Comparing reports of fathers and mothers about problems in pregnancy, delivery, and early care - Results of the large sample “For Healthy Offspring” project in Hungary

Noemi Scheuring et al. 
Budapest, Hungary
Authors

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Heim Pál Children’s Hospital in Budapest

... is one of the largest paediatric hospitals in Europe.

http://www.heimpalkorhaz.hu/
280 doctors work in our hospital. We operate with 500 beds and also provide outpatient services. Thus we manage almost 37,000 inpatients and 500,000 outpatients per year.

Furthermore we are a teaching hospital.
Besides conventional medical work, the hospital provides mental health support for child patients and their families.

Our scientific work has therefore been extended to this field.
Program ’FOR HEALTHY OFFSPRING’

• Heim Pál Children’s Hospital provided subjects for the project called ’FOR HEALTHY OFFSPRING’

• which was the first Hungarian research examining
  – the prevalence of behaviour regulation problems in early childhood and
  – the significance of different underlying risk and protective factors.
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• Families of 0–3 year-old children (n=1164) were included in this study from Heim Pál Children’s Hospital and the local regions.

• Data were collected using
  – questionnaires,
  – diagnostic assessments and
  – consultations.

• The questionnaires were filled out by the parents of the involved children
  – only mothers:  n = 811
  – only fathers:  n = 31
  – both parents:  n = 322
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• Questionnaires asked detailed information on:
  – parents’ socioeconomic status,
  – medical and psychological characteristics of pregnancy and delivery,
  – the child’s medical status and behaviour
  – classical regulation problems (crying, feeding, sleeping).

The applied pack of questionnaires were edited by our own team. Editors: Scheuring, Danis and Gervai and they are considered to be basic questionnaires.
The first section deals with:
- familial background,
- social and work circumstances,
- financial status,
- the parents’ health,
- physical and psychological characteristics of pregnancy and delivery,
- the postnatal period of children,
- breastfeeding,
- early care,
- children’s physical and psychic illnesses, and behaviour.
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• If any of the following are present, additional questions focusing on classical regulation problems are presented:
  – intensive crying and agitation
  – difficulties in feeding and gaining weight
  – sleeping disturbances and problems with getting the baby to sleep
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- For the second section we used questionnaires that have already been adapted in Hungary:
  - the parents’ mood of life, depressive symptoms (DS1K; editor: Halmai et al.)
  - relation to the child and feelings (H-MORS-SF; editor: Oates and Gervai)
  - the child’s temperament (IBQR and ECBQ; editor: Rothbart and Garstein, Hungarian adaptation: Lakatos, Gervai and Tóth)
  - life events in the family and their effects (Life events; editor: Tóth and Danis)
Depression-anxiety (DS1K) scales

There was moderate correlation between the two parents' mental state.

(r=0.3, p<0.001)

Danis, I., Scheuring N., Papp E. and Czinner A.: Additional psychometric data for the DS1K mood questionnaire - Experience from a large sample study involving parents of young children

Strong correlation was found between the mother's and the father's opinion in two dimensions:

- Dominance: $\rho = 0.59$, $p < 0.001$
- Positive feelings: $\rho = 0.51$, $p < 0.001$

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• Additional questions were presented to the couples (n=322) on the following topics:
  – Pregnancy
  – Process of delivery
  – Assessment of the mothers’ emotions in connection with breastfeeding
  – Distress of early care
  – Notification of the signs given by the child
  – Child’s intensive crying
  – Assessment of self-efficacy in soothing the child
  – Process of getting the baby to sleep
  – The number of nocturnal awakenings
  – Feeding problems
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1) Pregnancy – During delivery

<table>
<thead>
<tr>
<th>Description</th>
<th>Different answer</th>
<th>M (Mother)</th>
<th>F (Father)</th>
<th>n</th>
</tr>
</thead>
<tbody>
<tr>
<td>Was it a healthy pregnancy? (YES)</td>
<td>39 couples</td>
<td>65.90%</td>
<td>68.30%</td>
<td>303</td>
</tr>
<tr>
<td>Were they together during delivery? (YES)</td>
<td>10 couples</td>
<td>81.90%</td>
<td>82.90%</td>
<td>310</td>
</tr>
</tbody>
</table>
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2) What was delivery experience like?
   
   \((1= \text{very bad} \ldots 5= \text{extremely good})\)

<table>
<thead>
<tr>
<th>Description</th>
<th>Mean difference ((p&lt;0.001))</th>
<th>Correlations</th>
<th>n</th>
<th>(*)</th>
</tr>
</thead>
<tbody>
<tr>
<td>M delivery experience</td>
<td>3.63±1.17</td>
<td>.352</td>
<td>n(304)</td>
<td>17.90%</td>
</tr>
<tr>
<td>F delivery experience</td>
<td>4.18±1.02</td>
<td></td>
<td>n(304)</td>
<td>7.80%</td>
</tr>
</tbody>
</table>

(*) Proportion of problematic extremities.
Marking the worst two levels on a 5-level rating scale

AAIMHI Conference, Sydney 2015.
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3) Assessment of the mothers’ emotions in connection with breastfeeding

\(1= \text{doesn’t like at all}... \ 5= \text{really like it}\)

<table>
<thead>
<tr>
<th>Description</th>
<th>Mean difference (p=0.013)</th>
<th>Correlations</th>
<th>n</th>
<th>(*)</th>
</tr>
</thead>
<tbody>
<tr>
<td>M Does the mother like breastfeeding?</td>
<td>4.26±1.01</td>
<td>.627</td>
<td>n(295)</td>
<td>6.40%</td>
</tr>
<tr>
<td>F Does the mother like breastfeeding?</td>
<td>4.13±1.10</td>
<td></td>
<td>n(295)</td>
<td>7.50%</td>
</tr>
</tbody>
</table>

(*') Proportion of problematic extremities.
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4) How exhausting was early care?

*(1= doesn’t exhaust... 5= extremely exhaust)*

<table>
<thead>
<tr>
<th>Description</th>
<th>Mean difference (p=0.019)</th>
<th>Correlations</th>
<th>n</th>
<th>(*)</th>
</tr>
</thead>
<tbody>
<tr>
<td>M How exhausting was early care?</td>
<td>2.75±1.19</td>
<td>.377</td>
<td>n(301)</td>
<td>22.50%</td>
</tr>
<tr>
<td>F How exhausting was early care?</td>
<td>2.58±1.12</td>
<td></td>
<td>n(301)</td>
<td>17.30%</td>
</tr>
</tbody>
</table>

(*) Proportion of problematic extremities. Marking the worst two levels on a 5-level rating scale.
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5) Do/did you feel yourself confident about understanding the signs given by the infant? *(1= none ... 5= fully)*

<table>
<thead>
<tr>
<th>Description</th>
<th>Mean difference (p&lt;0.001)</th>
<th>Correlations</th>
<th>n</th>
<th>(*)</th>
</tr>
</thead>
<tbody>
<tr>
<td>M understanding the signs given by the infant</td>
<td>4.13±0.71</td>
<td>.226</td>
<td>317</td>
<td>1.60%</td>
</tr>
<tr>
<td>F understanding the signs given by the infant</td>
<td>3.83±0.77</td>
<td></td>
<td>317</td>
<td>3.70%</td>
</tr>
</tbody>
</table>

(*) Proportion of problematic extremities.
Marking the worst two levels on a 5-level rating scale
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6) Child’s intensive crying: Is/was it intensive and long-lasting crying a characteristic of infancy? 

\((1=\textit{none}...5=\textit{continuous crying})\)

<table>
<thead>
<tr>
<th>Description</th>
<th>Mean difference</th>
<th>Correlations</th>
<th>n</th>
<th>(*)</th>
</tr>
</thead>
<tbody>
<tr>
<td>M Intensive crying?</td>
<td>2.21±1.17</td>
<td>0.716</td>
<td>n(314)</td>
<td>16.60%</td>
</tr>
<tr>
<td>F Intensive crying?</td>
<td>2.24±1.23</td>
<td></td>
<td>n(314)</td>
<td>15.80%</td>
</tr>
</tbody>
</table>

(*) Proportion of problematic extremities. 
Marking the worst two levels on a 5-level rating scale
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7) How exhausting is/was your baby’s crying?  
(1= none... 5= badly)

<table>
<thead>
<tr>
<th>Description</th>
<th>Mean difference (pp=0.026)</th>
<th>Correlations</th>
<th>n</th>
<th>(*)</th>
</tr>
</thead>
<tbody>
<tr>
<td>M how exhausting was</td>
<td>3.50±1.17</td>
<td>.286</td>
<td>n(311)</td>
<td>53.60%</td>
</tr>
<tr>
<td>F how exhausting was</td>
<td>3.32±1.23</td>
<td></td>
<td>n(311)</td>
<td>44.90%</td>
</tr>
</tbody>
</table>

(*) Proportion of problematic extremities.  
Marking the worst two levels on a 5-level rating scale
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8) How effective are/were you in soothing the baby at these times? 
(1= not a bit... 5= every time)

<table>
<thead>
<tr>
<th>Description</th>
<th>Mean difference (p&lt;0.001)</th>
<th>Correlations</th>
<th>n</th>
<th>(*)</th>
</tr>
</thead>
<tbody>
<tr>
<td>M Soothing</td>
<td>4.40±0.77</td>
<td>.318</td>
<td>n(312)</td>
<td>2.80%</td>
</tr>
<tr>
<td>F Soothing</td>
<td>4.02±0.91</td>
<td></td>
<td>n(312)</td>
<td>5.50%</td>
</tr>
</tbody>
</table>

(*) Proportion of problematic extremities. Marking the worst two levels on a 5-level rating scale.
9) How many hours does your child sleep at night?*

<table>
<thead>
<tr>
<th>Description</th>
<th>Mean difference (p=0.008)</th>
<th>Correlations</th>
<th>n</th>
</tr>
</thead>
<tbody>
<tr>
<td>M How many hours does your child sleep at night?</td>
<td>9.42±1.71</td>
<td>.537</td>
<td>n(310)</td>
</tr>
<tr>
<td>F How many hours does your child sleep at night?</td>
<td>9.20±1.76</td>
<td></td>
<td>n(310)</td>
</tr>
</tbody>
</table>

* Between 8 pm and 8 am
10) How exhausting is it for you to get your baby to sleep? 

*(1= none... 5= badly)*

<table>
<thead>
<tr>
<th>Description</th>
<th>Mean difference (p=0.021)</th>
<th>Correlations</th>
<th>n</th>
<th>(*)</th>
</tr>
</thead>
<tbody>
<tr>
<td>M How exhausting is it for you to get your baby to sleep?</td>
<td>1.98±1.16</td>
<td>.546</td>
<td>n(311)</td>
<td>11.70%</td>
</tr>
<tr>
<td>F How exhausting is it for you to get your baby to sleep?</td>
<td>1.85±1.07</td>
<td></td>
<td>n(311)</td>
<td>9.20%</td>
</tr>
</tbody>
</table>

(*) Proportion of problematic extremities. Marking the worst two levels on a 5-level rating scale.
11) How many times does your child awaken as an average during the night sleep period?*

<table>
<thead>
<tr>
<th>Description</th>
<th>Mean difference (p=0.145)</th>
<th>Correlations</th>
<th>n</th>
</tr>
</thead>
<tbody>
<tr>
<td>M awakenings</td>
<td>1.66±1.80</td>
<td>.753</td>
<td>n(309)</td>
</tr>
<tr>
<td>F awakenings</td>
<td>1.72±1.66</td>
<td></td>
<td>n(309)</td>
</tr>
</tbody>
</table>

* Between 8 pm and 8 am
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12) Do your child’s nocturnal awakenings exhaust you?
(1 = none... 5 = badly)

<table>
<thead>
<tr>
<th>Description</th>
<th>Mean difference (p=0.001)</th>
<th>Correlations</th>
<th>n</th>
<th>(*)</th>
</tr>
</thead>
<tbody>
<tr>
<td>M nocturnal awakenings are exhausting</td>
<td>2.66±1.34</td>
<td>0.551</td>
<td>n(292)</td>
<td>26.50%</td>
</tr>
<tr>
<td>F nocturnal awakenings are exhausting</td>
<td>2.39±1.31</td>
<td></td>
<td>n(292)</td>
<td>19.90%</td>
</tr>
</tbody>
</table>

(*) Proportion of problematic extremities.
Marking the worst two levels on a 5-level rating scale.
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13) Are there any feeding problems or difficulties in gaining weight?

<table>
<thead>
<tr>
<th>Description</th>
<th>n</th>
<th>(YES)</th>
</tr>
</thead>
<tbody>
<tr>
<td>M Are there any feeding problems or difficulties in gaining weight? (YES/NO)</td>
<td>n(313)</td>
<td>17.30%</td>
</tr>
<tr>
<td>F Are there any feeding problems or difficulties in gaining weight? (YES/NO)</td>
<td>n(313)</td>
<td>13.90%</td>
</tr>
</tbody>
</table>
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14) Do you have problems with feeding your child?
   \( (1= never... 5= every time) \)

<table>
<thead>
<tr>
<th>Description</th>
<th>Mean difference (p=0.928)</th>
<th>Correlations</th>
<th>n</th>
<th>(*)</th>
</tr>
</thead>
<tbody>
<tr>
<td>M Does feeding the child mean a problem?</td>
<td>1.78±1.09</td>
<td>.446</td>
<td>n(274)</td>
<td>11.50%</td>
</tr>
<tr>
<td>F Does feeding the child mean a problem?</td>
<td>1.79±0.98</td>
<td></td>
<td>n(274)</td>
<td>7.40%</td>
</tr>
</tbody>
</table>

(*) Proportion of problematic extremities.
Marking the worst two levels on a 5-level rating scale

AAIMHI Conference, Sydney 2015.
Conclusion

• In this large sample study we have data from both parents in case of almost 30% of the children.

• The parents have similar opinions of regulation difficulties in early childhood, but the fathers feel less confident about assessing the signs given by their child, and in soothing the child.

• We emphasise the importance of professional support and active role of fathers in childcare and parental self-efficacy, since it has positive effects on the well-being of every member of the family.
Thank you for your attention!