

A QUALITATIVE

EVALUATION OF THE

'DADS AT THEIR BEST'

SERVICE

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PREFACE

This report evaluates support offered to young fathers by Swindon Borough Council through the 'Dads at their Best' programme. It is written by Professor Carmen Clayton and Kerry Fletcher from Leeds Trinity University who are both experienced researchers in the field of young fatherhood research. This report was completed in the summer of 2023.

EXECUTIVE SUMMARY

Young fatherhood is recognised as a cause and consequence of social exclusion, health inequalities, and 'NEET' (Not in Education, Employment or Training) status, all of which can significantly impact upon the father's and child's well-being and future outcomes (Public Health England, 2019). By supporting young fathers appropriately and effectively, professionals can play a significant role in helping young men to build and develop their skills as parents and to improve the parent-child relationship (Neale, 2016). But as a group, they are often marginalised, discriminated against, and their service needs are frequently ignored (Tarrant et al., 2022). Despite longstanding calls to address such issues, there continues to be limited policy focus and formal support for such a group at a national level.

In Swindon Borough Council, the 'Dads at their Best'/DATB programme was developed in 2021 with the view of addressing the service gap in provision for young fathers and supporting young men in a more holistic way. In April 2022, DATB started to formally enrol young fathers onto the programme. Given the new implementation of DATB, the commissioned nature of the provision by Swindon Local Authority, and the client group it serves, it is vital to understand how effective the DATB service is, if examples of good practice can be identified and shared, and if any improvements to the service are needed. As a result, a qualitative evaluation of DATB was undertaken in Spring 2023, led by Leeds Trinity University. Young fathers and Swindon-based professionals were invited to share their views and experiences of DATB through one-to-one online or telephone interviews with a trained researcher.

Key Findings:

- Young fathers valued the support from DATB. Through DATB, young men identified and utilised their existing strengths as parents, developed their parenting capacity further, acquired new knowledge (such as attachment theory), and reflected on their role as a father.
- Through DATB, fathers gained a better understanding of the co-parenting relationship, including co-parenting strategies and communication skills. For those who were no longer with the child's mother or were experiencing conflict, such skills were seen as particularly valuable in sustaining co-parenting from afar.
- Young fathers reported a better awareness of healthy mindsets, healthy relationships, coping strategies and responses by attending DATB, which led to positive changes in their well-being, mental health, communication skills, and self-care.
- Young fathers felt that DATB participation increased their sense of confidence as a parent and has had a positive impact on the father-child relationship including attachment levels.
- Young fathers and professionals witnessed positive outcomes for children as a result of DATB input and support.
- Similarly, professionals reported positive changes in the young men's attitudes, responses, and behaviours, as fathers as a result of attending DATB.
- Professionals felt that DATB's assessments of young fathers' support needs were detailed and insightful, leading to tailored levels of support for the young men on the programme. Such assessments were helpful for other professionals too, given the partnership working of DATB and its multi-agency approach.
- The young fathers felt that the DATB specialist support worker was knowledgeable, trustworthy, accessible, and reliable.
- Young fathers saw other professionals in a more positive light as a result of DATB engagement and were more willing to seek out help and engage with other service providers as a result.
- Professionals viewed DATB in a positive manner and felt that the programme played a significant role as an individual service and was complementary to other formal provision in the area.



Broad Recommendations

1. DATB's approach and models of working should be shared more widely as exemplars of good practice when working with and supporting young fathers.
2. DATB has led to positive outcomes for young fathers and their children, whilst enhancing professional support. The continuation of the DATB would therefore be recommended in Swindon.
3. The incorporation of group and peer support would complement DATB's existing models of working when supporting young fathers.
4. To reduce waiting lists for the service and to enhance the scope and size of the current provision, DATB would benefit from increased capacity through further funding and increased staffing.
5. Revise the existing eligibility criteria to enable a larger number of potential client users to access the service and extending the period of support available to young men, including those who have completed the programme.
6. DATB and professional partners to enhance partnership and multi-agency working for the benefit of young fathers and their children.
7. The programme has the potential to be developed and extended nationally, working in conjunction with local services, to deliver accessible and effective service support to young fathers.

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INTRODUCTION

Since April 2022, the 'Dads at their Best'/DATB programme provides intensive support for young fathers and young fathers-to-be within the Swindon area.¹ The long-term vision of DATB is to:

- ***Provide a permanent, sustainable, and embedded specialist service for young fathers in Swindon that improves outcomes for young men, their children, and partners.***
- ***To increase professionals' awareness of young fathers and their support needs, leading to better informed, inclusive, and equitable service provision in Swindon.***

DATB is commissioned by Swindon Borough Council and its conceptualisation and development has occurred in close collaboration with the FNP/Family Nurse Partnership National Unit and the local FNP team.² FNP is a home visiting programme which supports first-time mothers and families, and the inclusion of fathers is advocated as part of this. Although the FNP recognises and engages fathers in its delivery, there continues to be limited formal support for young fathers on a national level in the UK (Donald et al., 2022). In addressing this gap, local stakeholders in Swindon recognised the need to develop a specialist service for young men who had parenting responsibilities, including young fathers whose partners were FNP client users (i.e., the child's mother). Within this context, DATB was developed with the aim of supporting young fathers from pregnancy onwards and breaking down barriers to young fathers' engagement and access to service provision.

DATB offers a core and targeted pathway as part of its provision and referrals are made through support professionals within Swindon Local Authority, including the local FNP team. Young fathers and expectant fathers are also able to self-refer (see appendix 1). The duration of the core pathway is from early pregnancy (ideally before 20 weeks) until the child reaches one year of age, whereas the targeted pathway runs for 3-6 months. Young men can enrol at any stage of parenthood (to date, children have been aged 2-20 months when the father begins). The core and targeted pathways are delivered through one-to-one support sessions, which explore emotional regulation, mental health (Cognitive Behavioural Therapy), attachment, life skills, EET (Education, Employment, Training), healthy relationships, child development, children's play, self-efficacy, and safe handling and caring of a young baby (see appendix 3 for further details). By drawing on good practice from the FNP and the latest research on young fatherhood (such as Ahnert and Schoppe-Sullivan, 2020; The Child Safeguarding Practice Review Panel, 2021), DATB utilises evidence informed practice and professional models of working to engage with, and to support, young men. This includes early engagement of clients, motivational interviewing, weekly supervision, monthly psychology supervision, weekly team meetings, tripartite safeguarding supervision with a named nurse, and specialised skills to engage and retain clients.

DATB has short, medium, and long-term outcomes envisaged for the young man and his child as they attend, progress, and complete the core or targeted pathways (see appendix 4 and 5). Short-term outcomes are predicted to be achieved after 6 months of enrolment, medium-term outcomes from 3-24 months after enrolment, and long-term outcomes predicted between 18-24 months after enrolment. Outcomes are seen as goals to work towards, alongside professional support and encouragement, and are tailored to individual father's needs and the age of their child. An individualised approach to identifying and meeting outcomes, reflects the diverse backgrounds and circumstances of young fathers. It is also recognised that young fathers may achieve their goals and outcomes before or beyond the timeframes envisaged.

In Spring 2023, a qualitative evaluation was undertaken to assess the effectiveness of DATB in terms of its implementation, delivery, and envisaged outcomes. Young fathers as client users and Swindon-based professionals who had experience of the DATB service were invited to take part in online and telephone-based interviews on a one-to-one basis with a researcher. The overarching questions in the evaluation were as follows:

- 1. Are the young fathers well supported in relation to the programme's aims and intended outcomes?***
- 2. How effective is the service in delivering the programme itself, such as accessibility and engagement with young fathers?***
- 3. Can the programme improve in any way in relation to its aims, delivery and intended outcomes?***
- 4. What role and impact (if any) does the new programme have on the existing support offer for families in Swindon?***
- 4. What lessons can be learnt from the new provision for other family services within and beyond the Swindon area?***

The remainder of the report will outline the details of the evaluation study, followed by the key findings from the young fathers' and professionals' perspectives. Key recommendations are highlighted at the end of the document.

¹Young fathers are defined as entering parenthood or experiencing the first pregnancy aged 25 or under.

²The Family Nurse Partnership | (fnp.nhs.uk)

EVALUATION STUDY

Invitations to take part in the evaluation study were sent directly to young fathers and professionals who had experience and/or encounters with DATB, after appropriate ethical approval was granted.³ 5 young fathers and 3 Swindon-based professionals responded positively. The sample size was kept small to acquire an in-depth and rich account of participants' experiences and opinions (Young and Casey, 2018). When the evaluation was designed and approved, 12 young fathers were registered on the programme and the aim was to recruit up to 4 young fathers and 3 professionals. An additional young father was included due to the interest shown. When the evaluation ended, there were 16 fathers enrolled on DATB, and so, the 5 recruited fathers represented 31% of all registered client users.

One-to-one, qualitative semi-structured interviews were set up with a trained researcher for those who expressed an interest and interviews took place between March and April 2023. Participants had the option of a telephone or online interview (using Microsoft Teams). Qualitative interviews allow interviewees to tell their own stories, on their own terms, and using their own words, and are also considered young person friendly (Eder and Fingerson, 2003). Voice over Internet Protocol (VoIP) mediated technologies allow for real-time interaction between the interviewer and participant whilst being online, and can replicate features of face-to-face interviews when video calls are enabled (Lo Lacono et al., 2016). Telephone interviews, like face-to-face interviews, have a personal touch and they can collect meaningful responses (Saarijärvi and Bratt, 2021). 1 young man was interviewed by telephone, 4 requested online interviews via Microsoft Teams, and all professionals spoke on Microsoft Teams. A combined summary of the participants' details are shown in tables 1 and 2.

³Institute of Childhood and Education Ethics and Integrity Sub-Committee, Leeds Trinity University.

Age	All fall under the 18-25 age category
Programme pathway	Core and targeted pathways
Length of time on programme (when interviewed)	4-12 months
Referral routes (professional or self-referral)	All professional referrals
Number of children	80%= 1 child 20% = 2 or more children
Age of children	Infants to toddlers
Residential father (living with the child)	60% of sample
In a relationship with the child's mother	40% of sample
Welfare support recipient (e.g., Universal Credit, PIP/ Personal Independence Payment etc)	40% of sample
Involvement of other professional services (e.g., Social Worker, Health Visitor, other professionals)	60% of sample

Appendix 1 outlines additional information on the DATB service and appendix 2 provides anonymised data regarding all service users for context.

Sector	<ul style="list-style-type: none"> Specialist young fatherhood support Specialist young parenthood support
Experience with young fathers	<ul style="list-style-type: none"> Direct remit to work with young fathers Direct remit to work with young mothers, but includes regular contact or involvement with fathers as part of this

Interview questions focused on participants' experiences of DATB, the quality of the provision, delivery of the service, outcomes for young men and their families, and DATB's role and impact on other professional services in Swindon Local Authority. Interviews with young fathers lasted from 40-70 minutes and the duration of the professional interviews were 55-110 minutes. Interviews were recorded with participants' consent and transcribed. Interview transcripts were then anonymised and coded using a pre-established coding framework and thematically analysed with the research questions in mind.

YOUNG FATHERS' PERSPECTIVES



The following sections of the report will discuss the young fathers' and professionals' perspectives. Programme outcomes which have been met in relation to the father, the child, or wider benefits, will be cross-referenced against the classification system on appendix 4, 5 and 6 (e.g., A1= assessment of fathers' needs). In total, five young fathers were interviewed as part of the evaluation study and their DATB pathway details and their length of time on the programme are shown in table 3 below.

Table 3: Participant and Pathway Details

Participant number	Pathway	Time on programme and expected outcomes
Participant 1	Targeted	Long-term outcomes
Participant 2	Core	Short-term outcomes
Participant 3	Core	Long-term outcomes
Participant 4	Core	Medium-term outcomes
Participant 5	Core	Medium-term outcomes

Programme Attendance:

All the young fathers had been referred to DATB from other services and they agreed to attend the programme for various reasons. For some, they lacked experience with young children, and they wanted to gain a better understanding on how to care and look after babies through the provision offered. As Participant 1 expressed:

“Because I was a new dad, I didn’t know what I was doing.”

(Participant 1)

For others, they wanted guidance and advice. It was seen as beneficial having someone to talk to about their parenting experiences, which included the difficulties encountered. With the DATB’s primary focus being on young fathers, this also encouraged client users’ attendance, as there is limited formal support for young fathers specifically in the area. The young men remarked that most services are designed for mothers and mothers-to-be which gave DATB a distinctive appeal.

“The mums have got a lot out there as it is and sometimes the dads are forgotten about.”

(Participant 2)

“Dads can actually come out and speak about what’s actually happened in their lives and they’re heard.”

(Participant 3)

Benefits of the Programme for Parenting and Children’s Outcomes:

As a result of DATB, fathers felt more confident in their parenting skills, they understood risks better and how to protect children (outcomes E2, F1, G1). All client users learned about child safety for example, which included safer sleeping arrangements, safer handling, and safety in the home regardless of how long they had been on the programme. Four out of the five young fathers mentioned steps they had taken to keep their child safe, including the use of breathable blankets, removing cot bumpers, avoiding co-sleeping, identifying and removing hazards in the home, and placing the child in a safe place if they needed to briefly leave the room. Hence the programme has had a positive impact on the safety of the child in this regard (outcome G5).

“I’m looking at any sort of hazard or danger and I’m getting rid of it straight away.”

(Participant 4)

Young fathers also expressed a better understanding of basic care including how to meet children’s needs (e.g., hygiene), and ways to support children’s development through various activities, such as sensory play, reading and singing together, and tummy time (outcomes A2, A3, B1, F4).

“The specialist young fatherhood support is very good at helping us to be hands on with the kids, with activities especially.”

(Participant 2)



Client users had noticed changes in their child as a result of their enhanced parenting skills. For example, Participant 5 noted that since doing tummy time, his 10-month-old daughter had begun to crawl. Participant 4 had noticed how his 11-week-old daughter was more responsive to the people around her and could recognise and respond to her own name.

“With obviously the things that the specialist young fatherhood support worker has been getting me to do, like reading books, playtime, stuff like that... It brings me a smile every time I see her cause as soon as she looks at me, she just starts smiling... Like she’s [daughter] ready for playtime.”

(Participant 4)

In addition, young fathers frequently mentioned the support that they had received from DATB in establishing an appropriate and consistent routine with their child. This led to perceived improvements in the child’s sleeping patterns and temperament.

“We know what sort of rhythm he’s in, when he’s gonna wake up for a feed, the rest of it, so he’s pretty easy in that sense.”

(Participant 2)

“We had consistency with the routine and thankfully we managed to get her into a routine and she’s a very happy baby.”

(Participant 4)

Views of Fatherhood and the Father-Child Relationship:

DATB encourages young fathers to think about their roles as fathers and the influences on this, as part of their learning journey as parents. Young men are encouraged to complete activities such as the ‘gingerbread men’ and the ‘two roads’,⁴ which can help client users to identify positive male role models, to consider the type of father they wish to be, and how they could achieve this through DATB participation. The interviews revealed that young men have positive views of fatherhood, that they cared deeply for their children, and that they are motivated to be good fathers and role models, capitalising on and strengthened by the role of the DATB’s specialist worker (outcome C1). The young fathers also spoke about protecting their child and making changes to their lifestyle to fulfil their fatherly role (outcomes C1, C2, F3, F6).

“I feel like I’m a pretty decent dad. Like, I do my best for my daughter... She’s pretty happy, so that gives me some confidence in myself as well.”

(Participant 5)

“It’s a different lifestyle from going to a point where you have no kids and you’re 19-years-old, going out every weekend, to now being 22, have a daughter, and going out once, twice a year.”

(Participant 1)



A key focus of the programme is developing young fathers' understanding of secure attachments between the parent and child and the value of this. All fathers, regardless of how long they had attended the programme, understood attachment as developing the parent-child bond and how to support this, including baby massage, skin-to-skin contact, playing with and reading to their child, how to listen to their child's cues, and responding appropriately to their needs (outcomes C2, E3, F3, F4, G2, G4, G7).

“Bonding is just spending precious time with each other and doing different stuff and like, ‘Oh, daddy only does that with me,’ or like giving him hugs, even like skin-to-skin and stuff.”

(Participant 3)

Fathers described putting these strategies into practice and the positive impact this had on the parent-child relationship.

“I think connecting with my daughter becomes a lot easier as well. I know how to handle her; I know how to play with her a lot better.”

(Participant 5)

In another example, Participant 2 explained that his son was born prematurely and was in hospital for six weeks, which impacted on the dad's ability to spend time with his son and to develop an initial bond. However, by working with the SYF (Specialist Young Fathers) worker on the programme, the young father had learnt about baby massage and other activities, which helped him to build a bond with his child, despite the difficult start.

“That was a whole six weeks of trying to connect with him whilst also not having that private time or always having a nurse prodding around... So, I found that I didn't have that much of a bond, because I never had that opportunity to have the alone time with him.”

(Participant 2)

Most fathers described their attachment positively, noting that they felt 'very attached,' 'inseparable,' and having 'a good little connection' to their child (outcomes A3, C3, G2). Only Participant 3 who had struggled to maintain consistent contact with his child felt that the bond between them was not as strong as he would have liked it to be.

⁴Gingerbread men – fathers use a gingerbread man template and add words to reflect on their experiences of male role models throughout their childhood and their aspirations for fatherhood. In doing so, young men are encouraged to consider how their past experiences can inform their future actions.

Two roads – an activity where young fathers examine their own behaviours and actions on two separate roads. On one road, the young man envisages himself as a carefree teenager and on the other, the client users consider what behaviours are needed to care for their child appropriately. The premise of the activity is to facilitate discussion and reflection by the father, and to prevent both roads from crossing.

Relationships with Others:

As part of the DATB's remit, there is an emphasis upon the importance of the young men's relationships with others, including the child's mother. Developing a better understanding of one another as co-parents, gaining an appreciation of another person's perspective and feelings, avoiding arguments, and learning how to communicate effectively, were reported by the young fathers (outcomes A4, A5, F5). One effective mechanism to facilitate better awareness and communication between parents was the 'traffic light system' on DATB,⁵ as described by Participant 2:

“The specialist young fatherhood support worker also introduced us to this traffic light system to help us communicate how we feel a bit easier. So red being I'm not very happy, and green being I am happy. It's just a little way that we're able to get a better idea of how each other are feeling before something is said or done which could spark an argument.”

(Participant 2)

Another father described how an increased awareness of the negative impact of poor and conflictual parental communication for the child had led him to change his behaviours, thus creating a calmer and safer emotional environment for the family (outcome A4).

“The way the specialist young fatherhood worker described it is any type of conflict or even something like that, it stops brain development, and the nerves have to kind of work around it. That's how she described it, that made me realise that I don't want to argue with people around her [daughter].”

(Participant 5)

For those separated from the child's mother, being more aware of the importance of communication for co-parenting meant they had sought alternate ways to communicate, where it was not possible to do so directly (outcome F5). This included the use of online chat groups, such as WhatsApp, and asking others (such as the SYF worker, other professionals, and family members) to act as mediators to ensure respectful communication, or to pass on messages between the young parents. As a result, children were not exposed to unhealthy relationships (outcomes G6, G8). Having these communication avenues supported parents in providing a consistent routine for their child and facilitated the sharing of important messages, such as medical appointments and medication routines (outcomes F5, G7).

“I mean communication is very key when you've got two different parents that are single, separated... We both do stuff like obviously the food, the bedtimes and stuff like that at the same time. But it's better.”

(Participant 1)

One father described how unpicking the difficulties he had experienced in his previous relationship with the child's mother had helped him to build healthier relationships with new partners, hence he was able to take forward the skills he had learnt from the programme into future relationships (outcome B5). Another young father who had struggled to deal with the breakdown of his relationship with the child's mother had come to accept the relationship outcome and had learnt to communicate with the mum in a healthier way. Regardless of the relationship status with the mother, all the young fathers in the study had reported reduced parental conflict as a result of DATB and this led to benefits for the child (outcomes A4, G7).

Support Networks:

Part of DATB focuses on healthy and unhealthy relationships and fathers' awareness of such issues had increased (outcome B3). As a result, fathers could better identify positive role models within their wider support network and the importance of building and fostering such relationships. One father whose relationship with his own mother had previously broken down, was able to reconcile this, and in turn she became a good support to him and his baby when he suddenly gained sole custody of his child. He discussed some of the benefits of having that extra support:

“I think it takes a bit of the stress off... I know mum can look after her for five minutes... Or if she's not settling for me but she might settle for my mum, we'll swap. If she doesn't settle again then we'll try something else. So, it's nice to have alternative methods instead of only having methods that I could do myself. There's a lot more options to it.”

(Participant 5)

Participant 5 expressed that he was more able to identify and handle 'toxic' relationships as a result of DATB. Participant 4 stated that working with the SYF support worker on the programme gave him the confidence to remove 'toxic' family members from his support network. The young fathers also understood the negative impacts of unhealthy relationships upon children (outcome F2).

⁵Traffic light system – a tool to support fathers in identifying and communicating their emotions. With green reflecting positive emotions or responses, amber reflecting uncertainty, and red indicating a negative state of emotions or well-being.



Personal Changes and Well-being:

Fathers in the study described positive changes to their well-being, mental health, and other behaviours (outcome A5). For example, Participant 3 and Participant 5 mentioned their self-care and hygiene had improved as a result of DATB. In another instance, one young father described how at the start of the programme he was heavily involved in drug taking, which impacted on his finances and contact with his child. By working with the SYF worker, he had curtailed his drug use. Furthermore, the SYF practitioner had helped the young man to access drug addiction and counselling services, whilst helping him to devise appropriate coping strategies (outcomes A6, B5, C4). Although at the time of the interview he was not having contact with his child, he was hopeful that the behaviour changes he had made would enable him to be a part of his child's life again in the future.

“It was my drug taking, my drinking alcohol, I was doing that a lot. Don’t get me wrong, I still have a few drinks here and there but no drugs anymore.”

(Participant 3)

Participants 3, 4 and 5 had experienced improved mental health as a result of DATB.

“I suffer from anxiety and depression and the specialist support worker did a lot of work with coping strategies for that as well and trying to get it in check... I don’t really struggle with any of it anymore.”

(Participant 5)

“I’m looking a lot better in myself and I’m eating a lot more, keeping myself healthy. Yeah, just been massive changes.”

(Participant 3)

In terms of increased awareness and recognition of emotions, the young fathers had utilised the activities learnt on the programme to help manage their feelings. Methods such as the traffic light system, emotional cups (Perkins, 2002),⁶ and the 1-10 number system were said to be useful.⁷ Young men were also more conscious of potential triggers and by working together with the SYF worker, they identified calming strategies such as watching TV, listening to music, and exercising (outcomes A5, B4).

“I would say I’m way more able to control my emotions because I know what will calm me down and how to avoid getting all worked up.”

(Participant 4)

Client users felt more able to talk about their emotions with the SYF worker and to others, including family members and friends. The ability to speak to others helped to improve young fathers' emotional well-being and to reduce stress levels, impacting positively on their children.

“Having that rant and not keeping it tucked up means you’re not stressed out at the kids and you’re not unleashing that stress onto the kids.”

(Participant 2)

Furthermore, fathers mentioned that through the programme they were given details for other professionals that they could contact if needed for support with their mental health, which they were more willing to consider as a result of DATB (outcomes B5, B6, C6).

⁶By using the analogy of two cups, client users consider the positive and negative emotions which can fill or empty each cup, alongside appropriate coping strategies.

⁷1-10 number system – Client users are asked to number their emotions from 1-10 (the higher the number, the more intense the feeling). By using the scale, it helps client users to recognise their emotions and when to implement coping strategies or appropriate responses.

Working with Other Professionals:

Due to the ease they felt in communicating with the SYF support worker, dads were more receptive to reaching out for help from other professionals and engaging with them (outcomes A6, B5, C6). Difficulties that the young men had experienced with other professionals in the past included trust issues, difficulties in communicating with service providers, perceptions that they were not being listened to, being side-lined, and practitioners unfairly siding with the mother. The SYF support worker offered them guidance on professionals' perspectives and modelled to young fathers how to get their points across in a more positive way.

“If I’ve got, like, something to say to a social worker or to my daughter’s mum, I would say something this way, but then she’ll be like, if you say it this way it might not be as aggressive.”

(Participant 1)

This helped young fathers feel more able to speak to and be heard by professionals. This was facilitated further by the SYF support worker who would advocate for them, ensuring that they were given the opportunity to share their views in formal situations such as social care meetings (outcomes W2, W3).

Overall Views of the Programme:

The young fathers were extremely positive about their experiences of the programme, describing it as ‘amazing’, ‘perfect’ and ‘brilliant.’ Client users emphasised the confidentiality of the service, the support from the SYF worker, and the impact that DATB had on their lives as key factors in their appraisal.

The confidentiality of the service meant that the young fathers felt able to trust the dedicated professional. In trusting the SYF worker, the young men felt able to open up about their feelings as part of DATB, and trusted the professional guidance provided (outcome A3). Remarks were made that the SYF worker was approachable and easy to talk to, especially when compared to other professionals, which made the young men feel at ease. Participant 4 noted how his appointments with the SYF worker “always puts [him] in a good mood”.

In contrast to some of the other professionals that young fathers had been in contact with, the SYF worker was seen as a reliable figure that they could contact when help was needed. The SYF practitioner was said to be easily contactable and if unavailable would get back to them quickly. This was highlighted by Participant 5:

“I would call her probably two to three times a week with the amount of stuff that was going on at one point.”

(Participant 5)

As the SYF worker attended a local play group for young parents, this provided an additional opportunity for one-to-one support for the young men.

“If I ever have a problem, even if it’s like a me problem and not a baby problem, all I’ve got to do is just send a message and then I’ll be able to call her.”

(Participant 4)

“The other health professional is not always available, but you can guarantee we’ll always see the specialist young fatherhood support worker at least once a week, so we can go to them for a lot of our questions.”

(Participant 2)

All the fathers interviewed would recommend DATB to others and two had done so already. Reasons given for this included: ‘it helps dads be the best they can be,’ and ‘it’s a great thing to get into.’ The fathers felt that the programme had been transformative with Participant 3 stating: ‘it’s changed my life.’ Four of the fathers felt they were in a much better place in their lives as a result of DATB (outcome C5).

“I would probably be in a ditch by now to be fair if I hadn’t talked to the specialist young fatherhood support worker, so she definitely kept me in a good place.”

(Participant 5)

“If I didn’t have it, I reckon I would still be where I was a year ago, two years ago... I wouldn’t have been where I am now without the help.”

(Participant 1)



PROFESSIONALS' PERSPECTIVES

The following section will discuss the professionals' perspectives of DATB and their views of the fathers' experiences who attend the programme. Further details of the three professionals interviewed are summarised in table 4 below.

Table 4: Professional's Job Role and Remit

Specialist Young Fatherhood/SYF Worker	Direct remit to work with young fathers
Specialist Parenthood/SP Worker 1	Direct remit to work with young mothers, but includes regular contact or involvement with fathers as part of this
Specialist Parenthood/SP Worker 2	

Assessing Fathers' Needs:

When young fathers enrol onto DATB, an initial assessment is made of their support needs using the Family Star (Relationships) activity.⁸ The Family Star requires the client users to rate their abilities to parent (such as routines and practical arrangements), and how confident they feel in terms of managing relationship skills, emotional well-being, finances, and behaviours, on a scale from 1-10. The lower the rating, the less competent or less positive the client user feels in that particular area of their life, potentially highlighting where professional support is needed. The young man completes the Family Star in collaboration with the SYF worker, to identify the father's needs and the reasons for his referral. Through this process, it provides an overview of each young father before they commence the programme and how DATB can be tailored to meet the client user's needs. All professionals who were interviewed felt that DATB undertook effective assessments of the young fathers (outcomes E1, F3). Professionals also felt that the assessments enabled an early identification of children in need of protection and risks for children are better understood (outcomes E1, E2, F1, G1).

Parenting and Children's Outcomes:

Professionals suggested that the client users' understanding of parenthood, childcare, child-safety, and parent-child relationships had grown (outcomes A3, B1, C2, E2, F1). Professionals had also observed reciprocal, sensitive, and responsive interactions between father and child as a result of the programme (outcome E3). It was reported that the DATB's content, the opportunities to learn and practice appropriate behaviours through the sessions, and the one-to-one support from the SYF worker (which included advice, regular feedback, and encouragement) helped fathers to become more confident as parents. One specialist parenthood/SP worker commented that because DATB focuses purely on the father, rather than the mother, this increases client users' sense of self-worth and supports them in achieving self-efficacy as fathers (outcome A2).

The evaluation study uncovered numerous examples of where young fathers' confidence and parenting skills had improved. For instance, one young man who was previously nervous to be on his own with his child, was now able to take his child out for a full day in an independent manner with the support from DATB (outcomes G3, G8). Another father who had been diagnosed with neurodiversity was struggling to interact with his baby due to the difficulties that he had in making eye contact. However, the SYF worker was able to model different ways to interact and play with the infant, without the need to make full eye contact, which the young man utilised, leading to reciprocal interactions with his child (outcome E3). In relation to attachment building between parent and child, one of the SP workers remarked that young men on DATB were more involved with their children, as a result of learning about attachments. This included the concept of attachment, why attachment is deemed as important, and ways to develop attachment with children (outcomes C3, G2).

"I can definitely see the dads are a lot more involved with their children, than the ones that aren't on the programme."

(Specialist parenthood support worker 2)

As part of DATB, young men are asked to reflect on their strengths as parents, alongside any barriers that they may face in being the father that they want to be. Such discussions include a reflection on any fatherly figures or role models that the young man may have in his own life, and what impact this may have on his views and behaviours as a father. Professionals remarked that the reflective activities helped the young men to be more aware and accountable of their actions as dads and identify where change is needed (outcomes B2, C2).

"Sometimes it's not about a straightforward success story but it's them realising that they're not okay to be in their child's life right now. They need to make changes first and they need to do things differently and they acknowledge what their limitations are."

(Specialist young fatherhood support worker)

⁸Family Star | Triangle ([outcomesstar.org.uk](https://www.outcomesstar.org.uk))

However, as noted by SP worker 1, there is no golden standard of fatherhood that all fathers are trying to achieve through the programme; rather the programme aims to enable each young man to be the best father that they can be. The interviews revealed that many of the young fathers had become, or were striving to become, better fathers and role models to their children as a result of DATB (outcomes B2, C1, C2). In the accounts of another SP worker, it was suggested that DATB promotes joint responsibility and co-parenting regardless of the parent's relationship status, which further encourages young men's accountability as fathers (outcome F5). It was further remarked by another professional, that fathers who exhibited higher levels of accountability, were also more likely to engage with non-compulsory meetings with practitioners (outcomes A6, C2).

“The dads that work with the specialist fatherhood support worker, I found turn up and they are like accountable. They're like, OK, I've got a meeting about my baby. I need to turn up. So that's good.”

(Specialist parenthood support worker 2)

Relationships and Communication:

Professionals agreed that improvements could be seen with regards to young men's relationships with others, by learning about healthy/unhealthy relationships and the impacts of positive and negative communication on children (outcomes B3, F2, F5, G6, G8). The SYF worker provided two examples of improved relationships that had been observed amongst the young men. In one case, the young father was able to reflect and recognise that the relationship with the child's mother was unhealthy and this was exacerbated by them living together. By taking the decision to live apart as a couple, this led to a better relationship between the parents and they were able to successfully co-parent despite residing in two separate households (outcomes A4, B3, G3, G6, G7). In another example, the programme had helped another young father to think about and address the power imbalance that was occurring within his relationship with the child's mother, including the lack of decision making he felt he had as a parent (outcomes A5, B3, C2).

In terms of the co-parenting relationships, two of the professionals agreed that young fathers could communicate with the child's mother better as a result of DATB, regardless of their relationship status.

“You wouldn't automatically say that the relationship has improved necessarily. Because sometimes at the beginning of the programme, they're in a relationship, and at the end of the programme, they're not in a relationship. But what always has improved is the communication between them.”

(Specialist young fatherhood support worker)

Improved communication between the parents could then lead to reduced levels of conflict, which benefited the child and the parents' well-being (outcomes, F5, G7, G8).

“They've got a bit more autonomy, I guess, to be able to walk away... Diffuse an argument or diffuse a situation which may be in the past, without that information, without the specialist fatherhood support worker being there, it would have exploded.”

(Specialist parenthood support worker 1)

DATB uses several strategies to help young fathers to communicate better with others, such as the 'fuel to the fire' activity, where fathers identify triggers for arguments, what can make arguments worse (using the analogy of fuel), and how arguments can be dissipated (using the analogy of water). Where there is animosity between parents, the fathers can enlist the help of the SYF worker or other professionals to identify alternative ways of communicating, such as nominating a safe person to mediate online WhatsApp group chats between the mother and father. This reduces children's exposure to unhealthy communication and unhealthy relationships and impacts positively on the child (outcomes E2, F2, G6, G7, G8).

“The child is surrounded by healthy relationships. That's what she's gonna grow up knowing, so she'll be able to recognise healthy and unhealthy relationships.”

(Specialist parenthood support worker 2)



Emotions, Mental Health, and Well-Being:

DATB encourages young fathers to recognise their own emotions and how this can affect joint parenting efforts, mental health, and well-being. One of the SP workers suggested that DATB's one-to-one approach provides fathers with a safe space in which they can share and explore their feelings (outcome A5). Furthermore, by trusting the SYF worker, young men were often more willing to speak about their mental health concerns. One of the professionals suggested that the SYF worker is then in an advantageous position to assess the mental health needs of fathers including risks of post-natal depression. Referrals to the young man's General Practitioner (GP) or other services such as 'LIFT' psychology service are then made by the SYF worker if appropriate. It was noted by one professional (SP worker 2), that the SYF practitioner supports fathers to follow through on referrals to other services, and checks on how they are getting on, providing a fuller picture of what is happening in this regard (outcomes A5, B5, B6, C3, C6).

“I don't just do a referral, or I don't just suggest something. It would be a case of going, 'okay and how do you feel about that? Do you think that's a step that you feel you could take, or would you like me to make that initial contact for you? Do you want me to come to the appointment with you? Do you want to check in with me by phone beforehand, afterwards?' Just to make sure that they feel fully supported through that.”

(Specialist young fatherhood support worker)

Other activities used on the programme can help young men to recognise, express, and manage their emotional states and needs (outcome B4). For example, professionals discussed the use of the 1-10 activity, which helped client users to gauge their mood (on a scale of 1-10), which then prompts awareness and appropriate responses to emotions, including coping strategies (e.g., where high emotional states need to be de-escalated). Other activities, such as the 'traffic light system' have been utilised by the young men as a tool to communicate their feelings to the other parent and to take appropriate actions. For example, the SYF worker explained how young fathers could use the traffic light system in response to a crying infant. Through this method, parents are more aware of each other's feelings in relation to the crying that is occurring, and they can ask the other parent to take over before they feel overwhelmed. One of the Specialist Parenthood/SP workers observed that fathers who attended DATB could recognise and talk about their emotions in a better way, especially in comparison to fathers who did not attend the programme.

I think every single one of mine that have worked with the specialist fatherhood support worker are so much more reflective. They talk about their feelings and are more open in our visits. Whereas the dads that aren't on the programme, I really struggle to get them to even open up just a little bit... That's one of the biggest things I've noticed.

(Specialist parenthood support worker 2).

Effectiveness of the DATB Service:

Professionals commented that DATB is a research informed service, and it is guided by best practice models. The professionals felt that DATB was effective in assessing the needs of individual fathers, meeting their needs, and improving various outcomes for young men and their children, as seen in the accounts above. The Family Star assessment and other DATB activities were said to be helpful tools in monitoring and measuring young fathers' progress over the course of the programme.

Professionals expressed that DATB was able to provide fathers with the types of support that other professionals may not have the time or remit for. For example, SP worker 2 commented that the SYF professional focused on young fathers' education, employment, and training (EET) needs. This included fathers' EET aspirations, help with CV writing, and providing advice on employment issues, such as risks of certain employment (e.g., agency work versus full-time employment), tax codes, and fair pay. In effect, filling a gap in the service provision currently on offer in Swindon (outcome C4).

Professionals observed that DATB had helped to change young fathers' mindsets and their negative perceptions of professionals from the past. Consequently, young men were more willing to access, engage with, and use, other formal services (outcomes B5, B6, C6). SP worker 1 commented that the young fathers' relationships with the SYF professional was a key part of this. SP worker 2 gave the example of a young father who had previously been unwilling to attend counselling, but through working with the SYF professional, the young man overcame his reservations and accessed a counselling service. By accessing counselling, SP worker 2 felt that it had the potential to offer the young man longer-term benefits.

Partnership working between DATB with other services was seen as beneficial by all the professionals. By working in partnership, safeguarding was deemed to be more effective, there was a better identification of risks for parents and children, information was shared about both parents (which helped to keep children safe), and support for young families became much more of a shared endeavour (outcomes E1, F3, G5). Professionals felt that partnership working led to a better level of service.

“I feel more relaxed, knowing that the dad, even if I've not met him or don't have much to do with him, I know a lot about him. So, with like safeguarding, it's massive.”

(Specialist parenthood support worker 2)

Lastly, it was found that the SYF professional had played an active role in raising other professionals' awareness of young fathers and their support needs, and the importance of engaging with and involving young men in parenting support. Such efforts helped to bridge the gap between fathers and services, increasing the visibility of fathers and creating greater equality of access (outcomes W1, W2).

EFFECTIVENESS OF THE PROGRAMME IN MEETING YOUNG FATHERS' AND CHILDREN'S OUTCOMES



Short-Term Outcomes:

The report has highlighted that for fathers who have been on the programme in the short-term, there are appropriate assessment procedures in place that draw upon the views of the father, the referrer, and the SYF worker. Assessments are conducted at the very beginning of the programme and at regular intervals throughout DATB to identify fathers' needs. Partnership working and information sharing between the SYF worker and other professionals has led to easier identification of risks to the child. By attending DATB, fathers showed a better understanding of safer sleeping arrangements, hazards in the home, and the impact of unhealthy relationships.

Improvements in parenting efficacy were reported by young fathers and professionals. The programme supports fathers to develop childcare skills, to meet their children's needs, and to communicate and respond to children appropriately. Improved relationships with children were also observed through a better understanding of the importance of attachment, how to overcome barriers to attachment, and ways to build attachments with their child. Although attachment outcomes are predicted for long-term client users, fathers and professionals spoke about stronger parent-child attachments forming at an earlier point in DATB (i.e., from attending the programme in the short and medium-term).

A significant impact of the programme has been on fathers' mental health and well-being, with client users more able to recognise and talk about their own emotions and the emotions of others. Through the strategies learnt on DATB, fathers were better aware of the mother of the child's feelings, as well as their own, which helped to reduce parental conflict and reduced risks to the child. DATB fathers appeared to be more willing to engage with other professionals and more receptive to formal help with regards to mental health and other issues.



Medium-Term Outcomes:

Fathers who have been on the programme in the medium-term demonstrated an increased sense of belonging, responsibility, and identity as a father, including accountability. Fathers were more confident and competent in their parenting skills, which included the establishment of good routines with their children, understanding the importance of consistency in parenting, the value of co-parenting approaches, and a better understanding of their child's needs and how to meet them. They had learned new activities to support their child's social, emotional, physical, and cognitive development and witnessed changes in their child as a result. Young fathers also understood risks for children better and put measures in place to protect them, such as not co-sleeping, keeping hot things out of reach, finding a safe place for the baby when they need to leave the room, and keeping parental conflict away from the child.

Fathers had a better understanding of appropriate relationships and what supportive and healthy relationships look like. At the same time, fathers were more aware of the impact that negative relationships could have on children. This led some fathers to step away or to make changes to relationships which they described as 'toxic.' By learning about relationships and the importance of communicating with the other parent, fathers also gained knowledge about effective co-parenting and ways to manage this, regardless of the young parents' relationship status. The focus on healthy communication and relationships helped to reduce conflict between the young father and mother, as well as aiding better communication between them, and with others, including professionals.

Young fathers were more aware of their feelings as a result of the programme and learnt how to express their emotions better. Client users also learnt how to implement different coping strategies in response to different emotional states, which had a positive impact on fathers' mental health. Fathers felt comfortable working with and talking to the SYF worker and this made them more open to working with other professionals such as counsellors. When working in partnership with other professionals, the SYF worker was an advocate for the young fathers and ensured that their perspectives were sought and included within meetings. In such ways, the SYF worker helped to improve young fathers' experiences of other services and their perception of them.

Long-Term Outcomes:

As the programme had only been running for 18 months at the time of the evaluation, it is difficult to ascertain and describe the full scope of the long-term outcomes. However, as there are a small number of fathers who are coming to the end of the programme (having attended for one year), their views coupled with the professionals' accounts, can provide some insights for the predicted and met outcomes at the later stages of DATB.

There was evidence of improvements to co-parenting, stronger attachments between father and child, and fathers being a positive role model for their child. Fathers discussed their understanding of the impact of unhealthy parental relationships, which led to improved relations between the father and mother, whilst avoiding children's exposure to potential disagreements. A stronger sense of belonging, responsibility, purpose, and identity as a father was observed. Fathers also received EET support to help with their fatherhood aspirations and were more willing to consider and use professional services when needed. In some instances, there was a reduction in adverse outcomes for young fathers.

Given the length of time that the programme has been running and the young age of the fathers' children, it is not possible to discuss the outcomes associated with children's early years readiness or the development of early years skills yet, as these children are not attending early years provision. Further research into the long-term impact of the programme would add greater clarity in this area and help determine how well the programme is meeting the long-term outcomes 18-24 months after enrolment.

Although it is difficult to fully establish a causal relationship between the programme and children's development, established theory (e.g., Bowlby, 1988) indicates that the improved consistency of routine, co-parenting, father-child attachments, and the activities that fathers have been engaging in to support child development, are very likely to have a positive impact in this area.



Improvements:

At the time of the evaluation, there was a waiting list for DATB. Although this indicates a demand for the service, timely support for young men is vital and delayed enrolments should be avoided where possible. Ways to address the waiting list would be to increase DATB staffing and resourcing, which would require investment. The inclusion of some group work and peer support in the programme, which have been shown to be effective ways to support young fathers within other research (Cundy, 2016), would also help to release some of the SYF worker's time and encourage different types of support available within DATB.

DATB has highlighted the complex needs of young fathers and the benefits of professional support, which is seen within other research findings (The Child Safeguarding Practice Review Panel, 2021). However, the programme's eligibility criteria means that a proportion of young men in Swindon may not be able to access the service despite having high needs. By revisiting and revising the criteria, DATB has the potential to reach out to a larger number of young dads who would benefit from professional support. Issues around staffing and resourcing mentioned above would need to be considered alongside any changes to the eligibility criteria.

In relation to the eligibility criteria, the upper age limit for the service is 25 years of age. Although the programme has enrolled a small number of fathers who are over the age of 25 due to complex needs (16% of enrolled fathers), this would not be typical protocol. However, past research has argued that men who were young fathers, but who are now over the age of 25 would like, and would benefit from, service support or continued support (Clayton et al., 2022). In a similar vein, the SYF worker suggested that the current provision needs to consider fathers who graduate from the programme, particularly if further support would be helpful. Reflections on the age of client users and their support needs after graduation should be reviewed when considering the eligibility criteria. Given the work of DATB, it is well placed to support 'older' young fathers, including those who have experienced the programme already.

CONCLUSION AND RECOMMENDATIONS



The experience of fathers on the programme has been positive and transformative. Despite the barriers and vulnerabilities that many young fathers faced, they have all made considerable progress in relation to their starting points. Fathers gained the knowledge and tools required to make decisions that will impact positively on their child. Fathers reported positive changes in attitude and an increased understanding of concepts, such as attachment and unhealthy relationships. Fathers have experienced improved mental health, a more positive view of themselves as fathers, increased self-esteem, and confidence. There were behavioural changes such as the development of stronger attachments with their child, being able to meet their child's physical, emotional, cognitive, communication, and hygiene needs, taking steps to protect their children from harm, stopping drug taking, better communication between parents, and improvements in co-parenting (even where the relationship had broken down). All these factors impacted positively on the child, promoting a positive sense of agency and supporting their development. Children faced less exposure to unhealthy relationships, reducing risk, and the likelihood of harm to the child.

The therapeutic nature of DATB's delivery enabled young fathers to build up a good trusting relationship with the dedicated professional, which helped them to open up about their feelings and any difficulties that they may be experiencing. Client users and the SYF practitioner also work together in other ways to improve the young fathers' skills and resolve issues. For example, the Family Star assessments which are carried out at set intervals throughout the programme, can help support dads and the SYF worker in identifying areas of need and where progress has been made. Reported progress can then lead to a sense of pride and achievement for the young fathers. DATB also supports young men in identifying existing skills that they can transfer to their role as a father. It was noted that DATB observes fathers with their children and gives young men praise and positive feedback, which boosted fathers' confidence. For some, this may be the only positive parenting feedback that they receive.

The one-to-one delivery of the programme was viewed positively by the fathers and professionals, providing a focus solely on fathers, and a space for them to open up and gain a sense of confidence. Because DATB is evidence based, it incorporates good practice seen in other services (such as the Family Nurse Partnership) and utilises existing tools such as those used on the Peers Early Education Partnership (PEEP) programme.⁹ Through this, professionals considered the quality of the provision to be high. In addition, the DATB programme is unique – its delivery and formal content is adapted and tailored specifically to meet the needs of each individual father with the aim of him becoming the best dad he can be, rather than meeting a 'golden standard' of fatherhood.

The programme works effectively in conjunction with other services to deliver the work that other service providers do not have the remit or capacity to do. This has had a positive impact on professionals, by reducing feelings of stress and workload, and ensuring that both mothers and fathers get the focus they need. In such ways, young parents gain a better experience of service provision. An important benefit of partnership working between DATB and other professionals, is its impact on safeguarding children. Information sharing means professionals are more aware of who the dad is and whether parents or situations pose a risk to the child.

The programme has drawn attention to young fathers in Swindon, increasing professionals' awareness of the importance of young fathers' involvement, especially in the social care arena. It has also increased fathers' accountability, meaning they are more likely to attend non-statutory meetings with social care professionals, thus increasing their visibility. Given that the work of DATB has led to a reported reduction in parental conflict, drug use, and poor mental health amongst young fathers, the programme is likely to impact on wider services in Swindon also, but further research is needed to explore this.

⁹PEEP programme – supports parents to improve the life chances of their children. Website: [how the learning together programme helps children's learning | peep](https://www.howthelarningtogetherprogramme.org.uk/)

The evidence from young fathers and professionals indicates that the programme is particularly strong in several areas, these being:

- Supporting the development of attachment
- Improving communication between fathers and the child's mother
- Improving engagement with wider professional support networks
- Supporting the mental health needs of young fathers. Increasing their ability to identify and discuss their emotions, and their ability to use personalised coping strategies
- Helping young fathers to identify potential risks to their child and taking steps to reduce risks
- Partnership working and safeguarding
- Advocating for, and promoting the voice of young fathers to other service professionals
- Helping young fathers to identify unhealthy and healthy relationships, understand the impact of poor relationships on children, and taking steps to reduce children's exposure to unhealthy relationships

Views of the DATB service and programme content are positive. To further support the good work being undertaken, the findings of this research have led to the following localised recommendations (broader recommendations are provided in the executive summary):

1. Provision of online information and optional online training resources for young fathers that can be accessed out of hours to complement the programme
2. Consider how the programme can be delivered in more flexible ways to meet the diversity of young fathers' support needs
3. Sustaining the programme in the long-term for the benefit of fathers, children, mothers, and service professionals
4. Expanding the eligibility criteria to enable more young fathers to access and benefit from the programme. This would require the employment and training of more SYF workers to deliver the service
5. Offering support for young fathers who are over the age of 25 and/or whose children are older
6. Increase joined up working between DATB and wider fathers' provision in Swindon, including early help services, to acknowledge and support young fathers better

7. Collect data on young fathers at the earliest opportunity by all services focused on peri-natal care and wider family support to inform service delivery at the local level

In summary, the report has provided evidence that the short and medium-term programme outcomes are being met. There seems to be evidence of long-term outcomes being met too, with some of these being achieved at an earlier stage of the programme than predicted. To gain deeper insights into DATB, the following research areas could be explored:

- Including a larger number of fathers to ascertain their viewpoints of DATB
- Exploring the effectiveness of DATB in meeting the long-term outcomes for fathers who have graduated from the programme (i.e., over 18-24 months after enrolment), and any further progress or change
- Increasing the number of professional interviews and the inclusion of practitioners from a wider range of sectors and roles to explore their perspectives on DATB
- Incorporating quantitative research to complement the qualitative insights





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APPENDIX 1: 'DADS AT THEIR BEST'

PROGRAMME DETAILS

Eligibility criteria	<p>Vulnerable biological fathers and or father figures under 25 years at enrolment whose child's mother is eligible for FNP, or the father is a looked after child or care leaver.</p> <p>Prioritised vulnerabilities for referrals also include:</p> <ul style="list-style-type: none"> • Homelessness • Previous or current mental health diagnosis or difficulties experienced • Previous or current abuse • Learning difficulty or disability • Criminal justice involvement (client or partner) • Substance misuse (drugs, alcohol) • Family dysfunction • Low educational attainment <p>Referrals are accepted within any stage of gestation or within the first two years of infancy if the above criteria are met.</p> <p>Note- allowances have been made to recruit a small number of fathers over the age of 25, in recognition of the high level of vulnerabilities presented amongst older client users.</p>
Number of referrals received at the time of the evaluation	35 (includes 5 young men who are on the waiting list and 5 fathers who declined the service when initially contacted).
Partnerships with other services when fathers enrol onto the programme (including referrals)	FNP Positive Futures Team Probation Social Care
Total number of young fathers on the programme currently	16
Number of young fathers on the programme's waiting list at the time of the evaluation	5
Length of fathers' engagement on the programme at the time of the evaluation	3-16 months
Number of fathers who have left the programme prematurely	7 (reasons include relocation to another area, child removed from parent's care, breakdown in the relationship with the child's mother, work commitments).

APPENDIX 2: PROFILE OF YOUNG FATHERS ENROLLED

ON THE DATB SERVICE (COMBINED DETAILS)

Ages of young fathers at the start of the programme (total number 25, includes 16 on the programme currently, 2 who have graduated, and 7 leaving prematurely)	4%: Under 17 80%: 18-25 16%: 25 or over
Father type	100%: biological, first-time fathers
Ethnicity	100%: White British (self-defined)
Risks/Needs identified at time of referral	72%: History of, or diagnosed, mental health conditions 28%: Diagnosed neurodiversity
EET/NEET status	68%: In EET 32%: Not in EET
Number of care-experienced young fathers	24%
Accommodation status	56%: Non-residential fathers (does not live with child) either living independently, in supported housing, emergency accommodation, or living with family members 44%: Residential fathers (lives with child) either living independently, in supported housing, emergency accommodation or living with family members
Relationship status with the mother of the child	68%: in a relationship with the mother of the child at the start of the programme
Welfare support received	12%: PIP/Personal Independence Payment 40%: Universal Credit
Informal support received	40%: Parents and other family members identified

APPENDIX 3: EXAMPLE OF SESSIONS DELIVERED

ON THE CORE AND TARGETED PATHWAYS

The key themes which are covered throughout, include 1) work/education, 2) finances, 3) housing, 4) family relationships, and 5) substance use. Themes of accountability and responsibility as a father are also woven throughout the programme and developed over time, supported by the use of various activities. For example, relationship education, including those which are deemed as healthy and unhealthy, are explored on DATB using mechanisms such as the power and control wheel and resources from the organisation 'Relate.'

Pregnancy Sessions:

Timeframes in pregnancy may vary due to timescales of referral and expected due date, leading to prioritising, or combining sessions.

1. Engagement: introduction to programme and getting to know one another – *20 weeks gestation*
2. Role of Dad: using gingerbread diagrams and strength cards, discuss and reflect on experiences of a male role model, and aspirations of being a dad. Responsibility and accountability – *22 weeks gestation*
3. Emotional/Mental health awareness: PEEP session 1 – introduction to reflective functioning, exploring thoughts around the pregnancy – *24 weeks gestation*
4. Becoming a Dad: metallization of the child and the father-child relationship. Writing a letter to baby. Doll brought on visit to help visualisation. Post-natal depression and assessment of symptoms to be completed – *26 weeks gestation*
5. Family Star (Relationships): 'Initial Outcome Star' – *28 weeks gestation*
6. Ways to interact with Bump, what baby is currently experiencing in the womb: PEEP session 2 – exploring support networks and the planned use of these after baby's arrival - *30 weeks gestation*
7. Relationship with partner: understanding the transition to parenthood as a couple, help/support that could be given, as well as communicating fathers' own needs for help/support. What makes a healthy relationship (circle of trust) – PEEP session 3 – exploring how life would change in parenthood – *32 weeks gestation*
8. Practical skills: bottle-feeding/how to support breast feeding, changing, holding and safe handling. Interactive session with doll – *34 weeks gestation*
9. Labour: looking at the father's role and identifying any concerns. Packing bag for labour. PEEP session 4 – looking at baby's brain development and the impact of early experiences – *36 weeks gestation*
10. Safety: sleeping, feeding, shaken baby syndrome, passive smoking etc. PEEP session 5 – baby states/cues and crying – *38 weeks gestation*

After-Birth Sessions:

Sessions delivered on the targeted programme include a combination of the above sessions, PEEP sessions, and child development sessions, as appropriate to the child's age and stage of development. The tailoring of these sessions are also based on the reasons for referral and the outcomes/actions taken from the collaborative completion of the Family Star (Relationships).

1. Reflecting on birth experience – *2 weeks*
2. Baby states and safety – PEEP – knowing me, knowing you. Tummy time and skin to skin – *4 weeks*
3. Mental health check in – post-natal depression and assessment of symptoms, emotional intolerance, and baby massage – *6 weeks*
4. Getting to know baby – PEEP - building a brain and relating to shaken baby syndrome – *8 weeks*
5. Family Star (Relationships) – *10 weeks*
6. Bonding with baby activities – PEEP – early conversations, focusing on speech development and mirroring facial expressions - *3 months*
7. Daddy do more/do less – looking at the division of chores and roles/responsibilities in the household/as parents. Signs of unhealthy relationships and the effect on babies and children – *3.5 months*
8. Introducing toys/books – PEEP - sharing books with baby. Work/education goals – *4 months*
9. Changes since baby – relationships check in. Managing finances and budgeting – *4.5 months*
10. Encouraging physical development – PEEP – babies on the move – *5 months*
11. Me as a dad – reflecting on aspirations in pregnancy and how it feels to really be a dad – *5.5 months*
12. Fitting together as a family – PEEP –making the most of routines – *6 months*
13. Support network – who do I trust and who do I ask for help? – *6.5 months*
14. Appropriate use of TV/gaming – PEEP – making the most of technology – *7 months*
15. How is it going between us? How I feel communicating with others – *7.5 months*
16. How food/mealtimes happen in our house – PEEP - Exploring food – *8 months*
17. What I want for me now I'm a dad – work/education goals, post-natal depression, and assessment of symptoms – *9 months*
18. What my baby knows and learns – PEEP – exploring early Maths – *9.5 months*
19. What I love about my baby, hopes for my baby's future, and reflecting on pre-birth aspirations – *10 months*
20. Making time to learn together with baby – PEEP – mark making – *10.5 months*
21. Family Star (Relationships) – *11 months*
22. What is play and how I feel about it – PEEP - lots of ways to learn and play – *11.5 months*
23. Looking back and preparing for the end of our sessions, reflective star, and tree of life to explore our journey – *12 months*
24. How I can continue to help my child learn – PEEP - Maths in everyday routines – *12.5 months*

APPENDIX 4: OUTCOMES FOR YOUNG FATHERS

	Young fathers: Short-term outcomes (0-3/6 months after enrolment)	Young fathers: Medium-term outcomes (3/6-18/24 months after enrolment)	Young fathers: Long-term outcomes (18/24 months after enrolment)
Assessment	A1. Assessment of fathers' need		
Parenting	A2. Improved fathers' self-efficacy including mastery in child-caring and relationship skills with others	B1. Confidence and competence in parenting skills grow	C1. Is a positive role model for child
Relationship with child/fatherhood	A3. Developing caring and relationship skills with child	B2. Increased sense of belonging, responsibility, and identity as a father	C2. Stronger sense of belonging, responsibility, purpose, and identity as a father C3. Builds strong attachment with child
Relationships with others including the mother of the child	A4. Leading to secondary outcomes (such as reduced parental conflict and better communication between parents)	B3. Identifying a positive and appropriate support network including healthy relationships	
Personal changes/well-being	A5. Recognising and talking about own emotions and emotions in others	B4. Development and implementation of coping strategies to manage mental and emotional health, alongside better communications about this	C4. Reduction in adverse outcomes C5. Aspirations to move into EET
Professional help	A6. Engage with professionals and receptive to help	B5. Improved access and openness to professionals and services B6. Recognising and seeking appropriate help for emotional, behaviour and mental health	C6. Increased willingness to use health services where appropriate and as necessary (as a result of programme experience)

APPENDIX 5: OUTCOMES FOR CHILDREN

	Child: Short-term outcomes (0-3/6 months after enrolment)	Child: Medium-term outcomes (3/6-18/24 months after enrolment)	Child: Long-term outcomes (18/24 months after enrolment)
Protection	E1. Early identification of children in need of protection	F1. Early identification of children in need of protection	G1. Child is safer
Risks	E2. Understand risks for children better	F2. Understand risks for children better and putting measures in place to better protect the child	
Relationship with child	E3. Reciprocal, sensitive and responsive interactions between baby and father	F3. Child can identify with a positive male role model	G2. Child is building a positive attachment with the father G3. Father can build a relationship with his child independently of mother G4. Opportunities to build attachments with both parents
Development		F4. Improved social, emotional, physical, and cognitive development of child	G5. Child has a developing sense of agency G6. More children are early years ready by developing appropriate physical, social, emotional, and cognitive skills
Co-parenting relationships		F5. Understanding the relationship with the mother and appropriate ways to co-parent F6. Child's development progresses due to improved parental relationships	G7. Child benefited from positive co-parenting G8. Child is not exposed to unhealthy parental relationships

APPENDIX 6: WIDER BENEFITS OF THE PROGRAMME

Wider benefits

W1. Wider benefits – reduction in inequalities of access for fathers in Swindon

W2. Wider benefits – professional workforce in Swindon are more aware and informed of the realities of working with fathers

W3. Wider benefits- seeing fathers as a resource as opposed to a risk for children's development leading to attitude shifts

W4. Wider benefits- potential to redesign future service delivery and informing policy change



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