# **Abstract**

Research on parental depression is beginning to recognize the importance of studying fathers with depression and the associations this depression can have with their parenting behaviors. The current study examined the associations that paternal depression can have with specific paternal parenting behaviors. In this study, paternal depression is hypothesized to correlate with increased irritability and increased withdrawn parenting behaviors as well as poor communication styles. The current study examined the associations of paternal depression with paternal parenting behaviors, as well as if paternal depression affects fathers' parenting behaviors differently than maternal depression affects mothers' parenting behaviors. This study used information from written questionnaires, interviews, as well as from parent-child interactions. Correlations were used to analyze the obtained data for the specific hypotheses of this study. Results showed stronger correlations between paternal depressive symptoms and both intrusive and withdrawn parenting behaviors as well as poor communication than these same correlations ran with depressed mothers. A major limitation to this study is the small sample size of fathers: however, the numbers for this study are comparable to previous research that has been able to find significant results for the effects of paternal depression on child outcomes, despite the small samples sizes of fathers available.

#### Introduction

#### Overview of Major Depression:

- National estimate of between 32 and 35 million individuals affected with Major Depression in their lifetime (Spector, 2006)
- Major Depression affects about every 1 in 5 women and 1 in 10 men (Elgar et al., 2007)
- Most of the current research focuses on maternal depression; however, in the past 13 years research has begun on paternal depression

# Behaviors Associate with Depression in Fathers:

- Dysphoric mood (e.g., sad and depressed mood)
- Decreased activity levels (e.g., less play time with child)
   Social withdrawal (e.g., wanting to spend less time with others)
- Less positivity (e.g., less positive statements made following a child's positive statement)
- Increased irritability (e.g., short temper)
- Increased father-child conflict during interactions

(Elgar et al., 2007; Jacob et al., 1997 &2000; Kane et al., 2004; Spector, 2006)

#### Importance of Studying Depressed Fathers:

- \* There are implications for psychopathological and behavioral risk factors for their offspring
- Higher susceptibility to Major Depression at a rate of about four times that of children of non-depressed
- Impaired school performance
- Lower social competence
- · Lower levels of self-esteem
- Increased numbers of suicide attempts
- Higher rates of substance abuse disorders (Jacob et al., 2001)

# **Hypotheses**

- (1) Symptoms of Major Depression will correlate with greater levels of intrusive parenting behaviors in depressed fathers → Increased levels of Hostility (HS)
- (2) Symptoms of Major Depression will correlate with greater levels of withdrawn parenting behaviors in depressed fathers → Less Child Centered behaviors (CC), Less Child Monitoring (CM) behaviors, Less Positive Reinforcement PO), Less Quality Times (QT)
- (3) Symptoms of Major Depression will correlate with poor communication in depressed fathers within interactions with their children → Less Communication (CO), Less Listener Responsiveness (LR)
- (4) Parenting behaviors of depressed fathers will differ from parenting behaviors of depressed mothers → higher levels of intrusive behaviors, higher levels of withdrawn behaviors, poorer quality of communication



# Paternal Depression: Associations with Paternal Parenting Behaviors

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#### Method

#### Participants:

Parents with a history of depression were taken from a larger sample of 112 depressed parents

- A total of 17 fathers
- (mean age =48.76, SD = 7.82)
- (mean BDI score = 18.21, SD = 12.44) (88.3% employed for pay; 82.4% married; 47% had a gross annual income of \$40,000-89,000)
- 31 mothers were selected from a sample of
   95 mothers for data comparison
   They were matched with fathers on BDI
- They were matched with fathers on BDI scores, marital status, gross income levels, and employment status
- and employment status

  "(mean age = 40.84, SD = 6.78)

  "(mean BDI score = 18.67, SD = 11.42)
- (80.6% employed for pay; 87.1% married; 54.9% had a annual income of \$40,000-89,000)

#### Measures:

- Direct Observation
  - ■Two 15-minute Interactions:
    - Task 1→ a recent positive event
    - Task 2 → a current source of stress
- Coded with the Iowa Family Interaction Rating Scales (IFIRS)
  - Codes:
    - "Withdrawal Parenting: Child-Centered (CC), Positive Reinforcement (PO), Quality Time
    - (QT), Child Monitoring (CM)

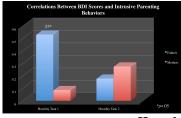
      "Intrusive Parenting: Hostility (HS)
  - Communication: Listener Responsiveness
  - (LR), Communication (CO)

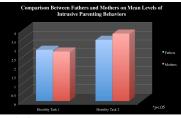
#### Procedures:

- \*Information was gathered at baseline before any treatment had taken place
- \*Each parent-child interaction was watched through 5 times by two independent coders
  - \*Focusing on either the child or the parent
- "Coders indicated statements made by each interactor in the appropriate code box on a standardized form
- \*Each coder scored the codes based on the IFIRS coding rules from a 1 (behavior never occurs) to a 9 (behavior very frequently
- "Consensus coding was completed between the 2 coders to obtain the consensus scores that were used in the analyses

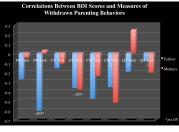
# Results

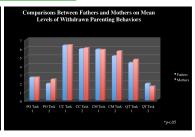
# Hypotheses 1 & 4



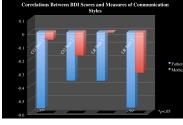


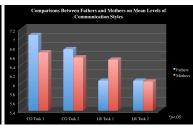
# Hypotheses 2 &4





# Hypotheses 3 & 4





#### Results Summary:

- Paternal depressive symptoms were correlated with:
- Increased Hostility in the positive interaction (task 1) (r = .53, p < .05)
- Less Positive Reinforcement in the negative interaction (task 2) (r = -.61, p < .05)
- •Less Communication in task 1 (r = -.57, p < .05)
- Less Listener Responsiveness in task 2 (r = -.56, p < .05)
- •Maternal depressive symptoms were correlated with:
- Less Child Centered behaviors in task 2 (r = -.39, p < .05)</p>
- No significant mean level differences were found when comparing mothers and fathers on any of the measures tested

# Discussion and Conclusions

"Overall it appears that father's depressive symptoms correlate with a broader range of negative parenting behaviors

"Depressive symptoms correlate with a decreased ability for fathers to discuss positive topics. With little discussion of positive topics, this could possibly cause a negative outlook on life for children of depressed fathers.

\*Depressive symptoms correlate with a decreased ability for fathers to listen to their children discussing stressful topics, perhaps when they need a supportive listener the most. Without the needed emotional support, this could possibly exacerbate depressive symptoms in children of depressed fathers.

\*Depressive symptoms correlate with a decrease in the amount of positive reinforcement given to a child by their father (builds on Jacob et al., 1997 & 2000). Without praise for age-appropriate behaviors and achievements, this could lead to lower levels of self-esteem in children of depressed fathers.

\*Even when discussing positive situations, depressions appears to correlate with increased anger and rejection in fathers (builds on Elgar et al, 2007; Kane et al., 2004). Increased anger and rejection could possibly lead to less prosocial behaviors carried out by children of depressed fathers within interactions with other children

# **Future Directions**

- Running these analyses with a larger sample of depressed fathers
- Focus on how these negative parenting behaviors may affect child outcomes such as coping, behavioral outcomes, and psychological outcomes

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# **Acknowledgments**

This research was supported by National Institute of Mental Health grants R01MH0669940 and R01MH069928

Dr. Bruce E. Compas, for his unwavering support and attention to my educational success. His untiring encouragement helped me to reach my utmost academic potential.