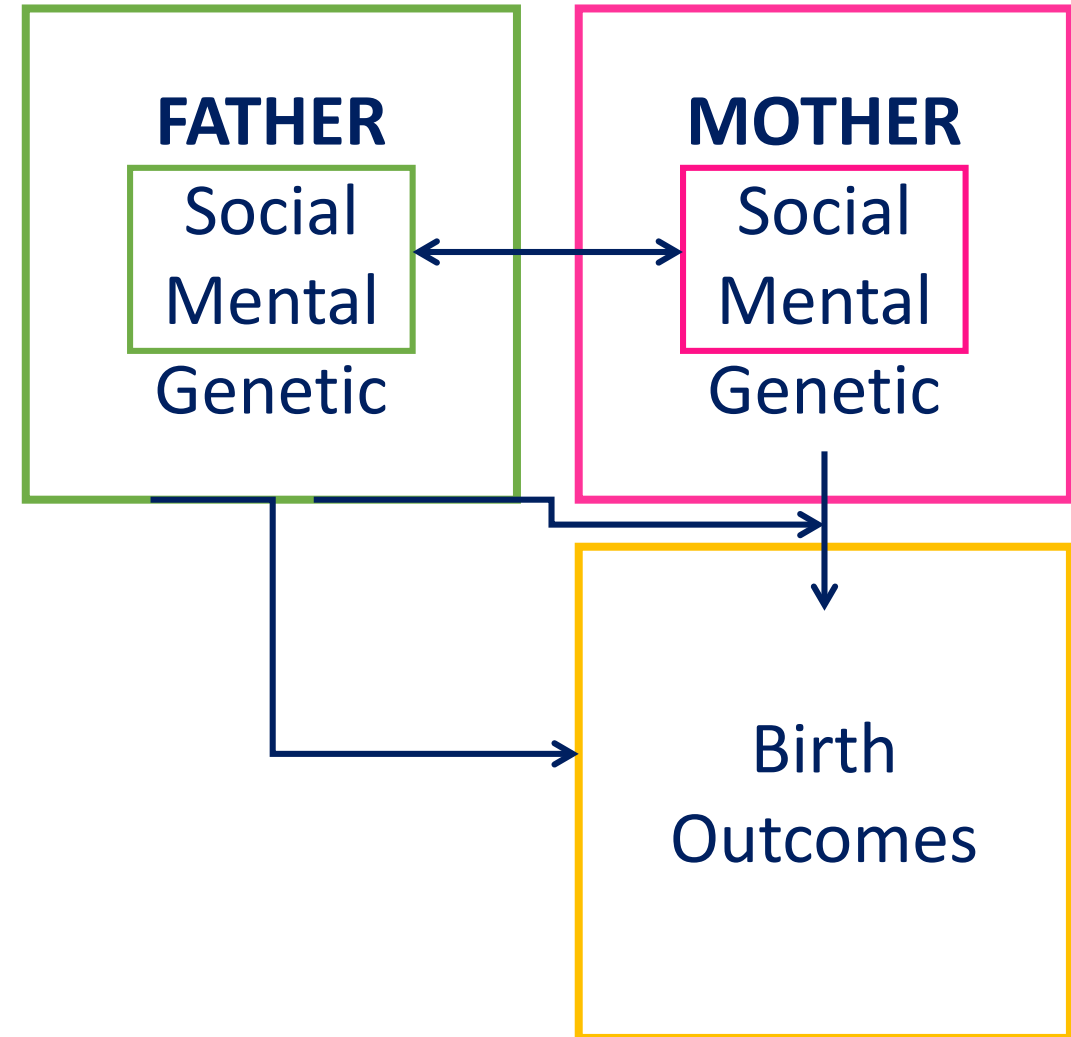




# Recognising the Importance of Positive Paternal Mental Health in Improved Emotional Outcomes for Infants

Sara Salem - SSBC Father Inclusivity Senior Project Officer







# Transition to Parenthood

- Management of expectations
- Birth experience
- Relationship dynamics
- Personal identity and purpose
- Daily routines and structures
- Financial stability
- Employment/education
- Physiological changes
- New contacts and relationships with professionals
- Childhood experience (including maltreatment)
- Conflicting opinion on parenting decisions
- Resilience and coping mechanisms
- Parity
- Physical health of the infant
- Degree of support networks
- Cultural and familial expectations
- Geographic location
- Learning ability (including comprehension of English)
- State of own physical and mental health
- Accommodation
- Experience of services
- Physical and mental preparedness
- Significant adverse life events (e.g. loss of a parent)
- Relationship with substances
- Migration status
- Journey to pregnancy (unplanned, difficult conception)





# Prevalence of Perinatal Mental Illness

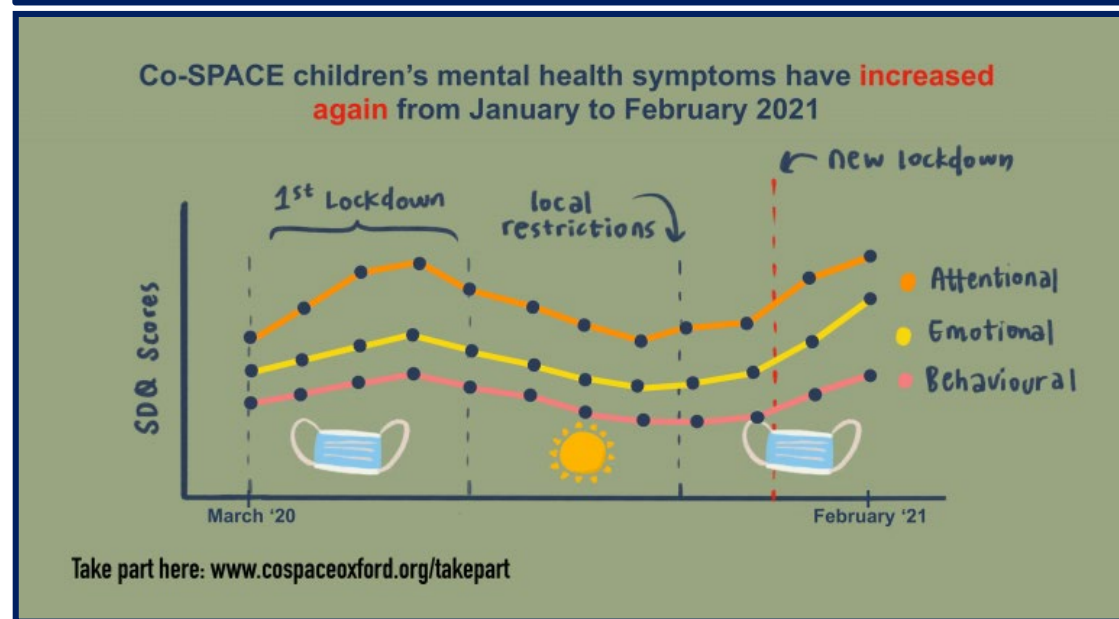
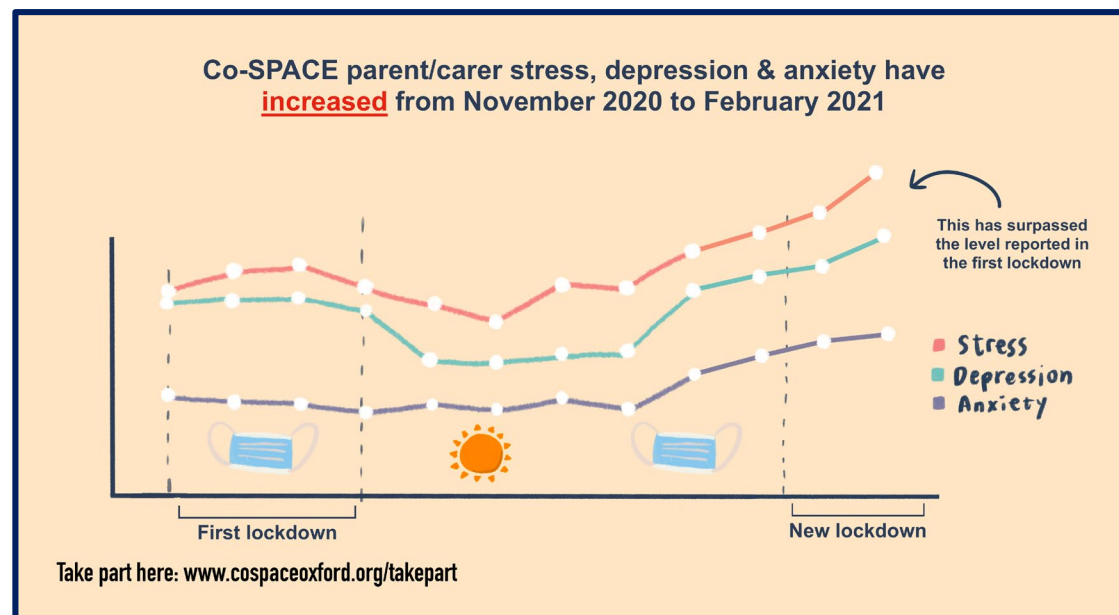
- Perinatal depression: **13% and 25% for mothers** and **8.4% and 10% for fathers**
- Anxiety disorders: **10% and 18% for mothers** and **5% to 10% for fathers**
- Of fathers living with a depressed mother of their child, **24% to 50% will experience depression themselves**
- **Younger fathers (aged 15-24 years)** are at an increased risk of developing paternal postnatal depression
- Paternal postnatal depression occurs most frequently between **3-6 months postpartum**
- **Perinatal mental illness goes undetected approximately 50% of the time**





# The Impact of Parental Mental Illness on the Infant

- **Immediate impact:** The quality of the rapid brain changes and brain development that occur during the perinatal period
- **Continued impact:** Early experiences can alter or moderate the developing function/structure of the brain
- **Future impact:** Development of the key emotional brain systems for adult emotion processing
- **Future impact:** Postnatal depression in parents who have suffered adverse childhood experiences increases the risk of intergenerational child maltreatment
- **Immediate, continued and future impact:** Altered parental behaviour towards an infant in terms of affection, attention, and sensitivity
- **Immediate, continued and future impact:** Relationship breakdown, domestic abuse, substance misuse, continued mental health difficulties, financial decline, familial disputes, disengagement with services etc. all of which impact the emotional wellbeing of infants







# Monitored Universal Perinatal Parental MH Support

## Mother

- Antenatal midwifery appointments (~7-10 contacts depending on parity/state of health/social concern/adherence to advice) screening questions
- Health Visitor antenatal appointment (typically occurring at 28-32 weeks) screening questions
- Midwifery postnatal contact screening questions
- Health Visitor New Birth Visit screening questions
- GP Well-Woman 6 week check screening questions
- Health Visitor 6-8 Week Review screening questions
- (If implicated) Health Visitor 3-4 Month Review screening questions

## Father



# Local Evidence of Fathers Experience of Services

- 10% of surveyed fathers were asked or offered support with their mental health since becoming a father\*
- 91% of fathers said it would have been useful to receive information about their own health and/or mental health\*

*"We know men are less inclined to talk, but I don't think it helps when mothers are proactively asked and fathers are ignored"*

*"I might as well have not been in the room"*

*"It's good to acknowledge you might feel depressed and if you here are services you can contact"*

*"When my first child was born I found my emotions were all over the place, I was crying uncontrollably at things like sad films. Something to prepare me would be good"*

*"Having my son was a daunting experience"*

*"Guys can be quite isolated sometimes"*

*"From my own experience, fathers are viewed as people who will not play that important a role in a child's life"*

*"I find it alienating going to suburban services as they're not very diverse"*

\*Of 49 surveyed fathers





# Supporting Paternal Mental Health

- Raising awareness locally as to the importance of positive paternal mental health on the outcomes of infants and families
- Supporting partner organisations to access training opportunities to improve paternal mental health service provision
- Development of a resource for new and expectant fathers to be distributed by health visitors antenatally
- Regular consultation with fathers to understand their local needs and expectations
- Working with partner organisations to develop more 'father-friendly' group activities
- Exploring opportunities to promote the documentation of contacts within the father's health record
- Establishing Father Inclusivity as a core value within the establishment of the Parent Infant Relationship Service



# Influencing the System

- Father Inclusivity Strategy and Operational Plan
- Regular consultation with local fathers and subsequent shared learning
- Father Inclusive Practice Group
- Responding to relevant government policy 'calls for evidence'
- Think Dads! Training
- Commissioning iHV Perinatal Mental Health Training
- Celebrating and sharing best practice
- Service Setting Checklist
- Resources and info-graphics to support and prompt father inclusive practice



# Looking after you

Lots of dads think their own feelings aren't as important as others - this isn't true.



Postnatal depression isn't something only women experience, men experience this too. So it is important not to ignore your feelings.

It's hard to know what to expect when your baby is born.

Let's find out a little more about how to manage these feelings.

11

Secondhand smoke is especially harmful to children as they have less well-developed airways, lungs and immune systems.

Children who live in a household where at least 1 person smokes are more likely to develop:

- asthma
- chest infections - like pneumonia and bronchitis
- meningitis
- ear infections
- coughs and colds

Speak to your midwifery team, the children's public health service or your GP about how smoking can affect your baby and for support in quitting.



**SMOKE FREE**

If you smoke and would like to quit, download the free NHS Smokefree app which allows you to track your progress, see how much money you're saving and access daily support.

You are four times more likely to quit smoking with support

15

If you, or your baby's mother, experience any of the following contact the Children's Public Health Service or your GP:

- Feeling low for more than a couple of weeks
- Losing interest in doing things you used to enjoy
- Change in eating habits
- Struggling to fall to sleep without reason
- Not wanting to leave the house or see others
- Feeling unable to cope with everyday life
- Somebody close to you is worried about your mental health



The NHS website has a useful self-assessment online tool that asks a series of questions and advice depending on your answers.

You do not need to give any of your personal details and it is your choice whether you follow the advice.

Please visit [nhs.uk](https://www.nhs.uk)

Enter **Depression and anxiety self-assessment quiz** in the search bar.

If you are seeking help you can self-refer to a professional:

- **Let's Talk Wellbeing:** [www.nottinghamshirehealthcare.nhs.uk/our-services/local-services/lets-talk-wellbeing](https://www.nottinghamshirehealthcare.nhs.uk/our-services/local-services/lets-talk-wellbeing) T: 0115 956 0888
- **Insight Healthcare:** [www.insighthealthcare.org](https://www.insighthealthcare.org)  
T: 0300 555 5580 / E: [nottinghamcity@insighthealthcare.org](mailto:nottinghamcity@insighthealthcare.org)
- **Trent PTS:** [www.trentpts.co.uk](https://www.trentpts.co.uk) T: 0115 896 3160

16





# Any Questions?





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