Mind the Dad

A spotlight on a parenting service for fathers in the perinatal period

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Why set up a service for fathers in the perinatal period?



Why include fathers?

Many fathers also experience perinatal mental health difficulties

- 10% of fathers report experiencing mental health difficulties during their partner's pregnancy and the year following birth
- Father report high levels of anxiety about:
 - their new roles and responsibilities
 - their relationship with their partner
 - their capacity to relate to the new baby
- The most significant predictor of perinatal mental health difficulties in fathers is mental health difficulties in their partners (Hannington et al., 2012).
- Children of fathers with mental health difficulties in the perinatal period are also at higher risk of developing difficulties in their cognitive, behavioural, social and emotional development compared to their peers (Sanger et al., 2016; Ramchandani et al.,



Dads are falling through the gaps

 Despite this need, paternal mental health is not routinely assessed for by health professionals in the antenatal or postnatal period in the UK

Dads feel marginalised

 Health professionals report lacking confidence and skills to support new fathers





What we do



Early Years Programme

- Mentalisation-based approaches
- Video-feedback approaches
- Psychoanalytic dyadic approaches



a. Universal services

Integrated provision as part of universal services for families who are experiencing early relational difficulties that can be addressed within health visiting and/or children's centre settings.

b. Targeted provision

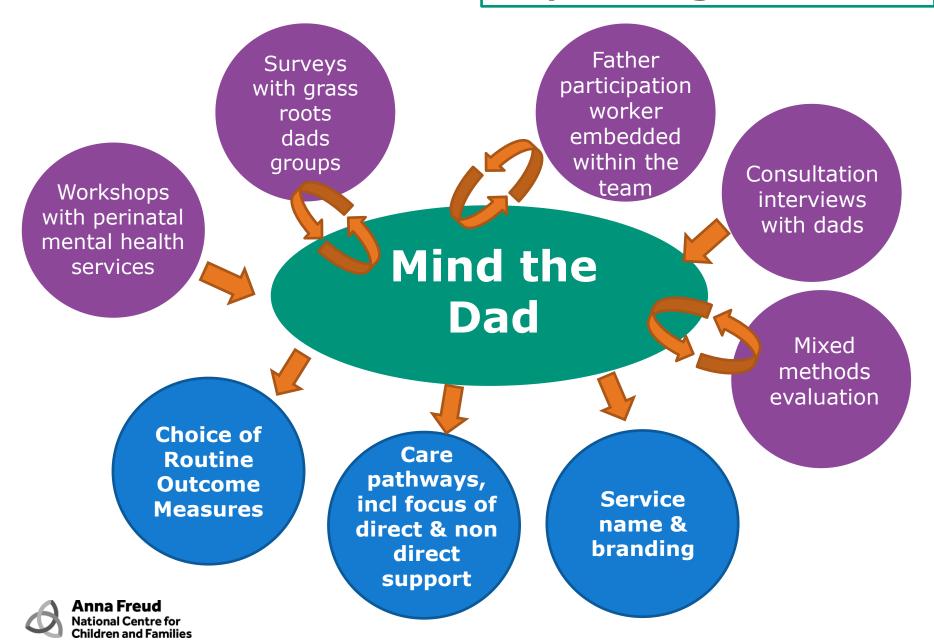
For more vulnerable children and families with high levels of need, who require focused interventions that address relational disturbance.

c. Specialist services

For families with very high levels of need and safeguarding risk, where the babies/young children are on the edge of care.



Co-producing the service



Who, how, where, when?

Who?

Partners of women accessing specialist community perinatal mental health team

How?

- Referrals from specialist community perinatal mental health team
 - Send all families Mind the dad leaflets
 - Invite dads to all intake assessment appointments
 - Tell mums about it
- Self-referral via online form

Where?

Virtual

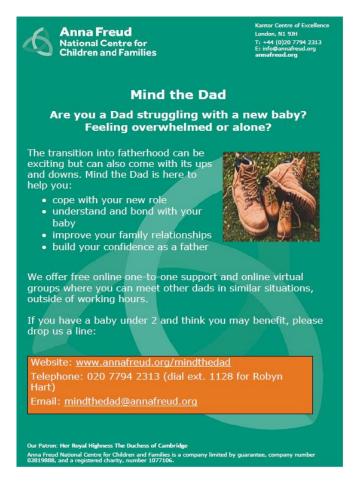
When?

As flexible as possible



Mind the Dad flyers and website

www.annafreud.org/mindthedad







What Mind the Dad offers?

ASSESSMENT

- Set it up with an initial phone call
- Fathers invited for virtual assessment with two Mind the Dad therapists
- Focuses on:
 - 1. Mental health
 - 2. Parent-infant relationship and parenting
 - Parenting confidence
 - Quality of parental sensitivity (recognising and responding to baby's cues)
 - Ability to mentalise self and baby
 - Presence of unprocessed early trauma and active defences
 - 3. Couple relationship



What Mind the Dad offers?

TREATMENT PLANNING

- Discuss with team
- Identify which intervention meets the needs of the dad and his family
- Signpost to other services as required (mainly IAPT)

INTERVENTION

ALL interventions were adapted specifically for fathers

- Mentalization-based Parenting Groups (8 sessions)
- Video feedback to Promote Positive Parenting (VIPP) (12 sessions when virtual)
- Parent-Infant Psychotherapy (24 sessions)
- Low intensity CBT
- Online resource hub, including guided self-help (soon!)



OUTCOMES

INPUTS

OUTPUTS

SHORT TERM OUTCOMES LONG TERM OUTCOMES

Practitioners who are able to work flexibly (evenings & weekends)

A secure, dynamic and safe digital platform to deliver the assessments and interventions

Clear referral pathways for how dads are referred and allocated to interventions within the project

Engaged perinatal mental health stakeholder community

Trained & supervised staff team

Development work

- Coproduction with local dads
- Co-design of care path ways with key stakeholders in perinatal mental health

Team and network training

- Training up the team in father's mental health and parenting
- Training up potential referrers in the rational and remit of the project

Interventions (virtual)

- Reflective Parenting Group (7 sessions)
- Video-feedback for positive parenting (5-7 sessions)
- Parent-infant Psychotherapy (up to 24 sessions)
- Low intensity CBT
- Online resource hub

Number of referrals

Assessment sessions attendance rates

Intervention sessions attendance rates

Average number of sessions attended

Number of cancelled and DNAd appointments Positive experience of the service offered (ESQ)

Improved goal attainment (Goal-based outcomes)

Reduced symptoms of psychological distress/ mental health (CORE-10)

Increased perceived social support
(Multidimensional Scale of
Perceived Social Support)

Improved reflective functioning
(The Parent Reflective
Functioning Questionnaire)

Increased confidence in parenting (Karitane Parenting Confidence Scale)

Improved cognitive, language, physical, social, emotional and behavioural development of baby (measured by ASQ/ASQ-SE)



Evaluation

Outcome measures

- CORE-10
- Parent Reflective Functioning Questionnaire
- Karitane Parenting Confidence Scale
- Multidimensional scale of perceived social support
- Goals based outcomes
- Experience of Service questionnaire

Qualitative interviews

- Post-intervention interviews carried out by evaluation team
- Experience of service from referral through to discharge
- Experience of virtual delivery



What we have learnt so far



What we learnt: working with perinatal teams

- Having simple referral processes
- Holding cases outside of NHS
- Having PMHS Dad Champions
- Having Mind the Dad team members in PMHS team meetings
- Engaging the wider perinatal network



What we learnt: engaging fathers

- Open door policy for dads
- Language
- Encouragement from referrer/partner to be referred
- Opportunity to self-refer
- Preference for group work





What we learnt: virtual assessments

- Importance of building a therapeutic relationship over virtual delivery
- First time talking about problems with anyone
- Dads felt able to be open, honest and share about their problems
- Not feeling like legitimate users of perinatal services
- Collection of routine outcome measures on a digital tool was welcomed (POD)



What we learnt: interventions

- Work with what Dads bring (not always parenting)
- Added low intensity CBT after dads came with low mood and anxiety as bridge into parenting work
- Added more couple-focused content to interventions
- Help dads develop more selfawareness of the possible impact their MH may have on their interactions with their





What we learnt: virtual delivery



- Dads prefer it, more convenient
- Virtual assessments –
 has not inhibited dads
 from opening up
- Virtual VIPP
- Virtual Reflective Parenting groups
- Virtual PIP

Recommendations:

- Initial interviews/focus groups with local fathers to gauge need
- Referrals may be slow
- Build good relationships with network in order to identify fathers.
- Provide training for networks in importance of working with fathers
- Do not be afraid of virtual delivery
- Group interventions or peer support is very popular
- Feeling the need to support every father who is referred
- Set up clear signposting pathways to other local organisations



A case study



Experiences of Dads

Assessment

- Presenting problem partner had PND, traumatic pregnancy and birth and he felt like a 'metaphorical punchbag'
- First time he had shared problems
- Difficulty in making links between parental mental health and the impact this may have on the baby
- Goals: to be better able to support my partner and manage my own mental health related to supporting partner and his own MH related to this

Intervention

Mentalization-based Parenting Group

Dad A Intervention

Benefits:

- Positive impact on parenting:
- ".....I think I'm going to be a better dad to my baby girl and that's the only thing that I can ask for really"
- "I clearly didn't know what I didn't know because I learned so much in the parenting group"
- Helped him relate to his partner too
 - "[it helped me to] take a pause and not immediately react and realize actually what's going on at the moment and work through that"
- Rated 10/10 for how enjoyable it was and how helpful it was
 - Doing it online was better! 'Hugely convenient'
 - Being able to introduce baby to group

Dad A

Benefits:

 Rated 10/10 for how likely he was to recommend it to another dad

"[it should be]
recommended to every
single parent that goes
into labour for the first
time as part of the
package that you get - it
should be massively
promoted to all parents"

Challenges & suggestions:

- Struggled to get to know the other members – suggested a time for them to chat at end on own
- To include partners in the group



What next?



What's next?



- NEW training in involving fathers in your work – on
 18th November! https://www.annafreud.org/training/
- Publishing a full Mind the Dad evaluation report in January 2022

Thank you!

Website: www.annafreud.org/mindthedad
Contact: mindthedad@annafreud.org

