Working with fathers to improve children's well-being: Results of a survey exploring service provision and intervention approach in the UK ☆

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ABSTRACT

Interventions for fathers are a recent growth area in family services. Although some specific approaches are beginning to be evaluated, there is little known about what kinds of interventions are more generally being used in practice. A web-based survey of practitioners was conducted in the UK, with contact being made via local authority service managers. Two hundred and twenty-one responses were received from 53% of local authorities. Both interventions specifically for fathers and services for both parents were targeted in the survey. Results are reported on organisational location; targeting of services; type of intervention; numbers and percentages of men attending services, recruitment of fathers; evaluation strategies; and ideological and theoretical approaches. Numbers of fathers engaged are relatively low – e.g. the median annual number of fathers attending structured parenting courses was eight and in courses for both parents, 21% of those attending were men. Responses on ideological and theoretical approaches suggest that overt gender politics play only a small part, but that the dominant views of practitioners are in line with mainstream approaches to parenting support. Cognitive and behavioral approaches were the most popular.

1. Introduction and background

There is little doubt that fathers matter for the welfare of children and adults. Many studies show conduct problems in children to be associated with anti-social characteristics, substance misuse and depression in fathers (Phares, Rojas, Thurston, & Hankinson, 2010). More optimistically, father involvement may protect against adverse outcomes later in life. For example, Flouri and Buchanan's (2002a,b) analysis of data from the UK National Child Development Study found that father involvement when a child was aged 7 predicted lower levels of emotional and behavioral problems in adolescence and less involvement with the police for boys. Furthermore, father involvement at age 16 predicted diminished psychological distress at age 33 for women (Flouri & Buchanan, 2002c).

For child and family services to make a dedicated effort to work with fathers is a relatively recent phenomenon. Following criticism that

services have been too geared towards the assumption that mothers will be the main adult clients (e.g. Parton & Parton, 1989; Strega et al., 2008), in the last couple of decades there have been some moves towards greater inclusion of fathers in various different kinds of family services. In recognition that modern families include a range of different relationships beyond the biological link of father to child, here the term 'fathers' is used inclusively, to encompass step fathers, adoptive fathers and all kinds of social fathers in addition to biological parents.

The field of fathers' intervention research is under-developed, but some recent reviews indicate that there is a small emerging body of evidence about intervention effectiveness (Bronte-Tinkew et al., 2007; Magill-Evans, Harrison, Rempel, & Slater, 2006; McAllister, Burgess, Kato, & Barker, 2012; Philip & O'Brien, 2012; Smith, Duggan, Bair-Merritt, & Cox, 2012). Very little of this evidence derives from experimental or quasi-experimental studies and few randomised controlled trials are specifically powered for father-related outcomes. A rare example is the study by Cowan, Cowan, Pruett, Pruett, and Wong (2009); a three-arm trial ($n = 289$ couples) comparing a couples' group with a fathers group and a one-off information session as a control condition. Participation in either intervention group led to improvements in fathers' engagement with children, the quality of couples' relationships, and children's behavior problems. More long-term and positive effects were found in those who attended the couples' group.

There is a larger body of evidence about the effectiveness of parenting interventions, many of which are open to fathers and mothers. Generally, attendance at parent training is much lower for men than for women. Lindsay et al.'s (2011) study of parents attending one of five evidence-based parenting programs in England found that only 15% of parents attending programs were male. There is a mixed picture in terms of father-related outcomes. Some studies paint an optimistic picture for father engagement. Lundahl, Tollefson, Risser, and Lovejoy's (2008) meta-analysis found that programs involving fathers as well as mothers were more effective than those for mothers only. However, in contrast, there is also evidence that fathers gain less from these interventions than mothers. For example, Nowak and Heinrichs's (2008) meta-analysis of studies of Triple P, one of the programs with the strongest international evidence base, found fathers reporting lower levels of improvement than mothers or children's teachers for parenting, parental well-being and child problems. Wilson et al.'s (2012) systematic review of Triple P evaluations concluded that child outcomes reported by fathers were not significantly different in intervention and control groups.

Social interventions for fathers are contested territory and ideological debates can be fierce between feminist and men's rights perspectives. Fault lines are drawn between, for example, those who emphasise the on-going harm caused by violent fathers after separation from their partners (e.g. Harne, 2011) and those who instead emphasise the importance to children of on-going contact with both parents in almost all family circumstances (e.g. the UK organisation Families Need Fathers). The strongest gender politics positions in the field of work with fathers are the opposite poles of prioritising fathers' rights or focusing on men's abuse of women. Distinctions can also be made between rather weaker gender politics positions, however; for example where practitioners emphasise fathers' own needs or in contrast see the main reason for intervening with fathers as making life easier for mothers.

The fraught gender politics in this field are apparent from the authors' experience of attending practice-related conferences on the theme of work with fathers. Moreover it can be seen from overviews of the field such as that by McAllister et al. (2012) that there is a range of different approaches available for providing help and advice to men on their fathering. However, there is no evidence from research to date about what kinds of approaches are commonly used in practice or what kinds of services (e.g. fathers only or all parents, universal or targeted) and what kinds of organisations (e.g. public sector or voluntary sector) are more likely to use which kind of approach. Insight into what kinds of interventions practitioners are routinely using in their work with fathers is arguably necessary before any strategic discussion can be had about what developments are needed in future to improve practice.

In the light of this specific lack of evidence, the study reported in this paper attempted to establish what kinds of services were being provided in the UK that were consciously attempting to engage with fathers. The survey covered practical information such as how many men are being worked with and strategies for recruitment of fathers, in addition to ideological justifications and intervention theory. The approach was rather similar to that taken by Scourfield and Dobash (1999), who mapped interventions for the perpetrators of domestic abuse in the UK.

2. Method

A Web-based survey was set up via www.qualtrics.com in October 2012. The survey included both fixed-response and open questions about services provided and their theoretical under-pinning and evidence base (see Appendix A). An email requesting participation in the survey was sent to heads of children's social care services in the UK (n = 162). More precisely, this included all local government administrative areas in England, Scotland and Wales and all of the integrated health and social care trusts in Northern Ireland. These organisations are the main commissioners of family welfare services. They have statutory responsibility for supporting children who are in need and protecting those at risk of significant harm, but commissioning of family support services can also include universal parenting help to prevent the development of family difficulties. The senior managers were asked to pass the email message on to 'a parenting co-ordinator or other relevant person' so that it would reach practitioners in their area. Eligible practitioners were those currently providing any service for fathers designed to improve the well-being of children. The first page of the questionnaire emphasised that this should include services which are used by fathers alongside mothers.

Further to sending the questionnaire to heads of children's social care services, two other email lists were used. Firstly, an email was sent to the mailing list of the Fatherhood Institute (http://www.fatherhoodinstitute.org/) inviting participation in the survey. This organisation describes itself as 'the UK's fatherhood think tank'. It has been the most prominent organisation in providing training and lobbying on the issue of father involvement in family services and has a mailing list of 7500, an unknown number of which are social welfare practitioners. This list was used because it was very likely to include practitioners with an interest in work with fathers. Secondly, the same message was sent to the email list of people attending a conference, attended by the first author, which presented a wide range of different parenting programmes. The advantage of this list is the breadth of different programmes represented. Most conference attenders were practitioners involved in running the majority of the most popular parenting interventions identified by Klett-Davies, Skaliotis, and Wollny's (2008) survey of English services. The sampling strategy was therefore a combination of probability sampling via children's social care services directors and non-probability sampling via the two e-mail lists. This combined strategy was used because there was some doubt as to how enthusiastically the children's social care services directors would distribute the questionnaires and the additional email lists were therefore used as back-up to increase reach and boost the sample size. The survey was open for just under a month and one reminder was sent to all Directors of Children's Services after three weeks.

It is, unfortunately, not possible to properly estimate response rate because the true populations of practitioners are unknown. Respondents were not asked how they had received the questionnaire, so it is not possible to determine the relative contributions of the three different recruitment routes to the sample achieved. It can however be reported that a total of 221 responses were received from 85 (53%) of the 162 local authorities. The median number of responses per authority was two. To establish whether there was any socio-economic difference between local authorities which responded and those which did not, an independent samples t-test was applied to data on the percentage of people of working age claiming Jobseekers' Allowance (because they are unemployed) in each authority. The test found no evidence of any association between response and claimant rate ($t = .53$, 160 d.f., $p = .60$), with a mean of 3.61% of claimants in authorities which responded to the survey, compared with 3.20% in authorities which did not respond.

The questionnaire covered types of services, numbers and proportions of fathers attending, organisational location, recruitment of fathers and evaluation. It was designed to take around 15 minutes to complete. There were also sections on rationale for working with fathers, referred to in this paper as intervention ideology, and the respondent's theoretical approach to intervention (i.e. their views on what kind of approach is most helpful). Seven options were given for intervention ideology. These were: improving fathers' attachment with children, improving the management of children's behavior, improving the wellbeing of fathers, taking pressure off mothers, preventing men's abuse of women and children and promotion of fathers' rights. This list of different motivations was

informed by the authors' experience of hearing practitioners discuss their approaches at conferences on work with fathers. The aim of improving the well-being of children was assumed to be shared by all practitioners so was not included in the list of rationales. There was an option of writing in an additional idea, although this could also be left blank. Respondents were asked to rank the seven options for ideology according to how important they were to the respondent as reasons for working with fathers.

Seven statements about intervention approach were presented in the questionnaire and respondents were asked to rate each one on a 7-point Likert scale: strongly disagree, disagree, somewhat disagree, neither agree nor disagree, somewhat agree, agree, strongly agree. These mapped on to different theoretical emphases within the field of social work and social interventions (see for example Payne, 2005): family systems, behaviorism, a cognitive approach, feminism, a psychodynamic approach, counselling and material help. A pragmatic approach was taken to devising the theoretical orientation statements. To limit respondent burden, the shortest list possible was used, covering a selection of different approaches that, in the authors' view, would be familiar to respondents. The questionnaire was piloted prior to distribution by a small group of colleagues outside of the research team who had a sound knowledge of the field of work with fathers.

The first stage of data handing was the cleaning of the dataset, which involved some additional quantitative coding where multiple choice questions had included an additional 'other' category. Descriptive statistics were produced on all quantitative data. Where survey questions generated only qualitative data, responses were sorted into coherent themes. The coding of the qualitative data was carried out by the first author who is an experienced social work educator and researcher. The Wilcoxon signed rank test was used to assess whether the apparent differences in the popularity of statements were significant. Sensitivity analyses were conducted, using the Wilcoxon rank sum test for independent groups, to assess whether ideology and intervention theory statements differed according to whether interventions were provided for fathers only or for both parents. The same test was used to assess evidence that gender politics (feminist and men's rights ideologies) varied by organisational status (public or independent sector) or whether or not services were universal or targeted on need.

To further explore respondents' preferences in ideologies and intervention theories, exploratory factor analysis was used to examine the underlying patterns. Initial examination of the correlation matrix between these preferences showed that there were varying degrees of positive associations between different items. We were interested in whether practitioners' preferences in their approaches working with fathers clustered around certain underlying patterns. For example, it was quite possible that behaviorist approaches may have tapped a somewhat different dimension than psychodynamic ones. Factor analysis techniques were well-suited to dealing with these kinds of data and to address if the observed correlations may have been explained by a smaller number of underlying dimensions or latent variables (Kim & Mueller, 1978).

Six of the seven ideology items achieved a correlation close to .3 with at least one other statement, indicating reasonable factorability. Additionally, the commonalities were all above .3, confirming that each question shared some common variance with each other question. Similarly, the seven questions on intervention theory also achieved a correlation greater than .3, with the communalities of five variables being higher than .7. The KMO (Kaiser-Meyer-Olkin measure of sampling adequacy) for intervention ideology was rather poor (.06). However, it reached .79 for intervention theory, well above the recommended value of .6. Furthermore, Bartlett's test of sphericity was statistically significant for ideology ($\chi^2 = 1350$, d.f. = 21, $p < .001$) and for intervention theories ($\chi^2 = 558$, d.f. = 21, $p < .001$).

3. Results

3.1. Organisational location

As can be seen in Table 1, the largest group of respondents (42%) were staff in Sure Start Children's Centres (England) or similar organisations in other UK nations such as Flying Start in Wales. These are area-based, multi-disciplinary and preventive family support initiatives for families with pre-school children, loosely comparable to Head Start in the USA. The next largest group (23%) was in the voluntary sector, a category which includes large national children's charities (e.g. Action for Children, National Society for the Prevention of Cruelty to Children), smaller local charities and local not-for-profit social enterprises. The third largest category of respondents (21%) was from local authority social services. These differ in organisation between the four nations, but essentially provide public child welfare, including social work services for children in need or at risk. The fourth largest group of respondents (10%) were in education services, including schools, followed by the Health Service as fifth largest group (6%) and criminal justice settings (prison, probation or youth justice) as sixth largest group (5%). The smallest category of just two respondents (1%) was from the private sector.

3.2. Types of services provided

Table 1 presents a summary of responses on types of services for fathers and the proportions of services that were provided for fathers only or for both parents. There is potential for confusion in this paper about the term 'both parents', as it might imply that both parents have to be present as a couple. To clarify, in this paper the term 'both parents' is used as short-hand for either-or-both parents; i.e. services for fathers and mothers, either separately or as a couple. Where services are described in the table as 'for mothers and fathers', they were actually attended by both types of parent and not just open to both. The term 'both parents' was not used in the survey questionnaire itself, but Table 1 relates to the survey questions about the percentage of parents attending services who are fathers (see Appendix A). It was possible for a respondent to give a different answer for each type of service in relation to which parents attended – e.g. structured parenting classes for mothers and fathers, but an unstructured support group for fathers only.

The most common services were structured parenting classes. Sixty-three per cent of respondents reported that they provided these classes and a large majority (85%) reported that they were provided for both parents. Next most common (62%) were practical activities for parents and children (including play), of which 62% were for both parents and 38% for fathers only. Unstructured support groups were provided by 47% of respondents. Sixty-one per cent of these were for both parents and 39% for fathers only. Twenty-eight respondents (13% of the whole sample) referred specifically to 'stay-and-play' sessions, either for the whole family or only for fathers with their children. Advice on employment and benefits was provided by 39%, and nearly all (91%) of these respondents provided this service to both parents. Finally, legal advice was provided by 20%, with 71% of these providing this advice for both parents and 29% for fathers only. The majority of respondents (63%) were offering universal services, i.e. services available to all families in a locality and not targeted on need (see Table 1). A further 29% were offering services to fathers/parents who are vulnerable or in need of support and only 8% were providing specialist services for fathers/ parents with complex needs.

There was some creative naming of projects, no doubt designed to appeal to men as non-traditional users of family services. Examples were Mantenatal; Men Behaving Dadly; Flat Pack Guide for Dads; Dad's Baby; and Dads, Lads and Lasses. Most of these interventions specifically for fathers seemed to be unique services devised by committed local practitioners. Some interventions were named several times,

Table 1
Services provided for fathers to improve children's well-being.

Type of service	n	% (of whole sample)	% (within service type)
Structured parenting classes	140	63	
For fathers only	14		15
For mothers and fathers	80		85
Data missing on which parents attended services	46		-
Practical activities for parents and children (including play)	137	62	
For fathers only	31		38
For mothers and fathers	50		62
Data missing on which parents attended services	56		-
Unstructured support groups	103	47	
For fathers only	26		39
For mothers and fathers	40		61
Data missing on which parents attended services	37		-
Advice on employment or benefits	85	39	
For fathers only	3		9
For mothers and fathers	29		91
Data missing on which parents attended services	53		-
Legal advice (e.g. about contact with children)	44	20	
For fathers only	5		29
For mothers and fathers	12		71
Data missing on which parents attended services	27		-

Targeting of services	N	%	
Universal	131	63	
Targeted on fathers who are vulnerable or in need of support	65	29	
Specialist services for fathers with complex needs	17	8	

Organisational location	N	%	
Sure Start Children's Centres (or equivalent)	75	42	
Voluntary sector	51	23	
Local Authority Social Services	45	21	
Education services	21	10	
Health Service	14	6	
Criminal justice	11	5	
Private sector	2	1	

however, and all of those which occurred more than twice in the survey are listed in Table 2, along with a description. One named intervention, Men Behaving Dadly, was mentioned by four respondents but does not feature in Table 2 as responses implied these were in fact diverse approaches sharing the same name. Seventeen per cent of all respondents were using the Triple P parenting programme and 11% were using Incredible Years. There was almost no overlap between these two groups of respondents, so more than a quarter of all respondents

Table 2
The most common named interventions and description of their approaches.

Named intervention	Description of approach *	Frequency: n (% of whole sample)
Triple P	Teaches effective strategies for child behavior management. Several different variants for different ages and levels of need.	38 (17%)
Incredible Years	Teaches effective strategies for child behavior management. Different versions available but all for pre-school children.	25 (11%)
Solihull Approach	Some behavior management, but also psychoanalytically-informed, with emphasis on containment of emotions. Suitable for any age.	14 (6%)
Family Links Nurturing Programme	Aims to build parental self-esteem and self-awareness which are seen as the prerequisite for the learning of effective parenting behaviors which also takes place. Any age.	9 (4%)
Mellow Parenting	Single-sex group. Combines exploration of parents' own childhood experiences and current needs with parenting skills reflection through use of video. Targeted on high need. Different versions for different ages, all young.	5 (2%)
Caring Dads	The only intervention in this table that is specifically for fathers. Combines motivation enhancement, parent training and cognitive behavioral therapy. An emphasis on men's abuse of children and mothers.	4 (2%)
National Childbirth Trust ante-natal classes	Classes mostly focused on child birth, with some content on the baby's first days. Some areas also run a 'beyond birth' class on baby care and parental well-being. The cost of attendance is directly incurred by class members.	4 (2%)
Parents Early Education Partnership (PEEP)	Aims to improve educational attainment in the early years through work on literacy, numeracy and self-esteem. Based on social learning theory.	4 (2%)
Strengthening Families 10-14	Main aim is to prevent substance misuse, by improving family communication, boundary setting and resistance to peer pressure. Universal whole family intervention. Children aged 10-14.	4 (2%)
Family Caring Trust	Espouses flexibility in parenting style. Different programmes for different ages, drawing on Adlerian psychology, family systems, reality therapy and re-evaluation counselling. Optional faith-based elements.	3 (1%)
Strengthening Families, Strengthening Communities	Emphasis on cultural diversity and the influence of parents' cultural background and upbringing on parenting. Promotes understanding of non-violent disciplinary practices and children's developmental needs.	3 (1%)

* Refers to published sources: Department for Education (2013) commissioning toolkit and literature published by the organisations.

Table 3
Numbers of fathers receiving services.

Type of service	Response rate to this question	No. of men taking part over last 12 months			
		Mean	Median	Range	St. dev.
Structured parenting programmes	101/140 (72%)	27	8	0-314	51
Practical activities for parents and children (including play)	85/137 (62%)	44	20	0-600	77
Unstructured parenting programmes	70/103 (68%)	20	12	0-70	19
Advice on employment or benefits	39/85 (46%)	17	9	0-130	25
Legal advice (e.g. about contact with children) [*]	25/44 (57%)	10	6	0-60	13
All services, including 'others' which did not fit the categories above [*§]	[**]	28	10	0-600	52

[*] Not including the outlier of one nation-wide service, since all others were local.
[§] Not including the outlier of one county-wide service, since all others were local.
[**] No response rate could be calculated as 'other' services did not apply to most respondents.

were using an approach with evidence of effectiveness from randomised controlled trials (Hutchings et al., 2007; Sanders, 2012). This finding matches the survey conducted by Klett-Davies et al. (2008) in England, where these same two programmes were also the most commonly used parenting programmes. It should be noted, however, that in the questionnaire (see Appendix A) Triple P was given as the one example of a named intervention so there may have been some reporting bias in favour of this programme.

Table 2 shows that with the exception of Caring Dads (Scott & Crooks, 2007), all the interventions named by three or more respondents were provided for both parents, albeit in the case of Mellow Parenting via separate mothers' and fathers' groups. Most are mainstream parenting programmes, although there is variation in theoretical underpinning. Most fall into the category of structured parent training classes, although some respondents put some of the approaches listed in Table 2 into the 'other' category.

3.3. Numbers of men engaged

In an intervention market, some services may talk up their efficacy in the hope of gaining commissions. It is therefore important to try and get beyond rhetoric about father engagement and find out the real extent of successful engagement. The extent of insight from a cross-sectional survey of practitioners is limited. However, practitioners were asked about actual numbers of fathers attending services in the last 12 months. This was not a compulsory question, as it was assumed that some respondents would not have the required information to hand. As can be seen in Table 3, the response rate for this question ranged from 72% for structured parenting classes to 46% for employment and benefits advice.

The range of numbers provided was wide, so medians as well as means are provided in Table 3. Respondents who gave county-wide numbers were excluded from the calculations, as all other respondents gave numbers for local services. The largest annual numbers of fathers were for practical activities, including play (mean 44, median 20), followed by structured parenting classes (mean 27, median 8). Across all kinds of services where numbers of fathers were reported, including 'other' services which did not apparently fit into the categories offered in the questionnaire, the mean number receiving services in the last year was 28 and the median 10. This low median is an indication of how challenging it can be to engage fathers in family services. Across the whole data set and all services including 'others', the mean proportion of fathers using family services was 44% and the median 30%. This mean includes the services provided for fathers only which were 27% of those where proportions were reported. Across all services offered to both fathers and mothers, the mean proportion of fathers was 30% and median 23%. For structured parenting training programmes open to men and women, the mean proportion of fathers attending was

21%. This is higher than the 15% found in Lindsay et al.'s (2011) study of parenting programme implementation in England.

3.4. Recruitment of fathers

Qualitative responses were provided by 186 respondents to an open question about approaches to recruiting fathers to services. A brief summary is presented in Table 4. Many respondents emphasised attitudinal orientations of staff to fathers, e.g. being open and honest, person-centred, being welcoming and non-judgmental, making a personal connection, having a respectful curiosity about their lives. In a similar vein, some noted the importance of asking fathers what they want, using their knowledge and expertise. Many simply noted the importance of always including men – i.e. assuming they are interested and their children matter to them; addressing them directly from the start; expecting men to be engaged even where separated from the children's mothers.

Another set of responses focused on practical measures: the need to improve data on families and ensure fathers are recorded, always addressing both partners in a couple, being flexible about the hours of engagement, including work on evenings and weekends if necessary (this was mentioned by several respondents). Other ideas included making venues inclusive of men, the use of promotional literature specifically targeting fathers, using men to promote services and educating other services to make them more father-friendly. Only two respondents mentioned the value of having male staff or volunteers.

Special events for fathers and children were mentioned by several respondents. Some of these events were, intentionally, stand-alone sessions without an expectation of on-going commitment. Some targeted men with activities compatible with traditionally masculine roles: e.g. doing useful jobs in school rather than engaging directly with learning, help with gardening or some other physical activity. The provision of food was mentioned several times as a draw for men: cheese toasties, biscuits and especially bacon rolls. Also mentioned

Table 4
Summary of strategies for recruitment of fathers to interventions.

Attitudinal orientation
Assumption of fathers' involvement from the start
Better data and recording systems
Flexible working hours
Special events for fathers and children
Providing food as a draw
Acknowledging the need for cultural diversity
Recruitment via mothers
Use of text messaging and email

Table 5
Ideological and theoretical orientations of interventions, listed in order of popularity.

	Mean rank (7 = highest; 1 = lowest)	Standard deviation
Rationale for working with fathers		
1. To improve attachment between fathers and children	6.23	0.99
2. To improve the management of children's behavior	5.35	1.33
3. To improve the wellbeing of fathers	4.72	1.28
4. To take the pressure off mothers	3.62	1.38
5. To prevent men's abuse of women and children	3.14	1.47
6. To promote fathers' rights	2.71	1.29
7. Respondent's own reason (could be left blank)	2.23	2.23
	Mean score (7 = strongly agree; 1 = strongly disagree)	**Standard deviation**
Approaches to working with fathers:		
Statement (*theoretical label*)		
1. Fathers can learn techniques to manage their children's behavior better (*behaviorist*)	6.31	1.03
2. Fathers can learn to change the way they parent by learning new ways of thinking about problems (*cognitive*)	6.20	0.98
3. Fathers need insight into emotional problems which are rooted in past experiences (*psychodynamic*)	5.62	1.18
4. It is important to help fathers and their families improve their material conditions, such as income and housing (*material help*) *	5.40	1.12
5. We should encourage fathers to change their attitudes towards gender roles and do more child care so that families are fairer for women (*feminist*) * §	5.26	1.26
6. The best help we can give fathers is to listen to them talk about their problems (*counselling*) §	5.19	1.37
7. You cannot change fathers' patterns of behavior unless you look at the whole family system (*family systems*)	4.57	1.65

* and § = the differences between these pairs of statements are not significant at the .05 level (Wilcoxon signed ranks test). All other differences between statements in ranking and scoring are significant.

were, bush tucker trials (i.e. unusual and challenging food challenges), football tournaments, treasure hunts, barbeques, fires, sawing wood, making dens and sliding down muddy banks.

There was a variety of views about whether it is better to approach fathers alongside women partners or separately from them, with contrary views on the success of these very different strategies. Only one respondent noted it was more effective for family recruitment to get fathers on board first. Several practitioners wrote that in practice they recruited men through their women partners. One respondent noted that some men are more comfortable meeting in an office than at home, but several more respondents thought home visits were helpful, especially to reassure fathers about attending a parenting course.

Word of mouth recruitment was mentioned by several, as was taking referrals from others agencies. Some respondents found the implicit coercion of the child protection system to be a useful way to get fathers to attend, whereas others working in the voluntary sector noted the usefulness of not being associated with social services (i.e. public child welfare services). Few approaches were mentioned that recruited fathers via locations other than family homes. Isolated examples were street outreach and contacting fathers when they meet children from school. Cultural diversity was mentioned by just a couple of respondents – i.e. the need to show interest in different cultures and integrating Islamic values in working with Muslim fathers. Text messaging and email were mentioned by a few practitioners. One had the idea of getting children to design an invitation for fathers to attend a service.

3.5. Ideological and theoretical orientations

Survey respondents were first asked to rank statements about their rationale for working with fathers – also referred to here as their *ideological orientation*. The popularity of statements and their mean scores can be seen in Table 5. The most popular rationale was improving attachment between fathers and children, followed by improving the management of children's behavior. Of the two

weaker gender politics statements, improving fathers' well-being was ranked more highly than easing pressure on mothers. The two stronger statements of gender politics were the least popular, namely preventing men's abuse of children, followed by promoting fathers' rights. Only 25% (n = 56) of respondents opted to write in their own rationale for working with fathers but most of these then ranked this statement first or second. The differences in ranking between each statement were significant at the .05 level (Wilcoxon signed ranks test).

Next, survey respondents were given seven statements about the theoretical approach of the intervention and asked how much they agreed or disagreed with each one. The statements reflected some of the main categories of social work intervention theory (see Table 5). The two most popular were what could be termed a behaviorist approach, followed by a cognitive approach. Third most popular was a psychodynamic approach. Fourth, fifth and sixth most popular were an emphasis on material help, a feminist approach and what could be termed non-directive counselling, although it should be noted that the differences in scores between these three were not significant at the .05 level. The least most popular was a family systems approach.

3.6. Sensitivity analyses

No association was found between gender politics statements – either weaker or stronger varieties - and whether services were universal or targeted (universal v. any targeting). Similarly, there was no association between gender politics and organisational location (public sector v. independent sector).

For structured parent training and unstructured support groups, practitioners providing services for fathers only were compared with those providing services for both parents, in terms of how they responded to the ideological and theoretical statements. Similar comparisons were not made for the other kinds of services listed in Tables 1–3, because these are essentially practical services, limiting the range of theoretical options, in contrast with parent training and

Table 6
Factor loadings of a factor analysis with varimax orthogonal rotation for ideological and theoretical orientations.

Rationale for working with fathers	Factor 1	Factor 2	Factor 3	Commonality
To improve attachment between fathers and children	.54			.38
To improve the management of children's behavior		.76		.62
To improve the wellbeing of fathers	.74			.83
To take the pressure off mothers		.76		.93
To prevent men's abuse of women and children			.96	.49
To promote fathers' rights	.63			.67
Respondent's own reason	-.72	-.52	-.46	.99
Eigenvalue	1.85	1.60	1.27	
% of total variance	26.44	22.81	18.13	
Total variance explained			67.36%	

Approaches to working with fathers: Statement (*theoretical label*)	Factor 1	Factor 2	Commonality
Fathers can learn techniques to manage their children's behavior better (*behaviorist*)		.91	.86
Fathers can learn to change the way they parent by learning new ways of thinking about problems (*cognitive*)		.89	.85
Fathers need insight into emotional problems which are rooted in past experiences (*psychodynamic*)	.82		.74
It is important to help fathers and their families improve their material conditions, such as income and housing (*material help*)	.40		.36
We should encourage fathers to change their attitudes towards gender roles and do more child care so that families are fairer for women (*feminist*)	.72		.59
The best help we can give fathers is to listen to them talk about their problems (*counselling*)	.85		.74
You cannot change fathers' patterns of behavior unless you look at the whole family system (*family systems*)	.40		.26
Eigenvalue	2.31	2.08	
% variance explained	32.97	29.75	
Total variance explained	62.72%		

Note: Factor loadings <.3 are suppressed.

support groups where choices need to be made about ideology and intervention theory. The majority of these sensitivity analyses found no significant difference at the .05 level, but some did find differences between groups.

For structured parent training, practitioners running services for fathers only were more likely to agree or strongly agree with a feminist approach – i.e. encouraging fathers to change gender roles ($z = -2.16$, $p = .03$) and they also gave higher ranks to the importance of improving fathers' attachments with their children ($z = -2.06$, $p = .04$). Practitioners offering services for both parents gave higher ranking to the importance of promoting fathers' rights ($z = 2.002$, $p = .05$).

For unstructured support groups, practitioners providing services for both parents gave a higher ranking to the importance of improving the management of children's behavior ($z = 2.31$, $p = .02$). They were also more likely to agree or strongly agree with statements about behavioral interventions ($z = -1.99$, $p = .05$) and material help ($z = -2.03$, $p = .04$) than were practitioners working with fathers only.

3.7. Exploratory factor analysis

Principal component analysis with varimax (orthogonal) rotation was used to factor analyse both sets of responses on ideological and theoretical orientations (see Table 6). The conventional eigenvalue of 1 and scree plot 'levelling off' principle was used as the criterion to select the preferred solution. For ideology, the analysis generated three factors, explaining 67.36% of the total variance. Father-oriented ideologies (improving father-child attachment/improving fathers' wellbeing / promoting fathers' rights) explained the largest share of the variance (26.42%). Practical goals (improving behaviour management / taking pressure off mothers) explained 22.81% of the variance. The third factor, domestic abuse prevention, was solely derived from the statement 'preventing men's abuse of women and children' and the variance explained was 18.13%.

Two factors were yielded for intervention theoretical orientations. Three items (psychodynamic, feminist and counselling approaches) contributed most to what could be termed reflective

feminist approaches and explained 32.97% of the variance. Cognitive-behavioural approaches explained a further 29.75% of the total variance.

The shared variance with other variables was rather low for the ideological statement of 'improving attachment' and the theoretical orientations of 'material help' and 'family systems', as indicated by the low commonalities. It is possible that the variables included in the analysis were only weakly correlated with each other in the first place. Whilst ideology failed to meet the KMO measure sampling adequacy threshold of .6, the Bartlett's test of sphericity indicated both sets of variables were adequately correlated for factor analysis.

Overall, the factor analysis has provided some support and internal structural evidence to the conclusion that the scores from the two sets of items, i.e. ideology and intervention theory, are a valid assessment of practitioners' overall preference, which thematically aligned the items conceptually. Substantively, we have identified three distinct patterns of responses among practitioners' ideological orientations and to a lesser degree two broad intervention theories. However, these patterns are independent of each other.

3.8. Evidence base for services provided

Qualitative responses were received from 101 practitioners (46% of sample) on the evidence base for services. The question asked in the survey allowed for a range of different kinds of evidence from practice wisdom to systematic reviews. Responses were coded into broad categories. Numbers of responses matched percentages, as the number was so close to 100. Thirteen respondents did in fact not address evaluation at all. The most common response ($n = 38$) was to emphasise personal experience and practice wisdom. Examples of this kind of response were 'good quality professional counselling / psychotherapy training plus ten years' experience of delivering the service' and 'practice wisdom and the fact that fathers have been open to communication in the work undertaken'. Fifteen responses were of a very general

nature. For example, one respondent simply stated 'evidence-based parenting programmes'.

Three respondents referred to specific research evidence about some aspect of fathering, but without any mention of service outcomes. Twenty respondents mentioned specific internal evaluation systems. These included the use of standardised measures (e.g. Strengths and Difficulties Questionnaire) and less structured but systematically collected feedback from fathers attending services.

Eight respondents either specifically mentioned randomised controlled trials or else referred to independent evaluations of programmes known to have evidence of effectiveness from RCTs, such as the Triple P parenting programme (Sanders, 2012). Four respondents mentioned specific external service evaluations which did not involve RCTs.

4. Discussion and implications

In line with fathers being non-traditional clients of family welfare services, the survey responses suggest that numbers of fathers receiving services in the UK are typically small – across all services a median of ten fathers in the last twelve months. A slightly higher proportion of men were reported to be attending structured parenting programmes than was found in Lindsay et al.'s (2011) evaluation of such programmes in England. It is conceivable that the picture is different across the four nations of the UK than that in England, but the finding is almost certainly explained by selection bias, insofar as practitioners with a conscious interest in work with fathers are much more likely to take part in the current survey than parenting practitioners who give little thought to the need to involve fathers, whereas Lindsay's study was of parenting interventions and not focused on fathers specifically.

Both the survey responses on types of services and the responses to the intervention ideology and theory statements suggest that mainstream approaches to parenting support are prevalent. By 'mainstream approaches', we are referring to the use of structured parent training courses and practical help including play, as well as underpinning cognitive and behavioral ideas. More practical approaches, such as behavior management and material help, were favoured by those working with both parents, compared to those working with fathers only (in unstructured support groups). This might suggest that father-only work can tend to be introspective. Most services were said to be universal rather than targeted, reflecting the direction of policy in recent years (see, for example, Lewis, 2011 on England).

The relative lack of overt gender politics may be disappointing to those who are primarily motivated by either feminism or men's rights. In particular, some feminist practitioners may be disappointed that improving the well-being of fathers received a higher mean agreement score than taking the pressure off mothers. Interestingly, there were indications that those working with both parents had stronger feminist views than those working with fathers only, at least for unstructured support groups. This needs further exploration in future research. The relatively unpopularity of family systems approaches may be primarily explained by the format of services, whereby few are working with whole families and most with individual family members.

The factor analysis on ideologies found that responses from practitioners who emphasise fathers' domestic abuse were distinct from other responses, perhaps reflecting a different risk orientation. The fact that respondents' ranking of improving father-child attachment, improving fathers' wellbeing and promoting fathers' rights was correlated would seem to have coherence, since all these ideology statement are positively oriented towards fathers. Correlation of improving behaviour management and taking pressure off mothers is also coherent in terms of the essentially practical orientation of both of these rationales for working with fathers. However, the

factor analysis of intervention theories could be seen to be in tension with the factor analysis of ideology statements, insofar as a feminist approach was correlated with psychodynamic and counselling approaches for intervention theories and these latter two approaches are very different from and arguably incompatible with the behaviour management rationale with which a feminist rationale was linked in the factor analysis of the ideology statements. This finding may suggest that in practice interventions are more complex and multi-layered than a small number of discrete categories are able to describe. Feminism is of course a very broad category of diverse approaches and some writers would in fact employ the plural term 'feminisms'. The current study should be regarded as a pilot for research on intervention theories and ideologies. Future work would need to develop more nuanced measures to differentiate further between, for example, different kinds of feminist orientation. There is also a need for qualitative research, including interviews and observation of practice.

Responses on recruitment of fathers to services suggested that attitudinal orientation and basic inclusive practice such as always addressing fathers as well as mothers were seen to be important, and more so than pro-active outreach in locations other than family homes. Having male staff was not noted as important. This may reflect the reality that having a same-gender worker is much less important than the interpersonal skills of a worker of whatever sex. However, it may also reflect the reality that male staff members are simply not available in most family services. More systematic evidence is needed on what works for whom in recruiting fathers to take part in interventions.

Looking at the named interventions provided for fathers and the responses on evaluation, it could be concluded that a robust evidence base – i.e. experimental evaluations – plays a relatively small part in services for fathers. There is some provision of parenting programmes which have RCT evidence, although it should be noted that even for these apparently well-supported interventions, outcomes may not be as good for fathers as for mothers (Nowak & Heinrichs, 2008). These programmes (Triple P, Incredible Years) were the most commonly used named interventions, but they were nonetheless a minority of all responses. There were no specified interventions for fathers only which were as popular as these named parenting courses, and neither do any interventions for fathers only that were used by survey respondents have as strong an evidence base as these parenting courses. Many interventions seem to be unique to one locality.

However, although this aspect was not specifically tested in the survey, it could be said that some of the ten 'characteristics of effective fatherhood programs' identified by Bronte-Tinkew et al. (2007: 10-12), on the basis of what is known more generally about effective social interventions, may well have been present in many of the specific interventions for fathers. The following characteristics were explicitly mentioned or implied in many of the survey responses:

— Incorporating teaching methods and materials appropriate for fathers and the cultures of the populations served;
— Selecting teachers or leaders who believed in the program they were implementing and then provided them with training;
— Using targeted curricula;
— Using theoretical approaches that have been effective in influencing parenting behaviors in other contexts;
— Employing a variety of teaching methods designed to focus on the fathers as individuals, thereby personalizing the information;

The study is limited by data from practitioner self-report only, with no triangulation via documentary evidence, observation or interviews with fathers, mothers and children. Furthermore, responses were only received from staff working in 53% of local areas. A specific limitation is that judging services to be for fathers only or for all parents was done on the basis of the percentage of men attending services. This judgment cannot take account of where respondents were in fact referring to more than one type of service, some of

which may have been for all parents and some for fathers only. The statements used to indicate ideological and theoretical preference have not been validated, so should be considered a pilot only.

5. Conclusion

This survey provides some insight into the UK national picture of which services are being provided for fathers to improve children's well-being. Further evidence would be useful to go beyond practitioner self-report. In particular, more in-depth studies of intervention approach would help to identity and evaluate programme theory and research is needed on what works (and for whom) in the process of recruiting fathers to participate in interventions. A comparison with other countries to build on this UK pilot would also be useful. Most importantly, robust evidence on the outcomes of social interventions with fathers should be considered a priority.

Appendix A. Questionnaire

Working with fathers – a practitioner survey

Where are you?

Click on the local authority where your work is based. English authorities are first in the list, followed by Scotland, Wales and Northern Ireland (*list provided)*

In what organisation is this work with fathers based?

- Social services
- Voluntary sector (e.g. Barnardo's)
- Health service (e.g. CAMHS)
- Sure Start / Flying Start
- Probation
- Youth justice
- Prison
- Other (please state)

What services do you provide?

Please tell us about the services provided by your organisation which fathers take part in. Complete the other columns for each one where the answer is YES

	Service provided? Yes / No	Please add a sentence or two to describe this service (if a named programme, e.g. Triple P, please state name)	What % of parents using this service over the last 12 months are fathers?	How many fathers have taken part in the last 12 months?
Structured parent training Classes				
Unstructured support group				
Practical activities for parents and children (including play)				
Legal advice (e.g. about contact with children)				
Advice on employment or Benefits				
Other (please specify)				

Who is the target of these services?

- They are universal
- They are targetted on fathers who are vulnerable or in need of support
- They are specialist services for fathers with complex needs

If you need to, please expand to clarify the answer you have just given on targeting

Why do you work with fathers?

Please drag and drop the statements below to show how important they are to you as reasons for working with fathers. (1 = most important and 7 = least important)

- To improve the management of children's behavior
- To take the pressure off mothers
- To improve attachment between fathers and children
- To improve the wellbeing of fathers
- To prevent men's abuse of women and children
- To promote fathers' rights
- Add your own reason for working with fathers here if you like or just leave it blank

What approach to intervention do you think is most helpful for fathers?

If you use a particular approach in your intervention with fathers, please name the theory or theories on which this is based (this is optional).

Please rate how much you agree or disagree with the following statements (Strongly Disagree / Disagree /Somewhat Disagree / Neither Agree nor Disagree / Somewhat Agree / Agree / Strongly Agree)

- You cannot change fathers' patterns of behavior unless you look at the whole family system.
- Fathers can learn to change the way they parent by learning new ways of thinking about problems.
- Fathers can learn techniques to manage their children's behavior better.
- We should encourage fathers to change their attitudes towards gender roles and do more child care so that families are fairer for women.
- The best help we can give fathers is to listen to them talk about their problems
- Fathers need insight into emotional problems which are rooted in past experiences
- It is important to help fathers and their families improve their material conditions, such as income and housing.

Recruiting fathers to take part in your services

Please list the most successful strategies you have used to recruit fathers to your services. List 1-3 strategies and especially anything that has worked well for men who might be considered 'hard-to reach'

Evaluation

What kind of evidence is intervention approach based on? For example, you might have based it on practice wisdom, expert opinion or knowledge of similar services provided elsewhere. Or you might have had some evidence from formal evaluations or systematic reviews. Please answer in the box below.

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