

Insights

Making Fathers Visible in Maternal and Child Health

Involved fathers give children a better chance of leading happy and fulfilling lives. From cognitive and social emotional development to education and employment accomplishments, children with involved fathers achieve better outcomes on [nearly every measure of child well-being](#). Father involvement is also linked with improved mental health and well-being for moms. Yet despite fathers' positive impact on maternal and child health, many of the systems intended to serve women and children were not designed with fathers in mind.

Empowered Fathers Have a Big Impact

David Armstrong and his wife became sole guardians for their grandson, DeAndre when he was 10 years old. Significant early childhood trauma stemming from gang violence, poverty, and domestic violence had affected DeAndre's early development and left him struggling in school.

Confronted with an overly complicated system, Armstrong set out to learn about his rights as a caregiver, arming himself with knowledge so that he could advocate for DeAndre to receive and benefit from the services he was eligible for. Because of his grandfather's efforts, DeAndre attended a therapeutic school specializing in behavioral health. He graduated from high school with his class and attends a trade school for diesel mechanics.

Thanks to his grandfather's advocacy, DeAndre can pursue the future he wants.

[Read their full story.](#)

"Historically, the systems that serve families were not intended to serve men," says NICHQ Senior Project Director Kenn Harris. "Maternal and child health programs are now actively seeking to include fathers in programmatic work, but the historic exclusion of fathers has left a legacy of mistrust that needs to be addressed. This is especially important among fathers from low-income communities and communities of color, whose mistrust is exacerbated by

discriminatory practices, incarceration and structural racism when we think of these particular men.”

Addressing this history of exclusion requires first recognizing it, and then taking measured steps to redesign maternal and child health systems to support fathers. Doing so will facilitate fathers to become engaged, responsive, and supportive allies for maternal and child health and wellbeing.

Recently, Harris and David Armstrong, a certified facilitator for the National Fatherhood Initiative, shared strategies for increasing father involvement in early childhood programs with teams participating on the NICHQ-led Early Childhood Comprehensive Systems Collaborative Improvement and Innovation Network ([ECCS CoIIN](#)). Funded by the Health Resources and Services Administration Maternal and Child Health Bureau, this multi-year initiative seeks to improve early childhood service systems to increase age-appropriate developmental skills among 3-year-old children and reduce developmental disparities.

Opportunities to Better Support Fathers

Develop a support network that empowers fathers in every aspect of their lives

“We can’t make sure our systems fully support fathers unless we look at them in the context of their surroundings—their families and their communities,” explains Harris. Employment and education opportunities, father-focused community events, father-friendly workplace policies—these are just a few of the many factors affecting father involvement. By identifying the places fathers need support, public health and social service providers can work to build a comprehensive network that strengthens fathers in every aspect of their lives.

Developing this network depends on partnership: partnership between the many different services and programs that already exist and can support fathers; and partnership with fathers, themselves, who can guide system improvements.

Too often, health and social services work in siloes, which makes it difficult for families to know about and access the supports those services provide. Fathers, in particular, are vulnerable to falling through the cracks because many of those services weren’t designed to include them in the first place. That’s why it’s important to engage multi-sector partners—health, education, housing, employment, local government—in discussions about how to break down siloes and, in turn, better empower fathers on behalf of themselves, their family, and their community.

Importantly, fathers need to co-lead these conversations. After all, fathers best understand what difficulties fathers face when navigating systems and can propose informed solutions. “We [fathers] are part of our family and community structure; we aren’t add-ons,” says Armstrong. “We need to get rid of that stereotype and move to make fathers more involved in the process of co-designing systems.”

Practice intentional inclusion in maternal and child health programs and organizations

“It’s challenging to move from exclusion to inclusion with fathers. Just because the door is open, that doesn’t mean he is going to walk through it,” says Harris. “That’s why maternal and child health programs need to work to establish connection and build trusting relationships with fathers.”

A big part of building trust is practicing inclusion—showing fathers that they are valued, needed, and respected. Harris and Armstrong suggest intentionally examining your program or organization’s policies and structures by asking the following questions as a simple (or quick) assessment.

- Do you offer a “father-friendly” environment? Are there positive messages around your office that are reflective and reinforcing about fathers?
- Have you assessed the “attitude” of inclusion of fathers in your program? Are all staff aware that fathers are valued?
- Do you have training in place to support and empower father engagement?
- Is your program ready to engage fathers as partners in its work? Do you include fathers on advisory committees and in focus groups?
- Do you have policies in place to support father involvement, partnership and engagement?

By intentionally considering and responding to these questions, maternal and child health programs and organizations can ensure fathers are visible and their perspectives are valued.

In summary, practice the four E’s, says Armstrong. “**Engage** me on my level; **educate** me on services that are available and also let me co-design those services; **empower** me to be a strong advocate for the services available for children; and **encourage** me to be a voice for change.”

Interested in learning more about opportunities to engage fathers in maternal and child health? In [this article](#), NICHQ president and CEO Scott D. Berns, MD, MPH, FAAP, shares three opportunities.