

The Reflection of the Relation Between Ontological Well-Being and Depression on Paternity During the COVID-19 Pandemic

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The study was aimed at investigation of the relationship between ontological well-being sub-factors with depression and anxiety levels of fathers during the COVID-19 pandemic in Turkey. The data in this cross-sectional study was collected via online self-reporting questionnaires from randomly selected fathers (N = 379) whose children's ages ranged from 6 to 12. The data collection took place between the months of March and May of 2020. Participants completed measures of the Beck Depression Inventory (BDI), the Beck Anxiety Inventory (BAI) and the Ontological Well-Being Scale (OWBS). The results showed that full mediating effect of depression in the relationship between ontological well-being and anxiety. Findings indicated that the perceived attitude to their paternity had the statistically significant effect on the level of depression and anxiety of the fathers. The study shows that there is direct relevance between anxiety, depression and socio-demographic variables, meanwhile the study also suggests that the socio-demographic variables of fathers and the subscales of activation and hope do not correlate.

Keywords: COVID-19, paternity, ontological well-being, depression, anxiety.

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Особенности связи онтологического благополучия и отцовской депрессии в период пандемии COVID-19

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Исследование направлено на изучение взаимосвязи между показателями онтологического благополучия и уровнем депрессии и тревожности у отцов во время пандемии COVID-19 в Турции. Данные в этом кросс-секционном исследовании были собраны с помощью онлайн-анкет в случайной выборке, включающей 379 отцов, имеющих детей в возрасте от 6 до 12 лет. Сбор данных проводился в период с марта по май 2020 года. Участники заполняли Шкалу депрессии А. Бека (BDI), Шкалу тревоги А. Бека (BAI) и Шкалы онтологического благополучия (OWBS). Результаты показали влияние депрессии на связи между онтологическим благополучием и тревожностью. Воспринимаемое отношение к своему отцовству продемонстрировало статистически значимое влияние на уровень депрессии и тревоги у отцов. Исследование показывает, что существует прямая связь между тревогой, депрессией и социально-демографическими переменными, в то время как социально-демографические переменные отцов и такие параметры онтологического благополучия, как активность и надежда на будущее, не коррелируют.

Ключевые слова: COVID-19, отцовство, онтологическое благополучие, депрессия, тревожность.

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Introduction

On March 11, 2020, coronavirus disease 2019 (COVID-19) was declared an international public health emergency by the World Health Organization [44]. This unprecedented disease has had negative effects on all aspects of daily life worldwide [24; 33; 46]. According to the latest statistics, as of 20 March 2020, there were a total of 122,225,328 confirmed cases and 2,699,894 COVID-19 deaths that touched 192 countries/regions worldwide [9; 10]. The irregular changes, uncertainty and low predictability of the COVID-19 pandemic [12], its continuous and rapid spread, and its life-threatening consequences have deeply affected the mental health of individuals [1; 14; 15; 20; 30; 45]. During the COVID-19 pandemic, the prevalence of mental health problems such as depression (12.65%), anxiety (9.45%) and stress (6.10%) in the Turkish population were found to be between mild to severe [46]. Fathers who had limited socioeconomic support while trying to continue their parenting roles and care for their children were one of these groups that were already vulnerable to the effects of the pandemic [34; 36].

From the perspective of paternity, the pandemic situation had a major impact on the basic assets of the father's psychological well-being [35]. In Turkish society, fathers play a leading role in the financing of the house, as well as the family structure and authority [28]. Given the various responsibilities that a father holds, it is plausible to assume that the current COVID-19 pandemic might cause psychological distress among fathers in different areas including anxiety about their families and their own health and life, anxiety about financial matters, due to possible job loss or incomplete payment, and communication-based anxiety when they are parenting their children [46]. People, including fathers, lost their jobs during the COVID-19 pandemic as non-essential economic activities such as restaurants and cafes were forced to temporarily shut down [29]. Thus, for fathers, distress caused by economic difficulties, particularly during the pandemic, has been added to the general stressors associated with COVID-19 [36]. Following the lockdown, some fathers started working remotely from home where their children were also present due to the distance education system [16]. Thus, they experienced difficulties in coping with stress, either due to their inability to work or working remotely while having to take care of children and domestic work [27]. As the COVID-19 pandemic caused a rapid change in work, family roles, and priorities; some fathers were exposed to additional childcare and home-schooling responsibilities which increased the fathers' share of the domestic weight. As a result, they were directly exposed to more daily childcare stress [38].

Ontological well-being (OWB) is defined as an individual's evaluation of their past, present, and future lives and it is closely related to emotional well-being [40]. The OWB takes into account subjective total life assessments about whether the person is happy in a three-dimensional time perspective. The research on time perspective shows that future time perspective is related to motivation and success; past time perspective is related to self-esteem, depression, and happiness; and present time perspective is linked to risk behaviours and depression, taking time in its continuity with the past, present, and future to self-actualization, purpose in life, and achievement [39]. Considering existential crises such as purposelessness, emptiness, or feeling lost, OWB also makes a significant contribution to understanding mood disorders. Therefore, OWB could be considered as an important factor for human flourishing [40]. OWB is thought to be correlated positively

with life satisfaction and negatively with negative indicators of mental health such as anxiety and depression [40]. Thus, OWB may be one of the factors related to the psychological well-being of the father in the current stressful situation of the COVID-19 pandemic.

The compelling relationship between the meaning/purpose of life and emotional well-being is closely related to strategies that protect an individual from depression and attempting to commit suicide, and help them cope with difficulties and traumatic events [41]. Evidence from the context of the COVID-19 pandemic suggests that complete mental health (e.g., subjective well-being, psychological well-being, depression, anxiety, and somatization) can be achieved through adversity if individuals have psychological strengths like meaning in life, resilience, and hope [4]. Individuals who continue their lives by having positive psychological experiences such as hope, meaning/purpose in life, and positive emotions, can cope effectively with difficulties which in turn can ultimately contribute to their mental and physical health [5]. There is evidence supporting this notion from the current pandemic literature. Experiencing meaninglessness, emptiness, and regret may have negative effects on well-being and mental health of individuals, particularly under stressful situations. Therefore, this can lead to the emergence of common mental health problems including anxiety and depression [22]. Social isolation, consent seeking, privilege, pessimism, failure, self-sacrifice, and emotional deprivation schemas have all been found to be related to depression through OWB [42]. Among OWB factors: nothingness, activation, hope, and regret are associated with depression, while regret and nothingness are the most prominent influencing factors [42]. As fathers begin to work from home or become unemployed and children are removed from school and care, it is vital to answer questions about the impact of the pandemic on the fathers' mental health. To address these research questions, we used data collected from a sample of families with children between March to May during the lockdown period in Turkey. Based on theoretical and empirical evidence, we sought to examine the association between anxiety, depression, and OWB.

The *main purpose* of this study is: to examine the mediating role of OWB in the relationship between anxiety and depression. To test the research question, we formulated a structural equation model in which anxiety is related to OWB, which in turn is related to depression. In light of the aforementioned purposes, we assumed that OWB will function as an important mediator in the relationship between anxiety and depression. The hypothetical model depicting the association between the study variables are presented in Figure 2.

Methods

Ethics. All procedures performed in this study that were conducted in accordance with the Declaration of Helsinki regarding research on human participants, were approved by Clinical Ethics Committee of Istanbul Rumeli University (number 53938333-050.06-E.834, date 27.05.2020).

Study Design and Participants. This was a cross-sectional study, conducted during the lockdown in Turkey. The snowball approach and an online questionnaire were used with the participation of fathers whose children were between the ages from 6 to 12. Data

collection in which 379 fathers participated was done from 10th of March to 22nd of May 2020. During this period, educational institutions, entertainment places, and enterprises such as restaurants, patisseries, and cafes were closed throughout the country. The average age of the fathers in the study was 41.9 (SD = 6.4) ranged from 26 to 64. 15 participants that were suspected or confirmed to have COVID-19 were not included in the study. None of the participants reported a history of being diagnosed with any mental disorder. All participants gave their permission to be part of the study and online informed consent was obtained from each participant prior to them completing the questionnaires. They all had the option to withdraw from the survey without any explanation. The online survey system (Google Forms) had mandatory fields of response for scales therefore there was no missing data. However, demographic questions were not mandatory.

Instruments

1. *Socio-demographic data form*. Demographic variables included age, economic status, level of education, fatherhood definition, definition of paternity style, plan and type of birth of their children were questioned with socio-demographic data form.

2. *Ontological Well-Being Scale (OWBS)*. OWBS is a self-report assessment which was developed by Şimşek and Kocayörük [40]. OWBS, also known as “Life Project Scale”, is used to determine subjective well-being in a new concept which contains philosophical, historical, and psychological aspects of the subject. It consists of 24 items grouped as “Past”, “Now” and “Future” which are rated on a 5-point Likert-type scale. It has four sub-scales namely; “Regret”, “Activation”, “Nothingness”, and “Hope”. The scale has 7 items regarding “Past” which are “*When I look at the completed part of my life project...I feel satisfaction, I feel guilty, I feel regret...*”. It constitutes “Regret” sub-scale of OWBS. It has 11 items regarding “Present” which are “*When I look at present part of my life project... I feel lost, I feel empty, I feel anxious...*”. Those ones constitute “Nothingness” sub-scale. Also “*When I look at present part of my life project... I feel enthusiastic, I feel energetic, I feel motivated...*”. Those ones constitute “Activation” sub-scale. The last 6 items which constitutes “Hope” sub-scale of OWBS represents “Future” of one’s life project “*When I look at the future part of my life project...I feel brave, I feel hope, I look forward to it...*”.

Higher scores indicate higher satisfaction about one’s life project. But since Regret and Nothingness factors consist of reverse statements, they are needed to be reverse coded before computing total score of the scale. Internal consistency coefficients for these factors were strong, ranging from $\alpha = 0.78$ to $\alpha = 0.90$ for original scale. Cronbach’s alpha coefficient was found to be high ($\alpha = 0.91$) for the whole scale [40]. Besides for this study, internal consistency coefficients ranging from $\alpha = 0.78$ to $\alpha = 0.97$ for this study. Overall Cronbach’s alpha coefficient was also found to be high ($\alpha = 0.90$).

3. *Beck Depression Inventory (BDI)*. The BDI is a self-report assessment developed by Beck et al. [8]. It was adopted to Turkish population by Hisli [17]. BDI is used to determine the behavioral pattern specific to depression. It consists of 21 items rated on a 4-point Likert-scale. Each point of the items increases gradually indicating the severity of a symptom. For example, “*I get as much satisfaction out of things as I used to.*”, “*I feel quite guilty most of the time.*”, “*I am slightly more irritated now than usual.*” It has a single-factor structure and single total score ranging between 0–63. High scores indicate high levels of depression. The Cronbach α value of the BDI for this research was found as 0.80.

4. *Beck Anxiety Inventory (BAI)*. BAI is a self-report assessment which was developed by Beck et al. (1988). It was adopted to Turkish population by Ulusoy et al. [43]. BAI is used to determine the frequency of anxiety symptoms experienced by individuals. It consists of 21 items rated on a 4-point Likert-type scale. For example; “*Wobbliness in legs*”, “*Heart pounding / racing*”, “*Shaky / unstead*” etc. It has a single-factor structure and single total score ranging between 0–63. High scores indicate high level of anxiety experienced by the individual. The Cronbach α value of the BAI for this research was found as 0.91.

Statistical Analyses. The data was analyzed with SPSS v. 23.0 and LISREL v. 8.51 package programs, applying appropriate statistical tests. The p values which are less than 0.05 were regarded as statistically significant. The Kolmogorov–Smirnov test was applied in order to evaluate normality distribution of the data.

The measurement model has been run in Lisrel v. 8.51 to evaluate the relationship between variables. Since the Beck Depression Scale and Beck Anxiety Scale are unidimensional, the observed variables were created artificially by parceling out. The balancing method, which takes into account the item-total correlations, was used as the parceling method [25]. Then two alternative theoretical models have been analyzed to decide whether the ontological well-being has mediating effect on the relationship between anxiety and depression, or depression has mediating effect on the relationship between anxiety and ontological well-being.

Results

Participants and Descriptive Statistics. 379 participants in the study were between the ages of 26 and 64 ($M_{age} = 43.5$ years, $SD_{age} = 6.9$). 18.7% of these participants were high school graduates and 50.7% had a bachelor's degree. 78.4% of them described their paternity style as calm and tolerant. 94.2% of them stated that their economic status was medium or good. The gender distribution of children with an average age of 9.3 was close to each other. 80.3% of the children were cared for by their mothers between the ages of 0 and 1. 83.3% of the children started preschool between the ages of 3 and 5. Detailed demographic information of the participants is given in Table 1.

Table 1

Frequency Table for Demographic Variables

		n	%	Valid %	Cumulative %
Gender of Children	Girl	187	49.3	49.5	49.5
	Boy	188	49.6	49.7	99.2
Type of Birth	C-section	191	50.4	50.4	50.4
	Vaginal	186	49.1	49.1	99.5
Plan of Birth	Planned	214	76.7	76.7	76.7
	Unplanned	51	18.3	18.3	95.0
	IVF	14	5.0	5.0	100.0

0-1 Age Caregiver	Other	20	7.2	7.2	7.2
	Mother	224	80.3	80.3	87.5
	Relative	21	7.5	7.5	95.0
	Nanny	14	5.0	5.0	100.0
Age of Playschool	Age 2	11	3.9	4.1	4.1
	Age 3	60	21.5	22.2	26.3
	Age 4	81	29.0	30.0	56.3
	Age 5	84	30.1	31.1	87.4
	Age 6	34	12.2	12.6	100.0
Definition of Paternity Style	Anxious	32	8.4	8.4	8.4
	Calm	152	40.1	40.1	48.5
	Panic	7	1.8	1.8	50.4
	Tolerant	145	38.3	38.3	88.7
	Angry	39	10.3	10.3	98.9
Education of Father	Preschool	18	4.7	4.7	4.7
	High School	71	18.7	18.7	23.5
	Associate Degree	19	5.0	5.0	28.5
	Undergraduate	192	50.7	50.7	79.2
	Post Graduate	65	17.2	17.2	96.3
	Doctorate	13	3.4	3.4	99.7
Economic Status	Bad	7	1.8	1.8	1.8
	Medium	183	48.3	48.3	50.1
	Good	174	45.9	45.9	96.0
	Very good	15	4.0	4.0	100.0

Descriptive statistics are shown in Table 2. Çokluk et al. [11] stated that skewness and kurtosis coefficients should be in the range of ± 2 to be able to say that the data did not deviate from the normal distribution.

Ontological Well-being. In this study, the relationships among ontological well-being, depression, and anxiety levels of the fathers whose children were between the ages of 6 and 12 during the COVID-19 period were investigated. The theoretical model showing the relationship between the main variables is presented in Figure 1. In this model, the latent variables of anxiety and depression were divided into three plots (parcels) in order not to take the error as zero. The balancing method, which takes into account the item-total correlations, was used as the parceling method [25]. Ontological well-being latent variable is represented by the observed variables (sub-scales of OWB) regret, activation, nothingness and hope.

Table 2

Descriptive Statistics

	Mean	Standard Deviation	Skewness	Kurtosis
Age of children	9.23	2.09	-0.09	-1.26
Age of fathers	43.52	6.87	0.25	-0.16
DEP	21.95	11.92	-0.04	0.29
ANX	22.60	12.03	0.07	0.63
REG	12.18	6.35	1.40	0.76
ACT	11.08	4.63	1.25	0.61
NOTH	13.60	7.96	1.15	-0.31
HOPE	12.30	6.41	1.30	0.56

Notes: DEP: Beck Depression Score, ANX: Beck Anxiety Score, REG: Regret sub-scale of OWB, ACT: Activation sub-scale of OWB, NOTH: Nothingness sub-scale of OWB, HOPE: Hope sub-scale of OWB.

The measurement model was made first to see the goodness of fit of the model and the relationships between the variables. As seen in Figure 1, the factor loadings of the latent variables of anxiety ranged from 0.91 to 0.92. The factor loadings of the depression latent variables were between 0.90 and 0.95. The factor loadings of the ontological well-being latent variables ranged from 0.79 to 0.90. Since we expect factor loadings to be high, we can generally accept factor loadings as good. We can say that the margin of error values were also within acceptable limits.

When we look at the correlations between factors, we see that there was a relationship with the value of -0.58 between ontological well-being and anxiety, 0.89 between anxiety and depression, and -0.62 between depression and ontological well-being.

Other important indicators in the model were goodness of fit values. Since we expect the RMSEA value to be below 0.08, the value of 0.037 ($p < 0.05$) is within the acceptable range. A test of the measurement model acceptable goodness of fit statistics: χ^2 ($df = 32$, $N = 379$) = 48.56, $p < 0.001$ GFI = 0.970; IFI = 1.000; SRMR = 0.024; RMSEA = 0.037 [90% CI: 0.012; 0.057]. All values show that goodness of fit is very good.

In the second phase, a theoretical model was considered for the question if ontological well-being has mediating effect on the relationship between anxiety and depression. The mediating effect of ontological well-being is investigated in the relationship between anxiety and depression. The goodness-of-fit values of the established structural model were as follows; χ^2 ($df = 31$, $N = 379$) = 48.39, $p < 0.001$; IFI = 0.990; GFI = 0.980; SRMR = 0.024; RMSEA = 0.039 [90% CI = 0.014; 0.059]. These indicators show very good fit which means that the model was supported by the data. Accordingly, the path analysis model looks like Figure 2. The relationship between anxiety and depression, which was 0.89, decreased to the initials 0.79 ($t = 16.37$, $p < 0.01$). Accordingly, ontological well-being partially mediated the relationship between anxiety and depression [6].

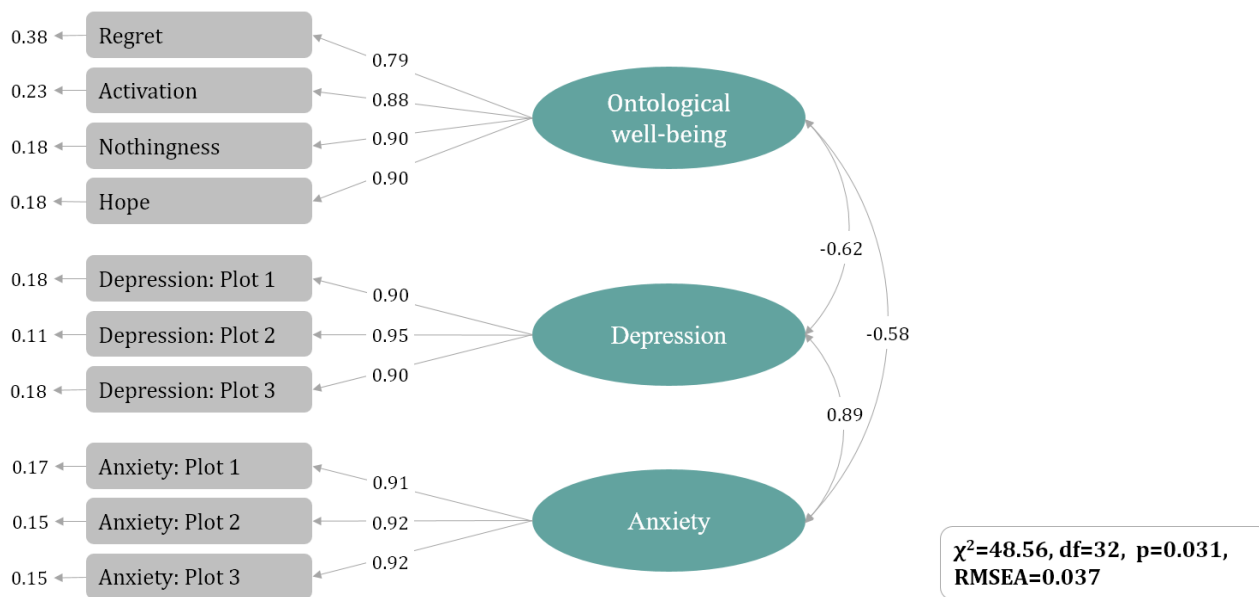


Figure 1. Measurement model

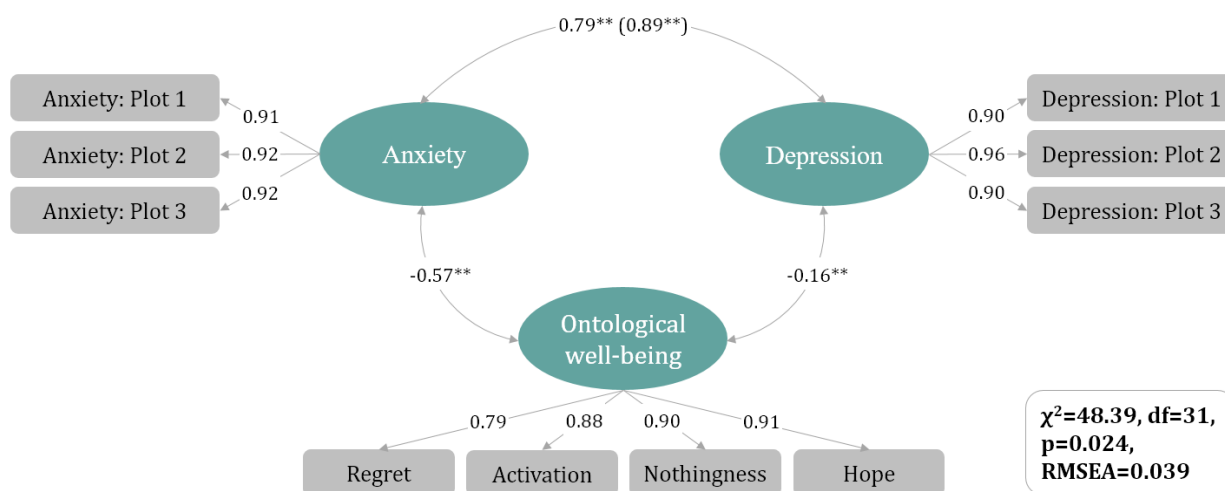


Figure 2. Path Analysis for Mediating Role of OWB

Note. ** – $p < 0.01$.

In the structural model, it is seen that the indirect effect of anxiety on depression is 0.41 and this effect is statistically significant ($t = 9.67$, $p < 0.01$). The structural model explained 80% of the variance in depression; 33% of the variance in ontological well-being.

Discussion

With the outbreak of COVID-19, drastic measures were taken to prevent the virus from spreading around the world. In response to the pandemic, a restrictive lockdown was implemented in Turkey, which suddenly changed the routines and interactions of the population. The study aimed to investigate the relationship between ontological well-being and depression and anxiety experienced in fathers during the COVID-19 pandemic. To this

end, we tested a structural equation model to explore the mediating role of ontological well-being in the link between anxiety and depressive symptoms. The COVID-19 pandemic has had significant impacts on people's mental health and well-being [3; 13; 21], with many experiencing increased levels of stress, anxiety, and depression. The literature suggests that fathers may more affect by the increased caregiving burden and adaptation to pandemic changes [2; 37]. For example, the relationships between caregiver burden and mental health symptoms and perceived child stress in fathers was found to be stronger than in mothers. While the caregiver roles and responsibilities for all parents increased due to measures during the pandemic, mothers were able to adapt better than fathers [2; 31]. Fathers, in particular, may be facing unique challenges during the pandemic, such as increased caregiving responsibilities, financial stress, and limited access to support networks [26; 32; 36]. Moreover, the study focuses on the mediating effect of ontological well-being, which refers to an individual's evaluation of their past, present, and future [40] and is an important aspect of well-being [18; 39; 40]. Therefore, understanding the factors associated with ontological well-being and its mediating role is crucial for developing effective interventions to support individuals' mental health and flourishing during times of crisis.

The results of the study indicated that anxiety significantly predicted fathers' ontological well-being, and ontological well-being mediated the link between anxiety and depressive symptoms in fathers during the COVID-19 pandemic. Previous research has suggested that ontological well-being factors – nothingness, activation, hope, and regret – are associated with depression, with regret and nothingness being the dominant determinants [42]. Similar to these findings, the present study found a positive relationship between depression, regret, and nothingness, and a negative relationship between activation and hope. Nothingness was found to have a strong negative correlation with environmental superiority variables and personal development dimensions, and a strong positive correlation with negative mood [40]. For example, Kocayörük et al. [22] reported that the nothingness dimension of ontological well-being was closely related to mood disorders such as depression and anxiety. Individuals who have negative evaluations such as emptiness, purposelessness, and loss, which constitute the nothingness dimension, are highly likely to experience symptoms of depression. In depression, individuals tend to have negative expectations for themselves, the outside world, and the future [7].

According to the ontological well-being theory, the present can also be considered as a person's motivation to continue their project. From this perspective, the COVID-19 pandemic has caused a significant mental distress to the general public [23]. The measures taken during the pandemic, such as isolation, quarantine, and restrictions on social contact and movement, have further increased the emotional distress experienced by individuals. Therefore, these measures and experiences may increase anxiety and depressive symptoms among fathers during the pandemic, which, in turn, can reduce their ontological well-being.

Moreover, the study showed that ontological well-being mediated the relationship between anxiety and depression among fathers during the pandemic. In other words, the level of ontological well-being experienced by fathers can play a role in the relationship between their anxiety and depression. Consistent with these findings, Taşçı Kuzu [42] found that ontological well-being had a mediating effect in the relationship between social isolation, failure, and pessimism with depression among young adults Ontological well-

being primarily focuses on eudaimonic well-being, which is defined as fulfilling one's true potential and engaging in activities that provide meaning and purpose in life, rather than hedonic well-being, which is defined as experiencing pleasure and avoiding pain [39]. The concept primarily mirrors the evaluation of life as a project in terms of past, present and future [39]. Hence, individuals with high levels of ontological well-being are more likely to use greater psychological strengths which contribute to promoting their resilience and mental health [19]. Furthermore, ontological well-being is associated with other positive psychological constructs, such as resilience, hope, and optimism, which can contribute to individuals' mental health and well-being [39; 40]. Although evidence has shown the links between ontological well-being and other psychological constructs, further research is needed to deepen our understanding of how ontological well-being is related to mental health outcomes such as depression and anxiety. To improve the utility of the concept of ontological well-being, it is vital to conduct more research in this area. Therefore, this study presents further evidence showing that there is a direct significant relationship between anxiety and depression, and that ontological well-being mediates the relationship between these variables.

Given that the COVID-19 pandemic has been a stressful time for many people, including fathers, understanding the role of ontological well-being in psychological problems could have some important implications for promoting well-being and resilience during times of crisis. The study results demonstrated that ontological well-being dimensions were significantly associated with depression and anxiety, and ontological well-being mediated the relationship between anxiety and depressive symptoms among fathers during the pandemic. The finding that ontological well-being mediates this relationship suggests that addressing anxiety symptoms alone may not be enough to improve mental health outcomes. Ontological well-being may play an important role in mental health and well-being. The results highlight the potential benefits of interventions that focus on improving ontological well-being. Developing intervention strategies to enhance ontological well-being may be an effective way to reduce anxiety and depression symptoms among fathers during the times of a health crisis. These interventions could include activities, such as reflection or goal-setting practices that help fathers evaluate life project in their experiences. Further, psychotherapists or clinicians working with fathers experiencing anxiety and depression during the crisis may want to assess and use ontological well-being as part of their psychotherapy process. This could help identify fathers who may benefit from interventions aimed at improving ontological well-being

Although this study provided insightful information on the relationship between ontological well-being, anxiety, and depression, there are a few *limitations* that need to be acknowledged. First, the study used a cross-sectional design, which cannot establish causal relationships between variables. Therefore, the generalizability of the findings may be limited. Future research should use a longitudinal design to strengthen the findings of this study. Second, the study focused on fathers, so the results may not be generalizable to other subgroups who were more or less exposed to the outcomes of the pandemic. Researchers should consider testing the hypothesized model on other influential risk factors. Finally, the study relied on self-reported measures, which may present biases such as overestimation or underestimation of responses. Therefore, different approaches should be applied to test the model and improve the reliability and validity of the findings.

Conclusion

In conclusion, this study has the potential to improve our understanding of the relationship between ontological well-being and mental health during times of health crises, with important implications for individuals, families, and communities. This suggests tailoring and implementing intervention programs that focus on enhancing the well-being of populations at risk, such as fathers, to improve their functioning and well-being. Therefore, the study's findings have important implications for mental health professionals and policymakers in designing targeted interventions to support fathers' mental health during the pandemic. The results may also contribute to a broader understanding of the impact of the pandemic on individuals' mental health and provide insights into how to promote resilience and well-being in the face of adversity.

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