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The Experiences of First time Fathers in Western Australia: A Qualitative Analysis into the Transition to Fatherhood

IAN D. CLAYTON-SMITH

A thesis submitted in partial fulfilment of the requirements for the award of

Bachelor of Science (Psychology) Honours

Faculty of Computing, Health and Science, Edith Cowan University.

Submitted, 29th April, 2010

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Abstract

According to critical life events framework, the transition to parenthood can be filled with anticipation and excitement, yet it can be extremely difficult for some. The transition to parenthood begins during pregnancy when the parents begin to form emotional bonds with the unborn child, and continues for some time after the birth of the baby, ending when the infant reaches two years of age. There exists a vast amount of research on the experiences of the female transition, but there is little in comparison about the experiences of the male transition to becoming a father for the first time. The aim of this research was to investigate the experiences of first time fathers in Perth, Western Australia, in the 21st century. Using thematic content analysis, interviews with five first time fathers aged between 25 and 38 (M = 31, SD = 6.12), with infants aged between 2 and 20 months (M = 8.8, SD = 8.23) were conducted. Whilst there is a deficiency in current empirical evidence on the transitional experience of first time fathers in Western Australia, the data revealed aspects of fatherhood that are traditionally ignored. This revelation is two-fold in benefit, in that it acknowledges and adds meaning to the male perspective in child rearing, and adds to the body of literature outside other countries such as the United States of America. This research may aid health care professionals gain a better understanding of the issues faced by first time fathers, and identifies the need for improvement in current education and information packages assisting first time fathers with their transition to fatherhood.

> lan D Clayton-smith Dr Bronwyn Harman

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First Time Fathers vi

Contents

. I
11
11
V
V
/I
1
2
4
7
9
2
3
6
20
22
23
23
24
<u>2</u> 4
27

29
29
32
36
41
43
43
43
46

Appendixes

'n

A – Interview Schedule	54
B – Flyer	56
C – Explanatory Letter	57
D – Closing Letter	58
E – Summary of Results	59
F – Participant Information Sheet	62
G – Participant Consent Form	64
H – Participant Demographic (pseudonyms)	. 65
I – List of Counseling Services	. 66
J – Example of Transcribed Interviews	. 67

Prologue

Rationale

According to a critical life events framework, the meaning given to major life changes such as marriage, divorce, death of a spouse, or the transition to parenthood have long term implications, and for some these can be positive experiences, for others negative (Medina, Ledheros, & Lillis, 2009; Park & Folkman, 1997; Sirignano & Lachman, 1985). In the case of the transition to parenthood, evidence indicates that the birth of the first child to be not only rewarding and filled with excitement and anticipation, but it can also be an overwhelming and stressful event, that requires extensive reorganisation of daily routines (Levy-Shiff, 1999; Medina et al., 2009; Moller, Hwang, & Wickberg, 2006). For some, this life event can be seen as a serious challenge or even a crisis (Morse, Buist, & Durkin, 2000).

Perren, von Wyl, Burgen, Simoni, and von Klitzing (2005) propose that the transition to parenthood begins during pregnancy when the parents begin to form emotional bonds to the unborn child, and continues for some time after the birth of the baby. This paper will adopt the Perren et al. (2005) definition and in keeping with research conducted by Yeung, Sandberg, Davis-keen, and Hofferth (2001) clarify the transitional period to end when the infant reaches two years of age.

The literature is replete with studies on the transition to motherhood and society is better prepared for this life-transforming event for women, but there is little discussion in regards to the effect this transition has on the male counterpart (Bolzan, Gale, & Dudley, 2005; Eggebeen & Knoester, 2001). There is a dearth of evidence on the experience and effects of the early transition period felt by the father (Bolzan et al., 2005; Doherty, Erickson, & LaRossa, 2006; Eggebeen & Knoester, 2001).

In regards to parenting involvement past the transitional period, there has been a substantial increase in interest and review over the last three decades, resulting in a large amount of research conducted with children in heterosexual relationships over the course of the child's life (Eggebeen & Knoester, 2001; Habib & Lancaster, 2005; Lamb, 2000; Silverstein & Auerbach, 1999). Most of this research has been conducted in the United States of America (Hewlett, 2000; Marsiglio & Cohan, 2000), Canada (Doucet & Merla, 2007), and the Netherlands (Magnusson, Garrett, & Sundelin, 2000; Moller et al., 2006; Perren et al., 2005), with some interest in England (Henwood & Procter, 2003), but the discourses on the fathers in Australia, particularly Western Australia has been largely neglected (Bolzan et al., 2005).

Definition and Frameworks

The definition of fatherhood is difficult to operationalise (Marsiglio, Day, & Lamb, 2000; Parke, 2000). A description can be taken from various domains such as anthropology (Hewlett, 2000), sociology (Cooksey & Fondel, 1996), development or life course perspective (Booth & Rustenbach, 2008), and demography (Parke, 2000). This present study is qualitative in nature and orientates from the social constructionist framework, and therefore prefers to interpret a definition from the current sociological domain.

In comparison with the social situation existing over 25 years ago, contemporary social scientists are surprised by the ever expanding range of contextual situations in which men can define themselves as a father (Bolzan et al., 2005; Garbarino, 2000; Marsiglio et al., 2000). Diverse types and meanings of fatherhood are shaped by the variety of special situations and circumstances that men find themselves in (Garbarino, 2000; Marsiglio et al., 2000). The contemporary understanding of fatherhood is centred on the notion that it is a fluid and changing dynamic linked to men's experiences of fatherhood (Bolzan et al., 2005). More recently these definitions have incorporated identity theory into their frameworks to accommodate the many diverse situations, family arrangements and familial contexts that men locate and construct themselves as fathers (Bolzan et al., 2005; Booth & Rustenbach, 2008).

Other social constructionist definitions centre on the 'responsible' father providing not only financial support (Cooksey & Fondel, 1996), but also to be an affective companion and caregiver (Bolzan et al., 2005). Under this definition the 'nurturing' father is a key element in the raising of competent, healthy and responsible children (Bolzan et al., 2005). There are other researchers such as Habib and Lancaster (2005), and Parke (2000) whom realise fatherhood is a multidimensional concept, and therefore define fatherhood in terms of an extension of the socialist framework, which includes the degree of involvement with the child or infant. For these researchers fatherhood is defined in relation to the degree of engagement, accessibility, and responsibility (Habib & Lancaster, 2005; Parke, 2000). Recent research has demonstrated that fathers that were actively involved during the transition period were more likely to become accessible to their children over a five year period than those fathers not as equally involved (Cabrera, Fagan, & Farrie, 2008; Shannon, Cabrer, Tamis-LeMonda, & Lamb, 2009). In the study by Shannon et al. (2009) this measure was found to hold strong predictive validity above the control variables of the father's age and education.

The Role Fathers Play in Child Development

According to Yeung, Duncan, and Hill (2000) there has been little attention in recent decades by researchers concerned with the behaviour and attainments of children to the role of fathers in children's lives. Most research has a focus on the benefits derived from the father's mode of income or as financial provider (Cooksey & Fondel, 1996) and the disadvantages that the absent father has on a household, but the father's role in their child's development is largely unknown (Yeung et al., 2000). That is not to say that no research has been done; what Yeung et al. (2000) suggest, is little recent discussion has taken place. They also imply that even though the cultural image of the role of the father has undergone a significant change, the actual role in everyday life has undergone a less severe transformation.

There are three theories or frameworks derived from social sciences from which the role of the father in child development can be considered and these are economical, sociological, and psychological (Yeung et al., 2000). When taken together, these theoretical orientations can alert us to the function that past family structure and experience has to play in determining the experiences felt by the transitional father (Cooksey & Fondel, 1996). Firstly, the economic viewpoint adopts its interpretation from the context of economics and looks at father involvement in terms of resources and capital investment in the development of the child (Coleman, 1988; Cooksey & Fondel, 1996). From the economical standpoint, at the turn of the century fathers were expected to bridge the gap between society

and home through monetary support (Cooksey & Fondel, 1996; Yeung et al., 2000). The father's time and income were seen as providing goods such as food and housing (Coleman, 1988), as well as a service resource providing schooling and health care (Yeung et al., 2000). Through this framework the father's time is viewed as a reserve that has influence over children's human capital development (Coleman, 1988; Yeung et al., 2000). Human capital development considers people, or in this case children, as capital on which investments should be made in order to derive desired returns in terms of improved performance (Coleman, 1988; Osman-Gani, 2004), for instance, the child's ability to successfully navigate through life's inconsistencies.

Under the sociological umbrella the mechanisms for parental influence on child development are significantly different (Yeung et al., 2000). Through this lens the ties to others, both inside and outside the family dynamic, are important resources or constraints (Buchel & Duncan, 1998; Coleman, 1988; Levey, 2009). The parents are seen as central role models in the children's process of learning social interaction and behaviours (Hicks, 2008; Yeung et al., 2001). According to role model theory, the father serves as the prime example of adult male behaviour on which the sons model themselves and daughters build expectations about prospective husbands (Hicks, 2008; Yeung et al., 2001).

Extrafamilial activities focused on interactions both inside and outside of the household exemplify these role dynamics (Buchel & Duncan, 1998). Activities that have been shown to have a direct influence under this paradigm include cultural events, volunteer work, and socialising with other family, relatives and friends (Buchel & Duncan, 1998; Yeung et al., 2001). These aspects influence parenting

First Time Fathers 6

through emotional and instrumental support to the parents, as well as through both positive and negative feedback given by friends and associates on the parenting itself (Buchel & Duncan, 1998). For the child, these aspects have an influence on their development through building social capital in terms of social skills through the child's participation in such activities (Yeung et al., 2001). Levey (2009) argues that these types of activities can be viewed as 'children's work' and can produce a transferable value in that they contribute to the child's success in later life. It should be noted that if the father spends too much time in these activities without including the child, and less time on more conducive activities with the child, then these activities can have a negative influence on the child's development (Yeung et al., 2001).

In turning to the psychological paradigm, the parental orientation and style is key to the role of the father in the child's development (Darling & Steinberg, 1993; Yeung et al., 2001). Under this framework it is the quality and content of the parenting that is of most benefit to the child (Grossman, Pollack, & Golding, 1988). This orientation places an emphasis on a direct interaction between the caregiver and the child (Grossman et al., 1988; Yeung et al., 2000). Under this perspective, not only is the mother designated the role of a primary caregiver, but the father is also considered as a primary caregiver (Yeung et al., 2000). The time that fathers spend with children in activities has been shown to correlate with children's academic performance measured by grading schema (Buchel & Duncan, 1998; Cooksey & Fondel, 1996).

The possible indications of parental orientation and style that have a bearing on the child's development stem from the father's socioeconomic background, cognitive ability, and worldview (Yeung et al., 2000). For example, Elder, Conger, Foster, and Ardelt (1992) found that children born just before the Great Depression in the 1930's developed defiant, aggressive behaviours. These childhood problem behaviours led to under-controlled behaviours in adulthood, as well as unreliable work lives and marriages for the sons and lower status marriages for the daughters (Elder et al., 1992). Elder et al. also found that economic pressure and the necessary adaptations to have negative effects on family relationships, and the fathers negativity represented a stronger link between economic conditions and child behaviour than the mothers did. Under this assumption, fathers appear to play a significant role in mediating the effects of financial hardship (Elder et al., 1992).

This finding is supported by later research conducted by Harris and Marmer (1996). Their research found the quality of father interactions such as supportive parenting behaviours (physical affection, nurturance, interest, companionship, and sustained presence) to be positively associated with more desirable child behaviours like self-control, self-esteem, life skills, and life satisfaction, as well as social and cognitive competence (Harris & Marmer, 1996). There is room within the literature to further explore the processes by which poverty can affect child development (Harris & Marmer, 1996). For example, neighbourhood effects and home environment may offer some avenues for exploration (Harris & Marmer, 1996).

Purpose of This Study

The discourses that become apparent from any point in time serve to construct and give meaning to the manner in which we think, talk about, and or understand certain experiences or situations (Bolzan et al., 2005). In reference to this study, its purpose is to investigate the experiences of first time fathers in Western Australia and explore the definition of what it means to be a father to them in the 21st century. It is hoped that these discourses may give some insight into the contemporary societal expectations around men when they become fathers within this cultural domain (Bolzan et al., 2005). This study also has the added benefit of contributing to studies outside the United States of America.

The Literature

Psychopathology

There have been only a few studies conducted on postnatal depression that have included the husbands of pregnant women (Perren et al., 2005). Those that have been conducted emphasise the risks for the development of paternal depression to be linked to biological, psychological, and sociological factors (Perren et al., 2005) such as the susceptibility to depression before fatherhood, paternal loss before the age of 17, fatherhood in adolescence, relationship discord, and high stress situations (Areias, Kumar, Barros, & Figueiredo, 1996; Spector, 2006). According to Spector (2006) these constraints, along with employment uncertainty and marital volatility, have a greater leaning toward depression for the father than for mothers. Perren et al. (2005) posit prenatal anxiety, low self-esteem, childcare stress, difficult infant temperament, lack of social support, and socioeconomic status as additional factors. Furthermore, an Australian study by Boyce, Condon, Barton, and Corkindale (2007) found that the level of distress experienced by first time fathers was the highest when their partners were in the early stages of the third trimester of pregnancy.

According to the Australian National Health Survey (2008) in both their 2004-2005 and 2007-2008 reviews, 11% of the respondents to the survey indicated that they had a long term mental or behavioural condition that was identified by a medical professional. These were classified into the most commonly reported problems, forming two groups of anxiety (3% for males) and mood affective disorders such as depression (6% for males) (NHS, 2008). Additional information on mental health was collected and collated from respondents using

the Kessler 10 scale (K10) which is a ten item scale of the current distress felt by the respondent (NHS, 2008). The K10 enquires about negative emotional states that may have occurred within the previous four weeks of the survey (NHS, 2008). The results fall into four categories of low (indicating little or no psychological distress), moderate, high, and very high levels of psychological distress (NHS, 2008). The NHS base the assumption from other population studies that high levels of distress, as shown on the K10, indicate a need for professional assistance (NHS, 2008).

According to the NHS (2008) just over two-thirds (67%) of adults are classified as 'low-level', 21% are classified as 'moderate-level', 9% as 'high-level' and 4% as suffering from 'very-high' levels of psychological distress. They cite these figures to have remained constant since the previous survey held in 2004-2005 (NHS, 2008). They also cite that proportionately more females than males reported 'high' to 'very-high' levels of distress, with 40% of respondents being male (NHS, 2008).

The NHS (2008) survey reveals that 34% of those adults that reported a mental health condition had also used some form of pharmaceutical medication for the condition within the previous two weeks of the survey. Of those reporting the use of medications, 55% reported using antidepressants, 22% indicated the use of sleeping tablets, and 13% reported the use of medications for anxiety and or nervous conditions (NHS, 2008). It should be duly noted that the use of medications was significantly higher for the older age groups, for example 46% of those aged between 55-64, compared to 22% of those aged less than 35 years (NHS, 2008).

In addition to these findings the NHS (2008) reports the use of lifestyle behaviours that are related to characteristics recognised as risks to health such as smoking and alcohol consumption have remained the same since the previous survey. The results indicate that 1 in 5 persons (19%) were currently smoking on a daily basis with more males (22%) than females (18%) as current smokers (NHS, 2008). The prevalence for smoking was highest for the age group 25-34 with 33% of males compared to 22% of females (NHS, 2008). The high risk level of consumption of alcohol within the previous week of the survey for the age group 25-34 was significantly higher for males (17%) than for females (13%) (NHS, 2008). For the total population, 21% did so at high risk to health (NHS, 2008).

It should be made clear that it is not known from the data obtained from the NHS (2008) if the level of distress reported is or has a direct link to the transition to fatherhood or the other highlighted dynamics. However, the data selected for account here are directed toward the child bearing age range of fatherhood (25-34 years) as determined by fertility rates reported by the Australian Bureau of Statistics (2008). It should also be noted that the style of reporting used in this survey is of self-reporting methodology and may be subject to the corresponding bias. With this in mind, the results from this survey should then be interpreted cautiously to indicate the level of coping within the Australian population. For instance if only 34% of the male population indicated the use of prescribed medication, then perhaps the remaining 66% are either self-medicating or alternatively using other methods, given that 19% of the population indicated daily consumption of cigarettes and 17% of the male population indicating excessive use of alcohol (NHS, 2008).

Coping

According to Reber and Reber (2001), coping is defined as conscious rational ways of dealing with the anxieties of life. Levy-Shiff (1999) list three possible approaches and these include problem focused coping, emotion focused coping, and generally seeking support. The emotion focused strategies direct the individual to focus or find methods of coping outside themselves (Reber & Reber, 2001). This strategy of coping may include the high-risk behaviours such as alcohol consumption and smoking, and the corresponding detrimental effects to health that were outlined in the NHS (2008) survey (Nolen-Hoeksema, 1987). Zaslow and Pedersen (1981) emphasise that the parenting role chosen and satisfaction felt with that decision can profoundly affect the coping strategy selected.

The work environment and the roles that it affords men are typically recognised as central in their psychological health, but familial relationships have typically been seen as of marginal import (Eggebeen & Knoester, 2001). Furthermore, there are some researchers that have acknowledged the significance of the parental role and transition to fatherhood as inhibiting intellectual functioning (Spector, 2006). For example, concerns revealed by Zaslow and Pedersen (1981) include abhorrence and competition by the father toward the infant, brought about through a disruption with the dependent relationship with the partner. They cite sexual deprivation as well as burden of emotional and financial support at the time of inattention from the wife, to further exacerbate the difficulties the father is experiencing. These issues may impact the coping strategy chosen in that if these

problem focused strategies are not met, then the father may seek external methods of coping to calm the distress experienced (Zaslow & Pedersen, 1981).

In addition, in 1981 men received little emotional support for their experience during the wife's pregnancy and consequent arrival of the newborn, and were met with reluctance within the workplace to provide flexible hours and paternity leave (Zaslow & Pedersen, 1981). Given the date of this study it is of historical significance to the current investigation, and should prove interesting to discover if this is a contemporary experience in Western Australia. Incidentally, Canada should be praised for the provision it has made to family policy in terms of paid-for paternity leave for almost a year (Doucet & Merla, 2007), and even the United States of America offers paternity leave, albeit only 12 weeks (Nepomnyaschy & Waldfogel, 2007). Nevertheless, Stewart, Sokol, Healy, and Chester (1986) emphasise that the stressors felt during this period of transition to fatherhood can increase the risk of mental illness and increase the inability to cope. In the United States of America this level was documented at 2% of diagnosed male mental illnesses in 1981 (Zaslow & Pedersen, 1981); this is still a significant number. For this current study the rates are as high as 3% of males experiencing anxiety, and 6% of males experiencing a mood affective disorder such as depression within the Australian population (NHS, 2008).

Relationships

It is well documented that parental relationship difficulties have damaging and long lasting negative effects on child psychological development (Burns & Dunlop, 2002; Grych, Finchum, Jouriles, & McDonald, 2000). Longitudinal research has shown the negative effects of divorce can be long lasting (Grych et al., 2000) and result in the child forming poor self-image, chronic anxiety, depression, and a range of other psychological problems (Burns & Dunlop, 2002). These childhood experiences can also influence the worldview that the father brings to his own child rearing practices (Elder et al., 1992).

In contrast, there has been research that demonstrates the benefits of supportive and positive parental relationships, and for these experiences to be associated with positive parenting behaviours (Carlson & McLanahan, 2006; Davis, 2009; Repokari et al., 2006). Research also shows this to hold constant over both married and unmarried relationships (Carlson & McLanahan, 2006). It is therefore important to understand the transitional factors that are likely to impact the parental relationship and lead to healthy, enjoyable, and non-stressful matrimonial interaction (Repokari et al., 2006).

There is no doubt, as highlighted by the literature, that the addition of a newborn to a relationship is indeed a stressful, and at times, an overwhelming event producing all manner of changes in daily routine (Medina et al., 2009; Moller et al., 2006). High stress situations such as this have been linked to paternal experience of depressive symptoms that place added strain on marital relationships (Areias et al., 1996; Patock-Peckham & Morgan-Lopez, 2007; Spector, 2006). There are a number of ways the relationship can change during the transition to parenthood, such as happiness through attachment, and leisure time (Howard & Brooks-Gunn, 2009; Moller et al., 2006).

Happiness in relationships can be related to a number of aspects and one such aspect is the attachment that the partners have to each other (Moller et al., 2006). Moller et al. (2006) explored the adult romantic attachment patterns of 258

Swedish-speaking individuals, comprising 129 mothers and 129 fathers recruited via 21 health care centres in South Bohuslan, Sweden (Moller et al., 2006). To determine relationship quality in their study, they used the Dyadic Adjustment Scale (DAS) (Spanier, 1976) which is still considered to be a relevant measurement of marital satisfaction, and as suggested by Moller et al. (2006), one of the most widely used today. Attachment style was measured using the Relationship Questionnaire (RQ) designed by Bartholomew and Horowitz (1991).

These researchers found that the attachment styles that people adopt seem to play a significant role in their satisfaction and hence happiness with their relationship (Moller et al., 2006). They found that the proportion of secure attachment to be lower than other studies, but when compared with attachment in couples during stress or separation the attachment is higher (Moller et al., 2006). They suggest the variability found in their study is linked to the specific properties in their sample (Moller et al., 2006). In conclusion, they assume that parenthood generates a stressful situation, as does other research such as that by Medina et al. (2009), that creates a ripe situation to occur, that in turn causes attachment to emerge (Moller et al., 2006). They found that insecure attachment styles to be significantly linked with dissatisfaction in couple relationships after the transition to parenthood (Moller et al., 2006). The ramifications from their study indicate that couples experiencing a stressful transitional period should pay attention to their avoidant tendency, and if they become aware of these tendencies, adjust their behaviour to be more responsive towards both their partner and new-born (Moller et al., 2006).

The shared patterns of leisure time during the transition to parenthood was investigated by Claxton and Perry-Jenkins (2008). These researchers obtained data from a longitudinal study of dual earner couples that were undergoing the transition to parenthood (Claxton & Perry-Jenkins, 2008). This data was collected over the period from 1996 to 2006 and used separate face-to-face interviews with heterosexual couples recruited from prenatal education classes in 147 Massachusetts (Claxton & Perry-Jenkins, 2008). Their study found evidence to support the intuitive notion that leisure time after the birth of the child decreases (Claxton & Perry-Jenkins, 2008). These researchers also found that an increase in shared leisure time to be positively correlated with feelings of love, and negatively correlated to feelings that resulted in couple conflict (Claxton & Perry-Jenkins, 2008). These results suggest that shared leisure time has enduring, positive effects on marriage, and these practices should be established within the relationship before life stresses such as parenthood are explored by the couple (Claxton & Perry-Jenkins, 2008).

Identity/Personality Change

Under the social constructionist paradigm, father identity can be construed through the contextual situations men find themselves in (Garbarino, 2000; Marsiglio et al., 2000). These include the influence of their own fathers and the childhood experiences moulded from time spent with them, and can be exemplified in role model theory, where the father serves as the prime example of adult male behaviour on which the sons model themselves (Hicks, 2008). Both of these will be explored in this section.

First Time Fathers 17

Community based father responsibility programs are a socially constructed situation that men may find themselves in and was explored by Marsiglio and Cohan (2000). These researchers discussed the influence on father identity that such socially constructed programs may have (Marsiglio & Cohan, 2000). They observed that these programs varied widely in their approaches and agendas because they were developed within diverse local communities (Marsiglio & Cohan, 2000). The general concern held by these researchers about programs such as Boy Scouts, school and sporting programs/activities that bring fathers together with their children, is that they establish a context that heightens men's awareness of themselves as fathers (Marsiglio & Cohan, 2000). They assert that these groups should be sensitive to the collective tendencies and political actions they promote, because they hold influential power over the formation of the father identity (Marsiglio & Cohan, 2000). For example, if a man is to identify himself with one of these groups and their agenda, this may be the identity that he forms as a father (Marsiglio & Cohan, 2000).

Another sociological concern these researchers raise is whether or not these collectives are promoting a form of identity politics (Marsiglio & Cohan, 2000). The apprehension expressed by these researchers stems from the extent these organisations express their concerns not only for fathers but as fathers (Marsiglio & Cohan, 2000). For example, a loose form of identity politics may be formed around fathering obligations centred around jobs, schools, community crime, religious faith, and children's well-being (Marsiglio & Cohan, 2000). They warn that such identity-based movements promoting father's obligations may affect the stability of men as fathers, and as such, the ideology toward fatherhood they advocate should be verified before membership (Marsiglio & Cohan, 2000).

In turning to gender role theory, the premise holds that a male and female role model is necessary within the home for the child to develop and live a functional and adequately gendered life (Hicks, 2008). This notion is challenged, however, by those advocating gay and lesbian rights and same sex relations, but for the purpose of this study the central premise will remain. Socialisation theory assumes that there are two distinct but natural genders, being male and female, and these roles are both discrete and functional (Hicks, 2008; Zeiger & Andrews, 1999). Under this paradigm, men or fathers are seen to be performing a set of roles such as working outside the home in tasks such as gardening or bread winning (Hicks, 2008; Lamb, 2000; Yeung et al., 2001). For the female or mother, the role she adopts involves tasks related to those inside the home, such as that of caring for the children, for example (Bolzan et al., 2005; Hicks, 2008; Lamb, 2000). Socialisation theory also posits that these roles are learned through the child interacting with their parents (Bolzan et al., 2005; Hicks, 2008). Finally, socialisation theory holds that all children require a father within the home in order to adequately develop gender identity, else all manner of social and intellectual problems can be blamed on his absence (Hicks, 2008; Jain, Belsky, & Crnic, 1996).

Within recent decades, there has been a shift in gender roles and much of this change has been held accountable to the alterations occuring in workforce demographics (Rochlen, Suizzo, McKelley, & Scaringi, 2008; Zeiger & Andrews, 1999). Women are increasing their participation in the workforce and as such are requiring a more egalitarian division of labour within the household and subsequent child care (Zeiger & Andrews, 1999). The issue of the father's role in family work, such as those tasks traditionally held by the mother, has been receiving an increasing amount of attention (Zeiger & Andrews, 1999). This change has led researchers such as Zeiger and Andrews (1999) and Silverstein, Auerbach and Levant (2002) to establish that this adjustment or 'role strain' involves a major restructuring of reality for men becoming fathers.

For first time fathers, this adjustment is what Zeiger and Andrews (1999) described as a 'second-order' change that involves a fundamental shift in cognitions, affect, and behaviour resulting in an identity shift for men. For example, for most men, their performance in work outside the home is a far more vital function for the good of the family than any caregiving responsibilities they may assume within the household (Zeiger & Andrews, 1999). These researchers found that the father's involvement during the perinatal period to be a pivotal time in their transition and may well set the stage for the cognition toward caregiving involvement (Zeiger & Andrews, 1999).

The tasks that proved to be the most valuable to the transition and change in identity from one assuming higher importance to tasks outside the home, to one of a father and caregiver focused on tasks within the home, included being present and participating in the birth of the new born (Zeiger & Andrews, 1999). This was shown to increase the father's assumption of competence in child caregiving and assist in their identity formation of a father (Zeiger & Andrews, 1999). Other tasks that add viability to the formation of identity change include participation in doctor's appointments, and the purchase of baby items (Zeiger & Andrews, 1999). The ease of identity transformation may be linked to self-efficacy theory, because it predicts a positive relationship between perceived self-efficacy and outcome expectations (Hudson, Elek, & Fleck, 2001). Therefore, those fathers that experience higher self-efficacy through their participation in prenatal events may be in a better psychological position to make the necessary cognitive adjustments to the identity of 'father' (Hudson et al., 2001)

Paternal Child Bonding

There is room within the literature to expand on the direct topic of father and infant bonding during the transition to parenthood. As already articulated, taking a life course perspective, research demonstrates that the man involved in (Habib & Lancaster, 2005) and committed to the pregnancy and his partner prenatally is more likely to be involved later in the child development (Cabrera et al., 2008). It is therefore, an imperative to establish the circumstance in which this bonding takes place.

The bonding process between father and infant was the topic of discussion in a qualitatively designed research commentary conducted by Andersen (1996), in Alberta, Canada. In this research 14 first time fathers were selected for inclusion and discussion about their experiences in developing relationships with their infant (Andersen, 1996). Andersen found that during the first few weeks, the fathers expressed concerns that their wives knew the babies better than they did (Andersen, 1996). They expressed feelings of abandonment, jealousy, envy, inadequacy, or pleasure towards their partners and their ability to soothe the 'fussy' infant, and in furthering the development of the mother-infant relationship (Andersen, 1996). Fathers also expressed a reluctance to interact with their infant for the first few weeks because they viewed their infant as an 'object' or 'thing' (Andersen, 1996). Even though they identified the importance of cuddling, some fathers admitted holding their infant differently to the mother (Andersen, 1996). They confessed to holding their infant like a 'football' or 'grenade', and their reason for doing so was because they had more strength in their arms, and wanted their newborn to exist as "...separate, independent little human beings" (Andersen, 1996, p. 89).

As the first two months of their infant's lives unfolded the fathers became more responsive to and psychologically involved; their feelings of affection began to grow (Andersen, 1996). Andersen (1996) found that for these fathers, the turning point in the father-infant relationship arose when the infant became more responsive, predictable and familiar to them. Interestingly, the fathers became more attracted to their infant's smiles, finding them to be fascinating and rewarding (Andersen, 1996). Other social behaviours that enhance the father-infant bonding process include responsiveness to the father voice, and an alertness or awareness of the father's presence, as well as maintaining eye contact with the father (Andersen, 1996).

Finally, fathers felt encouraged to provide a sensitive and loving environment for their infant when their ability to read non-verbal cues increased and they were able to accurately predict their infant's routines, likes and dislikes (Andersen, 1996). In actively participating in the caretaking and playing tasks with their infants, the fathers expressed the formation of a feeling of closeness, familiarity, and responsiveness to their infant (Andersen, 1996). These behaviours in turn assisted the father to be better in touch with the more gentle and nurturing aspects of themselves and in turn enhance the emotional connectiveness to their infants (Andersen, 1996).

Summary

Fathering and the transition to such a role is for some men a stressful and psychologically overwhelming experience (Morse et al., 2000; Perren et al., 2005). The role necessitates a major shift in identity that requires a variety of support structures (Boyce et al., 2007). The formation of the new identity to fatherhood can be influenced by community based collectives that may have a politically aligned agenda (Marsiglio & Cohan, 2000), or simply through gender role theory (Hicks, 2008). The ease or difficulty in identity shift can also be linked to self-efficacy theory, because it predicts the positive relationship between self-efficacy and outcome expectations (Hudson et al., 2001). This can be influenced by the relationship dynamics with both the mother/partner and the infant (Habib & Lancaster, 2005). The literature demonstrates that the quality of time spent in shared leisure with the mother/partner to have enduring and positive effects on the marriage. Finally, recent discussion has also shown that early father-infant involvement to be beneficial in establishing a lasting commitment to the child's long term development (Cabrera et al., 2008). The purpose of this study was to investigate the experiences of first time fathers in Western Australia and what it means to be a first time father to them in the 21st century.

Approach or Methodology Analysis

Framework

This study is qualitative in nature and finds itself orientated in or grounded in the social constructionist framework. Under the social constructionist paradigm, there is no one knowable objective reality (Reber & Reber, 2005). This means that each individual derives and gives a unique meaning to their experiences. As such, it was felt that an interview process better suited the investigation of these experiences of first time fathers and hence thematic content analyses of the data was appropriate.

Participants

Twelve fathers contacted the principal researcher to participate in this research project. However, only five were suitable for the study. Several of the non-suitable fathers were non-present in their child's life, or had issues with separation and divorce and wanted to share those experiences with the researcher. Since their experiences were not in keeping with the spirit of the study, they could not be included. The demographic required for participation included; first time fathers in heterosexual relationships; English speaking (not necessarily first language); and, residing in the Perth metropolitan area. Additionally, to allow for reflection of relatively recent fatherhood, and in keeping with the definition of transitional period as outlined in the introduction, the participant's child was to be aged less than two years.

The five first time fathers that matched the required demographic and did participate in the study were aged between 25 and 38 years (M = 31, SD = 6.12), with infants aged between 2 and 20 months (M = 8.8, SD = 8.23). These

participants reside throughout the Perth metropolitan area, and had various vocations such as mature age student, journalist, IT consultant, engineer, as well as a stay at home dad. An encouragement for participation was an incentive that comprised a raffle, with a prize of a \$50 gift voucher of the winner's choice.

Materials

An interview schedule (Appendix A) comprised of eight general questions was used. The interview schedule was reviewed for face validity and suitability by three independent staff members with appropriate experience at the School of Psychology and Social Sciences, at Edith Cowan University. Each question was accompanied by probes to gain a more comprehensive picture of issues faced by the first time father (Liamputtong & Ezzy, 2005). For example, how do you contribute to the care of your baby? Can you expand on that for me? An audio recording device was used to capture a record of the interview for each participant. This method safeguarded rigour in that it allowed for a preservation of authenticity and a more accurate interpretation of the answers given to questions to be maintained during transcription (Liamputtong & Ezzy, 2005; Miles & Huberman, 1994). A memo pad and pen was used for hand written notes.

Procedure

Before any recruiting of participants began, ethical approval was sought and given by the Faculty of Computing, Health, and Science at Edith Cowan University. The recruitment process involved contacting the Child and Adolescent Community Health Policy (Statewide), Child and Adolescent Health Service, WA Department of Health, requesting permission to display a flyer (Appendix B) in the Child Health Centres located throughout the Perth metropolitan area. Initial contact was made

First Time Fathers 25

via telephone and subsequent correspondence via email. The process involved submitting the same ethics proposal submitted to the Faculty of Computing, Health, and Science Ethics Committee at Edith Cowan University, to the Child and Adolescent Community Health Research and Evaluation Coordination Committee. Once approval was given the flyer and an enclosed explanatory letter (Appendix C) was posted to 110 Child Health Centres located throughout the Perth metropolitan area. As a courtesy, these establishments were notified when the research had drawn to a close and for the removal of the flyers. They were notified either through email or post with a closing letter (Appendix D) and a summary of the results (Appendix E).

In addition, participants were sought through mailing the same flyer and explanatory letter to several privately funded antenatal clinics within the Perth metropolitan area, as well as submitting the same explanatory letter and flyer to Baby-Expo, Morley. Participants were also sought through the placement of the flyer at the Edith Cowan University Joondalup Campus, and Bunnings Joondalup, as well as through personal contacts, and snowballing. Finally, a newspaper interview was conducted between the primary researcher and the *Joondalup Times* to further aid the recruitment process.

The participants were required to make contact with the researcher. They were identified as a first-time father and given an information sheet (Appendix F). The researcher introduced himself, clarified the purpose of the research, and determined a suitable time and date for the interview. The interview used a semi-structured technique (Burgess-Limerick & Burgess-Limerick, 1998) and was

conducted in a mutually agreed upon neutral environment; for example, the local library (Liamputtong & Ezzy, 2005).

Prior to the interview, the researcher introduced himself, and the participant was informed that involvement was purely voluntary and they may withdraw at any time without penalty or prejudice. They were also informed they may choose to not answer any question they found uncomfortable or intrusive and would not be coerced to answer any said question. The participant was given a written consent form to be read and signed (Appendix G) before the interview begun.

Since each conversation is unique, the interview was audio recorded with the participant's consent. This method of data capture is able to embrace the unique social situational context experienced by both the researcher and participant during the interview (Liamputtong & Ezzy, 2005; Miles & Huberman, 1994). Reflexivity is the key to a successful interview and requires listening to stories and the contexts of those stories told by the participant (Miles & Huberman, 1994). It also means an awareness of the how the researcher's actions and role can influence the context of the situation as well as the research process (Liamputtong & Ezzy, 2005).

In relation to the time length of the interviews, a degree of flexibility was required. The length of the interviews varied between 10 and 45 minutes, depending on how much the participant was willing to say. Some participants were asked to participate in more than one interview to clarify meaning given to issues mentioned in past dialogue and new themes emerging from other participants. When the data were transcribed, the recording medium was destroyed. Any links to the identification of the participants were kept strictly confidential and each participant was given a pseudonym (refer to Appendix H).

It was thought that the interview process would be non-intrusive and low risk to participants. However, it was acknowledged that some participants might find the interview process slightly distressing. In any event, the researcher ensured that adequate debriefing occurred and when deemed necessary provided active management. This meant that in such cases the researcher followed up such participants, ensured they had accessed professional assistance, and were indeed recovering. In addition, the researcher provided each participant with contact details of available counselling services (Appendix I). None of the participants found the process stressful and therefore none needed active management.

Analysis

The analysis of the data was thematic in orientation in that the information gathered was transcribed and analysed for emerging themes and discourse (Liamputtong & Ezzy, 2005). It was expected that the participants would be experiencing similar issues and themes would begin to surface as the data was examined. As new and varying themes become apparent, at times it became necessary to return to each participant to explore the fresh issues raised. Although similar experiences were determined, the data could not reached a point of saturation because of the lack of participants (N = 5).

Systematic exploration of the themes involved dividing and displaying the data into three columns on a landscape oriented A4 sheet of paper. A question ordered matrix was necessary to aid in the data compression, as it allowed for the ease of viewing participant responses to each particular question (Green et al.,

2007; Miles & Huberman, 1994). In the left column were the questions, in the centre and by design the largest column was the verbatim transcript, and in the right column were the themes/codes that were emerging from the transcripts as identified by the researcher (see Appendix J for an example). This was not taken lightly in that the transcripts were read several times, so that important words, phrases or sentences could be identified to provide meanings to the descriptive information (Green et al., 2007; Miles & Huberman, 1994). Codes were formed and developed by identifying differences, similarities, and relationships among the events and incidents described in the data (Green et al., 2007). Then several of the codes were clustered into similar theoretical categories/codes and reduced to the most significant themes (Green et al., 2007; Liamputtong & Ezzy, 2005).

According to Liamputtong and Ezzy (2005), scientific rigour of qualitative research is met through carefully documenting the means of arriving at conclusions drawn from the data and avoiding overgeneralisation and unsubstantiated conclusions. To avoid these concerns, the data from this study was analysed by a second researcher to confirm the themes emerging were consistent with the chief researcher's interpretations.

Findings and Interpretations

Themes

As already mentioned, the discourses that emerge from any point in time serve to give meaning to the manner in which we think, talk about, and or understand certain experiences (Bolzan et al., 2005). The experiences that emerged from these present discourses serve to give meaning to what it means to be a first time father in Western Australia in the 21st century. These meanings and experiences highlighted several themes for these fathers. These are the definition of being a father, role reversal and egalitarianism, and support.

Definition of Fatherhood

As mentioned in the introduction, the definition of fatherhood is one that is difficult to operationalise (Marsiglio et al., 2000; Parke, 2000) and a definition can be taken from several domains (Booth & Rustenbach, 2008; Cooksey & Fondel, 1996; Hewlett, 2000; Parke, 2000). In support for the research conducted by Bolzan et al. (2005), Garbarino et al. (2000), and Marsiglio et al. (2000) the definition of fatherhood is contextual in nature, and is shaped by the situation and circumstances that men find themselves in. In asking the participants to give a definition of what it means to be a 'good' father, a variety of meaning became apparent. For Carl the definition was indeed contextual in nature, in that there was a lack of a gender role model for him to fall back on. According to role model theory, the father serves as the prime example of adult male behaviour on which the sons model themselves (Hicks, 2008; Yeung et al., 2001). Since there was no father on which to model himself, for Carl the definition of fatherhood is something that is a work in progress.

First Time Fathers 30

"It's interesting that you ask that. I had that same question asked and it involved a fathers evening, and I really struggled to answer that question beyond to be involved and to be there for my child, be supportive, be nurturing, but principally be involved. The reason I find that, that question difficult to answer is that my, my own parents were divorced when I was 10 and my father was not around from age 10. So, I find it very difficult to say, um, what does it mean to be a good father, because I really don't know. I am trying to invent that at the moment." (Carl)

Longitudinal research by Grych et al. (2000) has shown the negative effects of divorce can be long lasting and Burns and Dunlop (2002) demonstrated that poor self-image, chronic anxiety, depression, and a range of other psychological problems can result. Elder et al. (1992) suggest that these childhood experiences can influence the worldview that the father brings to his own child rearing practices. Carl is determined to be the best father that he can be and this can be demonstrated in the answer he gives to the question about whether the gender of the baby was an issue.

"Um, frankly I was, I was um pleased that we had a healthy baby, that was the important thing. But, look if I had a choice, I would like to have had a boy rather than a girl, but girl's fine. And ah I mean part of the reason why it would have been nice to have a little boy is because um if we save some toys from my childhood that would have been great for a boy. And it would have been great to do all those things that ah my father didn't do with me. Um to do, to be the right father for a son that I would have liked my father to be, but that's not possible. that's fine, I will adapt and ah and ah look after my little girl. It's a moments disappointment. And but ah when I say disappointment that's the wrong word to use. Um..I..the moments ah "Oh well that's not what I wanted, that's fine, It's a girl and we'll, we'll ah make this work and it'll be fine". (Carl)

The central premise here is one of involvement and interaction, as can be further demonstrated with responses from both Bob and Eric.

"....I guess setting my children a, a good example. And being involved and interactive in their lives..." (Bob)

"...supportive not just sort of working on my own, helping with the baby for you know and my wife as well. Um and for me I guess being able to spend time with the baby..." (Eric)

Both interaction and involvement are key concepts in both the Habib and Lancaster (2005) and Parke (2000) definitions of fatherhood, and can be thought of as 'active parenting' (Cabrera et al., 2008; Shannon et al., 2009). Active parenting is an extension of the socialist framework meaning of fatherhood and includes the degree of engagement, accessibility, and responsibility (Habib & Lancaster, 2005; Parke, 2000). Fathers demonstrating 'active parenting' and accessibility to their children were shown to remain so over a five year period compared to those fathers not as equally involved (Cabrera et al., 2008; Shannon et al., 2009).

Studies by Habib and Lancaster (2005) and Cabrera et al. (2008) demonstrate that the father involved in and committed to the pregnancy and his partner prenatally is more likely to be involved in the child's later development. It is therefore essential that the father participate early in the development of their child so that bonding may take place (Andersen, 1996). For these fathers, all but one of the pregnancies was planned, and therefore the father was committed early in the development of their child. Hence, these fathers negotiate the bonding process

with little difficulty and this can be demonstrated in the responses given to the question of what is the best part about being a new father.

"I think all the best parts would be all the, the cuddles and stuff and, and, and the adorable looks and everything." (Andrew)

However, bonding may not be immediate and can take place over a period of time. For example, Bob felt as if he was left in the background. It was not until his baby had matured somewhat, before he was able to interact with her more and got to know her better.

".....I was sort of in the back ground and I didn't have that much to do with it. but as (my baby) became older and she um became you know a bit more of a handful for (my partner) you know this is where I realised that this is where I need to step in and have been able to interact with her a bit more..." (Bob)

This example gives credence to the study conducted by Andersen (1996) in that as the infant's life unfolds the fathers become more responsive to and psychologically involved with their baby. According to Andersen (1996), new fathers express closeness and become more emotionally connected with their infants with an increase in familiarity. For the fathers in this sample, familiarity and closeness is sought out through interaction and time spent playing with their baby, and this may be dependent upon work commitments. Nevertheless, in this sample these fathers spent as much time as they could in play, and getting to know their infants further.

Role Reversal and Egalitarianism

Zeiger and Andrews (1999) and Rochlen, et al. (2008) discuss the shift in gender roles and suggest that alterations occuring within the workforce dynamics

are responsible for this shift. For example, women are increasing their participation in the workforce and as such are requiring a more egalitarian division of labour within the household and subsequent child care (Zeiger & Andrews, 1999). Furthermore, Zeiger and Andrews (1999) and Silverstein, et al. (2002) advocate that this adjustment leads to a 'role strain' that involves a major restructuring in reality for men becoming fathers. In this study, the issue of 'role strain' was not apparent and these first time fathers were glad to step up and assist their partners in whatever manner they could. For instance, in asking these first time fathers the question of what role they played in caring for their infant, there was a consistent reply of one that involved a willingness to equally divide labour or child rearing tasks.

"Ummm...well mostly a secondary support role, I guess because I'm at work. Ummm but usually like um sometimes in the night if my wife can't be bothered getting out of bed she normally sort of pokes me to get out of bed when he's crying and go get him and give him to her. Or, like this morning, this morning as well, after she's done his mornings feed she hands him over to me and I sort of burp him and hand him back and he goes to the other side, and she hands him back again so, yeah, so burping that type of thing. Um if she's able we share-bath him every night. Um and then sort of changing nappies as well, and things like that. On the weekends there's a bit more. Well more of the same pretty much, It's all burping and changing nappies. I can't help her feed him since he's breast feeding so..." (Eric)

When asked what contribution they make at home, there was also a consistent reply of an equal division of labour or a partnership.

"...when I'm at home, evenly spread between the two of us. But I'm, I'm obviously not at home all the time. I tend to be the fulltime worker and (my partner) works part-time. So when I'm at home it's pretty evenly spread." (Bob)

"...What we find is that um, particularly in the evenings, one of us ah can get the baby to being almost settled but um not quite. And all it takes is a change of person, and the other person can settle it. And so it ends up being very much a tag team effort." (Carl)

These examples demonstrate that these Western Australian men in the 21st century are more than willing to assist their partners in the caring for their new infant. It should be noted, however, that these fathers were involved during both the perinatal period and the birth of their infant. This would then add support for the findings of Zeiger and Andrews (1999) in that the father's involvement during the perinatal period is a pivotal time in their transition, and may well set the stage for the cognitive change toward caregiving involvement. In addition, being present and participating in the birth is valuable in the transition and change in identity from one assuming higher importance to tasks outside the home, to one of a father and caregiver focused on tasks within the home (Zeiger & Andrews, 1999). An example of commitment to being present during birth follows.

"....Sat by her side for 18 hours. Didn't even leave, because I was so excited about her coming along..." (Dave)

There is no doubt, that the addition of a newborn to a relationship is indeed a stressful, and at times, an overwhelming event producing all manner of changes in daily routine requiring planning and negotiation (Medina et al., 2009; Moller et al., 2006). "...Planning is, is everything for us now. Whereas before we could just sort of you know, "Do you feel like doing this?" "Why not let's just get up and go". Well you can't, you just can't do that now." (Bob)

The findings in this study are no different to those conducted in other countries in terms of planning. Furthermore, the 'relationship strain' as reported by Areias et al. (1996), Patock-Peckham and Morgan-Lopez (2007), and Spector (2006) is a reality for these fathers.

"... I do find there are moments of difficulty. Where um she's far more irritable, she's far more likely to say something cutting. Um and I have to stop her from time to time to say "You're hurting my feelings, please stop". Um and it's very quickly resolved, we've never really had a serious argument in all the time we've, we've um been going out together, we've been married, but I'm aware that, that there's a lot more friction between us, and that I need to do a lot more um to make sure that um that friction doesn't develop. I mean simple things like going out of my way when I have the time to go do it, do the dishes, do the extra mile, do all of the things that would make my, her life a little easier. So, we had this feedback even in the antenatal classes. When one partner is able to pitch in and help – do so! Don't split it 50/50 saying, and say it's your turn. Don't create those sources of friction. In answering your questions about feelings we're trying very hard to be sensitive to one another's feelings and so that my wife does give me the chance to go out once a week and get a break and I cover for her and give her a chance to have her own time." (Carl)

These fathers try to find the time in their busy schedules to make 'special time' to spend with their partners to reduce the incidence of 'relationship strain' – albeit not as much as they have done in the past, before the introduction of their infant. The finding here gives support to the intuitive notion outlined by Claxton and Perry-Jenkins (2008) that leisure time does indeed decrease after the introduction

of a newborn. However, this study found that these fathers would spend time or make time to spend with their partners whenever possible, for example, after the infant has been put to bed in the evening. They also see it as a temporary situation and not too much of a problem.

"...once we usually put him down at ahhh 9 o'clock 8, yeah ½ past 8 – 9 o'clock, so yeah..." (Eric)

"...I mean it's hard, it's hard to fit other things in. Ummm but I don't really see it as being too much of a hassle...." (Eric)

These fathers realise the importance of time-out for themselves and partners, yet are reluctant to leave their infants to the care of another; even though they realise the importance of leisure time for the maintenance and longevity of their relationship.

"...There is a Xmas party coming up in December, and we've declined – we can't go. I'm not comfortable giving the baby to a baby sitter..."

"...It's just too new. We need to do that, we understand we need to do that – we're just not there yet..." (Carl)

Support

As outlined in the introduction, the degree of father engagement and involvement has implications for an infant's or child's development and the literature points to three theories or frameworks from which the role the father can play in the child's development – economical, sociological, and psychological (Yeung et al., 2000). However, none of these was a concern for these first time fathers. Instead, they were interested in gaining knowledge about the biological

developments or developmental milestones that they could expect from their infants, as well as what is a 'normal' behaviour or occurrence. Examples of typical responses when asked what they would like to gain from community courses include:

"...it's a brand new experience for first time fathers. Particularly if um, unless you've got close family um living here in Perth or close friends who've been through the recent experience... Perth has a lot of people who've come in from outside, from Malaysia, from Singapore, from the East Coast, who don't have the support networks here and who really struggle to find out what they need to know, what they need to do." (Carl)

"....I mean it's sometimes just basic stuff like noises he makes during the night. Are they normal? type of thing. You know, what', what's like normal baby behaviour and you know is, is throwing up stuff, is that normal? You know. Umm my wife knows that anyway so. Sometimes I sort of ask her, Well should he be doing this?....[laughter]....And she'd most likely say, 'Yeah that's fine" you know, but um so I think it's just really like just stuff that could be like a ah reassurance that what's normal and when to sort of say "we need to go to the hospital now" or things like that type of thing..." (Eric)

Not only did these first time fathers find that these community groups were lacking in developmental advice, but they also felt they were difficult to find and in most cases not suited to the first time father.

"...my wife goes to a mothers group she said you know, one of the books we we're reading was saying about sort of fathers groups as well, it's harder to find those." (Eric)

"...so I went, but it was, you know essentially for the dads who were transient, who weren't necessarily in a relationship. Or who might be estranged from their partner....and....it was, it was completely pointless for me..." (Bob)

For first time father Dave, societal expectations within these groups are antiquated. He also found extreme difficulty in fitting in to the playgroups and finding support through them. He is resilient however, and continues to look for a suitable support group.

"...god...there's that stigma of the child should be with the mother. That's the stigma that's, that's out there...." (Dave)

"...Ummmmm......It's very strange with women, they are very 'cliquey' and 'clucky' and they'll stick to their own. Um and you know a new comer comes along and they'll all kind of ignore them..." (Dave)

"...with community nurse or the person holding it should at least acknowledge them, but..... Um yeah..... I find, find it you know a lot of them out there are a bit strange..." (Dave)

The research suggests that the transition to parenthood is a rewarding event for first time fathers, filled with excitement and anticipation (Levy-Shiff, 1999; Medina et al., 2009; Moller et al., 2006). This research also indicates that for others it can be an overwhelming and extremely stressful occasion (Levy-Shiff, 1999; Medina et al., 2009; Moller et al., 2006) presenting serious challenges (Morse et al., 2000), the implications of which can lead to depressive symptomology (Areias et al., 1996; Patock-Peckham & Morgan-Lopez, 2007; Spector, 2006). These paradoxical findings are supported here. For example, one of these fathers did not consider a life-changing event such as this to be particularly stressful; when asked to describe a stressful event, Eric had some difficulty in finding one to describe.

However, for others stressful events are indeed a reality and can usually be linked to personal lack of sleep leading to a lower tolerance and higher irritability, or on other occasions when the baby is irritable and hard to manage.

"Umm....I think, think just..um..lack of sleep and then just stuff that was less irritating is more irritating." (Andrew)

"[pause] um probably when she cries....and you can't stop it." (Andrew)

Coping is defined as conscious rational ways of dealing with the anxieties of life (Reber & Reber, 2001) and Levy-Shiff (1999) identified three possible approaches that include problem focused coping, emotion focused coping, and generally seeking support. The emotion-focused strategies may lead to 'high-risk' behaviours such as alcohol consumption and smoking, and the resulting negative effects as highlighted in the discussion on the findings of the NHS (2008) survey.

The fathers in this study opted for the coping strategy of generally seeking support through community groups, friends, and family, and the limitations with the community-based groups has been discussed. Whilst friends and family were accommodating, they were, on occasion, limited in their ability to provide support. For example, when Carl sought support through his mother-in-law, he was surprised at just how much he and his partner had progressed in their ability to care for their infant. "...my wife's mother is in town for a week, because we have no family here. And seeing her inability to handle the baby and settle the baby show just how good we are at doing it. Um, you would think that a um my wife's mother would be able to settle, wrap the baby, but no. Um all these things we're able to handle, but she's having to learn all over again, and we have many weeks head start on her..." (Carl)

This had a surprising effect for him, in that it increased his confidence in both his and his partner's ability to care for their baby, thus, resulting in an increase in his ability to cope. Furthermore, this finding is supported by Hudson, et al. (2001) in that self-efficacy predicts outcome expectations. In addition, other strategies in coping used by this sample of first time fathers included flexibility within the workplace.

"...Ummm, well works certainly good. Um my boss has got, well when I started here he had a young family, they're in their late teens now, but he's always been family orientated, so he's pretty flexible. And ummm, you know I can stay at home if [my partner] is not feeling very well. Um or certainly let me work at home one day a week so you know, at least ah if I'm at home you know ah I can have the baby in with me while my wife can have a bit of a nap in the afternoon and catch up on her sleep. Umm yeah I mean it's, I guess apart from that, I guess relatives are fairly supportive and what not..." (Eric)

Incidentally, these findings may demonstrate that a shift has taken place within the last three decades, from one of reluctance to provide support and flexibility to fathers, to one of assistance to fathers and recognition of the importance of the family module by workplace policy makers. For instance, Zaslow and Pedersen in 1981 found that the workplace was disinclined to provide flexible work hours and special leave as required. Furthermore, at the time of writing, both the state and federal governments are in debate about legislation providing paid maternity leave and the source of funding for such legislation. The import of paid paternity leave, however, is still not recognised.

Summary

In summary, several issues or themes became apparent in this study and these were the definition of being a father, role reversal and egalitarianism, and support. For the definition of fatherhood, these findings support the research of Bolzan et al. (2005), Garbarino et al. (2000), and Marsiglio, et al. (2000) in that the definition of fatherhood is contextual in nature, and is shaped by the situation and circumstances that men find themselves in. In addition, the definition offered by Habib and Lancaster (2005) and Parke (2000) which includes the degree of engagement, accessibility, and responsibility was also supported within this sample group.

Role strain as indicated by Zeiger and Andrews (1999) and Silverstein et al. (2002) was not supported as these fathers were more than willing to assist their partners in all manners relating to the care of their child. Community based groups were identified as lacking in their ability to assist fathers in transition in that they did not supply adequate, pertinent information, or excluded first-time fathers. In regards to stress and coping, these fathers did not see the transition to be particularity stressful other than the repercussions resulting from a lack of sleep. This may be linked to their willingness to assist their partners in all responsibilities relating to the care of their baby. Planning and negotiation were issues that are apparent for these fathers, but they are prepared to make adjustments in order to preserve their relationships. Finally, the phenomenon of infant-father bonding is in keeping with the research of Andersen (1996) in that it is an ongoing process.

Conclusions

Strengths and Limitations

One very pertinent limitation to this present study is the use of some fairly dated research. However, these were chosen for their historical significance in that they were used as comparatives. For example, paternity leave has been an issue for over thirty years and can be demonstrated through an historical comparison with the use of the Zaslow and Pedersen (1981) study. Other limitations to this present study can be linked to time constraints and sample size. Burgess-Limerick and Burgess-Limerick (1998) suggest that the number of participants needed to reach saturation is from 7 to 20. Limitations in sample size in this study may be linked to limits in the duration of the study, in that this research was conducted over a brief period – less than 12 months. For this study, twelve fathers approached the principal researcher for inclusion, but only five were suitable and adequately fitted the demographic required of first-time father in transition. The transitional period in this study was taken from research conducted by Yeung, et al. (2001) and is defined as beginning during pregnancy and ending when the infant reaches 24 months of age. Furthermore, the reader should exercise caution in generalising the results since the demographic included only academic professionals and did not include blue collar workers.

The qualitative method chosen suited the research question because it sought to give an account of the experiences of first-time fathers in transition in Western Australia in the 21st century. It was successful on this account. As with all research conducted in this manner, the interview conversation with each participant is unique. The interviewer was well aware of the issues of their

presence on rigour and attempted to reduce any noise that may have interfered with the participant's account of their experience.

Implications

One very important practical implication for this study, as is also demonstrated within the literature, is the phenomenon of stress and coping and the implications this has on depressive symptomology for fathers (Boyce et al., 2007; Perren et al., 2005; Spector, 2006). For the first time fathers in this study, the main coping strategy utilised was one of seeking out support or information. This was mainly sought through family members, friends or relatives. For those with little family support, they sought out clarification through community-based groups. However, these were found to be lacking in their ability or suitability for these fathers; particularly in terms of inclusion and suitable information. This finding also has practical implications for work place policy makers in that work place flexibility plays a key role in stress reduction and coping strategy for these first time fathers. To this end this study adds to the body of knowledge by giving an improved understanding of the risk and protective factors for mental health problems, as well as the causal pathways by which these factors might operate for this population. In turning to theoretical implications, this research adds support for social cognition theories. One clear example lies in the perceived ability to cope and the link to Bandura's self-efficacy theory (Hudson et al., 2001).

Future Directions

Since this study was conducted over a brief period, it may be necessary to conduct a more in-depth analysis over a longer time-frame. This may allow for the inclusion of more fathers and hence other issues or themes to emerge that may not have surfaced in this study. In addition, given the surprise of several fathers experiencing issues with separation and divorce coming forward, there may be an exploratory study there. There is also room within the literature to explore the experiences of the transitional phase in gay and lesbian relationships, as well as an expansion on father and infant bonding during the transitional phase. Finally, in regards to community-based support groups, a study conducted at the group level may give a comprehensive picture as to what is needed within these groups to better inform and include the first-time father in transition.

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Appendix A (In-depth Interview Schedule)

Before we begin, I would like to thank you for your time and decision to participate in this research.

- I am interested to know the reasons why you decided to become a parent. Can you tell me about your decision/experience to become a father?
 What does it mean to be a 'good' father?
 Is fatherhood what you expected? What are the best/worst parts?
 What did you expect? Why?
- 2. What role do you play in caring for your new baby? How do you contribute to the care of your baby?
- 3. Do you reside with your partner? In what capacity married/defacto? How did you feel when you first found out that your wife/partner was pregnant? Did you go to antenatal classes with your wife/partner?
- 4. What feelings do you have toward partner? Have these changed since the new arrival?
 What feelings do you have toward the new baby?
 What gender is your baby?
 How do you feel about that?
- 5. What is your occupation and hours per week? What is your partner's occupation and hours per week? How many hours do you spend per day playing with your new baby? How many hours do you spend per day doing domestic duties? What are these?

How does the work situation affect the time you spend on playing and domestic duties?

6. What's a typical day like now that you're a father?
In what way has a typical day changed since the arrival of your new born?
What types of stressful events occur?
Do you share these experiences with your mates/male friends?

- 7. Can you tell me about the support you get as a father? What coping strategies do you use?
- Would you attend any courses that would help guide you into fatherhood?
 What do you think these courses should include?

Once again, thank you for your participation in this research. Can we come back together at a later date, or can I call you if I need to clarify?

Edith Cowan University Faculty of Computing, Health and Science



Appendix B (Flyer)

Would you like to win a \$50 gift voucher for baby



To first-time Fathers

What are you experiencing as a first time father?

I am an Honours student at Edith Cowan University seeking participants for my research, which has been approved by the FCHS Ethics Committee, and am interested in the experiences of first time fathers. For your participation you will be placed in the draw to win a \$50 gift voucher to purchase items for either yourself or for your new baby.

To be interviewed about your experiences phone lan 0403-798-158 or 0401-630-178



Appendix C (Explanatory Letter)

To whom it may concern,

My name is Ian Clayton-smith and I am a psychology honours student at Edith Cowan University. I am currently seeking candidates for my Honours research. The aim of my research project is to investigate the experience, challenges, and coping strategies felt by first-time fathers. It has been approved by the Faculty of Computing, Health, and Science Ethics Committee at Edith Cowan University.

Since you may be in a position to assist me, your involvement in this study would be appreciated. Your contribution would be to place the flyers accompanying this letter in your building/offices so that potential candidates can read and hopefully respond to them.

The effects a new born has on the mother are widely documented however, there is limited research on the impact this has on new fathers. It is hoped with your participation, that this area of research will give a voice to the experiences felt by first-time fathers and reveal factors that will assist health care professionals in their awareness of the experiences of the first-time father. Your participation is purely voluntary and you are free to withdraw at any time without penalty.

If you have any queries about the project please feel free to contact me by way of my details listed below or my supervisor Dr Bronwyn Harman 6304-5834. If you wish to express your concerns with an independent authority, you may contact Dr Justine Dandy, Edith Cowan University on 6304-5105 or research.ethics@ecu.edu.au.

Yours sincerely Ian D Clayton-smith 0403-798-158 iclayton-smith@optusnet.com.au **Edith Cowan University** Faculty of Computing, Health and Science



Appendix D (Closing Letter)

To whom it may concern,

This is a courtesy letter to inform you that my study has now ended and any flyers you may still have can be removed. I thank you for your involvement in my honours research project – to investigate the experience, challenges, and coping strategies felt by first-time fathers. Your contribution in identifying potential candidates was appreciated. Enclosed is a summary of the results of which I hope can be of assistance to you.

If you have any queries about the project please feel free to contact me by way of my details listed below or my supervisor Dr Bronwyn Harman 6304-5834. If you wish to express your concerns with an independent authority, you may contact Dr Justine Dandy, Edith Cowan University on 6304-5105 or <u>research.ethics@ecu.edu.au</u>.

Yours sincerely Ian D. Clayton-smith 0403-798-158 iclayton-smith@optusnet.com.au

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Appendix E (Summary of Results)

The Experiences of First Time Fathers in Western Australia: A Qualitative Analysis into the Transition to Fatherhood

Summary of Results 2010

lan D Clayton-smith

Participants

This Honours thesis was conducted in 2010, in Perth, Western Australia. It was a qualitative study that involved face-to-face interviews with five first time fathers aged between 25 and 38 (M = 31, SD = 6.12), with infants aged between 2 and 20 months (M = 8.8, SD = 8.23). These participants reside throughout the Perth metropolitan area, and had various vocations such as mature age student, journalist, IT consultant, engineer, as well as a stay at home dad.

Results

The themes that emerge from the study include:

The Definition of Being a Father

These findings provide a 21st century definition of fatherhood as contextual in nature, and is shaped by the situation and circumstances that men find themselves in, which includes the degree of engagement, accessibility, and responsibility. For example, as the infant's life unfolds, the fathers became more responsive to and psychologically involved with their baby, and express closeness and become more emotionally connected with their infants with an increase in familiarity. For the fathers in this sample, familiarity and closeness is sought out through interaction and time spent playing with their baby, and this may be dependent upon work commitments. Nevertheless, in this sample these fathers spent as much time as they could in play, and getting to know their infants further.

Role Reversal and Egalitarianism

These Western Australian men in the 21st century are more than willing to assist their partners in the caring for their new infant. It should be noted, however, that these fathers were involved during both the perinatal period and the birth of their infant, adding support for past research in that the father's involvement during the perinatal period is a pivotal time in their transition, and may well set the stage for the cognitive change toward caregiving involvement. In addition, being present and participating in the birth is extremely valuable in the transition and change in identity from one assuming higher importance to tasks outside the home, to one of a father and caregiver focused on tasks within the home.

Support

These first time fathers were interested in gaining knowledge about the biological developments or developmental milestones that they could expect from their infants,

as well as what is a 'normal' behaviour or occurrence. Whilst friends and family were accommodating, they were, on occasion, limited in their ability to provide support. They then sought to gain this type of support through community groups. However, societal expectations within these groups were found to be antiquated, resulting in some fathers feeling isolated. Furthermore, these community groups were lacking in developmental advice, were difficult to find, and in most cases not suited to the first time father.

"....I mean it's sometimes just basic stuff like noises he makes during the night. Are they normal? type of thing. You know, what', what's like normal baby behaviour and you know is, is throwing up stuff, is that normal? You know. Umm my wife knows that anyway so. Sometimes I sort of ask her, Well should he be doing this?....[laughter]....And she'd most likely say, 'Yeah that's fine" you know, but um so I think it's just really like just stuff that could be like a ah reassurance that what's normal and when to sort of say "we need to go to the hospital now" or things like that type of thing..."

Summary Statement

Planning and negotiation were issues that are apparent for these fathers, but they are prepared to make adjustments in order to preserve their relationships. This negotiation extended to flexibility within the work place. These findings may demonstrate that a shift has taken place within the last three decades, from one of reluctance to provide support and flexibility to fathers, to one of assistance to fathers and recognition of the importance of the family module by workplace policy makers. At the time of writing, both the state and federal governments are in debate about legislation providing paid maternity leave and the source of funding for such legislation. This study directs light toward the need for support within the workplace for fathers.

Community based groups were identified as lacking in their ability to assist fathers in transition in that they did not supply adequate, pertinent information, or excluded first-time fathers. Finally, in regards to stress and coping, these fathers did not see the transition to be particularity stressful other than the repercussions resulting from a lack of sleep. This may be linked to their enthusiasm to assist their partners in all responsibilities relating to the care of their baby. In all cases these fathers welcomed their transition to fatherhood.

"I think all the best parts would be all the, the cuddles and stuff and, and, and the adorable looks and everything."



Appendix F (Participant Information Sheet)

To Participant,

My name is Ian Clayton-smith and I am currently a psychology honours student at Edith Cowan University, Joondalup Campus. The aim of this research project is to investigate the experience, challenges, and coping strategies felt by firsttime fathers. It has been approved by the Faculty for Computing, Health, and Science at Edith Cowan University.

Since you have been acknowledged as a first-time father, your involvement in this study is appreciated. It is anticipated that your contribution will be in no more than one interview of 45-60 minutes duration conducted at a time and place that is convenient for you.

The effects a new born has on the mother are widely documented however, there is limited research on the impact this has on new fathers. It is hoped with your participation, that this area of research will reveal factors that will assist health care professionals in their awareness of your needs as a new father. Your participation is purely voluntary and you can withdraw at any time without penalty and remove any data that you may have contributed up to that point.

All the data gathered remains strictly confidential and any links to your identification will remain strictly confidential. The interview will be recorded on audio medium however, your consent is necessary before this can occur. The interview is recorded because it preserves an accurate record that can be transcribed for analysis. Once transcribed, the medium will be destroyed and there will be no identifiable links remaining. After the study is completed the transcription will be held by my supervisor in a secure filing cabinet at Edith Cowan University for a maximum of seven years, at which point it will then be shredded. The outcomes of the research may be published, but there will be no disclosure of your identity. If you are interested in the outcome of the project, I will be only too pleased to share it with you upon completion.

It is envisioned that this study will not be stressful, however if for any reason you become distressed, assistance is available to you. A number of counselling services will be provided once your consent to proceed is acknowledged. If you have any queries about the project please feel free to contact me by way of my details listed below or my supervisor Dr Bronwyn Harman 6304-5834. If you wish to express your concerns with an independent authority, you may contact Dr Justine Dandy, Edith Cowan University on 6304-5105 or research.ethics@ecu.edu.au.

Yours sincerely Ian D Clayton-smith



Appendix G (Participant Consent Form)

I ______have read the information sheet provided and agree to participate in the research study conducted by Ian David Clayton-Smith of Edith Cowan University. I understand the purpose and nature of the study and am participating voluntarily. Any questions I have asked have been answered to my satisfaction. I grant the permission for the data to be used by the university and acknowledge that it may be published. I understand that my name and other demographic information, which might identify me, will not be used. I understand that I can refuse to answer questions and can withdraw from this study at any time. I realise there will be no penalty, should I decide to cease my participation. I also grant permission for the interview to be audio recorded and understand that the recording will be erased once the interview is transcribed.

Signed: Research Participant

Date

Contact Number

Appendix H (Participant Demographic)

Participant Code	Pseudonym	Infant Gender	Vocation	Participants Age (years)	Infants Age
Number					(months)
001	Andrew	Female	Student	25	15
002	Bob	Female	Journalist	29	20
003	Carl	Female	IT Consultant	37	2
004	Dave	Female	Stay at home dad	26	5
005	Eric	Male	Engineer	38	2



Appendix I (List of Counselling Services)

Edith Cowan University Counselling Service

Lifeline

Mental Health Direct 400

NOTE

It is thought that the interview process will be non-intrusive and low risk for participants. However, it is acknowledged that for some participants the interview process may be slightly distressing. The above are a list of services available to you should you find the process unsettling and wish to talk to a trained professional. These are only a few services that are available and are only suggestions – you are free to choose any other service that you feel better suited to. If you wish the researcher will follow up (contact you) and ensure that you have accessed professional assistance and are recovering.

QUESTION No:		THEMES/CODE
	Ok, before we begin I would like to thank you for your time and participation in this research. That's alright.	
	I am interested to know the reasons why you decided to become a parent. Can you tell me about your decision or your experience to become a father?	
	Um[long pause]] guess I've always intended to become a father. Um I was married 3 years ago um ah originally I was thinking of ah going back to uni and doing a	
	chiropractic degree. Um that was about a year ago. Um and then I guess the gravity of 5 years back at uni, and so we thought well, we thought we'd put off having a child,	
	having a child until I finished that. So I thought well I'd be about 43 by the time that happens so yeah, I though not to bother going back to uni at all. Umyeah and then it	
	happened accidently[laughter]Almost as if the decision was made. So, but yeah its welcome sol hope that answers the guestion.	
	No, no, it's all subjective, so whatever <i>you're</i> going through is what <i>you're</i> going through,	
	and that's what I'm interested to know. Ok, so what does it mean to <i>you</i> to be a good father?	
	Ummmyou mean things I should do or??	
	What do <i>you</i> think makes a good father?	
	Not necessarily the things that you do, do, but what you think is the ideal Oh okWell certainly to be caringummmyeah um supportive not just sort of	
	working on my own, helping with the baby for you know and my wife as well. Um and for me I guess being able to spend time with the baby, so yeah.	
	More emotional caring than financial caring? Ummm[pause]a bit of both really, yeah.	

Appendix J

First Time Fathers 67