

The Symptoms of Postpartum Depression in Fathers in the City of Elbasan.

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Abstract

This study makes an exploration of Postpartum Depression symptoms of fathers in the city of Elbasan. The aim of this study is the recognition of the existence of Postpartum Depression in fathers identifying them in the picture of the symptoms. The study sample consisted of 40 fathers who had a maximum of a year that became parents, with a stable job and the average educational level of formation. Sample selection was carried out in public kindergartens number 1 (one) and 2 (two) in the city of Elbasan. For the methodology of this study are used quantitative methods. The collection of data for this study was conducted in a period of about four months, during the months of February, March, April, May, 2015. The instruments used in this study are the Beck Depression Inventory, Postpartum Depression Scale Edingurgh. Beck Depression Inventory and Edingurgh rate were used as tools because both measure Postpartum Depression and that has the same picture symptoms episode of major depression with the only change the time of development. Instruments that are used to obtain the data necessary to test hypotheses raised in this study were initially piloted before applying them in the final stage. Results of this study showed that 85% of fathers taken in the study showed symptoms of postpartum depression as dissatisfaction with the activities, criticism of themselves, concern / irritability, changes in sleep, lack of interest in people / activities, lack of energy, fatigue, hesitancy in decision making, feelings of guilt, difficulty concentrating, pessimism, frustration, failures of the past, sorrow. The study suggests that measures should be taken for public awareness of the symptoms of postpartum depression are present and in fathers and the Postpartum Depression is not attributed only to women.

Introduction

Overview of the problem of study

From the review of world literature about Postpartum Depression 50 years ago, is always paid attention to women only by ignoring a considerable problems encountered fathers after birth of a child. From this perspective the Postpartum Depression in fathers is an extremely obscure phenomenon and as such it is attributed only to women over the years. But recent research indicates that fathers are equally affected by this phenomenon as women despite that they receive much less social support and that the arrival of the child in their life need to adapt to changes of their role in the family with a lifestyle completely different. Problems which reflect significantly to the development of postpartum depression in fathers in recent years are reinforce in a website created exclusively for them ([www. SadDaddy. com](http://www.SadDaddy.com)) where 3 thousand (3000) fathers in the US asked for help.

Birth of a child is an important event, but at the same time brings what is known as the "syndrome of the head" (couvade syndrome) that is a form of depression that is manifested by a desire to disappear or feeling like abandoned. The first studies on this syndrome were carried out by two psychiatrists at the University of Birmingham; Conclon Trethowan the

American psychotherapist in 1965. Will Courtney explained avoidance and a sense of claustrophobic proving a "neobaba" (new father), not a lack of sensitivity but Postpartum Depression symptoms in a non-individualized form.

All expect that the moment of the birth of a child necessarily is cheerful so it is difficult to understand that a man can not serve only as an emotional stabilizer for young mother as it is the feeling of inadequacy with the new status, lack of psycho-emotional preparation or personal impact of variables such as education, becoming a father for the first time or not, etc. , which cause a shock for men, who, although they do not born equal as women, they suffer the same as women from postpartum depression.

According to Adrienne Burgess of the Fatherhood Institute in England, hormones, insomnia, stress and the responsibility weighing on father as much as the mother, and in those cases where postpartum depression included and wife then the risk for father is even greater double. In addition to these stress, another stress to fathers was created and when they feel less able to practical services and daily activities to their child in relation to women who begin to criticize their husbands not being able to understand so they are and undermine marital relationship itself.

While we in our society do not accept the existence of Postpartum Depression in fathers, considering from personal beliefs that are not scientific beliefs. Therefore Postpartum depression in fathers is a phenomenon non explored in Albania, the incidence of which has not been determined, nor guessing yet, so this study seeks to make known, to recognize and through knowledge to make the most effective ways to treat and reduce the fathers experience as stigmatization affects search assistance despite treatment by their fathers that they are aware that significant changes are occurring in their lives.

Problems in the diagnosis of depression in men are closely associated with the rejection of the presence of symptoms from the subjects diagnosed. To make it more tangible and closer to the Albanian reality postpartum depression in fathers should be taken into account the special specifications related to the level of stress and problems that presents the life of an Albanian man, because Depression father is the key in creating problems behavior at later stages of development.

Definition of terms and their operationalization

Keyword: Postpartum Depression; Baby Blues; postnatal psychosis

Postpartum depression ¹ - It is a mood disorder, and symptoms appear to the mother but also to the father at any time during the first year of childbirth but most cases have their beginning within the first 4 months. Women are twice threatened by fathers from where 20-30% of women suffer from the Postpartum Depression.

There are three postpartum mood disorders:

At the end of the spectrum is the "Baby Blues" that affects about 80% of new mothers in the US and is expected to occur between the third day and ten after birth of the child. Symptoms are temporary and include crying; anxiety; mood swings and irritation.

At the other side of the spectrum is postpartum psychosis or leave and affects 1 in 500 mothers in the US usually 3-4 weeks after birth. Psychosis post-natal is a difficult situation where the mother may not be aware that she is ill and the symptoms include severe disorders of mood (elation or depression or fluctuations from one to the other), delays in the processes of thinking or strange thoughts, insomnia, etc. In this case there is a risk to life of the mother or baby because puerperal psychosis requires hospitalization when the mother's condition is very serious.

Between the postpartum psychosis and "Baby Blues" it lies Postpartum Depression which must state the perspective of bio-psycho-social.

The symptoms of the baby blues ² are limited and last 2 weeks after childbirth and not interfere with the mother's ability to care for herself or her child. Postpartum psychosis is an extreme form of postpartum depression which affects only 1 to 2 per 1, 000 women in the US and it has potentially harmful effects for the mother and baby.

According to the DSM IV-TR, DSM V and ICD-10 depression postpartum (codes defining disorder F30 -F39) is a disorder that occurs in the first weeks after the baby is born (up to four weeks after birth). However many scholars and clinicians engaged in this field point out that postpartum depression can occur within the first year of the child's birth, and in the case of mothers occurs in an earlier stage compared with fathers to whom appear later and can last up the second birthday of the child ³. In view of the clinical symptoms of postpartum depression are similar to those of major depression and distinguishing feature is the period of development, so after the child is born it is develop postpartum depression to mothers and fathers.

In DSM-5 criteria for a major depressive episode are *as following*:

Meeting three or more of the following nine symptoms (including at least one depressed and loss of interest or pleasure) over a 2-week period.

Each of these symptoms represent a change from previous functioning, and it should be present nearly every day:

- a. Depressed humor
 - b. Angry to child, partner or family
 - c. Loss of interest in usual activities
 - d. Changes in appetite
 - e. Inability to sleep or sleeping in longer hours.
 - f. Difficulty in concentrating or recalling events
 - m. Feelings of doubt, guilt, feeling that you / useless, i / hopeless or / tired
 - n. Psychomotor retardation or agitation
 - h. Recurring thoughts of death
- B) The symptoms cause significant distress or impairment.
C) The episode is not due to use of a substance or medical condition.
D) The episodes can not be explained by the presence of a psychotic disorder.

METHODOLOGY

The purpose and objectives of research:

In this study is not intended to show how it has evolved the role and ways of experiencing partner's pregnancy from her husband, but is intended to recognize the existence of the phenomenon of postpartum depression in fathers identifying symptoms picture.

This scientific study also aims to determine the incidence of postpartum depression in fathers in the city of Elbasan and public awareness of postpartum depression in males and there is something that should be treated.

The final goal of this study is that after attempts to infiltrate into the male psyche and to know their conceptions and perceptions about parenting, to determine the level of fathers and Postpartum Depression picture symptoms.

Objectives of the study

This scientific study aims:

1. Define the level of fathers Postpartum Depression.
2. Define the incidence of depression in fathers Postpartum.

The hypothesis of the study:

Ha: Albanian fathers suffer from symptoms of Postpartum Depression.

H 0: Albanian fathers do not suffer from the symptoms of Postpartum Depression

The focus of research

This research will be focused on:

1. By involving in the sample only fathers who had a maximum of one year that have become parents, with a stable job and the average educational level of formation. Determination of these characteristics makes the sample to be intentional and homogeneous

allowing an investigation in depth and detail.

Sample

The sample obtained in the study is intentional from where they were recruited from the registers of public kindergarten children 1 and 2 from 160 parents, 40 fathers who are maximum one year that have become parents, with a stable job and the average educational level of formation. (This is to avoid other variables that could be influencing economic status, education, etc.). The average age of fathers involved in the study was 31 years.

Study measuring instruments

Instruments used for evaluation and measurement of Postpartum Depression in fathers selected for this quantitative study are:

1. Scale Edinburgh Postpartum Depression
2. Inventory of Depression (BECK)

Both instruments measure symptoms of major depression with postpartum depression which has the same picture symptoms and therefore diagnostic criteria were selected to be used and in this study. In both instruments questions directed is avoided to use the word depression because it is assumed that there may be some impact in responding by fathers.

Results

Descriptive results on the incidence and Postpartum Depression level of fathers in the city of Elbasan Descriptive analyzes were conducted to determine the real state level and his incidence of postpartum depression in fathers in the city of Elbasan.

Hypothesis 1

H0: Albanian fathers do not suffer from the symptoms of Postpartum Depression.

Ha: Albanian fathers suffer from symptoms of Postpartum Depression.

After entering the data in SPSS version 20 to obtain the following results

Tab. 1 Beck Inventory

	Frequency	Percent	Valid Percent	Cumulative Percent
7	2	5.0	5.0	5.0
8	2	5.0	5.0	10.0
9	2	5.0	5.0	15.0
13	3	7.5	7.5	22.5
15	11	27.5	27.5	50.0
Valid 17	2	5.0	5.0	55.0
18	2	5.0	5.0	60.0
19	4	10.0	10.0	70.0
20	5	12.5	12.5	82.5
21	7	17.5	17.5	100.0
Total	40	100.0	100.0	

According to this table, it is noted that:

For the 40 subjects involved in the research with 7 points, 8 points and 9 points were evaluated from two dads (individuals) representing 15% of the sample that report lower predisposition to develop postpartum depression.

With 13 points are evaluated only 3 individuals belonging to 7.5% of the sample, a result which indicates the possibility of developing postpartum depression in fathers referring to scoring instrument.

With 15 points have been awarded only 11 individuals belonging to 27.5% of the sample, a result which indicates the possibility of developing postpartum depression in fathers referring to scoring instrument.

With 17 points and 18 points were evaluated by 2 individuals belonging to 10% of the sample, a result which indicates the presence of symptoms of Postpartum Depression in fathers referring to scoring instrument.

With 19 points are evaluated only 4 individuals belonging to 10% of the sample, a result which indicates the presence of symptoms of Postpartum Depression in fathers referring to scoring instrument.

20 points have been awarded 5 individuals belonging to the sample 12.5%, a result which indicates a moderate level of Postpartum Depression (required psychological treatment) referring to the scoring of the instrument

21 points were estimated 7 individuals belonging to 17.5% of the sample, a result which shows a moderate level of Postpartum Depression (required psychological treatment) referring to the scoring of the instrument.

In conclusion we can say that 30% of the sample (12 individuals) suffer a moderate level from Postpartum Depression; 20% of the sample shows symptoms of Postpartum Depression; 35% of the sample are at risk for developing postpartum depression and 15% of the sample reported lower predisposition to develop postpartum depression. See Fig. 1 fq. 107

Tab. 2 Edinburgh's Inventory

	Frequency	Percent	Valid Percent	Cumulative Percent
3	2	5.0	5.0	5.0
4	2	5.0	5.0	10.0
5	1	2.5	2.5	12.5
7	1	2.5	2.5	15.0
9	7	17.5	17.5	32.5
Valid 11	7	17.5	17.5	50.0
12	14	35.0	35.0	85.0
13	4	10.0	10.0	95.0
14	2	5.0	5.0	100.0
Total	40	100.0	100.0	

According to this table, it is noted that:

From 40 people involved in the study with 3 points, 4 points are evaluated by two dads (individuals) representing 10% of the sample that has low predisposition for the development of Postpartum Depression.

With 5 points is rated 1 person (2.5% of the sample) that has low predisposition for the development of postpartum depression.

With 7 points is rated 1 person (2.5% of the sample) that is at risk for developing postpartum depression.

With 9 points and 11 points are evaluated by 7 individuals who constitute 35% of the sample that shows symptoms of Postpartum Depression.

With 12 points were evaluated 14 individuals, so 35% of the sample suffering from postpartum depression

With 13 points have been evaluated 4 individuals, 10% of the sample suffering from postpartum depression.

With 14 points have been evaluated 2 individuals, so 5% of the sample suffering from postpartum depression.

In conclusion, 12. 5% of the sample has low predisposition for the development of postpartum depression; 2. 5% of the sample is at risk for developing postpartum depression; 35% of the sample that shows symptoms of postpartum depression and 50% of the sample suffered from postpartum depression.

Individuals who suffer from Postpartum Depression syndrome have a rating level in Edinburgh inventory equal to 12.

In this way, we consider that our choice is the average equal to the average of the population. So $H_0: \mu_1 = \mu_0 = 12$

H_a: $\mu_0 \neq \mu_1 \neq 12$

From the above analysis of the data shows that H_a stands, so we can say that fathers in our research report symptoms of Postpartum Depression

Conclusions

Scientific study on "Postpartum Depression Symptoms of paternal" highlighted picture of symptoms of Depression that fathers experience postpartum during a child's first birthday. Also among the study described and analyzed the level and incidence of postpartum depression in fathers in the city of Elbasan.

Regard to the level of paternal postpartum depression in fathers in the city of Elbasan from the study that was done to collected data from the completion of the Beck Depression Inventory shows that 15% of the sample reported lower predisposition for the development of paternal postpartum depression; 35% of the sample reported the possibility of developing paternal postpartum depression; 20% reported the presence of paternal postpartum depression symptoms; 30% of the sample reported a moderate level of paternal postpartum depression (required psychological treatment).

Regarding to the level of postpartum depression paternal fathers in the city of Elbasan from the study that was done to collected data from the completion of Instance Edingurgh Depression postpartum paternal turns out that 12. 5% of the sample reported low predisposition for the development of postpartum depression paternal ; 2. 5% of the sample is at risk for developing postpartum depression; 35% of the sample appeared symptoms of paternal postpartum depression and 50% of the sample suffered from paternal postpartum depression.

References.

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