Families are the cornerstone of a civil society, and when parents experience social, emotional or environmental stress, their ability to provide a safe, secure and stimulating environment for their children is compromised. Men and women who become parents at a young age have often experienced significant poverty, stress and trauma throughout their lives. Although there have been important initiatives in terms of policy and programs, in Australia and worldwide, social, emotional and economic deprivation continues to characterise many young parents, and new concepts, perspectives and frameworks are required to address the issue.

This submission suggests that one valuable contribution to the domain could be a deeper consideration of the role of fathers in young parenthood. Considering adolescent motherhood, the fathers of these children may be adolescent themselves, or considered as adults. However, despite a large body of literature across multiple disciplines on adolescent motherhood, the fathers who are partnering these young women have been largely absent from empirical research. Nevertheless, evidence shows that young (teenage) fathers also have psychological and social needs that require services alongside those of mothers. Within a family system perspective, the wellbeing of the individuals, the relationship between the parents, and the quality of their parenting relationship, all contribute to the health and sustainability of the interwoven relationships. Furthermore, the strength of this system impacts directly on the long-term future of their children.

Three points to note:

1. There is now robust evidence that fathers play a key positive role in children’s development. They do this not only by their relationships with the child but through their parenting partnership with the mother.
2. The transition to becoming a father can be stressful and affect fathers’ mental health just as has been recognised for mothers.
3. However, particularly for young men, fatherhood can mark a significant growth in confidence and sense of purpose, which can lead to improved health and social outcomes.
Therefore, approaches that take account of fathers’ importance and potential for enhancing the social, health and educational outcomes for families will:

1. Address the psychosocial wellbeing of young people in the period prior to conception.
2. Address parenting interventions to biological and social fathers as well as mothers.
3. Address the particular strengths and needs of young Aboriginal fathers.

Rather than taking a father-deficit model, where fathers are seen as ineffective or neglectful in the arena of child health and development, it will be productive to focus attention on the social, economic, and political environments that shape the quality or quantity of father engagement with their children and their commitment to coparenting, at all ages and stages of reproductive health.

1. **Address the psychosocial wellbeing of young people in the period prior to conception**

   Attending to the wellbeing, connectedness and education of young people, especially men, before conception occurs, may assist them to express their sexuality in ways that are sensitive and responsible.

   - A growing body of research has demonstrated that boys exposed to a number of risk factors have an increased probability of fathering a child during their teenage years, and that the lives of adolescent fathers are complicated and filled with a multitude of harsh realities.
   - Parental separation/divorce in early childhood, exposure to family violence in early childhood, and illicit drug use (ever or in pregnancy) are predictors of fatherhood in a teenage setting.
   - Policy makers need to be mindful of other issues that can surround and pre-exist teenage parenting (fathers and mothers), for example drug and alcohol use, disability, depression, and/or growing up in care.
   - Initiatives adopting a life course perspective can mobilise community resources to include teenage males before they become fathers.

All young people need education that facilitates their understanding of the responsibilities and challenges of being a parent. Education about sexual and reproductive health needs to occur prior to conception. School-based sex education is effective in enhancing responsible sexual behaviour. Topics to address include: intimate relationships and sexual relationships, gender equity, sexualities, contraception, pleasure, responsibility, risk, and consent. Schools also need to work in partnership with students’ parents and carers.

It is important to note that comprehensive sex education that focuses on responsible reproductive or family planning, also lays the foundation for equitable gender relations. For young men, a lack of information, skills, and critical reflection contributes to unequal and destructive relationship patterns.
The global report on the *State of the Worlds Fathers* recommends that sex education for adolescent males should aim to increase knowledge and awareness about the existence of harmful gender norms and the costs of adhering to them, and assist in redefining unhealthy gender norms into healthy ones (p. 138). Strengthening empathy and questioning rigid gender norms will contribute to young men’s positive intimate relationships and caregiving behaviours.

2. Including teenage fathers in interventions

Barriers to father-inclusive practice have remained unsatisfactorily stable over the last two decades, and researchers continue to document that interventions and existing parenting programs do not effectively target fathers. In addition, there is a lack of recognition that the inability of interventions to recruit and engage fathers, and the research that evaluates parenting programs, continues to be a problematic area of service engagement. As noted by Panter-Brick et al in 2014, in programs that purport to include fathers, ‘parents’ are often undifferentiated by gender and there is little systematic program logic that includes fathers at each step. Omitting fathers from programs can undermine effects on mothers (e.g., through conflicting knowledge, values, goals or skills), and thus resources can be unnecessarily wasted. Furthermore, ineffective engagement with fathers in their roles as caregivers overlooks the potential additive and synergistic positive impact of fathers in the lives of children. Young fathers can have a positive effect on the health decisions of their teenage partner, and many want to be more involved but need the support of family and services. Clarity of purpose with respect to gender-differentiated and coparenting issues in the design, delivery, and evaluation of parenting programs will constitute a “game change in this field.”

More specifically, teenage fathers report universally poor experience of professional care irrespective of generation, age group, or class, and fathers, in the setting of teenage pregnancy, have unrecognized psychological symptomatology and require services along with teenage mothers. As has been found in the father-engagement field more broadly, fathers appear more likely than mothers to use web-based information and signposting to support services, and therefore dedicated websites are critical to improving access and effectiveness of support for young fathers. Information on sexual health, teen pregnancy and young parenting is recommended.

3. Recognize and address the particular strengths and needs of young Aboriginal fathers

Aboriginal may face significant hurdles in the transition to fatherhood. They are more likely to become a father at an early age, be unprepared for fatherhood and lack positive parenting role models. Traditionally, young Aboriginal men have been educated about Aboriginal Law (lore) and culture by older male relatives; however, many contemporary Aboriginal men have been left
unsupported in the transition to adulthood, lacking guidance on how to lead healthy lives and take responsibility for fatherhood

While the compromised health status and incarceration of Aboriginal men of fathering age is readily acknowledged as damaging to children’s development, family-related policies either ignore male parenting or feature aspirational statements urging the engagement of Aboriginal fathers with little impact on services. This has been clearly articulated by The National Aboriginal and Torres Strait Islander Health Plan 2013–2023:

Cultural practices and societal roles affect the role that fathers and other male family members play in the development of a child. It is important for services to acknowledge and include men in the raising of children in a culturally appropriate way (p. 30)

However the only father-focused recommendation within the plan was for a Strong Fathers Strong Families program to address Aboriginal fathering. This was launched without an evaluation plan and with only general aims to guide implementation. State Government policy documents addressing Aboriginal family wellbeing are similarly restricted; they may identify general aims for fathers such as “assisting Indigenous communities to strengthen the role of men as fathers” (p.15), or provide multiple strategies targeting Aboriginal mothers with no acknowledgement of Aboriginal fathers’ role in family wellbeing. The Stayin on Track program is an example of engaging with young Aboriginal fathers using web and mobile phone-based technology to give these young men a voice.
References


