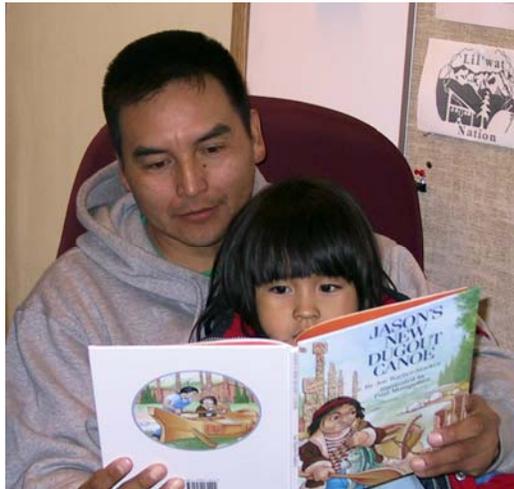


Fathers' Contributions to Children's Well-being

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Executive Summary

Links between mothers' health, literacy, and behaviours and their children's well-being are well understood and widely accepted. Canada, like many other countries, has made long standing investments in a national program for maternal and child health. Are there sufficiently clear links between paternal health, literacy, and behaviours and children's well-being to justify investments in securing father's involvement in supporting their children's health and development?

This report brings key lines of research evidence and ecological concepts of health to bear in thinking through the connections between father's involvement and children's well-being. The report encourages a broadening of viewpoints beyond linear research designs and practice models that focus on direct impacts of father's direct engagements with children: in addition to these approaches, we need to engage non-linear, systems approaches that recognize and measure impacts that fathers may have on the quality of environments for children's growth and development.

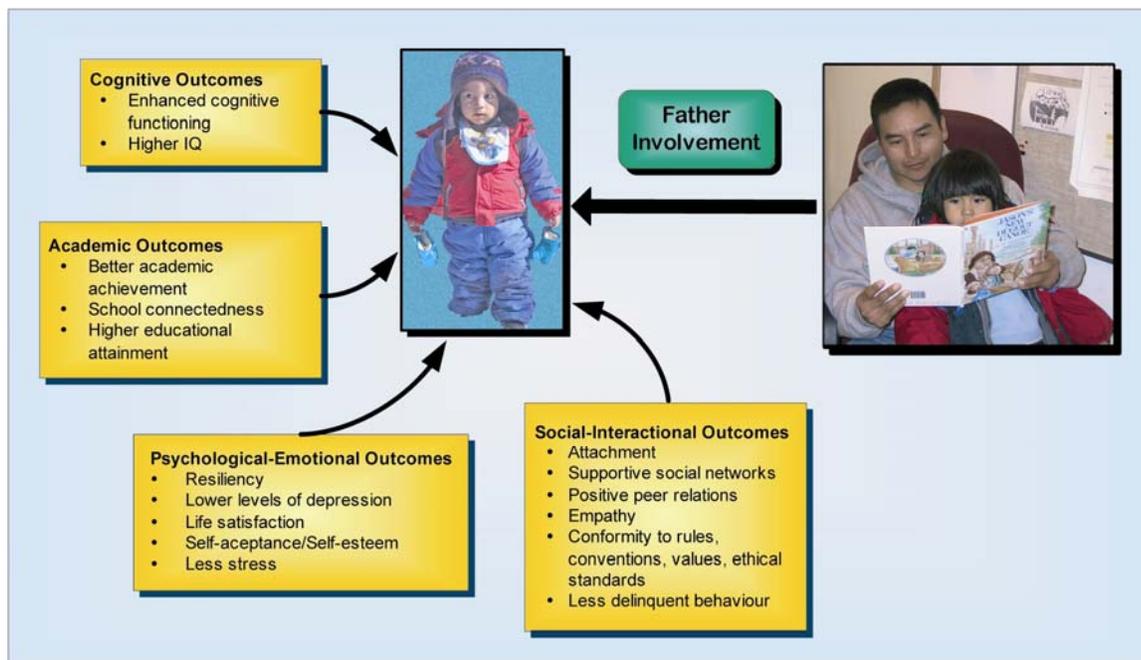
This report is intended to animate discussion about the importance of fathers to children in Canada, and to stimulate research and policy interventions that will effectively increase the visibility of fatherhood in thinking about how to promote child and youth health. The report provides a rationale for programs to encourage, prepare, support, and intervene with fathers, with the goal of optimizing the potential of fatherhood as a critical contribution to help children thrive.

Introduction

Most practitioners engaged with families take it for granted that it is a good idea to try to involve fathers in children's education, recreation, and health care. However, the idea that a planned and supported set of policies and programs to secure father's involvement could be an effective strategy for promoting child health is not yet a strongly held view in public health policy, health promotion and education, child and family services, including child welfare policy and practice, or in medicine. These fields continue to be dominated by a focus on maternal well-being and maternal behaviours as the critical link to child health and development – a view that could be characterized as a 'mothercentric' perspective or bias.

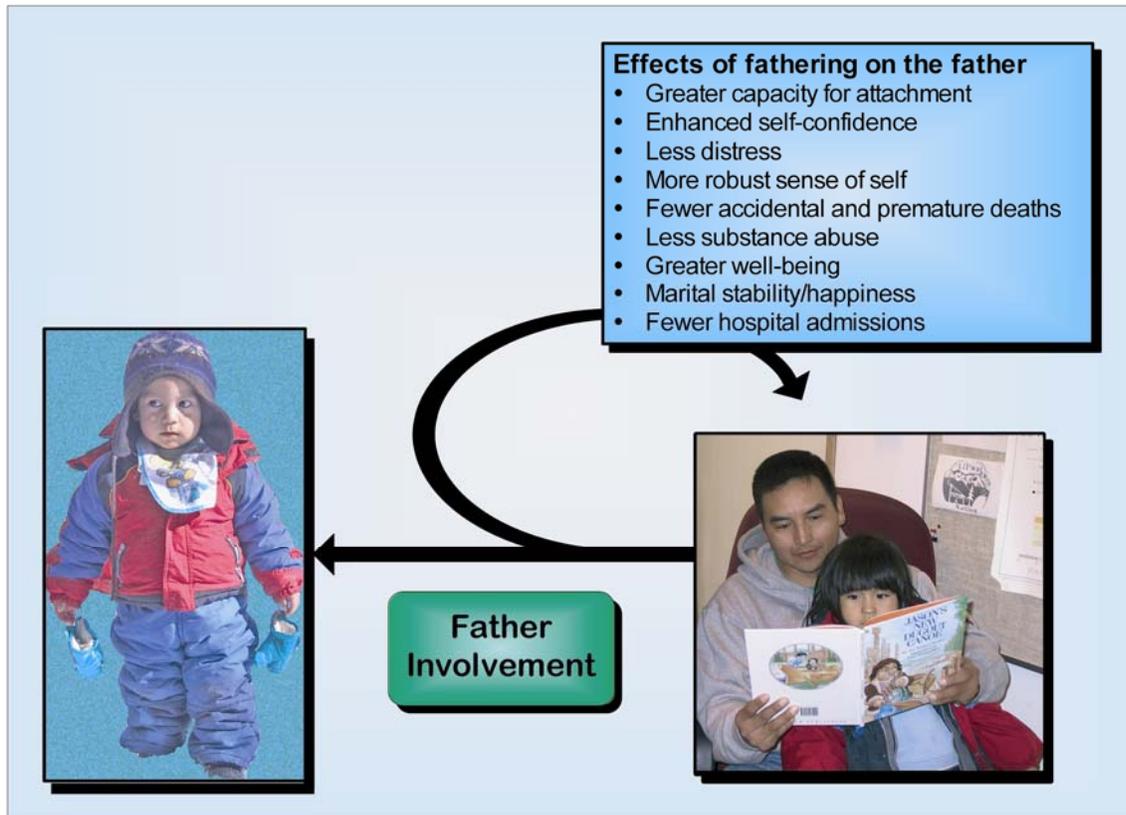
Considerable research effort has worked to tease out the relative contributions that fathers make to outcomes for children. Accumulated evidence supports hypothesized roles of father's involvement in outcomes for children. Summarizing research on father's involvement, Allen and Daly (2002) identified evidence of a range of impacts on child development, and Ball and Pedersen (2007) identified evidence of impacts on health (Figure 1).

Figure 1. Evidence of Direct Effects of Father's Involvement on Child Well-Being



Father's involvement has been found to have a salutogenic effect on father's well-being.

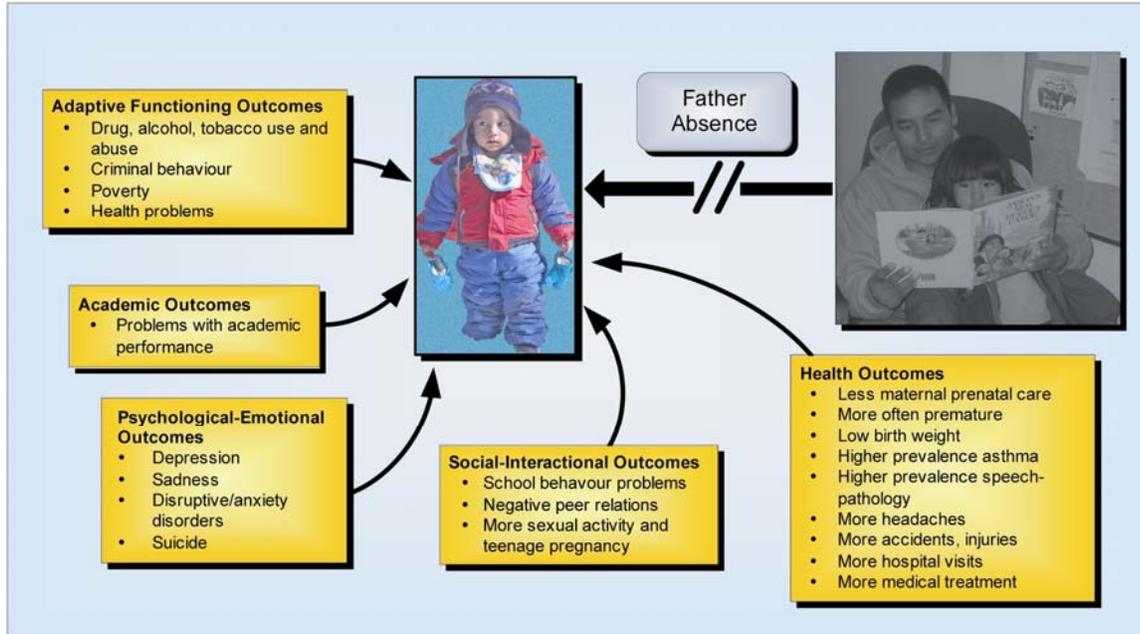
Figure 2. Evidence of Direct Effects of Father's Involvement on the Father



Absent and non-co-resident fathers

There now is a large literature on the effects of single parenting on child development, and more specifically on the effects of father absence on child development. Taken as a whole, this body of research suggests that children raised in single parent families are at risk of sub-optimal developmental outcomes. For example, research shows that, as a group, these children are twice as likely to drop out of high school, twice as likely to have a child before they are 20 years old, and 1.5 times as likely to be unemployed in their late teens and early twenties (McLanahan & Sandefur, 1994). They are more likely to become single parents themselves or to become parents outside of marriage (Booth & Crouter, 1998).

Figure 3. Evidence of Direct Effects of Father’s Absence on Child Well-Being



Direct links between fathers and child health

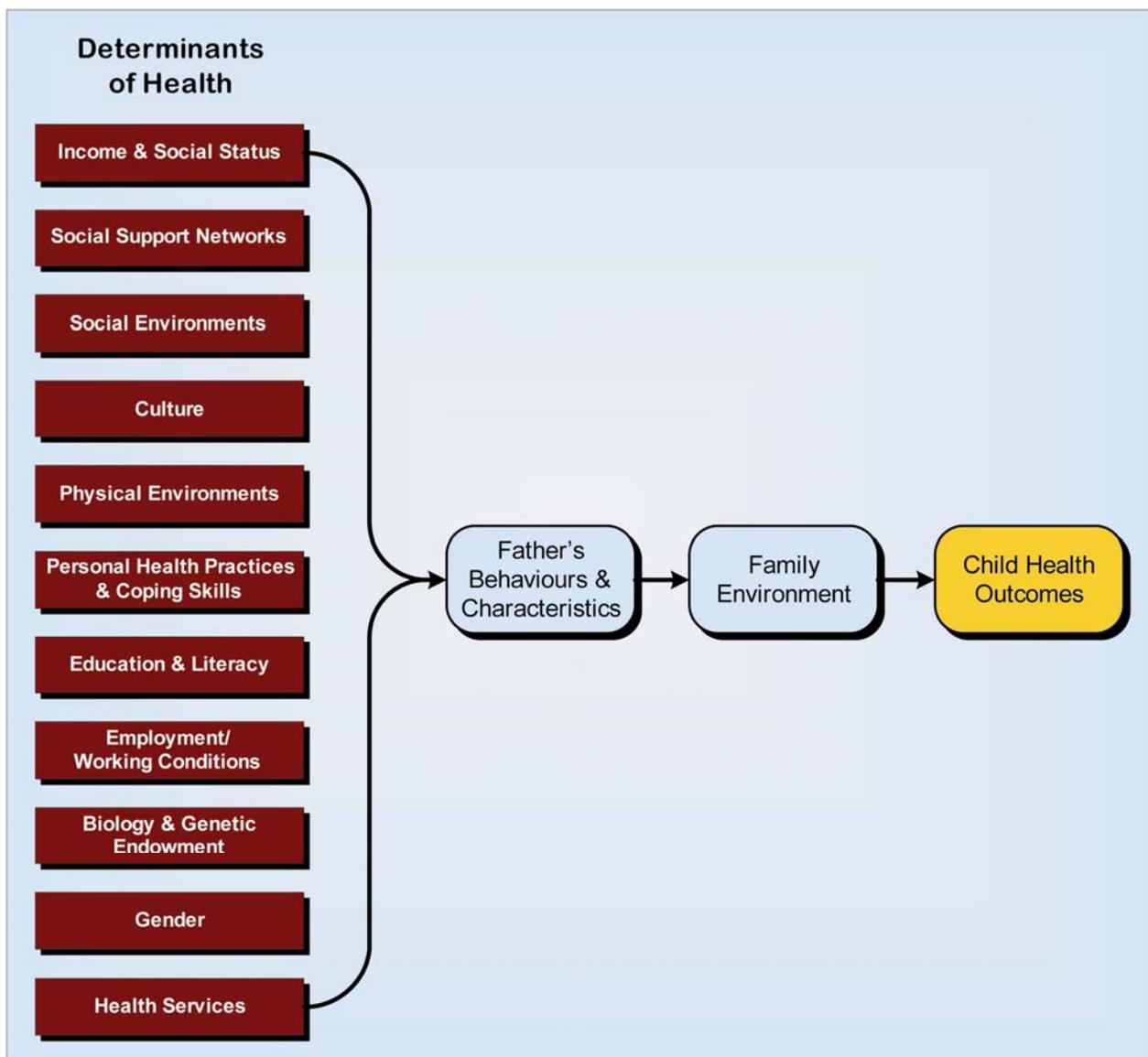
Proportionately more research effort has been aimed at assessing the impacts of father’s involvement on child development, functioning and quality of life than on child health (Horn & Sylvester, 2002; Lamb, 2004). However, research has shown links between fathers’ presence in the home and child and youth mental health, as well as the propensity of children and youth to engage in health risk behaviours and to be injured and hospitalized. Reflecting a ‘*medical model*’ perspective about what determines a child’s mortality, morbidity, and general well-being, research on child health outcomes has tended to be narrowly focused on direct, often material or biological inputs to health, while measures of health have tended to be restricted to mortality, morbidity, health risk behaviours, and injuries. *Indirect* contributions that fathers can make to child health remain under-conceptualized and have yet to be explored through multi-level, multivariate research informed by an ecological or holistic view of the determinants of health.

Linking father’s involvement to ecological determinants of child health

Understanding how fathers can contribute to children’s health calls for a conceptual model linking child health to a broad array of ecological determinants of health (Earls & Carson, 2001). A child’s opportunities for healthy development during their formative years are aspects of a child’s environment. The quality of the child’s environment is affected by such factors as family income, the availability of social support for the child and the family unit, the availability of opportunities to become literate and to explore the environment, and the quality of interactions among family members including such characteristics as affection, violence, guidance and discipline. Establishing a rationale for investments in father-child engagement requires research that assesses indirect and reciprocally causal effects of father’s economic contributions, cultural teachings, efficacy in generating social support for the family unit, and other indirect determinants of health.

In Canada, definitions of health include an individual's capacities to be productive and to enjoy life, while definitions of 'development' now encompass such dimensions as social competence, affective engagement, creativity, and resilience (PHAC, 2003). Dubeau has reviewed Canadian studies on the role of father's involvement on child and family well-being and comments that a population health approach allows "us to go beyond the traditional indicators of mortality and morbidity and move towards indicators of well-being and adjustment among children and parents" (2002, p. 26). Given broad definitions of health, there is clear potential for future research to document how father's involvement directly effects, or mediates, between determinants of health and child health outcomes (see Figure 4).

Figure 4. Mediating roles of fathers linking health determinants to child outcomes



The following examples map pathways between fathers' engagement in domains conceived as determinants of health and child health outcomes.

- In the population health model adopted by PHAC, 'education and literacy' constitute a major category of determinants of health. Fathers may influence their children's access to quality early childhood education, schooling, extracurricular educational opportunities, and media. In turn, these opportunities for education and literacy may influence children's health outcomes.
- A father's ability and efforts to generate income for the family affect the family environment for the child along dimensions including adequacy of housing, food, supervision, equipment, lessons, stress, conflict, leisure activities. These aspects of the children's quality of life contribute to health outcomes (e.g., nutrition deficits, obesity, respiratory infections, injuries, etc.).
- Research has shown that youth who are close to their fathers are more likely to abstain from substance use. Substance use is an example of a major category of health determinants referred to as 'personal health practices and coping strategies.' Thus, positive father's involvement is seen to promote a positive health practice and coping strategy in youth, resulting in lower risk of negative health outcomes for the youth.
- Research has shown that when fathers are more involved in their child's school, children are more likely to do well academically.

As Evans (2004) points out, measuring father's involvement at all, as separate from 'parenting' effects, is a relatively new science. Methodologies for further defining fathers' indirect contributions to child health are a priority for future research.

Expanding research to assess father's instrumentality in pathways to child health

Enhancing the visibility and importance of fathers within policy frameworks that target child health and development requires concepts and measurements of fathers' contributions to children's well-being that include but extend far beyond fathers' direct interactions with their child or other family members (e.g., co-parents). Conceptual and empirical frameworks that are sensitive to fathers' roles in child health need to encompass the ways that fathers affect the quality of the child's environment for survival, growth, health, and development, as well as the quality of the family environment in which the child is embedded.

Fathers' behaviours and personal characteristics contribute (positively or negatively) to family income, family social status and stability, opportunities for children to access health care and education, availability of social support, and other aspects of the ecology of the child. As illustrated below, these aspects of the child's environment have been linked conceptually and through some research to children's health status and health trajectories as they grow and develop.

- Research has shown that the impacts of stress on health are mediated by the availability and personal use of social support. It could be argued that a key contribution that fathers make to

child health is through their income generation, their work to secure access to learning opportunities from preschools to trade school to university education, and their activities outside the home which function to connect the family to sites for social support within the community (e.g., recreation, leisure activities, formal and non-formal social organizations).

- Wadsworth found that family's socioeconomic status relates to a child's opportunities for education (Wadsworth, 1991), which is associated with a child's growth (Kuh & Wadsworth, 1989), and with future occupation and income (Montgomery, Bartley, Cook, et al., 1996). What is the role of the father in determining the family's socioeconomic status?
- Montgomery, Bartley, & Wilkinson (1997) found that family stress and conflict is associated with reduced growth in childhood, and Sweeting and West (1995) found that family stress and conflict is associated with poorer health, lower self-esteem and less psychological well-being among adolescents. What are the roles that fathers play in shaping the emotional climate, conflict, and conflict resolution with a family?

Theoretical frameworks

A large body of research has shown that the underlying factors that determine health and well-being are deeply embedded in social circumstances, including social support, socio-economic status, psychosocial conditions, and availability of materials resources, access to health services, and so on. Several theoretical frameworks describe reciprocal causal relationships between families and macro-system conditions, and between children's environments and child health. What are the roles that fathers play in shaping the social circumstances, or quality of environments, in which their children grow and develop, and in turn how do these circumstances affect children's health trajectories across their life span?

Father's involvement can be incorporated into a number of existing theoretical frameworks in order to generate hypotheses about the roles of fathers in directly and indirectly influencing child health. Particularly promising for embedding concepts linking father's involvement to child health are the ecological theories advanced by Bronfenbrenner (1979), Hertzman and Siddiqi (2000), Schor and Menaghan (1995), and Wadsworth (1999). Research is now needed to explore the pathways for fathers to influence their children's health, the potential strength of these relationships, and factors that can moderate and confound these relationships.

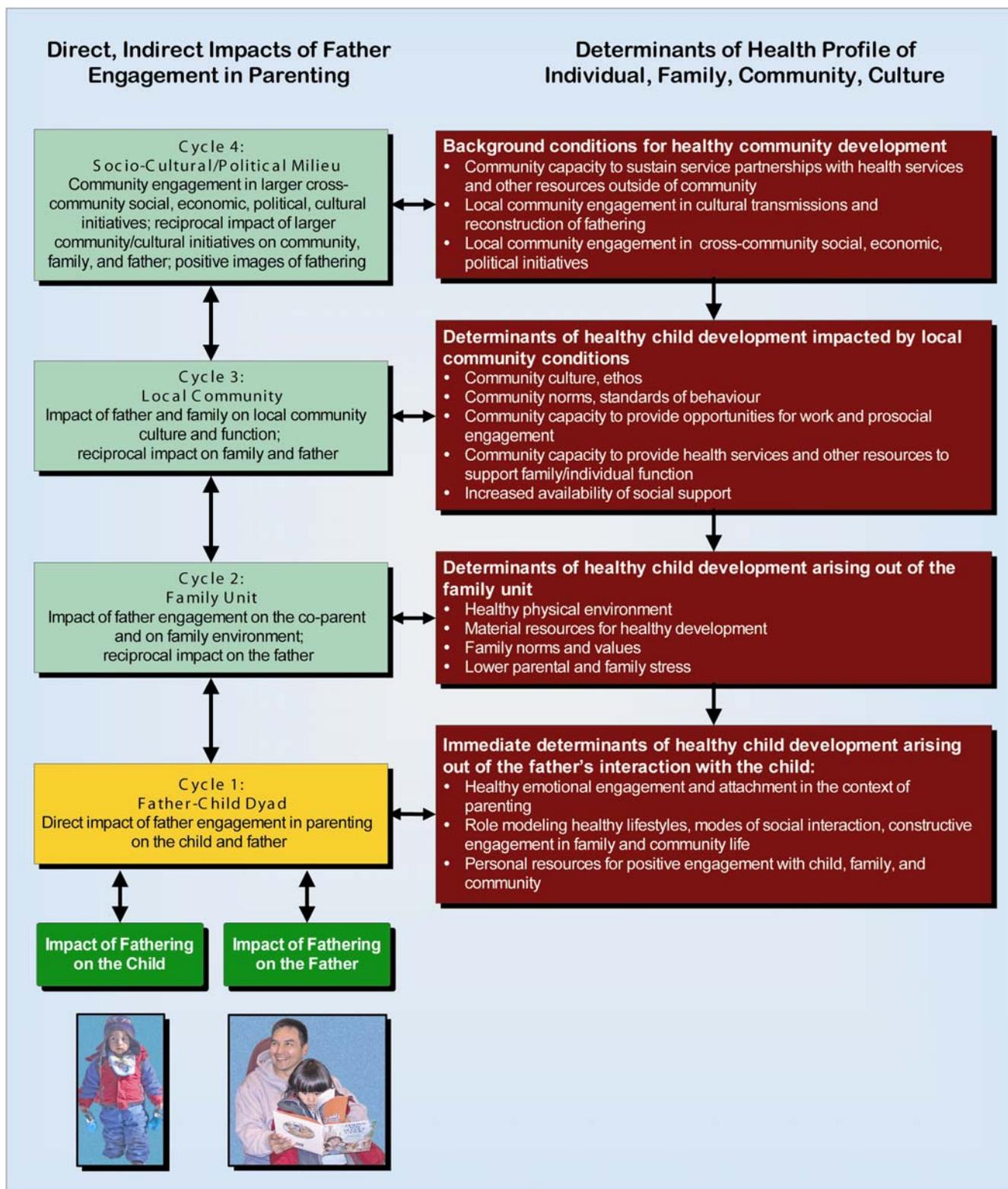
From an ecological perspective, child health is affected by multiple mesosystems, including the family, which in turn affect each other and also affect and are affected by the microsystem, exosystem, and macrosystem in which the child is embedded and with which he or she interacts. Everything is connected by varying degrees of proximity to everything else in a holistic system of child/human development.

To the extent that they are perceived to be involved in some way with their child, fathers are a part of the child's micro system. Fathers can influence the child's micro system by the quantity and quality of their interactions with the child and other family members. Cultural views of fatherhood and family roles and interactions, as exerted through a cultural macro system, also affect whether and how a father is engaged with his children and family.

Father's involvement exerts an influence on each of these levels of society. For example, at the macro level, the trend of fatherlessness in some societies constitutes part of the structure of opportunity created by history – reflected in the observation that there is a tendency for father absence to repeat in future generations (Snarey, 1993). The presence or absence of a father's financial support has a significant effect on family/household income thereby contributing to income inequalities which in turn are reflected in national wealth and income distribution. At the micro level comprised of the family and personal support network, the effects of father's involvement on the family are the subject of an increasing body of literature (Allen & Daly, 2002; Horn & Sylvester, 2002; Lamb, 2004).

Interactions between father and family and the larger environment, and outcomes resulting from these interactions, are reinforced, repeated, and realized over the life course as a child grows into adulthood and eventually becomes a parent him/herself. Father's involvement can thus be construed as an important indirect determinant of health through connections to, and pathways between, father's involvement and health status (Figure 5).

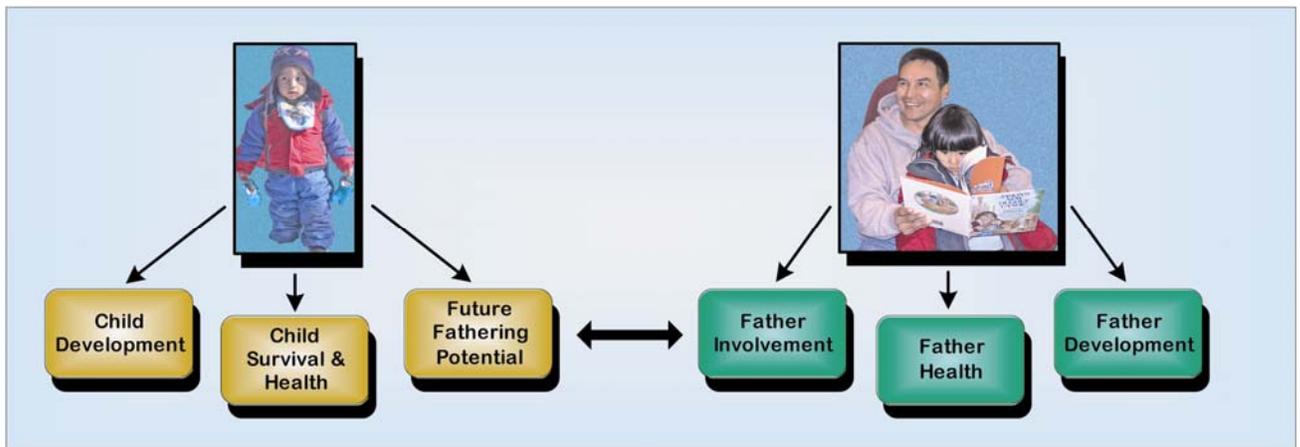
Figure 5. Reciprocal links among health determinants and outcomes of father's involvement



Summary of outcome domains associated with father's involvement

Father's involvement has been shown in research to have the potential to impact child development, child survival and health, and the child's emerging capacity to become an effective parent for the next generation. Father's involvement has also been seen in some research to have salutogenic effects on aspects of father's health and development. Research also suggests that father's involvement is self-reinforcing; the more fathers are involved, the more satisfaction they report, the more they learn about being an effective father and enjoying it, and the more likely they are to sustain involvement with their growing child.

Figure 6. Outcomes Associated With Father's Involvement



Conclusion

This report highlights findings of research showing direct impacts between father's involvement in families and with their children in ways that are linked to child well-being. Further, the report offers a conceptual framework and evidence from research pointing to father's contributions to children's well-being through their interactions with social institutions outside the family that create many of the conditions that are considered to be key determinants of health. This report contributes to the rationale for social and health policies and programs to recognize and reinforce diverse pathways for fathers to contribute to children's health and development.

Anticipated developments in conceptual and measurement tools will further increase the sensitivity and responsiveness of child and family health research, policies and programs to the contributions of that fathers can make to securing children's survival, health and development.

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