

## 1.5 Men and Participation in Parenting Programs or Child Therapy

~~Despite the evident~~ Although evidence suggests that fathers can contribute significantly ~~importance of the role of the father in-~~ to positive outcomes ~~for their children for children,~~ the majority of research on therapeutic and ~~parenting-parenting~~ education interventions ~~for families-~~ does not include paternal input ~~from the fathers~~ (Phares et al., 2010). ~~Partly-~~ This ~~is an somewhat unsurprising-~~ ~~be expected,~~ given the reduced likelihood that fathers will be jointly or solely involved in ~~the-~~ interventions ~~alongside or in place of mothers.~~ However, a systematic review of global literature on parenting ~~interventions-~~ and therapeutic interventions for children ~~also-~~ identified that ~~there are-~~ operational biases in ~~the-~~ data collection that ~~contribute to the-~~ ~~do not identify-~~ exclusion of fathers ~~from research in research-~~ (Panter-Brick et al., 2014). ~~Despite~~ these limitations, the available evidence ~~that is available does-~~ indicates that paternal involvement can improve outcomes-.

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**Commented [CE2]:** Please note that I have formatted your thesis extract according to our modified APA formatting style for these. In order to ensure consistency, please use the styles I have set (APA Body, APA Thesis Heading 2), when make further revisions or additions to your thesis.

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**Commented [CE4]:** In APA, for sources with three to five authors, et al. is used for subsequent citations only. So if this source has fewer than five sources, they should all be listed here, if this source has not been mentioned in previous sections, and 'Phares et al.' only used for subsequent mentions. It isn't possible for us to check and correct this for you, since your reference list hasn't been included for editing.

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~~While Research research on Parentparent-Child-child Interaction-interaction~~  
~~Therapy-therapy~~ has shown ~~that while there was~~ no difference in ~~short-short-term~~ results, ~~at follow-up~~, father involvement was correlated with maintained treatment gains ~~in follow-up sessions~~ (Bagner & Eyberg, 2003). ~~Further, Father-father~~ involvement was found to make ~~even more of aa~~ greater positive difference if the intervention was for a child with a developmental delay (Bagner, 2013). Family ~~Cognitive-cognitive~~ ~~Behaviour-behaviour~~ ~~Therapy-therapy~~ for anxious youths was also shown to ~~have~~ ~~achieve better-improved~~ child outcomes ~~if-when~~ both ~~the father and the mother~~parents attended and ~~were~~ engaged in the therapy (Podell & Kendall, 2011). In a meta-analysis of 26 studies on parenting programs, ~~more a~~ greater number of positive changes in children's behaviour and better parenting practices were more likely to be reported when ~~the fathers were also participatimed;~~ (Lundahl, Tollefson, Risser, & Lovejoy, 2008).

~~In accord with the~~Alongside the recent emphasis ~~to-on increase~~ men's increased participation in a range of health initiatives, ~~researchers are have recommending~~ ~~recommended~~ increased paternal involvement in that for best outcomes there should also ~~be an increase in men's involvement in interventions for their children and~~ ~~families~~family interventions (Duhig, Phares, & Birkeland, 2002; Fabiano, 2007; Phares et al., 2010). ~~However, some research has suggested that fathers are less likely than~~ ~~mothers are~~ to report positive ~~gains-feedback~~ from parenting training, ~~and tend to give~~ ~~less positive feedback~~ (Lundahl et al., 2008). Research into parenting programs around the world has identified a dominant trend of institutional biases towards a 'father deficit' model, whereby ~~the~~ design and delivery of programs is tailored specifically for mothers (Panter-Brick et al., 2014).

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**Commented [CE10]:** The 'follow-up' has been moved to avoid ambiguity.

**Commented [CE11]:** Does this mean 'more positive' as in a greater number of positive changes, or as in the changes were more positive? I have edited this for clarity; however, please check to ensure your intended meaning has not been changed.

**Commented [CE12]:** Please note that I have followed British/Australian punctuation rules for APA referencing, as your thesis will be submitted to an Australian university. This means that there is no serial comma before '&' when listing three to five authors.

**Commented [CE13]:** This has been edited to ensure consistency in tense. Note that APA Style requires the use of past tense when discussing previous research.

**Commented [CE14]:** This sentence was a little unclear in terms of 'less positive feedback'. Is that fewer reports of positive outcomes, or the feedback itself is less positive? The second part seemed to echo the message of the first clause, so I have deleted it to avoid repetition.

Panter-Brick et al. (2014) identified a strong gender bias in the policies which that inform parenting programs and helping support organisations/institutions, noting that this bias and observed that this bias was carried on through/influenced the content of programs, the culture of the institutions; and in the behaviour of the helping professional service providers. A consequence of this is that/Consequently, staff attitudes sometimes excluded fathers, and the environments were not always found to be father-father-friendly. For example, when parenting groups were sometimes hosted at a women's health center/centres. Furthermore, the content of programs/program content tended to be less relevant for/to fathers, and did not consider gender differences in parenting styles and goals (Panter-Brick et al., 2014).

These barriers were also identified in recent Australian research, which acknowledged that it was challenging to recruit fathers and maintain their participation.

The results of a Victorian study of 27 fathers in focus groups identified that the fathers often felt left out by/excluded by workers/staff, and did not feel that their contributions were valued (Cosson & Graham, 2012). The fathers spoke of a female-centered culture at the services/in support services, and felt that there was/perceived a lack of recognition for/of their needs even though/despite they a desire to wanted to be involved. Practical barriers were also identified as an issue, specifically work commitments and not having a lack of information about the services available services, and having work commitments. Similarly, A a large-large-scale study of communities throughout the United Kingdom has also found fathers were to be reluctant to even enrol in family education or parenting programs. This was especially evident if the/in programs was viewed/perceived to have an innately feminine slant, for examplesuch as those with only all female educators or a focus on sedentary play with children rather than active play (Macleod, 2008).

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**Commented [CE16]:** 'Which' and 'that' have different uses. 'Which' is for non-restrictive clauses, while 'that' is for restrictive clauses. An easy way to remember is that 'which' is usually preceded by a comma and the text that follows it is not usually vital to the meaning of the sentence.

**Commented [CE17]:** 'Support' is more formal in this context, and is best suited to academic writing.

**Commented [CE18]:** This is a sharper way to start the sentence without losing any of your intended meaning.

**Commented [CE19]:** 'Centre' is the British/Australian spelling, while 'center' is American English.

**Commented [CE20]:** It is always best to be succinct where possible. It makes for a tighter structure, and also helps to reduce word counts.

**Commented [CE21]:** Is this information sourced from Panter-Brick et al.? I have inserted a in-text citation to give the reader greater certainty of the source. Please check this carefully

**Commented [CE22]:** Do you have a source for this information? When new information is introduced, particularly research, an in-text citation is required. Is this Cosson and Graham as cited below?

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~~An further~~ Australian study incorporating ~~both~~ surveys and focus groups ~~also~~ ~~further supported~~ ~~found support for previous findings that~~ ~~the negative impact of these~~ institutional biases and practical barriers can have a negative impact (Berlyn, Wise, & Soriano, 2008). In addition, this research identified some interpersonal and intrapersonal factors ~~within the fathers which that~~ ~~were posed potential~~ barriers to fathers' participation. ~~These~~ ~~These~~ included the quality and ~~eooperation~~ ~~cooperative nature of~~ the parents' relationship, the father's sense of competence, and the cultural appropriateness of the service. Some men also identified that stereotyped gender roles and their own notions of masculinity made it uncomfortable for them to attend, with help-seeking ~~seen~~ ~~perceived~~ as an admission of failure. This suggests that alongside external barriers, gender role conflict may also be a significant issue.

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Given ~~the the~~ breadth of research linking men's gender role conflict to their ~~own~~ participation in therapeutic programs, it is ~~eredible~~ ~~plausible~~ to ~~eonsider~~ ~~suggest~~ that this conflict might also extend to the participation of men in parenting programs. ~~It~~ ~~may also affect their willingness too~~ ~~to the~~ ~~accessing of~~ therapeutic services for their children. While ~~the~~ external barriers have been acknowledged, the influence of fathers' internal barriers ~~from within the father~~, specifically the potential barrier of gender role conflict, has received little attention in research (Mintz & Mahalik, 1996). It has been suggested that men with higher levels of gender role conflict are less likely to view their wives' interests as being of equal importance. ~~This means~~ ~~meaning~~ that if both parties work, ~~they~~ ~~men with gender role conflict~~ are still less likely to share in traditional female ~~tasks~~ traditionally undertaken by women, such as house-work and parenting duties (Mintz & Mahalik, 1996). Accordingly, Mahalik and Morrison (2006) ~~published an article in which they~~ ~~suggested that~~ fathers' involvement in ~~the~~ parenting duties can be inhibited by restrictive masculine schemas.

**Commented [CE25]:** I have edited this for greater clarity on who 'they' are.

Specifically, ~~the authors~~ Mahalik and Morrison (2006) proposed that the nature of masculinity to which a man subscribed ~~would~~ could influence his style of fathering involvement (Mahalik & Morrison, 2006). This view allows for ~~more~~ greater complexity in the relationship between gender role and ~~father~~ paternal involvement by acknowledging that a man may wish to be involved, but ~~gender role conflict may be~~ limited ~~limit~~ in the ~~style~~ depth of his engagement ~~by his gender role conflict~~. For example, a father who has difficulty sharing and expressing emotions is likely to view his role as ~~being that of~~ protector ~~or~~ ~~ive~~ rather than ~~nurture~~ nurturing. ~~Accordingly~~ Thus, he may have difficulty telling his children that he cares, have little interest in sharing or soothing emotions, or may deliberately attempt to 'toughen up' his children (Mahalik & Morrison, 2006). He may be involved, but not ~~empathically~~ engaged ~~empathetically~~.

**Commented [CE26]:** I have put 'could' rather than 'would', as 'would' implies certainty. This is a safer option.

**Commented [CE27]:** I have changed some 'father'(s) to 'paternal'. 'Father' is certainly not incorrect; however, avoiding repetition is a good way to improve writing.

Similarly, a father with a high need for success, power and control is likely to prioritise work and ~~career~~ success ~~in his career~~ over the needs of his family (Mahalik & Morrison, 2006). This has been supported in research ~~that~~ which found ~~that~~ for some men, work was the- assumed priority around which other activities were coordinated (Duckworth & Buzzanell, 2009). Rather than view this as neglectful, a ~~father~~ man may see this as ~~his way of being a~~ the duty of a good father ~~who is providing for his~~ family ~~and~~ provider. Requests from ~~the~~ family ~~that~~ ~~take him away~~ divert his attention from his responsibilities could even be viewed as attacks on his parenting (Mahalik & Morrison, 2006). It is reasonable to expect that a man who prioritises his career is likely to experience a conflict between work and other commitments at some stage, and will be less accessible to and responsible for his children-.

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**Commented [CE29]:** This has been edited for greater formality.

A high need for success and control may also affect the way in which ~~he~~ a father interacts with his children- ~~for~~ For example, ~~he may~~ ~~behaving~~ behave competitively with ~~them~~ his children, ~~emphasizing~~ emphasising ~~winning~~ victory over participation, and devaluing those ~~that~~ who do not win (Mahalik & Morrison, 2006). He may also ~~put~~

**Commented [CE30]:** 'Emphasising' is the British Australian spelling. 'Emphasizing' is the American English spelling.

~~place~~ pressure and high expectations on his children, and ~~view-measure~~ his success as a father ~~as reflective of by his children's through their own~~ success in life. Finally, a father ~~who has discomfort-uncomfortable~~ with affection between men may struggle with showing affection towards his sons, and even dismiss or reject a son who is homosexual (Mahalik & Morrison, 2006). Again, this limits the engagement of the father, even if he is involved and responsible.

In summary, the research suggests that ~~for~~ fathers with high levels of gender role conflict, ~~the various aspects of this may hinder them from being optimally~~ ~~be less~~ accessible, engaged and responsible for their child's wellbeing. Attending parenting programs may be viewed as particularly unpalatable, as it is inconsistent with many of the ~~factors-qualities often correlated with that make up their view-~~ ~~traditional notions of masculinity~~of strong ~~maseulinity~~, such as self-reliance and independence. They may also be reluctant to facilitate their child's attendance in therapy ~~if necessary~~, as they may ~~be sensitive to perceive~~ this as a reflection of failed parenting-. ~~Additionally, they may~~ hold stigmatised views of ~~against~~ therapy or mental health issues, or ~~possibly they may~~ not be present or attentive enough to observe the need for a therapeutic intervention in the first instance. To date, there has not been a specific exploration of gender role conflict on ~~father's~~' stated intentions to access parenting programs or child therapy-. ~~and f~~Further research is necessary.

**Commented [CE31]:** This has been edited to improve sentence structure.

**Commented [CE32]:** In this case, we are talking about fathers generally (multiple fathers), so the apostrophe falls after the 's'.

## 1.6 Attitude Towards and Understanding of the Fathering Role

### ~~1.6 Attitude towards and Understanding of the Fathering Role~~

~~It should also be considered that o~~Other interpersonal factors may interact with gender role conflict and a father's involvement in parenting programs or ~~willingness to access~~ing child therapy. It is well-established in social psychology that

attitude predicts behaviour, ~~as long as provided~~ the attitude is ~~one that is~~ decisive and held with confidence (Glasman & Albarracín, 2006). A large-scale study of thousands of ~~United States~~ fathers ~~in the United States~~ from diverse cultural and socio-economic backgrounds found that positive attitudes towards fatherhood predicted both intended and actual involvement with children (Perry, 2013). Other research has found that fathers with favourable attitudes towards fatherhood were significantly more involved across all three aspects of involvement—interactions, accessibility, and responsibility. ~~However, though~~ the perceived level of investment did not always mirror the actual ~~amount of~~ parenting behaviour (McBride & Rane, 1997). (McBride & Rane, 1997).

Similarly, qualitative research ~~from on~~ fathers in focus groups found that the style of involvement by fathers was influenced by the importance ~~and personal meaning~~ they attached to the role, ~~and the personal meaning attached to the different dimensions of fathering~~ (Olmstead et al., 2009). Fathers who reported ~~feeling that they felt~~ competent in their own caregiving skills and viewed paternal care as important were also found to be more involved in the practical care of infants (Beitel & Parke, 1998). This ~~research does suggest~~ that a father's attitudes about his value as a parent, his competence, his pleasure in the role of parenting and the meaning he attaches to the role can predict his involvement in the care of his children. ~~It may be possible that a father will subscribe to traditional male and female roles, but have a positive attitude towards fatherhood. and e~~Consequently, ~~he~~ may be heavily invested in the wellbeing of his child; ~~and be~~enthusiastic about involvement. Conversely, a man may feel uncomfortable and unsure as a father, and choose to be less involved due to his own sense of incompetence (Beitel & Parke, 1998; Kwok, 2013).

—Therefore, it ~~is has been~~ proposed that attitudes towards and understanding of the fathering role should be considered ~~as a~~ possible moderators

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**Commented [CE34]:** This was quite a long sentence, so I have broken it up into two.

**Commented [CE35]:** Even if the citation has been used previously, the year of publication must always be included.

between the relationship of gender role conflict and program participation. ~~For example,~~  
~~a~~ recent study examined the relationship between employment and father involvement, ~~using and used~~ fathering attitudes as a moderator (McGill, 2014). This research found that attitude was indeed a moderator. Even if a father worked long hours, ~~if he had~~ a positive attitude towards ~~the his fathering~~ role ~~allowed him to remain~~ ~~he was still able to be~~ actively involved in child-rearing, usually by reducing non-family leisure time. The author also found that fathers ~~who had with~~ a less traditional view of fatherhood, termed 'new fathers', were more likely to be actively engaged with and responsible for their children. Conversely, ~~the~~ fathers who identified with more traditional parenting ideals identified the role of provider as more important (McGill, 2014). This lends cautious support to the hypothesis that gender role conflict may predict hands-on parenting involvement, but any interaction between gender role and attitude ~~was not~~ ~~remains~~ unexplored.

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In a recent Australian study of the role of fathers at ~~child~~ meal-times, ~~Mallan et al.~~ (2014) ~~the authors~~ constructed a measure, ~~the Role of Fathers' Questionnaire (ROFQ)~~, to assess ~~how-how~~ positive ~~the men's attitudes~~ ~~men~~ were towards their roles as ~~fathers~~ fathers, ~~the Role of Fathers' Questionnaire (ROFQ, used with permission)~~ (Mallan et al., 2014). ~~Theis questionnaire-ROFQ~~ investigated how strongly men endorsed statements ~~which-that~~ queried the importance of fathers to be present, engaged, and responsible for the practical care of their children, ~~with q~~ Questions ~~related to~~ ~~around~~ emotional, physical, and psychological needs. The authors reported that a more involved and positive attitude towards fatherhood was positively related to how often fathers ate meals with their ~~children~~. This relationship was present even when controlling for hours spent in paid employment (Mallan et al., ~~2014~~ ~~-~~).

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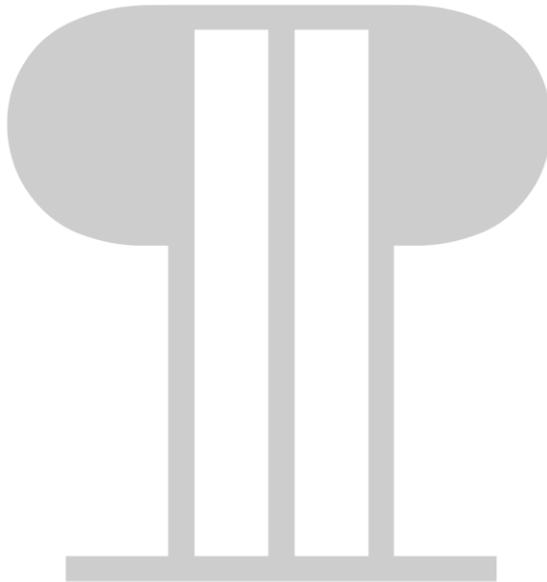
**Commented [CE38]:** You have referred to fathers and children generally (in plural form) throughout your paper, so I have edited this for consistency.

The ROFQ consisted of 14 items scored on a five-point Likert scale, three of which were reverse scored. Higher scores indicated a more involved and engaged

attitude, with scores ranging from 14 to 70. Exploratory factor analysis of the ROFQ indicated a ~~single-single~~-factor solution, which accounted for 30% of the variance.

Internal reliability of the scale was found to be sufficient with a ~~Chronbach's~~Cronbach's alpha of .75. ~~While it~~ would be preferable to use a scale with more established credentials, ~~However,~~ of the research reviewed for this present study, this ~~was the scale~~ ~~scale's~~with items ~~were the~~ most appropriate to the research question, namely men's attitudes towards the value of a father's availability, engagement and responsibility for his child ~~or child~~ren (Mallan, et al., 2014).

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## 1.5 Men and Participation in Parenting Programs or Child Therapy

Although evidence suggests that fathers can contribute significantly to positive outcomes for their children, the majority of research on therapeutic and parenting education interventions does not include paternal input (Phares et al., 2010). This is somewhat unsurprising, given the reduced likelihood that fathers will be jointly or solely involved in interventions. However, a systematic review of global literature on parenting and therapeutic interventions for children identified operational biases in data collection that contribute to the exclusion of fathers from research (Panter-Brick et al., 2014). Despite these limitations, the available evidence indicates that paternal involvement can improve outcomes.

While research on parent-child interaction therapy has shown no difference in short-term results, father involvement was correlated with maintained treatment gains in follow-up sessions (Bagner & Eyberg, 2003). Further, father involvement was found to make a greater positive difference if the intervention was for a child with a developmental delay (Bagner, 2013). Family cognitive behaviour therapy for anxious youths was also shown to achieve improved child outcomes when both parents attended and engaged in the therapy (Podell & Kendall, 2011). In a meta-analysis of 26 studies on parenting programs, a greater number of positive changes in children's behaviour and better parenting practices were more likely to be reported when fathers participated (Lundahl, Tollefson, Risser & Lovejoy, 2008).

Alongside the recent emphasis on men's increased participation in a range of health initiatives, researchers have recommended increased paternal involvement in family interventions (Duhig, Phares & Birkeland, 2002; Fabiano, 2007; Phares et al., 2010). However, some research has suggested that fathers are less likely than mothers are to report positive feedback from parenting training (Lundahl et al., 2008). Research into parenting programs around the world has identified a dominant trend of

institutional biases towards a 'father deficit' model, whereby the design and delivery of programs is tailored specifically for mothers (Panter-Brick et al., 2014).

Panter-Brick et al. (2014) identified a strong gender bias in the policies that inform parenting programs and support organisations, noting that this bias influenced the content of programs, the culture of the institutions and the behaviour of professional service providers. Consequently, staff attitudes sometimes excluded fathers, and environments were not always found to be father-friendly. For example, parenting groups were sometimes hosted at women's health centres. Further, program content tended to be less relevant to fathers, and did not consider gender differences in parenting styles and goals (Panter-Brick et al., 2014).

These barriers were also identified in recent Australian research, which acknowledged that it was challenging to recruit fathers and maintain their participation. A Victorian study of 27 fathers in focus groups identified that fathers often felt excluded by staff, and did not feel their contributions were valued (Cosson & Graham, 2012). The fathers spoke of a female-centred culture in support services, and perceived a lack of recognition of their needs despite a desire to be involved. Practical barriers were also identified as an issue, specifically work commitments and a lack of information about available services. Similarly, a large-scale study of communities throughout the United Kingdom found fathers were reluctant to even enrol in family education or parenting programs. This was especially evident in programs perceived to have an innately feminine slant, such as those with only female educators or a focus on sedentary play with children rather than active play (Macleod, 2008).

An Australian study incorporating surveys and focus groups further supported previous findings that institutional biases and practical barriers can have a negative impact (Berlyn, Wise & Soriano, 2008). In addition, this research identified some interpersonal and intrapersonal factors that posed potential barriers to fathers'

participation. These included the quality and cooperative nature of the parents' relationship, the father's sense of competence and the cultural appropriateness of the service. Some men also identified that stereotyped gender roles and their own notions of masculinity made it uncomfortable for them to attend, with help-seeking perceived as an admission of failure. This suggests that alongside external barriers, gender role conflict may also be a significant issue.

Given the breadth of research linking men's gender role conflict to their participation in therapeutic programs, it is plausible to suggest that this conflict might also extend to the participation of men in parenting programs. It may also affect their willingness to access therapeutic services for their children. While external barriers have been acknowledged, the influence of fathers' internal barriers, specifically the potential barrier of gender role conflict, has received little attention in research (Mintz & Mahalik, 1996). It has been suggested that men with higher levels of gender role conflict are less likely to view their wives' interests as being of equal importance. This means that if both parties work, men with gender role conflict are still less likely to share in tasks traditionally undertaken by women, such as housework and parenting duties (Mintz & Mahalik, 1996). Accordingly, Mahalik and Morrison (2006) suggested fathers' involvement in parenting duties can be inhibited by restrictive masculine schemas.

Specifically, Mahalik and Morrison (2006) proposed that the nature of masculinity to which a man subscribed could influence his style of fathering. This view allows for greater complexity in the relationship between gender role and paternal involvement by acknowledging that a man may wish to be involved, but gender role conflict may limit the depth of his engagement. For example, a father who has difficulty sharing and expressing emotions is likely to view his role as protective rather than nurturing. Thus, he may have difficulty telling his children that he cares, have little

interest in sharing or soothing emotions, or may deliberately attempt to 'toughen up' his children (Mahalik & Morrison, 2006). He may be involved, but not engaged empathetically.

Similarly, a father with a high need for success, power and control is likely to prioritise work and career success over the needs of his family (Mahalik & Morrison, 2006). This has been supported in research that found for some men, work was the assumed priority around which other activities were coordinated (Duckworth & Buzzanell, 2009). Rather than view this as neglectful, a man may see this as the duty of a good father and provider. Requests from family that divert his attention from his responsibilities could even be viewed as attacks on his parenting (Mahalik & Morrison, 2006). It is reasonable to expect that a man who prioritises his career is likely to experience a conflict between work and other commitments at some stage, and will be less accessible to and responsible for his children.

A high need for success and control may also affect the way in which a father interacts with his children. For example, he may behave competitively with his children, emphasising victory over participation, and devaluing those who do not win (Mahalik & Morrison, 2006). He may also place pressure and high expectations on his children, and measure his success as a father by his children's success in life. Finally, a father uncomfortable with affection between men may struggle with showing affection towards his sons, and even dismiss or reject a son who is homosexual (Mahalik & Morrison, 2006). Again, this limits the engagement of the father, even if he is involved and responsible.

In summary, the research suggests that fathers with high levels of gender role conflict may be less accessible, engaged and responsible for their child's wellbeing. Attending parenting programs may be viewed as particularly unpalatable, as it is inconsistent with many of the qualities often correlated with traditional notions of

masculinity, such as self-reliance and independence. They may also be reluctant to facilitate their child's attendance in therapy, as they may perceive this as a reflection of failed parenting. Additionally, they may hold stigmatised views of therapy or mental health issues, or they may not be present or attentive enough to observe the need for a therapeutic intervention in the first instance. To date, there has not been a specific exploration of gender role conflict on fathers' stated intentions to access parenting programs or child therapy. Further research is necessary.

## **1.6 Attitude Towards and Understanding of the Fathering Role**

Other interpersonal factors may interact with gender role conflict and a father's involvement in parenting programs or willingness to access child therapy. It is well established in social psychology that attitude predicts behaviour, provided the attitude is decisive and held with confidence (Glasman & Albarracín, 2006). A large-scale study of thousands of fathers in the United States from diverse cultural and socio-economic backgrounds found that positive attitudes towards fatherhood predicted both intended and actual involvement with children (Perry, 2013). Other research has found that fathers with favourable attitudes towards fatherhood were significantly more involved across all three aspects of involvement—interactions, accessibility and responsibility. However, the perceived level of investment did not always mirror the actual parenting behaviour (McBride & Rane, 1997).

Similarly, qualitative research on fathers in focus groups found that the style of involvement by fathers was influenced by the importance and personal meaning they attached to the role (Olmstead et al., 2009). Fathers who reported that they felt competent in their own caregiving skills and viewed paternal care as important were also found to be more involved in the practical care of infants (Beitel & Parke, 1998). This suggests that a father's attitudes about his value as a parent, his competence, his pleasure in the role of parenting and the meaning he attaches to the role can predict his

involvement in the care of his children. It may be possible that a father will subscribe to traditional male and female roles, but have a positive attitude towards fatherhood. Consequently, he may be heavily invested in the wellbeing of his child and enthusiastic about involvement. Conversely, a man may feel uncomfortable and unsure as a father, and choose to be less involved due to his own sense of incompetence (Beitel & Parke, 1998; Kwok, 2013).

Therefore, it has been proposed that attitudes towards and understanding of the fathering role should be considered possible moderators between the relationship of gender role conflict and program participation. For example, a recent study examined the relationship between employment and father involvement, using fathering attitudes as a moderator (McGill, 2014). This research found that attitude was indeed a moderator. Even if a father worked long hours, a positive attitude towards his role allowed him to remain actively involved in child rearing, usually by reducing non-family leisure time. The author also found that fathers with a less traditional view of fatherhood, termed 'new fathers', were more likely to be actively engaged with and responsible for their children. Conversely, fathers who identified with more traditional parenting ideals identified the role of provider as more important (McGill, 2014). This lends cautious support to the hypothesis that gender role conflict may predict hands-on parenting involvement, but any interaction between gender role and attitude remains unexplored.

In a recent Australian study of the role of fathers at mealtimes, Mallan et al. (2014) constructed a measure, the Role of Fathers' Questionnaire (ROFQ), to assess how positive men were towards their roles as fathers. The ROFQ investigated how strongly men endorsed statements that queried the importance of fathers to be present, engaged and responsible for the practical care of their children. Questions related to emotional, physical and psychological needs. The authors reported that a more involved

and positive attitude towards fatherhood was positively related to how often fathers ate meals with their children. This relationship was present even when controlling for hours spent in paid employment (Mallan et al., 2014).

The ROFQ consisted of 14 items scored on a five-point Likert scale, three of which were reverse scored. Higher scores indicated a more involved and engaged attitude, with scores ranging from 14 to 70. Exploratory factor analysis of the ROFQ indicated a single-factor solution, which accounted for 30% of the variance. Internal reliability of the scale was found to be sufficient with a Cronbach's alpha of .75. It would be preferable to use a scale with more established credentials. However, of the research reviewed for this present study, this scale's items were the most appropriate to the research question, namely men's attitudes towards the value of a father's availability, engagement and responsibility for his child or children (Mallan et al., 2014).