



Mission:

To coordinate, measure and advocate for high quality home-based support to strengthen all expectant and parenting families so that the children of Los Angeles County are healthy, safe and ready to learn.

SUMMARY OF OUTCOMES: What Research Highlights About Father Involvement

Report as of March 31, 2022

Home Visiting and Fathers

March 31, 2022

LA BEST BABIES NETWORK



Healthy Babies. Our Future.

This summary was produced by LA Best Babies Network (LABBN), a community benefit of Dignity Health – California Hospital Medical Center in Los Angeles (LA). LABBN leads the Family Strengthening Network in partnership with First 5 LA, Maternal and Child Health Access, PAC/LAC, and Work2Live Productions. The Family Strengthening Network consists of 14 hospitals and over two dozen

community-based organizations funded by First 5 Los Angeles, LA County Department of Public Health and Department of Mental Health implementing one of three home visiting program models: Welcome Baby, Healthy Families America, and Parents as Teachers. Together, these organizations deliver home visiting services to over 22,000 pregnant women and families with newborns through Los Angeles County annually. LABBN provides the training, database, communication infrastructure, and works with each hospital and organization to ensure fidelity to program models.



The Los Angeles County Perinatal and Early Childhood Home Visitation Consortium is an alliance of over 60 home visiting agencies and maternal and child health organizations. Overseen and managed by LA Best Babies Network, the Consortium shares training, and educational resources, researches best practices, supports enhanced referral systems between programs, researches and collects data on home visiting outcomes, and advocates for systems and policies that recognize the value of home visiting.

Through direct service, research and professional training, Love, Dad: Support for Fathers and Families advocates for policies and practices that promote family-child health through the inclusion of fathers in perinatal and early childhood mental health and home visiting in Los Angeles County.

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Find available home visiting services in L.A. County:

eDirectory.HomeVisitingLA.org

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Background

Home visiting is a voluntary, home-based support program provided to pregnant individuals and families with children ages 0 to 5 that is demonstrated to improve maternal and child health. Home visiting programs have been associated with a decrease in child protective service referrals, reduced substantiated child abuse and neglect claims, and fewer emergency room visits (Avellar & Supplee, 2013; Easterbrooks et al., 2019; Green, et al., 2014; Olds D. K., 2010). Despite evidence that fathers greatly impact the health outcomes of their children and families, home visiting programs have historically focused almost exclusively on the health of the mother and baby, with little to no consideration or inclusion of fathers. The Father Engagement Workgroup of the Los Angeles Perinatal and Early Childhood Home Visitation Consortium formed to advocate for the expansion of home visiting policies and practices to intentionally include fathers in home visiting, with the ultimate goal of improving the health of whole families. The following report outlines important data that supports the formation of this group and the impact of father-figure engagement on family child health.

Defining fatherhood calls for identifying the diversity of fathering that occurs. Children can have fathers who are currently residing with them or living separately. Some kids have a single father or two parents who are both fathers. Children in a blended family may have both a biological father and a stepfather (Yogman et al., 2016). Some children may have other paternal figures taking care of them, including but not limited to, a grandparent or an uncle. This report provides various key findings present in research regarding primary caregivers that assume a father role in the life of their children.

The impacts of father involvement on children and families are observed in all developmental stages of a child's life, starting with the perinatal period. Father involvement has impacts on maternal health as well, and is directly linked to an increase in prenatal care and the avoidance of unhealthy behaviors such as alcohol or tobacco use in mothers (Alio, et al., 2011). Mothers view father involvement during pregnancy as an important step in helping them adjust to their new role as a caregiver (Walsh et al., 2021). While there are many factors that contribute to a father's relationship with their children, establishing a strong connection with a newborn is one of the greatest predictors of increased future father involvement. During the perinatal period, increased father involvement is associated with a reduction of infant behavioral problems such as crying and sleeping difficulties (Erlandsson et al., 2007). In early childhood, a father's presence has been associated with improved language skills and increased cognitive and socioemotional development for a child, which all increase a child's school readiness (Cabrera et al., 2007). In school-age children, increased father involvement has been associated with improved literacy development and increased academic success for their children (Saracho, 2007). Lastly, in the adolescent stage, increased father involvement is associated with reduced behavioral problems and increased independence among children (Sarkadi et al., 2007). A decline in father involvement throughout all developmental stages is correlated with an increase in socioemotional developmental issues for a child.

While father involvement has great benefit to children and families, fathers can face several barriers that prevent them from engaging with their children and providing the aforementioned benefits of increased father involvement. One such barrier is paternal mental health challenges. Approximately 10% of fathers experience postnatal depression, and this rate increases to nearly 50% when mothers/co-primary caregivers are experiencing depression and mental health challenges (Paulson & Bazemore, 2010). Research also suggests that up to 16% of fathers experience prenatal anxiety and up to 18% suffer from postnatal anxiety (Leach et al., 2016). Different from mothers whose depression often manifests as sadness, the expression of paternal depression manifests as irritability, withdrawal, and alcohol or substance abuse (Walsh, Davis, & Garfield, 2020). Understanding the complexity and characterization of paternal depression is crucial in order for fathers to receive support and treatment.

Untreated mental illness in parents can have detrimental effects on family child health. Fathers experiencing depression and mood disorders tend to struggle to bond with their babies and are less involved in the care of their children. This reduces the above-mentioned positive benefits and increases the risk of child abuse, and can result in the development of mental health and behavioral challenges for children. Similarly, mothers experiencing postpartum depression tend to receive less support from, and often have more negative interactions with, their caregiving partners. Together, this reduction in support and increase in negative interactions can reduce overall relationship satisfaction. This has an additive effect on mood disorders and can lead to greater paternal postpartum depression severity (Don & Mickelson, 2012). Despite recognition of the negative effects, perinatal health programs, including home visiting programs, rarely screen for paternal depression. Although the American Academy of Pediatrics urges medical practitioners to evaluate both the mother and father for signs of postpartum depression, conducting paternal postnatal depression screenings in the context of a home visiting program is rarely mandatory. If maternal mental health is the only target of perinatal treatment, paternal depression is likely to go unnoticed and untreated, leaving children and families at risk of exposure to the negative effects of paternal depression. Efforts to include fathers in home visiting programs must recognize and prioritize paternal mental health as a crucial component of family health.

Summary of Outcomes Research

The tables below outline the categories of outcomes research presented in the following pages of this report. The report will first detail the impact of father involvement on family child health, broken down by time periods in a child’s life. Next, the report will detail the impact of father engagement on overall family health. Lastly, the report will present research highlighting the effects of postpartum depression on fathers, partners, and children.

Positive Impacts of Father Involvement on Children
Perinatal and Newborn Period
Early Childhood
School Age Children
Adolescence

Positive Impacts of Including Fathers in Home Visiting Models
Positive Effects on Fathers

Effects of Paternal Depression
Effects of Paternal Postnatal Depression on Fathers
Effects of Paternal Postnatal Depression on Partners
Effects of Paternal Postnatal Depression on Children

Details of Outcome Research by Impact Category

Positive Impacts of Father Involvement on Child and Family

Research highlights the positive impacts father involvement has on the perinatal, early childhood, school-age, and adolescent periods. In the perinatal period, research highlights how paternal involvement influences mothers to adopt healthy perinatal behaviors and assist infants with emotional regulation (Alio et al., 2011). In early childhood, increased paternal involvement has been linked to children’s language development and a reduced risk of children developing a psychiatric disorder (Cabrera et al., 2007). In school-age children, father involvement has contributed to increased literacy development and academic success (Saracho, 2007). Lastly, in adolescence, involved fathers have been shown to decrease adolescent risk behaviors and enhance cognitive development (Sarkadi et al., 2007).¹

Specific research findings are detailed in the table below.

Perinatal and Newborn Period
<ul style="list-style-type: none"> When fathers are more involved, pregnant people are more likely to seek prenatal care and avoid unhealthy behaviors, such as alcohol and tobacco use, during pregnancy (Alio et al., 2011).
<ul style="list-style-type: none"> Mothers recognize that father participation in prenatal care, such as doctor appointments in early pregnancy, helps fathers adjust to their new life stage as a father-to-be (Walsh et al., 2021).
<ul style="list-style-type: none"> The neonatal mortality rate of infants born to women with absent partners is nearly four times that of their counterparts with involved fathers (Alio, et al., 2011).
<ul style="list-style-type: none"> Fathers are typically major sources of practical and emotional support for mothers as the family manages the transition to caring for a new baby. Involved fathers influence a mother’s ability to cope with exhaustion and to interact positively with their infant and reduce the likelihood of maternal postnatal depression (Cheng, et al., 2016).
<ul style="list-style-type: none"> Skin-to-skin contact between the father and newborn 2 hours after birth can result in the infant crying less, becoming drowsy sooner, having less rooting, sucking, and wakefulness issues (Erlandsson, Dsilna, Fagerberg, & Christensson, 2007).
<ul style="list-style-type: none"> Fostering father involvement during infancy in families may reduce infant behavioral problems (Waldfoegel, Craigie, & Brooks-Gunn, 2010).
<ul style="list-style-type: none"> Fewer father-child interactions are associated with a negative impact on child development, including delayed neuromuscular maturation in the first 6 months (Paulson et al., 2009).
<ul style="list-style-type: none"> Children with involved fathers and depressed mothers were significantly less likely to have a psychiatric disorder upon school entry as compared to children of depressed mothers and less involved fathers (Vakrat, Apter-Levy, & Feldman, 2018).

¹ An “involved father” is someone who feels and behaves responsibly towards one’s child, is emotionally engaged, physically accessible, provides maternal support to sustain the child’s needs, and exerts influence in child rearing decisions (Pruitt, 2000).

Early Childhood
<ul style="list-style-type: none"> • A father's supportiveness is positively associated with children's social and emotional development at ages 2 and 3. (Cabrera, Shannon , & Tamis-LeMonda, 2007).
<ul style="list-style-type: none"> • Consistent biological father presence at ages 2 and 3 are associated with toddlers' regulatory development across toddlerhood (Bocknek, Brophy-Herb, Fitzgerald, Schiffman, & Vogel, 2014).
<ul style="list-style-type: none"> • Early father involvement with daughters has been associated with decreased teen pregnancy (Ellis et al., 2012).
<ul style="list-style-type: none"> • Fathers' supportiveness and increased father-child communication are positively associated with children's language and cognitive development between 24 through 64 months (Cabrera, Shannon , & Tamis-LeMonda, 2007).
<ul style="list-style-type: none"> • In early childhood, mothers tend to tailor word choice to the child's known vocabulary, whereas fathers are more likely to introduce new words, leading to increased vocabulary for children (Raeburn, 2014).
<ul style="list-style-type: none"> • Paternal supportiveness and sensitivity during play interactions at 24 months predicts improved cognitive development and vocabulary at 36 months (Cabrera, Shannon , & Tamis-LeMonda, 2007).
<ul style="list-style-type: none"> • A non-resident father who is actively involved in a child's upbringing can yield significant benefits in terms of child health and development (Waldfogel, Craigie, & Brooks-Gunn, 2010).
<ul style="list-style-type: none"> • A positive co-parenting relationship with the child's mother is associated with the quantity and quality of father involvement (Harris Professional Development Network Fatherhood Engagement Committee, 2021).
<ul style="list-style-type: none"> • Father involvement is linked to certain positive aspects of school readiness, such as emotional regulation (Downer & Mendez, 2005).
<ul style="list-style-type: none"> • Father involvement in play protects children from problem behaviors and facilitates children's social competence, especially when parents have a supportive coparenting relationship (Jia et al., 2012).

School-Age Children
<ul style="list-style-type: none"> • Father-child time spent together is strongly associated with children’s cognitive outcomes when that time is spent on educational activities, such as reading or educational play (Cano et al., 2019).
<ul style="list-style-type: none"> • Children who have contact with their fathers (regardless of the residency status of the father) regulate their emotions more effectively than children who have no contact (Vogel et al., 2006).
<ul style="list-style-type: none"> • Fathers more involved with their child’s school and school life contribute positively to a children’s reading, math, and approach to learning (Baker, 2018).
<ul style="list-style-type: none"> • Involved fathers contribute to children’s literacy development and academic success (Saracho, 2007).
<ul style="list-style-type: none"> • Fathers tend to encourage their children’s risk while also enforcing limits and boundaries on their children’s engagement in outdoor risky play (Bauer & Giles, 2019)., which helps open their child to the world by promoting healthy physical and rough-and-tumble play that helps children gain knowledge by experiencing the environment (StGeorge et al., 2015).

Adolescence
<ul style="list-style-type: none"> • Increased father involvement has been associated with improved social responsiveness, cognitive development, independence, and gender role development for their children (Sarkadi et al., 2007).
<ul style="list-style-type: none"> • For female adolescents, fathers’ warmth and responsiveness predicts optimism; for male adolescents, fathers’ warmth predicts language arts self-efficacy (Suizzo, et al., 2017).
<ul style="list-style-type: none"> • Adolescents whose nonresident fathers are involved have been shown to be less likely to begin smoking regularly (Menning, 2006).
<ul style="list-style-type: none"> • Several recent national longitudinal studies have shown that father involvement is associated with a decrease in the likelihood of adolescent risk behaviors (Yogman & Garfield, 2016).
<ul style="list-style-type: none"> • Children who were securely attached to their fathers exhibited fewer behavior problems and greater competence in the broader ecologies of school and peer groups (Iwaoka-Scott & Lieberman, 2015).

Positive Impacts of Including Fathers in Home Visiting Models

Home visiting services that focus on the inclusion of fathers are associated with improved father-child engagement and overall maternal and child health (Holmber & Olds, 2014). Father-driven home services have been recognized to lower risk factors associated with child abuse and neglect (Guterman et al., 2017). Participation in home visiting programs including Nurse Family Partnership and Healthy Families America has been shown to help dads deal with their anxieties in a healthy way (Ferguson & Gates 2012) and provide opportunities for couples to get assistance in any relationship conflicts at a critical stage of their relationship (Sar et al., 2010).

Specific research findings are detailed in the table below.

Positive Effects on Fathers
<ul style="list-style-type: none"> • Father participation in home visiting programs is associated with improved father-child engagement and maternal and child health (Holmberg & Olds, 2014).
<ul style="list-style-type: none"> • Fathers who received home visiting services (Parents as Teachers and Early Head Start) enhanced with an intervention that focused on increasing father involvement engaged in greater verbalizations with their child and reported lower risk on both physical child abuse and neglect scales (Guterman, Banman, & Bellamy, 2017).
<ul style="list-style-type: none"> • Utilizing father-inclusive practices for new fathers with timely, relevant information about breastfeeding, postnatal depression, and developmental milestones for their baby may reduce paternal perinatal anxiety and increase coping skills (Tohotoa, et al., 2012).
<ul style="list-style-type: none"> • Fathers who participated in a UK Family Nurse Partnership home visiting service reported that the intervention helped them deal with their anxieties about how to care for their infant and helped them build their confidence in parenting (Ferguson & Gates, 2013).
<ul style="list-style-type: none"> • Fathers who participated in the Healthy Families New York home visiting program were more likely than non-participants to be present in the home at the 6-month follow up even if they were not present at the initial engagement point. Additionally, partners who lived at home at follow up were more likely to be viewed by mothers as emotionally involved (McGinnis et al., 2018).
<ul style="list-style-type: none"> • Home visiting potentially provides an important opportunity for distressed couples to get assistance with conflicted relationships and communication at an early and critical stage of their relationship (Sar et al., 2010).
<ul style="list-style-type: none"> • Children’s participation in Head Start is associated with increased levels of social involvement with their nonresident fathers (Haralampoudis et al., 2021).

Effects of Paternal Depression

Paternal mental health barriers limit father involvement in children and families. Approximately 10% of fathers experience postnatal depression and this rate increases to nearly 50% when mothers are experiencing depression (Paulson & Bazemore, 2010). Paternal depression decreases the number of positive interactions between father and child and increases the risk of childhood psychopathology. It also increases the risk of maternal depression, parenting stress, and intimate partner violence.

Specific research findings are detailed in the table below.

Effects of Paternal Postnatal Depression on Fathers

- Approximately 10% of fathers experience postnatal depression and this rate increases to nearly 50% when mothers are depressed (Paulson & Bazemore, 2010).
- 16% of fathers experience prenatal anxiety and up to 18% suffer from postnatal anxiety (Leach et al., 2016).
- Fathers who experienced adversity in their childhood from parents, a caregiver, or a role model may experience anxious or depressive feelings during pregnancy (Skjothaug, Smith, Wentzel-Larsen, & Moe, 2014).
- Father attachment anxiety contributes to depression in the postnatal period through perceived paternal incompetence and role restriction (Psouni et al., 2020).
- Fathers who reported symptoms of depression were rated by Early Head Start (EHS) staff as having poorer relationships with their EHS home visitors, less participation in the EHS program, and less engagement with their child (Roggman, Boyce, Cook, & Cook, 2002).
- Although some symptoms are common across maternal and paternal postpartum depression (eg, depressed mood or loss of interest in activities), mothers are more likely to report sadness, and fathers are more likely to present with increased irritability, withdrawal, and alcohol or substance use (Walsh, Davis, & Garfield, 2020).

Effects of Paternal Postnatal Depression on Partners

- A father's untreated mental health challenge, such as depression or anxiety, will likely reduce the extent and effectiveness of practical support for the mother, for example, in sharing the care of a new baby (Psouni and Eichbichler, 2020).
- Mothers and fathers experiencing depression engage in less positive interaction with their children, with a particular reduction in the degree of enrichment interactions, including reading, telling stories, and singing songs (Paulson et al., 2006).
- Mothers and fathers are dependent on each other, especially after the birth of a child. In this way, maternal postpartum depression may be similarly affected by paternal postpartum depression and changes in the partner relationships across the transition to parenthood (Don & Mickelson, 2012).
- Mothers experiencing postpartum depression are more likely to experience less positive spousal support, which is related to lower relationship satisfaction and to greater paternal PPD (Don & Mickelson, 2012).
- Fathers' parental stress can affect maternal stress levels and influence neonatal birthweight (Wang, Huang, Lin, Au, & Chen, 2020).
- Paternal mental illnesses with externalizing behaviors, such as agitated unipolar depression, untreated bipolar disorder, or substance abuse, may influence the mother's well-being directly, through their associated erratic or antisocial behaviors, and indirectly through their impact on family living circumstance (Fletcher et al., 2013).
- Paternal binge-drinking behavior is associated with increased risk of intimate partner violence (IPV), which is linked to increased maternal depression and impaired parenting (Bailey 2010; Black 2011; Mumford et al. 2018).

Effects of Paternal Postnatal Depression on Children
<ul style="list-style-type: none"> Evidence now points to paternal depression being associated with decreases in the prevalence of positive father-child interactions such as play and infant-parent reading (Davis, Davis, Freed, & Clark, 2011).
<ul style="list-style-type: none"> Irritability and anger, common symptoms of depression, may be implicated in the increased likelihood of fathers experiencing depression spanking their 1-year-old children (Davis, Davis, Freed, & Clark, 2011).
<ul style="list-style-type: none"> Fathers experiencing depression in the early childhood stage of their child's life is associated with increased emotional and behavioral problems at 4-5 years of age for the child (Fletcher, Feeman, Garfield, & Vimpani, 2011).
<ul style="list-style-type: none"> Research suggests that paternal anxiety increases the risk of a child developing an anxiety disorder (Ramchandani et al., 2005) which may also lead to adverse impacts on future mental health outcomes (Liber et al., 2008).
<ul style="list-style-type: none"> Paternal depression in early childhood has been found to be associated with hyperactivity problems for young boys and emotional problems for young girls (Fletcher, Feeman, Garfield, & Vimpani, 2011).
<ul style="list-style-type: none"> Fathers with depression may be more withdrawn, displaying less verbal and behavioral stimulation during interactions with their young infants. They may initiate a pattern of parenting that remains compromised, potentially affecting their children's development (Sethna, Murray, Netsi, Psychogiou, & Ramchandani, 2015).
<ul style="list-style-type: none"> Parental alcoholism, often a symptom of parental depression, has detrimental effects on children, especially with regards to internalizing/emotional problems (Christensen & Bilenberg, 2000).
<ul style="list-style-type: none"> Children of depressed fathers are at increased risk for ADHD (Rydell, 2010), for depression and anxiety (Hetherington 2008), for antisocial behavior (Anderson, 2002), and for exhibiting behavioral and emotional problems in preschool (Fletcher et al., 2011; Ramchandani, et al., 2005).
<ul style="list-style-type: none"> In families with paternal alcoholism, sons had higher internalized depression and anxiety than daughters (Christensen & Bilenberg, 2000).

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