



Insights from Small Steps Big Changes:

# Father Inclusive Practice

Lead Authors:

Lisa Sinfield, SSBC Research and Learning Officer

Amy McDonald, Research and Learning Manager

Felicity Callon, SSBC Senior Project Officer - Father Inclusivity

November 2024

# About Small Steps Big Changes

**Small Steps Big Changes** (SSBC) is one of five A Better Start Partnerships. The **A Better Start Programme** is a ten-year (2015-2025), £215 million programme set up by The National Lottery Community Fund (TNLCF) and takes a test-and-learn approach to strengthening support and services for families, so that children can have the best start in life.

SSBC, hosted by Nottingham CityCare Partnership, operates in Nottingham City, with four ethnically diverse city wards as its target areas. Working with parents, SSBC has developed and delivered a programme of support and activities for families with children up to age four to promote good early childhood development.

The key child outcome areas of the SSBC programme are diet and nutrition, social and emotional development, and speech, language and communication. In addition, SSBC focuses on systems change and aims to improve the ways that local health, public services and the voluntary and community sector work together with families to achieve improved child outcomes.

The work of the SSBC programme is grounded in scientific evidence and research, with the aim of furthering the evidence base for effective early childhood interventions. In line with the programme's **test-and learn approach**, SSBC benefits from nine years of evidence and evaluation. As SSBC nears the end of its ten-year programme, the focus is on legacy building and telling the SSBC story with the goal of disseminating the learning from the approaches and principles that have contributed to the programme's success and inspiring system change.



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# 1 Introduction



## 1.1 From ambition to legacy: Father Inclusive Practice

Small Steps Big Changes (SSBC), funded through The National Lottery Community Fund's 'A Better Start' ten-year Programme (2015-2025), supports the improvement of developmental outcomes in babies and children up to age four in four ethnically diverse wards in Nottingham. As a test-and-learn programme, SSBC is building an evidence base around effective early childhood services and sharing its learning as part of its system change ambitions. An important ambition for SSBC and the wider A Better Start (ABS) programme nationally is to improve the way that organisations work together with families to facilitate systems change.

One key factor which has been shown to have significant impacts on child outcomes is the role of the father. A positive father-child relationship has a wide range of long-term, positive impacts on children which contribute directly to SSBC's three priority outcome areas of social and emotional development, communication and language, and diet and nutrition.

Fathers also play a critical role in supporting mothers and providing resilience and stability for their family unit.<sup>1</sup> However, it is increasingly recognised that the transition to parenthood and early parenting is a key life stage and is a very vulnerable period for the mental ill health of both mothers and fathers.<sup>2,3,4</sup> It includes vulnerability to mood disorders and increased psychosocial stress, as well as increased vulnerability to psychological distress and the onset or relapse of psychiatric disorders, mainly depression.<sup>5</sup> Although the perinatal mental health impact on mothers is well researched, perinatal depression in fathers is not widely acknowledged or well researched.<sup>6</sup>

To improve outcomes for babies and children, it is therefore crucial that fathers are recognised as important to both their child's health and wellbeing, and that of their partner. It is also crucial to acknowledge the importance of providing support to fathers during this transitional period and beyond. Father Inclusive Practice is practice that values the fathers' role in parenting, and supporting health and wellbeing of partners and babies, alongside practice that supports the health and wellbeing of the father himself. By adopting Father Inclusive Practice within our perinatal services and beyond, we are supporting better outcomes not only for babies and children but also for mothers and fathers too.

Father Inclusive Practice is one of SSBC's systems change objectives. This is due to the growing research evidence highlighting its importance, and an awareness that to effect meaningful change for fathers, all organisations need to adopt a way of working that is fully inclusive of fathers as well as mothers. It also builds on the 'A Better Start Nottingham' strategy (2014), which sets out the need to engage fathers across local agencies and services.

## 1.2. Why fathers matter

### 1.2.1 Father impact – benefits to baby and child

Research highlights that having positive father involvement during childhood has an important impact on a variety of outcomes for the child, including emotional and social functioning, behaviour, health and education and developmental outcomes.<sup>7,8,9,10,11,12,13</sup>

For example, children of involved fathers have been shown to be more likely to have positive peer relations typified by less negativity, less aggression, less conflict, more reciprocity, more generosity, and more positive friendship qualities.<sup>14</sup> In addition, children who are securely attached to their fathers have been shown to display a greater internal locus of control, and close relationships with both stepfathers and non-resident fathers are also associated with better adolescent outcomes with regards to self-efficacy, internalising and externalising behaviours, and displaying challenging behaviours in school.<sup>15</sup>

Similarly, a positive father relationship has been associated with fewer behavioural problems<sup>16,17,18</sup> with less alcohol and substance misuse in adolescence as well as less truancy and antisocial behaviour.<sup>14,18,20,21</sup>

With respect to educational outcomes, infants whose father's early caregiving had been frequent, regular, positive in tone, or engaged and active during play, displayed fewer problems and better cognitive development at age two.<sup>22,23</sup> This educational impact continues, with evidence suggesting a significant relationship between father engagement at 6yrs, and IQ and educational achievement at age 7,<sup>24,25</sup> and at age 11<sup>26</sup> additionally, a review by Goldman,<sup>27</sup> clearly shows that fathers' involvement (both in terms of level and frequency) in their children's schools is a key factor that correlates with better educational outcomes for children. By way of contrast, a father's low paternal interest in his child's education substantially reduces educational attainment.<sup>28</sup>

### 1.2.2 Father impact – benefits to mother/birthing partner

In addition to the benefits fathers bring for the baby and childhood trajectory, fathers also provide significant benefits to the mother too. Evidence suggests that simply having father 'around' for support is associated with mothers' better mental health.<sup>29,30</sup> Furthermore, when fathers support the mother practically and emotionally, they have a positive impact on the mother and baby's relationship, therefore improving outcomes for their baby and child.<sup>31,32</sup>

Fathers also play a role in supporting mothers with breastfeeding. Research has found that a father's attitude and knowledge regarding breastfeeding, as well as his emotional and physical assistance for his partner, play a significant role in influencing mothers' initiation and duration of breastfeeding.<sup>33</sup>

Additionally, evidence suggests that fathers can help improve mother's engagement in antenatal services, reduce antenatal smoking rates and help reduce maternal depressive symptoms.<sup>34,35,36</sup>



### 1.2.1 Father impact – benefits to fathers and the whole family

In addition to the benefits for both baby and mother, there are also benefits to fathers in being involved in their children's care and lives. For example, research has shown that engaging fathers, regardless of age and social circumstances, increases the likelihood of positive changes to lifestyle and subsequently the health and well-being of mother, baby, and the father himself.<sup>37,38</sup> Other research has similarly found that fathers who are involved in their child's development can also experience a positive impact on their own physical and mental health.<sup>39,40</sup> In addition, fathers who positively engage with their children in activities such as reading and playing, report better outcomes than fathers who are not positively involved or have less frequent engagement.<sup>41</sup>

Hormonal changes, during the transition to fatherhood, may also play a role in fathers' wellbeing and positive bonding experience with their child. Emerging evidence suggests that the levels of the male hormone testosterone, drops in fathers who are actively involved in preparing for parenthood.<sup>42,43</sup> Similarly, levels of oxytocin, a hormone associated with long lasting bonding, trust and empathy, have also been shown to slowly increase in fathers over the first 6 months and particularly after play.<sup>44,45,46,47</sup> These hormonal changes, which have previously been focused on mother, are thought to prepare, and support a father to nurture their child. This may contribute to fathers feeling more fulfilled in their lives.

## 1.3 Fathers and services during pregnancy, birth and early years

Historically, childbirth has been considered the responsibility of women alone, with men, at times, actively barred from the labour room.<sup>48</sup> These views have changed over recent decades. Societal views now tend to encourage fathers to take part in antenatal care, and many want to be involved during the birth and beyond.<sup>49,50</sup> However, despite these changes, maternity care policies have traditionally tended to focus on the mother and baby,<sup>51</sup> which has resulted in some fathers feeling excluded and not encouraged to get involved with their baby after the birth.<sup>52</sup> Furthermore, many fathers want to be acknowledged for the unique role they play<sup>53</sup> but often exclude their own needs by perceiving themselves as only being there to support the mother.<sup>54</sup>

However, despite the desire for greater involvement in antenatal care, it is reported, by both parents, that fathers are often given a secondary role in antenatal education care.<sup>55</sup> The Fatherhood Institute have commented extensively on the marginalisation of fathers during pregnancy, birth and postnatally. They conclude, from their overview of existing research, that having high father involvement in early years of parenting, and at all stages of child rearing years, may correlate with greater family stability.<sup>1</sup>





## 1.4 Fathers and mental health

It is increasingly recognised that the transition to parenthood and early parenting is a key life stage and is a very vulnerable period for the mental ill health of both mothers and fathers.<sup>56,57,58</sup> The perinatal period, covering pregnancy and up to one year after the birth, represents a number of co-occurring biological, psychological, social, economic, and behavioural changes.<sup>59</sup> This period includes vulnerability to mood disorders and increased psychosocial stress, as well as increased vulnerability to psychological distress and the onset or relapse of psychiatric disorders, mainly depression.<sup>5</sup>

The effect of the perinatal period on the mental health of mothers is well researched<sup>6</sup> and recent years have seen significant investment in perinatal mental health services for women.<sup>60</sup> However, perinatal depression in fathers is not widely acknowledged or well researched<sup>6</sup> and is not recognised as an official psychiatric disorder.<sup>61</sup> A literature review exploring the psychological transition to fatherhood found that men face a challenge in balancing, personal and work-related needs; their new role as a father; meeting the emotional and relational needs of the family; as well as managing social and economic pressures.<sup>62</sup> Furthermore, a systematic review of 18 studies found key factors contributing to stress included negative feelings about the pregnancy, role restrictions related to becoming a father, fear of childbirth and feelings of incompetence about infant care.<sup>5</sup>

A meta-analysis involving data from 43 studies, exploring fathers' rates of mental ill health, found that prenatal and postpartum depression was evident in 10% of men<sup>34</sup> and severe

depression in 4% of fathers.<sup>63</sup> In addition, traumatic events of childbirth can leave parents with posttraumatic stress disorder (PTSD) or significant levels of post-traumatic stress (PTSS), with 1.2% and 1.3% of fathers, respectively, experiencing these symptoms.<sup>1</sup> Studies have also shown that fathers with mental health problems during the perinatal period are up to 47 times more likely to be classed as a suicide risk than at any other time in their lives.<sup>1</sup> Importantly fathers' mental health not only has significant impacts on his own health but also that of his family.

It is clear then that fathers play a critical role in supporting mothers, improving outcomes for their child, and in providing resilience and stability for the family unit.<sup>1</sup> It is also clear that current services are not meeting the mental health needs of fathers, and therefore crucial that attention is given to ways in which services can better engage with fathers and explore the types of supporting services fathers would like to be available.



## 1.5 The policy drive for Father Inclusive Practice

Awareness of the importance of fathers, and services successfully engaging with them, during pregnancy, birth, and early years, has been growing over recent decades. The Royal College of Midwives document 'Reaching out – Involving Fathers in Maternity Care' (2011)<sup>64</sup> brought much needed attention to the importance of fathers' inclusivity within perinatal services and their current shortcomings. Over the past decade, several published guidance documents have urged maternity services to improve Father Inclusive Practice. For example, The NHS Long Term plan (2019)<sup>65</sup> states "Offering fathers/partners of women accessing specialist perinatal mental health services and maternity outreach clinics evidence-based assessment for their own mental health and signposting to support as required."

In addition, the document 'NHS Good Practice Guidance in Involving and Supporting Partners and Other Family Members in Specialist Perinatal Mental Health Services (2021)<sup>66</sup> highlights the Perinatal Competency Framework (HEE, 2018),<sup>67</sup> in which the ability to understand the father/partner's mental health is a core competency.

Furthermore, several other key documents such as NICE guidance: Antenatal and postnatal mental health: clinical management and service guidance (2014)<sup>68</sup>, Parenting in Wales (2017)<sup>69</sup> the National Healthy Child programme<sup>70</sup> and the Family Hub and Start for Life Programme<sup>71</sup> have all highlighted the need to improve engagement with fathers.

However, despite such guidance, the Fathers Institute publication<sup>36</sup> which reviewed empirical evidence regarding fathers' experiences in the first year after birth, suggested there was still much work to be done.

Although evaluation of the Sure Start programme, in the early 2000's, highlighted what worked in father inclusion and the barriers to implementation,<sup>72</sup> there has been very little action or guidance, to address this since. However, with Father Inclusive Practice now included within the current Family Hub agenda there is renewed interest in this issue.<sup>73</sup> The current report aims to add to the emerging literature in this field and share SSBC learning regarding the ways in which Father Inclusive Practice can be facilitated.





## 1.6 The policy drive for Father Inclusive Practice

As described above, an important ambition for SSBC and the wider A Better Start (ABS) programme nationally is to improve the way that organisations work together with families to facilitate systems change. At SSBC Father Inclusive Practice has been identified as a system change objective due to the growing research evidence of its importance and benefits, and due to the need for all organisations to adopt this as a way of working to effect meaningful change for fathers.

*'Father Inclusive Practice is consistently referenced in national policy, with a growing body of evidence around the role fathers can play in children's lives. However, it as an area that has not been consistently implemented in practice, thus the benefits are not yet fully realised, SSBC recognised the need to have the full conversation about fathers in child and family services and were aspirational in their approach'*

**Karla Capstick**  
SSBC Programme Director

Within SSBC, Father Inclusive Practice ambitions have not only been realised through individual projects and initiatives but have also been embedded within wider organisational culture. Enabling the lived experience of fathers to inform SSBC programme activity has been achieved in different ways, including, conducting a consultation with fathers, and ensuring that fathers are represented on advisory and steering groups, thereby contributing to the design, delivery, and evaluation of services. In addition, SSBC have sought to explore wider systems change opportunities to implement and embed Father Inclusive Practice by developing a Father Inclusive strategy and establishing wider partnership working practices and policy development, focusing on this issue.

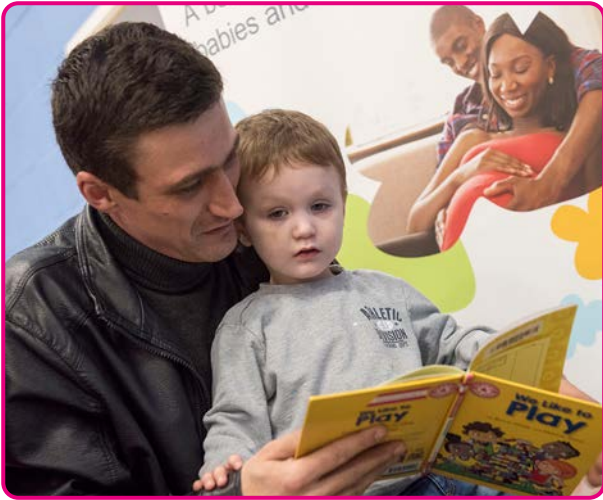


## 1.7 Outline of the report

The remainder of this report is structured as follows:

- **Chapter 2** provides an overview of the framework that SSBC and partners have worked to develop and put in place, to facilitate and embed Father Inclusive Practice across its organisational levels.
- **Chapter 3** consists of in-depth case studies of Father Inclusive Practice initiatives, activities, and projects from across the SSBC programme.
- **Chapter 4** shares learning from a review of SSBC systems change progress to date.
- **Chapter 5** describes how SSBC have been sharing the learning from their Father Inclusive Practice initiatives.
- **Chapter 6** outlines SSBC's sustainability and legacy planning.
- **Chapter 7** provides concluding thoughts.

# 2 Embedding Father Inclusive Practice in the SSBC programme



As already described, Father Inclusive Practice developed into one of four key systems change outcomes, within the SSBC programme. This Father Inclusive Practice vision is clear within the 'A Better Start Nottingham' strategy (October 2014), which specifies a goal of ensuring father-inclusive practice is embedded across services and all relevant local agencies work together to systematically engage with fathers.

Although evidence strongly suggests that an engaged father brings many benefits for children<sup>13</sup> there is limited evidence as to how Father Inclusive Practice may be effectively implemented across services at all system levels. In addition, evidence also suggests that 'what fathers need' to help them thrive in this role, are not fully understood.<sup>74</sup>

To address these issues, and 'test and learn' from potential approaches to implement its Father Inclusive Practice vision, SSBC committed to developing a Father Inclusive Practice Strategy working with, or establishing key structures, to oversee and support its implementation.

Key structures to oversee and support the implementation of a Father Inclusive Practice Strategy were:

- **SSBC Partnership Board**

The SSBC Partnership Board was set up to oversee the whole of the SSBC programme, including Father Inclusive Practice. Membership included representation from key City leaders, including senior representatives from all key stakeholder organisations, health, early education, SSBC Parent Champions (local parents, who represent parental voice of the programme), and community and voluntary sector organisations.

- **Father Inclusive Practice Group**

This was a multi-agency group consisting of representatives from Early Help, SSBC Family Mentors, Children's Public Health 0-19 Nursing Service and members of the SSBC core project team. This group oversaw the development and implementation of the Father Inclusive strategy, an associated operational plan.



## 2.1 Developing a Father Inclusive Practice Strategy

The work around SSBC's Father Inclusive Practice agenda and ambitions to create systems change have been underpinned by a strategy. In 2018 SSBC committed to developing a Father Inclusive Practice Strategy. This initially focussed on Fathers Engagement and was further developed into a Father Inclusive Practice Strategy. This was presented to the SSBC Board in 2019. Its content was approved along with key action for implementation, which included:

- Appointing a specified, full time, Father Inclusivity Senior Project Officer to lead the Father Inclusive Practice ambition. This role would oversee delivery of a series of events, activities, and workshops, which inform fathers and the wider workforce, of the important impact fathers have on children's outcomes.
- Establishing a specific father/father figures group which would have the remit to champion the father's agenda.
- To further develop the training offer to all partner organisations to support the implementation of father friendly service delivery.



Although developing the Father Inclusive Practice Strategy created pockets of good practice and change SSBC recognised the need for a system wide approach. A further iteration of the strategy was coproduced with partners in 2021, which also considered the findings from the fathers' consultation.



## 2.1.1 SSBC Fathers' Consultation

A fathers' consultation was carried out between June and November 2020 and consisted of three components:



The survey was open to all fathers/male carers of children less than 4 years, within Nottingham City. A total of 93 individuals took part in the consultation, and the majority of interviews and focus groups were facilitated by a male researcher.

More details about the consultation can be found by visiting [www.smallstepsbigchanges.org.uk](http://www.smallstepsbigchanges.org.uk) and searching 'fathers' consultation'.

The consultation explored fathers' views regarding:

- What support and information fathers wanted and needed
- Fathers' experiences of services
- To what extent fathers felt their mental health needs were being met
- How fathers felt they could be reached most effectively

### 2.1.1.1 Key consultation findings

Fathers spoke openly about their experiences within the consultation and a wide variety of views were expressed by those surveyed. However, several key themes emerged.

#### The majority of fathers were very satisfied with local services

*"Can't speak highly enough of the staff"*

#### The timings that services typically run was a frequently cited reason for poor engagement

*"Working families can find it more difficult to use services"*

#### Fathers wanted to be recognised as an active (if not equal) parent when engaging with services

*"From my own experience, fathers are viewed as people who will not play that important a role in a child's life"*

#### Several fathers felt services were primarily intended for mothers and that their own needs were frequently overlooked

*"Men don't get the support they need"*

*"Marketing is often targeted at mums"*

#### Fathers were most proactively seeking support and information in the weeks and months immediately before and after the birth of their child

*"You feel very insecure at the start and it's a time where you need the most support"*

#### Many fathers expressed that they did not know where to find information about local services and resources to support their parenting role

*"I was having to find extra support but it all seemed to be geared around mum and baby"*

#### The vast majority of fathers expressed that their own mental health was left unaddressed by services

*"Guys can be quite isolated sometimes"*

The summary of findings of the consultation can be found by visiting [www.smallstepsbigchanges.org.uk](http://www.smallstepsbigchanges.org.uk)

### 2.1.1.2 SSBC response to the Fathers' Consultation

The Fathers' Consultation provided valuable insight into the experiences and needs of fathers and helped shape SSBC activity.

SSBC responded to the consultation findings by implementing the following actions:

- Further developing the Father Inclusive Practice Strategy and Father Inclusivity Action Plan
- Making consultation findings available across the partnership
- Continuing partnership working with the multi-agency Father Inclusive Practice Group
- Reviewing and further developing SSBC's Father Inclusive Practice training offer: 'Think Dads'
- Producing a physical resource for new and expectant fathers / male caregivers to support their parenting role and the emotional wellbeing of the entire family.
- Developing a father specific 'one stop' information zone on the SSBC website



## 2.2 Embedding Father Inclusive Practice in Service Commissioning and Design

Alongside the key structures that oversaw the Father Inclusive Practice strategy and Father Inclusivity Action Plan detailed above, SSBC also wished to embed Father Inclusive Practice within the commissioning and design of their services. To support this several actions were taken.

### Commissioning

Within the commissioning processes, SSBC sought to include clear guidance to providers regarding Father Inclusive Practice. For example:

**Within tender documents** a section was included entitled 'Our Way of Working' which specifies the SSBC stance on Father Inclusive Practice:

*SSBC is committed to ensuring that Father Inclusive Practice is delivered across all early years' services through the active promotion of the importance of fathers in improving outcomes for children. Fathers experience perinatal mental health difficulties as well as their female counterparts and the impact on the family is no less important to consider. All practice, delivery and organisational policies and procedures should reflect high standards of Father Inclusive Practice.*

**Within the quality assurance standards** of SSBC contractual agreements Father Inclusive Practice is specified and adherence regularly monitored, and within short service level agreement contracts SSBC include a clause regarding Father Inclusive Practice, as below:

*SSBC is committed to engaging fathers/ male caregivers and embedding Father Inclusive Practice across Nottingham City. It is expected that all services/projects contracted by and/or affiliated with SSBC use father inclusive language and imagery in all communications produced. SSBC is able to provide support to achieve this.*





## Design

Within the designing of services and resources, SSBC have sought to embed the learning about what works to support father inclusivity across the whole programme. This has included for example, the fathers' consultation, SSBCs continued liaison with local organisations who support fathers, and engaging directly with fathers themselves, to ensure that fathers are represented and viewed as equal parents. Additionally, when designing and planning projects and resources, SSBC consider Father Inclusive Practice principles to ensure fathers are fully considered and feel included.





# 3 Father inclusivity projects and evaluations

This chapter provides case study examples of initiatives addressing Father Inclusive Practice in different forms across different levels of the SSBC programme. Projects have aimed to promote and embed Father Inclusive Practice both within the workforce and individual projects.

Here we highlight some of those initiatives.

## 3.1 Supporting the Workforce - 'Think Dads' Training

As already described, evidence shows that fathers play a key role in improving child development outcomes regarding health, social and emotional development, and educational achievement. They are also critical in supporting mothers and providing resilience to the family unit.<sup>1</sup> SSBC is committed to supporting this important role by promoting Father Inclusive Practice which ensures that fathers and male carers are valued by services to support their children to grow up happy, healthy and confident. Despite the growing evidence regarding the importance of fathers, many professionals working within the children's workforce have not received any specific training to do this and may lack confidence in this area.<sup>75,76</sup> A training need was therefore highlighted.

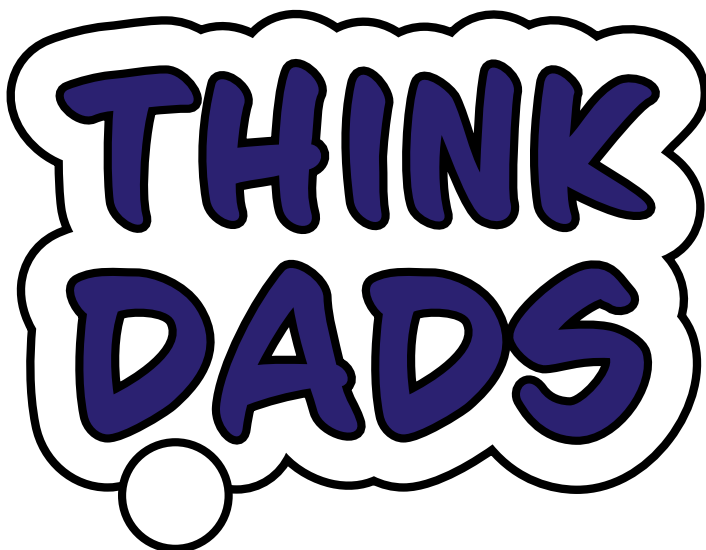
### Project Aims and Outline

The overall aim of 'Think Dads' training is to upskill the local children's workforce, increasing their confidence in supporting and valuing fathers within their day-to-day practice, and ultimately benefitting children's development outcomes regarding health, social and emotional development, and educational achievement.

Initially, 'Think Dads' training focused on 'father engagement' but now also incorporates 'engaging and supporting' fathers effectively to benefit the child development outcomes described above. At first the training offer ran for two-days, but it is now a half-day training session, offered both face-to-face and online. It is open to a wide variety of staff in Nottingham including SSBC Family Mentors, Family Hub staff, Social Workers, Children's Public Health 0-19 Nursing service, Nursery Nurses, Early Years, and school staff.

The aim of the training is to increase knowledge and confidence regarding Father Inclusive Practice by:

- Increasing awareness of the importance of, and added value of, Father Inclusive Practice across early years
- Developing skills to support fathers
- Providing staff with tools to approach Father Inclusive Practice in their own workplace



The training covers the importance of fathers within the family and discussion regarding factors that can impact on their transition to fatherhood, including fathers' mental health. It also includes the importance and challenges for workforce, of engaging with fathers, and discusses the principles of Father Inclusive Practice along with examples of good practice on how to implement these. The current societal views regarding fathers' role during birth and childhood are also discussed including the need for a shift in these views to help progress the Father Inclusive Practice ambition.

### Project evaluation 2020

In 2020, an evaluation of 'Think Dads' training was undertaken by Nottingham Trent University, as SSBC's external evaluation partner. Data regarding the impact of the training on knowledge of father inclusivity and its benefits, alongside an understanding of what the training improved in relation to the professionals' everyday practice, was collected, as well as suggestions regarding what might be helpful in the future.

An evaluation questionnaire, informed by the Australian researcher's<sup>77</sup> gold standard for effective father engagement and Father Inclusive Practice, was designed. The questionnaire completed by nine participants, before and after training, enabled insight to be gained regarding participants' confidence levels when working with fathers, as well as their views on engaging them, and the benefits of this. It also provided insight into how the training impacted the views of workforce.

The evaluation found that, following the training, more participants stated the importance of father engagement on fathers themselves, particularly in relation to their wellbeing and mental health. Participant confidence levels in undertaking father engagement was also increased with participants providing practical suggestions, such as including both mothers and fathers' names on correspondence. Additionally, several participants stated the importance of gathering fathers' opinions to guide both their current and future practice; this represented a shift in approach compared with pre-training responses.

*'It's made me think to keep asking about Dad and encouraging their involvement'.*

Furthermore, the evaluation highlighted reflections from participants on their previous interaction style with fathers and reported they were now more inclined to 'encourage fathers to be involved', suggesting an increase in knowledge and competence; this is recognised as a positive factor in increasing the rates of father engagement.

The Full Evaluation report can be found on [www.smallstepsbigchanges.org.uk](http://www.smallstepsbigchanges.org.uk) by searching NTU Evaluation 2020.

### Continued development and evaluation

Following the NTU evaluation, and continued post training feedback following SSBC delivered sessions, modifications have been made to the training. As a result, the training now includes a greater focus on 'fathers' voices' by including videos of local fathers discussing their lived experiences. The evidence-based information provided in the sessions and statistical data about men's mental health and other aspects of adjusting to a new baby have also been strengthened, such as managing crying babies.

The training has a multi- agency approach, reaching practitioners from health, social care, and third sector organisations. This includes members from Children's Public Health 0-19 Nursing Service, Perinatal Mental Health Services, Early Help, Family Hub staff, National Society for the Prevention of Cruelty to Children (NSPCC) and Barnados. The training is offered face-to-face, with an online offer being made available more recently. In the first ten months of 2024, SSBC's face-to-face offer has reached 214 professionals. In the first three months of the online offer 83 professionals have received training.

Evaluation of the training has been positive, with all practitioners self-reporting an increase in confidence and knowledge in relation to understanding the importance of positive father

relationships in children's development, the importance of including fathers in their service offer and understanding how to improve father inclusion.

Attendees report learning why fathers are important and a more developed understanding of male emotions following the birth of a baby.

'I'm thinking more about the fathers and their emotions - including them'

'I've learnt about the physiological changes that occur for dads and the importance of this'

Feedback shows that practitioners felt more confident in supporting fathers and importantly had ideas of how to do this.

'it's important for my service to be encouraging dads to be an active part of antenatal/birth and postnatal'

'I will be ensuring I contact dad too. Think about ways to actively involve dads. Ensure I get to know dad alongside and individually to mum'

'...discuss mental health with dad at every opportunity. Promote ways for dads to engage and interact'

'Ask for dad's email and include him in communications - look at a dedicated dads' session for new parent group (online/evening) - always ask dad's name and put on child's record'

Attendees also evaluated the training materials highly and enjoyed the multi-agency approach; They particularly found the 'father's voice' videos engaging and beneficial and were keen for more interaction from dads within the training.

How is Father Inclusive Practice following training being embedded across the system?

Local anecdotal evidence is suggestive of 'Think Dad's' training attendance being a contributing factor in services being father inclusive. Pregnancy Mentors (PM), an SSBC commissioned workforce in maternity, committed to Father Inclusive Practice. Alongside supportive leadership around the Father Inclusive Practice agenda, significant proportions of the project staff 11/13 (86%) underwent 'Think Dad's' training.

Local data reports that fathers or partners were present for 404 visits or 28% of Pregnancy Mentor visits.

Local evaluation asked fathers and partners about their experience of the PM service. In total, 9 people responded. When asked to rate on a scale of 1-5, all respondents gave the highest rating when asked if they felt fully involved in their care. A key factor in father's feeling included is likely to be that most of the staff were trained in the approach and worked in a service that was committed to, and valued father inclusion.



## Key learning

A key strength of this project has been the identification and filling of a training gap. This gap provided the opportunity to develop and deliver training to a multi-agency audience and start to implement a universal approach to Father Inclusive Practice locally. However, Covid-19 and workforce capacity issues across the system, impacted on initial engagement with the training. Similarly, the continued demand on services has highlighted that without a systemic commitment to father inclusion, it can be difficult for practitioners to put their learning into practise. For example, IT systems do not allow staff to routinely access fathers' health records and perinatal services are not commissioned to offer services to men with perinatal illness resulting in them being referred to their GP.

Additional learning from this project includes:

- Engaging with strategic management to make training mandatory or a priority would increase uptake, this would require services having a commitment to father inclusion. This worked well with Pregnancy Mentors locally
- Online training offers an alternative option for staff who may struggle to access training face-to-face
- When developing and delivering training, consider the needs of the multi-disciplinary team (avoid working in silo), particularly where a local gap is identified. Locally, offering the training to multidisciplinary team members is often commented on in evaluation as a positive factor helping staff understand more about their differing roles
- Placing value on coproduction and inclusion of life stories has been welcomed locally

## Next Steps and sustainability

The training is currently delivered by SSBC, with co-delivery being explored with local authority partners. Options are being explored to continue the training once the SSBC programme ends, this includes the potential for a local partner to continue to deliver this training.

In addition, a recording of the SSBC 'Think Dads' training will also be shared nationally via The Father Inclusivity Hub hosted at the University of Lincoln– see Chapter 6.

### 3.2 An information pack for new fathers



Evidence suggests that many fathers of newborn babies feel limited in their knowledge and confidence to take care of their baby.<sup>79</sup>

Although services are beginning to change, and the importance of the father's role has recently been acknowledged within the NICE Postnatal Care guidelines (2021),<sup>80</sup> fathers have often reported feeling ignored or unimportant during the perinatal period.<sup>81,82,83,84,85</sup>

Many fathers want more support to be able to help their partner and baby in the perinatal period, however, research shows a lack of resources tailored to fathers.<sup>75</sup> Providing appropriate resources to support fathers has the potential to improve outcomes for the whole family.

### Project Aims and Outline

The Information pack for new fathers was developed following the SSBC Fathers' Consultation (see previous links to this) in which local fathers asked for a 'one stop shop' for information focused on the time during pregnancy and the early months of their baby's life.

The aim of the project was to produce a place for fathers to be able to go for reliable information, that was easy to access and could support them in their parenting journey. This in turn would improve their confidence and transition to fatherhood, and the health and wellbeing of their baby. The resultant pack, written for fathers, contains a range of information about being a parent and having a new baby. With a focus on health and wellbeing, it covers topics such as, emotional health, bonding, feeding and finances.

The project was led by SSBC and involved key partners from the Father Inclusive Practice Group and a local father. Taking this collaborative approach helped to ensure the final product was fit for purpose, locally led and could be supported by local services and practice. 'The Pack' was available as both a physical booklet and PDF downloadable document with a reading age of 8 years and a good mix of images. It was translated into the six most frequently spoken languages locally - Arabic, Urdu, Tigrinya, Romanian, Polish and Kurdish, recognising that Nottingham city is a richly diverse community. The decision to focus on physical copies was to support local fathers who may not have access to the internet, sufficient mobile data or phones that are compatible with PDF documents.

'The Pack' was designed to be distributed by health professionals as this would facilitate a discussion which would begin a supportive relationship between the health care worker and the father. To reach fathers during pregnancy and baby's first 12 months, packs were initially distributed locally via the Children's Public Health 0-19 Nursing Service during antenatal contacts and midwifery appointments, and later by SSBC Family Mentors.

The key to success was establishing routine distribution amongst universal services involving staff who were able to have a conversation with fathers; this has now become embedded within local routine practice.

## Project evaluation

An evaluation of the guide was undertaken by Nottingham Trent University (NTU), SSBC's external evaluation partner. The evaluation explored changes in a father's knowledge around their new baby following receipt of the pack, general thoughts about design and implementation. Evaluation involved undertaking interviews with fathers (n=20) and three online focus groups with eight Family Mentors.

### Fathers' thoughts on 'the Pack'

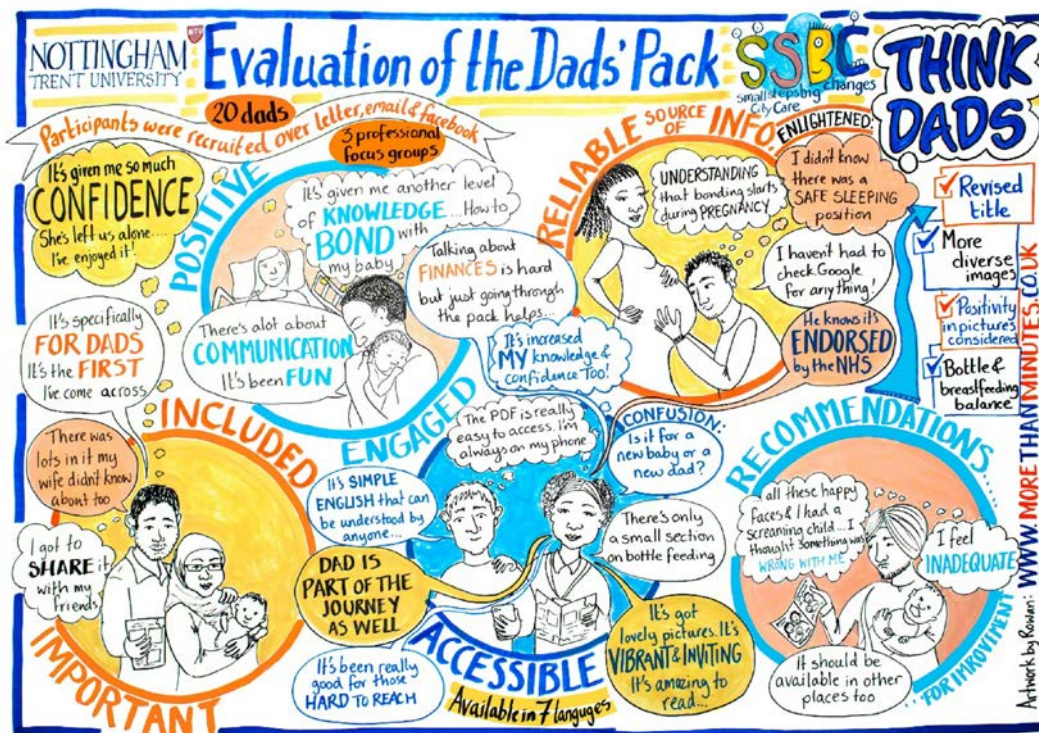
Fathers were very positive about 'the Pack'. They felt it provided clear information relevant for new fathers and reported using it as a reference document, and as a prompt to share and talk through with family and friends. Fathers liked the accessibility of the downloadable PDF format, particularly welcoming the access via phones. The writing style used was well received with fathers commenting on how easy the pack was to understand and how accessible it was to

all fathers, including those with less confident English language skills. They were also positive about what they had learned, and reported improved confidence in looking after their baby, with some linking this to improvements in their own anxiety levels. Fathers liked the design and layout of the pack, however, some commented that images were not always representative of their lives and for some the volume of content needed to be easier to navigate. Overall, the pack was very well received by fathers, with a feeling that it was a valuable resource and should be made available nationally for all new fathers.

### Family Mentors' / health professionals' thoughts on 'the Pack'

Staff were overwhelmingly positive. They liked the design and felt it was easily accessible, could be broken down into topic areas, and felt the language used was appropriate. Staff felt that it was beneficial in providing evidence-based knowledge and helpful information regarding fathers' rights, and should, be given out early during antenatal care. Furthermore, staff highlighted that having a pack specially for fathers was beneficial in helping new fathers feel important and included in the new baby's life.

A summary of the evaluation is shown in the infographic below.



A copy of the full evaluation can be found by visiting [www.smallstepsbigchanges.org.uk](http://www.smallstepsbigchanges.org.uk) and searching for NTU Evaluation 2023.



## Key learning

Key learning points are outlined below:

- The project was developed following consultation with fathers, and this is key to its success. Consulting with fathers ensured their needs could be met with the correct balance of information
- A streamlined approach utilising universal services is recommended for pack distribution. This should be supported by a clear outline of who the target audience is for 'the pack'
- Consideration for where 'the pack' is best placed for fathers (service delivery) needs to consider services' operational constraints, financial implications, and motivation to take on the resource
- The information pack for new fathers has been integral to supporting practitioners to engage fathers in their work, with staff reporting this acts as a tool to start conversations with dads and build trusting relationships, increasing their confidence in working with fathers. Some packs may be kept by professionals as a reference document. These show both some unintended outcomes from the pack but, most importantly the role it plays in supporting father Inclusion strategy.

The information pack for new fathers can be found by visiting <https://fatherinclusion.org/> and clicking on the SSBC area.

## Next Steps and sustainability

Following the evaluation, changes have been considered for the latest version. These include a change in title to 'Dads' Pack', more images of local fathers, and a better balance of information. Distribution of 'the Pack' is now embedded locally within standard practice as part of midwifery services and continues via Children's Public Health 0-19 Nursing services.

### Local Dads' Pack

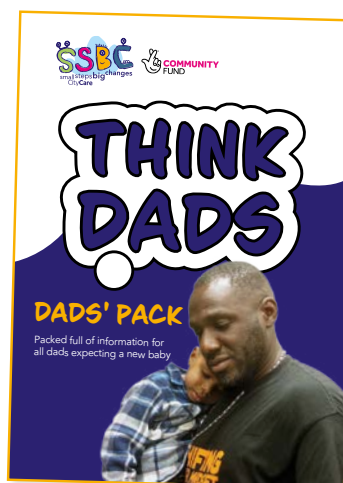
To support the legacy of SSBC in Nottingham city and as the founders of the Dads' Pack, a local version for Nottingham City will be available which will include details of local services. Physical copies will be made available to services within Nottingham.

### National Dads' Pack

Learning from the NTU Evaluation, SSBC have committed to producing a national pack so that reach can be increased, and more fathers can benefit. To align with The National Lottery Community Fund requirements the pack will remain free at the point of access.

The pack will be made available as part of the University of Lincoln Innovation in Fatherhood and Family Research Hub as an example of good practice and a working tool to allow for updates to take place (See Chapter 6).

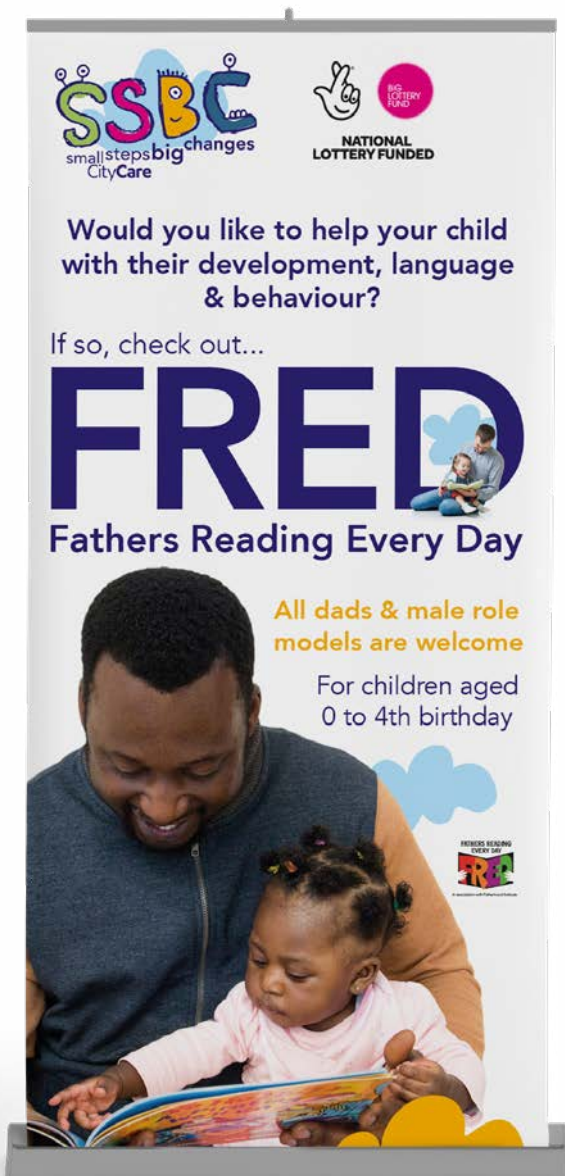
Centres wishing to embed the pack within their local system would benefit from considering printing costs to maximise the reach.



For more information visit [www.smallstepsbigchanges.org.uk](http://www.smallstepsbigchanges.org.uk) and search for Dads' Pack.

### 3.3 FRED (Fathers Reading Every Day)

Research shows that reading to children promotes children's language, literacy and cognitive development.<sup>86</sup> Evidence also shows that children's language development correlates with the age at which their parents started reading to them, with children who are read to from an early age tending to have higher scores on language measures.<sup>87</sup> Recent years have seen an increase in father-inclusive reading programmes<sup>88</sup> with research suggesting that father-child reading supports children's language learning because it is interactive and in-person.<sup>87</sup> There is long standing evidence of the positive impact fathers have specifically on their child's cognitive development and educational attainment, and that this can be more significant than that of mothers.<sup>23</sup>



#### Project aim and outline

Fathers Reading Every Day (FRED) is a Fatherhood Institute intervention. The aim of FRED is to encourage reading for pleasure and to kick-start a habit of fathers reading regularly with their children.

It is a programme that encourages fathers of children aged 0-11, to read with their children daily. The programme starts with a launch event, where fathers pledge to read to their children every day, for four weeks. They receive a reading log to record their reading sessions and the titles they read. Fathers commit to read/share books with their child for 5 minutes a day for the first two weeks and 10 minutes a day for the second two weeks. At the end of the 4 weeks, the father's success is celebrated. Fathers are then encouraged to keep this habit going and become more involved long-term in their child's educational development. Fathers are asked to complete questionnaires at the start and end of the FRED programme. The Fatherhood Institute provide training and necessary resources for the FRED programme to be delivered.

In 2017, SSBC committed to the programme and identified SSBC Family Mentors as key to its delivery. Family Mentors are a SSBC commissioned Paid Peer workforce who alongside the delivery of the Small Steps at Home programme, an evidence-informed home visiting programme, were trained to deliver FRED.

For more information, visit [www.smallstepsbigchanges.org.uk](http://www.smallstepsbigchanges.org.uk) and search for Family Mentors.

A small cohort of Family Mentors were initially trained to deliver FRED and a 'train the trainer' model employed to provide training for remaining staff.

Initially FRED was delivered in Nottingham as a separate group session, before changing to delivery via one-to-one engagement at home.

## Project Evaluation

In 2020, Nottingham Trent University (NTU), as part of their external evaluation, undertook an evaluation of the local FRED programme which involved capturing both parent and staff experiences.

For the FRED evaluation, they analysed a questionnaire, which was completed by 70 fathers/ male carers of children aged two – three years, both before and after the programme's delivery. These questionnaires measured outcomes reported by fathers, including frequency of reading with their child, levels of confidence in reading to their child, father-child relationship, father's involvement in their child's development, and local library use.

### Parent experience

Although no statistical significance was found in the quantitative data analysis, the data did highlight some relevant findings:

- **74%** of fathers who participated in FRED said it made them more involved in their child's learning and development
- **80%** of fathers felt that participating in FRED improved the quality of time they spent with their child
- **Over 78%** of fathers were introduced to FRED by SSBC Family Mentors
- **98%** of fathers who had taken part in FRED would recommend it to others

In addition, the questionnaire provided fathers with the opportunity to include 'free text' to report their experience of participation in FRED. Several themes and common thoughts were highlighted from analysis of 46 responses, including the following:

Improvements in speech and communication, as well as an improvement in their child's concentration

*"Improved child's concentration and spotting the things. Improved learning ability and it's on upward climb."*

A positive change in their child's relationship with books

*"[Child's name removed] now goes and picks books out to read himself. It's really brought his development on and I have enjoyed taking part."*

An increase in their child's confidence via reading, untapping and releasing parts of their personality through exploration of fiction

*"Reading has also increased her confidence, which has helped bring out a different side to her I never knew she had before."*

An improvement in their own confidence levels

*"I am happy that the programme has started. I was reading to my children before the programme appeared but now, I feel much more confident that I do the right thing."*

Most fathers reported on an improvement in their relationship with their child, which they referred to broadly as joint enjoyment

*"I really liked reading to my children and telling stories and describing the animals. The children have enjoyed sitting next to me and listening to me read."*



## Staff experience

Staff experiences were also captured within the evaluation. Seven Family Mentors were interviewed. The interviews explored views regarding the FRED training, roll-out of the programme and its impact.

Family Mentors reported a positive experience of the training with many stating that the inclusion of statistics helped them 'sell' the importance of FRED to fathers.

"... I find working with the males they like to see the statistics in front of them, they want to know, why is my child going to be better at maths if I read to them."

(Family Mentor)

Engaging fathers in the programme was raised as a challenge, particularly within the group settings. Challenges were attributed to several factors such as, a lack of interest for some fathers and/or not believing in the suggested benefits. Some fathers were not confident readers, potentially creating a barrier to participation, as they thought FRED was about teaching their child to read. Additionally, fathers' availability due to work patterns and the fact some fathers did not live with their children were also noted as challenges.

However, a one-to-one approach was considered more acceptable to fathers –

"We have always seemed to struggle to get numbers for the groups but for the one-to-ones it seems to be so much easier that way, plus it's more of a targeted audience..."

(Family Mentor)

Family Mentors were especially positive about FRED when referring to its impact, feeling it had led to positive improvements in communication skills, attachment/bonding, social and emotional life, confidence, and overall enjoyment. They also noted that fathers who regularly read with their children had developed 'structure' and routine whilst building up their 'confidence' and improving the father-child bond. Family Mentors were also very positive about providing certificates at the end of FRED, stating that it helped make the programme feel personal and 'just for dads.'

Full results of the evaluation can be found by visiting [www.smallstepsbigchanges.org.uk](http://www.smallstepsbigchanges.org.uk) and search NTU evaluation 2020.

## Key learning

FRED has been a successful intervention within the Family Mentor Service, and it is now embedded within their routine day-to-day practice. To date a total of 293 fathers have been supported through the programme; 116 accessing the group programme and 127 accessing the one-to-one programme. Since the pilot period ended in 2020, the intervention has been embedded as part of the Family Mentor's regular Small Steps At Home visits and separate recording of FRED has ceased.

Key to its success has been a commitment from the Family Mentor service to deliver the programme across their families, and to support all staff in accessing the FRED training.

Due to the challenges experienced regarding recruitment of father it has also been important to have flexibility regarding the approach taken. Increasing the flexibility of family mentor working patterns and offering the programme on a one-to-one basis, in family homes at times convenient to fathers, has helped to address this.



### Next Steps and sustainability

The PIECE Study<sup>23</sup> highlights that the benefits to children's education come from fathers' involvement in structured, educational activities. Therefore, whilst this could be reading, it could also be playing. Within the Family Mentor Service, the focus became encouraging fathers to spend ten minutes a day with their children in a structured activity to support their development, including reading but widening this out to include all educational activities. In this sense, the principles of the FRED programme have become business as usual within the Family Mentor Service and they use the skills and structure learnt on the programme with their families. The adapted programme is used with families, particularly where a need has been identified or where the father wants to be more involved in their children's lives. There was a desire to create a programme locally to incorporate the learning, which is something for future commissioners to consider.



### 3.4 Recliner Chairs

Research indicates that it is important for women to have their partner present postnatally to support them in their recovery and to help care for their baby. NICE postnatal guidance (2021)<sup>89</sup> recognises this evidence and advises that fathers/birth partners should be involved in their partners postnatal care and the care of their baby. However, many fathers report feeling sidelined and treated as visitors rather than co-parents within maternity services.<sup>90</sup> It is standard practice in maternity wards in England to support the presence of a father, partner or support person during birth due to the positive impact this has on women's experiences and outcomes.<sup>91</sup> However, fathers staying overnight in postnatal wards is a topic which has sparked debate nationally around whether this is viable for hospitals, staff, and the mothers, in maternity wards.<sup>92</sup>

A 2017 Care Quality Commission (CQC) Picker Survey of Nottingham University Hospitals Trust (NUH) maternity patients highlighted that only 54% of patients reported that their partner had been able to stay with them on the ward for

as long as they would have liked. To address these issues and support SSBC's Father Inclusive Practice ambition the postnatal reclining chairs project was initiated.

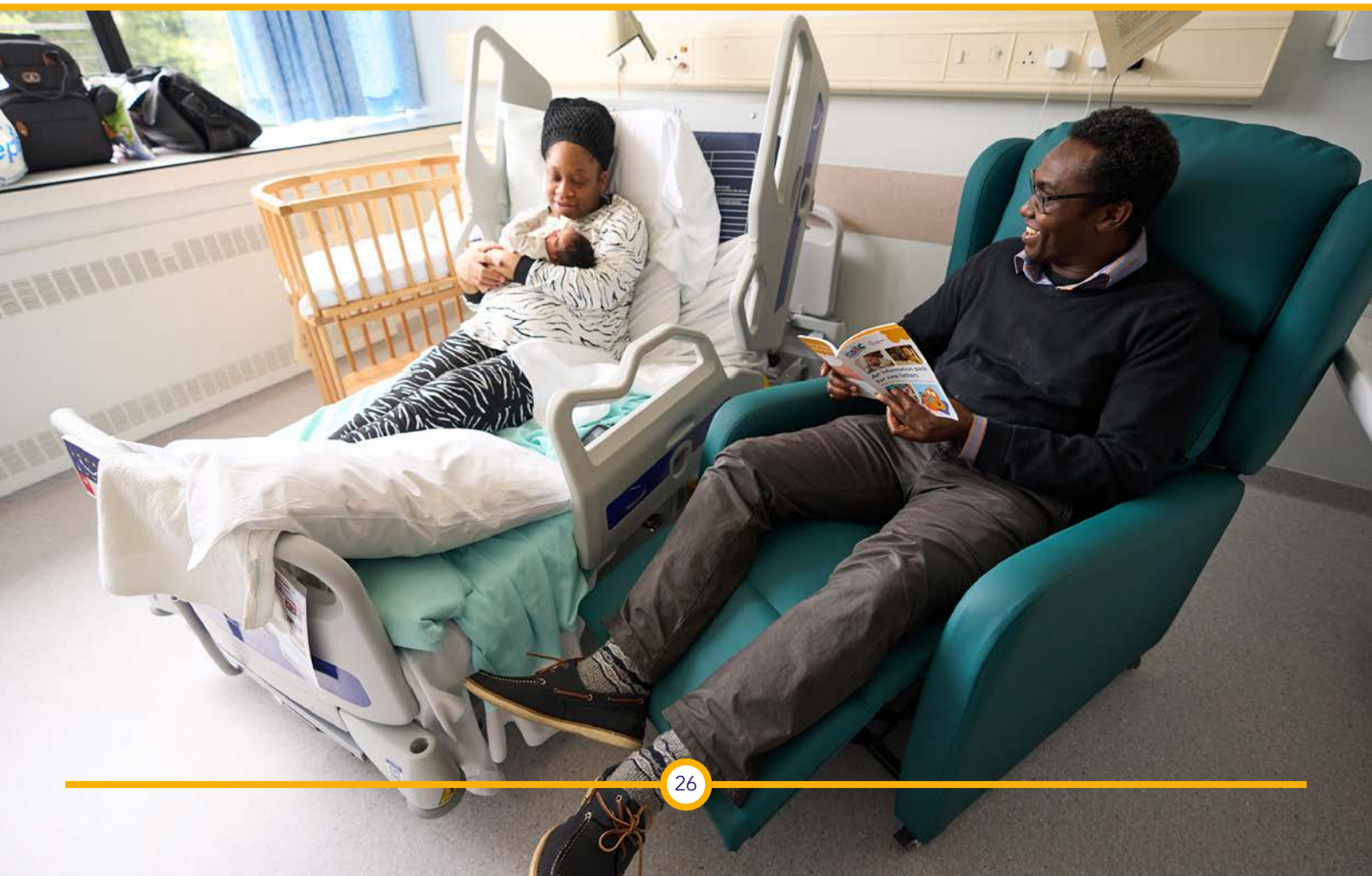
#### Project aim and outline

The aim of the project was to support the creation of a welcoming, father inclusive environment on postnatal wards by providing recliner chairs next to every inpatient bed, enabling an overnight stay.

The initiative involved a series of stages including:

#### Survey

In 2018 a survey was undertaken to gather the views of mothers, partners, and staff regarding the issue of partners staying overnight. The findings of this survey highlighted that only 11% of the 56 members of staff surveyed, agreed that a partner should be able to stay overnight whereas 68% of the 68 women/partners staying on the wards agreed with this statement. Staff concerns included issues regarding space/room, safeguarding and privacy/dignity concerns.







## Pilot

Twenty recliner chairs were purchased and placed on wards in both Queens Medical Centre (QMC) and Nottingham City Hospital (NCH) in August 2018. Feedback gathered after three months highlighted that, all women at NCH and almost two thirds of women at QMC, thought that partners should be allowed to stay overnight whereas nine out of ten staff still had some concerns.

Senior leadership commitment: Following the pilot a committed senior leader, within maternity services, worked with ward managers and staff to support 'ownership' of the recliner chair initiative and sought to positively influence opinions and attitude towards partners staying overnight. Due to the Covid 19 pandemic and visiting restrictions, the project was temporarily paused. However, the experience of both staff and patients during the pandemic are likely to have affected attitudes towards the project over this time.

Consultation regarding chair design: Following the removal of Covid-19 visiting restrictions, several other chair designs were explored. The final design was informed by a consultation process carried out by Ocura (hospital furniture supplier) with fathers /partners, maternity staff, NUH health and safety department, governance, safeguarding, infection control, patient dignity champions, and trade unions.

Purchasing of chairs: In March 2022, 114 recliner chairs were funded by SSBC and installed on all postnatal wards in QMC and NCH.

## Project evaluation

The project has been considered a success and has contributed to embedding a 'partners overnight' policy within postnatal services.

Evaluation regarding the introduction of recliner chairs included both a survey for parents and a survey for staff. Parents responded positively regarding the role the chairs had played in supporting baby feeding practices and overnight sleeping of partners, which in turn enabled them to lend support to mother's mobility/recovery after caesarean section. Similarly, staff responded positively with 70% (12) of staff surveyed agreeing that partners being able to stay on the ward overnight was a positive thing for the postnatal environment and the families. With one staff member leaving an additional comment saying:

*"Providing a recliner chair means the birth partner also feels looked after and supported so they can help care for mums"*

Additionally, a repeat of the CQC Picker survey in 2023 highlighted that 86% of birth mothers reported that their partner or close family member was able to stay with them as long as they had wanted them to, compared with only 54% in 2017.

Project evaluation has therefore, highlighted a successful outcome for parents and a positive shift in staff views since the initiation of the project in 2017.

## Key learning

This project has been successful in changing the hearts and minds of the workforce and creating more Father Inclusive Practice. Key to the success of this project has been the commitment of a consistent senior leader who has championed this development within NUH NHS Trust. In addition, engaging with and securing commitment from a wide range of stakeholders across the whole system, at the early planning stage, was also considered vital to the progression of the project and subsequent embedding of this Father Inclusive Practice.

### 3.5 Zephyrs

Bereavement following child loss is associated with adverse mental health outcomes for both parents such as anxiety and depression<sup>93</sup> post-traumatic stress disorder (PTSD)<sup>94</sup> and risk of suicide.<sup>95</sup> It is also associated with poor physical health outcomes<sup>96</sup> and increased risk of marital breakdown.<sup>97</sup> Supporting parents in their bereavement to reduce the risk of adverse outcomes is therefore recommended in clinical guidelines.<sup>98</sup>

Despite this, much of the focus of support following baby or child loss may be on the mother or birth parent<sup>99</sup> and many fathers tend to grieve the loss of their child in isolation.<sup>100</sup> A study investigating experiences of grief and loss following stillbirth and neonatal death found men felt that their role was primarily as a 'supportive partner' and that they were overlooked by health professionals.<sup>101</sup> Bereaved fathers have described the importance of having the opportunity to communicate about their loss for processing their grief.<sup>99</sup> One such method of support is the engagement in purposeful activities, which has been shown to facilitate emotional processing and hope, after loss of a loved one.<sup>102</sup>

Zephyrs is a Nottingham based bereavement charity which offers creative, holistic approaches and support to anyone touched by pregnancy loss or the death of a baby or child. It is run predominantly by those with lived experience of child/baby loss. SSBC commissioned Zephyrs to deliver bereavement support for fathers via the creative means of woodworking, which has been used therapeutically to promote physical and mental health in other initiatives .

#### Project aims and outline

The aim of the project was to provide woodworking sessions for bereaved fathers in Nottingham. With a further aim that these sessions would provide a 'safe and gentle space' where bereaved fathers could share conversation and loss experiences, and build social connections, alongside learning new skills.

The project involved Zephyrs providing two blocks of seven x two-hour sessions (six woodwork sessions plus one additional session to gather feedback). Each block was delivered flexibly, to meet the availability of group members and facilitators, over a six-month period. The facilitator was experienced in delivering therapeutic groups, and creative and therapeutic community projects. Woodworking sessions took place in a well-equipped community workshop, in a busy area of Nottingham, amongst shops and bars.

The busy location was felt to be important, as Zephyrs felt this encouraged grief to be part of daily life and not to be 'shut away'. Participants for the first group were recruited via either the Zephyrs website, social media, or fortnightly emails as well as through other services offered by Zephyrs. Once identified, fathers were communicated with via email. The second group of participants were signed up via a link to Eventbrite, with the intention of making the group more accessible to fathers. The content of each session was based loosely on making an item of the participant's choice and encouraged free flowing conversation whilst completing the task.



**zephyr's**  
nurturing support for bereaved families

## Project evaluation

Evaluation data is available for the first group of six participants.

Due to the sensitive nature of the topic area, it was felt by Zephyr's, that formal data collection was too invasive for grieving parents which resulted in a less formal approach being taken. Therefore, along with evaluation regarding practical elements such as group size, and time and location of the group an informal evaluation of participants' experiences of the sessions was carried out by the group facilitator.



Key questions were identified by Zephyrs and the project team prior to the evaluation, and participants were asked these questions by the facilitator within the flow of conversation.

The questions posed related to:

- Practical elements re times, dates, regularity, number of sessions and what is offered in the sessions to carve/make
- What elements of the offer participants liked
- What impact the sessions had had on their life at home

Data gathered regarding practical elements suggested that participants were happy with the group size and the session length, evening delivery and location of the group.

Responses to the questions relating to participants' experiences were collated by the facilitator and presented as captions of thoughts expressed by participants. Key quotes are shown here:

*"Things like this are so important, it's easy, as a man to feel like, to get pushed back into normality, back to work... Like "that's all done now... But this is somewhere I can come with none of that pressure"*

*"It's just good to have somewhere to go and do something hands on, away from the desk, talk about things, or, like you say, not even talk..."*

*"I can't meditate, I just can't sit and think of nothing, or let my mind go still... But with this to focus on, it just happens anyway!"*

*"The joy of it, is having something to focus on, that has no expectations. This is my time, booked in, I know it's there, 2 hours absolutely for myself."*

*"There's space to just get my head down, on my own, if I'm not feeling in the mood to chat, but everyone is here if I do want that"*

*"I can come and spend time with other people, with no pressure, everyone understands."*

*"Other places have felt more clinical, like an office, like it's just to promote what they're doing. This feels like it's about me"*



These quotes highlight how fathers valued the safe and welcoming space provided by the group and that having somewhere to go where others understood them was beneficial, especially as men can feel like they are pressured to get back into 'normal' life quickly, even after a bereavement. They also highlight how being engaged and focused in a practical, creative activity, with no expectations being placed upon them, was helpful.

Feedback from the first group was used to inform changes to the second group. This included allowing fathers to join the group at any stage of the programme, rather than having to wait for the next group to begin. It also led to Zephyrs recruiting a male counsellor to offer ongoing support to fathers needing additional help.

### Key learning

The key learning from this project includes:

- The flexibility of the sessions was important both in terms of content and timing of the sessions
- Engaging participants in a practical 'making' session, and creating a safe and welcoming environment, were considered vital in focusing participants' attention when talking about grief was difficult

- Flexible evaluation methods were considered important when working with sensitive topics and vulnerable people. Effective ways of collecting data in a sensitive manner, that does not create a barrier to engagement, need to be explored
- Consideration regarding signposting participants to additional services beyond the group sessions is crucial for ongoing support when needed
- Further consideration is needed regarding evaluation of the impact of the group sessions on participants' relationships with living children or other family members
- This project has highlighted the importance of acknowledgement of the mental health needs of fathers, especially following bereavement, and the importance of creating bespoke services that consider fathers' needs, across the whole system

### Next steps and sustainability

Zephyrs are currently continuing to support bereaved fathers by offering monthly woodwork sessions. In addition, they continue to seek external funding to facilitate an increase in delivery of these sessions and to pursue their ambition of offering a male counsellor to further support fathers.



### 3.6 Ideas Fund - Shifting Your Mindset

SSBC's Ideas Fund provides small grants to local organisations to develop and implement projects that align with SSBC's child development outcomes regarding better diet and nutrition, speech, language and communication, and social and emotional development in children up to age four. Father Inclusive Practice is an important core principle of the Ideas Fund with strategies in place to ensure fathers are involved at all levels. For example, fathers take part in panels evaluating grant applications, and in 2021 projects focusing on fathers were specifically encouraged.

In addition, the Ideas Fund emphasises the importance of working in partnership with parents, workforce, partners, and the local community, and since 2021 the number of fathers engaging with projects has been monitored.

Launched in 2016, the Ideas Fund initially provided small grants of up to £5,000 per annum. This was increased up to £6,000 per annum in 2019 and then up to £10,000 per annum for up to three years, in 2021. Extending funding from one year to three years aimed to provide Ideas Fund recipients with more certainty and stability, enhancing their ability to plan beyond the lifetime of the SSBC programme.

SSBC has commissioned two external evaluations of the Ideas Fund. An intensive meta-evaluation of the overall SSBC Ideas Fund was undertaken in 2024.<sup>104</sup> In 2023, Nottingham Trent University (NTU) published their independent evaluation of selected Ideas Fund projects to explore their perceived impact and benefits and their sustainability.<sup>105</sup> Through focus groups and interviews, the evaluation sought the perspectives of both attendees and staff of Ideas Fund projects.

Shifting Your Mindset (SYM) is one organisation that received an Ideas Fund grant and was included in the NTU evaluation.

# SHIFTING YOUR MINDSET

*Empower • Inspire • Heal*

## Shifting Your Mindset

Shifting your Mindset (SYM) is a community based, grassroots organisation based in Nottingham City. It focuses on empowering and supporting fathers, particularly those from marginalised and racially minoritised communities living in Nottingham City. SSBC provided SYM with a 3 year funding offer in 2022 to support their Nurturing Fatherhood Project (known locally as BAME Dads project) and allow it to evolve.



## Project aims and outline

The project aims to empower and support fathers, of children aged 0-4yrs, from Black and ethnic minority communities, to actively participate and support their children's development via regular support sessions. It began with regular and ad hoc drop-in support sessions for fathers but has evolved to also include other activities such as outreach sessions, and engagement and family events.





## Project evaluation

The project has been highly successful.

In 2023 SYM delivered a total of 119 support sessions and events, reaching 284 unique fathers and 217 children attending family activities. In 2024, SYM have continued to increase their delivery rate and are on track to have reached more than 300 fathers via their father's support sessions and groups, within the first six months of the year. They also continue to deliver engagement events including barber shop outreach sessions where they raise awareness of their session and activities, father litter picking, family cooking classes, and dad and child drumming sessions.

The success of the SYM projects has been widely recognised, with the organisation having been presented with six achievement awards for their outstanding work. These include:

- Nottingham Housing Heroes Awards for BAME Dads Programme Best Health and Wellbeing Initiative and Best Garden Initiative
- Black Achievers Awards Outstanding Parent and Most Transformed Life
- Nottingham Baby and Toddler Make A Difference Award
- Community and Family Awards Most Innovative Programme of the Year

Father Inclusivity has been a core principle for SYM from the beginning and here we highlight some of the ways in which this has been embedded within the design and delivery of this project, drawing on NTU evaluation findings.<sup>103</sup>

The full evaluation report can be found by visiting [www.smallstepsbigchanges.org.uk](http://www.smallstepsbigchanges.org.uk) and search for NTU evaluation 2023

### Fathers' involvement in design and delivery – acknowledging diversity

Fathers have been at the heart of the fatherhood project from its inception. The project was developed following discussion with fathers from Black, Asian and Minority Ethnic communities who had experienced a lack of local support. The project is sensitive to the diverse roles that men may undertake in caring for children, such as father, co-parent, stepfather, grandfather, godfather, uncle, as well as a non-residential father who may experience challenges in maintaining contact with their children. It also values, and celebrates, the continued input and expertise from fathers regarding its ongoing development and delivery including promotion of the group and outreach activities. For example, one father with expertise in producing podcasts was approached to support the project's own podcast production during the COVID -19 pandemic.



## Creating opportunities to contribute at different levels and to build networks

The project provides opportunities for fathers to get involved in promotion of the project and outreach activities, at whatever level and capacity suits them. For example, two fathers from the group have undertaken additional training and are now able to support in the delivery of the project, allowing for their own personal development and also strengthening the 'peer support' nature of the project. Other opportunities include actively promoting the group via word of mouth, as well as via local TV, radio or project podcast, raising awareness with local MPs regarding the prejudices and discrimination fathers from Black, Asian and Minority Ethnic communities face, engaging with informal peer support via a local Fathers' (Dads') WhatsApp group, sourcing outdoor space and taking part in 'acts of kindness'.

Sourcing an outdoor space has involved the development of a neglected community garden to create a place for fathers to garden and/or meet as well as providing a venue to host other events. The 'acts of kindness' activities have included providing food and drink at local schools and in sheltered accommodation. These outreach activities have provided the opportunity for local fathers to connect with other local communities and begin to build networks. Furthermore, several of the fathers have further contributed by supporting wider SSBC initiatives such as the Think Dads training/conference where they have taken part in videos and/or presented at events helping to raise awareness of fathers' experiences.

## Providing support

Another key element of Father Inclusive Practice is to ensure fathers are supported both practically and emotionally. This project focuses on peer-to-peer support and provides a regular safe space for fathers to share what they are going through and an informal WhatsApp group, where fathers can chat and provide ongoing support for each other. Fathers have reported positive improvements in their emotional wellbeing as a result of the project, and also welcomed the therapeutic nature of gardening within the shared garden space. Similarly, fathers have reported the benefits of signposting and support

regarding practical issues such as financial guidance, and legal advice regarding resolving domestic disputes and gaining access to their children.

## Promoting systems change through sharing lived experience

SSBCs longer term ambition to embed Father Inclusive Practice within the wider systems change agenda is also supported by the Nurturing Fatherhood Project. Fathers who attend support groups have advocated for the value and importance of inclusive practice through a range of platforms, They have related their stories at workforce development events such as SSBC's 'Think Dads' conference, highlighting the need for father-inclusive services and how a lack of father-inclusive approaches in services can impact negatively on their families. Fathers also featured in SSBC's awareness campaign, supporting the father-inclusive ambition of the SSBC programme.

## Key benefits for fathers engaging with the project

- Within the NTU evaluation, fathers reported key benefits as peer support and advice, improved emotional wellbeing and improved contact and more positive relationships with their children.
- Signposting and practical support aided access to financial support and other issues of concern
- Working in the community garden helped with stress release and wellbeing



## Next steps and sustainability

Throughout the three-year funding agreement Shifting Your Mindset have continued to develop the Nurturing Fatherhood group and its reach. The organisation is keen to continue to develop its work by sourcing additional funding.

The funding provided by SSBC's Ideas Fund has enabled Shifting Your Mindset to build a record of their achievements and collect evaluation data, which is a helpful stepping stone to further funding. It has also enabled them to secure further funding outside of SSBC to expand their services, offering a community café and opening a 'safe haven' for men.



# 4 Systems change

As detailed in Chapter 2, Father Inclusive Practice was developed into an SSBC systems change objective. Fathers play a key role in their babies and children's lives, with research highlighting that positive father involvement impacts on a variety of outcomes for the child, including emotional and social functioning, behaviour, health and education and developmental outcomes.<sup>7,8,9,10,11,1</sup> Fathers also play a crucial role in supporting mothers and providing resilience and stability for the family unit.<sup>1</sup> Father Inclusive Practice values the fathers' role and supports him in line with his own individual needs regarding caring for his child. By adopting Father Inclusive Practice within our pregnancy and children's services, we are supporting better outcomes not only for babies and children but also for mothers and fathers too.

A key focus within SSBC's Father Inclusive Practice has been to support the workforce, including midwifery, Children's Public Health 0-19 Nursing Service and voluntary and community sector organisations, in becoming more inclusive of fathers of babies and younger children. This section provides an overview of progress and learning to date. It includes initiatives where Father Inclusive Practice is on target to become embedded in-service provision, and insights from an evaluation of the impact of SSBC's systems change legacy planning.

## 4.1 Embedding Father Inclusive Practice - progress

As the programme enters its final year, there is evidence that partners are embedding Father Inclusive Practice, creating an SSBC father inclusivity legacy. Alongside the sections covered below, projects mentioned in sections 3.1 – Think Dads' training, 3.2 – An information pack for new fathers and 3.4 – recliner chairs, are also examples of how services have embedded new ways of working within their normal practice thereby producing effective systems change.

### 4.1.1 The SSBC Partnership Board

The SSBC Partnership Board has provided an opportunity to champion the importance of Father Inclusive Practice and engage in discussions with senior leaders in multi-agency strategic forums. This has, in turn, allowed for some systems change commitment with local partner organisations such as NUH Midwifery and the Recliner Chairs Project, which installed reclining chairs in all NCH and QMC postnatal wards (See section 3.4). In addition, SSBC Parent Champions (including fathers) are valued members of SSBC's Partnership Board and have shared and championed Father Inclusive Practice.





## 4.1.2 Family Hubs

Alongside the SSBC Partnership Board, the Department for Education funded local Family Hubs<sup>71</sup> also benefit from SSBC programme learning around Father Inclusive Practice. The Family Hubs and Start for Life Programme include, as a policy directive, that all funded local authorities should include the voices of families as they design, deliver, and improve support and services in the Start for Life period. It also encourages panels to ensure that around half of the panel members are fathers or co-parents.<sup>106</sup>

Locally a SSBC Parent Champion has been appointed as Chair of the Family Hub Stakeholder Group and will be supporting the development of Parent Panels for each hub. The Parents Panel brings together parents and carers to work together with service leads and commissioners to design and evaluate services, providing an opportunity to raise and embed Father Inclusive Practice.

Family Hubs in Nottingham have committed to Father Inclusive Practice and are piloting SSBC Father Friendly Service Standards (FFSS) (see section 4.2.3). These standards are designed to support organisations to become more father inclusive at strategic and operational levels. It is therefore hoped that by working towards these standards, Father Inclusive Practice will be embedded within the routine practice of the Nottingham Family Hub Service.

## 4.2 Learning from a review of SSBC Father Inclusive Practice activity

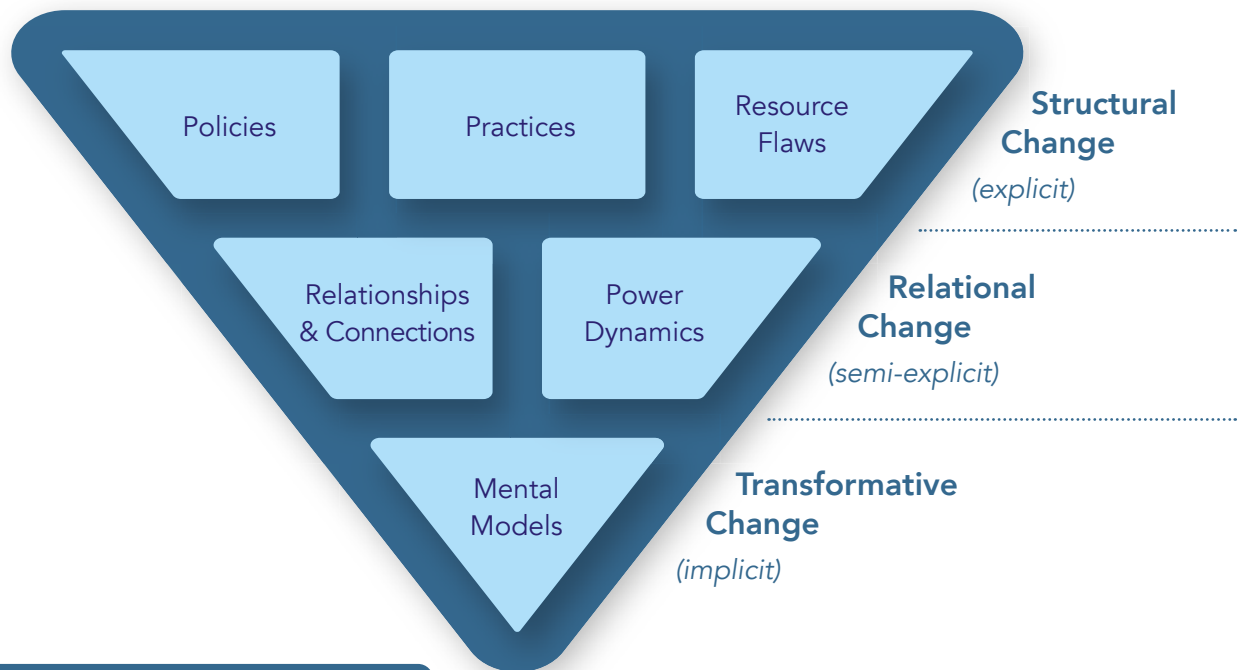
SSBC are committed to leaving a legacy that facilitates further development of their father inclusivity work. The period 2023-2025 marks SSBC's move to full delivery and legacy. As part of this phase discussions with partnership organisations commenced and a 'SSBC Legacy Proposal' was drafted. In 2023, SSBC Commissioned Northern Lights to undertake a review of the father inclusivity element within the emergent plan and highlight remaining opportunities for SSBC to embed father inclusivity across the local system.

The objectives of the review were to

- Test the systems change impact of the SSBC Legacy Proposal using the Waters of Systems Change model
- Pilot an approach to deep dive into the father inclusivity strand of SSBC's work
- Develop recommendations for further development and delivery of the SSBC Legacy Plan as a result of this system evaluation

### 4.2.1 The Water of Systems Change model

The **Water of Systems Change model** was developed by FSG, a non-profit philanthropy organisation. It is underpinned by the theory that complex problems do not lend themselves to simple solutions, and that systems change by shifting the conditions that are holding them in place.<sup>107</sup> It argues that for change to be successful and sustained it must take place across three explicit (tangible) and three implicit (intangible) elements of a system. Importantly this model includes 'mental models', our longstanding beliefs about a problem or population, which are often overlooked in an action plan.<sup>105</sup>



## The Water of Systems Change model

Adapted from [https://www.fsg.org/resource/water\\_of\\_systems\\_change](https://www.fsg.org/resource/water_of_systems_change)

### 4.2.2 Review findings

Northern Lights used the Waters of Systems Change model to develop one-to-one interview questions and gather views from key stakeholders regarding the father inclusivity programme, and to design an insight workshop with SSBC staff. Information was gathered regarding activities to date, gaps in legacy planning and next steps.

The findings highlighted that several positive achievements have been made concerning the inclusion of fathers in pregnancy, birth, and early years care in Nottingham. However, it also highlighted that successes were sometimes isolated to one organisation or project and there would be benefit in taking a more cohesive approach and coordinating the learning across the board.

Northern Lights learning also suggested that SSBC were, at times, aiming to shift intangible problems (ie mental models) with tangible interventions (ie policies, practices and resource flows) and that one particularly significant challenge was that of ingrained, societal mental models around father inclusivity within our culture. When considered in the context of the level of culture change needed to change attitudes and the national policy needed to support practical changes, such as the linking of a father's details with the mother's

medical records, the learning suggested that interventions have arguably been remedies but not solutions.

Stakeholders reported:

*"It has become more normal for dads to come to Groups. We have seen a fantastic change"*

But:

*"The system hasn't caught up with how quickly attitudes are changing towards the role of Dads out there in society.....even if they do want to be involved, they still can't get a letter addressed to themselves"*

*'This issue hasn't been championed as a priority {...} time and money not allocated to sorting these problems out"*

Furthermore, the learning highlighted that the mental models of mothers, fathers and workforce all contributed to the challenge of shifting attitudes.

## 4.23 Actions following the review

Following the review, SSBC chose to focus on two key learning points:

- Developing a more cohesive and coordinated approach to Father Inclusive Practice across the partnership
- Exploring options to address the challenge concerning 'mental models' regarding fathers' inclusivity

### 4.2.3.1 Developing a cohesive and coordinated approach

Following the review, SSBC reflected on the successes of individual Father inclusive initiatives and the journey to date.

However, SSBC also recognised that a more coordinated approach had the potential to further strengthen their impact. It was acknowledged that addressing father inclusivity at several levels within a whole system would have greater impact than working on individual projects in isolation. For example, providing Father Inclusive Practice training for the workforce, without the support of senior management and organisational structures to enable the application of new knowledge, may result in limited application of the training. Therefore, SSBC focused firstly on developing the Father Friendly Service Standards, and later, including this within a toolkit of resources to support organisations to work towards embedding Father Inclusive Practice.

## Infographic representing SSBC project journey of Father Inclusive Practice projects

# THINK DADS

Father-Inclusive Strategy



September 2023

## What's happened?

- FRED** (Fathers Reading Every Day)
- How are you dad? A conversation on mental health** with Mark Williams
- Fathers consultation**
- Family Mentors use dads consent forms and Father inclusivity service checklist**
- Recliner chairs in NUH maternity wards**
- Think Dads (workforce settings)**
- Mark Williams hot topic and webinar**
- Formed Father Inclusive Practice group**
- Father inclusivity added to job specs & supplier contracts**
- 'Dads engagement' training / 'Think Dads' training developed (revised 2023)**
- Perinatal Mental health training (iHV)**
- Dads Pack (and translations)**
- Ideas Fund (Father focused)**
- Feed your way - dad digi campaign**
- Together we're learning.**
- Zephyrs - woodworking sessions for bereaved dads**
- Animation series & oral health book launched**
- Think Dads digital campaign**
- System evaluation**

## What we learnt

- Resource gaps
- System blockers in policy, practice and IT
- Fragmented approach
- Limiting beliefs about what can and should be done

## 2023-2025

- Father Friendly Service Standards Toolkit
- Service Standards Matrix & Settings Checklist
- Dads Pack revision and national version
- Embed Think Dads Training
- Think Dads badges supplied to workforce
- Father Friendly Service Stickers
- Comms & promotion pack
- Think Dads: Conference, workshops, Family Hub Integration
- Webinar & Conference planning 2024

Small Steps Big Changes - giving every child the best start in life





## Father Friendly Service Standards Matrix

The Father Friendly Service Standards matrix requires an organisation to adopt a whole systems approach to implementing Father Inclusive Practice, ensuring that the practice is safely developed through strategic and operational changes.

Father inclusivity is an evolving field with a growing evidence base but limited examples of good practice exist within universal services; therefore, organisations need to be able to navigate the challenges successfully within the context of their own structures. The matrix is designed to be a starting point and allows the user to be expansive and exploratory in their approach. It provides a structure for senior leaders to consider and implement systems change that will encourage the engagement of fathers within their service. Whilst not exhaustive, it sets out a foundation for change. The matrix is not designed to be prescriptive and has examples of possible ways of working but an allowance for adaptation and contextualisation.

The Service Standards Matrix can be found by clicking on the following link [fatherinclusion.org/hub/resources](http://fatherinclusion.org/hub/resources) and accessing the SSBC section.

In addition to the Father Friendly Service Standards, SSBC also developed two additional supporting documents: An 'Organisation checklist' – which supports services to self-assess and work towards becoming father friendly, and a 'Service Setting Checklist' – which supports services, within specific settings eg Family Hubs, to self-assess and work towards achieving father friendly status.

The checklist can be found by clicking on the following link [fatherinclusion.org/hub/resources](http://fatherinclusion.org/hub/resources) and accessing the SSBC section.

## Father Friendly Service Standards Toolkit

Aiming to further support organisations to become father inclusive, SSBC sought to combine all their learning from individual projects (outlined in chapter 3) in an easy-to-use format, which resulted in the development of the Father Friendly Service Standards Toolkit.



This package acts as a guide for organisations to begin embedding father inclusive principles. It includes:

- The Father Friendly Service Standards - A matrix for senior leadership and service managers
- Father Friendly Service Standards checklists
- An information pack for new fathers
- 'Think Dads' training
- A communications pack with promotional tools, including a workforce poster, stickers and badges

The toolkit can be accessed by clicking on the following link [fatherinclusion.org/hub/resources](http://fatherinclusion.org/hub/resources) and accessing the SSBC section.

Think Dads - Father Friendly Service Standards

### Operational Management and Leadership

Standard	The organisational vision and direction is reflected in planning and practice	S-A Scoring	Self-Assessment Evidence
Basic Level (1-3)	Developed Level (4-5)	S-A Scoring	Self-Assessment Evidence
The organisational vision and direction are reflected in some operational planning and practice	The organisational vision and direction are reflected in all operational planning and practice	1 <input type="radio"/>	
		2 <input type="radio"/>	
		3 <input type="radio"/>	
		4 <input type="radio"/>	
		5 <input type="radio"/>	
Standard	Staff are supported to practice Father Inclusion	S-A Scoring	Self-Assessment Evidence
Basic Level (1-3)	Developed Level (4-5)	S-A Scoring	Self-Assessment Evidence
Some staff are supported to practice Father Inclusion	All staff are supported to practice Father Inclusion	1 <input type="radio"/>	
	All new staff are inducted to practice Father Inclusion	2 <input type="radio"/>	
		3 <input type="radio"/>	
		4 <input type="radio"/>	
		5 <input type="radio"/>	
Standard	Staff demonstrate good Father Inclusive Practice when working with families	S-A Scoring	Self-Assessment Evidence
Basic Level (1-3)	Developed Level (4-5)	S-A Scoring	Self-Assessment Evidence
Some staff demonstrate good Father Inclusive Practice when working with families	All staff demonstrate good Father Inclusive Practice when working with families	1 <input type="radio"/>	
		2 <input type="radio"/>	
		3 <input type="radio"/>	
		4 <input type="radio"/>	
		5 <input type="radio"/>	

“Our children are an extension of us. How can I contribute to **prepare them for their life?**”

- Seb, a father of two from Nottingham

Talk more.  
Think dads.



“Obviously you are going to make **mistakes**. Try not to put yourself down too much”.

- Mark, a father from Nottingham



#### 4.2.3.2 Addressing ‘mental models’ regarding father inclusivity

The Northern Lights learning highlighted the challenge concerning ‘mental models’ within society and suggested working to address this by focussing on a bottom-up approach and creating a ‘movement of change’, alongside trying to focus on the system itself. Aiming to address this, SSBC committed to a particular focus on ‘changing hearts and minds’. This resulted in the development and launch of an awareness campaign, as well as focusing on funding and supporting fathers to campaign for themselves.

##### Father Inclusivity Awareness Campaign

SSBC launched a campaign to raise awareness regarding the importance of fathers.

The campaign shared real life experiences and father’s speaking about their role as a dad.

The campaign was undertaken in three stages:

- Consultation with fathers
- Development of a digital campaign to share the voice of fathers
- Development of accompanying materials

The campaign was aimed at driving conversations with both the local population and the workforce.

The campaign would therefore run alongside the training and other elements of the Father Inclusive Strategy to build momentum over the remaining two years of the programme.

The aim was to talk to fathers across Nottingham about their experiences of:

- Pregnancy
- Perinatal period
- General perception

SSBC conducted a three-month social media campaign, with content from four fathers.

The campaign raised awareness of the importance of fathers’ roles, through lived experience. The accompanying materials have consistently been used in other areas of SSBCs strategy and projects.

We have:

- Increased the overall amount of SSBC followers across all social platforms
- Increased the amount of male followers as well as reached more men with our content
- Helped increase overall reach and impressions
- Achieved a good, industry standard and consistent engagement rate throughout the campaign
- Helped increase overall engagement across all social platforms
- Contributed to the overarching brand identity of the Think Dads campaign through our social assets

Further details regarding the Campaign can be found by clicking on the following link [fatherinclusion.org/hub/resources](https://fatherinclusion.org/hub/resources) and accessing the SSBC section.

# 5 Sharing and learning

SSBC fathers and the wider SSBC team have, and continue to play, a pivotal role in sharing the learning regarding what works well in Father Inclusive Practice at all levels.

## 5.1 Sharing the learning through training, webinars and the SSBC website

SSBC have developed several initiatives which help to share Father Inclusive Practice learning. These include:

### Think Dads training

Please refer to section 3.1 Supporting the Workforce – ‘Think Dads’ Training

### Think Dads Campaign

Please refer to section 4.2.3.2 Father Inclusivity Awareness campaign



### Father Inclusive Practice Conferences

#### Think Dads Conference 2023

Our Think Dads initiative has also included delivering a conference which brought together colleagues, researchers and partner agencies who advocate for father inclusivity. Speakers shared their research and experience on what it means to be a father today and how as a city we can work collaboratively to break systemic impediments to fathers’ involvement in their children’s lives.

#### Father Inclusion and the Family Hubs - What works? 2024

SSBC hosted a collaborative conference in partnership with Professor Anna Tarrant from the University of Lincoln, exploring father inclusive practice as part of the Start For Life and Family Hubs programme.

#### Father Inclusive Practice Webinar 2025

A collaborative shared learning event exploring SSBCs learning and legacy in Father inclusive Practice, co-hosted by Professor Anna Tarrant launching the ‘Father Inclusion Hub’. Slides from all the conferences detailed here can be found on the father inclusion hub [fatherinclusion.org/hub/resources](https://fatherinclusion.org/hub/resources) and accessing the SSBC section.



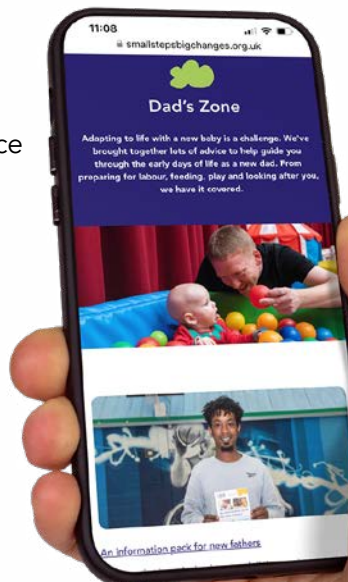
## SSBC Website

SSBC developed a website with a dedicated 'Dad's Zone', providing information and advice for dads, with signposting to local groups and activities, and downloadable versions of 'An information pack for new fathers' available in seven languages. The SSBC website also included Father Inclusive Practice resources for staff, training booking links, and conference materials to support learning and development.

Alongside working with local workforce to advocate for greater Father Inclusive Practice, the SSBC programme has also shared learning nationally. The purpose of sharing this learning is to both raise the profile of the SSBC programme and its work and enable others to build on the learning.

This has been achieved through a variety of conferences including:

- Think Dads Conference  
*October 2023*
- A Better Start Annual Event Collective Change, Learning from A Better Start: Doing things differently for babies, children and families  
*June 2024*
- SSBC Early Intervention and Learning Conference  
*September 2024*
- Father Inclusion in the Family Hubs  
*October 2024*
- Early Help Partnership conference workshop  
*October 2024*



## 5.2 Sharing the learning to influence policy

In addition to sharing learning to support Father Inclusive Practice in children's workforce, SSBC also committed to share the learning to influence national policy.

In 2023, SSBC's Programme Director was invited to give oral evidence to the Parliamentary Select Committee on Men's Health, and to provide a written evidence submission. Available at <https://committees.parliament.uk/writtenevidence/124431/pdf/>

SSBC advocated that more needed to be done to support men during their transition into parenthood and the early years of parenting. The transitional period is both a period of vulnerability and opportunity. Parents are more vulnerable to mental ill health, while families' increased interaction with health services during pregnancy and the early years offer points of contact with opportunities to identify needs and offer adequate support systems.

The submission suggested that improvements were needed to ensure that:

- Mental health services are family-oriented and father inclusive, with a special focus on support during the perinatal period
- Systems change towards father inclusivity, so that the support families receive during pregnancy and early parenthood are inclusive of fathers and male caregivers and recognise them as equal partners in parenting

# 6 Sustainability and legacy

SSBC acknowledge that father inclusion is a progressive area of work. We recognise through our work and through listening to others in the field that funded Father Inclusive Practice will take time and continued commitment to become part of child and family work. It is therefore critical that not only is support provided locally to continue the ongoing momentum of this work but also that a host is found to continue to update and share our knowledge, tools, and resources over a period of time, post the SSBC programme.

## The Father Inclusion Hub

SSBC have been successful in securing a host platform within the Centre for Innovation in Fatherhood at the University of Lincoln. Established in 2023, the Centre offers access to cutting-edge and interdisciplinary research, which underpins training, consultancy, and evaluation in the areas of father-inclusion and family welfare. Building from a UKRI funded Fellowship study called 'Following Young Fathers Further' (FYFF) a key aim of the Centre is to advance knowledge and expertise in family research and associated fields with a view to influencing academic, policy, and practice agendas both locally and (inter)nationally.

A core strand of the centre is the creation of an online Father-Inclusion Hub, an online space that will be connected directly to the FYFF website. The Hub, which will require registration from those who access it, will both host and disseminate resources that promote father inclusive practice and policy ecosystems and evidence its wider value for family and societal well-being.

Providing access to a 'commissioners package' the hub will:

- Platform the voices and lived experiences of diverse fathers and multi-agency professionals who advocate for father inclusion
- Share case studies of good practice nationally, as well as a service standards framework, and
- Host free-to-access training for professionals that is built on the evidence base.

The Hub will be built for a diverse target audience including midwives and maternity, health visiting, child and family support services, social work, criminal justice and any professional or service that engages with families. It will also support senior managers and decision-makers, funders, and commissioners to consider the significance of father-inclusive practice and how this can be embedded and achieved.

Featuring as a core case study for the Hub, SSBC's work will act as one of the leading exemplars of excellent practice in embedding father-inclusion locally and regionally, creating a legacy for the longer-term investment in this socially and politically significant area of practice and inclusive support.

# 7 Conclusions

**As part of the A Better Start programme (2015-2025) set up by The National Lottery Community Fund, SSBC in Nottingham are supporting families to give babies and very young children the best possible start in life. Alongside grounding the programme in scientific evidence and research, Father Inclusive Practice has been a focus of the SSBC programme.**

Evidence has highlighted the key role a positive father-child relationship has on a wide range of long-term, positive impacts on children. Supporting this role is key to giving all babies and young children the best start in life. However, whilst there was evidence, there were no examples, of Father Inclusive Practice implemented across all services at a system level. To address this, SSBC committed to developing a Father Inclusive Practice Strategy and working with key structures to oversee and support its implementation, within a whole systems approach.

Here we summarise key elements across the SSBC programme which have aimed to support the implementation of four key strategic priorities for Father Inclusive Practice.

## Workforce Recruitment & Training

When aiming to implement Father Inclusive Practice it is important that staff across services within the system are supported with appropriate knowledge and skills development, not only to recognise the importance and benefits of father inclusivity for the whole family, but also to feel confident in applying Father Inclusive Practice skills to engage with fathers, as these are positive factors in increasing the rates of father engagement. SSBC have identified this training need, and in response, have developed Father Inclusive Practice training (Think Dads) to support the local children's workforce. SSBC have also sought to upskill practitioners and support fathers within specific initiatives such as the FRED programme, whilst trying to ensure that services have the knowledge and skills to 'think dads' across the breadth of their offer in the city.

## Measuring Progress

Implementing Father Inclusive Practice takes time and is a gradual process. For services to assess progress in this ambition, it is important to establish clear and progressive criteria of success and to develop recording systems that allow information about fathers to be collected and progress measured. SSBC recognise the benefit in developing a coordinated and cohesive approach to implementing Father Inclusive Practice, acknowledging that both structural and operational level changes are needed within an organisation to facilitate effective and sustained change. Aiming to address this strategic priority SSBC developed a Father Friendly Service Standards Matrix. This provides a structure for senior leaders to consider and implement systems change that will encourage the engagement of fathers within their service. Whilst not exhaustive, it sets out a foundation for change and is supported by a wider Father Friendly Standards Toolkit which includes other SSBC initiatives such as An information pack for new fathers, Think Dads training and the Father Inclusive Communication Pack, to support its implementation.





### Service Development

Valuing fathers' views when developing services is a key requirement for Father Inclusive Practice. Providing opportunities for fathers to engage in service development is crucial to ensuring fathers' needs are appropriately identified and met within local service provision. Within the SSBC programme fathers' voices have been gathered and actively encouraged in several ways including, a fathers' consultation to inform resource development, representation through SSBC Parent Champions (parent volunteers), via Family Mentors and throughout the design, delivery and evaluation of services. Partner organisations have also been encouraged through commissioning processes, to also take this approach.

### Communication, Publicity & Outreach

Portrayal of fathers in communications and resources is important in supporting Father Inclusive Practice. Utilising images that ensure fathers are portrayed as equal partners in parenting their children is crucial to support a shift in societal views regarding the fathers' role. SSBC has sought to ensure that father inclusive communication is employed across the programme and developed a Father Inclusive Practice Communication Toolkit to support other services in adopting this approach.

# 8 References

SSBC is currently developing the programme's legacy website. Hence, for some of the reports which have been commissioned and/or produced by SSBC, the references below include a weblink to the SSBC website homepage ([www.smallstepsbigchanges.org.uk](http://www.smallstepsbigchanges.org.uk)) rather than a weblink to the specific report. Please use the search function on the SSBC webpage to locate the specific report titles.

1. Williams, M. (2020) Fathers Reaching out – Why Dad's matter. Available [here](#) (Accessed: 23 September 2024).
2. Baldwin, S., Malone, M., Sandall, J. and Bick, D. (2018) Mental health and wellbeing during the transition to fatherhood: a systematic review of first-time fathers' experiences. *JBI Database of Systematic Reviews and Implementation Reports*. 6(11), 2118-2191.
3. Paulson, J.F., Daubner, S. and Leiferman, J.A., (2006) Individual and Combined Effects of Postpartum Depression in Mothers and Fathers on Parenting Behavior. *Pediatrics*. 118(2), 659-668.
4. NHS. (2018) Overview – Postnatal depression. Available [here](#) (Accessed: 2 September 2024).
5. Philpott, L. F., Leahy-Warren, P., FitzGerald, S., & Savage, E. (2017) Stress in fathers in the perinatal period: a systematic review. *Midwifery*, 55, 113-127.
6. Bruno, A., Celebre, L., Mento, C., Rizzo, A., Silvestri, M.C., De Stefano, R., Zoccali, R.A. and Muscatello, M.R.A. (2020) When fathers begin to falter: a comprehensive review on paternal perinatal depression. *International journal of environmental research and public health*, 17(4),1139.
7. Sarkadi, A., Kristiansson, R., Oberklaid, F. and Bremberg, S. (2008) Fathers' involvement and children's developmental outcomes: A systematic review of longitudinal studies. *Acta paediatrica*, 97(2), 153-158.
8. Opondo, C., Redshaw, M. and Quigley, M.A. (2017) Association between father involvement and attitudes in early child-rearing and depressive symptoms in the pre-adolescent period in a UK birth cohort. *Journal of Affective Disorders*, 221, 115-122.
9. Desforges, C.A. (2004) The impact of parental involvement, parental support and family education on pupil achievement and adjustment: A literature review. Available [here](#) (Accessed: 2 September 2024).
10. Harris, A. and Chrispeels, J. H. eds.(2006) Improving schools and educational systems: International perspectives. Routledge.
11. Sylva, K., Melhuish, E., Sammons, P., Siraj-Blatchford, I. and Taggart, B. (2004). The effective provision of pre-school education (EPPE) project: Final Report: A longitudinal study funded by the DfES 1997-2004. Institute of Education, University of London/Department for Education and Skills/Sure Start.
12. Amodia-Bidakowska, A., Laverty, C., Ramchandani, P. (2020) Father-child play: A systematic review of its frequency, characteristics and potential impact on children's development. *Developmental Review*. 57, 100924.
13. Sethna V, Perry E, Domoney J, Iles J, Psychogiou L, Rowbotham NEL, Stein A, Murray L, Ramchandani PG. (2017) Father-child interactions at 3 months and 24 months: contributions to children's cognitive development at 24 months. *Infant Ment Health J*. 38 (3) : 378-390.
14. Allen, S., & Daly, K. (2007) The Effects of Father Involvement: An Updated Research Summary of the Evidence. Guelph: Centre for Families, Work & Well-Being.
15. King, V., Sobolewski, J.M. (2006) Nonresident Fathers' Contributions to Adolescent Well-Being. *Journal of Marriage and Family*, 68: 537-57.
16. Amato, P.R. and Rivera, F. (1999) Paternal Involvement and Children's Behavior Problems. *Journal of Marriage and Family*, 61(2), 375-384
17. Carlson, E. (2006) Ages of origin and destination for a difference in life expectancy. *Demographic Research*, 14,217-236.
18. Dex, S.W.K. (2007) Parental care and employment in early childhood. London: Equal Opportunities Commission. (Accessed: 2 September 2024)
19. Malmberg, G. and Flouri, E. (2011) The comparison and interdependence of maternal and paternal influences on young children's behavior and resilience. *Journal of Clinical Child and Adolescent Psychology*, 40(3), 434-444.
20. Flouri, E. and Malmberg, L.-E. (2012) Father involvement, family poverty and adversity, and young children's behaviour in intact two-parent families. *Longitudinal and Life Course Studies*, 3(2), 254-267.
21. Flouri, E., Midouhas, E. and Narayanan, M. K. (2016) The relationship between father involvement and child problem behaviour in intact families: a 7-year cross-lagged study. *Journal of Abnormal Child Psychology*, 44(5), 1011-1021.
22. Ellis, B.J., Schlomer, G.L., Tilley, E.H. and Butler, E.A. (2012) Impact of fathers on risky sexual behavior in daughters: A genetically and environmentally controlled sibling study. *Development and psychopathology*, 24(1), 317-332.

23. Norman, H. and Davies, J. (2023) What a difference a dad makes. Paternal Involvement and its Effects on Children's Education (PIECE) study. Available [here](#) (Accessed:12 November 2024).
24. Gottfried, A. E., Gottfried, A. W. and Bathurst, K. (1988) Maternal employment, family environment, and children's development: Infancy through the school years. In A. E. Gottfried & A. W. Gottfried (Eds.), *Maternal employment and children's development: Longitudinal research* (pp. 11-58). New York: Plenum.
25. Flouri, E. and Buchanan, A. (2004) *British journal of educational psychology*, 74(2), 141-153
26. Nettle, D. (2008) Why do some dads get more involved than others? Evidence from a large British cohort. *Evolution and Human Behavior*, 29(6), 416-423.
27. Goldman, R. (2005) *Fathers' Involvement in Their Children's Education: A Review of Research and Practice*. London: National Family and Parenting Institute.
28. Blanden, J. (2006) 'Bucking the trend': what enables those who are disadvantaged in childhood to succeed later in life? *Corporate Document Services*.
29. Twamley, K., Brunton, G., Sutcliffe, K., Hinds, K., and Thomas, J. (2013) Fathers' involvement and the impact on family mental health: evidence from Millennium Cohort Study analyses. *Community, work and family*, 16(2), 212-224.
30. The Fatherhood Institute (n.d.) Fathers in the first 1001 days. Available [here](#) (Accessed 21 August 2024).
31. Lamb, M. E. (2000) The history of research on father involvement: An overview. *Marriage & Family Review*, 29(2-3), 23-42.
32. Alio, A.P., Bond, J., Padilla, Y.C., Heidelbaugh, J.J., Lu, M. and Parker, W.J. (2011) Addressing Policy Barriers to Paternal Involvement During Pregnancy. *Maternal and Child Health Journal*, 15 (4), 425-430.
33. Agrawal, J., Chakole, S. and Sachdev, C. (2022) The Role of Fathers in promoting Exclusive breastfeeding. *Cureus*, 14(10).
34. Paulson, J. F. and Bazemore, S. D. (2010) Prenatal and postpartum depression in fathers and mothers: In reply. *JAMA: Journal of the American Medical Association*, 304(9), 961-962. Available [here](#)
35. The Fatherhood Institute (n.d.) Fathers in the first 1001 days. Available [here](#) (Accessed: 21 August 2024).
36. Burgess, A. and Goldman, R. (2022) Bringing Baby Home: UK fathers in the first year after the birth (full report). *Contemporary Fathers in the UK series*. London: Fatherhood Institute.
37. Bottorff, J.L., Kalaw, C., Johnson, J.L., Stewart, M., Greaves, L. and Carey, J., (2006) Couple dynamics during women's tobacco reduction in pregnancy and postpartum. *Nicotine & Tobacco Research*, 8(4), 499-509.
38. Flouri, E. and Buchanan, A., (2003) The role of father involvement and mother involvement in adolescents' psychological well-being. *British Journal of Social Work*, 33(3), 399-406.
39. Dermott, E. (2008) *Intimate Fatherhood*. London: Routledge.
40. Plantin, L., (2007) *Fatherhood and health outcomes. The case of Europe*. WHO Regional. Office for Europe.
41. Palm, G. and Fagan, J., (2008) Father involvement in early childhood programs: review of the literature. *Early Child Development and Care*, 178 (7-8), 745-759.
42. Gettler, L.T., McDade, T.W., Feranil, A.B. and Kuzawa, C.W., (2011) Longitudinal evidence that fatherhood decreases testosterone in human males. *Proceedings of the National Academy of Sciences*, 108(39), 16194-16199.
43. Kuo, P.X., Braungart-Rieker, J.M., Lefever, J.E.B., Sarma, M.S., O'Neill, M. and Gettler, L.T., (2018) Fathers' cortisol and testosterone in the days around infants' births predict later paternal involvement. *Hormones and Behavior*, 106, 28-34.
44. Bakermans-Kranenburg, M.J., Lotz, A., Alyousefi-van Dijk, K. and van IJzendoorn, M. (2019) Birth of a father: Fathering in the first 1,000 days. *Child Development Perspectives*, 13(4), 247-253.
45. Feldman, R., and Bakermans-Kranenburg, M. J. (2017) Oxytocin: A parenting hormone. *Current Opinion in Psychology*, 15, 13-18.
46. Abraham, E., Hendler, T., Shapira-Lichter, I., Kanat-Maymon, Y., Zagoory-Sharon, O., & Feldman, R. (2014) Father's brain is sensitive to childcare experiences. *Proceedings of the National Academy of Sciences of the United States of America*, 111, 9792-9797.
47. Abraham, E. and Feldman, R. (2018) The neurobiology of human allomaternal care: Implications for fathering, coparenting, and children's social development. *Physiology & Behavior*, 193, 25-34.
48. Shia, N. and Alabi, O., (2013) An evaluation of male Partners' perceptions of antenatal classes in a national health service hospital: implications for service provision in London. *The Journal of Perinatal Education*, 22(1), 30-38.
49. Ekelin, M., Crang-Svalenius, E. and Dykes, A. (2004) A qualitative study of mothers' and fathers' experiences of routine ultrasound examination in Sweden. *Midwifery*, 20 (4), 335-344.
50. Draper, J. (2003). Men's passage to fatherhood: an analysis of the contemporary relevance of transition theory. *Nursing Inquiry*, 10 (1), 66-78.
51. Burgess, A. and Russell, G., (2004) *Fatherhood and public policy*. In: D. Lemieux, ed., *Early childhood development: Practice and reflections*. Oxford, UK: Bernard van Leer Foundation, 2004, 108-145.
52. de Montigny, F. and Lacharité, C., (2004) Fathers' Perceptions of the Immediate Postpartal Period. *Journal of Obstetric, Gynecologic, and Neonatal Nursing*, 33 (3), 328-339.
53. Lee, J. and Schmied, V., (2001) Involving men in antenatal education. *British Journal of Midwifery*, 9 (9), 559-561.
54. Huusko, L., Sjöberg, S., Ekström, A., Hertfelt Wahn, E. and Thorstensson, S., (2018) First-Time Fathers' Experience of Support from Midwives in Maternity Clinics: An Interview Study. *Nursing research and practice*, 2018(1), p.9618036.
55. Hildingsson, I. and Rådestad, I. (2005) Swedish women's satisfaction with medical and emotional aspects of antenatal care. *Journal of Advanced Nursing*, 52 (3), 239-249.
56. Baldwin, S., Malone, M., Sandall, J. and Bick, D., (2018) Mental health and wellbeing during the transition to fatherhood: a systematic review of first time fathers' experiences. *JB database of systematic reviews and implementation reports*, 16(11), 2118.
57. Paulson, J.F., Daubner, S. and Leiferman, J.A., (2006) Individual and Combined Effects of Postpartum Depression in Mothers and Fathers on Parenting Behavior. *Pediatrics*, 118(2), 659-668.



58. NHS. (n.d.) Overview – Postnatal depression. Available [here](#) (Accessed: 28 August 2024)
59. Saxbe, D., Rossin-Slater, M., & Goldenberg, D. (2018) The transition to parenthood as a critical window for adult health. *American Psychologist*, 73(9), 1190
60. Howard, L.M. and Khalifeh, H., (2020) Perinatal mental health: a review of progress and challenges. *World Psychiatry*, 19(3), 313-327
61. American Psychiatric Association, D. S. M. T. F., & American Psychiatric Association. (2013) Diagnostic and statistical manual of mental disorders: DSM-5 (Vol. 5, No. 5). Washington, DC: American psychiatric association.
62. Genesoni, L. and Tallandini, M.A., (2009) Men's psychological transition to fatherhood: an analysis of the literature, 1989–2008. *Birth*, 36(4), 305-318.
63. Ramchandani, P. G., Stein, A., Hotopf, M., and Wiles, N. J. (2006) Early parental and child predictors of recurrent abdominal pain at school age: results of a large population-based study. *Journal of the American Academy of Child and Adolescent Psychiatry*, 45(6), 729-736.
64. The Royal College of Midwives. (2011) Reaching out: Involving Fathers in Maternity Care. Available [here](#) (Accessed 14 October 2024).
65. NHS England (2019) The NHS Long term plan. Available [here](#) (Accessed: 14 October 2024)
66. NHS England (2021) Involving and Supporting Partners and Other Family Members in Specialist Perinatal Mental Health Services: good practice guide. Available [here](#) (Accessed: 14 October 2024).
67. Health Education England (HEE) (2018) The competency framework for professionals working with women who have mental health problems in the perinatal period. Available [here](#) (Accessed:14 October2024).
68. NICE (2014) Antenatal and postnatal mental health: clinical management and service guidance [CG192] Published: 17 December 2014 Last updated: 11 February 2020. Available [here](#) (Accessed: 14 October 2024).
69. Welsh Government (2019) Parenting in Wales. Guidance on engagement and support. Available [here](#) (Accessed: 14 October 2024).
70. HM Government (2015) Healthy Child programme: rapid review to update evidence for the healthy child programme 0 to 5. Available [here](#) (Accessed: 14 October 2024).
71. HM Government, (2022) Family Hubs and Start for Life programme guide. Available [here](#) (Accessed: 4 November 2024)
72. Lloyd, N., O'Brien, M. and Lewis, C., (2003) Fathers in sure start. London: University of London, Institute for the Study of Children, Families and Social Issues. Retrieved March, 31, p.2007.
73. National Toolkit for Family Hubs (N.D.) - Implementation toolkit. A collection of coproduced resources for setting up family hubs in local areas. Available [here](#) (Accessed: 23 October 2024).
74. Panter-Brick, C., Burgess, A., Eggerman, M., McAllister, F., Pruetz, K. and Leckman, J.F., (2014) Practitioner review: Engaging fathers—recommendations for a game change in parenting interventions based on a systematic review of the global evidence. *Journal of child psychology and psychiatry*, 55(11), 1187-1212.
75. Rominov, H., Giallo, R., Pilkington, P.D. and Whelan, T.A., (2017) Midwives' perceptions and experiences of engaging fathers in perinatal services. *Women and Birth*, 30(4), 308-318.
76. Vipham, P., (2023) Exploring the current practice of health visitors to assess and support paternal mental health. *Journal of Health Visiting*, 11(3), 113-126.
77. Jiang, Y., et al., (2018) Development and Psychometric Evaluation of the Father Engagement Questionnaire. *Journal of Child and Family Studies*, 27 (11), 3457-3467.
78. Common, L., and Hussain C. (2024) Pregnancy Mentor Apprentice Project: Final Evaluation Report. Available [here](#)
79. Matthey, S., and Barnett, B. (1999) Parent–infant classes in the early postpartum period: Need and participation by fathers and mothers. *Infant Mental Health Journal: Official Publication of The World Association for Infant Mental Health*, 20(3), 278-290.
80. NICE. (2021) Postnatal Care [ng194]. Available [here](#) (Accessed:14 October 2024).
81. Baldwin, S., Malone, M., Murrells, T., Sandall J. and Bick, D. (2021) A mixed-methods feasibility study of an intervention to improve men's mental health and wellbeing during their transition to fatherhood. *BMC Public Health*, 21 (1), 1-1813.
82. Coles, L., & Collins, L. (2009) Including fathers in preventing non-accidental head injury. *Community Practitioner*, 82(4), 20-23.
83. Menzies, J. (2019) Fathers' experiences of the health visiting service: A qualitative study. *Journal of Health Visiting*, 7(10), 490-497.
84. Brown, A., and Davies, R. (2014) Fathers' experiences of supporting breastfeeding: challenges for breastfeeding promotion and education. *Maternal & Child Nutrition*, 10(4), 510-526.
85. Sherriff, N., and Hall, A. (2014) Rhetoric or reality? Father support in promoting breastfeeding. *International Journal of Birth and Parenting Education*, 1(4), 19-22.
86. Mol, S. E., Bus, A. G., De Jong, M. T., and Smeets, D. J. (2008) Added value of dialogic parent–child book readings: A meta-analysis. *Early education and development*, 19(1), 7-26.
87. Pancsofar, N. and Vernon-Feagans, L., (2010) Fathers' early contributions to children's language development in families from low-income rural communities. *Early Childhood Research Quarterly*, 25 (4), 450-463.
88. Duursma, E. (2014). The effects of fathers' and mothers' reading to their children on language outcomes of children participating in early head start in the United States. *Fathering (Harriman, Tenn.)*, 12 (3), 283.
89. NICE. (2021) Postnatal Care [NG194]. Available [here](#) (Accessed: 14 November 2024)
90. Hodgson, S., Painter, J., Kilby, L. and Hirst, J., (2021) The experiences of first-time fathers in perinatal services: Present but invisible. In *Healthcare* (Vol. 9, No. 2, p. 161). MDPI.
91. Bohren, M.A., Berger, B.O., Munthe-Kaas, H. and Tunçalp, Ö., (2019) Perceptions and experiences of labour companionship: a qualitative evidence synthesis. *Cochrane Database of Systematic Reviews*, (3).
92. Uytendogaardt, A., (2020) Fathers staying overnight at the maternity ward? *British Journal of Midwifery*, 28(2), 73-73.

93. Turton, P., Badenhorst, W., Hughes, P., Ward, J., Riches, S. and White, S., (2006) Psychological impact of stillbirth on fathers in the subsequent pregnancy and puerperium. *The British Journal of Psychiatry*, 188(2),165-172.
94. Kagami, M., Maruyama, T., Koizumi, T., Miyazaki, K., Nishikawa-Uchida, S., Oda, H., Uchida, H., Fujisawa, D., Ozawa, N., Schmidt, L. and Yoshimura, Y., (2012) Psychological adjustment and psychosocial stress among Japanese couples with a history of recurrent pregnancy loss. *Human reproduction*, 27(3), 787-794.
95. Redshaw, M.R.R, Rowe, R. and Henderson, J., (2014) *Listening to parents after stillbirth or the death of their baby after birth*. Oxford: Oxford National Perinatal Epidemiology Unit.
96. Rogers, C.H., Floyd, F.J., Seltzer, M.M., Greenberg, J. and Hong, J., (2008) Long-term effects of the death of a child on parents' adjustment in midlife. *Journal of family psychology*, 22(2), 203.
97. Murphy, S.A., Clark Johnson, L., Wu, L., Fan, J.J. and Lohan, J., (2003) Bereaved Parents' Outcomes 4 to 60 months after their child's death by accident, suicide or homicide: A Comparative study demonstrating differences. *Death studies*, 27(1), 39-61.
98. Aidoo, E. and Rajapakse, D., 2018. End of life care for infants, children and young people with life-limiting conditions: planning and management: the NICE guideline (2016). *Archives of Disease in Childhood-Education and Practice*, 103(6), 296-299.
99. Lullaby Trust (2023) Bereaved Fathers, Partners & Co-parents. Advice and support for bereaved fathers, partners and co-parents. Available [here](#) (Accessed: 15 October 2024).
100. McNeil, M.J., Baker, J.N., Snyder, I., Rosenberg, A.R. and Kaye, E.C., (2021) Grief and bereavement in fathers after the death of a child: a systematic review. *Pediatrics*, 147(4).
101. Jones, K., Robb, M., Murphy, S. and Davies, A., (2019) New understandings of fathers' experiences of grief and loss following stillbirth and neonatal death: a scoping review. *Midwifery*, 79, 102531.
102. Ramano, E., Pretorius, W., de Jager, M., Oldfield, T., Scriba, D. and Moriti, B., (2022) Occupational therapists' perceived ability to treat and assist bereaved individuals to find new meaning in life through engagement in therapeutic activities. *South African Journal of Occupational Therapy*, 52(3), 34-43.
103. Fortuna, J., (2019) The Art and Process of Wood Carving as a Meaningful Occupation. *The Open Journal of Occupational Therapy*, 7(2), 14.
104. Waterfall, D., (2024) Evaluation of the Small Steps Big Changes Ideas Fund - Final Report. Available [here](#)
105. Lushey, C., Tura, F., Toft, A., Harding, R., Bickerton, C., Cassidy, S., Cooper, S., Davies, K., Fleming, J., Huntington, B. and Jameel, A., (2023) Evaluation of Small Steps Big Changes: Final Report 2023. Available [here](#)
106. HM Government 2023. *Establishing your Parent and Carer panel*. Available [here](#) (Accessed: 4 November 2024)
107. Kania, J.,Kramer, M. and Senge, P. (2018) *The water of systems change*. Available [here](#) (Accessed: 4 November 2024).



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