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Men and Prenatal Depression

- a Guide to Working with Men Experiencing Psychological Difficulties in relation to Pregnancy, Birth and Infancy

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Every year 3-4.000 men in Denmark are affected by postnatal depression!

Are they being seen - are they receiving treatment?

Depression in men may assume different forms from those commonly seen in women. Parental depression impacts the child and the parents' relationship.

Postnatal depression is treatable.

This pamphlet describes the latest knowledge on fathers' psychological reactions to parenthood.

It provides important advice and information for everyone working with families during pregnancy, childbirth and infancy: GPs, midwives, obstetricians, maternity nurses and health visitors.



The Extent of the Problem

Research on men's psychological reactions to parenthood first began to emerge around 1995. The first Danish study aimed at documenting the extent (of postnatal depression) was carried out at the Copenhagen University Hospital Rigshospitalet in 2004-2006.

It indicates that around 7% of fathers suffer from postnatal depression. The rate of depression among 20-50 year-old men in the general population is around 3.5%. It is essential to locate all men suffering from depression at this critical stage of their lives and their children's.

607 questionnaires featuring 544 responses (90%) showing:

EPDS-scale (traditional symptoms of depression) 27 (5.0%) Gotland-scale (male symptoms of depression) 18 (3,4 %) Postnatal depression (EPDS- and Gotland-scales) 34 (6,5 %)

Valid answers: 1537, 2524, 3520 (These numbers count the fathers, who displayed symptoms of depression according to both scales only once.)

The EPDS-scale charts traditional symptoms of depression and has been used to identify postnatal depression in women for a number of years.

The Gotland-scale charts the so-called male symptoms of depression. (See pages 6-7.)

The results of the Danish study indicate that 200-250 men among those becoming fathers at Rigshospitalet every year suffer from postnatal depression. Around 3,400 births take place at Rigshospitalet annually.

The current number of births in Denmark is around 65.000 a year. Thus, at a national level, the numbers indicate that around 4-4,500 men a year are suffering from postnatal depression.

"The event I had been looking forward to for nine months almost killed me. I thought I'd be happy, but instead I got a shock when I realized what a responsibility I'd taken on."

This is how Lars, 26, describes his experience. He recognizes a number of earlier events in his life as significant in this respect: "When I was 2 weeks old my mother was grief-stricken by the loss of her father. This resulted in severe depression and for a while she had to turn me over to a nanny, who apparently left me to cry unattended for long periods of time." Later in life Lars experienced psychological problems.



being completely paralyzed by fear and unable to leave the house and after crying almost non-stop for the first fortnight, the treatment began to take effect. New medication and

intense therapy were what it took.

Experiencing Postnatal Depression

The rapid and intensive efforts of particularly my wife and parents were what got me through it. They helped me quickly get the professional assistance I needed." This is Lars' story; today nearly two years on - he is able to take care of himself and his son. "I never would have believed this kind of progress was possible. But I still feel the anxiety lurking in the background and I'll always live with the knowledge that I could suffer a relapse. I'll have to live with this psychological frailty for the rest of my life. The question is whether this damage could have been contained or avoided entirely if I'd received the right kind of assistance at a much earlier stage..." says Lars.



Postnatal depression in men must be considered both in the light of traditional symptoms of depression and particularly male symptoms (i.e. symptoms occurring predominantly in men). A lot of research material (including

Classical Symptoms of Postnatal Depression

The EPDS (Edinburgh Postnatal Depression Scale):

10 Questions about how the Man has been Feeling During the Past 7 Days:

- **A** I have been able to laugh and see the funny side of things
 - (0) As much as I always could
 - (1) Not quite so much now
 - (2) Definitely not so much now
 - (3) Not at all
- **B** I have been looking forward with enjoyment to things
 - (0) As much as I ever did
 - (1) Rather less than I used to
 - (2) Definitely less than I used to
 - (3) Hardly at all
- CI have blamed myself unnecessarily when things went wrong
 - (3) Yes, most of the time
 - (2) Yes, some of the time
 - (1) Not very often
 - (0) No, never
- **D**I have been anxious and worried for no good reason
 - (0) No, not at all
 - (1) Hardly ever
 - (2) Yes, sometimes
 - (3) Yes, very often

- **E** I have felt scared or panicky for no very good reason
 - (3) Yes, quite a lot
 - (2) Yes, sometimes
 - (1) No, not much
 - (0) No, not at all
- **F** Things have been getting on top of me
 - (3) Yes, most of the time I haven't been able to cope at all
 - (2) Yes, sometimes I haven't been coping as well as usual
 - (1) No, most of the time I have coped quite well
 - (0) No, I have been coping as well as ever
- **G** I have been so unhappy that I have had difficulty sleeping
 - (3) Yes, most of the time
 - (2) Yes, sometimes
 - (1) Not very often
 - (0) No, not at all
- HI have felt sad or miserable
 - (3) Yes, most of the time
 - (2) Yes, quite often
 - (1) Not very often
 - (0) No, not at all

the Danish study) indicates that considering both sets of symptoms is a viable way to identify men's problems. Below the traditional symptoms are presented to the left with examples of "male symptoms" to the right.

Symptoms Occuring Predominantly in Men

From i.a. the Gotland-scale:

Symptoms and Conditions Experienced by the Man in the last Couple of Weeks:

- Outbursts of anger
- Aggression
- Poor impulse control
- Irritability
- Destructive thoughts
- Low stress-threshold
- Restlessness
- Substance abuse
- Withdrawing from relationships may be denied
- Obsessing over work becoming a workaholic
- · Denying pain
- Rigidly demanding autonomy
- Refusing assistance

These symptoms, which predominantly occur in men, have yet to be fully validated and standardized, hence there are no applicable scores.

I have been so unhappy that I have been crying

- (3) Yes, most of the time
- (2) Yes, quite often
- (1) Only occasionally
- (0) No, never
- J The thought of hurting myself has occurred to me
 - (3) Yes, quite often
 - (2) Sometimes
 - (1) Hardly ever
 - (0) Never

This scale was validated for men in 2000. Numbers in brackets are the scores obtained, for:

- Women: A total score greater than 12 indicates postnatal depression.
- Men: A total score greater than 9 indicates postnatal depression.

The EPDS is a screening tool and is not intended to diagnose depression.

When can Men be Affected by Postnatal Depression?

The condition may arise both in connection with the birth of a first child or that of later children. Postnatal depression may break out both during pregnancy and after the birth.

Some men suffer symptoms for months before asking for help. It is important to be aware that depressive reactions occurring even a long time after a birth may be related to the transition to parenthood.

These days most fathers - 95% - participate in the birth of their children. They do so because they want to and because their partners want them to. They participate to support their wives and in their capacity as fathers.

Today the majority of (Danish) men also participate actively in doctor's and midwife's appointments although surveys have shown that they are not always directly invited to do so, that they are often not addressed by doctors and midwifes and that the topic of fathers is frequently not touched upon during these visits.

We know that paternal participation in childbirth can form a solid foundation for increased involvement and responsibility, leading to more time for the child and greater equality in the home.

With fathers more involved, however, we are now seeing psychological problems similar to those associated with motherhood.

Men as Patients

It is important to remember that men do not ask for help as readily as women. They are comfortable receiving advice and having options lined up for them. When provided with several options to choose between, they are able to act. For the vast majority of men and women parenthood is the greatest enrichment life has to offer. Even if it is no bed of roses hardly anyone wants to forgo this experience. But for some, parenthood becomes problematic; they are affected by postnatal depres-

The way we as professionals interact with these men sends an important message, and our interactions are determined by our understanding of them.

Loss of self-determination and options often represent a threat to men. In interacting with men we must ensure that their needs for independence and choices are met. It is important to understand that this is not necessarily a means of pushing aside emotion, but rather a way of feeling secure!

There is a need to update professional perceptions of fathers throughout pregnancy, childbirth and infancy within the following areas:

- Expectant fathers and fathers of young babies may experience problems too
- Men's problems too, need to be picked up in time, i.e. early on!
- Men's problems during this period of their lives must be seen in light of father/child-relationships
- Fathers' problems also affect children and their development
- Many fathers really do want help
- It is important to consider fathers as parents in their own right

sion. Until recently, this was only observed in mothers. Therefore it is now essential that we relate far more professionally to fathers in our work.

Often men are uncomfortable with wallowing too much in their misery by constantly discussing their troubles and worries. They may feel that this inhibits their freedom of choice and hampers their autonomy.

Five Suggestions for Communicating with Men

- Be specific do not try to cover things up
- Ask specific questions requiring specific answers; this may lead to a good talk.
- The lower the expectation of conversation, the more men will usually say
- Display sympathy, not pity, as this undermines the feeling of being in control
- He is in charge help him by outlining and communicating options

Treatment

A number of men find that the symptoms of postnatal depression improve with time, even without treatment. However, a significant number will require treatment. Fathers suffering from postnatal depression often wait a long time before seeking help. During this time their symptoms frequently get worse.

It is important that these men receive treatment since postnatal depression can have severe repercussions for the child and the whole family:

- Fathers' postnatal depression frequently leads to difficulty within the couple. In a worst-case scenario, this can lead to the breakdown of the parents' relationship.
- Lack of energy, joy and initiative may lead to failure to form an attachment to the child.
- Postnatal depression can start a vicious circle when it comes to men's perception of their child, of their attachment to it, and of themselves as fathers
- Limited contact with the child at the outset may make it difficult to build a close relationship later in life.
- Fathers' postnatal depression may negatively impact the child's emotional and intellectual development.

Men who wait a long time before seeking help often express feelings of grief at having wasted time in the early stages of parenthood. They are aware of having been unable to be close to their children and of having forgone the pleasures of early interaction.

Psychotherapy

Conversational therapy is an important tool in helping men with postnatal depression. The objective should be both to remove unpleasant symptoms and to support the development of fatherhood and a good relationship between father and child.

Effective conversational therapy should have a dual focus on:

- Relationships to own parents and experiences growing up
- The current relationship to their child

This dual focus appears to develop positive feelings and empathy towards the infant while improving the fathers' condition and enabling them to come to terms with conflicts surrounding their own upbringing.

But remember: Each father and each man is different!

Unfortunately there are currently not many places to seek help. (In Denmark) only some municipalities offer psychological assistance for men suffering from postnatal depression.

Rigshospitalet offers a limited number of conversational therapy sessions.

In addition there is an option of referring patients to private psychologists, while drawing attention to the fact that their condition may be related to the transition to parenthood.

Prevention

Prevention: What can Fathers and their Partners do?

Because postnatal depression (in both men and women) is often rooted in parents' own experiences growing up, this is also a central element of prevention.

Men (and women) who are about to become parents may be advised to reflect on the following:

- Their experiences with nurturing, their relationship to their own parents, their own experiences of childhood
- Imminent parenthood and the ensuing distribution of roles
- Their ideas about the child and their relationship to him/her
- Thoughts on their relationship as a couple and on sharing parenthood
- The practical distribution of tasks and responsibilities once the child is born

By reflecting on - and especially by talking about - these issues, parents may come to terms with their past, their relationship to their own parents and their current lives. Once the baby is born many parents have difficulty finding time to talk and tempers may run short. Hence it is a good idea to prepare as well as possible for the imminent challenges of parenthood.

Some prefer to go through this reflective process alone, while others may

benefit from involving their partner, a family member, a close friend or a psychologist.

Preventive Options within the Health Care System

At a general level it is important that we as professionals working within the health care system view childbirth and the time surrounding it as a family matter. In this way we become more attentive towards fathers' reactions and needs.

Significant Elements:

- Fathers must be directly invited to participate in pregnancy checkups, consultations etc.
- Fathers must be helped to qualify themselves for their new role - during pregnancy childbirth and infancy.
- Emphasis must be placed on parent/child relationships at antenatal courses and during follow-up care.

Professional awareness of the possibility of postnatal depression is significant, as is the verbalization of men's importance. Particular attention to symptoms and information for parents on the possibility of postnatal depression in both men and women can enable early assistance thereby ensuring a shorter, less intrusive course of any depression observed.

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This leaflet is based on information from the EU-project "Men's Psychological Transition to Fatherhood - Overcoming Gender Stereotypes Concerning Parenthood". Thereby it also plays a part in establishing equality for men as fathers within the health-care system.

It has been published in connection with Men's Health Week, which focuses on men's psychological health and ditto difficulties.

With this special focus in mind, the group behind the initiative wish to highlight the current undertreatment of men's psychological difficulties. This is reflected i.a. by the fact that the suicide rate for men is twice that for women. However, only half as many men as women receive a diagnosis of depression. Furthermore three times as many men as women are substance abusers.

There is a need for an increased awareness of symptoms occurring predominantly in men. Likewise, it is necessary to take into account men's difficulties in seeking medical assistance for psychological problems, as well as when under stress or experiencing a crisis.

The health-care system must heighten awareness of men's methods of communication when it comes to sickness and health. This pamphlet is contributing to these efforts by focusing on postnatal depression in men.



To learn more about men's sickness and health (in Danish) go to: www.sundmand.dk
To learn more about fathers and fatherhood in a European perspective go to:
www.european-fatherhood.com

To learn more about men as fathers and men and their psychological wellbeing see: "Paternal Depression in the Postnatal Period Assessed with Traditional and Male Depression Scales" - by Svend Aage Madsen and Tina Juhl. Journal of Men's Health and Gender 2007. Vol 4 Issue I, March 2007. FÆDRES TILKNYTNING TIL SPÆDBØRN - Fathers' Attachment to Infants - by Svend Aage Madsen, Dennis Lind & Hanne Munck

FÆDRE OG FØDSLER - Fathers and Childbirth - by Svend Aage Madsen, Hanne Munck & Marianne Tolstrup KEND DIN KROP, MAND - Know Your Body, Man - by Kaare Christensen, Christian Graugaard, Hans Bonde, Jørn Wulff-Helge & Svend Aage Madsen