

## Father-inclusive practice and associated professional competencies

Richard Fletcher

It is widely accepted that, over recent decades, fathers' roles have changed to include more care of infants and young children. It is now normal, for example, for fathers to attend the birth of their first child, and in many areas antenatal classes include special topics or discussions for fathers. More fathers are also noticeably pushing strollers, dropping off toddlers at child care and volunteering for literacy tutoring in schools.

It is not surprising then to find that health, education and welfare services are looking for ways to recruit and involve fathers, alongside mothers and other family members, to support their infants and children. Father-specific parenting programs have been developed for a variety of groups, such as expectant fathers, fathers of children with a disability, fathers in prison, Indigenous fathers and fathers of primary school-age children (Family Action Centre, 2005). General services, such as the newly developed Raising Children Network website, have special pages for fathers, and in some policy areas, such as family law, there is explicit recognition of the importance of fathers (Foster, Chudleigh, Lenton, & Gibson, 2005; Raising Children Network, 2007).

Incorporating fathers into established family-related services, however, has not proved to be straightforward. Everything from publicity (in which the language and images may be pitched at mothers) to opening hours, referral procedures and staff training has required rethinking or, at least, reviewing. Simply advertising programs for "parents" instead of for "mothers" has not brought dads flocking to the services, and highly trained practitioners have not always found it easy to interact with fathers (Fletcher, 2004). In this paper, the research relating to fathers' involvement with children is described and the evidence of effective practice for including fathers is summarised. Factors that may influence fathers' involvement with services are reported and the competence of practitioners to engage with fathers when they do come into contact with the services are discussed.



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## The benefits of father involvement

When a national sample of 1,000 Australian men was asked in 1998 if mothers and fathers should share equally in the responsibilities of bringing up children, 96% agreed (Russell et al., 1999), and the Australian Survey of Social Attitudes conducted in 2003 found that 90% of males and 91% of females agreed or strongly agreed that “a father should be as heavily involved in the care of his children as the mother” (Wilson, Meagher, Gibson, Denmark, & Western, 2005, p. 59). However, researchers involved in researching fathers’ and mothers’ care of children have cautioned against confusing attitudes about what parents “should” do with actual behaviours. Although large-scale surveys examining parents’ behaviours in countries such as the USA, Canada and the Netherlands have found a significant increase in the amount of time that fathers spend engaged with their children (Pleck & Masciadrelli, 2004), there is limited evidence of change in Australia.

A comparison of time use studies between 1983 and 1997 found that the total amount of time that fathers spent with their children had not changed greatly. The time use studies carried out by the Australian Bureau of Statistics (ABS) in 1992 and 1997 measuring fathers’ time with children showed a small increase over that period of 47 minutes per day (ABS, 2006; Russell et al., 1999).<sup>1</sup> The continued evidence of disparity between mothers’ and fathers’ hours spent in direct care of children and in household tasks has fuelled calls for more equitable caring arrangements in the home (Craig, 2006; Human Rights and Equal Opportunity Commission, 2005). Unfortunately, we have little information on how couples decide on “who does what” when they commence a family. Researchers trying to unravel the process of developing father and mother roles find that couples are prone to “figuring it out on the run”, and that they often lack awareness of options and frequently operate from assumptions about men’s and women’s roles and duties (Barclay & Lupton, 1999; Cowan & Cowan, 1992; Hand, 2006). We do know that some fathers start with high expectations of themselves, thinking that they will be very involved with their infants, but the realities of parenthood cause disappointment and even grief about their limited contact (Barclay & Lupton, 1999).

One area where research has shown significant change is in fathers’ roles in child development—

<sup>1</sup> The latest time use study conducted by the Australian Bureau of Statistics in 2006 had not been released at the time of writing, so recent figures on father involvement are not available.

fathers are now seen as being vitally important in the way that children develop (Lamb & Tamis-Lamonda, 2004). The studies assessing fathers' impact on child development have largely concentrated on investigating the type of interaction that occurs between fathers and their infants or children. Long-term studies following families over several years (e.g., Buchanan & Flouri, 2002) have been able to measure fathers' interactions with their children at an early age and then the children's wellbeing some years later.

In the USA, the National Institute of Child Health and Human Development (NICHD) examined parental factors that predicted school readiness. They videotaped fathers and mothers completing a task with their preschoolers or first-graders, and teachers were asked to rate the children on behaviour and social skills in their first years of school. The father-child and mother-child tasks, such as playing with a set of toy African animals or drawing a sailboat together using an Etch A Sketch® toy (with the parent controlling one knob and the child controlling the other) were selected to reveal each parents' sensitivity to their child's cues and support for their autonomous activity. Children who, according to the teachers, had fewer behaviour problems and higher social skills came from families where the fathers were sensitive and supportive of autonomy. An emotionally intimate marital relationship added to the positive effect of these factors (NICHD Early Child Care Research Network, 2004). The NICHD study comprised families with two resident parents and incomes above average for the general population, so the findings may not apply to all parents. Also, the measurements of parental sensitivity and child behaviour were taken relatively close together in time, so direction of causality cannot be assumed.

A more recent study, also from the USA, compared the influence of fathers and mothers from a low-income sample on their children's cognitive development. This study videotaped the parents playing with toys with their two-year-old children. The videotapes were assessed for positive qualities—such as sensitivity (taking the child's perspective), positive regard (demonstration of respect and admiration) and cognitive stimulation (teaching or actively trying to expand the child's abilities)—as well as negative qualities—such as detachment, hostility or intrusiveness. Three years later, the child's maths and language levels were assessed using standard measures. The study concluded (not surprisingly) that children with two supportive parents scored highest on measures of maths and language, while those with two unsupportive parents scored lowest. What was also clear, however, was that the positive effect of having one supportive parent did not depend on whether that parent was a mother or a father. Elevated cognitive abilities were just as likely to be apparent amongst children with a supportive father as those with a supportive mother (Martin, Hiscock, Hardy, Davey, & Wake, 2007).

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Fathers' effects on wellbeing do not stop at childhood. As part of the US National Longitudinal Study of Adolescent Health, a nationally representative sample of US adolescents was tested from Grade 7 to 12 to measure their relationships with their fathers and mothers and their level of depression. Over the five years of the study, the quality of the father-adolescent relationship, as judged by the adolescent, was found to be equally predictive of the adolescents' mental health as was the mother-adolescent relationship (Videon, 2005).

Studies such as these provide a powerful argument for supporting fathers to be directly involved in their children's lives. However, researchers have also pointed to the ways that fathers may indirectly influence their children's wellbeing. For example, in families where mothers are depressed, fathers' positive involvement with infants has been shown to improve treatment outcomes for the mothers (Misri, Kostaras, Fox, & Kostaras, 2000) and to reduce behaviour problems for the infants in later childhood (Chang, Halpern, & Kaufman, 2007; Mezulis, Hyde, & Clark, 2004). At the same time, not all involvement by fathers is positive. Jaffee, Moffitt, Caspi, and Taylor (2003) found that when fathers engaged in high levels of antisocial behaviour, the more time they lived with their children, the more conduct problems their children had. There is also increasing recognition of the effects of domestic and family violence on child development and the necessity to intervene as early as possible with fathers at risk of abusing (Dubowitz, 2006; Dubowitz, Black, Kerr, Starr, & Harrington, 2000).

It is also important to recognise that father involvement is not necessarily the same as mother involvement. Although being sensitive and responsive is likely to be an important ingredient of

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mothering. As part of the increased attention to fathers' influence on children, the assumption that fathers simply follow the mother–infant relationship template has been questioned (Grossman et al., 2002). Infants' secure or insecure attachment is thought to be largely independent for mothers and fathers (van IJzendoorn & De Wolff, 1997). Fathers' "rough and tumble" play, for example, has been identified not only as being common among fathers and children in many cultures, but also as beneficial for child development (Paquette, 2004). There has also been the suggestion that fathers' interactions with young infants are typically less modulated than mothers', with more unexpected peaks of excitement, again with positive developmental implications (Feldman, 2003).

## Including fathers in services for families

From the research on fathers' involvement with childcare over recent decades, it seems evident that simply *believing* that fathers should be involved with their children is not sufficient to change established roles for mothers and fathers as they go about the care of their children. In the same way, among family services, the belief that fathers should be involved in services for families has not resulted in the successful recruitment of fathers. Health, early education and welfare services aiming to support families are, in most cases, staffed by women and accessed by mothers (Fletcher, 2004; Lloyd, O'Brien, & Lewis, 2003).

The growing recognition of the importance of fathers for child development has led to an increasing number of small-scale attempts to include fathers in health, early education and welfare services for families (Fletcher, 2004). However, many of these initiatives, usually programs or courses for fathers, have been unsustainable and undocumented. There are, on the other hand, several large-scale programs operating at a number of sites and including high numbers of contacts with families that have also attempted to include fathers. These relatively well-funded programs have provided an opportunity to record and pool experiences and have attracted researchers to investigate the factors involved in recruiting and engaging with fathers.

Head Start commenced in the US in 1965 as a federal program to provide child development, educational, health, nutritional, social and other activities, intended to prepare low-income children for entering kindergarten (Butler & Gish, 2003). An evaluation of 17 sites, using a rigorous research design, reported modest but wide-ranging positive impacts for children and primary caregivers when children were age three. In addition, fathers in the Head Start programs were found to spank children less than control group fathers and were observed to be less intrusive during play with their children (Raikes, Summers, & Roggman, 2005). An inventory of strategies for including fathers was developed, reflecting the experience of programs attempting to enrol and engage fathers from the Head Start target population. The list of more than twenty strategies included suggestions for revamping services' policies (including a clear expectation that fathers should and will participate), registration forms (providing information on fathers), hiring practices (having more male staff), physical environment (providing positive images of fathers), referral pathways (developing links across agencies) and staff training (on working with men and fatherhood) (Raikes et al., 2005).

Sure Start, a major UK government early intervention initiative that commenced in 1998, provides a range of services for parents-to-be, parents and children through 524 local programs (Kawachi, Kennedy, & Glass, 1999). The aim is to promote the physical, intellectual and social development of babies and young children, particularly those who are disadvantaged, "so that they can flourish at home, and when they get to school, thereby breaking the cycle of disadvantage for the current generation of young children" (Tunslil, Allnock, Akhurst, & Garbers, 2005, p. 158). The inclusion of fathers was specified in the original targets and in 2003 an evaluation of fathers' involvement in the programs was completed. The evaluation found variable levels of involvement and advanced a set of recommendations to assist programs to meet their objective of including fathers. The recommendations mirrored those of the Head Start evaluations in suggesting an overhaul of policies and procedures to proactively seek out fathers' views and interests, adopt

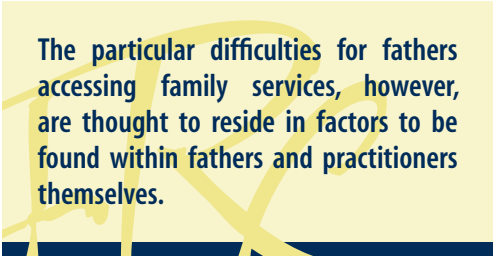
a “strengths-based” approach to fathers’ attitudes and behaviours, advocate for their inclusion across programs and provide training on working with fathers (Lloyd et al., 2003).

In Australia, although early intervention strategies aiming to support parents have been initiated by federal and state governments, no evaluation of fathers’ involvement in these programs has taken place (Fletcher, Fairbairn, & Pascoe, 2004). However, a 2005 review of Australian fatherhood research was sponsored by the (then) Commonwealth Department of Family and Community Services, the Child Support Agency and the Bernard van Leer Foundation, which led to a national forum on father-inclusive practice that drew together practitioners and researchers from all states (Family Action Centre, 2005; Fletcher et al., 2004). A range of service types was represented at the forum, and presenters were asked not to report on particular programs but to highlight the changes in their services’ capacity to engage with fathers. For example, Southern Family Life, a community-based provider of family services in Victoria, had initiated a range of successful programs for fathers, including antenatal groups, learn-to-swim classes (for the babies, not the dads) and conflict resolution group programs. Practitioners and managers had to adapt the services’ “family sensitive principles” to be father-sensitive, and offered community activities that were focused on skill acquisition and building better relationships with children and partners. The Child Support Agency also reported a shift in the culture of their service delivery. The agency offers support and assistance to encourage fathers’ positive relationships with their children (rather than simply seeking a financial contribution), and this was achieved via staff training and a change in procedures, as well as research into new ways to promote fathers’ understanding of their positive contribution to childrens’ wellbeing after separation. The final day of the forum produced a set of principles with practice implications that were broadly similar to those listed in the Head Start and Sure Start reports (see the Engaging Fathers Program website, [www.newcastle.edu.au/centre/fac/efp](http://www.newcastle.edu.au/centre/fac/efp)).

Strategies for successfully engaging men (including fathers) were also reported in the review of the Australian government-funded Men and Family Relationships Program. Although initially proposed in 1997 as part of Partnerships Against Domestic Violence, the 46 community-based programs diversified to include strengths-based early intervention programs for fathers. An evaluation of the initiative, undertaken between 2000 and 2002, found that the program had been successful in providing services to a diverse range of men, particularly in rural and regional areas. Although a major target group was separated fathers, there had also been success with programs aimed at men approaching the birth of a first child (O’Brien & Rich, 2002). The review also stated that factors such as male staffing, a strengths approach to fathers’ roles and changes to policies, referrals and supervision to enhance male (father) engagement had been key to the success of the program.

## Factors influencing father engagement

The term “engagement” is frequently utilised within the literature describing the helping relationship across health, welfare, education and counselling fields (Addington, Francey, & Morrison, 2006; Brady & Scully, 2005; Coatsworth, Santisteban, McBride, & Szapocznik, 2001). In general, it is used to define a positive relationship between a service or a practitioner and an individual accessing the service, whereby this relationship facilitates the meeting of the specific expectations of that individual (Dearing, Barrick, Dermen, & Walitzer, 2005). In the context of family services, where interactions may range from listening, information-giving and problem clarification to counselling or therapy in an individual, family or group context, measures of engagement may be expected to depend on specific situations. The particular difficulties for fathers accessing family services, however, are thought to reside in factors to be found within fathers and practitioners themselves.



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Gender differences in the way that males and females might perceive help-seeking suggest that practitioners should employ skills tailored to take account of possible gender-specific features of fathers’ approaches to family services (Broadhurst, 2003). However, methods currently employed by service providers may be more conducive to engaging with females in that they require a degree of self-awareness and problem-awareness and the ability to discuss personal



issues freely and openly, tasks that may be difficult for men who have socialised male gender role norms (Draper, 2002; Robertson & Fitzgerald, 1992). More appropriate methods of engagement for fathers may involve either tailoring methods of communication to suit men, or conducting sessions in ways that help men feel less constrained by the traditional roles in which they tend to view themselves (Addis & Mahalik, 2003). Put succinctly, “if counselling does not require men to set aside their sense of independence, their comfort with goals, tasks, and activities, or their preference of developing an understanding of a situation, then the idea of seeking help may be more appealing” (Robertson, 2001, cited in McCarthy & Holliday, 2004, p. 26). The use of such methods, however, requires practitioners to be knowledgeable about gender differences and their associated stereotypes, and to be committed to developing and utilising strategies and skills to engage both men and women.

In view of the importance of emotional factors in counselling and family relationship work, emotional stereotyping of males (attributing styles of emotional expression to all males) is likely to reduce practitioners’ effectiveness (Heesacker & Bradley, 1997; Heesacker et al., 1999). The Beliefs About Men’s Emotions (BAME) scale was developed to measure beliefs about men’s typical emotional capacities and expressions (Heesacker et al., 1999). Respondents completing the scale were asked to rate their agreement with statements such as “men don’t express their emotions very much” and “men are afraid of their feelings” (p. 486). In one study, male

and female participants were required to watch a videotape of a relationship conflict and then complete the BAME scale and answer three open-ended questions assessing blame for the conflict. Those reporting greater stereotypical beliefs about men’s emotions were more likely to blame the man for the relationship conflict, suggesting that a counsellor’s stereotypical beliefs about fathers’ abilities may influence their approach to assisting couples seeking help with dispute resolution.

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Service providers may also fail to include fathers in resolving family disruption if they hold stereotypical beliefs regarding fathers’ tendency to abuse children or lack of competence in providing for children’s emotional needs. The *Fitting Fathers into Families* report (Russell et al., 1999) surveyed Australian service providers and professionals on their perceptions of fathers’ influence on children and their perceptions of the key barriers to men becoming involved as parents and utilising services. Both male and female service providers agreed that mothers and fathers should share the responsibilities for bringing up children and, in general, assumed that fathers are committed to their role of fathering. However, the survey also found that over half the female staff and one-third of male staff believed that up to one in four (24%) of fathers physically abuse their children. Hand’s (2006) qualitative study also found that mothers believed that men lacked the patience and interest to successfully deal with the emotional aspects of parenting small children, perhaps highlighting the need for practitioners to be aware of their potential underestimation of fathers’ competence under the influence of mothers’ views.

## Conceptualising practitioner competencies for father engagement

While recommended strategies and examples of good practice can be expected to improve the ability of services to recruit fathers, practitioners’ skills in forming a productive relationship will remain crucial in the effective engagement of fathers (Fletcher, 2004). Like other reviews, the evaluation of the Men and Family Relationships initiative emphasised that staff training was essential in order for fathers to be effectively engaged (O’Brien & Rich, 2002). However, similar to other reviews offering best practice guides, the nature of the skills, attitudes and knowledge involved in being able to engage with fathers was not discussed. The reviews reported above do not suggest that simply being male (or being a father) is sufficient aptitude for being able to recruit and engage with fathers, so, while the need to employ more males in services for fathers is widely supported, it is not suggested that “maleness” removes the need for training in engagement competencies. With the increasing demand for effective support for fathers, new competencies will be required for those filling the emerging category of “father worker” and for the expanded father-inclusive role definitions of staff in health, early education and welfare arenas who work with families. In spite of considerable progress in program development, the definition and development of competencies has been neglected.

McCarthy & Holliday (2004) argue that sensitivity towards the needs of male clients in a counselling setting could be assessed in a similar fashion to that of the Multicultural Counseling Competencies, adopted by the American Counseling Association. That is, they proposed that traditional male values may form the basis of a male gender culture, steeped in qualities synonymous with socialised male norms, such as limited expression of emotion, reliance on self, autonomy and aggressiveness, and that counsellors should adapt their practice to better address male clients' needs. The conception of male culture is not to be confused with cultures of minorities, or subcultures within male identity, such as ethnicity. Nor does it imply that all male needs can be homogenised. Rather, the authors suggest that male clients' reluctance to seek counselling assistance and their indifference to standard counselling techniques, when viewed as "cultural" factors instead of as stereotypical truths such as "men are afraid of their feelings" (discussed above), behooves practitioners to reflect on their stereotypes and beliefs about men, educate themselves about male culture(s) and find techniques that suit men in need. As Ming Liu (2005) proposes, "men are socialized in a specific culture, with values, norms, customs, and expectations, to which men must adhere. Therefore, working effectively with men means an awareness of masculine cultural values and the clinician's understanding of his/her own assumptions and biases about men" (p. 685).

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Evaluations of cultural competency training have found that practitioners' changes in knowledge of diverse groups does not necessarily translate into changes in practice, and studies of ethnically diverse professionals find that ethnic group membership does not reliably predict cultural competence (Betancourt, 2003; Jackson, 2007; Kumas-Tan, Beagan, Loppie, MacLeod, & Frank, 2007). As well, because within-group variation is high, the tendency to generalise from limited personal contact with members of a client group can inhibit effective engagement, so that simply being exposed to members of the client group may not increase competence; practitioners may simply repeat mistaken approaches (Reimann, Talavera, Salmon, Nunez, & Velasquez, 2004). Applying this evidence to fathers suggests that knowledge about fathers, although important, may not translate into culturally competent practice. Male practitioners (who may be fathers) and female practitioners (who have experience of male family members and friends) may not be effective in engaging fathers.

Self-reflection, the ability to reflect on one's own beliefs and attitudes, has been identified as a key competence by the National Health and Medical Research Council (NHMRC) guide for cultural competency in health (NHMRC, 2006). Thus, unhelpful beliefs about fathers, such as the belief that fathers (men) are "afraid of their feelings" (discussed above), may be addressed through self-awareness and a willingness to assess the counsellor's own bias toward men. Self-reflection has also been considered a fundamental competence for family mediators (Sourdin, Fisher, & Moloney, 2004).

Cross-cultural research has also suggested that an important skill in dealing with clients of other cultures is to be able to exercise judgement in applying group characteristics to an individual. While the dangers of stereotyping—incorrectly attributing group characteristics to an individual—are widely recognised, the opposite mistake can also occur—"ignoring cultural group characteristics that may be affecting that individual" (Sue, 1998, p. 446). An important skill in working with fathers is the ability to recognise when male characteristics should be considered and allowances made, and when individual characteristics should be emphasised. Finally, the cross-cultural literature also casts cultural competence as an ongoing process in which the practitioner continues to learn while working with members of the community (Campinha-Bacote, 1999).

At the time of writing, the Australian Community Services and Health Industry Skills Council (CSHISC) was in the process of developing competencies for Vocational Graduate Diplomas of Relationship Counselling and of Family Dispute Resolution (CSHISC, 2005). The draft documents include the optional units: "Work with men", "Engage fathers into family based programs" and "Working with separated fathers". Draft performance indicators, such as assisting fathers to understand the impact they have as fathers on their children's lives, and skill areas, such as the ability to critically reflect on their own interactions in relation to father-inclusive practices, have

been included. The measures and clarification of the skills, attitudes and knowledge involved, however, are yet to be developed for these optional units. For undergraduate and professional education, there is also a gap in the understanding of competencies involved.

## Conclusion

While there seems to be a clear trend in community attitudes to encourage fathers' involvement with young children, much remains to be done to provide a solid research base to support early intervention with fathers. However, the necessity to intervene early with families (which include fathers in a variety of roles) is widely accepted, indicating the importance of including fathers in any comprehensive support for parents. Evidence of effective program design for fathers is available from the evaluations of large-scale early intervention initiatives in a number

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of countries. Pointers and summary lessons from these initiatives are similar to those derived from Australian projects; changing from mother-focused to father-inclusive publicity, recruiting males as staff or volunteers and developing father-sensitive models of service delivery have been recommended across service types and regions. One crucial area of development is the specification of the competencies required for practitioners to work successfully with fathers. The development of “cultural competency”, particularly in the psychology area, suggests that knowledge of fathers will be less important than the ability for practitioners to be self-reflective (in relation to fathers) if they wish to effectively engage with men in their fathering roles.

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## Working with fathers: Some resources

### Australia

**Engaging Fathers Program, Family Action Centre, University of Newcastle** provides training and resources: <http://www.newcastle.edu.au/centre/fac/efp>

**Men and Family Relationships Services** work alongside men to assist them to manage a range of relationship issues with partners, ex-partners and children: [http://www.fahcsia.gov.au/internet/facsinternet.nsf/family/mfr-men\\_family\\_relationships.htm](http://www.fahcsia.gov.au/internet/facsinternet.nsf/family/mfr-men_family_relationships.htm)

**Mensline Australia** provides 24-hour family relationships counselling service.

**UnitingCare Burnside** provides training courses relevant to men and family relationships: <http://www.burnside.org.au/content/Main%20Page%20Working%20With%20Men%20Training.pdf>

### International

**Canadian Father Involvement Initiative** develops policy and resources for father-inclusive practice: <http://www.cfii.ca/fion>

**European Fatherhood** presents research and policy on improving gender equality for fathers: <http://www.european-fatherhood.com>

**Fathers Direct (UK)** provides policy and practice materials for father-inclusive practice: <http://www.fathersdirect.com/index.php?id=0&fID=4>

**Head Start** is a national program in the USA that promotes school readiness: <http://www.acf.hhs.gov/programs/hsb>

**SureStart** is a UK government program to deliver the best start in life for every child: <http://www.surestart.gov.uk>