

Working with Fathers

From Knowledge to
Therapeutic Practice

Jennifer Walters



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WORKING WITH FATHERS

From Knowledge to Therapeutic Practice

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*For my father and mother, and Enid Marshall who was both
mother and father to me.*

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INTRODUCTION

My interest in fathers ostensibly began when I was working as a clinical psychologist in a small children's hospital in London's East End. I had begun to think particularly about men and loss following sessions with two fathers who had wept during the interviews, one about his stillborn child, born several years previously, and another about the death of his mother, also some years before. My impression is that we saw fewer fathers in clinic sessions then than now and although we were very familiar with depression in mothers, the presentation in fathers was much more unusual. Indeed, in the case of these fathers, they had never really talked about their painful losses to anyone.

These cases set me thinking firstly about men and loss but then about fathers' depression and the effects it might have on the family. Both the fathers mentioned above had boys who were soiling and they were also spending long hours away from the family and drinking, a common way for men to deal with depression. Interestingly it was notable how the symptoms in their sons began to improve following the fathers being able (or allowed) to talk about their great sadness. I began to think much more about the possibility of engaging fathers in clinical work with their families and how to go about this. So often we think about the mothers and their stories and indeed they are the parents who most commonly come to our clinics and hold the family history. But I was aware that fathers may be more willing than we expect to participate and that it is just as a result of habit that we pay more attention to mothers. These ideas began an interest in the engagement of fathers which led to several years of research and continues now in my clinical practice.

Margaret O'Brien was also a big influence on me and gave me vital encouragement in my work. She had written papers in 1988 and 1994 on men in therapy and 'the complex gendered patterning in the way humans recognise and communicate personal and family malaise' (1994, p. 19). Many women are able to seek help quite early on when experiencing depression but men tend to wait until individual or family stress has escalated to higher levels before taking action. Other authors (Jourard, 1971; Briscoe, 1982) echo this.

Sebastian Kraemer was also writing about the 'fragile male' (2000) and gave me crucial encouragement to carry out my research and the courage to write a paper (Walters, 1997). Kraemer argues that males are genetically more vulnerable from the beginning of life.

Other authors have influenced and inspired me. Charlie Lewis and I both studied with John and Elizabeth Newson, and Charlie encouraged me to link up with Margaret O'Brien. Vicky Phares, Arlene Vetere, Lawrie Moloney, Brid Featherstone, and Eirini Flouri have all written key texts on fatherhood. More recently Ramachandani has provided us with an excellent summary overview on fathers. Michael Lamb has of course written about and edited the seminal text on fatherhood.

The Fatherhood Institute in the UK has a remarkable website with information on every conceivable aspect of fathering. The research database meticulously constructed and maintained by Adrienne Burgess is an invaluable resource for any researcher in this area.

It was only as I was doing my research and interviewing 90 fathers about their children and their own parenting from their fathers that I began to realise more forcefully the relevance of my own history with my father. In some ways it was a painful realisation that made me reflect about intergenerational sorrow and how even when it is not expressed it percolates down in unconscious ways. I was the first of four children born to an older father who was 48 when I was born. He was something of a remote figure and worked long hours but I was nevertheless very close to him and remember many good times together when I was younger. Sadly he died when I was 16. I knew little of his history, just that his own father had died before I was born. Perhaps my memory is sketchy but I remember him telling me nothing of the truth about his father, who had left my father and his sister when my father was six. My father was born in 1900 and for a family to be left without a father at this time was particularly shameful. My grandmother refused to divorce him, so

the story goes. It was a great surprise, therefore, when my father died that his half-brother, who had seen the notice in the paper, emerged. I had never known of this family, my grandfather's second family. It was remarkable to find cousins I had never known existed. I have even been in contact with more of them very recently as their mother, now dead, would not allow them to know of our existence because she was born illegitimate as a result of the fact that my grandfather was unable to remarry. In 2009, for the first time, I saw a photograph of my paternal grandfather.

As far as I know, my father never saw his father again after the age of six. My mother, some years later, told me of the existence of a letter kept by my father from his father in the 1930s asking him to meet with him. I now have this letter. It is accompanied by a note from my grandmother urging my father not to meet him. My father had grown up very close to his mother and must have felt that to meet his father would be a deep betrayal. I remember my mother (now also dead so I am unable to ask more) telling me that he always regretted not meeting his father at this time.

I suppose I reflect how, even though I have only learned much of the story in later life, something about the importance of fathers was around for me throughout. The story has filtered through to emerge in a strong research and clinical interest in the field and I would like to think that my father's sadness and loss and that of many like him has emerged to effect some changes in how we work with fathers present or absent and to promote their influence and importance.

This book has a wide remit and cannot cover everything in the detail it might deserve. However, it attempts to look at the salient issues for practitioners who are working with families in many settings but particularly the social and clinical fields. It is hoped that it will be relevant to those working in child and family settings, whether it be nurseries, schools or clinics of various kinds, and also social service settings.

A major difficulty is trying to find a unifying theme for a book of this kind. Fathers differ as much as anyone else and there are myriad fathering roles which vary according to culture, social class and work status, and whether the fathers live with or without their children. I have attempted to cover these topics and those of other roles such as stepfathers, gay fathers, fathers in prison, and so on. Fathers may have disabilities or mental health problems and these are also referred to. Fathering roles also vary according to age and so young fathers are another group to be discussed. The changes in the concepts of fathering over time are also an important topic.

In this book I have tried to think of the engagement of fathers as a predominant theme but within this simply to raise awareness of the importance of fathers in our work. Even when absent they should still be there in our minds as they are in the minds of the families we work with.

Fathers are also neglected in research, as will be shown later. In 2010 I attended a lecture on anxiety in children and the role of mothers. The lack of research into the influence of fathers at this time seems an extraordinary omission. There was a tide of research regarding fathers in the 1970s and 1980s and much of this work was very important in heralding the social changes in families. You will see that I lean quite heavily on some of the research from this time and also from the 1990s. Although research has continued there are still considerable gaps and it is sad to hear of projects in the twenty-first century which refer to mothers or parents but not specifically to fathers.

‘In his own mind no child is “without a father”. In the absence of a given story he will make up his own’ (Kraemer, 2005). Kraemer goes on to make the point that if a father is entirely absent the child may never hear positive stories about him. He underlines the need to keep some positive stories alive, however small, so that the picture of a ‘bad man’ is not fully incorporated into the child’s image of himself. The therapeutic task, says Kraemer, is to understand the missing father, to make sense of the story.

From a clinical perspective I enjoy working from an attachment and narrative theoretical base (Dallos, 2006) when thinking about fathers in families. Almost every day of my working life I see children and their families where there are issues, spoken or unspoken, about fathers. Some fathers attend appointments with their children, especially when a specific invitation has been made. Other fathers may be absent owing to work commitments. Some fathers are out of the picture entirely and not in touch with the family. Some fathers are in prison; some are living elsewhere but seeing their children. Some have injunctions against them. Whatever the situation, the importance of the father in the children’s lives cannot be ignored. It is nonetheless remarkable how clinicians may still, even when the father is in the room, defer to the mother for information about the child. Where he is absent from a clinical session, asking about him can be forgotten completely. Sometimes this is because clinicians feel that it might be a difficult topic for the mother or children to talk about. Will questions create an upset, revive unpleasant memories or cause anger or sadness?

I was very struck by a conversation I had with a head teacher who decided to try to encourage the fathers of the children in her school, predominantly African Caribbean, to become more involved in their children's lives and education. She invited them in and to those who came she gave a quiz which included questions about the size of their children's shoes, the name of their teacher, and so on. The fathers went away and the need to find out this information of necessity led to them engaging more with their children. The children, she reported, were very excited by this involvement and it was the start of a successful project. It is by showing an interest in fathers that we can encourage their interest in their children. For many it is of course there without question but sadly for some the importance needs highlighting. That is not to say, however, that all fathers must engage with their children in any prescriptive way. Fathering can take many forms and it is the narrative or stories of positive involvement that children make of their fathers that are important. My own father, for example, for many reasons spent little time with me but I hold fond memories of the times we had and always felt he had me in mind. However, because I lost him when relatively young he was an idealised image for many years and it is only in later life that I have been able to see him in a more balanced light as a person who, like anyone else, had strengths and limitations.

This book, therefore, does not set out to extol the virtues of fathers as essential to children's upbringing. There is of course much research to support the importance of fathers in children's development (Lamb, 2004). But the situation is more complex and especially in our rapidly changing postmodern world. There is a myriad of different family structures and the two-parent heterosexual couple is less likely to be the norm in the West. Several writers (Perlesz, 2005; Silverstein and Auerbach, 1999) are questioning the need for fathers in families, citing evidence that children can grow up successfully in a variety of family structures. These authors state that 'children need at least one responsible, caretaking adult who has a positive emotional connection with them, and with whom they have a consistent relationship' (Silverstein and Auerbach, 1999. p. 3). Tasker and Golombok's work on lesbian parenting echoes these views.

I am therefore setting out to explore the meaning of fathers to their children in whatever culture or family constellation they may reside. Many men in my generation grew up with fathers who had either fought in the war or had done national service. For these men emotional commitment was probably hard, given that one might have to become separated from loved ones in situations that were

life-threatening. Moloney (2002) touches on these issues and also poignantly describes the story of his grandfather and his role as a father over the years, the stories he never told of loss and the need to relocate for work, and his death 'too young', leaving Maloney wondering whether he 'simply felt there was nothing left for him to do' (2002, p. 72). Most men who have children do not now have to think of going off to fight. Ironically, however, much looser family structures have now replaced the former situation where family solidity was the rockbed of stability.

There is no doubt that fathers are much higher on the political agenda now than they used to be. In recent years I have attended meetings on fathers' rights, Muslim fathers, fathers in education, and fathers and parenting. Several factors have influenced this change and the emergence of women in the workforce is one of the most significant. There are many more single-parent families, mostly headed by mothers, but other families have experienced increases in father participation. Increasing cultural diversity has contributed to changing conceptualisations of the role of the father in the family (Cassano et al., 2006).

It is notable how theories of fathering, and mothering, are rooted in economic contexts. Bowlby's ideas on attachment, for example, were popular in the 1950s when mothers in this country were mostly at home with the children while the men were out at work. Unemployment for men was uncommon at this time. But we can easily forget how the surface bliss of family stability at that time was, for many women, masking serious problems of loneliness, mental underperformance and depression. Women had performed many roles during the war and day nurseries had been introduced for children as a result. However, after the war women were placed firmly back in the home, often perhaps to their detriment.

Theoretical models

I have worked for many years with children and their families and have encountered a number of theoretical models ranging from developmental, and behavioural through to cognitive behavioural, psychodynamic and systemic theories. After all this time I have developed my own style of working, and the models I find most comfortable and which carry the most meaning for me in my work tend to be around attachment and narrative. This is not to say that I do not work in other ways where I feel it necessary. Sometimes a cognitive behavioural approach is appropriate and at other times a

neurodevelopmental approach is helpful. Where adult services tend to have specialists in different areas, working with children and families requires an open mind about how to work with families and for this reason workers need to have a variety of approaches up their sleeves. This is not, however, an excuse for superficiality. Workers need to be able to assess where their expertise begins and ends and where specialist therapies, treatments or consultations are required.

Men make up half of our population and they vary as much as anyone else, so there is no way in which a specific therapeutic approach can be prescribed for them. There are some guidelines regarding gender and therapy which I will mention in the chapters on engagement and mental health in men. Fathers are of course a subgroup of the male population and we will be working with them as part of a family, whether they are living with the family or not. However, fathers are also individuals with all their idiosyncrasies and so working with fathers on their own is sometimes appropriate, although much rarer in a child and family service. A combination of individual and family approaches therefore provides a very useful framework.

When working with fathers a systemic model is appropriate as we are thinking of them as part of a family, although in many disparate ways. But we are also thinking of fathers as individual adults with their own histories and patterns of attachments. They will in turn have their own narratives or stories to tell. They may also have problems such as anxiety, depression or substance use, or they may have learning difficulties or neurodevelopmental difficulties such as being on the autistic spectrum. As always in our work, all these aspects need to be kept in mind.

A particular model that I have found helpful in my clinical work is what could be called 'attachment narrative' therapy. This model is one espoused by Dallos (2006). Dallos helpfully describes the limitations of each theory, systemic, narrative and attachment, on their own and the advantages of a combined approach. He sees systemic theory and therapy as neglecting individual experience and lacking in a developmental perspective. He also suggests that systemic theory and therapy can neglect links between family patterns and problems. Attachment theory can be seen as overly biological and deterministic, focusing too much on dyads, particularly mother and child, and laying blame on mothers. He sees narrative theory as being shaped by emotional processes which may be distorted versions of events: 'An understanding of how they have learnt to place their experiences into narratives and the ways that they transform

events, for example a pattern of excluding the contribution of feelings, attachments and relationships to their problems, may help our ability to talk and construct new narratives with families' (2006, pp. 8–9).

Systemic theory at its simplest works with families, looking at patterns of interaction in the group as a whole and how they affect each other. In particular, systemic therapists will tend to look at what is happening in the here and now and how it connects with belief systems in the family.

In his book Dallos describes the theoretical and research background of attachment theory and how attachment and narrative therapies can combine within a systems framework when working with families. This model is not of course specific to working with fathers. However, being cognisant of an attachment framework and stories around fathers and fathering is I find important for engagement and continuing work. In many instances, therefore, it is useful to think about a combination of family and individual or dyadic work.

Sarah and Len came with their son who was five to discuss his sleep problems. Jack was coming into their bed every night and often wetting the bed. If returned to his own bed he would scream for prolonged periods, which resulted in them always allowing him to sleep with them. Sarah and Len were exhausted and could not agree on a strategy to resolve the problems. Len worked long hours, the family had considerable debts, and the relationship was extremely poor. Len had already left the family on two occasions but financial problems had meant that he had had to return.

On several occasions Sarah came to see me either alone or with Jack. Len was working and often found it hard to get away. Sarah told of the difficulties in her relationship with Len and how they had met when relatively young and been together for several years before Jack was born. She came from a large family and had regular contact with her parents and siblings, who were all supportive. Jack had a lot of cousins.

Eventually Len asked to see me alone. The couple had been discussing separation and he was clearly finding it difficult. They had both decided that their relationship was not working but Len found it hard to move out. He broke down, describing how hard it was to leave their only child and saying that his own father had left when he was very young and how little contact he now had with him. We discussed the differences between his situation and his father's and how history did not have to repeat itself. In fact, there was every indication from him that he would not allow the same situation to arise and would be a far more committed father than his own. The very fact that he was seeking help in order to try to work out how he

could make his separation from the family work well for his son showed how differently his father's departure from the family many years before had been handled.

For subsequent sessions the couple came together. Len had moved out, things were difficult financially and he seemed depressed. Sarah, however, looked much better and Jack's sleep had improved. He was spending one night a week at his father's and, although asking a lot of questions about his parents not being together, was showing signs of adapting to the situation in a way that he had not when Len had moved out before. Len and Sarah were enjoying the time they had together more than when they had lived together. However, it was clear that Len wanted some more individual work to help him. He had fewer family resources than Sarah and less of a sense of how to manage on his own in his role with Jack. It was suggested that Len might join a weekly therapy group for fathers and he took this up, although he was an irregular attender.

Work by John Byng-Hall (1995) on rewriting family scripts was an important development in using an attachment framework with families and creating in therapy a secure enough base from which family members can explore their own attachments. In many ways this work has been very important and a precursor to current theories on attachment narrative therapies.

Attachment theory and fathers

Much of the early work around attachment was focused on mothers. However, children have both a mother and a father and, although this is still not well researched, there is some work which teases out this more complex picture of attachments to both parents. The Adult Attachment Interview (AAI) is an interview used for research purposes which looks at narratives around early attachments to parents or parental figures. Work by Fonagy et al. (1994) shows how early events per se are not predictive of later behaviour but it is how they are perceived that is crucial. Fonagy et al. (1991) have carried out some important research looking at intergenerational risk using the AAI (George, Kaplan and Main, 1985). Their data suggest the existence of an intergenerational relationship between perceptions of one's own childhood experiences of being parented and the later parenting of one's own children. For both mothers and fathers, the association between a detached adult attachment pattern shown in the AAI and insecure child behaviour rated from the Strange Situation technique (Ainsworth, 1978), and free/autonomous adult

attachment pattern and secure infant behaviour were the strongest. The pattern of concordance for fathers was weaker than that for mothers but still statistically significant. The authors do not comment on the relative importance of maternal and paternal attachment patterns, although it is noted by Holmes (1993) that maternal, rather than paternal, security is the more potent transmitter of secure attachment across the generations. This point is predicated upon maternal dominance of childcare and is questionable in the light of current findings on the importance of fathers and their possibly greater involvement in parenting. In a review of eleven studies using the Strange Situation classification paradigm, Fox et al. (1991) found consistent evidence for concordance between infant-mother and infant-father attachment styles. They suggest that parental dyads may show similar types of parenting behaviours which increase the likelihood of similar attachment to both parents. Fonagy et al. (1994) discusses the possible independent influence of the two parental working models and the security of the infant-parent relationship in the first 18 months of life: 'The strong association suggests that each parent "transmits" their internal working model independently of the actions of the other parent' (p. 240). It is not yet known at what stage the separate internal working models might become integrated to produce a general stance towards attachment relationships. It may be that some children can accommodate secure internal models beside a more insecure one from a stable and responsive figure and this may account for some children developing more resilient internal working models. The important point about Fonagy's work is that, despite the apparent determinist nature of the influence of early experience, there is potential for picking up those adults who are likely to transmit insecure models to their children and facilitate change through psychotherapeutic treatment focusing on reflection. Biringen (1994) points out the potential for assessment in therapy using measures of attachment before and after therapy which can be reliably and validly evaluated. In the setting of the family and child psychiatry clinic, mothers have often been the focus of work on attachment but far less so fathers. As fathers become more involved in nurturing roles with their children, it is important that this imbalance be redressed.

A therapeutic development deriving from the context of attachment relationships and theory of mind was developed by Allen and Fonagy (2006). This therapy, termed mentalisation-based therapy, originally applied to clients with personality disorders but is now being used more widely and basically helps clients to attend to

or hold in mind states of mind in self and others. The practice of encouraging mentalisation in families is particularly poignant as 'these relationships characteristically provoke the most glaring impairments in mentalisation' (p. 261). Certainly these techniques can be used in both individual and systemic work although, as with all therapeutic models, they are not specific to men or fathers.

Dominant discourses and fathers

In every family there are stories and these are handed down through generations. Practitioners will often encounter narratives about men in the family, myths about how fathers behave, and so on: 'All the men in this family leave their wives eventually'; 'He never did anything to help with the children and neither did his own father'; 'There's no point in trying to change him, they're all the same', or, more positively, 'He's just like his dad, always wanting to play with the children and so good with them.' Where the stories are negative, and these are the situations we are most likely to meet, beliefs can and should be challenged. Why should the negativity continue through generations? Temperaments may be genetic and this can be hard to shift but behaviours are usually learned and respond to a context or an environment. No two situations are identical and choices can be made about how to behave and be in families. Of course we are all influenced by our parents but we can learn to take from our experiences what was good and adapt the rest. The task of therapy can be to elicit dominant stories and from there to gain different views and alternative stories, maybe extracting new information which may create exceptions to the dominant story. The therapist will then need to work hard to keep these alternative views alive and to embed them in the family beliefs.

Shabbir had always struggled with depression. His father and his brother also had a history of depression and a male cousin had committed suicide when he was in his early twenties. Shabbir was concerned that his son aged twelve, who was unhappy at secondary school, was going to be like the men in the family.

In fact, Shabbir's son had been very happy in primary school and it was only when he did not get a place in the secondary school of his choice that he became unhappy. All his friends had gone to another school and this school was not near home. He was on the waiting list for his first choice of school and indeed a place came up following a letter from the clinic. The boy settled well and was much happier being nearer to home and back with his old friends.