Reviewer's report

Title: Paternal postnatal depression and relationship with a partner in Japan: a cross sectional study

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Reviewer: Rebecca Giallo

Reviewer's report:

Thank you for the opportunity to read this manuscript seeking to identify factors associated with postnatal depressive symptoms among fathers in Japan. This study has the potential to make an important contribution to the field. I offer the following suggestions to assist the authors’ to strengthen the paper for publication.

Major Compulsory Revisions

Abstract

• There appears to be two aims. I think this needs to be more clearly stated here. At present it sounds like factors associated with feelings toward children were also going to be investigated; however the relationship between fathers’ depressive symptoms and their feelings toward their children were investigated.

• Some of the method and results was a little too detailed and could be stated more concisely.

• Given that the first aim of the study is to assess factors associated with fathers’ depressive symptoms, it would be better to begin the conclusions section with a strong statement about that.

Background

• Only one study showing that fathers’ depressive symptoms are associated with child development is cited. There are several others that need acknowledgement. These include Ramchandani’s work in the UK, and Fletcher et al and/or Giallo et al in Australia.

• It is worth checking the Paulson paper to ensure that fathers’ depressive symptoms were associated with ‘desire’ to engage in childcare, or was it that depressive symptoms were associated with reported lower engagement in childcare activities.

• In the second paragraph of the Background, it is stated that ‘…dissatisfaction in the marital relationships caused fathers’ postnatal depression’. It is not possible to state that it was a causal relationship. Should refer to it as associations.

• It would be helpful to the reader to refer to any other studies that have reported on the prevalence of postnatal depressive symptoms among fathers in Japan.

• A good rationale for the focus on assessment of depressive symptoms at 4
months postpartum is presented.

- The overall background literature was not presented as coherently or comprehensively as it could be. There are several studies that have explored factors associated with fathers’ mental health. A restructure of the background would improve the readability of the background substantially.

- More information is needed to assist the reader to better understand the ‘feelings toward children’ construct. For example, approach and avoidance feelings are assessed by this scale, but there was no discussion of the construct in the introduction. This would also help to build a stronger rationale for why this has been included as an aim.

- The authors may like to consider stating the aims more clearly. It is worth adding the following as Aim 1: To report on the prevalence of postnatal depressive symptoms among a large sample of Japanese fathers. Aim 2 could be to examine the factors associated with postnatal depressive symptoms, and Aim 3 could be to examine the relationship between fathers’ feelings toward their children.

Methods

- More information about where the sample were recruited is required. Was the ‘4 month infant health examination’ part of a universal health care service provided to all families in Japan?

- Just a little more detail on the 4 districts of Kobe are needed. Do the districts cover a broad geographic area and economic distribution that would be representative of the broader population?

- It is not clear what is meant by ‘data were converted into numerals…’

- The EPDS could be described more clearly. Reference to normal and most serious responses is not technically correct. Also refer to some of the key symptoms that it measures. Also state the actual reliability statistics for the current sample.

- It is not clear how some of the predictor variables are assessed. For example, more information on what is meant by a ‘medical institution’ – is this a psychiatric or adult mental health facility, or was it to see a health professional or general practitioner? Also it is not clear what life events in the last year and how they were assessed.

- Information about the pregnancy and birth was collected but these are not reported on in the demographics or used as predictor variables. It might be worth including them if the cell sizes are adequate.

- More information about the adaptation of the QMI for the Japanese population is needed. How was it modified? Also state the reliability statistics for the current sample.

- More information about the Feelings toward Baby Scale is needed. For example it would be helpful to know what approach and avoidance feelings were and examples of these items.
Results

• Reference to Figure 1 as a profile of the participants is awkward as it is not really a profile. Perhaps find another way to describe the flow of participants in the study.

• Please refer to psychiatric diseases as disorders instead

• Anxiety neurosis – is it possible to refer to this as an anxiety disorder instead?

• The first paragraph of the results is quite long. I’m not sure that this much details is needed.

• With respect to the demographics presented in Table 1. It would be good to state whether or not these are representative of the general population?

• Some of the cell sizes are very small for some of the predictor variables (e.g., only 6 depressed fathers in non-regular employment, 4 fathers of children with health problems). This is problematic to include these in the analyses.

• It was not clear what was meant by non-regular employment. Would it be better to look at ‘full-time, part-time, and no employment’

Discussion

• The Discussion raised some good points such as reference to Japanese mothers traditionally returning to their parents’ home as an explanation for some of the findings.

• Overall the discussion needed to be more coherently structured to aid readability. For example, the results could be discussed in order of the aims, and a more focused discussion on what the study found before focusing on what previous studies have found.

• More clarity around the visiting medical institution finding is needed. I think this will help when more information about what this involved is provided.

• More discussion of the findings about economic anxiety would be good. Giallo et al has two papers that have discussed the role of work characteristics and postnatal depressive symptoms in fathers that may help.

• It is problematic to say that depressed fathers may have increased stress levels due to becoming a parent. We don’t have any preconception data to verify this.

• In the limitations a comment on the generalizability of findings to the general population of Japanese fathers would be good.

• It would also be good to highlight the strengths of the study.

• The conclusions of the study could be strengthened by providing more specific implications for policy and practice arising from the study findings.

Level of interest: An article of importance in its field

Quality of written English: Needs some language corrections before being published
Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.

Declaration of competing interests: I declare that I have no competing interests