


**Working with Fathers to Support Positive Coping:
The Relationship Between Infant Crying and Father Well-Being.**

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Agenda

- Background & Goals
- Research Questions
- Research Design
- Results
- Summary
- Implications



Why “The Father Study”?




Infant Excessive Crying

- Prevalence
- Mother/Infant Relationship
- Maternal Mental Health
- Developmental Risk
- Risk for Abuse



Fathers of Infants

- Depression in Fathers of Infants
- Transition Stress
- Lack of preparation
- Mixed societal messages



Fathers of Infants

- Comorbidity
- Overrepresented Offenders
- Little Research = Little Intervention



Study Goals

1. Examine relationships between infant crying/fussing and father well-being.

- Depression
- Parenting stress
- Parenting self-efficacy

2. Explore how fathers cope with infant crying and fussing.



Research Questions

1. Is there a relationship between amount of infant crying/fussing and father parenting self-efficacy, depressive symptoms, and parenting stress?
2. Is there a relationship between fathers' perception of infant crying/fussing and father parenting self-efficacy, depressive symptoms, and parenting stress?
3. How do fathers experience and cope with infant crying and fussing?



Research Design



Study Design

- Mixed quantitative-qualitative
- Quantitative measures of father well-being and infant crying.
- Qualitative phone interview of father experience with infant crying and coping.



Sample

202 fathers of infants under one year of age

DEMOGRAPHIC HIGHLIGHTS

Fathers

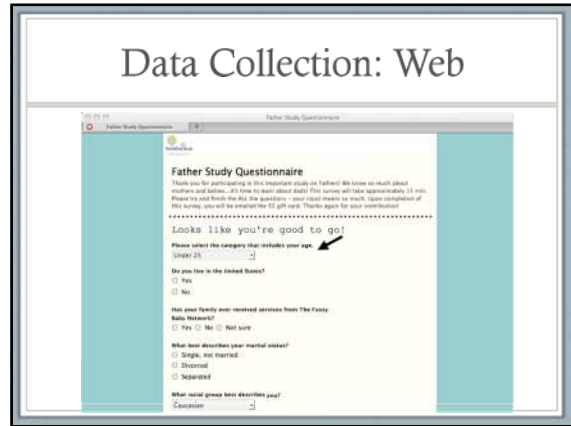
62% between ages 26-35
64% first-time fathers
87% married
75% white/non-minority
75% family income over \$50,000
72% earned a bachelors degree or higher
76% had no past experience with infants before 1st child
75% involved in play or caretaking activities every day with infant

Infants

56% Male
54% under six months



Measures

Infant Crying/Fussing

Amount

- Raw minutes
- Wessel's Rule of Three


Colic Criteria
Yes or No

180 minutes of Crying and/or Wessel's rule of three

Perception

Are you finding your baby's crying or fussing to be a problem or upsetting?

Crying Concern
Yes or No



Father Well-Being

Quantitative: Well-Being Measures


- Parenting Self-Efficacy
 - MSE (Teti & Gelfund, 1991)
- Parenting Stress
 - PSI/SF (Abidin, 1986)
- Depression
 - EPDS (Cox, Holden & Sagovsky, 1987)
- Co-Parenting Confidence
 - PAI (Abidin & Brunner, 1995)

Semi-Structured Phone Interview


Topics: Parenting, Crying, Coping

Example Questions

- What is the most stressful part of being a parent?
- Have you ever felt close to 'losing control' when your baby would not stop crying? What did you do?
- What would you say has been your greatest source of support?



Results



Father Well-Being

- Fathers generally reported mean scores similar to mothers of infants in related studies and to fathers in available studies using these measures.

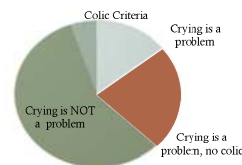
Descriptive Statistics: Dependent Variables

	N	Mean	SD	Range
Parenting Self-Efficacy (MSE)	181	32.78	4.4	23-40
Depression (EPDS)	188	5.75	4.0	0-19
EPDS score of >10	30	12.73	2.3	10-19
Parenting Stress Index/Short Form (PSI/SF)	179	65.56	20.6	36-150



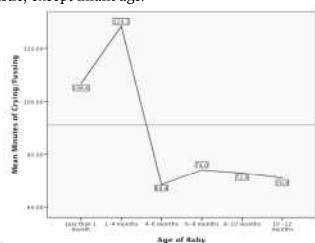
Infant Crying

- Fathers reported an average of 90 minutes of crying per day (SD=73).
- 30% (n=58) of fathers reported the crying/fussing was a problem or upsetting.
- 20% (n=42) of infants met colic criteria.
- Over 50% of the infants whose fathers perceived a crying problem did NOT meet colic criteria (n=30).



Infant Crying

- Amount of crying in minutes, colic criteria, and perception of problematic crying were not significantly related to any father or infant characteristic, except infant age.



Amount of Crying (Colic Criteria) and Father Well-Being

- Fathers of infants who met the colic criteria had significantly **higher parenting stress and depression scores, and lower feelings of parenting self-efficacy** than fathers of infants who did not meet colic criteria.

ANOVA results for colic criteria and father well-being

	EPDS	MSE	PSI/SF
Colic Criteria			
Yes (n=40)	7.7 (4.9)	31.0 (4.2)	79.4 (24.3)
No (n=148)	5.2 (3.7)	33.2 (4.3)	61.7 (17.6)
F(df), p	13.18(1,187).000	8.36(1,180).004	25.52(1,178).000



Perception of Crying and Father Well-Being

- Fathers who perceived their infants crying to be problematic had significantly **higher parenting stress and depression scores, and lower feelings of parenting self-efficacy** than fathers who did not find the crying to be a problem.

ANOVA results for perception of crying and father well-being

	EPDS	MSE	PSI/SF
Problematic Crying			
Yes (n=58)	8.0 (5.0)	30.2 (4.3)	82.1 (22.0)
No (n=131)	4.80 (3.1)	33.8 (3.9)	58.4 (15.6)
F(df), p	27.73(1,184).000	29.85(1,179).000	67.21(1,177).000



Amount vs. Perception

- MANOVA results revealed that perception of problematic crying had a significant effect on depression, parenting self-efficacy and parenting stress, but colic criteria was only significant for parenting stress.

Parameter	EPDS		MSE		PSI/SF	
	F	p	F	p	F	p
Colic Criteria	3.116	.079	1.043	.309	6.643	.011
Crying Concern	18.825	.000	11.379	.001	34.519	.000
Colic x Crying Concern	2.158	.144	2.927	.089	.058	.810

