



Engaging Fathers in Home Visits: Organization & Home Visiting Program Implementation Strategies

This practice guidance can be used by organizations to ensure they are providing inclusive and father friendly services. All staff should be encouraged to foster a culture where individuals who assume the role as a father are involved and engaged in home visiting services, including administrative assistants, public health nurses, family home visitors, supervisors, and managers. This resource outlines strategies that can be implemented by organizations, agencies, and programs to ensure they are promoting a culture of father engagement.

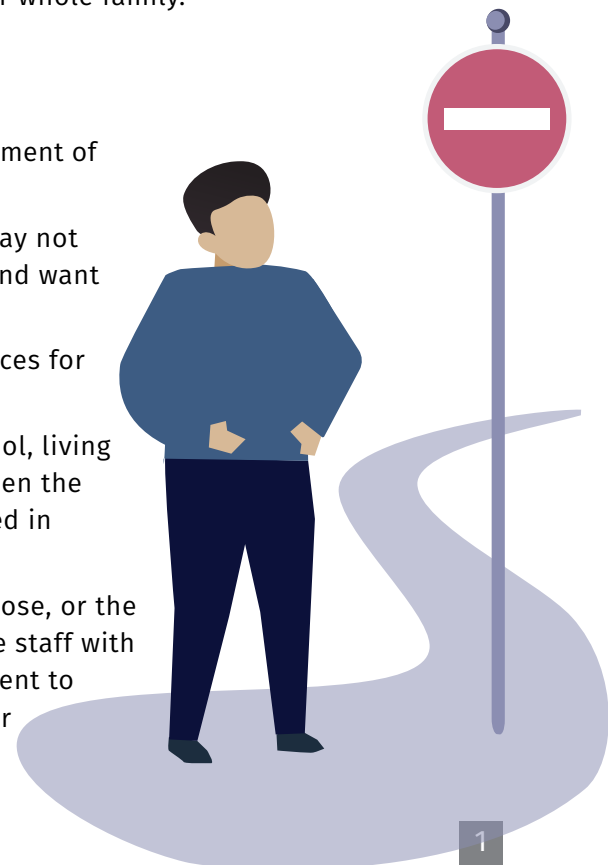
Although this guidance focuses on strategies and the evidence related to engaging fathers (he/him) in home visiting, it is important to acknowledge that there are many different types of family structures. Infants and children may be raised by one or two parents, grandparents or other caregivers. There are also children who are raised by parents/caregivers of the same gender or by parents who may use pronouns other than she/her and he/him.



If fathers are not provided the opportunity to take part in home visiting programs, they miss the opportunity to receive services that could benefit children and their whole family.

Common barriers to father engagement¹

- Home visiting programs often implemented for and involve enrolment of pregnant women and mothers.
- Often the mother is the parent referred for services and staff may not have initial contact with the father. Fathers may be interested and want to be engaged in home visiting programs.
- Training materials and program components may focus on services for mothers and young children.
- Fathers may not be present due to various reasons – work, school, living apart from the mother, or a change in relationship status between the mother and father. This does not mean fathers are not interested in participating or are not available.
- Home visiting staff may have concerns about the risks fathers pose, or the safety of the mother and children. Organizations should provide staff with the knowledge and tools to initiate an indicator-based assessment to determine if the mother is (or has) experienced intimate partner violence and make referrals to support families.



How can organizations foster a culture where fathers are engaged?

Foster a culture of engagement by:

- Supporting and encouraging all staff to engage with fathers
- Assessing and modifying programming to be inclusive of fathers
- Reinforcing father engagement at all levels within the organization



1 Support all staff to become knowledgeable about engaging fathers

- Organizations can provide learning opportunities and training to staff members regarding how to engage fathers.
- Other examples of ways an organization can support staff:
 - Ensure all staff who interact with clients are included in learning opportunities.
 - Ensure staff who are promoting home visiting programs speak about father engagement and decrease perception that programs are only for mothers.
 - When communicating by phone or text at the beginning of a relationship, staff can be encouraged to ask about a second parent/caregiver.

2 Work towards delivering services that are inclusive and engage fathers

- Organizations can promote a culture of engagement by creating policies and procedures that support father involvement, reviewing/modifying program resources, and collaborating with other organizations that support fathers.
- Ensure there are tools available to collect information from all parents. Do resources have space to include information about more than one parent?
- Develop pathways, assessment tools or goal-setting documents to complete with fathers.
- Build connections with local organizations that offer fatherhood programs.

3 Leadership can reinforce the culture of father engagement

- Organizational leadership, including administrators, supervisors, and managers, can set the tone and promote the need to engage fathers during all stages of service delivery.
- Provide opportunities for staff to give feedback about what is working or not working to engage fathers.
- Allow staff to deliver services outside of normal business hours so fathers can participate.



Did you know? Research shows that the Edinburgh Postnatal Depression Scale (EPDS) can be completed with fathers and is able to detect paternal postpartum depression. Organizations can support public health nurses by promoting the use of the EPDS with fathers, including appropriate cut off scores specific to men^{3,4}

Organization implementation strategies. Ask yourself:

Are program materials and the environment 'father-friendly'?	Does the organization encourage referrals to 'father-friendly' programs?
<ul style="list-style-type: none"> • Does messaging include fathers? Are program resources such as pamphlets or teaching tools inclusive of all family members? • Do images reflect diversity of family structures? Are all types of families represented, including caregivers of colour and same-sex families? • Are spaces welcoming to all parents and caregivers? Even though most services take place in the home, are organizational spaces welcoming to fathers? Are there posters or artwork that are inclusive of fathers? 	<ul style="list-style-type: none"> • Organizations can maintain a list of services that support fathers, including job training or education opportunities, fatherhood programs, male-friendly health and mental health services, and social services. • Does your organization have copies of materials to give to families that are designed for fathers? Materials can be left at a visit for fathers who are not present.

References

¹ Bellamy, J. (2020). Engaging Fathers in Home Visiting Programs. [Information Brief.] National Responsible Fatherhood Clearinghouse. www.fatherhood.gov/research-and-resources/engaging-fathers-home-visiting-program

² Sandstrom, H. & Lauderback, E. (2019). Father engagement in home visiting: Benefits, challenges, and promising strategies. National Home Visiting Resource Center Research Snapshot Brief. Arlington, VA: James Bell Associates and Urban Institute.

³ Matthey, S., Barnett, B., Kavanagh, D. J., & Howie, P. (2001). Validation of the Edinburgh Postnatal Depression Scale for men, and comparison of item endorsement with their partners. *Journal of Affective Disorders*, 64(2-3), 175–184. [https://doi.org/10.1016/s0165-0327\(00\)00236-6](https://doi.org/10.1016/s0165-0327(00)00236-6)

⁴ Shafian, A. K., Mohamed, S., Nasution Raduan, N. J., & Hway Ann, A. Y. (2022). A systematic review and meta-analysis of studies validating Edinburgh Postnatal Depression Scale in fathers. *Heliyon*, 8(5), e09441. <https://doi.org/10.1016/j.heliyon.2022.e09441>

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