



Paternal Mental Health During the Perinatal Period

A CALL TO ACTION

Fathers Network Scotland

November 2020

(revision B)



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BACKGROUND

Paternal perinatal mental health is a critical public health issue: both in terms of the incidence of poor perinatal paternal mental health and the consequent negative impact on outcomes for mothers, infants, fathers and families. If poor paternal mental health is not addressed during this period, then the risk is that not only will there be more immediate consequences for mothers, infants and fathers, but that there will be the increased risk of longer term or lifelong negative impacts on a family unit, as well as a significant socio-economic cost.

"The impact is not just felt by women. The mental and physical health of fathers and other partners can also be affected following the birth of a new baby. We also know that between 5% and 10% of fathers may develop mental health problems in the perinatal period."

(First Minister, March 2019)

Becoming a parent is one of the most critical moments in any adult's life and is a key transformative period of psychosocial development:

"Paternal postpartum depression (PPD) is a clinically significant problem for families that is currently underscreened, underdiagnosed, and undertreated. Maternal PPD is a well-known condition and has been extensively researched. In comparison, PPD in fathers and its potential effects on the family are not widely recognized. Studies have shown the importance of optimal mental health in fathers during the postpartum period. Negative effects of paternal PPD affect marital/partner relationships, infant bonding, and child development. To promote optimal health for parents and children, pediatric nurse practitioners must stay up to date on this topic."

(Musser, Ahmed, Foli, Coddington, 2012)

- **Around 20% of mothers and 10% of fathers will suffer from postnatal depression (Fatherhood Institute, 2017)**

Based on these figures, every year upwards of 5,000 new fathers in Scotland will experience postnatal depression.

- **Around 48% of fathers suffer from postnatal anxiety and stress, up to 50% of fathers who support mums with PND go on to suffer from depression (NCT 2020)**
- **During the perinatal period, a father's mental health is crucial to the mother and baby's mental and physical well-being (Fatherhood Institute, 2017)**
- **A mother's mental health is strongly associated with the quality of her relationship with her partner (Fatherhood Institute, 2017)**
- **One of the two most significant predictors of a pregnant woman's emotional health & wellbeing is her partner's health & wellbeing (Fatherhood Institute, 2017)**
- **Children whose fathers were depressed in both the prenatal and postnatal periods have the highest risks of subsequent psychopathology (Ramchandani et al. 2008)**
- **Suicide is the leading cause of death for men under 50 across the UK (NHS England, 2018), with around 75% of suicides in Scotland being male**
- **While 100% of mums are asked about their mental health only 16% of dads surveyed were asked during routine antenatal appointments (Fatherhood Institute, 2018)**

The current COVID -19 crisis has seen anxiety and depression increasing. One study found that:

- **41% of new mums had depressive symptoms compared to 15-20% before the pandemic. 72% of new mothers felt moderate to high anxiety, a 43% increase from before the pandemic.**
(A.E. Carrington, 2020)

While the precise impact of COVID 19 on the mental health of expectant and new fathers is yet to be reported, research clearly shows that a partner's support is of crucial importance to a mother. Perinatal services must understand and act on this information. This means doing what we can to ensure that a mother's partner has his or her mental health considered and supported.

PATERNAL MENTAL HEALTH & SCOTLAND'S VISION FOR THE FUTURE

“Our vision for the Mental Health Strategy is of a Scotland where people can get the right help at the right time.” (Scottish Government 2017)

“Fathers, partners and other family members are actively encouraged and supported to become an integral part of all aspects of care.” (Best Start 2017)

“Article 18: Both parents have common responsibilities for the upbringing of the child. State Parties shall render appropriate assistance to parents and legal guardians in the performance of their child rearing responsibilities and ensure the development of institutions, facilities and services for the care of children.”
(UNCRC)

“I am confident that the staff who care for me have the right knowledge and skills.” “My family are given information and support for themselves and to support me.” (NHS Women and Families Maternal Mental Health Pledge 2020)

The perinatal period remains a key opportunity for universal services to engage fathers in supportive conversation about their mental health. We know that fathers may struggle to support mothers and infants if their mental health is not properly understood and supported during the perinatal period. However, **while 99% of expectant fathers attend at least one antenatal appointment, only 16% are asked about their mental health.**

Compounding this issue, a recent UK wide study found that only a quarter of expectant fathers are asked by perinatal health practitioners about their physical health, or their relationship with their partner. **30% of expectant fathers reported that they had not been spoken to directly by perinatal staff during this period, with only 50% able to recall being addressed by their name.** (Fatherhood Institute, 2018)

Considering the interrelation between a father's mental and physical wellbeing with that of a mother's, this lack of consideration for an expectant or new father's physical health is another crucial opportunity for meaningful engagement missed by perinatal services.

FROM PASSIVE EXCLUSION TO ACTIVE INCLUSION

In addition to understanding paternal mental health, it is essential that universal perinatal services employ father-inclusive practices: through active inclusion, not passive exclusion.

The Perinatal & Infant Mental Health Programme Board's current delivery plan sets out to *“Support the development of targeted PNIMH support for: Fathers, partners, kinship carers”*. Dads' groups, projects and workers and peer support can be effective, but families across Scotland should have equitable access to consistently inclusive practice. In order to achieve and to sustain the Scottish Government's stated ambition for *“Scotland to be the best place to grow up”*, then our universal services should consistently include the whole family around the child (Scottish Government, 2012). One way to ensure this is by embedding father-inclusive practice in universal delivery: a shift from a passive unintentional exclusion of fathers, towards one of universal active inclusion. Fathers Network Scotland's research over many years is clear: fathers often feel excluded from perinatal services, and perinatal services still tell us that they're not sure how to get dads involved.

Common challenges include:

- A lack of practitioner confidence when it comes to engaging with fathers
- A lack of information on referral forms about fathers and partners
- A lack of information collected about fathers and partners
- A service culture that is traditionally mother-focused
- Service delivery content being traditionally mother-facing
- Fathers' perception that services are primarily for mothers
- Service delivery during times when fathers often aren't available and fathers' lack of confidence to engage with services.

To put children at the centre of our practice, universal services must be actively father-inclusive. Perinatal Services should engage fathers in a confident, informed and meaningful way.

SUPPORTING TRANSFORMATIVE CHANGE ACROSS SCOTLAND

In October 2018 Fathers Network Scotland successfully sought seed-funding from the Scottish Government with the aim of positively drawing attention to the growing evidence that fathers' mental health and wellbeing during the perinatal period was going largely unrecognised. To this end, we brought together a Paternal Mental Health Advisory Group of leading practitioners and policy makers with both regional and national remits, including Dr Roch Cantwell, Chair of the National Perinatal Mental Health Network Scotland. See appendix A for a full list.

The remit of this group was to consider the evidence base relating to paternal perinatal mental health and to offer guidance and direction where appropriate to the Fathers Network Scotland 'How Are You Dad' Understanding Paternal Mental Health (UPMH) training programme pilot. This CPD pilot was aimed at supporting perinatal staff across the health, local authority and third sectors to address a key challenge: To understand the issues encompassing paternal mental health during the perinatal period is an essential requirement of all staff within health, local authority and third sector services who have a role supporting children, mothers and fathers during this period and the early years.

A core aspect of this training was to support staff and teams to identify small changes in their practice that would improve outcomes for mums, infants and fathers in an integrated family approach. We found that:

- 92% of course participants reported increased confidence in asking fathers about their mental health
- 96% of course participants were able to identify small practice changes that would support fathers' mental health

In June 2019, at the successful conclusion of the initial phase of the project, Fathers Network Scotland published the subsequent Understanding Paternal Mental Health report, entitled, "How Are You Dad?" that ended with ten recommendations including:

- Understanding the issues encompassing paternal mental health during the perinatal period is an essential requirement of all staff within health, local authority and third sector services who have a role supporting children, mothers and fathers during this period and the early years.
- The content of any aspect of a nationwide work programme should be developed in collaboration between NES NHS Scotland, the National Perinatal Mental Health Network, and Fathers Network Scotland.
- The progress of this work should be reported to the Managed Clinical Network and captured within the action plan of the Managed Clinical Network. Where a local Perinatal Mental Health Network exists, such as in Greater Glasgow, the development and support of the "How Are You Dad" learning outcomes should be captured and monitored in the network action plan.
- Each health board area should develop clear guidance for staff and services that may encounter fathers who may have profound or acute mental health problems requiring clinical intervention and support. Guidance should be included in any staff materials developed by the HAYD Advisory Group.

The report's conclusions and recommendations were endorsed by the Paternal Mental Health Advisory Group and were subsequently supported by the Chair of the National Perinatal and Infant Mental Health Programme Board and the Chair of the National Perinatal Mental Health Network. In June 2019 they were then further supported by a cross party motion at the Scottish Parliament, brought by Fulton MacGregor MSP. See Appendix B for the full transcript.

BUILDING CAPACITY IN PERINATAL SERVICES

Since March 2019 Fathers Network Scotland has delivered **45 Understanding Paternal Mental Health workshops and 10 presentations** to perinatal staff in the **10 health board areas** of: Tayside; Lothian; Fife; Forth Valley; Lanarkshire; Greater Glasgow and Clyde; Ayrshire and Arran; Dumfries and Galloway; Grampian; and Highland.

This has involved delivery to **351 NHS perinatal staff** including: midwives; health visitors; neonatal staff; family nurse partnership, plus 185 nursing and midwifery students.

We have delivered an additional **16 Understanding Paternal Mental Health workshops** to **third sector and local authority teams**, including: Perth & Kinross Social Work Team; Home-Start; Crossreach; The Aberlour Trust and Relationships Scotland.

We have initiated an improvement project with NHS Fife aimed at developing tools and approaches to effectively measure paternal mental health.

We have been working alongside NHS Forth Valley and NHS Tayside to develop and embed father-inclusive policy across perinatal services in the area.

As well as increasing staff understanding of paternal mental health, our comprehensive course evaluation shows clearly that participants feel more confident in understanding how to engage fathers in their daily practice, as a result of their participation:

“I was just not previously aware of the impact that dads’ mental health has on families - our training as midwives and our whole ethos has always been “woman centred”. This training really opened my eyes to the importance of paternal mental health awareness and how easy it is for us as practitioners to help.”

“Being more aware of paternal mental health has made me more inclusive of dads when inquiring about maternal mental health.”

“This course has encouraged me to consider what resources are available locally and the importance of discussing this with fathers as well as mothers.”

“I am now trying to ensure that dads feel that they can be involved with the health visiting service.”

SUPPORTING THE NATIONAL PERINATAL MENTAL HEALTH AGENDA 2021-2024

Building upon the learning, outcomes and recommendations from the 2019 'How Are You Dad' partnership project, Fathers Network Scotland has developed a three-year programme plan called Understanding Paternal Perinatal Mental Health (UPPMH) which ultimately aims to ensure that, ***“understanding the issues encompassing paternal mental health during the perinatal period is an essential requirement of all staff within health, third and statutory sector services who have a role supporting children, mothers and fathers during this period and the early years”***. This outcome was one of the ten recommendations from the pilot report evaluation undertaken by Fathers Network Scotland and this three-year plan aims to fulfil these recommendations, under this overarching aim.

The UPPMH programme has been piloted, evaluated, costed and is ready to be further developed and rolled out across the NHS, third and statutory sectors in Scotland over the next three years. The proposed development and delivery of UPPMH includes bespoke in-house and eLearning training around paternal perinatal mental health that can be accessed by all perinatal staff in the NHS, third sector and local authorities. By the conclusion of the three year project period, it is anticipated that perinatal service providers across all health board areas in Scotland will have access to the learning outcomes outlined in the training programme. This will be achieved through CPD and improvement work aimed at creating consistent and common good practice, cultures, policies and local strategy. By realising and embedding systemic change across service providers, Scotland would be leading the way by implementing this work.

The project also seeks to develop new father-inclusive policies, and we propose that we share and test those father-inclusive approaches we have developed with three participating health board areas.

In response to the parameters of the recent Scottish Government Perinatal and Infant Mental Health Fund - demonstrating a commitment to the inclusion of fathers in all service provision - we were hopeful that this programme of work could be supported under this fund. Unfortunately, but understandably, due to the level of demand versus funds available, we were unsuccessful in securing this funding, despite extremely positive feedback on our application and project design.

However, demand for our Understanding Paternal Mental Health training from NHS, third sector and local authority teams remains consistently high. Additionally, the impact of Covid-19 is having a negative effect on the mental health of parents across Scotland. Fathers Network Scotland is currently the sole provider of a robustly evaluated evidence-based paternal perinatal mental health training programme. Yet without adequate resources we cannot continue to provide this support to organisations across Scotland.

While some organisations may have father-friendly approaches, dads' groups or dads' workers, the evidence collated by Fathers Network Scotland over the past decade is clear:

In order to respond to the demands of GIRFEC, and secure best outcomes for maternal and infant mental health, father-inclusive practice and a robust understanding of paternal mental health must be embedded across universal NHS, statutory and third sector practice, culture, policy and local strategy within all 15 health boards.

Our three-year plan includes measures that ensure that there is the capacity within each Scottish health board area to achieve and sustain these outcomes in the long term.

Despite the evidence, paternal perinatal mental health-focused work has not yet been specifically supported or prioritised within the three-year investment into third sector Perinatal and Infant Mental Health work. It will therefore not be possible to achieve the Scottish Government's stated aim that all *"mums, dads and families at risk of poor mental health during pregnancy and the early years will be able to access enhanced peer support, parenting support and perinatal counselling services"* without additional investment.

For Scotland to fulfil its ambitions as a progressive nation and to fulfil its commitment to the United Nations Convention on the Rights of the Child, it is imperative that the Scottish Government Perinatal and Infant Mental Health Programme Board seeks alternative ways to ensure that *"understanding the issues encompassing paternal mental health during the perinatal period is an essential requirement of all staff within health, local authority and third sector services who have a role supporting children, mothers and fathers during this period and the early years"*.

RECOMMENDATIONS

1. Paternal, partner and carer suicide rates during the perinatal period are recorded, in the same way that the deaths by suicide of women during or up to one year after pregnancy are recorded.
2. Paternal, partners' and carers' GPs are informed about a baby's birth. Currently only mothers' GPs are notified.
3. The Perinatal and Infant Mental Health Programme Board commissions research on the link between the perinatal period and paternal suicide, and risk of paternal suicide.
4. Third sector services across Scotland who support male mental health and suicide prevention are adequately funded.
5. Fathers Network Scotland be included as a member of the Perinatal and Infant Mental Health Programme Board to ensure the inclusion of paternal perinatal mental health strategy in local delivery across Scotland. Fathers, partners and kinship carers should be actively included and named in all Infant and Perinatal Mental Health support pathways.
6. Fathers Network Scotland's 'Understanding Paternal Perinatal Mental Health' programme is supported and invested in, nationally and locally, ensuring that the benefits of the learning that has taken place within perinatal services so far is sustained and made available to all perinatal frontline services across Scotland.

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APPENDIX A - PATERNAL MENTAL HEALTH ADVISORY GROUP

- **Donna Brough** - Midwifery Team Manager, NHS Tayside
- **Roch Cantwell** - Consultant Perinatal Psychiatrist, NHS Greater Glasgow and Clyde
- **Elaine Clark** - Nurse Consultant Perinatal Mental Health, NHS Greater Glasgow and Clyde
- **Susan Fleming** - Public Health Researcher, NHS Greater Glasgow and Clyde
- **Michelle Guthrie** - Health Improvement Senior (Mental Health), NHS Greater Glasgow and Clyde
- **Andie Hewitt** - Parent Education Coordinator, NHS Lothian
- **Susie Heywood** - Glasgow City CHP Health Improvement Senior
- **Joyce Linklater** - Service Manager, Crossreach
- **Kate Magumese** - Health Visitor, NHS Fife
- **Cheryl Mercer** - Manager, Home-Start Glasgow North
- **Alison Nicol** - Clinical Education Midwife, NHS Fife
- **Mark Williams** - Founder, Fathers Reaching Out

APPENDIX B - MOTION S5M-17821: FULTON MACGREGOR

Motion S5M-17821: Fulton MacGregor, Coatbridge and Chryston, Scottish National Party,
Date Lodged: 19/06/2019
Fathers Network Scotland

That the Parliament welcomes the evaluation of Fathers Network Scotland's "How Are You Dad?" pilot project; recognises that this research aims to deliver information and statistics on the experiences of new fathers; believes that one in ten fathers will have postnatal depression; understands that the project allows perinatal health professionals to be trained to ask new dads as well as new mums how they are feeling; acknowledges that eight training sessions across five NHS board areas, including NHS Lanarkshire, were carried out in a partnership between Fathers Network Scotland and Fathers Reaching Out, which explored the impact of paternal mental health on children and families and helped build practitioner knowledge and confidence; notes that all of those who attended and who answered the training session feedback would recommend the training and that 96% were able to identify small changes to their practices that will support dads' mental health; believes that new fathers, including those in the Coatbridge and Chryston constituency, are at increased risk of mental health issues, and considers that supporting them appropriately can help fathers in their parenting and break down gender stereotyping around parenting roles.

Supported by: Alex Neil, Mark McDonald, Stuart McMillan, Bob Doris, Richard Lyle, Sandra White, David Torrance, Clare Adamson, Angela Constance, Bill Kidd, Jenny Gilruth, Jeremy Balfour, Stewart Stevenson, Tom Arthur, Gil Paterson, Gail Ross, Ruth Maguire, Gillian Martin

Current Status: Fallen on 02/10/2019