

Insights

Fathers: Powerful Allies for Maternal and



“Maternal and child health programs and

professionals have become increasingly more cognizant of how fathers, specifically, affect their children’s health and development,” says NICHQ President and CEO Scott D. Berns, MD, MPH, FAAP. “Moving this conversation forward, and highlighting strategies that support father engagement and involvement, is a critical opportunity to improve children’s health outcomes in the decades to come. This is not because fathers matter more than any other primary caregiver; rather, it is because they *do* matter but there are barriers getting in the way of their involvement—barriers that can be overcome.”

Evidence demonstrates that fathers play a critical role in children’s health and development, beginning in the prenatal period and continuing through early childhood and adolescence. When fathers are involved during pregnancy, mothers [are 1.5 times more likely](#) to receive prenatal care in the first trimester, which has positive implications for both maternal and infant health. During infancy, fathers can support mothers in breastfeeding and in following safe sleep guidelines, both of which can reduce infant deaths. Fathers also play an important role in supporting children during early childhood, in terms of [executive function](#) and [social emotional development](#).

And during adolescence, father involvement translates to [better outcomes in school](#) and a [reduced risk](#) of teen pregnancies.

Yet, despite this evidence, fathers still [face significant barriers to involvement](#), including systemic obstacles related to employment, and a lack of confidence stemming from social stereotypes about the expected role of a father—namely that their role is somehow secondary to the mother's.

Just as this article focuses on engaging fathers, NICHQ urges public health professionals to seek solutions that support all caregivers: mothers, fathers, step-parents, grandparents, siblings, aunts, uncles, and the many other members of the diverse family structures that nurture children.

“The mother-child dyad is an incredibly powerful and nurturing relationship,” says Berns, “And the special relationship with fathers matter too. I don’t think any of those of us working in maternal and child health intend to undervalue or reduce the father’s role, but sometimes this is an unintended consequence of prioritizing the mother-child dyad. Right from pregnancy, we can take steps to change that, and better support dads as powerful allies in both mom’s and baby’s health outcomes.”

Empower fathers as advocates for their children’s health

“I think many fathers know they’re important and their presence matters,” says Berns. “But we should do more to impress upon them just how big of a difference they make—not that they are just a supportive addition but that their actions and attitudes really will affect the lifelong health of their children. Intentionally talking to fathers about their impact and what they can do at every stage of their children’s lives will empower them as champions for children’s health and well-being.”

For example, Berns points out that health professionals can empower new dads by describing what they can expect after birth, how to support both mom and baby at home, and ways to bond with their new baby. Engage fathers in conversation about safe sleep guidelines and have them practice putting their baby to sleep safely. Talk with fathers about how they can help moms who are breastfeeding, such as learning how to recognize when their baby is hungry and helping moms get much needed rest. [Recent research](#) also shows that when fathers practice skin-to-skin care, where the father holds the baby closely against his bare chest, it can support the health of the baby and facilitate father-child bonding—health professionals can help fathers practice this in hospitals immediately after birth.

Similarly, during well-child visits, pediatric health professionals can engage fathers in conversations about safe sleep, breastfeeding, father-child bonding, and early childhood development. Describing how fathers, specifically, can support children’s cognitive, social, and emotional development is essential, adds Berns. This shows that their role is additive from moms, and has real impact.

Critically, these conversations can happen in the community as well as during hospital and healthcare visits, says Berns.

“We need to provide fathers with as many touchpoints as possible, which is why partnering with community sites and organizations is so important. We see this in both our infant and early childhood improvement efforts. Consider how Arkansas’ health department activated men as safe sleep champions by [partnering with fraternities](#); or how [Oklahoma transformed a local barber shop](#) into a site for early childhood learning and parent education. These innovative solutions are elevating fathers, grandfathers, uncles, and men in their communities as children’s health advocates.”

Pursue system changes that support father-involvement

System improvements, both small and large scale, can also encourage father involvement, says Berns. For example, while both mothers and fathers often work full-time jobs, mothers are still generally the [primary parent attending well-child visits](#), which means many fathers often don’t spend as much time with their pediatric provider—a critical resource during those early years. Creatively thinking about the well-child visit can help pediatricians better engage and empower fathers.

“Offering office hours outside of regular work hours, asking families to try to find times when all caregivers can attend when scheduling visits, including working partners through video chat, developing father-focused resources that can be sent home, and sharing information on father-support groups during the well-child visit—these small process improvements can go a long way towards preparing all caregivers for parenthood,” says Berns.

At the state level, health professionals and advocates can work to support paid family leave, so that both mothers and fathers are guaranteed time with their newborn during those critical early months. Giving fathers dedicated time with their children immediately after birth provides the foundation for a healthy father-child relationship and ultimately [improves outcomes for children](#).

Include fathers in two-generation approaches

Leveraging two-generation strategies that account for the needs of fathers will support the health of children. After all, we know that a child’s health is inextricably linked to the health of his or her caregivers—this means mothers *and* fathers.

“We can’t think of the dyad as just mother-child. It needs to be the caregiver(s)-baby dyad,” says Berns. “Supporting families holistically means thinking about fathers, and specifically what might be adversely affecting their health.”

One father-focused two-generation approach is to screen for paternal depression, as well as maternal depression, during well-child visits. Fathers have a [nearly 5 percent risk of paternal depression](#) during the postnatal period, and that risk increases over the [first five years](#) of a child’s life. Like maternal depression, paternal depression is associated with adverse developmental outcomes for children, especially if the mother [is also depressed](#), which means screening fathers and referring them to supportive services may improve both paternal and child outcomes. Similarly, pediatric health professionals can talk with fathers about other social determinants that influence health outcomes, such as their employment, housing stability, and alcohol and drug use.

“As a dad, I know what it feels like to think about the things you missed and wish you’d found more ways to be involved,” says Berns. “We can do more to help fathers and children benefit from rewarding father-child relationships. Dads deserve a health system that encourages their involvement, and children deserve every possible ally in their lives.”

Interested in hearing more from Berns? Read his [recent article](#) exploring why kindergarten readiness begins prenatally.