

Influencing Factors and Interventions of Postpartum Depression in Men

Yanqiu Luo^{1, a, *}

¹*Applied Psychology, Chongqing Normal University, No.37, University Middle Road, Shapingba District, China*

a. 3100400142@caa.edu.cn

**corresponding author*

Abstract: Postpartum depression in men is similar to that of women with postpartum depression, but the manifestations are different. Yet, this mental illnesses in men are not being given the same attention as women, and some people aren't even aware that males can exhibit postpartum depression symptoms. As a result, this article lists the signs and symptoms of postpartum depression in males, as well as the internal and external variables that cause it and the interventions available for treating it. This article also provides a relatively comprehensive summary of the elements influencing it and coping strategies, and outlines the current state of research. Future research should focus on examining scales specifically designed to screen men, using experimental studies to validate and explore the factors that influence postpartum depression in men. The field of cross-cultural research has much room for development, and the medical system for the treatment for men needs to be improved.

Keywords: fathers, postpartum, intervention

1. Introduction

Many people's knowledge of postpartum depression is limited to the mother. Currently, many elements and interventions affecting maternal postpartum depression have been explored, and standardized scales have been proposed for screening women. There are relatively few studies on postpartum depression in men, and the institutions of treatment and intervention for men are almost unheard of. Moreover, although the proportion of postpartum depression in men is much smaller than that of women, with the rapid increase in the earth's population, postpartum depression in men needs more attention and exploration [1]. Most of the existing studies have explored the influencing factors based on the relationship between male and female depression, and this paper mainly discusses the internal and external influencing factors and intervention methods of male depression.

2. Diagnostic Standards

The symptoms of men and women suffering from this psychological disorder have similarities and differences. The similarity is that both men and women have symptoms of depression such as low mood. The biggest difference is the bipolar nature of the symptoms of postpartum depression in men, who may be cranky or depressed in mood [2]. It can be difficult to detect due to the diversity and variability of symptoms. Overall, as long as males continue to exhibit new behaviors, gloomy or

irritated mood states that interfere with daily life following the delivery of a newborn, it may be a sign. Therefore, the criteria for identifying and screening men suffering can refer to the symptoms of postpartum depression in women, but cannot be directly applied.

3. Influencing Factors

3.1. External Factors

3.1.1. Lack of Support

When a kid is born, the family's priority is taking care of the new family member. Since moms are overburdened with caring for their children and recovering after childbirth, the needs of fathers are frequently forgotten. According to studies, relationships between partners deteriorate more rapidly in the first year after childbirth [3]. Condon et al. [3] also speculate that this phenomenon occurred because partners are still getting used to their new ways of being together and the stress of raising a child while adjusting to the change from a two-person to a three-person relationship. Then, as a couple's relationship deteriorates, it is more difficult for the father to have his needs met and to get support from his wife once postpartum depression sets in. Men may feel abandoned by their partners, which can impair their relationship. It may also become worse as a result of this lack of support. Research has indicated that postnatal depression among new parents occurs more frequently the less social support they receive [4]. The primary source of social support for married men is their partners, and the breakdown of the marriage after having a child makes it difficult for men to receive enough support.

Males desire someone to talk to about the stress of taking care of their family and kids, to hear their parenting tips and experiences, and to obtain medical attention if their partner is suffering from postpartum depression [5]. When men have a homogeneous group to talk to, it can help alleviate the overwhelm of caring for a child, and having someone to share their emotions can give men the courage to face postpartum depression. This source of social support can encourage men to express their emotions and effectively relieve stress. If men are too shy to tell their families about their powerlessness, they tend to suppress their tendencies, and their families are unable to detect their emotional changes in time.

3.1.2. Work and Financial Stress

Fathers' postpartum sadness was strongly correlated with monthly income and home satisfaction, according to one study [6]. According to the study, which screened fathers of infants between 40 and 60 days of age, a higher home income and worse housing satisfaction were linked to a higher likelihood of postnatal depression in men. When a child is born, if fathers need to worry about the most basic survival needs, they may worry not only about the child's but also about their own basic needs. And they also face the guilt of not being able to take care of the child, which may be the reason why financial and other issues can put pressure on the father or even lead to postpartum depression. Employment status is also associated with depression in men. When men's jobs are unstable, economic factors put pressure on men, and the pressure from unemployment can be even greater. When both spouses are employed, family conflicts are likely to arise and the life satisfaction associated with them decreases [7]. The pressure on fathers in this situation comes from how to take care of their children while still doing a good job. As new lives are born men desire job and income stability, but newborns also need time to care for them. Both partners in a dual-earner family will face this challenge and may also face blame from their partner when they are unable to coordinate a good division of labor. When conflicts between partners increase, partners tend to blame each other more than cooperate, and negative emotions slowly accumulate, leading to postpartum depression when

the stress becomes too much to bear. And in most cases, there is no vacation time for men after giving birth, and the pressure of work is always with men to adjust to life with a newborn. Therefore, work stress may also be a factor that causes postpartum depression in men.

3.1.3. Gender Expectations

Traditionally in China, fathers are considered to be an indestructible role and all men tend to hide their emotions in order to conform to social expectations [8]. In ancient times, the concept of male superiority was promoted, and men were given not only the power but also the obligation to guard the family and even the country, so men in ancient times were required to have strong and not easily shed tears. This may be one of the reasons why men tend to suppress their emotions. In fact, this stereotype does not only exist in China, but also in Eastern culture. Father is portrayed as the head of the family, which also brings pressure to men.

The way the society looks forward to the father has gradually become the requirement of men for themselves, and has also become the source of anxiety and pressure for men. This may be the reason why the economy and housing bring so much pressure on men. An interpretive qualitative study of semi-structured interviews presented the true feelings of fathers one year after giving birth, and because of social expectations, even the fathers' groups themselves tend that medical resources and concerns should be skewed towards newborns and mothers [9]. It can be seen that social expectations also have a certain impact on postpartum depression in men. Men's postpartum emotions are constantly repressed by both social expectations and men's orientation toward themselves, slowly accumulating into postpartum depression.

3.1.4. Partner Postpartum Depression

Paternal postpartum depression is associated with maternal depression, and some studies suggest that maternal depression can lead to paternal depression [10]. The correlation between the two illustrates the need to review and focus on postpartum depression in men. Although existing studies do not prove a causal relationship between postpartum depression in men and women, men are more likely to develop symptoms of this psychological disorder when their partners are maladjusted after childbirth. When a partner suffers from postpartum depression, men need to adapt to more changes and face more challenges. There is a need to care for the newborn while also being sensitive and attentive to his partner's emotions, males are assigned additional responsibility for the family when a spouse has postpartum depression, which makes them refuse to admit their inability to care for the family and stigmatizes male postpartum depression. In this situation, men are more inclined to suppress their emotions, which undoubtedly increases the probability of postpartum depression.

3.2. Internal Factors

3.2.1. History of Depression and Antenatal Depression

A longitudinal study of depression in first-time fathers was conducted by Howarth and Swain [11], with data collected at 24 weeks of gestation, 36 weeks of gestation, shortly after birth and 6 months after birth in four periods. They found that the more depressed the father was during pregnancy, the more depressed he was in the first six months after giving birth. And men with prenatal depression are more likely to experience postpartum depression may because both prenatal depression and postpartum depression are caused by the same stressful situations. Men with a history of depression or other psychiatric disorders generally have a lower threshold for stress, and stressful events that previously induced depression may transfer to the stress brought on by the newborn, thus triggering

postpartum depression, so fathers who exhibit depressive symptoms during pregnancy and have a history of depression should be especially concerned in the postpartum period.

3.2.2. The Experience of Fatherhood

A study conducted in a maternity clinic looked at changes in quality of life and depressive symptoms among new fathers in the postpartum period, the results show that first-time fathers exhibit more anxiety in the first month following delivery than do veteran fathers [3]. The study also further illustrates that fathers' stress did not continue to decline as the time spent caring for the child increased, and fathers' conditions improved over time during the first three months of life, but no further changes occurred afterwards. The improvement in the first three months may be due to the fact that men who are first-time fathers have less knowledge about parenting, the practice of caring for children gradually relieves some of the stress of new fathers. But the changes and fatigue that come with newborn can't go away with time. Fathers who have a job are under constant pressure from work, and fathers who do not have a job are under constant pressure from unemployment, and childbirth can cause a sharp increase in the father's anxiety level, but the anxiety caused by the stimulation of the birth of the child one month after delivery has subsided, and these original factors that caused the anxiety may be the reason for maintaining the anxiety level.

Moreover, pregnancy may trigger a process by which men reevaluate their lifestyles and trigger psychological changes [3]. First-time fathers may feel overwhelmed by these changes and exhaustion, so whether the father has experience or not may also influence postpartum depression in men. People who have already experienced fatherhood are not surprised by the changes brought about by the birth of a child, and have been in the process of raising an existing child in the state of parenting needs, so the birth of a newborn baby does not bring too many changes for those who have experience with fatherhood.

3.2.3. Timing of Baby's Birth

When a pregnancy is unplanned for men, men are under more stress than when the pregnancy is planned. Especially when men are younger and lack the financial means and knowledge base to care for a newborn and family, coping with the stress can be harder to deal with. So unplanned pregnancies will make men feel out of control and make it harder for them to be good fathers. When they are unable to cope with such pressure, they may use alcohol, drugs and other behaviors to numb themselves and escape from reality. This cycle of stress and feelings of incompetence may eventually result in postpartum depression because these demanding behaviors, which do not address the underlying source of the issue, could instead make the new father feel more and more guilty and inadequate. However, when men have experience in childcare and the birth of a child does not bring great financial pressure, these men will suffer less from postnatal depression.

3.2.4. The Level of Paternal Testosterone and Cortisol

The study conducted by Field et al. [12] explored the relationship between testosterone and intimate relationship aggression and depression, the results suggest that low testosterone levels are associated with a man's risk of depression and depressed fathers have higher cortisol levels, high testosterone levels appear to lead to a partner's risk of depression and downstream risk in the family. Therefore, hormone levels can observe or predict postpartum depression in men to a certain extent, and can predict the possible behavior of men.

4. Intervention or Treatment

4.1. Prenatal Health Education

Through prenatal education, fathers can learn the skills and precautions to take care of their children scientifically and increase their self-confidence in caring for their children. As well, gaining prenatal information before giving delivery gives fathers the social support they need to feel as the sole ones who are unsure how to raise their children.

Fathers receive peer support and a partner with whom to discuss parenting concerns through the offline learning. According to research, couples as a whole benefit more from health education [13]. In the process of learning about parenting, the two-person relationship has gradually begun to transform into a three-person relationship, giving the parents-to-be time to adapt to the change in the relationship model. Therefore, prenatal education for parents-to-be should be promoted, not only to explain the precautions for taking care of the newborns, but also to explain the possible psychological characteristics of the partner in the postnatal period, so that the couple can understand each other. Prenatal education should also detail the signs of postpartum depression so that men can be aware of their emotional state in time. And make men aware that postpartum depression is a common phenomenon and do not stigmatize it.

4.2. Nursing Assessment and Screening

Men tend to hide their emotions due to social expectations, so postpartum depression in men is easily neglected. Thorough training is required for healthcare professionals to recognize and manage perinatal mental health, including ways to combine family-level methods, during pregnancy and after childbirth. Techniques for integrating family-level methods [14]. Clinicians and nurses should be familiar with the manifestations of depression in men and the factors that increase the probability of depression in men, especially when the mother is diagnosed with postpartum depression, increasing the chances of her spouse developing postpartum depression [15]. Health care workers ought to be able to use other scales that are suitable for male because there isn't a scale created specifically to screen for depression in men. When clinicians and nurses screen men for postpartum depression even though they have it, and explain to patients the characteristics and symptoms of postpartum depression in men, they can provide them with social support. And having a doctor or nurse give the diagnosis will help men avoid misunderstandings from their families and help them gain support from their families. The authoritative image of doctors and nurses also helps to alleviate the helplessness of men suffering from postpartum depression.

4.3. Increasing Public Awareness

Compared to the proportion of women with postpartum depression, the number of men with the disease is much smaller. Therefore, some people have never even heard of postpartum depression in men and believe that men do not experience postpartum depression, not to mention understanding postpartum depression symptoms and treatment options for men. The lack of public understanding of postpartum depression in men is undoubtedly the reason why men do not receive enough social support and the stigmatization of men with postpartum depression. Coupled with the social stereotype that men are strong and should be able to bear more pressure, men tend to suppress and hide their true feelings, resulting in postpartum depression in men not attracting much attention. The incidence of postpartum depression in males is made known to those who are suffering it, and by raising public knowledge of the condition, families can identify postpartum depressive tendencies in men early on. Thus, the media should publish more information about it and educate the general public about the condition's existence and symptoms. The more people pay attention to men's postpartum depression,

the more research on men's postpartum depression will be carried out, and the more improved the system of postpartum depression check and treatment for men will be.

5. Conclusions

The purpose of this paper is to discuss postpartum depression in men from two aspects: influencing factors and interventions. At present, there are many empirical studies exploring the external elements affecting postpartum depression in men, focusing on the sociocultural elements affecting male depression, as well as related studies on both women and men. Besides, there is little empirical research on the internal factors influencing postpartum depression in men, which discuss the social and family factors that affect it. Moreover, the existing empirical studies have been conducted in a specific region, and no studies have explored the differences in the manifestation of postpartum depression in men under different cultures. Future research could compare similarities and differences in factors predisposing men to postpartum across cultures.

In terms of intervention methods, there is no systematic institution-building program to help men with postpartum depression, but more about how to screen individuals and draw public attention to postpartum depression in men. Future research focuses on the design of a complete set of measures to screen men for postpartum depression.

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