

ATTACHMENT RG 6

This is the attachment marked "**RG 6**" referred to in the witness statement of Rebecca Giallo dated 7th July 2015.

This article was downloaded by: [Rebecca Giallo]

On: 09 January 2013, At: 05:42

Publisher: Routledge

Informa Ltd Registered in England and Wales Registered Number: 1072954 Registered office: Mortimer House, 37-41 Mortimer Street, London W1T 3JH, UK



Journal of Reproductive and Infant Psychology

Publication details, including instructions for authors and subscription information:

<http://www.tandfonline.com/loi/cjri20>

In survival mode: mothers and fathers' experiences of fatigue in the early parenting period

Rebecca Giallo^{a b}, Natalie Rose^a, Amanda Cooklin^a & Derek McCormack^a

^a Parenting Research Centre, Australia

^b School of Health Sciences, RMIT University, Australia

Version of record first published: 09 Jan 2013.

To cite this article: Rebecca Giallo, Natalie Rose, Amanda Cooklin & Derek McCormack (2013): In survival mode: mothers and fathers' experiences of fatigue in the early parenting period, *Journal of Reproductive and Infant Psychology*, DOI:10.1080/02646838.2012.751584

To link to this article: <http://dx.doi.org/10.1080/02646838.2012.751584>

PLEASE SCROLL DOWN FOR ARTICLE

Full terms and conditions of use: <http://www.tandfonline.com/page/terms-and-conditions>

This article may be used for research, teaching, and private study purposes. Any substantial or systematic reproduction, redistribution, reselling, loan, sub-licensing, systematic supply, or distribution in any form to anyone is expressly forbidden.

The publisher does not give any warranty express or implied or make any representation that the contents will be complete or accurate or up to date. The accuracy of any instructions, formulae, and drug doses should be independently verified with primary sources. The publisher shall not be liable for any loss, actions, claims, proceedings, demand, or costs or damages whatsoever or howsoever caused arising directly or indirectly in connection with or arising out of the use of this material.

In survival mode: mothers and fathers' experiences of fatigue in the early parenting period

Rebecca Giallo^{a,b*}, Natalie Rose^a, Amanda Cooklin^a and Derek McCormack^a

^a*Parenting Research Centre, Australia;* ^b*School of Health Sciences, RMIT University, Australia*

(Received 19 July 2012; final version received 18 November 2012)

Objective: This study aimed to describe mothers' and fathers' experiences of fatigue in the early parenting period and the strategies they use to manage it. **Background:** Fatigue is a common health concern for parents of young children; however, little is also known about how they attempt to manage fatigue, and what does and does not work for them. Even less is known about fathers' experiences of fatigue and its impact on daily life. **Methods:** Thirteen mothers and six fathers of children aged 0–6 years participated in semi-structured focus group interviews. **Results:** Parents described unrelenting physical and cognitive symptoms of fatigue, and its impact on daily functioning, well-being, and parenting. Sleep deprivation was seen to contribute to fatigue for both mothers and fathers, however, mothers also emphasised that daily demands and limited opportunities for a break contributed to their fatigue. Parents identified taking time out for self, exercise and social support as a way of managing fatigue, while fathers saw work as a source of respite and having realistic expectations as being important. **Conclusion:** Implications for future research and the development of information resources for mothers and fathers are discussed, along with clinical insights for health professionals working with parents of young children.

Keywords: fatigue; exhaustion; mothers; fathers; parenting

Fatigue ranks among the most common health complaints for parents following the birth of a baby (Brown & Lumley, 1998; Elek, Hudson, & Fleck, 2002; Glazener et al., 1995) and across the early parenting years (pre-school-aged children) (Cooklin, Giallo, & Rose, 2012). Described as an overwhelming sense of tiredness not relieved by rest or sleep (Cahill, 1999), fatigue is characterised by a lack of physical and mental energy, increased rest requirements, lethargy and difficulty concentrating (Rychnovsky, 2004). Estimates of fatigue among mothers are very high, ranging from 60 to 70% following birth (Glazener et al., 1995), and can persist beyond the first postnatal year for many women (Parks, Lens, & Milligan, 1999). The demands of early care-giving, sleep disruption and adjustment to parenthood can all contribute to parents' experiences of fatigue.

Several studies have sought to better understand the risk and protective factors associated with parental fatigue during the postnatal and early parenting periods (Cooklin et al., 2012; Giallo, Rose, & Vittorino, 2011). In a study of 1276

*Corresponding author. Email: rgiallo@parentingrc.org.au

Australian parents of children aged 0–5 years, parent factors such as poor sleep quality, limited engagement in self-care behaviours, poor nutrition and exercise, inadequate social support and ineffective coping behaviours such as self-blame or avoidance were associated with high levels of fatigue (Cooklin et al., 2012). In another study of 164 mothers attending a residential programme for assistance with children's sleep problems, limited self-care behaviours and lack of social support were the strongest predictors of fatigue even after accounting for child sleep characteristics such as frequency of night waking and sleep quality (Giallo, Rose, & Vittorino, 2011). Similarly, for 50 mothers of children with an Autism Spectrum Disorder, limited self-care behaviour and lack of social support were more strongly associated with fatigue than severity of their child's disability and behavioural difficulties (Giallo, Wood, Jellett & Porter, 2011). Although further research is needed to identify factors in the broader social environment that might impact on parental fatigue, such as employment participation, employment conditions and entitlements, and access to childcare is needed, these findings highlight the importance of self-care and effective coping in management of fatigue.

Although fatigue is a somewhat expected part of early parenthood, it has the potential to impact on daily functioning and mood. Broadly, in the workplace (e.g. transport and aviation industries), fatigue has been associated with problems in executive functioning such as concentration, planning and decision-making, and lapses in safety behaviour in the workplace (Hockey, Mauel, Clough, & Bdzola, 2000; Mellor & St. John, 2012; Shen, Barbera, & Shapiro, 2006). Specific to parents, in a study of 81 mothers attending a mother–baby residential setting, exhaustion was associated with impaired daily functional efficiency and clarity of thought (Fisher, Feekery, & Rowe, 2004). Fatigue has been identified as a risk factor for postnatal depression (Dennis & Ross, 2005; McQueen & Mander, 2003), and recent Australian studies have found that fatigue is associated with increased depression, anxiety and stress symptoms for 1276 parents of young children (aged 0–5 years) (Cooklin et al., 2012) and 164 mothers of children (aged 0–4 years) with sleep problems (Giallo, Rose, & Vittorino, 2011).

There is also growing interest into the impact of fatigue on parenting. A recently proposed model of the impact of fatigue on parenting adaptability suggests that fatigue may interfere with parents' capacity to be constantly sensitive, flexible and responsive to the changing needs of the children (Kienhuis, Rogers, Giallo, Matthews & Treyvaud, 2010). This impact has emerged in several qualitative studies about mothering twins (Beck, 2002), first-time motherhood (McVeigh, 1997), and the early postnatal experiences of women from socio-economically disadvantaged backgrounds (Kurtz Landy, Sword, & Valaitis, 2008). In a study of 24 mothers in the first postnatal year, fatigue was seen to affect their ability to cope when their baby cried, limiting their patience and contributing to irritability (Nash, Morris, & Goodman, 2008). This is of particular concern given that infant crying has been associated with hitting or shaking infants (Barr, Trent, & Cross, 2006; Crowe & Zeskind, 1992; Reijneveld, van der Wal, Brugman, Sing, & Verloove-Vanhorick, 2004). Fatigue may reduce parents' capacity to regulate their physiological (i.e. increased heart rate), emotional (i.e. anger, frustration and stress) and behavioural responses to infant crying.

Although research to date has primarily focused on the first postpartum year, emerging studies reveal that fatigue is also a problem for parents of children during the toddler and pre-school years (Cooklin et al., 2012; Giallo, Rose, & Vittorino,

2011). In these studies fatigue was associated with increased parenting stress, irritable and hostile parent–child interactions, low parenting warmth, and low parental self-efficacy (Cooklin et al., 2012; Giallo, Rose, & Vittorino, 2011). Understanding the impact of fatigue on parents beyond the postnatal period and into the pre-school years is particularly important as this is a period when mothers often resume employment and work–family conflict is likely to peak (Higgins, Duxbury, & Lee, 1994). Mothers may be at heightened risk of fatigue when establishing and negotiating the demands of employment, unpaid labour and childcare responsibilities.

The increase in maternal employment and dual-earner families has also led to marked changes in contemporary fathering (Marsiglio, Amato, Day, & Lamb, 2000), with fathers taking on increased care-giving roles and domestic labour, also requiring negotiation of work–family life responsibilities and demands. Noticeably, research into fathers' experiences of fatigue is scarce, although available research indicates that their experience of fatigue is comparable to mothers' following birth (Elek et al., 2002). Another study of couples interviewed within 8 weeks postpartum found that both mothers and fathers reported that tiredness significantly affected their ability to cope with daily tasks (Nyberg & Sternhufvud, 2000). More recently, a study of 241 fathers with new babies reported that moderate fatigue at 6 and 12 weeks post-birth was associated with decreased engagement in safety behaviours at work (Mellor & St. John, 2012). A more comprehensive understanding of fathers' experiences of fatigue, the perceived impact on their well-being and parenting, and how this compares to mothers' experiences is needed.

Despite the potential impacts of fatigue on both mothers and fathers, Glazener and colleagues (1995) reported that parents rarely seek support for tiredness and fatigue. Moreover, interventions specifically for the management of fatigue are scarce and not well-evaluated. Current approaches advocated by health professionals primarily focus on supporting mothers to manage fatigue after childbirth, including improving sleep and resting, and strengthening instrumental or practical help with housework and caregiving (McQueen & Mander, 2003; Parks et al., 1999; Taylor & Johnson, 2010). It is not known whether these strategies are appropriate for mothers of older children, or for fathers. Generally, little is also known about how parents of young children attempt to manage fatigue, and what does and does not work for them.

To address these knowledge gaps, and in particular the paucity of research into fathers' perspectives, the aim of the study was to explore both mothers' and fathers' experiences of fatigue, its impact on their lives, and how they manage fatigue. This study also sought to better understand their information and support needs for the management of fatigue. This was viewed as an important step in developing information resources and programs that are responsive to both mothers' and fathers' needs. For ease of reference, we refer to mothers and fathers throughout the article; however, we do acknowledge that parenting is not the only role that women and men fulfil during this life stage.

Method

Study design

A qualitative approach to this study was taken as its purpose was to develop an understanding of the experiences of parental fatigue and how it is managed from the perspective of parents. Data was collected via focus groups with small groups of parents facilitated by an interviewer, who focussed on a set of specific aspects of

the fatigue experience (Willis, Green, Daly, Williamson, & Bandyopadhyay, 2009). We selected this approach as we were not only interested in exploring shared experiences and dialogue of these among parents, but also obtaining an understanding of how their experiences, particularly in managing fatigue, may differ. Ethics approval was obtained from the Victorian Government Department of Human Services, Human Research Ethics Committee.

Sample

A convenience sample of parents with young children (aged 0–6 years) were recruited via advertisement on a national parenting website and parenting research organisation mailing list. Parents were invited to participate in focus group interviews about their experiences of fatigue and how they manage it. Thirteen mothers and six fathers consented to participate in the study, and they were offered a \$25 voucher to cover transportation costs. Their demographic information is presented in Table 1. The majority of parents had a university degree, were part-time or full-time paid employed, and had more than one child living at home.

Procedure

Three 60–90-min focus groups, consisting of 6–8 parents each, were conducted. To examine any gender-specific experiences, groups were divided by gender. The two mothers' groups were facilitated by a female researcher during the day, while the one fathers' group was facilitated by a male researcher in the evening. A semi-structured focus group interview with open-ended questions and probes was used to facilitate discussion pertaining to the broad areas of inquiry (see Table 2). All focus groups were audio-recorded.

Data analysis

Thematic analysis was conducted using a procedure outlined by Vaughn, Schumm and Sinagub (1996). The research team debriefed within 24 h after conducting each focus group to discuss broad emerging themes. The audiotapes were transcribed

Table 1. Parent demographic information ($N = 19$).

Characteristic	Mothers ($n = 13$)	Fathers ($n = 6$)
Age of parent (years), M (SD)	34.67 (2.15)	33.67 (2.66)
English spoken at home ($n, \%$)	13 (100%)	6 (100%)
Two parent family ($n, \%$)	13 (100%)	6 (100%)
Level of Education ($n, \%$)		
TAFE, Trade Certificate, Diploma	–	1 (16.7%)
Tertiary (degree or postgraduate degree)	13 (100%)	5 (83.3%)
Employment status ($n, \%$)		
Full-time	1 (7.7%)	6 (100%)
Part-time or casual	10 (76.9%)	–
Not in paid employment	2 (15.4%)	–
Number of children living at home ($n, \%$)		
One	2 (15.4%)	3 (50%)
Two	10 (76.9%)	3 (50%)
Three	1 (7.7%)	–

Table 2. Broad areas of inquiry and corresponding semi-structured interview questions.

Broad areas of inquiry	Interview schedule open-ended questions and probes
How do parents experience fatigue?	Thinking about your own experience of tiredness or fatigue? What is that like for you? Is it a feeling, thought or bodily sensation? When do you typically experience fatigue/how long does it last? Can you describe a typical fatigued day and how does this differ from a non-fatigued day?
What is the perceived impact of fatigue on parents?	What kind of person are you when fatigued? What effects does fatigue have on you, your life, and your children?
How do parents manage fatigue?	What advice would you include if you were writing a tip-sheet for parents on fatigue? What works for you in managing fatigue? What type of support have you accessed (i.e. family, friends, professionals) when you've been fatigued? How effective was it – why/why not?
What information, support or resources might be helpful to parents in managing fatigue?	What would be helpful to you in managing fatigue? If you were to get support from a professional, who would you go to for support? When would this be most helpful (i.e. ante-natally, post-natally)? If you were designing a fatigue pack to help parents, what form would it take and what would it include?

verbatim, and transcripts were reviewed for accuracy by the research team. Next, the team reviewed the transcripts and prepared a data display of verbatim quotes (i.e. specific words, sentences, and phrases) against each of the four broad areas of inquiry. The team met twice to identify, organise and review key themes within each broad area of inquiry: (a) parents' experience of fatigue, (b) the impact of fatigue on parents, (c) how parents manage fatigue, and (d) parents' need for information, support and resources to manage fatigue. Patterns of responses, regularities, and areas of divergence between each focus group as well as between mothers and fathers were identified.

Results

Several themes under each broad area of inquiry emerged and are presented with representative quotes from both mothers and fathers. The quotes are coded by focus group (G1, G2, G3) and by mothers (Mo) and fathers (Fa).

Parents' experience of fatigue

Three themes pertaining to parents' experience of fatigue emerged: (a) unrelenting tiredness, (b) fatigue as a physical, mental and emotional experience, and (c) factors contributing to fatigue.

Unrelenting tiredness

The unrelenting nature of fatigue was described by several mothers in both groups. One mother explained, 'It's more permanent [than tiredness]. Fatigue goes on for a

longer time' (G3, Mo). The experience of feeling fatigued even after sleep was noted by two mothers, 'That relentlessness of waking up and feeling like you're so un-rested every morning' (G2, Mo), and

I slump between five and seven [in the evening]. But when I get them [the children] in bed, I pick up again. And that second wind is why I don't go to bed early ... And then you wake up tired and it starts all over again. (G2, Mo)

Although fewer fathers mentioned this aspect of fatigue, one father described metaphorically, 'You're expecting one thing, and when you're at the finish line, the distance is doubled again' (G1, Fa).

Fatigue as a physical, mental and emotional experience

A range of physical, mental and emotional symptoms were described by mothers and fathers. Most mothers described a lack of physical energy. For instance, 'I think of the physical, that you just can't get yourself off the couch and you can't get yourself moving or to do anything' (G3, Mo). Another summed it up by saying, 'It's like being jetlagged every day' (G2, Mo). In contrast, one mother described a different experience, 'I can be a bit manic when I'm really overtired and I'm over revving. Almost like a caffeine fix, when you're jittery and your body has picked up a level' (G2, Mo).

Some parents described cognitive or mental symptoms of fatigue. One mother described, 'It's attention, concentration, sometimes I actually leave work, get on the freeway and I don't remember how I got home ...' (G2, Mo). Although fathers did not articulate their experiences in detail, one father described that fatigue was, 'A haziness to my day-to-day experience' (G1, Fa). Similarly, another father shared,

You normally operate at 9 out of 10 awareness and alertness but when you're tired, you'd be 7 out of 10. And sometimes you'll sit at 7 for quite a few weeks where you can still do stuff and you're not falling over from tiredness, but you're just not as efficient. (G1, Fa)

Fatigue was also described as an emotional experience for several mothers and one father, who explained,

It hasn't happened often, but I'm tired so my self-control dissipates a bit, and I get irritated, and angry about stuff, and fatigue is all relative to how angry you get. You reflect later on and go 'I'm actually just tired' because on a different day, or a different time it wouldn't have irritated me as much. I find that's about the only thing that I do that I feel a degree of guilt about, when you sort of go 'I shouldn't have gotten that angry'. (G1, Fa)

Factors contributing to fatigue

Several mothers reported heightened fatigue when there was illness in the family or unexpected changes to family routines, but the most commonly reported factor contributing to fatigue by both mothers and fathers was sleep disruption. This was best summed up by two fathers who shared:

I would find myself drifting off to sleep at 11 o'clock and all of a sudden 'wah, wah' and that's it. I get so frustrated and I'm angry and I'm thinking 'how can this be

happening again?’ And my heart starts pumping, and there’s no way I’m going to get some sleep. (G1, Fa)

The amount of sleep you get and the type of sleep – it sets your tone to a very large degree for the day ... like sometimes if I’ve had a bad night’s sleep, then it just darkens you for the whole day. And little things become bigger things ... and it’s all traced back to just not sleeping properly I reckon. (G1, Fa)

Several mothers mentioned the demands of daily life and limited opportunities for a break. One stated, ‘Too much work. Within the home, paid work, housework’ (G3, Mo), and another explained that an inability to wind down contributed to her fatigue levels. The bi-directional influence of worry and fatigue was described by one mother, ‘I think that for me when I get tired what happens is I then worry about lots of silly things and I worry about being tired so it’s kind of a vicious cycle’ (G2, Mo).

The impact of fatigue on parents

Fatigue had an impact on four main areas of mothers’ and fathers’ lives: (a) mood, (b) parenting and relationships with their children, (c) communication and relationships with others, and (d) their daily functioning.

Parents’ mood

Several parents noted that fatigue was associated with worse mood and irritability. As one father described, ‘A bad mood in any circumstance is hard to get out of, but when you’re tired, it’s a lot harder’ (G1, Fa). Several mothers noted that they feel more angry and irritable when they are exhausted,

I’m grumpy and irritable. I don’t usually have a temper, but I lose it really quickly. Normally I’m calm and I can negotiate through situations and I don’t get overly flustered but as soon as I’m tired I just fly off the handle. I’m not rational. I act on emotion’ (G2, Mo)

It [fatigue] makes me angry and that’s the thing that upsets me the most. When I’m tired and even when I’m exhausted I’m not the kind of person that tends to slow down physically. So I continue with what I’m doing but I get short tempered and impatient. (G3, Mo)

Parenting and relationships with children

The majority of mothers and fathers described decreased tolerance and patience with their children. This was summed up well by the following parents who stated,

The way they [the children] behave on a day-to-day basis is probably the same, but when you’re at a point where you’re tired, what they do is more irritating and you react more than you would at another time when you’re feeling good. Tolerance wears thin easier. (G1, Fa)

I’m much shorter tempered. Normally ... I’m much calmer, the constant questions about whatever, I can listen to that and respond and I take my breath and I’m calm. But when I’m tired, I lose everything and I feel myself snapping at them. (G3, Mo)

Several parents thought that the attention they gave their children was compromised by fatigue. One mother shared, ‘They are not getting what they want – not things, but attention ... They don’t get the extras, like sitting down for half an hour and playing ... I won’t do that if I’m tired’ (G3, Mo). The following quotes poignantly illustrate that mothers and fathers often lack the energy to interact with their children,

Not doing a good job of engaging, when you really want to be there for them, and be having fun with your little kids, because they’re so full of energy and curiosity. When you’re knackered, you can’t do that. (G1, Fa)

I just go through the motions. You do your job, you give them food and I’ll put him next to his toys, but I won’t engage because I’m too tired. I do what I need to do to get through to the next sleep. (G3, Mo)

For one mother, fatigue affected how she felt about herself as a parent, ‘I feel guilt, because I’d be a much better parent if the fatigue wasn’t there’ (G3, Mo).

Communication and relationships with others

Fatigue was also associated with irritability in communication and relationships with others. As one father explained when fatigued, ‘I’m not sort of engaging with somebody, like whether it’s work or my partner, I just completely switch off’ (G1, Fa). One mother also explained, ‘It’s almost like you don’t have enough person to give out to everybody’ (G2, Mo).

Daily functioning

Mothers and fathers shared slightly different experiences of the impact of fatigue on daily functioning. Mothers spoke about ‘going through the motions’ (G2, Mo) and ‘It’s like you’re in survival mode – you do the bare minimum, you have got very little left to give’ (G3, Mo). One mother described fatigue as being the ‘new normal’ for her, ‘It’s almost a natural state. I’ve learned to function in this different state’ (G2, Mo). Fathers, on the other hand, talked about the impact on paid employment and the interface with home life. These quotes illustrate this; ‘I struggle a bit more. You get home from work and you need to switch on, but you can’t’ (G1, Fa), and

I found going back to work after having a baby you feel the pressures at work, my experience, the pressures at work were just unbearable for that week, two weeks. And to the point where you’re just about to flip out and walk off. (G1, Fa)

How parents manage fatigue

Key themes relating to how mothers and fathers manage fatigue were: (a) taking time out for self, (b) parenting partnerships, (c) exercise, and (d) social and professional support. Work as a source of respite and having realistic attitudes were unique themes to emerge for fathers, while sleep and resting was unique to mothers.

Taking time out for self

The importance of having time to themselves was stressed by several mothers and fathers. For example, one mother stated, ‘Having free time. Not having to talk to

anyone, or listen. Not carrying someone or their bag, not doing up seatbelts, no-one asking a question' (G3, Mo). A father also explained,

Do something for yourself. Otherwise you're working for the family, helping your partner, playing with the kids and that's it. You go 'my whole world is this revolving cycle' and it's all about me, but none of it is about me at the same time. (G1, Fa)

Planning was seen as the key to making sure one mother got time to herself,

It's important to have planned activities that don't have to be organised. If something is part of my week I don't have to think about it or prepare for it, I'll do it. Like Pilates on a Tuesday afternoon. (G3, Mo)

Parenting partnerships

For mothers and fathers in a couple relationship, taking turns to parent was seen as an important strategy to manage fatigue. This was summed up well by one mother, 'I'm better on the weekend when my husband is there. The pressure is off you, so it's not as intense. Everything is shared and there's give and take' (G2, Mo). Negotiating and rostering parenting duties and time out was specifically mentioned by one father and two mothers.

Exercise

A few parents noted the benefits of exercise in helping to combat fatigue. For instance, 'I get through the fatigue by exercising. I sleep better and it just helps my body' (G2, Mo), while one father explained,

When I exercise, I have more energy. If I consistently get up early and do whatever I do, I feel better over time. The more I sleep in, hit the snooze button, it's almost like I've given myself permission to be tired, and I'm more lethargic as a result. (G1, Fa)

Social and professional support

Several mothers and fathers noted that they often turn to family and friends to assist with childcare. In contrast to fathers, mothers refer to emotional support from friends. For example,

Talking to other friends who are going through the same thing. There's something really supportive and makes you feel it's not just me, it's not that I'm not coping or I'm not the only one. It reminds you that everyone is going through it at some level ... (G3, Mo)

One mother said that she turned to her husband for support, while another mother stated that this was not always helpful and preferred to use professional supports.

Sometimes your husband is just as tired ... That's why I think sometimes maternal health care nurse and GPs are good. They are separate and objective. There isn't that relationship emotional pressure. (G2, Mo)

Maternal child health nurses, general practitioners and support from early parenting centres were noted as the main sources of professional support.

Sleep, rest and napping

Going to bed early, napping throughout the day, and taking the time to rest were noted as a strategy for managing fatigue by several mothers, but not fathers. One mother explained, 'I try and pace myself. I say to myself, early night ... and all it takes is one nice night of sleep and I'm back' (G2, Mo). Another mother stated that napping was not always effective, 'Sometimes I find myself thinking the only way I'm going to get through this day is if I can work out when I'm going to nap. But sometimes it makes things worse' (G2, Mo).

Realistic expectations and attitudes

Three fathers specifically mentioned that how they think about fatigue and what they expect of themselves is important in being able to manage fatigue. One father simply pointed out the need to 'Change your expectations' (G1, Fa), and another said that it was important to 'Absolve yourself of guilt' (G1, Fa).

Work as respite

Going to work was seen as a break for three fathers, 'Work can be respite. There's unpredictability about the kids but I can get to work, sit at the computer and relax' (G1, Fa). Another father explained in more detail,

I was a bit jealous of my partner staying with the kid, me going to work... Now I find the exact opposite – I'm happy to get out of the house! Coming to work and just being – not having to do some of those home things. (G1, Fa)

Parents' need for information, support and resources to manage fatigue

Compared to fathers, mothers were more forthcoming with ideas about helpful information and support in managing fatigue. Specific topics for information and support included how to: (a) make time to engage in self care activities and plan time out, (b) schedule rest and sleep around quieter times of the day, (c) develop realistic expectations and manage parent guilt, (d) nurture couple relationships, (e) implement practical solutions for housework, and (f) make sense of the vast amount of parenting information and advice available. Mothers suggested that information specifically for fathers and first-time parents would be helpful.

Parents suggested that fact sheets, tip sheets, email bulletins, online forums, and information given during maternal child health visits would be an effective method of receiving information about managing fatigue. Flexibility and the timing of when information is given (e.g. during pregnancy and early after the baby is born) was also seen as important to parents.

Discussion

This study provides some insight into the experiences of fatigue and its impact on their lives for a small group of parents in the early parenting period. Importantly, we have contributed to the small but growing body of research into fathers' experiences of fatigue and the challenges of fatherhood (e.g. Mellor & St. John, 2012; St. John, Cameron & McVeigh, 2005), and have addressed calls for in-depth qualitative interview approaches to develop a richer understanding of the context and interpersonal processes associated with fathering (Marsiglio et al., 2000).

Both mothers and fathers described fatigue as an intense and persistent sense of tiredness characterised by a range of physical, cognitive and emotional symptoms. This closely fits with current conceptualisations of fatigue in the research literature (Cahill, 1999; Rychnovsky, 2004). Also consistent with previous research (Cooklin et al., 2012), mothers and fathers reported sleep disruption as a key factor contributing to fatigue. Mothers, articulated additional factors, such as worries, an inability to wind down at night, not having time for self, the demands of everyday living, and changes in family routines. It is possible that these were more salient for mothers as they tended to be in part-time or no paid employment (compared to fathers who were primarily in full-time employment), and thus, are potentially more exposed to and affected by domestic and care-giving demands than fathers. This is somewhat consistent with research indicating that even among dual-earner couples, the division of paid and unpaid labour is typically inequitable (Smith & Ellwood, 2006), with mothers more affected by family demands than fathers (Bianchi & Milkie, 2010).

Despite this research, fathers in this study specifically mentioned the impact of fatigue on their paid employment and its interface with family life. While some fathers viewed work as a respite from family life, several noted reduced efficiency at work. Extant literature has identified that fatigue is a recognised occupational health and safety hazard, conveying to employees reduced cognition, planning, concentration and elevated confusion (Hockey et al., 2000). It is likely that fatigue similarly affects parents' capacity to undertake the substantive unpaid work and caring load associated with parenting young children. In this study, for example, fathers described pressure to 'switch on' at home, to interact and be with their children. Other studies have identified that fatigue may adversely affect parents' capacity to deliver consistent, optimal parenting (McQueen & Mander, 2003), potentially eroding efficacy in the care-giving role.

With respect to the impact of fatigue on well-being, both mothers and fathers experienced increased irritability and anger when fatigued. When exhausted, parents may find it harder to access their usual cognitive and behavioural coping resources to manage their mood. Previous research supports this, revealing that fatigue is associated with ineffective coping styles such as self-blame, distraction, and denial (Cooklin et al., 2012). Although causal directions cannot be established, promoting the use of more effective coping strategies to manage irritability and anger, such as use of emotional and instrumental support, planning and problem-solving, when fatigued is important. This is particularly relevant given that parents in this study described being less patient and tolerant with their children, and previous research suggesting that fatigue may contribute to hostile parenting (Cooklin et al., 2012; Giallo, Rose, & Vittorino, 2011) and child abuse particularly when caring for unsettled and crying infants (Barr et al., 2006; Crowe & Zeskind, 1992; Reijneveld et al., 2004).

The majority of mothers and fathers also noted that when fatigued they tend to give their children less attention and are less likely to engage in play. These experiences were closely tied to a sense of struggling and not doing a good job as a parent for several parents, and one mother expressed guilt. This is in line with research suggesting that fatigue may undermine parents' self-efficacy and satisfaction in their parenting role (Dunning & Giallo, 2012).

To inform the development of strategies for the management of fatigue that are realistic and acceptable to parents, we wanted to learn more about how parents prevent and manage their fatigue. Strategies common to mothers and fathers included: finding time for oneself, engaging in exercise, and negotiation in the couple

relationship to take breaks, ‘tag team’ and share the load with the children. Accessing support from others was mentioned by both mothers and fathers; however, fathers’ focused on instrumental or practical support for babysitting, while mothers noted the value of emotional support. Further to this, fathers noted that having realistic attitudes and expectations of their children was important, while mothers stressed the importance of napping and resting, and going into survival mode to do the bare minimum. The differences between mothers’ and fathers’ approaches to management of fatigue suggest the need for the development of programmes and resources that are sensitive to potential gender differences, and salient and acceptable to both mothers and fathers.

In terms of parents’ specific information and support needs, some key areas that are relevant to mothers and fathers included how to: (a) make time to engage in self-care activities and plan time out, (b) schedule rest and sleep, (c) develop realistic expectations and manage parent guilt, (d) nurture the couple relationship, (e) find practical solutions for housework, and (f) how to make sense of the vast amount of parenting information and advice available. A range of flexible delivery or dissemination options acceptable to parents were fact sheets, tip sheets, email bulletins, online forums, and information given during maternal child health visits. Mothers in this study also thought that information specifically tailored to the needs of first-time parents and fathers would be useful. It is important to note that mothers were more forthcoming with ideas about their information and support needs associated with management of fatigue than fathers, and future research to specifically identify fathers’ information and support needs may be useful.

Study limitations

A small convenience sample of parents were recruited via a parenting website and mailing list for a parenting research organisation, and therefore, it is likely that parents with a particular interest in parenting or parental fatigue may have opted to participate in this study. The sample characteristics suggest that the findings may not capture the experiences of parents from sole-parent families, low socio-economic, and non-English speaking backgrounds as well as fathers who are the primary carers of their children. Future research to recruit a diverse group of parents is needed. Given that parents were required to attend a venue to participate in the study, it is possible that parents experiencing very high levels of fatigue and those without practical support for care-giving were less likely to attend. This means that the experiences and strategies shared may be reflective of parents who have been relatively successful in their management of fatigue. Furthermore, despite attempts to be flexible in the provision of focus groups, the mothers’ groups were held during the day and fathers’ in the evening. It is likely that mothers in paid employment, or parents working shift work may not have had the opportunity to attend.

Another limitation of the study was the missed opportunity to ask more detailed questions about the factors that may contribute to fatigue. Although mothers identified daily demands of family life and routines, and both mothers and fathers noted that poor sleep quality contributed to their fatigue levels, further research is needed to understand the risk and protective factors associated with fatigue. In particular, research is needed to identify factors in the broader social environment that may contribute to fatigue such as employment characteristics, job quality, and access to childcare. Finally, we acknowledge the possibility of conformance, censoring and

other unintended outcomes associated with group process common to conducting focus groups (Carey, 1995).

Implications and conclusions

Despite these limitations, we have gained rich insight into the potential impact of fatigue on parents and specific factors contributing to fatigue that warrant further investigation. Previous research has shown that limited engagement in self-care behaviour, poor sleep quality, and inadequate social support is associated with parental fatigue (Cooklin et al., 2012; Giallo, Rose, & Vittorino, 2011). The present study suggests that fatigue is another key consideration in understanding work–family conflict for potentially both mothers and fathers in paid employment that needs further investigation. It is possible that strategies and interventions targeting the management of fatigue may also alleviate some of the most acute strains of combining paid work with parenting described here by both mothers and fathers. By including fathers in this study, we have identified unique aspects of their experience for further exploration such as the impact of fatigue on fathering and its interface with work demands. While there were many similarities in how mothers and fathers manage fatigue, there were some differences, suggesting the need for information and resources that are tailored to the specific needs of fathers. This is a critical step in the development of information resources and programmes targeting the management of fatigue that are acceptable to both mothers and fathers.

The findings of this study are likely to be of particular interest to professionals in perinatal health and early childhood settings, who are in an ideal position to not only identify parents experiencing more severe mental health difficulties such as depression, but also fatigue. Parents may find helpful: psycho-education about the factors contributing to parental fatigue, its potential impact on well-being, parenting and relationships, and strategies for the management of fatigue in the early parenting period. Although fatigue is an almost universal and often expected part of parenting, these findings contribute to the growing body of research highlighting that fatigue is a potentially serious health issue for which parents need specific support.

References

- Barr, R., Trent, R., & Cross, J. (2006). Age-related incidence curve of hospitalized shaken baby syndrome cases: Convergent evidence for crying as a trigger to shaking. *Child Abuse and Neglect*, *30*, 7–16.
- Beck, C.T. (2002). Releasing the pause button: Mothering twins during the first year of life. *Qualitative Health Research*, *12*, 593–608.
- Bianchi, S., & Milkie, M. (2010). Work and family research in the first decade of the 21st century. *Journal of Marriage and Family*, *72*, 705–725.
- Brown, S., & Lumley, J. (1998). Maternal health after childbirth: Results of an Australian population based survey. *British Journal of Obstetrics and Gynaecology*, *105*, 156–161.
- Cahill, C.A. (1999). Differential diagnosis of fatigue in women. *Journal of Obstetric Gynaecologic and Neonatal Nursing*, *28*, 81–86.
- Carey, M.A. (1995). Comment: Concerns in the analysis of focus group data. *Qualitative Health Research*, *5*, 487–495.
- Cooklin, A., Giallo, R., & Rose, N. (2012). Parental fatigue and parenting practices during early childhood: An Australian community survey. *Child Health, Care and Development*, *38*, 654–664.
- Crowe, H., & Zeskind, P. (1992). Psychophysiological and perceptual responses to infant cries varying in pitch: Comparison of adults with low and high scores on the Child Abuse Potential Inventory. *Child Abuse & Neglect*, *16*, 19–29.

- Dennis, C., & Ross, L. (2005). Relationships among infant sleep patterns, maternal fatigue, and development of depressive symptomatology. *Birth, 32*, 187–193.
- Dunning, M., & Giallo, R. (2012). Fatigue, parenting stress, self-efficacy and satisfaction in mothers of infants and young children. *Journal of Reproductive and Infant Psychology*. DOI:10.1080/02646838.2012.693910.
- Elek, S.M., Hudson, D.B., & Fleck, M.O. (2002). Couples' experiences with fatigue during the transition to parenthood. *Journal of Family Nursing, 8*, 221–240.
- Fisher, J., Feekery, C., & Rowe, H. (2004). Treatment of maternal mood disorder and infant behaviour disturbance in an Australian private mothercraft unit: A follow-up study. *Archives of Women's Mental Health, 7*, 89–93.
- Giallo, R., Rose, N., & Vittorino, R. (2011). Fatigue, well-being, and parenting in mothers of infants and toddlers with sleep problems. *Journal of Reproductive and Infant Psychology, 29*, 236–249.
- Giallo, R., Wood, C., Jellett, R., & Porter, R. (2011). Fatigue, wellbeing and parental self-efficacy in mothers of children with an Autism Spectrum Disorder, Autism: International *Journal of Research and Practice*. doi: 10.1177/1362361311416830.
- Glazener, C., Abdalla, M., Stroud, P., Naji, S., Templeton, A., & Russell, I. (1995). Postnatal maternal morbidity: Extent, causes, prevention and treatment. *British Journal of Obstetric Gynaecology, 102*, 282–287.
- Hockey, G., Maule, A., Clough, P., & Bdzola, L. (2000). Effects of negative mood states on risk in everyday decision making. *Cognition and Emotion, 14*, 823–855.
- Higgins, C., Duxbury, L., & Lee, C. (1994). Impact of life-cycle stage and gender on the ability to balance work and family responsibilities. *Family Relations, 43*, 144–150.
- Kienhuis, M., Rogers, S., Giallo, R., Matthews, J., & Treyvaud, K. (2010). A proposed model of the impact of parental fatigue on parenting adaptability and child development. *Journal of Reproductive and Infant Psychology, 28*, 392–402.
- Kurtz Landy, C., Sword, R., & Valaitis, R. (2008). The experiences of socioeconomically disadvantaged postpartum women in the first 4 weeks at home. *Qualitative Health Research, 19*, 194–206.
- Marsiglio, W., Amato, P., Day, R., & Lamb, M. (2000). Scholarship on fatherhood in the 1990s and beyond. *Journal of Marriage and the Family, 62*, 1173–1191.
- McQueen, A., & Mander, R. (2003). Tiredness and fatigue in the postnatal period. *Journal of Advanced Nursing, 42*, 463–469.
- McVeigh, C. (1997). Motherhood experiences from the perspective of first-time mothers. *Clinical Nursing Research, 6*, 335–348.
- Mellor, G., & St. John, W. (2012). Fatigue and work safety behavior in men during early fatherhood. *American Journal of Mens Health, 6*, 80–88.
- Nash, C., Morris, J., & Goodman, B. (2008). A study describing mothers' opinions of the crying behaviour of infants under one year of age. *Child Abuse Review, 17*, 191–200.
- Nyberg, K., & Sternhufvud, L. (2000). Mothers' and fathers' concerns and needs postpartum. *British Journal of Midwifery, 8*, 387–394.
- Parks, P., Lenz, E., & Milligan, R. (1999). What happens when fatigue lingers for 18 months after delivery? *Journal of Obstetric, Gynecologic, & Neonatal Nursing, 28*, 87–93.
- Reijneveld, S., van der Wal, M., Brugman, E., Sing, R., & Verloove-Vanhorick, S. (2004). Infant crying and abuse. *Lancet, 364*, 1340–1342.
- Rychnovsky, J.D. (2004). *Postpartum fatigue in the active duty military woman*. A dissertation presented to the Faculty of the Hahn School of Nursing and Health Science: University of San Diego.
- Shen, J., Barbera, J., & Shapiro, C.M. (2006). Distinguishing sleep and fatigue: Focus on definition and measurement. *Sleep Medicine Reviews, 10*, 63–76.
- Smith, J., & Ellwood, D. (2006). *Where does a mother's day go? Preliminary estimates from the Time Use Survey of new mothers*. Paper presented at the Time Use and Gender Seminar, Sydney.
- St. John, W., Cameron, C., & McVeigh, C. (2005). Meeting the challenge of new fatherhood during the early weeks. *Journal of Obstetrics, Gynecology and Neonatal Nursing, 34*, 180–189.
- Taylor, J., & Johnson, M. (2010). How women manage fatigue after childbirth. *Midwifery, 26*, 367–375.

- Vaughn, S., Schumm, J., & Sinagub, J. (1996). *Focus group interviews in education and psychology*. Thousand Oaks, CA: Sage.
- Willis, K., Green, J., Daly, J., Williamson, L., & Bandyopadhyay, M. (2009). Perils and possibilities: Achieving best evidence from focus groups in public health research. *Australian and New Zealand Journal of Public Health, 33*, 131–136.