

THE FATHER'S ROLE

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Until the decade of the 70-ties, the study of the man's role as father was limited by the in force biological, social and psychological theories. We find this way, that the biological theories used to affirm that the paternity was not essential for the survival of the family and of the offspring: man was only necessary for the procreation. The studies of Ivor Devore (1963) with monkeys male baboons, which didn't participate in the cares of the breeding, like those of Harry Harlow (1967) with monkeys' rhesus, contributed to many suggestions to that type of conclusions --and sometimes to scientific data. The social theories, when they referred to the father's role, they were speaking of his traditional role of economic provisor, differentiated the maternal role as rather "expressive", and the paternal-one as more "instrumental". Social theories also stressed father's value like model of masculine behavior for the male children (Parsons, 1955).

Even in psychological theories, the father only appeared belatedly (in the phallus-oedipal phase), because during the whole childhood, and in particular in the first years of childhood, it was considered that the mother was the main figure (Freud, Klein, Bowlby...). The discovery of the importance of the maternal role upon the integration and psychological-psychosocial development of human beings had such a big impact on cultural patterns that the father's role and the paternity were for decades neglected, perhaps too much.

However, already from the middle of the last century, the new perspectives of research about the development and the children's growth began recognizing a growing importance of the systematic or clinical observations, and indeed the empiric studies.

The social and psychosocial changes of the family have caused certain transformations at the level of the mother's and father's roles (with their accompanying mental representations). Those transformations only recently have begun to be assisted by the scientific perspective and techniques.

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Social changes of the sixties until eighties launch the rising of more specific investigations on the father's role in the family and in the education, and consequently, about the changes in such roles (Jessner, Weigert and Foy, 1970; Mackey, 1985; Robinson and Barret, 1983). In this way, main social and family changes were the extension of the use of the birth-control means, the woman's massive insert in the labor world, and woman's growing economic independence (table 1).

Table 1

SOCIODEMOGRAPHIC VARIABLES THAT ARE AFFECTING IN A SIGNIFICANT WAY THE FAMILY STRUCTURE

Variable	Evolution and Consequences
<ul style="list-style-type: none"> • Lengthening of the hope of life: in one century it has doubled (40 to 80 years) - 	<ul style="list-style-type: none"> • It lengthens the couple and family common life (of 10 to 40 years)
<ul style="list-style-type: none"> • Drastic reduction of the feminine reproductive load (from 20 years, 7 children and 3 years for son, to 5 years: 2 or 3 children and 1,5 years for son) 	<ul style="list-style-type: none"> • Wide sexual readiness not reproduction-related: increase in the evaluation of the sexuality and the love like foundation of the couple and the family • Loss of the religious character attributed to the sexuality and the family • The emerging of half of the human race: the women with social readiness appear as human individuals
<ul style="list-style-type: none"> • Rupture of endogamic rules 	<ul style="list-style-type: none"> • Interculturality and bigger freedom and variability in the family norms
<ul style="list-style-type: none"> • Appearance and prevalence of the reduced nuclear family and of other (social) types of family, above the classic patriarchal family. 	<ul style="list-style-type: none"> • Weakening of the institutional aspect of the family: • The bond is less strong (the "successive monogamy" appears) • Or it is preferred not to institutionalize it.
<ul style="list-style-type: none"> • Generic unbalances: in some countries (China), women's deficit; in a large part of the Westerners, women's prevalence (bigger with more ages). 	
<p>GENERAL CONSEQUENCE: People marry less and later. He/she gets divorced before. Less children, generated in more mature age. After a divorce, people marry again on less occasions (L.Rousel, 1989)</p>	

From among these investigations we will highlight those that speak of the pattern of the androgynous individuality (Bem, 1974,1975,1976) that notifies the existence (or appearance?) of men that prefer to be in charge of their children more than to carry out another activity until then considered as more typical of their gender.

In general, it begins to be proven that the man becomes an active copartner of his wife's pregnancy: he plans the contraception and the pregnancy together with his partner, he attends on echographic proves, he accompanies his partner to the gynecological visits, he participates in the preparation to the childbirth classes, he takes care instrumentally and affectively of the children from their birth... It seems as if the "new fathers" are carrying out a role completely different to the one that was considered and assigned until nowadays. It would seem also that this role is accepted by the majority of father's, until the point that different authors speculate on the appearance of a "new father type" (Badinter, 1980; Sullerot, 1992) and about the "death" of the previous one (Anguera and Riba, 1999; Flaquer, 1999). They speak of the father as friend, as comrade, as a partner that avoids to be the authority of the family and aspires to make his condition equal to that of the mother or of the offspring...

We think we must avoid idealization and overvaluation of those changes in this field. However, taking everything into account, there emerges an important theoretical and methodological problem from these studies, and in general, a change in our conception of the father's parental role, so much in the family as in general: for instance his role in the upbringing and the children's development. For instance, we do not know to what extent the changes that we are observing and studying, are due to the acceptance of the parental role and of the father's emotional functions?. Those roles had been functioning for centuries in the family relationship, so much at conscious psychological level as at social level, but nowadays are more evident maybe because new type of father's role is accepted? Or, to what extent social changes are due to real changes in those functions, experiences and roles and vice versa? In fact, about those "new fathers", some authors expresses certain doubts. This way, when Ody (1993) speaks about the "father that maternizes", he affirms that fact is due to a man's pathological organization; or when Stern (1995) doubts if this change won't alter the identification of the children.

From the point of view of the current empiric investigation, we can find three types of studies on the transition to the paternity:

1. Clinical studies: usually are centered on the conflicts and the necessities which appeared during the pregnancy and the birth of the children.
2. Sociological studies: usually they consider the paternity like a crisis in couple's relationship, or in a softest way, like a *psychosocial transition*.
3. Psychological studies: those are usually centered on individual and couple changes starting from the pregnancy.

On that way, from a holistic point of view, we can find that father suffers four types of changes in his family role in connection with the pregnancy and the birth of they children:

1. Organic changes, including changes motivated by the "pheromonal" exchanges.
2. Psychological changes: in the expectations and representations of children, paternity, maternity and couple; changes of habits and in particular, those referred to the sexuality or the intimacy in general; changes of the "self" as a consequence of these transitions...
3. Changes in couple's relationship, so much at level of interactions as of emotional contact.
4. Changes in the social relationships, so much of the father as of the couple as group.

1. Physical changes and changes in one's own body experiences and physiology.

Many authors study the couvade syndrome (that affects according to the studies, from 11% to 60 % the masculine population during their wife's pregnancy). Other studies are centered in the description of the changes in the perception of health of the future fathers (Ferketich and Mercer, 1995; Walker, Flesher and Heaman, 1998). For both changes – couvade syndrome and changes in the perception of the health and body self– we don't know physical bases to explain them. Therefore, they are usually related to psychological phenomena and psychodynamics: anxious conflicts, somatizations of such anxieties or, at more interpretative level, rivalry, identification or ambivalence with the fetus or with the new born.

Lately, investigators of the Memorial University of Saint John of Terranova (Canada) (2000) have found that in the men, during the couple's pregnancy, the cortisol, prolactine and testosterone levels are modified. Their conclusion: it is the pregnant woman who prepares the father with their pheromones. It means a contribution of radical importance to our conception of the (biopsicosocial) parenting functions: father gets prepared and ready not only for mother and society (psychological, psychosocial and social levels), but rather he is also prepared at a biological level, through the mother.

2. Psychological changes.

According to other authors, the psychological changes that men experience are the consequence of the expectations and mental representations about the children, of the paternity, of the maternity and of the couple's new situation. We should not forget that most of the authors speak about the transition to the paternity as a "development crisis that can carry both to the psychological growth and to pathology" (Gutmann, 1985); alternately, like "one of the most dramatic transitions in the cycle of the family, experienced by 80% of the individuals" (Feldman, 1985).

In this way, the studies tell us that the man can present so much positive manifestations (happiness, euphoria, a growing sense of the life, an increase in empowerment and manliness), as negative-ones: feelings of guilt, confusion or anxiety, retirement, intense ambivalence and concern - so much for the son as economic -, depression, stress, irritability and fears,...

Although some empiric investigators pick up the psychoanalytical initial conception and they remember that "one dreams, imagines and thinkss of children before having them" (Anguera & Riba, 1999), other, as Minuchin (1974) or Stern

(1995) insist in the man's difficulty to introject what we would call a secondary paternal concern: the man takes much more than the woman in realizing that he is father and in carrying out the psychological changes and the consequent psychosocial changes. It even takes years, although in the end it also leads to, like in the woman, a deep reorganization of all his life.

3. Changes in couple's relationship.

Authors speak of the link among the changes in couple's relationship and the transition to the paternity, because as Minuchin affirms (1974), the man influences on his context and he is influenced by this.

In a principle it was spoken about the access to the paternity like a dramatic crisis for couple's relationships, but nowadays the empiric research transmits the idea that the paternity tends to reinforce the couple's stability.

Dramatic crisis or not, the investigators speak so much of changes in the sexual relations (they can worsen or they can diminish or increase during the pregnancy). They also speak about a decrease in sharing free time and in the distribution of roles and work division. During the pregnancy everyone participates in the common idea that roles will change. After the birth, as they show the studies, changes are not so certain so deep. Many investigations find an increase and accentuation of the stereotyped character of the gender roles, with a increasing discomfort in the couple's relationships.

4. Changes in the social relationships.

Most of the studies stress an increase of the relationships and exchanges between the new father and their origin family, especially with the own mother. It seems that men, as women, look for help, information and security beyond their own couple. Naturally, they look for it in the first extrapersonal level for the contention of all us: our own family. They look for security, information and contention during the period in which they can feel pressed by doubts about the normal or convenient behaviour to be done. It is a un-expected finding: Men also tend to look for containment/resilience in their own family, so much external as internal (mental representation).

Therefore, although from the psychoanalytical point of view, the reality of the father's role and its changes have been sparsely considered during decades, we must recognize that they are sufficiently remarkable ones as we can speak of a secondary paternal concern, and probably, also of a primary paternal concern.

That group of changes, with the increase of the confusional, persecutory and reparatory anxieties that happen, helps the father to act his important roles, at least in the relational levels showed in table 2.

To be able to describe, to illustrate and to reflect about this series of phenomena, we will put as illustration a sample of a baby's observation in which we can show an outstanding but conflictive role of the father.

Table 2

PARENTAL FUNCTIONS IN THE FAMILY

(in our culture and from the psychological point of view)

	<i>Aspects</i>	<i>Concept-summary</i>
1. CARE AND BASIC CORPORAL MAINTENANCE	<ul style="list-style-type: none"> • Food provision, dress, refuge,... 	"Affective warp"
2. INTROJECTIVE AND PROJECTIVE EMOTIONAL FUNCTIONS that give place to the mind and the thought	<ul style="list-style-type: none"> • Love – tenderness / Hate • Hope /Despair • Trust / Distrust • Contention (*réverie + to put limits) / Incontinence 	DIADIC FUNCTION (mother-child)
3. SUBJECT- OBJECT EXTERNAL AND INTERNAL RELATIONSHIP	<ul style="list-style-type: none"> • Creation of the OBJECT • Creation of the SUBJECT • Creation of the MENTAL SPACE 	
4. FUNCTIONS OF ESTABLISHING THE LIMITS AND CONTENTION	<ul style="list-style-type: none"> • Communication forms 	
5. ORGANIZATION AND DEVELOPMENT OF THE SUPER-EGO	<ul style="list-style-type: none"> • Moral rules: drives versus society: <ul style="list-style-type: none"> • Moral, motivation, prizes, achievements • Aims, values, loyalties • Support forms in family and social crisis • "Self Ideal" 	TRIANGULATION OF ORIGIN:: mother-children-father (Oedipus Complex)
6. BASIC PSYCHOSOCIAL IDENTITIES	<ul style="list-style-type: none"> • on PSYCHO-SEXUALITY • on AGRESSIVITY-DESTRUCTIVITY • on KNOWLEDGE 	
7. MODELS OF RELATIONSHIP WITH THE EXTERIOR	<ul style="list-style-type: none"> • Structured family, un-structured, in reversion, overimplicated or agglutinated, underimplicated, anxious-tense, etc. • "Basic couple" family or matriarchal, patriarchal, boys' band, house of dolls, in reversion, etc families. 	The internal-external relationships of the family like basic cell of the Society and, therefore, for the introjection of affective and social models and rules.

(*Rêverie*:: Capacity to empathize with the baby and the child and to feel, to think and to fantasize with him and for him)

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The observer transcribes the following protocol that she reads in the Therapeutic Observation Seminar. It is a session of the "long" observation, not directly "therapeutic", that is carried out along every year in the seminar. It serves as "counterbalance" and it helps to the setting maintenance: at the time, on Therapeutic Observation Seminar we are carrying out observations with other babies in risk, in series of between 5 and 15 sessions (Tizón 2001; Tizón et al 1997).

Therefore, like in Esther's Bick classic method, the reason for Luis's observation is the personnel's formation. The Functional Unit for Mental Attention of the Early Infancy (FUMAEI-UFAPI) required to Woman's Attention Service (Obstetrics and Gynecologic attention) to select a couple that will have their first son and that it was willing to accept an observer. The midwife selected to a mother and the first one selected that said "yes".

Elements of the penta-axial diagnosis of the observation (Tizón et al 1997) that is worthwhile to remember here:

I. Reason of the observation: Voluntary: for the personnel's formation

II. Clinical-psychiatric diagnosis: During the fourth week after the childbirth the mother showed symptoms of postpartum blues (or postpartum emotional unbalance).

III. Clinical-somatic diagnosis: Young and healthy parents, 30 years old both. It is their first son. The mother has plane nipple, but she wants to make maternal nursing. When beginning the nursery the boy had frequent colds.

IV. Psychosocial diagnosis: Both parents are of middle class, they work and they study. Although it is a programmed pregnancy, to the five months the mother works again. The boy must begin attending nursery on 5 1/2 months: when beginning, he had frequent colds or influenza.

V. Relational and psychodynamic diagnosis of the observation: To make it we have to keep in mind, the observation in the first place, but without forgetting the following data: The father is orphaned by his father. His mother has a limited relationship with the couple. She makes to the boy numerous gifts: he is the first member of the new generation. There is a little collaboration between the father and the mother to take care of the boy and to structure the triangulation of origin.

The mother has sensed the value of the observation from the beginning (perhaps for what she values her future baby). Therefore, she carried out an entire series of readjustments in her organization of the family post-childbirth so that the observer can attend.

The weaning was not well tolerated neither by the boy nor by the mother and the father: Father and son had reiterated colds. The mother showed for weeks very intense emotions and a sadness more or less hidden.

It is the observation number 15. Luis is 5 months and 7 days old. The observation is carried out on a Friday of September, between 19,30 and 20,30, in the

boy's home, as all the other ones - except for the first one, that was carried out in the clinic. In this observation the mother, the father and Luis are present.

The parents have left three weeks for holidays and it has not been possible to carry out the observation during them. When returning, the mother works again, after the maternal leave.

I call through the interphone. The mother answers me. I ascend in the elevator. When I arrive at the floor I find a half-open door. The mother comes out at once to greet me. She seems very affectionate and happy: she kisses me and I reciprocate. She invites me to enter.

I enter and I go, as always, towards the dining room. The father greets me saying: "*Look at him, look at him*". The father's expression seems to point out the changes that Luis has made during the period in which we have not had observations.

(Father is acting in his typical manner of showing the boy to the society, and to the world. With his alert attention and his primary or secondary paternal concern?. His self-esteem (or narcissism?) is alleviated by a boy that is developing well.)

Luis is inside a "park-cradle", with transparent laterals made of a very fine grill of cloth or plastic. The boy is face down, but at this time he turns to the door, being interested in who has arrived. Luis fixes his look in me, I believe that identifying me as somebody new, unknown for him. He shows that attitude for a while, although the mother at once takes him out of the park-cradle to show him to me. In the mother's arms, the boy stands looking hard towards me.

(The observer hypothesizes a reaction to the stranger. But won't it be attention and interest for the new thing?)

The mother explains:

"Today, this morning, I gave him the vaccine. The pediatrician already knows it. Last week we were to vaccinate him. He made two sneezes in the consultation room and she told us that it would be better to wait one week. Today is strange for the vaccine. He doesn't have fever, as on the other occasion, but he doesn't know what happens to him."

(Mother thinks for the boy. She suffers and she worries about him. Here it is the maternal contention. Perhaps the boy is more attentive, almost vigilant, not for the reaction before the stranger, but for the persecutory anxiety generated by the pediatric experience and the vaccine. Maybe he is feeling strange, organically altered by the vaccine, as the mother says.)

The boy continues in the mother's arms. I say hello to him and I give him a gift, for holidays: "*That is for you, Luis*". The father brings him the wrapped up package, so he would take it. He makes for it with his two hands. He rushes directly to catch it and he stretches a knot of many colors fixed on package. When catching it and touching, the crackling of the paper scares him: he is startled..

(Undoubtedly, he remains sensitive: they have harmed him and he didn't expect it. He is wary. Therefore, he puts on a more defensive attitude, the persecutory anxieties are more visible in his relationships.)

The father helps him with the gift. The boy is interested by what is inside the paper that has scared him. The mother thanks me, while she makes comments on the gift: "*How beautiful, what color*", etc. The boy is very big. He possesses a very alive look. The hands, very agile, catch the things with a lot of precision. He is in the mother's arms, very right. The father and the mother speak at the same time of all the things Luis does. Mother takes the activities blanket to the room and father leaves the boy on the floor, on the blanket. He also lies down, beside the boy.

(It seems to please the father. He likes to play. He has already shown it to us at other times. In spite of the presence of the observer, he doesn't feel shame in being down on the floor.)

The boy moves ahead without difficulty. He goes from one object to the other of the blanket, locating them and manipulating them in diverse ways. He moves up with a lot of agility and down, in diagonal. He leaves the space limited by the blanket. The mother tells him: "*No, mummy doesn't want you to leave. You cannot go onto the floor, no.*"

The father continues to anticipate the things that Luis will do. He knows the child very well. At the same time, he offers him more toys: Luis receives a "rain of stimuli" from everywhere. He seems happy on ground, on the red square. Now father places him sitting down on the ground without support, with an object in his hand. The boy inclines the whole body forward, holding back with his hands on the floor, before him. He holds back for a little while and he falls sideways, towards the left side, without trying to be sustained by the hands. He is on his tummy and he advances towards other objects of his attention. It seems that everything interests him.

Mother screams at him, wanting to demonstrate that the boy recognizes his name: "*Luis, Luis*", but the boy does not turn. She is on the boy's right. Luis seems very busy for all that he is discovering in the floor. Father follows giving him diverse watchwords. A moment later father catches him and he puts the boy on his feet on the floor, facing the sofa, and he says: "*He has a force!*". The boy tolerates the weight of his body.

(Father feels that Luis is strong. He seems to identify with that strong son. He continues showing Luis's abilities, proud of his offspring.)

Mother says to the father: "*Don't put him on his feet without shoes*". She brings a high seat, child-adapted (a "trona"). She tells us: "*He used it for the first time two days ago. He holds back well*". She shows me all the positions possible of the high chair.

The boy is in the father's arms, happy that they let him change place continually. He stands up looking at me the whole while.

Today everything is different. They are teaching, showing and explaining to me all that has passed in my absence, during holidays. They don't give themselves a break and they speak both at the time.

The mother sits down Luis inside the child-seat. She brings near the boy a tray with toys. The boy is well seated. He plays with a drop hammer. It interests him a lot: he wants to catch it and he is not able to. He moves him giving slaps and he laughs. The

two hands want to catch the puppet that goes forwards and backwards. Luis is very amused by this and very concentrated on the game.

Mother shows me the fruit plate of plastic: its size, what she puts in the fruit pap... She does the same thing with the vegetable plate. She shows me the different tablespoons.

(Maniac denial that the weaning has begun, forced by the necessary return to the work? Denegation or dissociation of the fact that Luis is near to initiate nursery? Is it the reason for this increased necessity to show us child's progression?. For our purpose, we have to notice that the father, very sensitive to Luis's frustrations, here doesn't see them or he prefers do not upset his wife. But the boy is not as happy as they want to believe.)

Luis begins to protest. He is sat down in the high chair, but without crying. Mother says again: *"This boy is strange. The same as with the other vaccine. Don't you remember, Adolfo?"*

Father argues that the boy is sleepy. (Men frequently are more "operative" than women). He takes him out of the chair and he holds him in his arms. Luis continues restless.

Mother explains to me that, when she arrives after working, she devotes the time to play with the boy. *"I don't do anything else. That time is for him"*. (A recognition of her perception of Luis's partial abandon).

The father tells me: *"You can see for yourself that we have filled the room with junk"*. Really, the living room is small and it is packed of things for the boy: the park-cradle, the baby's car to go to the street, the high- chair, the blanket of activities... The boy goes passing from father's arms to those of the mother. He is annoyed everywhere, as if he didn't know what he wants... Mother touches his forehead to check if he is hot. She herself says that he is not. *"What do you think?"*, she asks the father.

(In front of the anxiety, the collaboration of a third, of the primordial triangle, provides contention.)

Father reassures the mother saying her: *"You already know: The other time it was the same"*.

Mother plays with the boy in the mirror with the piece of furniture and Luis laughs. She shows me two pictures of Luis that are placed in the glass. Next, the father takes out a little picture of the boy that he carries inside the wallet.

(He keeps him well inside his heart. The primary and secondary paternal concern has settled down. But does he show the father-child relationship, the triangulation, or the competitiveness with the mother? It is a possible conflict, mainly in the "neighboring fathers".)

At once, the mother, with the boy in arms, looks for her wallet to show me the picture of the boy that she keeps there. It is beautiful.

(Collaboration-competitiveness between both to see who keeps him more "inside"?)

Father continues saying that the boy is sleepy. Mother says that she will give him of suckling and he this way will fall sleep. Father holds the boy and he speaks to him.

Luis is looking at his father with a lot of attention. Meanwhile, the mother leaves the room and she comes back with a robe, prepared to give him the breast.

(The father has followed his role of "secondary collaborator" all that while.)

When mother comes closer to father and son, she says me that Luis has not sometimes wanted the breast at this hour for a couple of days. *"I don't know if he is full"*.

(Or are they the first reactions before the partial weaning?)

Mother sits down, hoping the father brings her the boy. When she holds him the baby becomes rigid. He doesn't want to be lying.

(Or doesn't he know what awaits him, the breast, the baby bottle or the jab, and does he is on his guard?. Fortunately, there is a third-one to share the anguish. And today, there is a fourth: the observer.)

Meanwhile, mother catches the transparent prosthesis and she places it to the breast. I have already told you that she has the plane nipple. From the beginning, that situation has created serious difficulties for the nursing. Nevertheless, with the father's collaboration, mother has been able to achieve the possibility of breast-feeding.

But today the boy doesn't catch onto the breast. When the mother attempts it again, he becomes rigid, without any intention of suckling.

(Has the more familiar object became too much persecutory, as much for the weaning as for the vaccine? At this time, does it continue being bad object more than good or more total object?)

The mother, seemingly calm, speaks to Luis: *"Are you full?, don't you want it?"*.

The boy stops crying. The mother stays a little disoriented (or frustrated), without knowing if he doesn't want to eat or he doesn't have appetite. Father repeats that the boy is sleepy and that, if he doesn't want to eat, he will put him to sleep, as always.

The baby is standing in the mother's arms. It seems that he doesn't want to suckle. The mother says again that he has already done this some other day and today she justifies it with the vaccine. The boy grumbles.

Father wants to take him. He holds him close in his arms. At the moment, Luis remains silent, but he is restless and nervous. According to the father, what happens is that he is sleepy.

(The denial of the weaning, of the bereavement for the working weaning, of the Luis's mother partial loss, are more marked in the father, as it is frequent.)

Mother looks again at Luis and she takes him from the father's arms another time. She thinks that perhaps he has a full diaper. She takes him to the small room to change it. The boy is happy until the moment she leaves him on the changer. He cries without tears. The mother offers him a rubber duck. The boy catches it with the two hands, without any difficulty and he brings it closer to look at it. He doesn't loose it all the while. At the end he puts it in his mouth and bites it. He presses the rubber toy with his jaws strongly. His legs are naked. The mother removes his diaper: he has some green poop. The mother observes that Luis has been carrying it already a while.

The boy doesn't want to be stretched. He drops the duck or he throws it. He grumbles. The mother, just goes on changing him, decides to hold him in her arms and Luis is silent. The boy puts up his head above the mother's back and he sees me. He looks at me and gives me half a smile. I smile without saying anything to him. The mother goes telling him things, but when she puts him down to finish dressing him, he grumbles again.

The mother doesn't stop to speak to him. She tries to put the diaper quickly. The boy is getting angry. Mother offers him the ointment tube. The boy begins crying hard.

Mother says to the father: *"This boy is altered. He has cold feet"*. Father tells him: *"What is happening to my boy today? Poor boy!"*.

The boy is stretched with the raised legs caught with his hands. He puts on the right foot in the mouth and the big toe of the foot is sucked. The mother explains to me that already many days ago he discovered his feet. She explains to the boy that she will put on his pijama and, at the same time, she consults the father, it is outside, in the next room.

"Adolfo, what do you think? Shall I put him on his pijama?"

The father answers her: *"I agree. Today he cannot take a bath"*.

(The father is not competitive here, in moments of anguish. He always supports his wife, providing contention.)

The mother asks me why the children cannot take a bath on vaccine days. I answer her that I don't know.

When she sits him up, Luis is happy and the mother tells him: *"Who has come today?"*. She brings him around so that he sees me. The boy smiles and I tell him that he is very handsome.

Mother sits down at the table and tries to give him the breast. The boy is calm. He controls everything around. The whole time he is looking at me, looking where I am. Any movement that I make gets his attention. Indeed, mother comments it: *"How he is looking at you!"*. But now, the boy is looking for the father who at this moment is not in the room.

(Before the unknown, what it is necessary to control, he also looks for the father's protection, he also seeks the triangle.)

Mother opens up the robe and the wet protection is taken out. The breast overflows with milk. She puts on it the nipple prosthesis and she offers the right breast to the boy, who accepts it immediately. He is coupled to the breast and suckling with a lot of knack.

(The change among "bad" or "bad-good object", and the "good object" has been difficult. Only when the mother has been near him enough time, in physical contact and applying her loving handling, he has felt contained: the "good object" passes to dominate in its internal world. Perhaps for that reason he has accepted the nipple now. Let us remember that, when beginning to work, in fact in these days, mother disappeared during the hours of the baby's waking life.)

The boy's right hand goes feeling for the neck and the mother's breast. He catches in the middle of the bra and he goes on suckling this way. He continues moving the hand until hooking it in the chain that the mother wears on her neck. The mother speaks to

him and, at the same time, she catches his hand and she is caressing it. From the beginning the boy's eyes are closed.

(But he remains very vigilant: Is he holding tight to the mother so that she doesn't escape? It is also a good example of how the breast feeding or the-well-administered-baby-bottle are *multimodal* experiences.)

The father has arrived in the room and he has been standing before the mother and the boy. He stays calm for a good while, contemplating them without saying anything to them (Respecting the diada, now recovered). Then he sits down on the sofa, beside the mother and the boy, and he explains to me that they tried to give him the baby bottle the first week that the mother went to work. It didn't work. By luck, they began at once with the vegetables.

(The father is placed on his side of the triangle, so much on the sofa, as in his mind and in the narration of the family development.)

The boy suckles rhythmically. His eyes are closed, but he doesn't sleep. He keeps moving the hands the whole time, exploring the mother. The mother speaks to him: "*Luis, if you suckle you help mummy, so that her breasts don't hurt*".

(So that her breasts don't hurt, neither the guilt in the mind... The mother is recognizing the contribution from the boy to the diada. She already considers the boy a subject with his capacities and individual contributions.)

She comes toward me. She explains to me (without stopping to look at the boy) that the first days of return to work she had to take out the milk in the office with the milk extractor. Those first days she worked until three on the afternoon. The boy stayed with the husband's sister. "*In the morning she came for us in her car, she left me at the work and she carried the boy to her house. It is very close. At three o'clock, when I finished work, she came fetch me. My husband also: we ate together. It was this way for the first whole week. The following one, Luis already stayed at home with his father. He began to eat vegetables. Now they come to fetch me from the work in the afternoon*".

Meanwhile, the mother keeps caressing the boy's head, and he follows his continuous suckling with evident pleasure. Mother tries to change the breast, but the baby is hooked and suckling so strong that he doesn't loose the breast. Mother explains to him: "*Let us come, Luis, let us. You will continue with the other one*". She attempts it again: baby catches stronger and he opens his eyes suddenly. He seems unhappy for a moment.

Mother carries out the maneuver of the breast change quickly, taking off and putting on the artificial nipple. She offers him the left breast and the boy is coupled. When the mother changes the boy from the right breast to the left one and takes out the prosthesis of transparent plastic, the right breast stands full with milk. Mother's nipple has more relief and volume than before... The baby seems satisfied and he is very concentrated suckling; he seems to enjoy it with his five senses. Luis is a happy boy!

(Contrary to other children of the seminar... Perhaps this is the observer's feeling.)

Father says: *"Now we put him to bed and this way, almost without finding out, he has adapted to our schedule. He suckles at twelve o'clock again (24 hours). And then, until seven in the morning, he is not there. And it is the hour that we rise go to work"*.

The mother says to the boy: *"How well! You have to sleep"*. She seems as happy as the baby himself. She asks the father if the boy's bed is prepared and she is the one who takes him to the room. The room is so small that for fear or respect, I don't move from the dinning-room. Mother calls me: *"You can enter to see him in bed"*.

Baby is lying on cradle, with his legs apart, face down, with an arm up and the other one beside the body. They leave him sleeping with the open door.

I collect my things to leave, because it is time. Mother tells me to come one day to see how Luis eats the pap (To help me a little more with my guilt and my doubts?). I am scheduled for next week, the same day at the same hour. They both accompany me to the door. Father tells me: *"Now I am here the whole day. You can come when you want"*.

I say goodbye and *"Until next Friday"*.

CONCLUSION

With the initial scientific reflections and with Luis's observation we wanted to get the attention and to sensetize on the topic of the father's role. To our understanding, it is a topic little kept in mind by all type of psychoanalytic and psychoanalytical applied approaches today (and, more in general, from almost every psychological perspective). To arrive at this situation, we believe that there have intervened at least four types of interrelated factors:

1) The influence of the psychoanalytical discoveries about the mother's importance, about the importance of the internal (and external) mother-object or, more modernly, about the importance of the maternal functions indispensable for the new being's development. Just for the importance and profundity of such a discovery, it has obscured the role and the functions represented by other internal and external figures. For instance, it has obscured the role of the social microgroups that contain and help that developing human being. Probably, it has also obscured the father's role.

2) That reality has been also complicated by means of a European centrist perspective of the maternity, the paternity, the parental functions and the triangulation of origin (Table 2). Possibly for continuisme with regard to Freud and the first psychoanalysts, it is often taken as the universal emotional and social reality of family bonds that they correspond to European-ones, to a part of Europe (the Central Europe) and to a submodel of those ones: the characteristic of the Central European bourgeoisie of the XIX century. The father's role in other cultures, that is to say, in most of the human cultures, has been little integrated in our psychological and assistance perspectives.

3) Several ideological issues of the "male chauvinism or sexism" and the "fallus-centrist (?)" perspective also had their impact so that one could not keep in mind with enough depth the radical human bisexuality, that also affects (obviously!) the fathers. The consequence: many western males may like to forget about it. By the way, they avoid home duties (taking care of children), but also they avoid internal conflicts: i.e., the elaboration of the conflict of the basic bisexuality along the diverse individual and social ages and across the diverse cultures.

4) The social and cultural changes of the father's role are very visible today in the European and North-American societies. Nevertheless we must insist on a proposition: those social changes, with the transformation of the father's socially accepted role that they have harnessed, they should not be understood as the only motors for the necessity of reconsidering the father's role in the integral development (biopsychosocial) of the children. There is also a greater possibility to show and to develop unconscious phantasies and motivations previously hidden. All of it in spite of recognizing that those changes in the situation, relationships and parents' roles are extending in the entire world, partly supported by social and psychosocial changes as those summarized in table 1.

The authors of this paper consider that it is of fundamental importance, so much at a theoretical-psychological level as an assistance level, to meditate about those factors and, in general, on the father's role in the family, in the constitution of the primary object relationships and in the contemporary societies. Moreover, we feel a necessity to change our perspectives and our techniques with the purpose of being able to introduce the fathers in the global treatments of the children, in the family therapies, in the "family psychological aids", in the "psychotherapies mother-son" and "mother-baby" (that should be rebaptized from this perspective as "*parents-son psychotherapies*" and used with modified approaches and techniques), etc. An entire exciting series of reflections so much scientific as assistance-ones that, to our understanding, it is necessary to develop as soon as possible.

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