



# Paternal Behaviors in the Era of COVID-19

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In recent years, greater attention has been given to the crucial role of fathers in the care and development of their children [1]. Several studies have enhanced the understanding of the multitude of paternal behaviors which can affect the health of their children, regardless of marital status [2].

The rapid spread of SARS-CoV-2 (COVID-19) infection has prompted the Italian government to declare a national quarantine with restrictive actions, causing a considerably negative socio-economic impact. Likewise, several countries have adopted similar measures in order to minimize the spread of the virus. In this war-like condition, all school lessons have been suspended, meaning that childcare is required full-time at home, social and professional meetings have been canceled, public spaces (*i.e.*, parks) locked, the mobility of people restricted to work or health reasons only, and many businesses have been closed. As a result, the quarantine has led many fathers to spend much more time at home with their children. All of this will probably contribute to change the general perception of fatherhood.

In the past, some states have developed paid family leave policies in order to support the relationship and attachment of fathers to their infants or young children. However, despite this opportunity, men might

experience negative consequences in their professional career when they request family leave [3]. Past socio-economic events gave fathers the opportunity to choose to make their contribution at home and become stay-at-home dads in families in which mothers are able to support family income. Various researches in the field of mental health, sociology and psychology have provided a critical evaluation of the father's central and irreplaceable role in the health of a child, as well as his effect on maternal well-being. In fact, it has been demonstrated that paternal involvement has a significant impact on the children well-being, especially when it comes to nutrition, exercise, play, and behavioral habits [4]. However, troublesome working hours and the lack of free time could compromise the quality of the parent-child relationship, thus reducing the parental confidence. Considering that the stereotype of "father" has changed and is no longer seen as a mere householder, men are now given the opportunity to play a fundamental role in their children's upbringing, influencing their development and family wellbeing.

However, fatherhood has to be considered in all of its forms. Most children grow up with a father and a mother, but some only have a single father, others have two male parents and therefore two fathers, oth-

Received: Apr 16, 2020 Revised: Apr 18, 2020 Accepted: Apr 22, 2020 Published online Apr 29, 2020

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ers are raised in mixed families where the biological father is living outside and the stepfather living at home, whereas others grow up without a male figure involved in their lives. Therefore, a 'father' will be identified with the male figure/s, most involved in the caregiving and development of the child, regardless of the living arrangement, marital status, or biological relationship. A father can be biological, foster or adoptive father, a stepfather, or a grandfather [1].

Some authors suggest that a new, broader concept of paternity, which is interposed between the workplace and the domestic context, has been progressively taking place. Nevertheless, work and time with children often oppose to each other, and fathers typically tend to spend more time at work, than they can spend at home. According to the Italian National Statistical Institute (ISTAT) data, among employed parents with children under 15 years old, 34.6% of fathers reported difficulties in balancing out work and family.

Interestingly, in the past few decades, fathers have more than doubled the time that was previously spent doing housework (4 h/wk *vs.* 10 h/wk) and looking after children (2.5 h/wk *vs.* 7 h/wk) [1]. This has helped creating a subcategory of "new fathers" who seem able to allow time to stay with children, probably by reducing their leisure or by making children an integral part of their day, especially during the weekends.

The engagement of fathers in the early childhood seems to have positive implications on the child's development and psychological profile. Notably, at age 3, the father-son interaction is considered a predictive and exclusive factor of enhanced future language development in children. Indeed, while mothers adapt the choice of words to the child's known vocabulary, fathers are more likely to introduce new terms [5]. Paternal involvement in pre-school age leads to a reduction in the behavioral problems of outsourcing and internalization, as well as greater social adaptation.

Furthermore, a recent meta-analysis has shown that father involvement during adolescence is related to better cognitive development, reduced behavioral problems in males and psychological problems in females, decreased criminality and better economic circumstances, especially in families with low socio-economic level.

The potential role of fatherhood in men's health is expressed through several physiological and psychological reactions in different age groups [6]. For example,

in men who become fathers at a young age, trying to compromise between work and family and concerns about preventive health seem to be the most relevant issues. Middle-aged fathers may experience the return of adult children at home, while advanced paternal aged men may require the intervention of their adult children to manage aspects of daily life and health care.

Concerning paternal mental health issues, an active two-way relationship can exist between fathers and children: the father's well-being can positively influence the child's well-being, and *vice versa*. Indeed, children can be a source of happiness as well as deliver feelings of well-being and satisfaction. Becoming a father can also be a changing experience for men's physical health: men become more motivated to take better care of themselves, modifying their behaviors. In fact, eating habits usually tend to improve, risky behaviors and alcohol abuse tend to be reduced, and physical activity tend to increase. On the other hand, fathers can become a negative influence if they experience economic difficulties, if they struggle to balance work and family, or if they are emotionally disconnected, as a consequence of physical distance. Studies on postpartum male depression show that men are more likely to elude emotional involvement than women, generating unusual depressive behaviors, such as alcohol and drug abuse, antisocial behavior, and interpersonal conflicts. This can result in marital stress and domestic violence, thus compromising the mental health of the child. Interestingly, paternal depression is considered a risk factor for excessive infant crying. In addition, depressed parents tend to spend less time with their children, limiting physical contact and expressing lower inclination to education.

In this regard, feelings of anxiety, worries and economic uncertainties about the future deriving from the current COVID-19 pandemic condition have increased the possibility of depression for both parents, leading to potential negative repercussions on their children care [7].

However, overall, in the era of COVID-19, the greater amount of time spent with the children has given rise to a new concept of fatherhood. Within a few weeks from the start of the quarantine, some men found themselves at home, having to work remotely and take care of their children at the same time. The lockdown is making paternity an immersive experience, a full-

time job that could not have been experienced under normal circumstances, an occupation that deflagrates in all its complexity because hardly compatible with working from home.

Nevertheless, the belief that only the quality of time spent with children is important is not completely accurate, as the amount of time is equally essential. The more time available can be used to accustom children to the presence of their fathers, highlighting their central roles and their responsibilities. Thus, the quarantine is also changing the way children interact with their fathers.

Given the changing expectations, diversity and changing demographics, a new understanding and insight into the crucial role and powerful influence of fathers on children's health, care and development, has been therefore outlined. Several evidences support the positive influence of paternal engagement on offspring behavioral, social and psychological outcomes. Fatherhood represents an intrinsic component of men's health. In this dramatic COVID-19-related period, in which high mortality rates of the longest-lived generations have been recorded, preserving the children's health becomes more than ever an aspect of fundamental importance.

### Conflict of Interest

The authors have nothing to disclose.

### Author Contribution

Conceptualization: GC. Data curation: GC, EM. Supervision:

MEC, MC, AM, AN. Validation: MEC, MC, AM, AN. Writing – original draft: GC. Writing – review & editing: GP, AC.

## REFERENCES

1. Yogman M, Garfield CF; Committee on Psychosocial Aspects of Child and Family Health. Fathers' roles in the care and development of their children: the role of pediatricians. *Pediatrics* 2016;138:e20161128.
2. Coleman WL, Garfield C; American Academy of Pediatrics Committee on Psychosocial Aspects of Child and Family Health. Fathers and pediatricians: enhancing men's roles in the care and development of their children. *Pediatrics* 2004;113:1406-11.
3. Halverson C. From here to paternity: why men are not taking paternity leave under the family and medical leave act. *Wis Womens Law J* 2003;18:257-79.
4. Garfield CF, Isacco AJ III. Urban fathers' involvement in their child's health and healthcare. *Psychol Men Masc* 2012;13:32-48.
5. Raeburn P. Do fathers matter?: What science is telling us about the parent we've overlooked. New York: Farrar, Straus and Giroux; 2014.
6. Garfield CF, Clark-Kauffman E, Davis MM. Fatherhood as a component of men's health. *JAMA* 2006;296:2365-8.
7. Cocci A, Presicce F, Russo GI, Cacciamani G, Cimino S, Minervini A. How sexual medicine is facing the outbreak of COVID-19: experience of Italian urological community and future perspectives. *Int J Impot Res* 2020. doi: 10.1038/s41443-020-0270-4 [Epub].