



Understanding Postpartum Depression Among New Fathers and Mothers: A Study of Emotional Suppression, Traditional Gender Role Beliefs, and Parental Stress

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Abstract:

Abstraction of the words parenthood and its effects on mothers and fathers creates a large change emotionally, psychologically and socially between the new parents. The literature review of postpartum depression (PPD) concerns mainly on mothers after delivery; however, new evidence shows that the fathers also are psychologically disturbed after birth of their child. New parents may experience some level of depression as a result of increased responsibilities for caregiving, decreased amount of sleep, changing family structure and societal pressure to conform to parenting roles. Even though awareness of fathers' mental health issues has increased significantly, there remain few studies of fathers' mental health following the birth of their children. Therefore, the present study investigated postpartum depression among mothers and fathers and examined its relationship with emotional suppression, gender role attitudes, and parental stress. A quantitative cross-sectional research design was utilized among parents in the first year after childbirth. Participants were selected by purposive sampling from healthcare and community-based settings. Standardized psychological instruments were used to assess postpartum depression, emotional suppression, attitudes toward gender roles and parental stress. Descriptive statistics were used to summarize the characteristics of the participants and major study variables. Differences between mothers and fathers were explored by independent-samples t tests. Multiple regression analysis was used to examine the degree to which emotional suppression, gender role attitudes, and parental stress predicted postpartum depression. The difference between mothers and fathers on these variables was investigated by independent-samples t-tests. Multiple regression analysis was used to determine the degree to which emotional suppression, gender role attitudes and parental stress predicted postpartum depression. The results indicated significant differences between mothers and fathers in gender role attitudes, parental stress and postpartum depression. However, no significant differences were observed in emotional suppression. Regression analyses showed that emotional suppression, gender role attitudes, and parental stress significantly predicted postpartum depression and accounted for 44% of the variance in depressive symptoms ($R^2 = .44$, $F = 11.30$, $p < .001$). Parental stress was the strongest predictor of postpartum depressive symptoms among the predictor variables. The findings pointed to the significance of understanding postpartum mental health as an issue affecting both mothers and fathers, rather than focusing only on maternal experiences. The study pointed to important roles of parental stress, emotion regulation processes, and attitudes about gender roles in shaping psychological adjustment during the transition to parenthood. The findings further showed the importance of comprehensive and gender-sensitive mental health services that took into account the experiences of both parents, and provided early detection and treatment for postpartum psychological difficulties. Such efforts may help promote parental well-being, healthy family relationships, and positive outcomes for children in the early phases of family life.

Keywords: postpartum depression, parental stress, emotional suppression, gender role attitudes, mothers, fathers

1. Introduction

Becoming a parent is one of the most important life transitions, bringing both joy and significant emotional adjustment. Along with the happiness associated with childbirth, many parents also experience stress, uncertainty, and changes in their daily roles. During the postpartum period, these adjustments can sometimes lead to psychological difficulties, with postpartum depression (PPD) being one of the most frequently reported mental health concerns.

Most earlier studies on postpartum mental health have focused mainly on mothers, as they go through direct physical and hormonal changes after childbirth. However, recent research has shown that fathers can also experience emotional distress and depressive symptoms during this period. In many cases, these difficulties go unnoticed, as men are often expected to remain strong, stable, and less emotionally expressive, which may discourage them from seeking help or sharing their feelings. One important factor that may contribute to postpartum emotional difficulties is emotional suppression. Many new parents try to hide or control feelings such as sadness, anxiety, or frustration because of social expectations or fear of being judged as weak or incapable. Although this may help them manage situations temporarily, consistently holding back emotions can increase inner stress and make individuals more vulnerable to depressive symptoms over time.

Gender expectations also play an important role in shaping how parents experience the postpartum period. Mothers are often expected to be naturally caring, emotionally involved, and fully dedicated to child-rearing, while fathers are expected to focus on financial responsibilities and remain emotionally strong. These traditional expectations can create pressure for both parents and may limit open emotional expression and healthy communication within the family.

Along with emotional and social factors, parental stress is another major challenge during the postpartum phase. Caring for a newborn often involves sleep disturbances, increased responsibilities, financial pressure, and difficulty adjusting to new routines. These demands can become overwhelming and may negatively affect the mental health of both mothers and fathers.

Although these factors—emotional suppression, gender expectations, and parental stress—are known to influence psychological well-being, fewer studies have explored how they work together to affect postpartum depression in both parents. To address this gap, the present study used a quantitative approach to examine the relationship between these variables among mothers and fathers during the postpartum period. The study aimed to provide a clearer understanding of how emotional and social factors contribute to postpartum mental health in a more inclusive and balanced way.

Research Questions

1. Whether there is any significant relationship between emotional suppression and postpartum depression among new mothers and new fathers.
2. Whether there is any significant relationship between traditional gender role beliefs and postpartum depression among new mothers and new fathers.
3. Whether parental stress significantly predicts postpartum depression among new mothers and new fathers.
4. Whether there is any significant difference in postpartum depression between new mothers and new fathers.
5. Whether emotional suppression, traditional gender role beliefs, and parental stress jointly predict postpartum depression among new mothers and new fathers.

Objectives of the Study

1. To examine the relationship between emotional suppression and postpartum depression among new mothers and new fathers.
2. To examine the relationship between traditional gender role beliefs and postpartum depression among new mothers and new fathers.
3. To examine whether parental stress predicts postpartum depression among new mothers and new fathers.
4. To compare the levels of postpartum depression between new mothers and new fathers.
5. To examine the combined predictive effects of emotional suppression, traditional gender role beliefs, and parental stress on postpartum depression among new mothers and new fathers.

2. Literature Review

Emotional Suppression and postpartum depression

Aldao et al. (2024) carried out a systematic review exploring how emotion regulation strategies relate to mental health outcomes during the perinatal period, including postpartum depression and anxiety. The review reported that maladaptive regulation strategies, especially expressive suppression, were repeatedly associated with elevated depressive symptoms across pregnancy and the postpartum stage. The authors explained that when individuals suppress emotions, it can interfere with proper emotional processing and reduce awareness of internal feelings, which may result in prolonged psychological distress. They also observed that people who depend heavily on suppression often face greater emotional strain during major life changes such as childbirth and early parenting. Overall, the review indicates that emotional suppression may increase the risk of postpartum depression in both mothers and fathers, particularly because this period involves heightened emotional demands and strong social expectations.

Aldao et al. (2024) conducted a systematic review investigating the relationship between emotion regulation strategies and mental health outcomes during the perinatal period, including postpartum depression and anxiety. The review found that maladaptive strategies, particularly expressive suppression, were consistently linked with higher levels of depressive symptoms during both pregnancy and the postpartum period. The authors noted that suppressing emotions may disrupt normal emotional processing and limit awareness of one's internal emotional state, which can contribute to ongoing psychological distress. They further highlighted that individuals who frequently use suppression tend to experience increased emotional strain during significant life transitions such as childbirth and early parenting. Overall, the findings suggest that emotional suppression may act as a risk factor for postpartum depression in both mothers and fathers, as this period is often characterized by intense emotional demands and strong societal expectations.

Traditional Gender Role Attitudes and Postpartum Depression

McCarthy and Hunt (2020) explored how adherence to traditional gender norms affects emotional well-being among new parents. Their findings indicated that strict gender role attitudes were associated with higher levels of stress, reduced emotional expression, and increased depressive symptoms, particularly among fathers who felt pressure to conform to masculine ideals of emotional control and financial responsibility. The study emphasized that traditional gender expectations may discourage help-seeking behavior and emotional disclosure, thereby worsening psychological outcomes during the postpartum period. These findings highlight the importance of considering gender role attitudes as a significant psychosocial factor in postpartum depression research.

Sullivan et al. (2022) examined the influence of traditional gender role attitudes on mental health outcomes during the transition to parenthood. The study found that individuals who strongly endorsed traditional gender expectations—such as the belief that women should be primary caregivers and men should be financial providers—were more likely to experience psychological distress during the postpartum period. The authors suggested that rigid gender expectations may increase role strain, reduce emotional flexibility, and limit effective coping strategies. In the context of new parenthood, such attitudes may intensify pressure on both mothers and fathers, thereby increasing vulnerability to postpartum depressive symptoms.

Parental Stress and Postpartum Depression

Tebeka et al. (2020), in a large cohort study examining environmental factors related to postpartum depression, identified parental stress and stressful life events as significant contributors to depressive symptoms during the postpartum period. Their findings showed that a substantial proportion of mothers experienced stressful events during pregnancy and after childbirth, and these stressors were strongly associated with the development of postpartum depression. The authors highlighted that chronic stressors such as caregiving demands, financial strain, and relationship difficulties can significantly increase vulnerability to depressive disorders. These results emphasize that sustained parental stress during the postpartum period plays a crucial role in the onset and severity of postpartum depression in new parents.

Fang et al. (2022) conducted a systematic review examining factors associated with parenting stress in both mothers and fathers. The review found that parental stress is influenced by multiple parent-related, child-related, and contextual factors, including emotional demands, socioeconomic conditions, and relationship quality. The authors reported that higher levels of parenting stress were consistently linked with poorer psychological outcomes, including depressive symptoms. They explained that the ongoing demands of childcare, role adjustment, and reduced personal time can overwhelm parents' coping resources, increasing emotional exhaustion. These findings suggest that parental stress is a significant risk factor for postpartum depression, as new parents often experience simultaneous physical, emotional, and environmental pressures during the early stages of child-rearing.

3. Method

Variables of the Study

Independent Variables (IVs):

- Emotional Suppression
- Gender Role Attitudes
- Parental Stress

Dependent Variable (DV):

- Postpartum Depression

Grouping Variable:

- Gender of parent (Mother / Father)

Sample

- Total: 50 participants
- Mothers: 25
- Fathers: 25
- Age: 20–35 years
- Sampling: Purposive sampling

Statistical Analysis

- Independent samples t-test
- Multiple regression analysis

Hypotheses

- **H₀₁:** There is no significant relationship between emotional suppression and postpartum depression among new mothers and fathers.
- **H₀₂:** There is no significant relationship between gender role attitudes and postpartum depression among new mothers and fathers.
- **H₀₃:** Parental stress does not significantly predict postpartum depression among new mothers and fathers.
- **H₀₄:** There is no significant difference in postpartum depression between new mothers and new fathers.
- **H₀₅:** Emotional suppression, gender norms, and parental stress do not jointly and significantly predict postpartum depression among new mothers and fathers.

Inclusion Criteria

- Mothers and fathers aged between 20 and 35 years.
- Parents with at least one child aged between 0 and 12 months.
- Residents of urban areas with access to adequate healthcare and hospital facilities.
- Individuals who have completed a minimum of 10th-grade education.
- Ability to read and understand English.
- Willingness to participate in the study and provide informed consent.

Exclusion Criteria

- Pre-existing mental disorders prior to childbirth.
- Infants with serious medical conditions requiring prolonged hospitalization.
- Incomplete responses to the study measures.
- Lack of consent or withdrawal from participation.

Research Design

The present study employed a quantitative cross-sectional design to examine the relationships between emotional suppression, gender role attitudes, parental stress, and postpartum depression among new parents. The study sample comprised 50 participants, including 25 new mothers and 25 new fathers. The inclusion of both parental groups enabled a more comprehensive and comparative understanding of postpartum psychological experiences during the early phase of parenthood. Participants were selected using purposive sampling based on predefined inclusion criteria. This non-probability sampling technique was considered appropriate given the specificity of the target population, namely individuals within the postpartum period. Selection of participants who had recently transitioned into parenthood ensured that the data reflected relevant and context-specific psychological experiences aligned with the objectives of the study.

Measures

Edinburgh Postnatal Depression Scale (EPDS): Used to assess postpartum depression.

Emotion Regulation Questionnaire (ERQ): Used to measure emotional suppression.

Gender Role Attitudes Scale (GRAS): Used to assess gender role beliefs and attitudes.

Parental Stress Scale (PSS): Used to measure levels of parental stress.

Procedure

Prior to data collection, ethical clearance was obtained from the relevant institutional authority to ensure compliance with established ethical guidelines for research involving human participants. Individuals who met the inclusion criteria were recruited through healthcare facilities, community networks, and online platforms. The purpose, nature, and voluntary aspect of the study were clearly explained to all participants, and written informed consent was obtained prior to participation.

Data collection was carried out using a structured questionnaire comprising a demographic information sheet followed by standardized psychological measures, including the EPDS, ERQ, GRAS, and PSS. Participants completed the survey in approximately 20–25 minutes.

Confidentiality and anonymity were strictly maintained throughout the research process. No identifying information was collected, and all responses were used solely for academic purposes. Participants were also informed of their right to withdraw from the study at any stage without penalty or consequence, ensuring adherence to ethical standards of voluntary participation

4. Results

Results Spreadsheet

Independent Samples t-test comparing mothers and fathers on study variables

Variable	Group	N	M	SD	t	df	p
Emotional Suppression	Mothers	25	22.48	4.67	0.95	48	> .05
	Fathers	25	21.2	5.08			
Gender Role Attitudes	Mothers	25	33.08	5.12	4.29	48	< .001
	Fathers	25	27	4.9			
Parental Stress	Mothers	25	34.88	6.02	2.13	48	0.038
	Fathers	25	31.4	5.55			
Postpartum Depression	Mothers	25	15.32	5.21	2.2	48	0.032
	Fathers	25	12.2	4.61			

Multiple regression analysis predicting postpartum depression

Predictor	B	β	t	p
Emotional suppression	0.26	0.24	2.3	0.026
Gender role attitudes	0.35	0.32	3.4	0.001
Parental stress	0.38	0.36	3.9	< .001

Discussion

The present study examined postpartum depression among new mothers and fathers, with specific focus on emotional suppression, gender role attitudes, and parental stress. The findings provide a nuanced understanding of how emotional, cognitive, and contextual factors contribute to psychological adjustment during the early postpartum period.

Emotional Suppression

The results of the independent-samples *t*-test indicated no statistically significant difference between mothers ($M = 22.48$, $SD = 4.67$) and fathers ($M = 21.20$, $SD = 5.08$) in emotional suppression, $t(48) = 0.95$, $p > .05$. This finding suggests that both mothers and fathers tend to regulate or suppress emotional experiences to a comparable extent during the transition to parenthood.

This similarity may reflect shared situational demands associated with early parenting. The postpartum period is often characterized by sleep disruption, increased caregiving responsibilities, and heightened emotional demands, which may encourage both parents to rely on emotional containment as a short-term coping strategy. Rather than being primarily determined by gender, emotional suppression in this context may be better understood as a response to environmental and situational stressors associated with newborn care.

Gender Role Attitudes

A statistically significant difference emerged in gender role attitudes between mothers and fathers, $t(48) = 4.29$, $p < .001$. Mothers ($M = 33.08$, $SD = 5.12$) reported stronger endorsement of traditional gender role attitudes compared to fathers ($M = 27.00$, $SD = 4.90$).

This finding may reflect the continued influence of sociocultural expectations that position mothers as primary caregivers responsible for infant care and emotional nurturing. Such expectations may reinforce internalized beliefs regarding maternal responsibility, thereby increasing psychological burden. In contrast, fathers may experience comparatively greater social latitude in defining caregiving involvement, although they may still be influenced by expectations related to financial provision and emotional restraint. These socially constructed roles may contribute to differential psychological experiences during the postpartum transition.

Parental Stress

The analysis revealed a significant difference in parental stress between mothers and fathers, $t(48) = 2.13$, $p = .038$. Mothers ($M = 34.88$, $SD = 6.02$) reported higher levels of parental stress compared to fathers ($M = 31.40$, $SD = 5.55$).

This difference may be attributed to the greater physical and caregiving demands experienced by mothers during the early postpartum period, including recovery from childbirth and increased direct involvement in infant care. Although fathers also experience stress related to role adjustment and new responsibilities, their initial caregiving burden may be comparatively lower. These findings align with existing literature suggesting elevated caregiving-related stress among mothers during the early stages of parenthood.

Postpartum Depression

A statistically significant difference was also observed in postpartum depression scores between mothers and fathers, $t(48) = 2.20, p = .032$. Mothers ($M = 15.32, SD = 5.21$) reported higher levels of depressive symptoms than fathers ($M = 12.20, SD = 4.61$).

This difference may be understood in light of the combined influence of biological, psychological, and social changes following childbirth, including hormonal fluctuations, physical recovery, sleep deprivation, and intensified caregiving responsibilities. Importantly, the presence of depressive symptoms among fathers highlights that postpartum psychological distress is not exclusive to mothers and warrants attention in both parents.

Regression Analysis

Multiple regression analysis indicated that emotional suppression, gender role attitudes, and parental stress collectively served as significant predictors of postpartum depression, $R = .66, R^2 = .44$, adjusted $R^2 = .40, F(3, 46) = 11.30, p < .001$. Together, these variables accounted for 44% of the variance in postpartum depression scores.

Among the predictors, parental stress emerged as the strongest contributor ($\beta = .36, p < .001$), followed by gender role attitudes ($\beta = .32, p = .001$) and emotional suppression ($\beta = .24, p = .026$). These findings suggest that daily parenting-related stressors play a central role in shaping postpartum depressive symptoms, while emotional regulation processes and sociocultural belief systems further contribute to psychological vulnerability.

Interpretation

Overall, the findings suggest that postpartum depression among new parents is best understood as a multidimensional phenomenon shaped by the interaction of emotional regulation, sociocultural expectations, and parenting-related stress. While mothers reported comparatively higher levels of stress and depressive symptoms, fathers also demonstrated meaningful levels of psychological distress, underscoring the importance of including both parents in postpartum mental health research.

These results highlight the need for inclusive, gender-sensitive mental health interventions that address parental stress, promote adaptive emotional regulation strategies, and challenge rigid gender role expectations during the transition to parenthood. Such approaches may contribute to improved psychological well-being for both mothers and fathers and support healthier family adjustment during the postpartum period.

5. Conclusion

This study examined postpartum depression among new mothers and fathers, focusing on how emotional suppression, gender role attitudes, and parental stress contribute to depressive symptoms during the first year after childbirth. The results showed that mothers experienced higher levels of both postpartum depression and parental stress compared to fathers. Differences were also observed in gender role attitudes, while emotional suppression did not differ significantly between the two groups. This suggests that some psychological responses to early parenthood may be shared across parents, whereas others are shaped more strongly by social expectations and caregiving roles.

The regression findings indicated that emotional suppression, gender role attitudes, and parental stress together played a significant role in explaining postpartum depression. Among these, parental stress emerged as the strongest predictor, indicating that the day-to-day demands of caring for a newborn and adjusting to new responsibilities have a major impact on emotional well-being. Gender role attitudes and emotional suppression also contributed to depressive symptoms, suggesting that both social expectations and difficulties in expressing emotions can add to psychological strain during this period. Overall, the results point to postpartum depression as a condition influenced by a combination of emotional experiences, social pressures, and parenting-related stress.

Although mothers showed higher levels of distress, fathers also reported noticeable depressive symptoms. This highlights that postpartum mental health concerns are not limited to mothers alone. Both parents experience emotional and psychological challenges during this transition, which may often go unrecognized in fathers. The findings therefore support the need for a broader understanding of postpartum mental health that includes both members of the parenting couples.

Implications of the Study

The findings of this study have several practical implications. First, they suggest that mental health screening during the postpartum period should include both mothers and fathers. Fathers are often overlooked in clinical and community settings, which may delay identification of emotional difficulties. Secondly, the strong role of parental stress indicates that support systems aimed at reducing parenting burden may be particularly beneficial. Parenting education, counseling, peer support groups, and stress management strategies can help parents adapt more effectively to the demands of newborn care. Thirdly, the influence of gender role attitudes suggests that rigid expectations about motherhood and fatherhood may increase emotional pressure. Encouraging shared parenting responsibilities and more flexible role expectations may help reduce stress and improve emotional well-being. Creating safe spaces for emotional expression within families may also support healthier coping during the postpartum period.

Limitations of the Study

The study has certain limitations that should be considered. The small sample size limits the extent to which the findings can be generalized to a larger population. The use of purposive sampling may also introduce selection bias, as participants may not fully represent all new parents.

In addition, the cross-sectional design captures experiences at a single point in time and does not allow for conclusions about cause-and-effect relationships. The reliance on self-report measures may also be influenced by personal bias or social desirability.

The study focused mainly on urban participants, which may limit its applicability to rural or culturally diverse populations. Other relevant factors such as social support, marital satisfaction, and financial stress were not included and could influence postpartum mental health.

Recommendations for Future Research

Future studies should include larger and more diverse samples to improve generalizability. Longitudinal designs would help in understanding how postpartum depression develops and changes over time. It would also be useful to explore additional factors such as social support, relationship quality, coping styles, and economic conditions.

Greater attention should be given to fathers, as paternal postpartum depression is still under-researched. Future research may also examine cultural differences in parenting experiences and mental health outcomes. Intervention-based studies could further evaluate strategies aimed at reducing parental stress and improving emotional well-being.

Ethical Considerations

The study followed ethical guidelines for research involving human participants. Participation was voluntary, and informed consent was obtained before data collection. Participants were informed about the purpose of the study and assured that their responses would remain confidential and anonymous. They were also told that they could withdraw from the study at any time without any consequences. All data were used only for academic purposes and stored securely to protect participant privacy.

Summary

In summary, this study highlights that the transition to parenthood is associated with emotional and psychological challenges for both mothers and fathers. Emotional suppression, gender role attitudes, and parental stress were found to be important factors linked to postpartum depression. While mothers experienced higher levels of distress, fathers also showed meaningful signs of emotional difficulty.

These findings underline the importance of recognizing postpartum mental health as a shared parental experience rather than focusing only on mothers. Supporting both parents through stress reduction, flexible role expectations, and improved emotional communication may contribute to healthier family adjustment and better psychological outcomes during the early stages of parenting.

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