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Fatherhood Research Bulletin

Bulletin 21

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NEWS from the Australian Fatherhood Research Network

A National Paternal Perinatal Depression Initiative

A new project of the Australian Fatherhood Research Network

The initiative will be launched at the Infant and Early Childhood Social and Emotional Wellbeing Conference to be held in Canberra and at the Men's Health Gathering to be held in Brisbane this year. At each conference the paper described below will be presented as a first step in raising discussion of how to address perinatal depression in fathers and how to support fathers where the mother is depressed.

Investing in fathers mental health for infants' social and emotional wellbeing

By Richard Fletcher, Convenor, Australian Fatherhood Research Network

The aim of this presentation is to present the evidence for, and characteristics of, an effective National Perinatal Depression Initiative targeting fathers. The cost of perinatal depression among mothers and fathers has been estimated at \$433.52 million. In addition, there is a flow-on cost of behavioural and mental health problems in the children of depressed parents. While there is a National Perinatal Depression Initiative to identify and support mothers' who are experiencing, or are at risk of, mental illness no similar initiative exists for fathers. In this presentation the rationale, design and delivery of a parallel initiative to address fathers suffering from perinatal depression, and fathers whose partners are distressed, will be reported. The presentation includes: A summary of recently published, large scale studies demonstrating that infants of depressed fathers are at significant risk of behaviour and emotional problems irrespective of the mothers' mental health; Evidence that existing treatments appear to be as effective with depressed fathers as with depressed mothers; Evidence that fathers have an important role in ameliorating the effects of maternal depression on infants; and, Descriptions of novel strategies to facilitate screening and support of new fathers by linking existing infrastructure mechanisms, such as paid paternity leave, with health service contact and utilising new technologies to inform and mobilise fathers to seek appropriate assistance. Such an initiative, it will be argued, would comprise a valuable investment in the social and emotional wellbeing of future generations.

RESOURCES ON THE WEB

Infant Mental Health Journal: Special Issue on Very Young Children and Their Fathers

The proposed special issue of IMHJ will highlight new trends in the study of fathers and early development and is particularly concerned with special populations and emerging areas of fathering research including studies of military families, family systems/triadic interactions, incarcerated fathers and fathering at re-entry, co-parenting and co-constructed parenting systems, and risks and resilience in the father-child relationship. This special issue will be devoted to advancing theory, research, and clinical practice with young children and their fathers across cultural and ecological contexts. Of highest interest are papers that use new methods or measures to study fathers or focus on underrepresented ethnoracial groups and discuss pertinent issues related to fathering in these families. Papers are invited that examine any aspect of theory or clinical practice with fathers and young children, though original empirical research will be prioritized.

For further information, please contact Dr. Erika L. Bocknek at Erika.Bocknek@wayne.edu.

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RESOURCES ON THE WEB

All manuscripts will be subject to peer review in order to be accepted for publication. The deadline for manuscript submission is February 3, 2014.

Manuscripts should be submitted via the ScholarOne manuscript submission site only (<http://mc.manuscriptcentral.com/imhj>).

Please see the Infant Mental Health Journal website ([http://onlinelibrary.wiley.com/journal/10.1002/\(ISSN\)1097-0355](http://onlinelibrary.wiley.com/journal/10.1002/(ISSN)1097-0355)) for complete author guidelines and the link to the manuscript submission site.

SPECIAL ISSUE OF CLINICAL PSYCHOLOGIST ON PARENT MENTAL HEALTH AND WELLBEING

Guest Editor: Rebecca Giallo

This special issue of *Clinical Psychologist* will focus on the mental health and wellbeing of mothers and fathers across the life span and in a broad range of contexts. It will showcase a review of the literature in the area and recent research findings that will be of interest and relevance of psychologists and other mental health professionals working with parents in a broad range of clinical and health settings.

Relevant papers might include, but are not limited to:

- ☐ The prevalence and course of mental health and wellbeing difficulties of parents across the lifespan
- ☐ The mental health and wellbeing experiences of parents from vulnerable backgrounds
- ☐ Factors associated with parents' mental health and wellbeing difficulties
- ☐ Impact of parent mental health and wellbeing difficulties on daily functioning, couple relationships, parenting, partners and children
- ☐ Interventions designed to address parent mental health and wellbeing difficulties
- ☐ Reviews of the literature related to the topic area
- ☐ Review of a book related to the topic area

Research reports will be approximately 6000 words (including references, tables and figures). Please refer to Clinical Psychologist Author Guidelines for additional information: [http://onlinelibrary.wiley.com/journal/10.1111/\(ISSN\)1742-9552/homepage/ForAuthors.html](http://onlinelibrary.wiley.com/journal/10.1111/(ISSN)1742-9552/homepage/ForAuthors.html)

Proposed Timelines

Mid April, 2014 Papers due, May-October, 2014 Peer review process and revisions, November, 2014 Notification of acceptance, March, 2015 Special issue due for publication

RESOURCES ON THE WEB

FATHER-INCLUSIVE POLICY

FRB comment: *Father-inclusive government policy does not simply apply to legislation about fathering. It applies to standard operations of government that are carried out by many layers of departments and the services that they fund. In some areas of policy a slow change to value fathers (male caring) is apparent. Caring for children, for example, has been characterized in the past as an area men try to avoid. However the recent publication by the Workplace Gender Equality Agency, on flexible working arrangements argues strongly that flexible working arrangements should be implemented for male carers. This may seem like a small shift in approach but to have a government agency recognizing and supporting men's wish to be 'active and engaged fathers' is significant. It is also important to note the agency was formerly the Equal Opportunity for Women in the Workplace Agency. It seems likely that the change in name reflects a broadening of the approach to families to see fathers as important contributors to the care of children rather than simply an economic provider and a barrier to women's employment opportunities.*



Engaging men in flexible working arrangements

Perspective Paper

Engaging men in flexible working arrangements

Research shows that women, especially those with caring responsibilities, are more likely than men to both request and access flexible work. As a result, it is often assumed that flexible work is more relevant to women. Organisational practices are often developed with this perspective in mind. However, workforce demographics and family models have changed and this has led to increased work/family conflict for men. Many men do not conform to the ideal 'full-time' worker model and instead have a range of priorities and aspirations, e.g. to be active and engaged fathers. Research also shows that workplace flexibility is a key driver of employment decisions and job performance for both women and men, including young men, male managers, men approaching retirement and especially younger fathers. Given the above, having greater access to flexible work will enable men to increase their engagement in caregiving and household work, which in turn will help to facilitate gender equality at work. When couples share caring and domestic tasks more equitably, women who have traditionally undertaken the majority of these responsibilities are better positioned to access quality employment opportunities. Yet it is a rare organisation indeed that has focussed on gender equality in caring or on the critical role that men accessing flexible work might play in this.

The report is available at:

http://www.wgea.gov.au/sites/default/files/20130829_PP_engaging_men_flex_work_2.pdf

RESOURCES ON THE WEB

THE AUSTRALIAN BUREAU OF STATISTICS CELEBRATES FATHER'S DAY

MEDIA RELEASE 30 August 2013 Embargoed: 11.30 am Canberra Time 153/2013

Father's Day 2013: It's official - dads aren't getting any younger!

We love our Aussie dads, so in celebration of Father's Day this Sunday the Australian Bureau of Statistics (ABS) has gathered some facts about the favourite men in our lives. The median age of our dads who had a child in 2011 was 33 years, compared to just over 32 years in 2001. Our latest Census data shows that there were more than 2.5 million couple families with children, and over 12,000 of these families had six or more kids. That's a lot of socks for dad. We also found that there were almost 160,000 single male parents, and that just under 700 children were living in male same-sex couple families. More than 90% of dads with kids under 15 years living with them had jobs in 2012-13 and most worked full-time. Those dads who were employed full-time spent about 41 hours per week at work. But dads were also busy after work, with 46% of dads with kids aged up to 17 years volunteering time to help an organisation or group, with 59% of the volunteers helping with sporting or other physical recreation activities. Dads spent almost four hours a day caring for children in 2006. Dads also work around the house, with those with full-time jobs in 2006 spending around 80 minutes a day on domestic work, dads with part-time jobs worked for over two hours a day around the house, and dads not employed spent three hours per day on domestic activities. Of the 366,000 dads who had children living elsewhere with another parent in 2009-10, 22% had their child stay overnight with them at least once a week and a further 27% had their child stay overnight with them at least once a month.

<http://www.abs.gov.au/AUSSTATS/abs@.nsf/>

[mediareleasesbyReleaseDate/65739D1F35984057CA257B66001BE136](http://www.abs.gov.au/AUSSTATS/abs@.nsf/mediareleasesbyReleaseDate/65739D1F35984057CA257B66001BE136)



A USEFUL RESEARCH SUMMARY

FRB comment: Finding useful summaries of the research on father-inclusion is often difficult and research needs to be up to date. Western Australia's fathering project have compiled this easy-to-read literature review of key areas of father's influence on children.

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RESOURCES ON THE WEB



HOW FATHERS AND FATHER FIGURES CAN SHAPE CHILD HEALTH AND WELLBEING

Introduction

We shouldn't underestimate the vast importance of fathers in children's lives, not only because children need and love their dads', but also because of the significant impact that fathers have on the social, cognitive, emotional and physical well-being of children from infancy to adolescence and with lasting influences into their adult life.

This summary of evidence is based on a review of literature and research published primarily in the last 10 years. As there is a vast volume of research relating to parenting and children more generally, the review focused on evidence relating specifically to the influence of fathers and father figures.

While there is a growing body of evidence about the role of fathers in children's lives, there are also knowledge gaps, and the quality of evidence varies. Although a concerted effort has been made to capture evidence about the positive influences of fathers on child development and wellbeing, it is pertinent to note that studies to date have more often focused on the negative impacts of poor or absent fathering on children.

Quite a number of studies have investigated very specific subsets of fathers (such as incarcerated fathers or those with serious substance addiction issues), but for the purpose of this overview, we have primarily focused on evidence that is applicable to general populations.

<http://thefatheringproject.org/wp-content/uploads/2013/08/How-fathers-and-father-figures-can-shape-child-health-and-wellbeing-Wood-Lambin-UWA-2013.pdf>

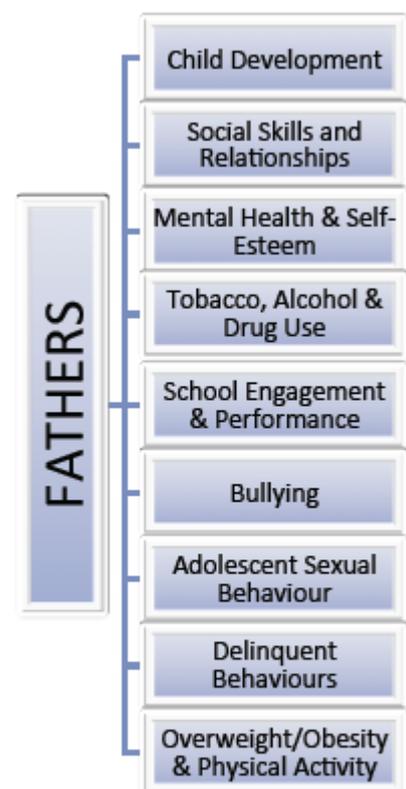


Figure 1: Key Evidence Themes

RESOURCES ON THE WEB

A SURVEY OF UK PRACTITIONERS



Working with fathers – what’s going on out there?

By Jonathan Scourfield

A web-based survey of practitioners was set up in Autumn 2012, to build up a description of the work being done with fathers in the UK to improve children’s well-being. Contact was made with practitioners through local authority service managers and the Fatherhood Institute email list, with both interventions specifically for fathers and services for both parents being targeted. Two hundred and twenty-one responses were received from 53% of local authorities.

Most responses (63%) were from universal services and only 8% came from services for fathers with complex needs. The most common organisational setting (42%) was Sure Start Children’s Centres (England) or their equivalent in other nations. Just under a quarter of respondents were from the voluntary sector and a similar proportion were from local authority social care services. The other 22% were made up of respondents from education services, the health service and criminal justice, with just 1% of respondents coming from the private sector.

The most common type of service (63%) was structured parenting classes, 85% of which were provided for both parents. Next most common (62%) were practical activities for parents and children (including play). Unstructured support groups were provided by 47% of respondents. Advice on employment and benefits was provided by 39% and legal advice by 20%.

Most of the interventions specifically for fathers seemed to be unique services devised by committed local practitioners. Some interventions were named several times, however, and these were mostly services for both parents. Seventeen per cent of all respondents were using the Triple P parenting programme and 11% were using Incredible Years. The only intervention for fathers specifically which was mentioned more than twice was Caring Dads (four responses or 2% of sample).

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RESOURCES ON THE WEB

Numbers of fathers engaged are relatively low. The median annual number of fathers attending across all services was ten. In services for both parents, the median proportion of fathers attending was 30%, which is an improvement of previous estimates, probably because respondents to this survey are especially committed to involving fathers.

Responses on ideological and theoretical approaches suggested that overt gender politics play only a small part, with strong statements on feminist and fathers' rights approaches being the least popular rationales for work with fathers. The dominant views of practitioners were in line with mainstream approaches to parenting support. Cognitive and behavioural approaches were the most popular.

http://workingwithfathers.weebly.com/uploads/1/2/2/4/12249919/survey_report_for_website.pdf

PROGRAMS AND FATHER INCLUSIVE PRACTICE

MAKING TRIPLE P MORE FATHER-FRIENDLY

FRB comment : *Like many parenting programs that were designed with mothers in mind the widely promoted Triple P Parenting Program has struggled to recruit and engage fathers. A meta-analysis of research studies on Triple published in 2011 found that out of the 4959 parents recruited into these studies only 983 (20%) were fathers. In one of the largest Australian studies only 16 fathers were recruited compared to 1,610 mothers. See <http://aracyfatherhoodresearchnetwork.tumblr.com/post/14095609929/parenting-programs> . So it's encouraging that practitioners delivering Triple P are adapting the program to be more inclusive of fathers. The description below was provided by an experienced parenting program facilitator at the Family Action Centre in Newcastle.*

Recruiting the dads

If we have a male facilitator available for the group, we make sure to announce that fact 'big and bold' on the flyer for other males to see. We also list that worker as the contact person for queries or to register. Wording on the program flyers lists that mothers, fathers, grandparents, foster carers and other carers are welcome.

During the intake stage, workers ask anyone who registers about their partner (if they have one) and whether they will be attending. Questions in the pre-group/pre-seminar survey are asked to both parents individually to gauge their goals for the family, parenting strategies they've already tried and what works for them.

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PROGRAMS AND FATHER INCLUSIVE PRACTICE

During the sessions, we make a real effort to memorise ages/ gender/ names/ circumstances for all the families. This we found to be especially helpful for males who sound unsure on the phone but who then appreciate the specially tailored examples within the presentation that suit their family situations. We also include general examples around children behaving well in a number of settings such as camping or at a sports game. Having a variety of materials to read through and look at, as well as food and hot drinks available helps to make it less awkward for anyone who shows up early.

Strategies we use during the sessions particularly to engage males

Phoning each participant after the first session of a seminar or group to see how they found it, how they've felt in the days since they were there, and to give them an opportunity for feedback. We find it is this phone contact that often opens up a whole new level of disclosure for parents and usually having this better insight means we can better support them to make changes at home.

We start the seminars by asking participants to consider two things they most want to get out of attending, write them on a post-it, and hand it in. The post-its get put up on a butchers paper and we let everyone know we'll try and address them in the sessions. In the final session we invite them to take that Post-It note back and let us know if they feel their requests were covered or if they still need more ideas/strategies/motivation. This practical type of 'check in' at the start of the sessions is much more effective than abstract activities based around feelings.

We have changed some of the group discussion/partner discussion exercises so that there is more moving around the room and working on butchers paper in different area.

There is a DVD segment in week #1 that (while really useful for most participants) is prone to bursting the odd parent's guilt gland and having them explode in tears. Twice I've had males look very uncomfortable at being in a circle with a blubbering mum. We've learnt to really strongly state before we show that segment that you would have to be a well programmed robot to not do some of the things that you'll see on the DVD and that it is shown for the purpose of identifying what you would like to change.

We hand out a listing of outing ideas across Newcastle. It talks about places and the possible reason that you might choose to go on an outing there (eg Gregson Park for teaching a child to ride a bike). A number of Dads have enjoyed having something that they can quickly look at and choose somewhere new to take their kids for some fun.

We are mindful that not all participants have their children living with them full-time. We try and include examples that might be relevant such as: transitioning a child so they feel secure moving between one household and another, the benefits of talking with ex-partners about your children's wellbeing.

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PROGRAMS AND FATHER INCLUSIVE PRACTICE

Finally, in Triple P group program participants receive three follow-up phone calls. We have had real success in the latest group we ran with asking that any couples in the group sign-up with a different facilitator for their phone calls. It has meant that each individual gets to bounce around their situation with a different facilitator and it stops the phenomenon of one parent (often the mum) doing all the talking and the other one not having much to say at all because of feeling like the facilitator knows the situation (even if from the other partner's view) already. It also means the co-facilitators can talk about that family's situation and how they can best support them.

Further information: Mel Burgess, Parenting Program Facilitator, The Family Action Centre, University of Newcastle. 02 4921 7323 (Tue and Wed). To contact the Family Action Centre: <http://www.newcastle.edu.au/research-and-innovation/centre/fac/contact-us>

PROMOTING MEN'S CARING ROLES

***FRB comment:** If caring for children is seen as women's work then including fathers in service delivery is difficult. Attempts to change these perceptions and assumptions are an important part of father-inclusive practice.*

Engaging Men in Moreton Bay, QLD: Male Volunteering and Inclusiveness in Community Services By Chris Mundy

A needs analysis of men in the Moreton Bay Region in 2009 highlighted that community services would be more attractive to male clientele if there were more men involved in the provision of services to men. Based on a male volunteer project in 2005 by the Family Action Centre, NSW, the "Engaging Men in Moreton Bay" project implemented male volunteer recruitment strategies and workshops designed to increase the number of men volunteering in Community Services in order to make the services more attractive to male clientele. Discussions about the challenges for men being involved in volunteering for community services were also undertaken.

Community Services that utilised a number of recruitment strategies such as referrals from other agencies and print media observed an increase in male volunteers and male clientele. Community Service Organisations that only utilised less feminine positions descriptions and word of mouth observed no increase in male volunteers and male clientele. Feedback identified numerous challenges for men being involved in Community Service organisations and a promotional video clip was developed for organisations to use as an ongoing male recruitment tool.

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PROGRAMS AND FATHER INCLUSIVE PRACTICE

Project effectiveness - Male Volunteer Recruitment Drive:

The Pine Rivers Neighbourhood Centre male volunteer enquiries increased from an average of 21 per month during January-February 2013 to an average of 48 per month between March-June 2013 during the project period. Number of men conducting volunteer work increased from 49 in March 2013 to 56 in April to 61 in June 2013. However the levels of female volunteers also dramatically increased, with 46 extra female volunteers recruited throughout the period.

Bribie Island Neighbourhood Centre observed an instant increase in enquiries from male volunteers after a story and photo on the project in a local newspaper. Male volunteers increased from 26% prior to 33% after the release. Centacare Community Services Caboolture received minimal male volunteer enquiries in January to April, however this increased to 5 in May and 6 in June. Centacare identified referrals from Job Service Agencies and Centrelink as an additional strategy used and 1 Job Service Agency stated the project made them more aware of the resources available for their clients.

Other project participants that responded via the online survey observed no or marginal increases in male volunteering. These participants only used word of mouth or removed feminine jargon from position descriptions as a recruitment strategy.

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PROGRAMS AND FATHER INCLUSIVE PRACTICE

Example: Male Orientated Volunteer Job Advertisement

Job Category	Working With <input type="text" value="Working With"/>	
Job Title	Mates & Families Volunteer *	
Time(s) required	<input type="text" value="1 to 2 hrs between 9am-4:30pm weekdays"/> <i>Male clients and volunteers more available outside of work hours</i>	
Days Required	<input checked="" type="checkbox"/> Mon <input checked="" type="checkbox"/> Tue <input checked="" type="checkbox"/> Wed <input checked="" type="checkbox"/> Thu <input checked="" type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun	
Job Details	<p><i>We are seeking men to be "Mates and Families" volunteers in our Family Support program. We recognise that men bring unique strengths to this role as fathers and grandfathers. "Mates and Families" volunteers will visit families with children to help educate and guide parents in the areas of positive discipline, behaviour, routine, development, communication and emotional management.</i></p>	
Recruitment Start Date	<input type="text" value="1/01/2010"/> (This is also the date the job will appear on the web)	
Minimum Commitment	<input type="text" value="12 months"/>	Is the job part of an Event ? <input type="checkbox"/>
Job Status	<input type="text" value="On Hold"/>	Is the job part of a project ? <input checked="" type="checkbox"/>

PROGRAMS AND FATHER INCLUSIVE PRACTICE

Skills required for this job (max 250 characters):

Life experience, particularly fathering skills. Practical ideas for household management. Understanding of parenting and child development

Characteristics required for this job (max 250 characters):

Non-judgmental person with good listening skills. Encourage others to solve their problems themselves. Able to communicate in a clear manner. Someone who non-judgmental, gives equal access to all and has a passion to see families thrive using their strengths.

What benefits/skills will the volunteer gain by undertaking this job (max 250 characters):

Groundbreaking opportunity to change community perceptions about men and families. Experience in the community sector. Satisfaction of helping others. Specialised training for men provided as well as regular support.

For further information contact Chris Mundy ChrisM@prnc.org.au

THE FATHER LINKS PROJECT - SOUTH EASTERN SYDNEY

Men-only antenatal discussion sessions commenced in 2000 at St George Hospital, Sydney. Formal evaluation and verbal feedback received from fathers-to-be attending the sessions supported the implementation of the Father Links Project.

The aim of the Father Links Project was to build the capacity of the former South Eastern Sydney Area Health Service to further develop and expand men-only discussion sessions within existing antenatal education programs at The Royal Hospital for Women, Sutherland and St George Hospitals. The Father Links Project aimed to ensure an evidence-based approach to the provision of antenatal education, which affirms the importance of involving fathers as early as possible and recognises the long-term health benefits of early father-infant engagement.

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PROGRAMS AND FATHER INCLUSIVE PRACTICE

The Father Links Project was intended to influence long-term health outcomes, including:

- Improved family relationships and psychosocial functioning
- Increased breastfeeding rates
- Reduced rates of postnatal depression
- A reduction in attachment issues and subsequent behavioural problems in children
- Increased resilience and reduced rates of mental health issues in children

Changes in community attitudes towards childbirth and childcare have seen the role fathers play in families as extremely important. Fathers today are expected to have higher-level involvement with their children and a greater willingness to support their partners. Changing patterns of workforce participation have resulted in an expectation of greater sharing of parental responsibilities. It is well established that fathers play a significant role in supporting their partners in childbirth, encouraging breastfeeding, and make an important contribution to their child's development and long-term psychosocial resilience.

Men are often expected to provide emotional support to their partners, however are offered little or no opportunity to address their own feelings about the impending birth and their new role as a parent. This is particularly the case if men are experiencing feelings such as anxiety about the birth.

Offering fathers-to-be a men-only discussion session within existing antenatal education programs provides a group where they are welcomed and valued for the significant role they play during pregnancy and in their children's lives. The fathers-only session provides a safe space to express a range of feelings about becoming a dad without compromising their partners' need for support.

Feedback from men who previously attended antenatal education programs informed the development of the Father Links Project. The Father Links Project sought expressions of interest from motivated fathers interested in being trained to facilitate the men-only discussion groups within existing antenatal education programs at the Royal Hospital for Women, St George and the Sutherland Hospitals.

The project used local newspapers in promoting the project to the local community and in seeking expressions of interest from fathers in the local area. This proved to be an effective avenue, contributing to the perception of Father Links being a community project. Recruitment of sessional facilitators from nearby communities also ensured minimal travel time to facilitate sessions and firsthand knowledge of service provision in their local area.

The Father Links Project established partnerships with University of Technology Sydney (UTS) School of Midwifery and Good Beginnings Australia (GBA), to evaluate the effectiveness of men-only antenatal discussion groups. This partnership enabled the Father Links Project to draw on the expertise of Paul Prichard, GBA's National Training Director to assist with the delivery of a very high standard training program to the father facilitators.

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PROGRAMS AND FATHER INCLUSIVE PRACTICE

To counteract men's reported perceptions that they feel 'left out' of antenatal programs, the Father Links Project training program emphasised engaging men through group discussion rather than delivering information in a lecture format. Twenty men attended the training resulting in a small pool of skilled and motivated male group facilitators across the South Eastern Sydney area.

Participating mothers-to-be are always very curious to know what the men have discussed. The topics of discussion are driven by the expressed needs of the fathers-to-be and usually include:

- How pregnancy has been until now
- Feelings about birth and how the birth experience may impact on relationships
- Parenting: responsibilities, postnatal depression, taking time off, lifestyle changes, support network, embracing parenthood and sharing responsibilities with partner
- Sleep and settling
- Interacting and communicating with your baby

Thirteen-years on the men-only discussion groups are standard practice of all antenatal education programs offered in the South Eastern Sydney Local Health District (formerly the South Eastern Sydney Area Health Service). The pool of father facilitators has been maintained and the groups continue to be enthusiastically received by participating fathers-to-be as they provide a safe space for men to express, share and debrief a range of feelings about becoming a Dad. Currently the men-only session runs for one hour, however evaluations highlight that some participants suggest a minimum of two hours may be more ample to ensure an adequate forum to discuss issues in becoming a Dad.

A follow on project from the Father's Link Project was the Baby Shed Project (2008 – 2010), which focused on the provision of a men's-only postnatal group for Fathers with infants from birth to eight weeks. Further details of this project can be viewed by the following link <http://www.archi.net.au/resources/delivery/maternity/baby-shed>

The Sutherland and St George Hospitals are currently seeking Expressions of Interest from highly motivated Fathers to be a part of a team to facilitate antenatal discussion sessions with Fathers-to-be. Training will be provided to successful applicants prior to facilitating antenatal sessions.

For further information contact Helen Rogers: Helen.Rogers@sesiahs.health.nsw.gov.au

CONFERENCES

THE 2013 MEN AND VULNERABLE FAMILIES FORUM AT BRISBANE

The National Men's Health Gathering encompasses three events;

The Aboriginal & Torres Strait Islander Male Health Convention, 22 - 23 October 2013
The National Men's Health Conference, 23 - 25 October 2013
Men & Vulnerable Families Forum, 24 - 25 October 2013

The National Men's Health Conference in Brisbane will be the 10th held over the last twenty years. Together with the Aboriginal & Torres Strait Islander Male Health Convention (the 7th) and the Men & Vulnerable Families Forum, these events are the major source of revenue for the AMHF (it does not receive any direct government funding). Successful Gatherings since 2009 have allowed AMHF to employ a part-time administrator and to assist in the establishment of state men's health associations in Victoria and NSW. A scholarship fund has also been established to help indigenous men undertake studies to qualify as male health workers in their communities.

Men & Vulnerable Families Forum, 24 - 25 October 2013

The Men and Vulnerable Families Forum shares and learns together about how community service programs engage men's potential for building resilience in fragile families. The Forum also explores the knowledge, skills and behaviour that workers use to engage effectively with men and the outcomes it achieves.

Themes for the 2013 Forum are:

- Building the evidence base for engaging fathers.
- Effective approaches to engaging men in vulnerable communities.
- Outcome benefits for engaging men in family based programs.
- Engaging dads in school communities.
- Opportunities for shared parenting with changing work arrangements within families.
- Partnership opportunities when implementing whole-of-family approaches.
- Training, recruitment and induction of professionals in the sector to work with men.
- Team Parenting approaches.

ONGOING RESEARCH PROJECTS

Research into fathers, fatherhood and fathering is a rapidly expanding field. This new Bulletin section aims to alert readers to projects that have a major focus on fathers. Rather than reports of single, already published studies this new Bulletin section *Ongoing Research Projects* will offer brief descriptions of multiple, related studies that are in progress.

FATHERING IN A FIFO WORLD

Investigator: Paul M. Pulé PhD.

There is a popular perception that the implications of Fly-in/Fly-out (FIFO) work arrangements are detrimental to the wellbeing of men as workers (Wolfenden 2002, Potts and Potts 2003, Tucak 2003, Mangan 2006, Quartermaine 2006, Wade 2007, Gallagher 2011).

In Western Australia, where the industry employs more than 56,000 people, 79% of all FIFO employees are men (ABS 2007). .Of particular concern for this research project is the lack of data revealing the impact of FIFO on men as authentic fathers – men who are committed, tolerant, supportive and perceptive dads who are solidly connected to their children. The purpose of this research project is to conduct research that supports men in FIFO arrangements to sustain an optimum balance between their FIFO work arrangements and their capacity to father authentically.

Proposed Research

The Fathering Project is currently seeking financial support to employ an experienced researcher. In particular, we are looking to develop a specific Fathering Resource area for FiFo dads on our website.

If this research proposal sparks your interest and you are interested in financial support, <http://thefatheringproject.org/contact-us>

PATERNAL POSTNATAL DEPRESSION

Sheehan D. Fisher, Ph.D. Northwestern University, Feinberg School of Medicine, Department of Psychiatry & Behavioral Sciences

Paternal postnatal depression (PND) is a serious public health issue that is just beginning to be recognized, but from the lens of a field rooted primarily in the mother's perspective. My research agenda aims to integrally include the father perspective in the conceptual framework of PND. I am a researcher and clinician working at Northwestern University in the Department of Psychiatry and Behavioral Health. My initial training was in clinical psychology at the University of Iowa, but I received supplementary training in children/adolescent and couples. I have been involved in researching fathers (as part of a focus on perinatal depression and child outcomes) for 7 years.

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My main objectives are to differentiate 1) the biological and social experiences that contribute to the development of father and mother PND and 2) the mother and father factors that link parental depression to infant/child/adolescent outcomes. Previously, I conducted a study following 199 families over 3 years studying maternal/paternal PND and toddler behaviors as well as future parental depression and conflict. This study (currently under review) confirmed the importance of paternal PND on child behavior. If the dad was depressed during the postpartum period, there was increased likelihood for depression in dads 3 years later, which linked to child internalizing (e.g., sadness, anxiety) and externalizing (e.g., aggression, acting out) behaviors. This project also yielded a validation study of an adapted version of the Edinburgh Postnatal Depression Scale (published in Archives of Women's Mental Health) that showed that if mothers are asked to complete a set of questions about the father's depression then her evaluation is likely to be reflective of the father's experience. The EPDS-P can be a useful screening measure in the maternal-child healthcare system due to the restricted access to fathers that results in undetected paternal depression. I also conducted a 3-phase study where we measured parental depression, family environment (e.g., conflict, parenting), and adolescent outcomes over a 6 month period. Paternal externalizing behaviors (e.g., aggression, substance use) in conjunction with depression were associated with child behavior problems. This finding is congruent with the recent literature on 'male depression' that incorporates externalizing behaviors in the conceptualization of depression to account for the cultural influences that shape the presentation of depression in men. However, previous parental depression/child outcome research has not included this gender-sensitive form of depression. Currently, I am developing a grant proposal to differentiate the biopsychosocial factors that lead to paternal and maternal PND. Historically, the focus on the reproduction-related biological causes of PND has led to a concentration on women and neglected the occurrence and implications of hormone changes in men, virtually ignoring the bio- in the biopsychosocial development of paternal PND. This study will investigate the hormone changes and social experiences that contribute to PND.

Dr Sheehan Fisher can be contacted at: sfisher@nmff.org

RESEARCHING FATHERS OVER 30 YEARS

Extracts from an interview with Dr. Jaipaul Roopnarine, Editor of "Fathering"

Dr. Jaipaul Roopnarine. Dr. Roopnarine is the Jack Reilly Professor of Child and Family Studies, and Director, Reilly Institute for Early Childhood and Provider Education, at Syracuse University. He earned his Ph.D. in Child Development from the University of Wisconsin, Madison, in 1980. Dr. Roopnarine has been researching fatherhood for decades. He has conducted research primarily in the Caribbean and U.S., but also in India and elsewhere. He is editor of the interdisciplinary journal *Fathering*.

He was interviewed for *The Evolving Father* blog by Peter B Gray published by Psychology Today

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In what ways have you seen the study of fatherhood change over the past few decades?

When I first began studying fathers, there was a tremendous push to demonstrate that fathers were viable socialization agents and that they were indeed involved in children's lives. With the exception of Lamb's early research on father-child attachment, many studies focused on levels of involvement in basic care with very little emphasis on childhood outcomes. A major transition has occurred in the last 15 years. There is greater attention to emotional and cognitive caregiving, spousal/partner relationships, ideological beliefs, identity, and context (e.g., neighborhood quality, economic conditions), among other factors, as they influence father-child relationships and childhood development. Additionally, we have developed and tested more sophisticated models of father-child relationships and childhood outcomes (e.g., mediation, moderation, multi-level modeling, and homogeneity in parenting).

You are the editor of the journal "Fathering." From the standpoint of editing this journal, what do you see as some of the most exciting frontiers in the study and practice of fatherhood?

Some areas of inquiry that deserve more research attention across cultures include: stay at home fathers and morally intelligible fathering, father-child relationships among gay fathers, the contributions of social fathers relative to biological fathers and other male caregivers to childhood development, men's health issues and fathering, fathering in extremely difficult circumstances, immigrant fathers and potential changes in their internal working models about parenting and in childrearing practices as they become more established in their new cultural communities, fathering in incarcerated men, changes in fathering in traditional societies, fathering and economic fluctuations, psycho-physiological bases of fathering, theories specific to fathering, and social and economic policies that encourage men to assume greater responsibility for childrearing.

For the full interview see: <http://www.psychologytoday.com/blog/the-evolving-father/201307/q-and-dr-jaipaul-roopnarine-editor-fathering>

MEN ADJUSTING TO FATHERHOOD

Dr. Daniel Singley is a licensed psychologist based in San Diego, California who specializes in men's issues with an emphasis on how men adjust to new fatherhood. His research focuses on the psychological factors involved in becoming a father. Dr. Singley's research is focused on using Bandura's social cognitive theory as a framework to investigate the links among social support, psychopathology, dad's self-efficacy, and partner's "other-efficacy" beliefs and how they related to the couples' experience, subjective well-being, and the father's involvement with his infant.

The current project (see the invitation for the Paternal Involvement with Infants Scale – or PIWIS - online survey below) is based on key theoretical work by Michael Lamb and Joseph Pleck which delineates specific domains of fathers' involvement with their children including positive engagement, indirect care, control, emotional connection, process responsibility, as well as warmth and responsiveness to their child.

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This online survey's subscales map onto these involvement domains, and this study is intended to validate a self-report instrument which assesses the extent to which fathers are involved with their infants. Having access to an easily-administered psychometrically sound means to assess fathers' involvement with their infants would likely help researchers to further our understanding of how paternal involvement impacts dad, mom, and the child in the long run. Similarly, medical and mental health professionals can use this type of assessment in working with fathers experiencing post-partum issues. The next project in this program will involve having fathers of infants in the "fourth trimester" complete a series of assessments (including the PIWIS) reflecting the social cognitive factors listed above in order to flesh out a model of how they interrelate and change during the transition to fatherhood.

MEN ADJUSTING TO FATHERHOOD SURVEY

My team and I would like to invite you to complete an online survey which takes about 15-20 minutes.

The questions ask you about various aspects (e.g., your confidence level, engaging in different types of behaviors with your baby, your life satisfaction, etc.) of your experience as a father of a young baby as well as with your co-parent. We will also ask that you complete a much briefer (5-10 minutes) version of this online survey one month after taking this one. The information you provide us will be used to take a focused look at how you and other new fathers navigate the transition to fatherhood.

There are a couple of conditions which you need to satisfy in order to participate. You need to:

- Have a baby whose age ranges from newborn up to 16 weeks (4 months) old at the time of taking this survey for the first time
- Be co-residing with the baby's other parent (biological or significant other)

The link to the survey is here: <http://zipsurvey.com/LaunchSurvey.aspx?suid=64683&key=8A5C4AA9>

Your responses are 100% confidential – meaning that they won't be shared with anyone for any reason. We will aggregate your responses with those of other new dad participants in order to do statistical analyses, but at no point will individual participants be identified – even the fact that you have participated in this survey is itself confidential information.

As a show of appreciation for your help in participating, after you have completed the second administration one month after you complete the survey, you will be entered into a drawing for a first prize of a Kindle Fire tablet or a financial contribution of \$100 (US) to the charitable organization of your choice.

Thank you very much for your help, and please don't hesitate to let me know any questions or thoughts you might have.

Contact Dr. Daniel Singley dsingley@newdadsclass.com

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Multiple Entry Points For Supporting Father-Inclusive Practice

FRB Comment: Recent papers suggest a number of areas where research could support the engagement of fathers in their children's lives. In many settings we lack knowledge of what fathers do. Although the report below from Redshaw and Henderson in the UK relies on mothers as informants it provides data on father's involvement in the pregnancy and childbirth.

A second fundamental research area to improve father-inclusive practice is father's involvement in parenting programs and interventions. In the US, Wong and colleagues surveyed fathers of Mexican origin to identify the factors that influenced their participation in a family-focused intervention to prevent academic disengagement and mental health problems in their children. In Ireland Ewart-Boyle and colleagues investigated social work practice inhibiting father-inclusion when the stated service goal was to work in partnership with families.

Starting from the other end, two studies report on the benefits of father-inclusion. A group from Leeds Metropolitan University evaluated the benefits of fathers from a deprived area being involved in their child's early learning and Canadian researchers assessed the benefits of involving fathers in a parenting program for child behavior problems.

Finally, two studies report on factors that influence fathers' ability to be engaged with their children, working hours and length of time in foster care.

FATHERS' ENGAGEMENT IN PREGNANCY AND CHILDBIRTH: EVIDENCE FROM A NATIONAL SURVEY

Background: Early involvement of fathers with their children has increased in recent times and this is associated with improved cognitive and socio-emotional development of children. Research in the area of father's engagement with pregnancy and childbirth has mainly focused on white middle-class men and has been mostly qualitative in design. Thus, the aim of this study was to understand who was engaged during pregnancy and childbirth, in what way, and how paternal engagement may influence a woman's uptake of services, her perceptions of care, and maternal outcomes.

Methods: This study involved secondary analysis of data on 4616 women collected in a 2010 national maternity survey of England asking about their experiences of maternity care, health and well-being up to three months after childbirth, and their partners' engagement in pregnancy, labour and post natally. Data were analysed using descriptive statistics, chi-square, binary logistic regression and generalised linear modeling.

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Results: Over 80% of fathers were 'pleased or 'overjoyed' in response to their partner's pregnancy, over half were present for the pregnancy test, for one or more antenatal checks, and almost all were present for ultrasound examinations and for labour. Three-quarters of fathers took paternity leave and, during the postnatal period, most fathers helped with infant care. Paternal engagement was highest in partners of primiparous white women, those living in less deprived areas, and in those whose pregnancy was planned. Greater paternal engagement was positively associated with first contact with health professionals before 12 weeks gestation, having a dating scan, number of antenatal checks, offer and attendance at antenatal classes, and breastfeeding. Paternity leave was also strongly associated with maternal well-being at three months postpartum.

Conclusions: This study demonstrates the considerable socio demographic variation in partner support and engagement. It is important that health professionals recognise that women in some sociodemographic groups may be less supported by their partner and more reliant on staff and that this may have implications for how women access care.

Redshaw, M., & Henderson, J. (2013). Fathers' engagement in pregnancy and childbirth: evidence from a national survey. *BMC pregnancy and childbirth*, 13(1), 70. doi:10.1186/1471-2393-13-70

FATHER ENROLMENT AND PARTICIPATION IN A PARENTING INTERVENTION: PERSONAL AND CONTEXTUAL PREDICTORS

Fathers are an important, though often underrepresented, population in family interventions. Notably, the inclusion of ethnic minority fathers is particularly scarce. An understanding of factors that promote and hinder father participation may suggest strategies by which to increase fathers' presence in studies designed to engage the family unit. The current research examined Mexican origin (MO) fathers' involvement in a family-focused intervention study. Participants included 495 fathers from eligible two-parent MO families with an adolescent child. Individual, familial, and culturally relevant predictors based on father, mother, and/or child report data were collected through pre-test interviews and included in two separate logistic regression analyses that predicted the following: (1) father enrolment in the study and (2) father participation in the intervention. Results indicated that higher levels of maternal education and lower levels of economic stress and interparental conflict were associated with increased father enrolment in the study. Rates of father participation in the intervention were higher among families characterized by lower levels of interparental conflict, economic stress, and Spanish language use. Results highlight the relevancy of the familial and environmental context to MO fathers' research participation decisions. These findings as well as their implications for future research and practice are discussed.

Wong, J. J., Roubinov, D. S., Gonzales, N. A., Dumka, L. E., & Millsap, R. E. (2013). Father Enrollment and Participation in a Parenting Intervention: Personal and Contextual Predictors. *Family Process*, 52(3), 440 - 454.

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SOCIAL WORK AND THE SHADOW FATHER: LESSONS FOR ENGAGING FATHERS IN NORTHERN IRELAND

The legislative framework of social work practice has consistently highlighted the need to work in partnership with parents, with far-reaching implications for families. However, the importance of engaging fathers in social work practice is an issue that has received limited attention within academic debate and research. A research study undertaken across six family centres, investigated paternal involvement in family centre social work in Northern Ireland. The study involved 46 semi-structured interviews with social workers, fathers and mothers. This paper presents the views of 22 social workers on the barriers to paternal involvement in family centre interventions. A range of factors were identified which served to inhibit or promote engagement of fathers. There were substantially more deterrents than promoters, a clear indicator of the problematic nature of paternal involvement. The findings highlight that both attitudes and practices of social workers influence the engagement of fathers. Recommendations drawn from the findings are presented for the development of father – inclusive social work practices and research.

Ewart-Boyle, S., Manktelow, R., & McColgan, M. (2013). Social work and the shadow father: lessons for engaging fathers in Northern Ireland. *Child & Family Social Work*. DOI: 10.1111/cfs.12096

'I AM READING TO HER AND SHE LOVES IT': BENEFITS OF ENGAGING FATHERS FROM DISADVANTAGED AREAS IN THEIR CHILDREN'S EARLY LEARNING TRANSITIONS

Findings presented here relate to the evaluation of a one-year father-inclusion project which took place in an area of multiple deprivation in the North of England. The project's goal was to engage fathers and male carers in their children's transition from an early years setting to a reception class and to maintain that involvement in the mainstream school setting. The project was successful in engaging men, recording 76 male attendances, 19 of which were recorded at school-based activities after the transition. Key benefits identified by fathers engaged in the project were closer relationships with their children and greater involvement in their play and learning. Children were very positive about their fathers' involvement and school staff identified a better rapport with fathers following the project.

Potter, C., Walker, G., & Keen, B. (2013). 'I am reading to her and she loves it': benefits of engaging fathers from disadvantaged areas in their children's early learning transitions. *Early Years*, 33(1), 74-89

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MOMS AND DADS COUNT IN A PREVENTION PROGRAM FOR KINDERGARTEN CHILDREN WITH BEHAVIOR PROBLEMS

The study measured the added effect of father participation in the parent-training component of a violence and school dropout prevention program on quality of parenting practices (from self-report and direct observation) and level of kindergarten child behavior problem (CBP; from teacher and mother report). Pre- and post-test evaluations were conducted with three groups (a) MF: both mother and father participating (n = 37); (b) M: mother only participating (n = 13); and (c) C: control group (n = 18 mother-father pairs). Maternal parenting practices improved in the MF group but deteriorated in the M and C groups, whereas paternal parenting practices remained unchanged in the MF group but deteriorated in the C group. Overall, father participation had no short-term effect on CBPs; the children in all three groups improved their behavior. Results confirm the importance of stepping up efforts to implicate both parents in prevention programs for disruptive children.

Besnard, T., Verlaan, P., Vitaro, F., Capuano, F., & Poulin, F. (2013). Moms and Dads Count in a Prevention Program for Kindergarten Children With Behavior Problems. *Canadian Journal of School Psychology, 28*(2), 219-238.

MOTHERS' AND FATHERS' WORK HOURS, CHILD GENDER, AND BEHAVIOR IN MIDDLE CHILDHOOD

This study examined the association between typical parental work hours (including non-employed parents) and children's behaviour in two-parent heterosexual families. Child behavior was measured by the Child Behavior Checklist (CBCL) at ages 5, 8, and 10 in the Western Australian Pregnancy Cohort (Raine) Study (N=4,201 child-year observations). Compared to those whose fathers worked fewer hours per week, children whose fathers worked 55 hours or more per week had significantly higher levels of externalizing behavior. This association was not explained by father – child time during the week, poorer family functioning, or over reactive parenting practice. Further, when stratifying the analysis by child gender, this association appeared to exist only in boys. Mothers' work hours were unrelated to children's behavioral problems. The role of parent and child gender in the relationships between parental work hours and children's behavioral problems, together with mediating factors, warrants further investigation.

Johnson, S., Li, J., Kendall, G., Strazdins, L., & Jacoby, P. (2013). Mothers' and Fathers' Work Hours, Child Gender, and Behavior in Middle Childhood. *Journal of Marriage and Family, 75*(1), 56-74.

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FORMER FOSTER YOUTH AS FATHERS: RISK AND PROTECTIVE FACTORS PREDICTING FATHER–CHILD CONTACT

This study uses longitudinal data from the Midwest Evaluation of the Adult Functioning of Former Foster Youth to examine father–child contact between fathers who aged out of foster care and their children ($N = 287$ children of 150 fathers). The authors examine the effect of remaining in foster care after age 18 and find that it is positively associated with father–child contact when fathers are age 26. Some of this relationship is explained by positive associations between remaining in care, employment, and men's co-residence with the child's mother, and a negative association with criminal conviction. Even among involved fathers, however, criminal convictions and unemployment are common. Findings suggest that extending care from age 18 to 21 benefits young men, and their children, when they become fathers. Child welfare policies and practice should attend to the needs of young men who become fathers, before and after they exit care

Hook, J. L., & Courtney, M. E. (2013). Former Foster Youth as Fathers: Risk and Protective Factors Predicting Father–Child Contact. *Family Relations*, 62(4), 571-583.

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