

Lower income dads active in their kids' health

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Lower-income, urban dads are involved in their children's health and encourage them to exercise and eat healthy foods, reports a new study from Northwestern University Feinberg School of Medicine. But these same dads may also give their kids the wrong dose of medicine and may be uncomfortable handling emergency medical care for their children.

This is the first study to examine these fathers' perceptions of their participation in their children's health care and well being. It's an important subject because men are increasingly responsible for childcare and, in this current recession, more men are unemployed than women. Little has been known about how urban fathers are involved in their children's health.

The study is a wakeup call to [health care providers](#) to include and educate fathers as key partners in their children's health, rather than exclusively focus on mothers.

"There are positive ways dads are involved in their children's health and negative ways," said lead study author Craig Garfield, M.D., an assistant professor of pediatrics and of medical social sciences at Northwestern's Feinberg School of Medicine and a [pediatrician](#) at Children's Memorial Hospital. "If we are really going to focus on improving the health of children, we have to include fathers because they are important. Getting dads more involved and more comfortable in their children's health and health care can create healthier families."

The study is published in the *Psychology of Men and Masculinity*.

Fathers make unique contributions to their kids' health, Garfield noted. "Dads aren't just male moms," he said. "They have their own ways of contributing to child development, whether that is through rough and tumble play or exploring new things and taking calculated risks. Dads want to be good role models. Yet they may not have had a model in their own fathers that they can base their behaviors on. We in the [health care system](#) need to help them achieve that by showing them good behaviors to model for their children."

Children from lower income homes are at high risk for such health problems as diabetes and obesity, he added, and a number of fathers in the study attempted to protect their children from these problems.

The fathers are more involved in their kids' health and health care than researchers expected.

"There's a bias to assume lower income dads, particularly in unmarried families, are not involved with their children," Garfield said. "But that's not the case. Recent research has shown the vast majority of dads will attend the birth of their kids whether or not the men are married to the mother. Our research goes further to say they really are involved day to day with their kids in ways that affect their health and development."

The number of stay-at-home fathers in the United States has nearly doubled to 158,000 from 2003 to 2009, and the number of single fathers raising children has grown from 400,000 in 1970 to 1.7 million in 2009, according to the U.S. Bureau of Census.

The study focused on 31 primarily African American and Hispanic fathers from Chicago and Milwaukee who were an average of 31 years old. The men were a subsample of the national Fragile Families and

Child Well-Being Study. Of the sample, 56 percent self-identified as African American, 28 percent Hispanic and 15 percent white; 55 percent were single and 41 percent had an income of \$34,999 or less.

More than half the fathers reported modeling exercise behaviors and engaging their children in play as ways to promote their child's health, the study reports. The fathers said they knew their behavior influences their children's habits, and they often tried to set a good example.

"I do more vegetables, I eat better, I drink more milk now at the dinner table," said one father from Milwaukee. "I don't drink as much beer now because, unfortunately, monkey see, monkey do. So, if I do things correctly, he automatically thinks that's the right thing to do."

"I make sure he eats good," said an unmarried father named Gregory. "If he wants to snack on something, I'd rather give him some fruit to snack on instead of candy."

A father named Vincent from Chicago noted, "I exercise a lot, so he tries to exercise with me. He's not big enough to do certain exercises, but he tries. And I think those day-to-day care tactics will help him maintain pretty good health."

But when it came to navigating an emergency room with his daughter, a dad named Dante said the situation was scary, because he was used to his wife handling things. Another dad admitted giving his daughter soda and cookies, although he knew he shouldn't.

Also concerning, about one third of the [fathers](#) didn't give the recommended dose of medicine to a child. "I try not to use it as much as the label tells me," said a dad named Vincent. "I try to use it as least as possible."

"What we need to do is meet these men halfway," Garfield said. "In pediatrics we play lip service to dads being involved, but we could do a better job of working with them. They come with the best of intentions, but don't know what they should be doing. From the first visit with a newborn in the nursery to a checkup with a teenager, [health care](#) providers can encourage [dads](#) and show them ways to positively interact with their children."

Provided by Northwestern University

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