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Introduction

The purpose of *Fatherhood: Programmes and Policies* is to review policies and programmes that promote or facilitate the involvement of fathers and father-figures from the pre-natal period through the first eight years of their children's lives; and to establish evidence of these programmes' potential to impact family violence, child abuse or children's health or learning outcomes. Twenty case studies primarily from the Global North with some from the Global South are presented, plus a catalogue of additional projects and discussion of key issues. While there were numerous challenges in developing this review (see Challenges), valuable insights have emerged. The paper concludes with recommendations for future research, policy and programme design

and evaluation. It also draws attention to ways in which best practice in programme areas in the Global South, which have successfully addressed men and fathers (e.g. HIV prevention, women's economic empowerment and maternal and child health), may be transferred to interventions more directly related to parenting.

Rationale

Father-child relationships – be they positive, negative or lacking, at any stage in the life of the child, and in all cultural and ethnic communities – have profound and wide-ranging impacts on children that last a lifetime. Therefore, parenting programmes that foster paternal responsiveness and involvement are only to be beneficial. Also significant will be factors that contribute to 'what works' with

men as fathers in maternal and child health settings where men can be viewed as allies and advocates for the welfare of their children and their children's mothers.

Challenges of Establishing an Evidence Base

As work on the review progressed, it became clear that there were major challenges in building an evidence base of best practice:

- **Few parenting interventions address father engagement or men's roles** in parenting and/or child maltreatment; most evaluated interventions to promote child well-being, development and violence prevention focus exclusively on mothers.

- **Few have undergone systematic and robust evaluation.** Where this has been undertaken, the findings are based on a short-term follow-up, and little is known about longer-term outcomes.
- **Few of the 'parenting' interventions disaggregate findings by sex** – so hardly any tell us anything about the impact of the programme on fathers in comparison with mothers. Fathers are still for the most part invisible "others" in such programming or assumed to be absent.
- Most of the more rigorous impact-evaluated programmes come from wealthy nations in the Global North, and there is a considerable **challenge in identifying appropriate case studies from the Global South.**
- In the Global South, while there is much information on evaluated interventions with men promoting reproductive health and preventing HIV transmission and violence against women, there has been **little evaluated practice in the area of engaging men as fathers and caregivers.**

Parental Leave Policies

Parenting leave design has recently been identified by the OECD as *'one of the few policy tools that are available to governments to directly influence behaviour among parents'* (OECD, 2011: 137). Clearly, parenting leave is not a panacea or one-size-fits-all for engaging men in care work, but its design is one of the strongest public statements that societies can make to show that they value the care work of men and care work in general. It also has the added benefit of reducing gender-based work inequalities when both male and female employees take time off to care for children. A study by the Swedish Institute of Labour Market Policy Evaluation showed that a mother's future earnings increase on average 7% for every month that the father takes parental leave (2010).

There is an immense diversity of provision of parenting leave globally (World Bank, 2011: 20). The Nordic countries have the best established and most generous provision for fathers – both with regard to wage replacement rates and amount of time allocated. The rest

Key Programmes Reviewed

Among the 35 programmes identified (20 explored in some detail), the following are among the most promising.

Early Head Start (EHS - US) is based on a three-pronged approach: to increase economic self-sufficiency and health of families; monitor and enhance child development; and support and enhance parenting skills. In a sample of 3,000 children and their parents, it was found that fathers who participated in EHS were significantly less likely to use harsh discipline than fathers in the control group. EHS fathers were also less intrusive and more easily engaged by their children (who were also more attentive) than fathers in the control group.

The Father Support Programme (FSP) by ACEV (Turkey) aims *'for fathers to play a more effective and positive role in the development of their children'* (Population Council, 2009:9). Topics addressed include child development, fathers' experiences of being fathered, positive discipline, the importance of play and improving communication in families. Fathers who participated in the quantitative and qualitative evaluation of the programme showed an increase in time spent with children, used less shouting and harsh discipline, became more involved in parenting and in housework (according to mothers), and showed improved communication with and greater respect towards their wives.

Becoming a Family Project, School Children and their Families Project, and the Supporting Father Involvement Project (US) were all carried out by Philip and Carolyn Cowan to explore family functioning via randomised controlled trials, carefully incorporating and studying fathers alongside mothers. Among other things, they found involving both parents in preventive interventions to be more beneficial than working with just one. Changes at home were made more quickly and gains were maintained when both parents were engaged; the couples intervention was more successful than the men-only intervention in sustaining fathers' participation. The Cowans believe that *'the question is not whether to intervene with fathers or with couples but, in either approach, how to involve both parents'* (Cowan et al, 2009: 677).

Écoles des Maris ('Schools for Husbands') (Niger) is a UNFPA-funded project (working in partnership with a local NGO, Song-ES) that aims to transform the attitudes and behaviour of whole communities by training *maris modèles* ('model husbands') to spread the word about the benefits of using local health services. Whilst we do not have rigorous evaluation evidence of the effectiveness of École des Maris, testimony from the men involved, and from pregnant women and new mothers, indicates that the scheme has transformed attitudes towards healthcare, as well as substantially increasing the rates of attended labour in a country where maternal and child death rates at birth remain high.

of Europe and Australia have begun following the Nordic countries more recently. No Southern Asian economy offers paternity leave (although in Hong Kong public service employees are now granted five days); this provision is described as 'rare' on the African continent (World Bank, 2011:16). OECD (2011) suggests that fathers' take up of leave can be best encouraged by increasing payment rates for leave that fathers can take, offering financial incentives to take leave, reserving non-transferable leave for fathers on a 'use it or lose it' basis, and facilitating flexible leave options. The most effective approach is viewed as a combination of these strategies, always including non-transferable leave for fathers (OECD, 2011:138).

Some of the positive effects of fathers taking parental leave include:

- More stable couple relationships (Oláh, 2001)
- Higher levels of contact with children, should mothers and fathers subsequently separate (Duvander & Jans, 2009)
- Fathers' adoption of healthier lifestyles and reduced mortality risk (Månsdotter et al, 2007).
- A decreased risk of "all-cause mortality" among men who take between 30 and 135 days of parental leave (Månsdotter & Lundin 2010).
- Fathers taking an increased role in caretaking later (Nepomnyaschy & Waldfogel, 2007)
- Women less likely to smoke or become depressed and more likely to breastfeed (Kiernan & Pickett, 2006)

Recommendations

Engage fathers in existing family support, child development and MCH programmes. At the very least,

existing parenting, maternal and child health and early child development programmes must identify men who are significant to children, ask men themselves what their needs and perspectives are, and identify starting points for increasing their engagement. When provision of parenting and other support to families with children remains predicated on the daily availability of mothers as at-home primary caregivers, 'parent' comes to mean 'mother' and fathers (and working mothers) remain marginal to services and interventions, as well as to their evaluation.

Involve fathers early on. Reaching out to fathers with programmes that encourage their early involvement in their children's lives (including before they are born) is vital because levels of father involvement established early on tend to endure (Hwang & Lamb, 1997; Duvander & Jans, 2009). This often requires changing the mindset of health and other providers to sensitize them to the value of engaged fatherhood and caregiving by fathers. Parental leave policies, which enable and encourage men to play an important role in their children's lives from the beginning, will clearly be significant here.

Targeted versus universal interventions. When special services are 'targeted' at fathers in place of wider engagement in the service or programme, fewer fathers may be reached, outcomes may be less positive, and some negative effects may even be seen. If fathers are not 'welcomed' in universal provision, those vulnerable or problematic fathers who may require targeted support risk remaining invisible or 'hard-to-reach'. The Leksand model (Case Study 3.5) is relevant here. Uniquely among the interventions covered, it demonstrates a high rate of retention of fathers in a programme lasting over five years. The reason for this would appear to be an open route to

attendance *from pregnancy*, whereby all fathers- and mothers-to-be were invited to join the group, and health professionals operated *at the service of the group*, rather than mothers and fathers being 'taught' by professionals.

A multi-pronged, evaluated approach. From the evidence available from substance misuse and domestic violence programmes, as well as interventions to enhance parenting skills and reduce child abuse risk, a picture emerges of holistic, multi-dimensional programmes as having the greatest chance of success. Programmes that are coupled with community-based and national level advocacy campaigns, such as Men-Care (www.men-care.org), are among the most effective approaches to achieving attitudinal and behavioural change. And of course, one cannot determine the level of effectiveness of these approaches without rigorous process and impact evaluation. More evidence is needed to determine 'what works' with fathers and men as caregivers, especially in the Global South as the paucity of evaluated interventions from developing country contexts shows.

Carry out pilot research to engage men in existing, large-scale programme areas in the Global South. Although parenting support programmes, including efforts to promote child development and reduce violence against children, are limited in scale in the Global South, micro-credit and conditional cash transfer programmes (nearly universally targeting women), Prevention of Mother to Child Transmission (PMTCT) of HIV/AIDS, and maternal health and child survival programmes are widespread. Much more could be done to use these existing programme areas in the Global South to encourage and support men's involvement in child well-being and to evaluate the impact of diverse approaches to doing so.

Conclusion

Current research on fathers' involvement in family interventions linked to child outcomes is bedeviled by a lack of data collected systematically from and about these men. There is a consensus - and much descriptive evidence - that involving fathers in their children's lives is a good thing, and a small evidence base that engaging both parents in parenting interventions is significantly more effective than working with just one. However, as we undertake this work we are aware of the need to modify, change or extend elements of any given curriculum, not only to make the intervention culturally and gender-relevant, but also to introduce other elements of good practice of which we have become aware.

About the Authors

The Fatherhood Institute

www.fatherhoodinstitute.org is the UK's fatherhood 'think-tank'. Its mission is for a society that gives all children strong and positive relationships with their fathers and any father-figures, supports both mothers and fathers as earners and carers, and prepares boys and girls for a future shared role in caring for children.

Promundo

www.promundo.org.br/en/ is a Brazilian-based NGO, with offices in the US and Rwanda, established with the purpose of promoting gender equality and ending violence against women and children by engaging men and boys and advocating for



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their inclusion in programmes, policy and advocacy.

Promundo is co-coordinator of the MenCare campaign.

MenCare www.men-care.org/ is a global campaign coordinated by Promundo and Sonke Gender Justice Network. It aims to advocate for the non-violent and gender equitable participation of men as fathers and caregivers.

Find us on Facebook (MenCareCampaign) and Twitter (MenCareGlobal)



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The full paper can be downloaded for free on the Fatherhood Institute website www.fatherhoodinstitute.org/?p=3744,

as well as on the MenCare Campaign website

www.men-care.org/targeting-areas.

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