

FATHER - PATERNITY

Interventions with Fathers

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Introduction

Father involvement in early childhood (EC) programs has increased over the last several decades supported by recent attention on the positive influences of fathers on children.^{1,2} Program initiatives such as Early Head Start, and the fact that the majority of children ages 0 to 5 are enrolled in one or more programs in the U.S. make EC programs an important context for engaging fathers and supporting positive father involvement.³ This chapter will review the different types of EC fatherhood programs and summarize what is known about the effects of these programs on fathers and children.

Problems

Programs serving fathers of young children have grown in response to two needs : (1) mothers are more likely to be employed outside of the home, thus placing demands on fathers to become increasingly involved in child care and child rearing, and (2) a growing number of biological fathers do not reside with their children and face significant challenges with being actively involved in their children's lives. Positive father involvement can be a protective factor² and promote child well-being in a number of ways.^{4,5} The EC years are a critical period for building fathers' capacity to form secure attachments⁶ promote social and emotional development, and influence school readiness and success.³

Research Context

Programs for fathers of young children have developed to address many different populations and needs⁷ which lead to multiple goals and possible pathways to building fathers' capacity to influence their children. Although programs have proliferated to address the needs of fathers and families, there is also a need to evaluate their effectiveness in helping fathers become better parents and better partners.⁸ Federal and state policy makers have placed increasing demands on programs to evaluate the effects these programs have on fathers and families and whether they are worth investing public dollars.⁹

Key Research Questions

A key research question is what types of programs are most effective in helping fathers and their families. For example, researchers have raised the question of whether coparenting interventions (i.e., programs that address the mother-father relationship as it pertains to raising children)¹⁰ are more effective than parenting education programs in assisting low income, unmarried fathers to maintain connections to their young children.¹¹ Another practical research question is: What program format is most effective in attracting fathers? Berwick & Bellotti¹² reviewed father participation levels in different activities in Head Start programs as one approach to answering this question. Another key research question is timing of program intervention. For example, are perinatal services to non-resident fathers (e.g., parenting classes before or shortly after the child's birth) more effective than providing parenting services later during the EC period in helping fathers to stay involved and form close bonds with their children? A final key question is what dosage is optimal for meeting program goals for fathers. This question also begins to address costs and benefits of programs. Programs focused on low-income unmarried fathers may be very costly when case management is a necessary component but the benefits may also be higher than a short-term parent education program.

Recent Research Results

Research results can be organized into two types of fatherhood interventions: primary and secondary prevention programs. Primary prevention programs help fathers to develop healthy parenting skills and to form close relationships with their children before there are problems with the father-child relationship. Secondary prevention programs target fathers and families where children are at risk for future problems due to family issues, developmental challenges or signs of significant behaviour/emotional problems.

Primary prevention interventions with fathers of young children whose partners are involved in home visitation services (i.e., programs that teach parenting skills and provide support to fathers in their own homes) have become increasingly popular in the U. S.¹³ To date, only descriptive studies have been conducted of these programs. For example, in their study of 64 families, Ferguson and Vanderpool¹⁴ found that fathers' average total risk factors were lower at the end of the home visitation program than at the beginning of the program. Without a control or comparison group, it is not possible to state that this program was definitively associated with lower risk for fathers. There are also universal access programs related to EC programs that can serve as child abuse prevention and may also promote positive social and emotional development, early literacy, and school readiness.^{6,15}

Primary prevention fatherhood programs are now common in Head Start centers throughout the U.S., but few have been subjected to outcome studies. The Head Start and Early Head Start Programs are national programs that serve low income children ages 0 to 5 years and their families. Fagan and Iglesias¹⁶ explored the effects of Head Start fathers' participation in a program that included three components: classroom volunteering, attendance at organized fun activities, and a monthly support group. Fathers in the intervention group showed significantly greater gains in direct interaction and support for learning activities with children at home than the comparison group of fathers, but only if the fathers were at least moderately involved in the program. In another study, fathers with children enrolled in Early Head Start employed significantly more complex social play interactions with their 24-month-olds than did fathers with children in a control group.¹⁷ These studies suggest possible benefits to fathers who become involved in Head Start, but more studies are needed to replicate these findings and to demonstrate how fathers and children are affected by participation.

A small number of secondary prevention programs for fathers of young children have been conducted and evaluated.¹⁸ For example, Parent-Child Interaction Therapy (PCIT), a short-term, evidence-based, training intervention for parents dealing with preschool children who display behavioural problems was evaluated in the Netherlands using a quasi-experimental design.¹⁹ The results showed a large effect on fathers' reports of child behaviour problems at the completion of the intervention. More research is needed before conclusions can be made about the efficacy of these programs.

Magill-Evans, Harrison, Rempel, & Slater²⁰ conducted a review of 12 studies conducted between 1983-2003 on interventions with fathers of young children (0-5). The interventions included a

variety of programs from health care interventions (kangaroo care, infant massage) to parent discussion and training groups. The studies had to include a pretest and post-test design or the use of a control group. The programs that were identified as having promise for implementation were kangaroo care, infant message, guided observation of child behaviour with modelling and parent-child interaction time along with parent group discussion/support. The conclusions also asserted that dosage is important and that multiple exposures are more likely to be effective.

Research Gaps

There seems to be a general consensus that more rigorous research of different types of interventions would add to our knowledge about which programs for fathers of young children would be most effective. Some additional questions emerge about the use of theory to guide intervention design. What are the theoretical models that can guide research – Social Capital and Fathers, Attachment Theory, Parent Skills Training, Behavior Management, Family Systems and co-parenting dynamics, and possibly Neuroscience and the role of hormones. How do these match different populations and goals for fathers and children? How do we compare the efficacy and value of programs with different goals and outcome measures?

The background of the practitioner (education, training, and experience) also is important to study.^{7,12} Most evidenced-based programs used credentialed and experienced practitioners to deliver the original program. This raises concerns about how to bring these programs “to scale” without the same level of staff preparation and experience.

Conclusions

- EC (0-5) is a critical period for family formation.²¹
- The primary focus for programs during the EC years should combine both co-parenting relationship goals and parenting skills for fathers to address positive father involvement.¹⁰
- For some target groups (teen and young unmarried fathers) there will be additional goals related to fathers’ role as breadwinner and related job training and educational goals for fathers.
- Pregnancy and the transition to parenthood is a time when children are most vulnerable and education and support for fathers is limited. This is an area where health care providers, EC and family educators, infant mental health and social service providers can all play a role in engaging fathers in the services that they offer.

- The content and format of programs for fathers will vary depending on the target population and specific goals. There are many different pathways to supporting positive father involvement, father-child, and co-parenting relationships.

Implications for Practice

Two recent reviews of the practice and research literature around fathering interventions include many specific strategies to inform practice.^{7,21} Both of these reviews cover more than programs for fathers of young children (0-5) but are filled with concrete strategies for programs designed to engage fathers.

- Clarity about the theory, logic and goals of a program are essential before evaluation can occur. Practitioners and researchers should collaborate to articulate the program goals and possible ways to assess outcomes.
- Parent-child activity is a valuable way to attract and include fathers in EC settings.¹¹
- Programs for fathers should be tailored to meet the specific needs of fathers and evidenced-based curricula will need to be adapted to fit different populations.
- Dosage of program time should be enough to have an impact without limiting accessibility due to demanding too much time and/or commitment from fathers.
- The male friendliness of the environment including some male staff are critical to successful programs.
- Implementing successful recruitment strategies are a first step in creating effective programs.
- Considerations around staff background and characteristics are important. All staff need support, consultation opportunities and continued professional development opportunities.

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