DADS AT THEIR BEST: POST-EVALUATION REPORT

Carmen Clayton and Kerry Fletcher
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Leeds Trinity University

DADS at Their Best

Swindon Borough Council

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DADS AT THEIR BEST

Dads at their Best (DATB) is the young fathers' support service 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.[1]

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. The duration of the core programme is from early pregnancy (ideally before 20 weeks) until the child reaches one year of age, whereas the targeted programme runs for 3-6 months. Young men can enrol at any stage of parenthood.

The core and targeted pathways are delivered through one-to-one support sessions, exploring emotional regulation work, mental health, 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. By drawing on good practice from the FNP and the latest research on young fatherhood, DATB utilises evidence informed practice and professional models of working to engage with, and to support, young men. This includes weekly supervision, monthly psychology supervision, weekly team meetings, tripartite safeguarding supervision with a named nurse, early engagement of clients, specialised skills to engage and retain clients, and motivational interviewing.

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 1). 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 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.

[1]The Family Nurse Partnership | (fnp.nhs.uk)

POST-EVALUATION STUDY

In summer 2025, a small scale post-evaluation study was completed to assess the effectiveness of DATB in terms of its implementation, delivery and envisaged outcomes since the original research (particularly in relation to the desired long-term outcomes).

Similar to the original evaluation study[2], professionals and young fathers who were attending DATB were sent direct invitations to take part in the project after ethical approval was granted.[3] Two young fathers and two Swindon-based professionals responded positively (see appendix 2). The sample size was kept small to acquire an in-depth and rich account of participants' experiences and opinions (Young and Casey, 2018).[4]

One-to-one, qualitative semi-structured interviews were set up with a trained researcher for those who expressed an interest with interviews taking place between April and May 2025. Participants had the option of a telephone or an online Microsoft/MS Teams interview. All 4 participants requested an MS Teams interview. Qualitative interviews allow interviewees to tell their own stories, on their own terms, and using their own words, whilst being considered young person-friendly (Eder and Fingerson, 2003).[5] Interviewing online also allows for real-time interaction between the interviewer and participant and can replicate features of face-to-face interviews (Lo Lacono, 2016).[6]

[2] 'Dads at their Best' service evaluation - Swindon JSNA

[3] Health, Wellness and Life Sciences Ethics Committee, Leeds Trinity University

[4] Young, D.S. and Casey, E.A. (2018). An Examination of the Sufficiency of Small Qualitative Samples. Social Work and Criminal Justice Publications, 43(1), 53-58

[5] Eder, D. and Fingerson, L. (2003). 'Interviewing Children and Adolescents', in J.A. Holstein and J.F. Gubrium (eds), Inside Interviewing. New Lenses, New Concerns, pp. 33–53. London: Sage

[6] Lo Lacono, V., Symonds, P. and Brown, D.H.K. (2016). Skype as a Tool for Qualitative Research Interviews. Sociological Research Online, 1(2), 103–117

KEY FINDINGS: YOUNG FATHERS' EXPERIENCES

1. Through the DATB service, young fathers gained a better understanding of relevant parenting skills and their role as fathers (outcomes A2, B1), such as being a good example, the importance of attachment building, how to co-parent effectively, reducing mother-father conflict, awareness of healthy and unhealthy relationships and behaviours on their children, and how to keep their children safe (outcomes B2, C2, C3, E2, F2, F5, F6, G2, G8).

   "We didn't even start to think about child locks on anything until after we had both spoken to our respective workers. Now we have child locks on everything." (Participant 2, young father)

2. By working with DATB, young fathers felt better equipped to understand and support their children's needs, including daily routines and overall development (outcomes C1, E3, F4, F5, G2).

   "Since my son went to nursery and by working with the specialist young fathers' [SYF] worker, he went from a kid that could not do his fine and gross motor skills, was not sort of walking and was not, I suppose, educated. But since his mind's been pushed, the progress has been astronomical. It has been amazing to see." (Participant 1, young father)

3. Young fathers reported an increased level of parenting confidence and were able to parent effectively without reliance upon the child's mother (outcome G3). Some fathers had developed sufficient parenting skills to be granted sole custody of their children, thus preventing these children from being taken into the care system (outcomes A2, B1, C4).

   "Sometimes when she's crying, she'll call out for me and not just for her mum and stuff like that." (Participant 2, young father)

4. DATB supports young fathers in using various strategies and coping mechanisms to promote positive mental health, wellbeing and healthy relationships, whilst increasing self-awareness and management of emotions (outcomes A5, A6, B5, B6, C1, C4, F3, F4, G7, G8).[7]

   "It does feel amazing cause of the extra support I have had. When I am struggling, I will say I'm struggling. When I am happy, I'll tell people this is what makes me happy and this is how I feel when I am sad. It has helped immensely." (Participant 1, young father)

5. DATB supported young fathers with their education, employment and training (EET) aspirations, and offered practical advice (outcomes C4, C5).

   "The SYF worker is helping me to try to get into college, she's helping me to figure out how to get my GCSE results or some sort of qualification and stuff like that." (Participant 2, young father)

[7] Examples includes a 1-10 numbering system for rating and describing emotions and the 'traffic light' tool, where fathers use colours to identify and communicate their emotions (green for positive, amber for uncertainty and red indicating a negative state of wellbeing).

6. Young fathers had a positive relationship with the Specialist Young Fathers' (SYF) worker. They felt listened to and appreciated the multi-strategy support approach used by DATB (outcomes A6, B5).

   "I always found with other professionals that they were always trying to fix something. But with [SYF worker], she was always trying to make it better if that makes sense." (Participant 2, young father)

7. Fathers were more willing to work with other professionals and agencies as a result of positive DATB involvement. Young fathers also expressed more confidence in accessing health and care services independently and advocating for themselves and their children (outcomes A3, B5, C6).

   "It feels amazing like I can call doctors, I now have the confidence to call the doctors, I know how to talk, how to explain situations. I know how to engage in conversations, like appropriate conversations with like social services. I know how to interact with doctors, receptionists at doctors, how to arrange prescriptions and doctors' appointments, and how to talk to the hospital about my son's condition." (Participant 1, young father)

8. Young fathers would recommend DATB to other young dads given its benefits and felt that more young fathers should have access to DATB (outcomes A3, B1, B5).

   "If I wasn't working with [SYF worker] I'd still be very much that shy guy in the corner." (Participant 1, young father)

KEY FINDINGS: PROFESSIONALS' EXPERIENCES

1. Local professionals remarked that DATB's initial assessment of young fathers' support needs were effective, which offered personalised support to meet the needs of individual young fathers (outcomes A1, E1, F3).[8]

   "[Young fathers] they're getting the right advice and they're getting the best advice to support them to be the best parent that they can be."
   (Participant 3, professional)

2. Professionals expressed that DATB had improved young fathers' parenting skills and strategies, including their confidence as a dad. In turn, this has been positive for father-child relationships, attachment levels, children's development and young men's lifestyle choices such as EET decisions (outcomes A2, B1, C1, C4, C5, G3).

   "We see such a transformation in dads because of the way the SYF worker executes the programme. And often we have had incidents where mum cannot meet baby's needs, but dad can. And dad can take on that role as full-time carer because of the work that DATB has done."
   (Participant 3, professional)

3. Professionals remarked that young fathers' health and wellbeing had improved whilst attending DATB. This included self-care, risk avoidance, and the ability to manage healthy and unhealthy relationships (e.g. with the mother of the child, partners and peers). Fathers were also said to implement better choices and communicate their needs more effectively to others (outcomes A5, A6, B5).

   "Having a better relationship in whatever capacity, it is about understanding the impacts of that relationship and behaviours around their children. [For example] I have heard, 'oh, now I understand that when we argue or fight in front of my baby, that's distressing for them'."
   (Participant 4, professional)

4. The SYF worker was considered critical to the success of the DATB programme and was an important advocate for the young fathers within multi-agency contexts. Similar to the fathers' accounts above, professionals remarked that service users were more confident in accessing services and advocating for themselves with other agencies though DATB involvement (outcomes B5, C6, W1).

   "If the SYF worker feels that they are not advocating for themselves, she will speak up. She does advocate for them. She does make them heard and they have not had that. So that is huge. That is huge." (Participant 3, professional)

5. The DATB professional training provided by the SYF worker was seen as beneficial for local practitioners and services, in terms of increased understanding of young fathers' needs, promoting inclusive practice, and highlighting the importance of a strengths-based approach, rather than a deficit model of young fatherhood (outcomes W1-3).

   "It is very similar in terms of the stigma that a lot of the young mums still face. You know, it is going from that view of, 'oh, you've [young father] made another mistake, you've had an unplanned baby' or whatever to actually, 'you know you've turned your life around and you're doing some really good things here'."
   (Participant 4, professional)

[8] Outcomes Star

6. The use of a whole family approach and research informed practice was considered a valuable aspect of the DATB service for client users (outcomes across A-G).

"In public health, we love the evidence based. So, you know, it is a really important part trying to do what we know works, but also having that kind of rigour to doing something new and testing and learning." (Participant 4, professional)

7. Multi-agency working was considered beneficial for young fathers and their children's outcomes (outcomes across A-G, W1-3).

"So, we are making sure that there is a professional going in on a weekly basis to make sure things have been maintained. Or if things are dipping, we can prop them up and scaffold them as much as possible to get them back into a good place."
(Participant 3, professional)

8. Both professionals and young fathers felt there is very little support for young fathers outside of the DATB programme and there is a high need for the service locally and more widely (outcomes W1-4).

"It is an invaluable service and we see so much change from it. Like if we can reduce domestic abuse, if we can reduce non-accidental injuries, all these things are worth its weight in gold. It just needs to be rolled out more."
(Participant 3, professional)

SUMMARY

DATB was praised by both young fathers and professionals for the support it provides to young men as parents and the short, medium and long term outcomes evidenced for both father and child. These findings are similar to the original evaluation. However, as the post-evaluation study included more fathers who had completed or almost finished DATB at the time of the interview, this enabled a better insight into the longer term effectiveness of the programme.

Through partnership working and professional training, DATB has highlighted the vital role of young fathers, promoted inclusive young fatherhood practice and challenged discriminatory views of young fathers amongst local agencies. This was said to make a difference to the professional workforce in Swindon and helped to shift negative views of young dads to ensure that better support is provided.

Proposed improvements to the programme included extending the service model to match the length of FNP provision (up until the child's second birthday), rolling out the programme nationally to benefit a larger number of young fathers, and producing a toolkit to share best practice with other providers. As young fathers play a vital role in improving outcomes for children and mothers,[2] supporting their journeys as parents is significant for the whole family and much can be learnt from the DATB model for existing providers and those who wish to set up similar provision elsewhere.

KEY RECOMMENDATIONS

1. Given the positive accounts of participants in the original and post-evaluation study, the continuation of DATB is recommended.

2. Increasing the length of the DATB service model would enable longer-term support for young fathers and their children. Given the close partnership between DATB and FNP, one possibility would be to develop a two year DATB delivery model to coincide with the length of FNP's provision.

3. DATB would benefit from increased capacity through further funding and increased staffing.

4. There is potential for the DATB programme model to be developed and extended nationally but this would be reliant upon funding at local and national level.

5. Sharing DATB best practice and increasing professional training would be advantageous to those supporting young fathers across the country. One way to do this would be via the production of a professionals' toolkit.

APPENDIX 1: CORE AND TARGETED PATHWAYS

The key themes which are covered in DATB 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, possibly leading to prioritising or combining of 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 visualise. Edinburgh PND Scale 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 their own need 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, 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, additional 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 as well as 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 shaken baby – 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 – relationship 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 back 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 am 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 back 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 2: PARTICIPANTS' DETAILS

Young Fathers

	Outcomes	Pathway type	Route into programme
Participant 1 (young father)	Medium/long-term	Core	Referral
Participant 2 (young father)	Long-term	Core	Referral

Professionals

	Experience working with young fathers
Participant 3 (professional)	Direct
Participant 4 (professional)	Indirect

APPENDIX 3: YOUNG FATHERS' OUTCOMES

	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 childcaring and relationship skills with others	B1. Confidence and competence in parenting skills grow	C1. Is a positive role model for child
Relationships 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 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/wellbeing	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 communication 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 and behavioural wellbeing, including mental health	C6. Increased willingness to use health services when appropriate and as necessary (as a result of DATB experience)

APPENDIX 4: CHILDREN'S OUTCOMES

	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 to better protect the child	
Relationship with child	E3. Reciprocal, sensitive and responsive interactions between baby and father	F3. Child is able to identify with a positive male role model	G2. Child is building a positive attachment with the father G3. Father is able to 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, 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 benefits from positive co-parenting G8. Child is not exposed to unhealthy parental relationships

APPENDIX 5: WIDER BENEFITS OF THE PROGRAMME

Wider benefits
W1. Reduction in inequalities of access for fathers in Swindon
W2. Professional workforce in Swindon more aware and informed of the realities of working with fathers
W3. Seeing fathers as a resource as opposed to a risk for child's development leading to attitude shifts
W4. Potential to redesign future service delivery and informing policy change

Contact Details:

Professor Carmen Clayton
Leeds Trinity University
C.clayton@leedstrinity.ac.uk