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Engaging African and African Caribbean fathers in primary health care through a focus on children's well being.

Bob Williams & Tracey Bignall.

CPHVA conference.

October 2010.

Policy Context

Examples of recent policy/legislation:

- Healthy Child Programme (DH, 2008)
- Teenage Parenting Strategy (DH/DCSF, 2007)
- Every Parent Matters (HM Treasury/DfES, 2007)
- The Childcare Act (2006)
- The Equality Act (2006)
- NSF for Children, Young People & Maternity Services (DH/DfES, 2004)

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Background:

- Research indicates that midwifery, health visiting, Children's Centres, family centres, social work services find it difficult to engage fathers.

- Black and ethnic minority fathers anticipate racialised prejudice by health professionals (Williams, 1999, 2009)

- Wider research: fathers can be **assets and/or risks** within families regarding health (eg children's mental health, PND, abuse, violence).

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Aim of study

To investigate **African-Caribbean fathers' health experiences and their views about preventive primary care services** delivered by the Heart of Birmingham Teaching Primary Care Trust, in order to identify implications for practice, policy and future research.

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Study sample: accessed using social networks within local communities.

- 9 group interviews involving 46 fathers
- Fathers of diverse ethnicities over the age of 18 and living in inner city area
- '*Responsible*' fathers?

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Findings: six themes

- Fatherhood as a moral imperative and a complex set of interdependent responsibilities.
- Fatherhood within communities and a hard social world.
- Changing fatherhood.
- Fathers' beliefs and practices for children's mental well being.
- Interdependence of fathers' and children's 'health'.
- The limited significance of preventive health services in fathers' lives: barriers and future opportunities.

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Theme Six. The limited significance of preventive health services in fathers' lives. Barriers and future opportunities.

- Fathers had limited awareness of, and involvement with, preventive primary care services.

- Negative views and experiences of other NHS services such as GP medical services and hospital services;

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Theme six: barriers

- Child health services understood to focus on mothers, rather than both parents;
- Traditional notions of gender dissuade some fathers' from accessing services;
- Experiences or anticipation of:
  - cultural misunderstanding,
  - cultural insensitivity,
  - and racial prejudice and discrimination when using the NHS and other health and social care services.

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Theme six: opportunities

- Not ‘hard to reach’.
- Fathers were passionate about the health of their children.
- Attempting to maintain children’s mental well being.
- Enabling children’s mental well being is undertaken to help children navigate wider social and structural difficulties in order to stay well.

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Theme six: opportunities (continued)

- Wider responsibility to others in African, African Caribbean, Muslim and Christian communities.

- Fathers are change agents: migration, and changing gender relationships, and changes in parenting styles across generations.

- Fathers' insights into the ways that social, structural and material factors impact on communities, families, health and well-being. They offer a kind of lay, critical epidemiology.

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Implications: theory and policy link

- Fathers' accounts link fatherhood to the wider social determinants of heath and they are striving to protect children's mental well being.

- Policy regarding child health and parenting, on the one hand, needs to be linked with policies regarding tackling social inequalities and inequalities in health (eg Marmot Review, 2010).

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Race Equality Foundation.

- Aim: to reduce disadvantage and discrimination by promoting race equality.
- Aim: to improve practitioners' knowledge of issues pertaining to black and minority ethnic fathers in order that this can better inform practice.
- Use of evidence to inform practice
- Sharing of learning eg Black fathers' organisations' work.

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Race Equality Foundation: What are we doing?

- Collaboration: regarding BME fathers in policy and practice eg. Fatherhood Institute, National Children's Bureau

- SFSC parent programme to improve outcomes for parent and child

- Disseminate good practice through resources: *Better Health* programme, briefing paper on African Caribbean fathers and health, workshops, training & presentations.

www.better-health.org.uk

www.raceequalityfoundation.org.uk

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Summary

- Increasing emphasis in health policy on engaging fathers within primary health care services.
- This qualitative and exploratory study has addressed one of the limitations within the research by analysing the views and experiences of 46 African and African Caribbean fathers.
- There are important barriers to African and African Caribbean fathers accessing preventive health services, not least fathers' limited awareness of those services.
- There are a range of opportunities for PCTs to increase the engagement of African and African Caribbean fathers in services through participation, training, audit, further research.

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Questions and comments.

- Background to study?
- Methodology?
- Findings?
- Implications?
- Limitations?

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For further information and/or if you want a copy of the report summary, please email:

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Final report

'We're doing our best': African-Caribbean fathers' views and experiences of fatherhood, health, and preventive primary care services

100% total commitment of my life goes towards my three children... for their future until I die. So being a father for me is... the embodiment of everything I do.

Father who participated in the study

Submitted to:
Heart of Birmingham (Teaching) Primary Care Trust

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