Making the most of fathers to . . .
Improve maternal and infant health

**PREGNANCY**

Babies do better when they are planned for by both parents, so . . .

- Engage boys/men in family planning, emphasising that since dads are so important, both parents should be well prepared for the timing of pregnancies.

Efforts to prevent mother-to-child transmission of HIV include mothers taking prescribed medication, as well as active support from their husbands or partners, so . . .

- Invite dads into prenatal services, debunk HIV myths, help mothers disclose their status safely – and work towards the fathers being tested too (but not as your first approach to them!).

Mothers are more likely to stop smoking if their partner stops smoking, so . . .

- Smoking cessation programs must engage both partners.

Pregnant women eat and live more healthily when their partner supports them, so . . .

- Don’t give health messages only to women – make sure the dads ‘get the message’ too.

**BIRTH**

Men who understand the risk of pregnancy complications will support their partner’s use of appropriate services so . . .

- Make sure fathers, uncles, brothers and community leaders understand why professionally supported childbirth is the safest option.

Mothers who have calm and supportive birth partners have better labours, so . . .

- Make sure dads are knowledgeable and well prepared for their role as birth partners, and understand the importance of their presence in the labour and delivery process.

Sharing the birth of their child can strengthen parents’ relationships, so . . .

- Make sure the dad isn’t ‘crowded out’ and make efforts to include him, even when family or friends are also at the birth (that goes for after the birth, too . . .)

**AFTER THE BIRTH**

Support from fathers is more likely when they’re named on the birth certificate – and children need to know who their fathers are, so . . .

- Encourage birth registration by both parents.

Breastfeeding rates are higher when mothers feel their partner supports breastfeeding, so . . .

- Make sure dads fully understand the benefits of breastfeeding, and how they can help their partners.

Mothers’ mental health is better and couples’ relationships are stronger when dads are hands-on with babycare, so . . .

- Help dads develop confidence and skills right from the start.

Father-infant bonding is stronger when dads develop their own ways of doing things, so . . .

- Help dads spend time on their own caring for their baby.

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**HOW THEY DO IT:**

Écoles des Maris (‘Schools for Husbands’) in Niger is a UNFPA-funded project which works to transform attitudes and behaviour around childbirth through the training of *maris modèles* (‘model husbands’) to spread the word about the benefits of mothers’ using local health services. Health workers give the husbands the information they need to engage with other husbands, elected representatives and religious chiefs, so health messages are reinforced community-wide. The ‘model husbands’ have built new clinical facilities and work to combat malnutrition and improve hygiene. Fewer women and babies are dying or becoming very ill: in one district the percentage of expectant mothers attending prenatal care visits rose from 10% in 2008 to over 90% in 2011. Professionally-attended childbirth rose from 15% to 74% over the same period, with uptake of childhood vaccinations also growing rapidly.
Making the most of fathers to...
Reduce violence in children's lives

'MAKING MEN INTO FATHERS' WORKS BEST IF YOU GIVE THEM SUBSTANTIAL OPPORTUNITIES FOR CARETAKING RIGHT FROM THE START. The more infant care fathers do, the more satisfied and sensitive they tend to be. Caretaking causes brain and hormonal changes in men (as in women) that facilitate nurturing and bonding. Within 15 minutes of holding a baby, men experience raised levels of hormones associated with tolerance/trust (oxytocin), sensitivity to infants (cortisol) and brooding/lactation/bonding (prolactin). And fathers who nurture and take significant responsibility for early basic childcare (e.g., feeding, changing diapers) are significantly less likely to sexually abuse their children.

HOW THEY DO IT:
Primary prevention of Shaken Baby Syndrome, Buffalo, NY, USA: Primary prevention involves addressing a broad section of the population – here new parents – as opposed to focusing on ‘at risk’ populations. New mothers and fathers were informed about the risks of shaking babies and given strategies (for example, to deal safely with persistent crying) through written information, educational posters and a video. Staff training included encouraging fathers to participate. Before hospital-discharge, parents (96% of mothers, 76% of fathers) signed a ‘commitment statement’ acknowledging receipt and understanding of the information. Rates of abusive head injuries in the first three years of children’s lives almost halved over the five-year-study-period. Signing the commitment statement seems to have been particularly effective in instilling knowledge: 92% recalled it 7 months later; 98% remembered the leaflets. Only 23% remembered the video, which may not have been shown to all participants.

REMOVING AN ABUSIVE FATHER FROM THE FAMILY PROVIDES ONLY A PARTIAL SOLUTION: abusers continue their abuse with new partners and continue to father and stepfather other children. When an abusive man leaves a family, he normally continues to interact with between 6-10 children or step-children. There is evidence that, for some men, receiving consequences for their abusive behaviours and focusing on their role as fathers can act as powerful motivators to change their behaviour. HOLDING MEN WHO USE VIOLENCE FULLY RESPONSIBLE FOR THEIR BEHAVIOUR AND ITS EFFECT ON THEIR CHILDREN will produce better outcomes for the whole family.

THE INVOLVEMENT OF A FATHER IN THE LIFE OF A FAMILY is associated with lower levels of child neglect, even in families that face other serious challenges, such as unemployment and poverty. This is especially important in disadvantaged families, where children suffer more from a poor relationship with their father, and benefit more from a positive one.

BELOW ENGAGEMENT WITH FATHERS AND FATHER-FIGURES IN FAMILIES WHERE CHILDREN ARE AT RISK is likely to result in better risk assessment, reduced burden on mothers, enhanced resources for the care of children and better risk management – leading to reduction of harm. It is both unfair and impractical to focus attention on the mother and make her solely responsible for keeping her children safe.

TO MAKE THE MOST OF FATHERS PROFESSIONALS NEED TO REMEMBER . . .
Fathers often feel that family and children’s services are not for them, so . . .
> Keep pursuing them if at first they don’t engage. Your persistence helps affirm their value and shows you mean business.

> Recognise these men as vulnerable, as you would women, and approach them from a strengths-based perspective.

Even fathers who behave very negatively may hold vital information about their children, so . . .
> Assess each man who is of significance to a child as a resource as well as a risk – and listen carefully to what they have to say.

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Making the most of fathers to...
Support children’s early learning

Young children do better when BOTH parents support their early learning. And in some cases fathers’ influence is greater than mothers’ . . .

PARENTING STYLE: In a sample of African American families, fathers’ authoritarian parenting style (rigid and bossy) was more influential than mothers’, and was linked with poorer vocabulary, listening, reading and other skills in their children.

LANGUAGE: Five-year-olds with two supportive parents score higher on language development than those with one or no supportive parents.

INTEREST IN BOOKS: Frequency of fathers’ reading to 1-2 year olds is linked with their greater interest in books later in life; and time spent by fathers in reading to very young children is the strategy most consistently associated with their emergent literacy outcomes.

FATHERS’ AND MOTHERS’ OWN EDUCATION AND SKILLS: Better educated fathers, like better educated mothers, have a more positive impact on their children’s early learning. Like mothers, fathers can be motivated to engage in further learning when they understand the benefits to their children.

ATTACHMENT SECURITY is associated with superior functioning in young children – and young children with secure attachments to both parents do better than children who are securely attached to only one parent.

HOME LITERACY: When addressing literacy in the home, it’s important to work with both parents, since both fathers’ and mothers’ participation in home literacy activities is connected with children’s progress.

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THEY DO IT:
A case study approach explored the effects of a family-environment literacy intervention with 25 fathers and their 5-year-old children. The findings indicated that the fathers promoted their children’s literacy development when they learned literacy strategies and activities in the program. A ‘dose effect’ also seems to be important: a ‘Head Start’ intervention with fathers of 3-5 year olds found the more the fathers participated in the program and the more the fathers’ ‘play behaviour’ with their children improved, the greater the improvement in their children’s ‘academic readiness’ skills.

To download other ‘Bringing fathers in’ resources and access relevant links and references, go to: www.fatherhoodinstitute.org/2014/bringing-fathers-in-resources-for-advocates-practitioners-and-researchers/
Why paternity leave matters for young children

**Children do better and are safer**

Swedish babies whose fathers take paternity leave are much more likely to be breastfed. Benefits include fewer infections.

Fathers’ leave-taking (especially of 2+ weeks) is associated with more involvement in childcare. This is linked to better outcomes for children.

Australian children whose fathers take longer-than-average leave perform better on IQ-type tests and are better prepared to start school. Increasing leave for mothers beyond 3-4 months does not, on average, result in improved cognitive outcomes for children.

In Norway, when fathers are better-educated than their partners and take longer-than-average leave, girls do better in school.

In Sweden, an increase in fathers’ share of parental leave countrywide over time was paralleled by a downward trend in children’s injury rates (age 0-4 years).

In the UK, when fathers did not take paternity leave, their three-year-olds were more likely to have developmental problems.

**Fathers take on more childcare and are more family-oriented**

British fathers who take at least two weeks leave around the birth of their children are more involved in their children’s lives later on than fathers who took less leave.

Israeli and US fathers who take longer leave remain more focused on and supportive of their infants, and place higher value on family life.

Australian, Danish, UK & US fathers who take leave are more involved in feeding their babies, changing nappies, getting up in the night, bathing and reading to their children etc. afterwards. And leave-taking—Australian—fathers are more likely to care for their babies by themselves on the weekend.

In Sweden, fathers who take more leave are most satisfied with interactions with their children, and tend to work shorter hours than other fathers, once they return to work.

**Fathers live longer**

Swedish fathers who took paternity leave in the late 1970s have had a 18% lower risk of alcohol-related care and/or death than other fathers and a 16% overall reduced risk of early death.

**Mothers are happier, healthier and earn more**

When Norwegian fathers take longer leave, mothers’ sickness-related work absences are reduced by 5–10% from an average level of 20%.

In France, when paternity leave results in greater father-involvement, new mothers are less likely to be depressed. Each additional month of parental leave taken by a father increases the mother’s earnings by 6.7%.

**Parents are happier together and share housework**

Swedish couples are 30% less likely to separate if the father took more than two weeks’ leave.

Norwegian families entitled to four weeks leave specially reserved for fathers experience an 11% reduction in conflict over household tasks and are 50% more likely to share the washing of clothes equally.

Swedish fathers who took longer than average leave when their children were small, stay more involved in their lives after separation and divorce.

**They do it:**

Between 1976 and 2006 paternity leave campaigns in Sweden featured men performing and talking about care work, in order to challenge traditional ideas of men and masculinity. However, because men were positioned as secondary rather than as primary parents, the campaigns undercut - rather than supported - a radical vision of gender equality. The early 2000s, however, saw a shift in the way fatherhood was represented in the campaigns. In contrast to earlier campaigns, men and women were given the same responsibility for parental leave — “Half each!”

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Making the least of fathers: Five common mistakes

**MISTAKE 1**
Using the word ‘parent’: you might believe that’s inclusive, but it’s not.
> ‘Parent’ is commonly heard (and used) to mean ‘mother’. In the UK, when an invitation was addressed ‘Dear parents’ 20% of fathers attended a post-birth home visit. When the wording was changed to ‘Dear mum and dad’ and the hope that both would attend was made clear, 80% of the fathers came.

**MISTAKE 2**
Failing to invite fathers because you assume they ‘won’t turn up’, ‘aren’t uninterested’, ‘aren’t there’ or will be ‘trouble’.
> In the US, midwives supporting teenage mothers and assessing their parenting capacity to be ‘good’ or ‘very good’, judged the babies’ fathers’ parenting capacity to be ‘poor’ – without ever meeting them.

**MISTAKE 3**
Engaging with dads only or mainly through an add-on, separate service.
> Sending dads off to a separate service ‘models’ their exclusion/rejection by mainstream services. Separate services are also vulnerable to cuts when times are hard; and the evidence is clear that whole-agency engagement with fathers as part of mainstream family practice is the only way of reaching substantial numbers – and delivers the greatest benefits to mothers, children and fathers themselves.

**MISTAKE 4**
Blaming fathers when they don’t engage or are dissatisfied with an intervention.
> Perceiving the fathers as ‘the problem’ allows a service to avoid reflecting on their own ways of working. In the US, when a prenatal course was not rated highly by fathers, it was redesigned. Afterwords, fathers gave and received more support, took on more housework, were more likely to ‘reason’ with their partner than enter into arguments, and reported improvements in their relationship.

**MISTAKE 5**
Tolerating fathers’ lack of engagement.
> In the UK, a service for adolescents suffering from mental health problems has very high father/mother participation for no other reason than that the whole team believes in the importance of engaging with the dads and follows them up when they don’t appear.

**THEY SAID IT:**
Involved fathers and father figures can serve a protective role in the lives of at-risk children and can contribute to positive developmental outcomes. The assumption that fathers in such families are absent or unimportant needs to be challenged, as does the stereotype of the men as dangerous, non-nurturing and incompetent carers. Each man’s ability to parent should be assessed without bias, and as standard practice.
Making the most of fathers: Five ‘best practice’ tips

TOP TIP 1
Review policies
- Policies need to specify that ‘fathers’ (not just ‘parents’) must be engaged with, and should state why their participation is important. HR policies and staff contracts may need review, to provide flexible working hours (this will help working mothers, too). Recruitment, supervision and appraisal frameworks will need to address engagement with fathers.

TOP TIP 2
Commit resources
- Although engaging with the whole family ultimately saves money, an initial investment is necessary. Resources must be found early on to review policies and program design, ensure premises are ‘father-friendly,’ re-formulate data collection methods and evaluation frameworks, train staff and allow them more time per case to track down and include fathers and other key family members.

TOP TIP 3
Be systematic
- The only way to ensure engagement with substantial numbers of fathers is for this to be everyone’s business. Whenever a child is registered, the names and contact details of their father (whether co-resident or not) and other significant male (as well as female) carers must be sought and recorded. Then the fathers’ engagement with the service, and any referrals from it, should be recorded and monitored. Whenever a father is not engaged with or he is not included in a referral, reasons should be requested and recorded.

TOP TIP 4
Understand why it’s important
- Researchers, policy makers, practitioners, mothers, father and the wider family need to understand the benefits to the child, of the father accessing a service and/or playing a greater role at home; and the risks to children when fathers and father-figures do not engage or are not engaged with.

TOP TIP 5
Reflect on your own attitudes to, and experiences with, fathers and men – and wider cultural expectations
- We each have our own ‘fatherhood stories’, and cultural messaging relating to men and fathers is powerful. Research, policy and practice can all be coloured by our personal experiences and assumptions. ‘Unpacking’ these is crucial so we can be in control of our own responses.

THEY SAID IT:
We take time preparing expectant fathers so they can adopt an active role during the birth. Prenatal classes are available in the evening and on Sunday afternoons (working mothers come then, too – and parking is easier) and we avoid holding classes during prime time sporting fixtures. This systematic engagement with the dads has led to a reduction in the number of women being admitted to hospital in early labour, as they cope confidently at home with their partner’s support. This has meant cost savings for the hospital and a lot less work for busy midwives. After the birth, visiting times are now 9am till 9pm and we provide refreshments and an allocated toilet for men.

To download other ‘Bringing fathers in’ resources and access relevant links and references, go to: www.fatherhoodinstitute.org/2014/bringing-fathers-in-resources-for-advocates-practitioners-and-researchers/
Ten top tips for attracting fathers to programmes

1. **INVITE FATHERS DIRECTLY**
   - While it can be useful to reach out to fathers via mothers and others, it is important whenever possible directly to invite the father himself. And because it is important for fathers to know that they are truly welcome, if he doesn’t respond it can be good to reach back out to him after a sensitive interval.

2. **INVITE FATHERS TO MAINSTREAM ACTIVITIES** such as baby massages or stay-and-play, child development classes, financial coaching, literacy support, nutrition sessions – whatever you are offering mums. And make sure these are welcoming to parents of both sexes.

3. Make fathers’ engagement **EXPECTED AND IMPORTANT** – right from the start. Put ‘father-facts’ up on notice boards or in parent-newsletters that explain and underline research findings about the importance of fathers to children’s development. Display images of dads – photos, posters, collages, children’s drawings. Whatever it takes to make dads visible.

4. **REGISTER THE FATHER’S NAME AND CONTACT INFORMATION.** Whenever you register a child it is a good opportunity to enter the father’s information into your database. If the father himself didn’t give you his contact details, then this is a great chance to make contact with him and ask if you can keep his details on file. Make sure he understands that you are doing this because you and your agency understand how important fathers are to children.

5. If you **SET UP ‘TASTER’ EVENTS** (such as a ‘dads’ breakfast’) to signal that your agency is interested in fathers, make sure you collect the names and contact details of the fathers who attend. Follow up with them after the event to offer information, issue an invitation to another activity or to ask their opinions or advice on future activities.

6. **REVIEW YOUR SETTING:** how will a father feel walking through the door? Is the place pink or flowery? Are there only women’s magazines set out? Are there positive images of men, as well as women, with children? Does your receptionist understand the importance of fathers in children’s lives? And does she/he feel comfortable talking with men?

7. **ADDRESS LETTERS AND OTHER COMMUNICATIONS TO BOTH PARENTS.** Use their name or, at the very least, use ‘mom and dad’. If you think you need to say ‘Dear Parent’ in case a single parent receives your letter, remember that (a) just because a mother presents herself as a single mother, it doesn’t mean that there isn’t a father involved; (b) if a parent, mom or dad, really is a single parent, they may welcome an opportunity to talk with you about the other parent. In fact, very few ‘single’ parents raise children entirely without support, and you should be open to including others who are also involved in the child’s upbringing.

8. **CONSULT – DON’T ASSUME.** Find out what each father wants and needs, his circumstances and aspirations, and when he is available. Set some session times that fit with the schedules of working mothers and fathers, but don’t assume all fathers can’t come during the day. Many may not have daytime working hours, or formal employment. Others work night shifts.

9. **AVOID THE ‘P’ WORD.** Don’t keep saying or writing ‘parents’. Where you find yourself wanting to use that word, consider first whether you could use ‘mothers and fathers’ or ‘fathers and mothers’ in leaflets, letters or signage. Fathers don’t feel included when you say ‘parents’, although you may mean to be inclusive. They think that when you say ‘parents’ you mean only the mothers (and, very often, you do . . .).

10. **GET MEN INVOLVED.** If you don’t have male staff (please make real efforts to get some!) look for male volunteers. This can include approaching fathers for help in making your setting more comfortable for other dads by regularly putting in an appearance and helping out.

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Created with support from the Bernard van Leer Foundation
Advocating for involved fatherhood: Reflections for advocates

For fathers to play a greater part at home, and for services to engage better with them, policy makers, practitioners and funders (as well as fathers and mothers themselves) need to really believe that involved fatherhood makes a difference. The following arguments, all of which are based in sound research evidence, have been used successfully. Remember that not every argument works with every audience.

- **Teenagers were found to be less likely to get into trouble** with drugs/alcohol, early pregnancy or anti-social behaviour when their fathers had been highly involved with them at age seven.
- **Father-child relationships** - be they positive, negative or lacking – have profound and wide-ranging impacts on children that lasts a lifetime.
- **Parents’ relationships are more stable** when mother and father both commit to supporting their families financially and both are highly involved in the day-to-day care of their children.
- **High educational attainment and social mobility** in young adults are linked with children’s closeness to their fathers when they were in primary school.
- **In separated families, childhood depression** is strongly linked with low-time spent with their non-resident birth-father, and with the child’s perception of lack-of-closeness to him.
- **Disadvantaged children gain even more from a strong father-child relationship.** Parenting skills are learned by both sexes – and given the same exposure and support, fathers learn as quickly as mothers.
- **Children do better in primary school** when their fathers have been highly involved in a wide range of caretaking tasks from when they were very young.
- **Women are not ‘naturally’ better at caring for children than men.** Parenting skills are learned by both sexes – and given the same exposure and support, fathers learn as quickly as mothers.
- **Fathers have enormous impact on mothers.** For example, teenage mothers with positive partner support are more loving towards and accepting of their children and score lower on the Child Abuse Potential scale.
- **Parents’ relationships are more stable** when mother and father both commit to supporting their families financially and both are highly involved in the day-to-day care of their children.
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**They are doing it:**

The MenCare global fatherhood campaign has created short films which illustrate the value of fathers’ spending more time participating in caregiving: [www.men-care.org/</Media/MenCare-Films.aspx](http://www.men-care.org/</Media/MenCare-Films.aspx). The campaign also offers posters that can be adapted to local contexts. The MenCare resources are useful for partner organizations, when launching a local campaign, and for starting the conversation on the importance of fatherhood and caregiving in a community.
# Father-inclusive evaluation: reflections for researchers & program designers

Robust evaluations of father engagement in parenting interventions and the impact on child or family outcomes are undermined by the ways in which most programs are designed and delivered: for instance, few disaggregate ‘father’ or ‘couple’ in their evaluations, being mostly driven by a focus on the mother-child dyad. Here are eight issues that need to be addressed if an evaluation is successfully to determine the relevance and sustainability of a program to ALL parents, to family and individual functioning and to child outcomes.

## Step 1: Understand Why This Is Important
A growing evidence base suggests that (a) many programs that claim effectiveness with ‘parents’ are not, in fact, very effective with fathers; (b) delivering interventions to both parents significantly improves outcomes; and (c) mothers participating alone may fail to ‘cascade’ learning to fathers, especially when their relationship is under strain.

## Step 2: Ensure Commitment of Resources
to recruit significant numbers of fathers into the intervention, monitor their participation and follow them up in evaluation.

## Step 3: Ensure Reach
Is the team running the intervention trained in, and committed to, reaching and engaging all significant caregivers, including fathers and other individuals beyond just mothers? If not, they are unlikely to attract or retain sufficient fathers for gender-disaggregated evaluation to be viable.

## Step 4: Design Your Data Collection
so that information collected from and about ‘parents’ is collected from both mothers and fathers and disaggregated by sex. Identify co-parents among mixed groups of participants.

## Step 5: Process: Recruitment & Attendance
Are both mothers and fathers explicitly informed and individually reminded about the importance of program participation and benefits to children? Is participation of both monitored? Are both followed-up in cases of non-attendance? Are non-participating partners contacted and reasons for non-participation explored – with gender and other father-relevant factors (such as co-residence with child, employment patterns and commitments to children in other households) recorded?

## Step 6: Process: Delivery
Is ‘home-work’ expected of both parents and separately recorded? Is any between-session facilitator-contact made with both parents? Where referrals are appropriate, are male as well as female parents directed to and accepted by relevant health, education and other services?

## Step 7: Impact
Is impact disaggregated by sex-of-parent and by couple vs. individual parent participation? Does this disaggregated impact assessment include equality (outcomes for the most disadvantaged) and prevention and reduction of problematic outcomes related to parenting and family functioning? Are child outcomes in health, education, psychosocial development and/or exposure to violence and maltreatment addressed and disaggregated by sex of child?

## Step 8: Sustainability
Is there commitment to policies, resources, activities and outcomes lasting beyond the program’s timeframe? Is the cost-benefit for children, mothers, fathers, communities and societies demonstrated? Does this include estimation of the cost of failing to engage with fathers/other co-parents? What provision is there for dissemination of findings and replication in other settings?

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**Example 1: Good Practice**
The Irish Research Council requires applicants for funding to submit a written statement demonstrating consideration of gender dimensions in any proposed work, in relation to both men and women.

**Example 2: Bad Practice**
In Australia, a meta-analysis found a large positive effect of a Behavioral Parent Training program (‘Triple P’). However, when effect sizes were calculated separately for mothers and fathers it was found that the program had a significantly greater effect on improving mothers’ parenting practices than fathers’ parenting practices.

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