

Fathers

SUPPORTING HEALTHY DADS, CHILDREN AND FAMILIES

Why It's Important

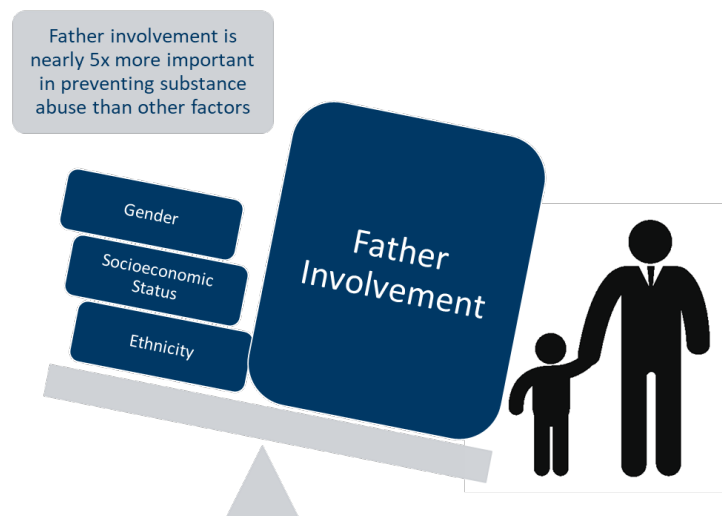
Children and families do better when fathers are involved in their kid's lives. Children who grow up in families with an involved father have better performance in school, stronger behavioral skills, and have higher self-esteem.¹ Children who do not have a positive relationship with their father or don't have an active father figure in their life are at a higher risk for behavioral problems, academic challenges, depression and substance use. Father involvement is nearly 5 times more important in preventing substance use than gender, ethnicity, or socioeconomic status (see Figure 1).¹ Children who have minimal or no father involvement are more likely to skip school, be expelled, and to leave high school prior to getting their diploma.¹

The Census Bureau estimates that approximately 324,000 Minnesotan children, or 1 in every 4, are currently living in homes without a father.²

Men also benefit from being involved fathers. Involved fathers who report having positive relationships with their children have fewer accidental deaths, less substance use, and less involvement with the criminal justice system compared to men that are not involved with their children.^{3,4} Fathers who spend time supporting their children academically and emotionally experience higher levels of empathy, understanding, and self-confidence in their role as a caregiver.¹ Fatherhood can also improve the health of communities, with fathers taking on leadership roles in community groups and acting as role models to children without involved dads.

"[Women, children, and families need] committed, involved, supportive husbands and fathers. Over 90% of the struggling families/children in my practice have an absent, uninvolved, or abusive father." - Needs Assessment Discovery Survey Respondent

Figure 1. Diagram – The Importance of Fathers in Substance Use Prevention



Focus on Health Equity

Disparities in incarceration rates have been associated with differences in father involvement. A 2014 survey of people in prison in Minnesota found that 66 percent of male prisoners had children and 54 percent of these fathers were living with their child prior to their incarceration.⁵ Removal of a father from a household can have numerous negative financial and emotional effects that impact the stability and mental health of their children and other family members. Among incarcerated men in Minnesota, 33 percent reported that their child(ren) were between the ages of 10 and 17. Several research studies have shown that removal of a father or father figure from a child’s life during adolescence can have the greatest negative effects on the child’s academic, behavioral, and emotional outcomes.⁶

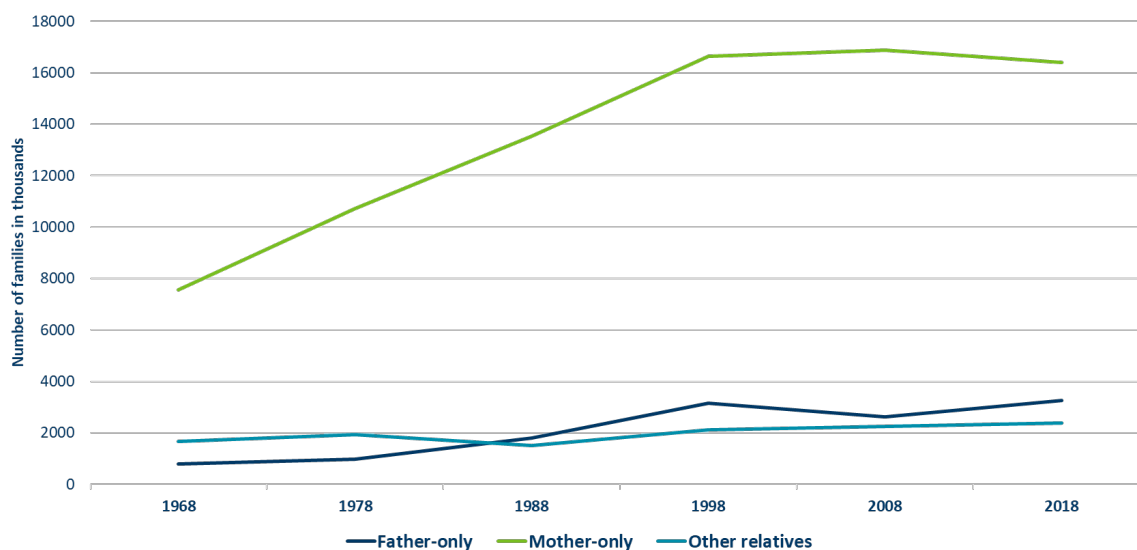
“Many men in the community are also incarcerated which places all the burden on the women to not only support their families alone but also to assign some of their financial resources to maintain a connection to their incarcerated partner.” – Needs Assessment Discovery Survey Respondent

Significant racial and ethnic disparities in incarceration are present in Minnesota. African American children were almost eight times more likely than white children and nearly three times more likely than Hispanic children to have a parent in prison.⁶ Among youth that are incarcerated, 85 percent grew up in fatherless homes.⁷

Additional Considerations

According to the 2010 census, the fastest growing type of household in America is single fathers with about 25 percent of all single parent households being led by a dad.³ This trend has continued with 16.1 percent of single parent households today being led by fathers, up from 12.5 percent in 2007.⁴ It is projected that by 2030, the number of single father households in Minnesota will increase by 55 percent.¹

Figure 2. Living Arrangements of Children under 18 in the United States, 1968-2018



Source: U.S. Census Bureau, Current Population Survey

FATHERS

The trend of single father households is increasing, and so is the need for better supports for dads. Fathers raising children on their own have worse self-rated health and mental health than fathers who are partnered and single mothers.⁸ Fewer fathers of children and youth ages 0 to 17 in Minnesota (40.9%) report excellent mental health than nationwide estimates (43.2%).² A study published in the American Journal of Public Health detailed the numerous negative effects that single fatherhood can have on a dad's mental and physical health with uncoupled fathers reporting the highest rates of anxiety and depression.⁹

“Dads have this idea of the 2 P’s – traditionally provide and protect. They can also nurture and love. They need to be encouraged to do those things and to be emotional.”- Key Informant Interview with Joe Johnson, the Father Project

Data Limitations

Data on fatherhood is lacking in comparison to the many data collection systems and research that focus on mothers and health outcomes of children in single mother households. Single mother households are more common than single father households, which has resulted in very little research being done that looks at single father households.

A challenge when trying to measure father involvement is working with many different definitions of who a “father” can be. A father can be biological, a step parent, a foster parent, a residential parent, a nonresidential parent, a social parent, and more. A father can have many different roles within a child's life and attempting to categorize all fathers into one type of measure can be difficult.

Discovery Survey Results

In the summer of 2018, Minnesota's Title V Maternal and Child Health Needs Assessment distributed a Discovery Survey asking people living in Minnesota, “What are the biggest unmet needs of women, children, and families in your community?” More than 2,700 people responded. There were 41 “Father” responses in the survey that mentioned incarceration, single fatherhood, and resources for father support.

Important Note on Equity and Intersectionality

The Minnesota Department of Health's Title V Needs Assessment Team acknowledges that structural (social, economic, political and environmental) inequities can result in poor health outcomes across generations. They have a greater influence on health outcomes than individual choices or a person's ability to access health care, and not all communities are impacted in the same way.

All people living in Minnesota benefit when we reduce health disparities.

We also acknowledge that the topic addressed in this data story does not exist in isolation– which is important to remember as we do needs assessments and as we start thinking about how we approach solutions. In addition to the needs themselves being intersectional, there are also intersecting processes and systems through which power and inequity are produced, reproduced, and actively resisted.

Citations

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Child and Family Health Division
Title V Maternal and Child Health Needs Assessment
Minnesota Department of Health
PO Box 64975
St. Paul, MN 55164-0975
651-201-3589
health.cfhcommunications@state.mn.us
www.health.state.mn.us



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