



UK fathers in their first year: Factsheet 5

New dads need better support from health services

- Babies' health records don't include space for information about fathers. Despite men's much greater involvement as hands-on fathers, and despite their going through one of the biggest set of physical and emotional changes most men will ever experience, they are still considered a *visitor* by maternity services, rather than an important individual worthy of screening, assessment or support.
- Research shows that when men become fathers, their adjustment to parenthood has a physiological as well as emotional and practical basis. Fathers' brain structure and hormonal balance changes when they spend time physically close to their babies and young children, including participating in direct caregiving. These changes, similar to those observed in the maternal brain, are powerful evidence of the sexes' equal caregiving capacity – but are little known, and not routinely communicated or built on by services.
- First-time fathers' transitions are multifaceted, complex, sometimes disharmonic and shot through with some anxieties as well as feelings of extreme happiness. At first, new fathers may feel overwhelmed by the changing circumstances – lack of time with the baby; reduced sleep; feeling like the 'secondary' parent; and experiencing additional financial/work pressure. Gradually, most men feel their way to becoming a well-adjusted, involved father – usually with no support from professionals, who operate in, and contribute towards, a culture that positions fathers as 'outsiders'. Fathers of low birthweight infants, and those whose partners suffer postpartum psychosis, have particularly challenging adjustment journeys.
- Small percentages of fathers experience mental health problems along the way. There is a lack of evidence about stress and anxiety in new fathers; paternal depression has been more widely studied, and is known to impact negatively on children's health and development. Services do not screen for, assess or provide support around, fathers' mental health.
- Despite a growing number of 'official' documents urging them to engage with fathers, midwives and health visitors receive no training on father-engagement and there are no policies in place to ensure they include fathers or specify how to do this. So dads' experiences vary depending on individual

practitioners' practice. Most report feeling ignored, patronised or unimportant – and important 'teachable moments' are thus missed.

- Practitioners' negative or apathetic attitudes can play a part in low father-engagement, as can fear: staff may actively avoid particular fathers known or thought to pose a threat to mother and infant, or adopt more generalised non-engagement approach, based on the idea that all fathers are potentially risky. Studies find around 2-5% of pregnant women and new mothers saying their partner has been physically violent towards them: a significant problem in terms of both maternal and infant outcomes that requires a firm, targeted response.
- Fathers in the UK almost never receive information on breastfeeding and report being actively excluded from breastfeeding education – even though evidence reviews have found that all interventions that included fathers resulted in better rates of breastfeeding initiation, duration, and/or exclusivity. Not one of the breastfeeding helplines nor NHS Choices suggests that fathers can make use of their service or have a role to play. We found one NHS Trust confidently asserting that fathers 'cannot help' with breastfeeding initially.
- Even fathers whose partners are seriously mentally ill and have been admitted to a specialist residential mother-and-baby unit (MBU), are not routinely engaged with, despite policy and practice recommendations over several years that this should happen – and despite evidence that interventions with the partners of women suffering from, or at risk of, poor mental health postnatally, can successfully improve maternal depression and anxiety scores.
- Despite well-evidenced benefits of supporting new fathers within Neo-Natal Intensive Care Units (NICUs), research suggests that here too, fathers are marginalised and excluded; the same is true when infants die, and pregnancies are lost. One father told a researcher: "The nurse came to my wife and said, 'kiss your baby you mightn't see him again'. Why didn't she say it to me as well?"

*These facts and insights are drawn from **Bringing Baby Home**, the Fatherhood Institute's evidence review about first-year fatherhood in the UK, funded by the Nuffield Foundation. For references and to read the full report, executive summary and recommendations, visit <http://www.fatherhoodinstitute.org/2022/contemporary-fathers-in-the-uk/>.*

Join the Fatherhood Institute's campaign to improve support for fathers, Time with Dad here: <http://www.fatherhoodinstitute.org/time-with-dad/>

Please consider making a donation to support our work: <https://www.givey.com/thefatherhoodinstitute>