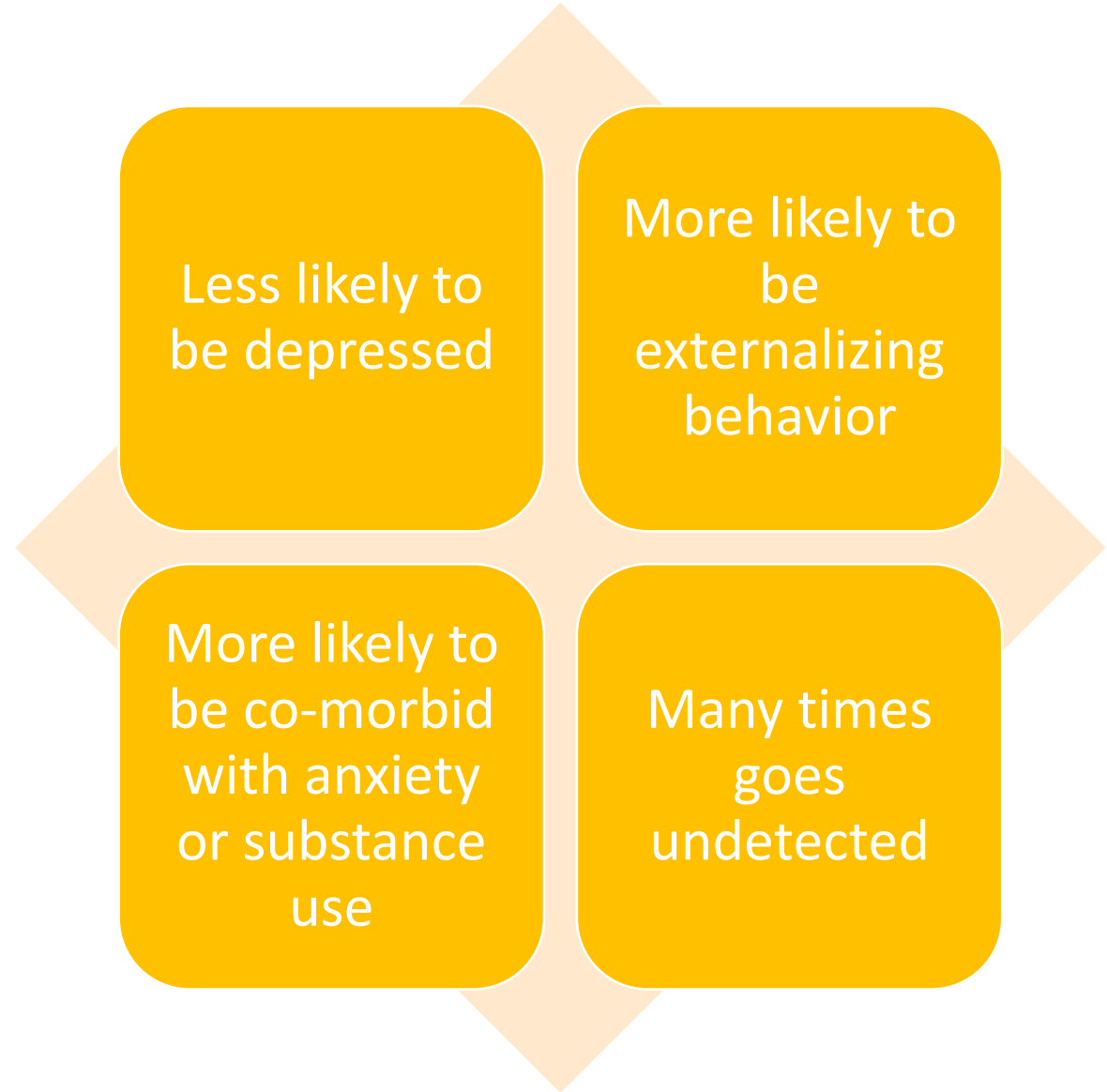
Depression

Anxiety

Epidemiology

- PPND prevalence is still not well defined, as documented by prevalence rates ranging from 4% to 25% in first-time fathers, up to 50% in the cases of concomitant depression in the partner (Bruno et al. 2020)
- The onset of a depressive symptomatology in fathers can occur from the beginning of pregnancy; depressive symptoms decrease shortly after childbirth but increase over the course of the first year (Bruno et al. 2020)
- The nature and the direction of the relationship between PPND and MPND have not yet been completely clarified; what is known is that the two conditions are significantly related, since it has been reported that maternal depression is a predictor of paternal depression, but also that early paternal depression incrementally increases the risk for continued or worsened maternal depressive symptoms through six months postpartum (Bruno et al. 2020)

Symptomatology



How to Measure Depression

- The most popular method of measuring depression is EDPS
- Let's take a look at EDPS

As you are pregnant or have recently had a baby, we would like to know how you are feeling. Please check the answer that comes closest to how you have felt **IN THE PAST 7 DAYS**, not just how you feel today.

Here is an example, already completed.

I have felt happy:

- Yes, all the time
- Yes, most of the time This would mean: "I have felt happy most of the time" during the past week.
- No, not very often Please complete the other questions in the same way.
- No, not at all

In the past 7 days:

- 1. I have been able to laugh and see the funny side of things
 - As much as I always could
 - Not quite so much now
 - Definitely not so much now
 - Not at all
- 2. I have looked forward with enjoyment to things
 - As much as I ever did
 - Rather less than I used to
 - Definitely less than I used to
 - Hardly at all
- *3. I have blamed myself unnecessarily when things went wrong
 - Yes, most of the time
 - Yes, some of the time
 - Not very often
 - No, never
- 4. I have been anxious or worried for no good reason
 - Yes, most of the time
 - Yes, quite often
 - Not very often
 - No, not at all
- *6. Things have been getting on top of me
 - Yes, most of the time I haven't been able to cope at all
 - Yes, sometimes I haven't been coping as well as usual
 - No, most of the time I have coped quite well
 - No, I have been coping as well as ever
- *7. I have been so unhappy that I have had difficulty sleeping
 - Yes, most of the time
 - Yes, sometimes
 - Not very often
 - No, not at all
- *8. I have felt sad or miserable
 - Yes, most of the time
 - Yes, quite often
 - Not very often
 - No, not at all

*5 I have felt scared or panicky for no very good reason

- Yes, quite a lot
- Yes, sometimes
- No, not much
- No, not at all


No, never

*10 The thought of harming myself has occurred to me

- Yes, quite often
- Sometimes
- Hardly ever
- Never

Administered/Reviewed by _____ Date _____

Should We
Rebrand?



Factors Influencing Paternal Postpartum Depression

Category	Variable (Risk Factor)	Odds Ratio (OR)	95% Confidence Interval
Paternal factors	Unemployment	2.59	1.42–4.74
	Low social support	1.05	1.03–1.08
	Negative life events	1.45	1.13–1.87
	Perceived stress	1.08	1.03–1.12
	Financial strain	2.07	1.13–3.81
	History of mental illness	3.48	2.49–4.86
Maternal factors	Parity (first-time fatherhood)	1.36	1.13–1.65
	Maternal postnatal depression	1.17	1.03–1.33
Family factors	Low marital satisfaction	1.40	1.22–1.61



Why Do We Care

- The obvious and that is suffering
- Effects of paternal depression on father
- Effects of paternal depression on mother
- Effects of paternal depression on child

More About Fathers

Paternal Generativity Over the Life Course

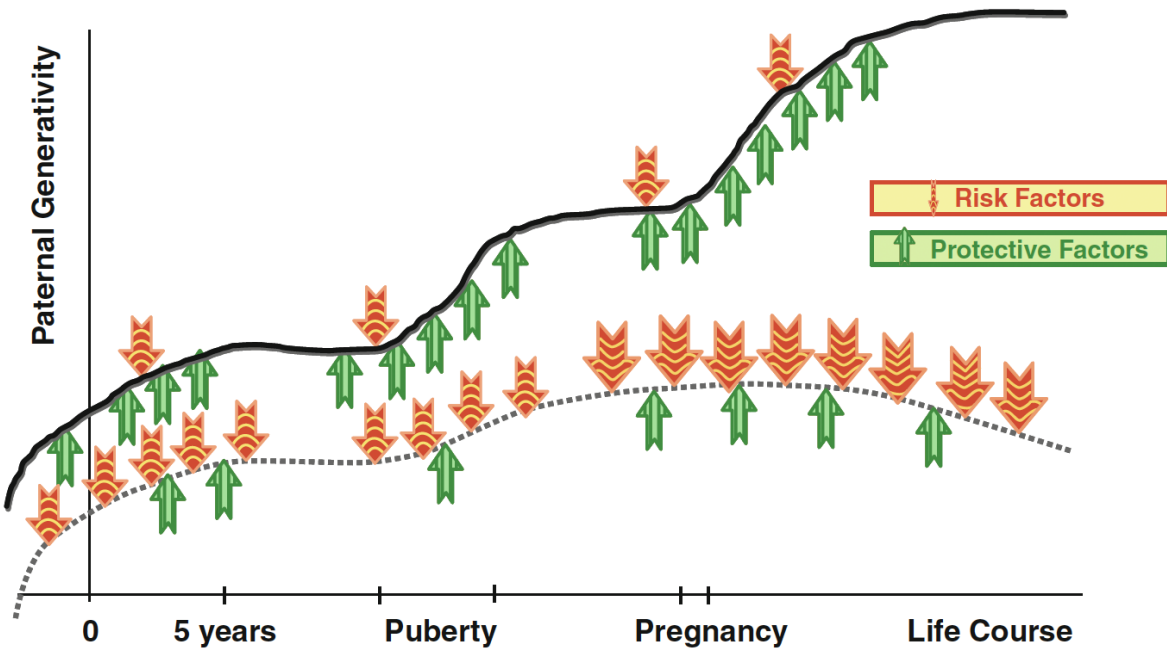
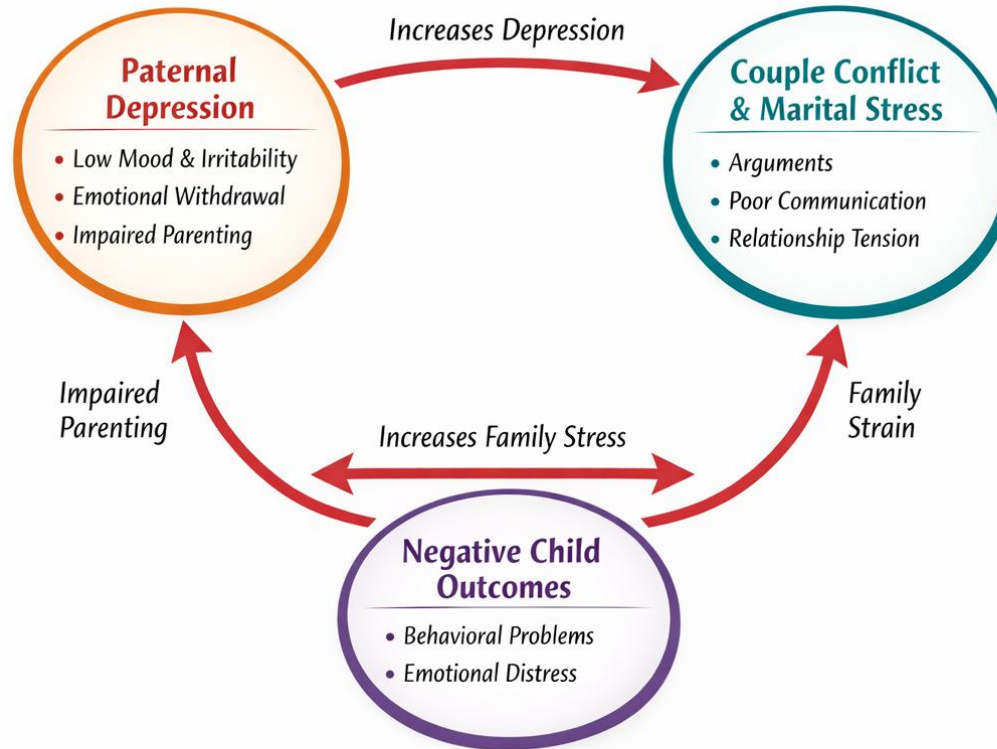


Fig. 1 How differential exposure to risk factors (downward arrows) and protective factors (upward

More About Mothers

Impact of Paternal Depression on Dysharmony in the Postnatal Period



More About Children

Type of Paternal Mental Illness	Child Development Domain Affected	Observed Child Outcomes	Effect / Evidence
Depression (prenatal or postnatal)	Emotional / Behavioral development	Increased internalizing symptoms (anxiety, depression) in children	OR ≈ 1.62 for internalizing problems
	Behavioral regulation	Increased externalizing behaviors (aggression, conduct problems)	OR ≈ 1.63
	Social-emotional development	Poorer emotional regulation, attachment difficulties	Consistent association across reviews
	Cognitive development	Lower cognitive performance and developmental scores	Evidence present but fewer studies
Anxiety disorders	Language development	Delayed language development	Observed in several meta-analyses
	Social-emotional development	Greater emotional distress and anxiety symptoms in children	Consistent associations
	Behavioral development	Increased behavioral dysregulation	Moderate evidence
Stress / psychological distress (perinatal)	Global child development	Poorer overall developmental outcomes	Associated with global developmental deficits
	Emotional development	Higher emotional reactivity and social difficulties	Consistent associations
General paternal mental illness (mixed diagnoses)	Mental health outcomes	Higher risk of child psychopathology overall	Overall pooled OR ≈ 1.54
	Social development	Poorer peer relationships and social functioning	Moderate evidence
	Adaptive functioning	Difficulties in adaptive behaviors and daily functioning	Reported across reviews
	Cognitive / academic development	Lower cognitive and academic outcomes	

Intervention	What It Involves	Effect on Fathers
 Psychoeducation	Parenting & childbirth info, stress coping	↓ Depression/Anxiety (some studies)
 Psychosocial Support	Group/Individual sessions, coping strategies	● Mixed Mental Health Improvements
 Massage-Based	Partner/Infant Massage Sessions	↓↓ Stress/Anxiety Limited Depression Effect
 Couple-Focused	Relationship & Co-Parenting Support	⊖ Minimal Effect on Depression
 Practical Skills	Infant Care & Parenting Training	↑ Confidence , ↓ Anxiety Mixed Results
 Universal Antenatal Programs	Father-Inclusive Antenatal Classes	⊖ Limited Impact on Depression

Key Takeaways

-  **Small & Heterogeneous Evidence Base**
-  **Focus on Stress/Anxiety, Not Diagnosed Depression**
-  **Challenges Engaging Fathers**
-  **Psychoeducation & Psychosocial Support Show Most Promise**



Paternal Anxiety

Offspring Outcome	Association with Paternal Anxiety	Effect Size / Notes
Overall Emotional & Behavioral Problems	Positive correlation	$r = 0.16$ (small but significant)
Behavioral Problems	Higher risk	$r = 0.19$
Emotional Problems	Higher risk	$r = 0.15$
Offspring Anxiety	Slightly higher risk	$r = 0.13$
Offspring Depression	Slightly higher risk	$r = 0.13$
General Developmental Vulnerability	Broad increased risk for psychopathology	Includes emotional dysregulation, conduct issues, attention problems

Existing Initiatives for Paternal Mental Health

Post partum international help for dads

- Hotline you can call
- Group for dads
- Resources on page

The Fatherhood Project-MGH

Fatherhood.gov

Resources

Favez, N., Tissot, H., Frascarolo, F., Stiefel, F., & Despland, J.-N. (2015). Sense of competence and beliefs about parental roles in mothers and fathers as predictors of coparenting and child engagement in mother–father–infant triadic interactions. *Infant and Child Development, 25*(4), 283–301. <https://doi.org/10.1002/icd.1934>

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Resources

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