

Family Assessment

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Key fact: Perinatal mental health problems have effects on gestational parents, non-gestational parents, on the child, and on the family. Emerging evidence indicates high rates of depression among adoptive parents and similar negative effects on the child. Paying attention to infant behavior and caregiver – baby interactions during perinatal care provides an opportunity for promotion of the relationship between caregivers and babies, and, if needed, early intervention.

Caregiver – Baby interaction (Dyadic interaction)

Foundation for cognitive and emotional development and for secure attachment.

Caregiver mental health problems can impair dyadic interactions.

Components of dyadic interaction:

- Contingent responsiveness
 - Attention to infant and ability to understand cues
- Respect
 - Acceptance of range of infant behavior
- Empathy
 - Understands infant's state of mind and reflects it back, helping infant feel understood
- Time
 - Sufficient contact time with baby to develop understanding of baby
- Tolerance for mistakes
 - Tolerates mistakes and allows for repair

Signs of impaired dyadic interaction

- Infant has difficulty signaling/communicating his/her needs to caregiver.
- Caregiver unreliable, inconsistent, or inappropriate in responding to infant's cues.
- Infant persistently avoids looking at caregiver (or vice versa)
- Infant presents fearful or apprehensive of the caregiver (e.g. looks dazed or flustered when caregiver approaches, freezing, stereotyped behaviors, contradictory behavior such as sideways or aborted approaches to the caregiver)
- Frightening or frightened caregiver behavior (e.g. dissociation, threatening expressions or voice)
- Caregiver experiences infant as rejecting, 'manipulative' or vindictive

Perinatal mental health in fathers / non gestational parents:

- Up to 10% experience depression between first trimester and one year postpartum
- Correlated with (and higher rates with) maternal depression.
- In males, depression may present as irritability, social isolation, drug and alcohol use.
- Depressed fathers are more likely to engage in domestic violence, and discourage their partner from breastfeeding
- There is an association between paternal postpartum depression (PPD) and behavioral and emotional problems in children
- Same screening tools (PHQ-9, EPDS) can be used to identify depression in the non-gestational parent
- Risk factors for paternal depression include not wanting the pregnancy, marital conflict, comorbid maternal prenatal depression, history of depression, and unemployment.
- American Academy of Pediatrics recommendation is to screen caregivers at 1, 2, 4 and 6-month well child visits
- There is a lack of research on perinatal mental health of lesbian gay bisexual transgender and queer parents

Family Assessment Resources

Promoting First Relationships:

Training program for providers who work with parents and young children

www.pfrprogram.org

Research-based Bringing Baby Home workshops:

<https://www.gottman.com/parents/>

Mount Sinai Parenting Guides:

Information on infant behavior and development for parents

<https://parenting.mountsinai.org/parent-guides/>

Information for fathers from the American Academy of Pediatrics:

[A special message to new dads \(American Academy of Pediatrics\)](#)

Postpartum Men

Resources, information, and a community forum for men with postpartum depression.

<https://postpartummen.com/>

Perinatal Support Washington's Warm Line: 1-888-404-7763

A warm line with dads available to talk to dads about their and their partners' mental health

<https://perinatalupport.org/warm-line/>

Postpartum Support International's First Tuesdays Chats for Dads

Free, live phone sessions for dads on the first Tuesday of each month.

<https://postpartum.net/get-help/chat-with-an-expert/>