

A Qualitative Study of Early Differences in Fathers' Expectations of Their Child Care Responsibilities

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Objective.—To examine and compare nonmarried and married fathers' expectations of their child care responsibilities soon after their child's birth.

Methods.—Individual semistructured qualitative interviews supplemented by quantitative surveys were conducted with 75 fathers recruited as a subset of the national Fragile Families and Child Wellbeing Study, which randomly sampled 4900 nonmarried and married couples at the time of their child's birth. Interviews were conducted early in infancy and were examined to explore fathers' expectations of child care involvement. Major themes and subthemes were identified using grounded theory analysis.

Results.—Regardless of marital status, fathers were overwhelmingly present at their child's birth and expected to be involved in

the infant's care. Responses to quantitative questions about involvement expectations were not significantly different between the groups. However, qualitative interviews revealed differences between nonmarried and married fathers with respect to their ideals of father involvement, child care activities, and barriers to child care.

Conclusions.—Even shortly after birth, fathers' parenting expectations appear to differ by marital status. As men become more involved in caring for their children, and as the number of nonmarried fathers continues to rise, characterizing and responding to these differences will become increasingly important.

KEY WORDS: child care; fathers; parenting; pediatrics; qualitative methods

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Fathers are influential family actors. Father involvement has been associated with increased breastfeeding; improved childhood social, cognitive, and emotional outcomes; less childhood depression and anxiety; and fewer childhood delinquent behaviors.^{1–9} Moreover, fathers' time with children has been generally increasing,^{10,11} with evidence of paternal engagement and responsibility increasing as well.^{12–18} The American Academy of Pediatrics (AAP) has encouraged pediatric clinicians to actively support and promote fathers' involvement in their children's care and development.¹⁹

American families, however, are changing. Married 2-parent families are slowly being replaced by families with 1 or 2 nonmarried parents.²⁰ Thirty-five percent of infants today are born to nonmarried parents, with higher proportions among poor and minority populations (46% for Latinos and 70% for African Americans).²¹ The increase in nonmarried families is largely due to an increase in nonmarried cohabiting 2-parent families.^{21,22} In 2003, the AAP noted these changes and advised pediatric clinicians to recognize the impact that family structure may have on child health and development.²³

Although clinicians are caring for children of nonmar-

ried couples in increasing numbers, the impact of fathers' marital status on children is not well understood.^{24–26} Although both nonmarried and married couples tend to have high initial expectations for paternal involvement,²⁷ nonmarried father involvement generally declines until only about a third are regularly involved with their school-age and teenage children.²⁸

Pediatric clinicians may be well positioned to increase the quality (and possibly even the duration) of father involvement in nonmarital families, but (1) what interventions are most helpful, (2) to whom such interventions should be directed, and (3) when such interventions should occur are unknown. We conducted a study that begins to erect a framework by which such questions might be answered.

We used Time Love and Cash in Couples With Children (TLC3), a qualitative study nested in a larger study of new parents and children called the Fragile Families and Child Wellbeing Study (FFCWB), to detect differences between nonmarried and married fathers' attitudes and behaviors with respect to involvement soon after their children's birth. We qualitatively examined interview transcripts supplemented by quantitative survey data to determine whether nonmarried and married fathers approached fathering differently from the outset.

METHODS

TLC3 was a qualitative study coordinated as a subsampling of the larger quantitative FFCWB. The FFCWB birth cohort study of 1998–2000 was representative of all nonmarital births in 20 cities with populations over 200,000, and included a representative companion sample of mar-

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ital births. Participants were recruited in the hospital at birth. In all, 4900 births were followed, with a two-thirds oversampling for nonmarital births.²⁹ One of the purposes of FFCWB was to better understand the conditions and capabilities of nonmarried parents. Over 90% of the nonmarried mothers, married mothers, and married fathers approached agreed to participate in FFCWB; 75% of nonmarried fathers participated. Almost all quantitative interviews (98%) were completed in the first week after birth.

In TLC3, 25 couples that were married, cohabiting, or romantically involved at the time of the birth and were enrolled in FFCWB were recruited in each of 3 cities (Chicago, Milwaukee, and New York) and interviewed within 4 months after delivery (75 couples, 47 nonmarried and 28 married). Eligibility for TLC3 was further based on the following: (1) mother's household income of less than \$60,000 a year; (2) geographic accessibility; (3) baby living with mother or father; and (4) both parents English-speaking. TLC3 was designed to qualitatively examine questions similar to those in FFCWB. All fathers interviewed were the biological fathers and gave informed consent. Interviewers held advanced degrees, were jointly trained over several days via video and audio reviews, received feedback on real interviews, and held weekly team meetings throughout data collection.

Analyses

Quantitative Survey Analysis

We analyzed responses to the FFCWB initial baseline survey by the TLC3 fathers to assess whether nonmarried and married fathers' initial attitudes (ie, chances of marriage in the future, expected involvement in raising the child, and importance of providing direct care to the baby) and behaviors (ie, present at the birth, baby having the father's last name, and father's name on the birth certificate) differed with respect to anticipated involvement with their child. We conducted χ^2 analyses to compare nominal variables between the nonmarried and married fathers and, when appropriate, *t* tests for means of continuous variables and Fisher's exact test for analyses with small cell sizes. If demographic variables were significantly different between the nonmarried and married fathers, we used multivariate logistic regression to examine whether the variables predicted specific attitudes and behaviors.

Qualitative Interview Analysis

The semistructured individual interviews covered the following domains: (1) marriage, cohabiting, and transitions in family structure, (2) psychosocial functioning in the couple and parenting, (3) investments of time and money, and (4) gender-related norms and behavior. Interviews were taped and then transcribed; transcripts ran 100–150 pages.

Grounded theory, a qualitative methodology that aims to discover and articulate how groups of people define their realities in social contexts, was used throughout the study.³⁰ This constant comparison method employs a recursive process of comparing data on 4 levels: (1) comparing data from different individuals, (2) comparing data

from individuals to different points in their own narrative, (3) comparing narratives with other narratives, and (4) comparing codes and themes with other codes and themes.^{30,31} A TLC3 working group, whose members included several sociologists, psychologists, and a pediatrician (CFG), met regularly to discuss codes and themes and engage in the triangulation process.³² Codes were either preordained (based on the interview protocol) or emergent (coming from iterative interview reading, team discussions, and triangulation). For example, the preordained code "Ideal Father" was based on the interview question, "What makes for a good father?" and the emergent code "Barriers to Involvement" was created as transcripts were analyzed. Coding and analysis were completed by Microsoft Access. Representative quotations are presented below; mention of father's marital status is made when necessary for clarity. Northwestern University's institutional review board approved this study.

RESULTS

Of the 75 TLC3 fathers, 47 were nonmarried and 28 were married. The nonmarried and married samples were similar in regards to income, employment, and sex of the newborn, but differed statistically by age, race/ethnicity, and education. Mean age was 26 years for nonmarried and 30 years for married fathers. Nonmarried fathers were 43% black, 49% Hispanic, and 6% white; married fathers were 43% black, 29% Hispanic, and 29% white. A total of 30% of nonmarried fathers attended at least some college, compared with 47% of married fathers. Sample characteristics are reported in [Table 1](#).

Quantitative Survey Results

Quantitative survey results show similar positive attitudes and behaviors among nonmarried and married fathers toward their new family ([Table 1](#)). Eighty-three percent of nonmarried fathers and 93% of married fathers attended the birth of their child, and the majority of fathers expected both their name to be on the birth certificate and their baby to have their last name. Nonmarried fathers' hopes for this relationship were high; 83% thought the chances of marrying the birth mother in the future were "good" or "certain." All nonmarried fathers expected to be involved in raising the child in upcoming years, and almost all (96%) said it was very important for them to provide direct care to the baby. In multivariate logistic regressions, Hispanic fathers were more likely than others to expect their names to be on the birth certificate, expect their baby to have their last name, and mention direct care as being important. Age and education were never independent predictors.

Our quantitative results suggested high initial expectations of involvement among both nonmarried and married fathers. We next qualitatively examined ideals of father involvement, attitudes toward and actual child care responsibilities, and difficulties encountered by these new fathers to determine whether, despite superficial similarities, important differences existed early on between nonmarried and married fathers.

Table. Nonmarried and Married Father Sample Demographics, Attitudes, and Behaviors Early After Child's Birth

Characteristic	Nonmarried Fathers, (n = 47) n (%)	Married Fathers, (n = 28) n (%)	P Value
Demographics			
Age (mean) y*	26	30	<.01
Race/ethnicity†*			.03
White, non-Hispanic	3 (6)	8 (29)	
Black, non-Hispanic	20 (43)	12 (43)	
Hispanic (nonblack, nonwhite)	23 (49)	8 (29)	
Other, non-Hispanic	1 (2)	0 (0)	
Education*†			<.01
Some high school or less	21 (45)	1 (4)	
High school graduate or equivalent	12 (26)	14 (50)	
Some college	13 (28)	10 (36)	
College degree or higher	1 (2)	3 (11)	
Income ≤\$25,000	30 (64)	13 (46)	.14
Newborn female sex	20 (43)	12 (43)	.96
Employed	37 (79)	25 (89)	.24
Father living with baby	32 (68)	NA	NA
Attitudes and behaviors (from survey)			
Present at child's birth	39 (83)	26 (93)	.22
Baby with father's last name	44 (96)	28 (100)	.26
Father's name to appear on birth certificate	44 (96)	27 (100)	.27
Fathers who think chance of marrying birth mother in future is "good" or "certain"	39 (83)	NA	NA
Expecting to be involved in raising the child in upcoming years	47 (100)	NA	NA
Believe it is "very important" to provide direct care to baby	45 (96)	24 (86)	.12

†Total percentages may add to slightly more than 100 as a result of rounding. NA indicates not asked.

*Statistically significant difference between nonmarried and married populations at $P < .05$.

Qualitative Interview Results

Ideals of Father Involvement

Most nonmarried and married fathers acknowledged that mothers and fathers played complementary roles and approached child care responsibilities differently. For example, "Mothers bond differently from fathers. I have a role with my children, different from what their mother has." As one father described, a mother's clothes or smell worked like a "magnet" to attract the baby, but fathers had to "work a bit harder, to show [the baby] that you are there," that "I'm the father."

Two major themes arose from nonmarried fathers' interviews with respect to ideals. First, nearly all nonmarried fathers stressed their importance in a baby's life: "Growing up in life [fathers] explain things to [children], what's going on in life so that they can make the right decisions. A father needs to be there [to explain] all the good and bad things." Second, about half of nonmarried fathers felt marriage was not essential. These fathers were unconcerned with their marital status, accepting where they were in their relationship and anticipating the possibility that they might not always be around. As one father said, "I feel like I am getting the best years now as he's coming up as a baby and then when he start getting older he'll realize I was there in the beginning, so if anything was to happen—I leave away from him or something like that—he

know I was there." Another father remarked, "You have to spend time with them, you have to play with them, you have to talk to them . . . [and they] remember you later on."

In contrast, about half of married fathers focused on the importance of modeling behavior toward mothers and work-family balance. As one father stated, "Just showing a lot of love to his mother in front of him, that kind of thing . . . show him how important a female is." Another married father echoed this sentiment: "You've got to teach your kids right from wrong, you know. What's good to do and what's not to do, just like if your son sees you beating on your wife—his mother—he's going to think that's the thing to beat on women. When he gets his woman he's going to be beating on her, you know." Similarly, despite the fact that there were no significant differences in employment status, married fathers far more frequently discussed issues of balancing employment and home responsibilities in a way that relieved mothers of child care duties. For some married couples, a natural balance arose where the late-working father cared for the baby at night, allowing the mother some time to rest: "I come home about 12 AM and I eat my dinner, so I'm going to be up until 2 or 3 AM anyway. So it pays off for me to be up and not her to stay up." For other couples, weekends allowed for more balance. As one father stated, "I work two

full-time jobs so through the week she knows I can't do too much and on weekends I do, it's like a routine now, I wash dishes, clean the kitchen, change the sheets on the bed, wash the towels, clean the baby bottles. And she [the mother] gets to do what she needs to do." Examples of such attempts at balancing were rare in the nonmarried interviews.

Paternal Child Care Responsibilities

Expectations regarding involvement with infant care were similar among nonmarried and married fathers. Nearly all fathers in each group acknowledged that spending time with their infants was an important child care responsibility. Most fathers identified expansive responsibilities, "playing with him, feeding him, changing him, bathing him" as well as "tickling her and talking to her." As one father said, "Get off work, play with him before he goes to bed. If he wakes up early when you're getting ready for work, play with him, so he knows who his daddy is."

About half of the fathers in both groups differentiated their child care duties from those of the mother. One father said, "Mom gives him the TLC, you know, when he cries, she doesn't mind holding him, stuff like that. And I'm more of the play person. I'm more of the rough-houser . . . that's what dad's for." Finally, about half of nonmarried and married fathers saw discipline, even early in infancy, as one of their major responsibilities: "Fathers enforce rules. I feel that fathers are the hard guys in the relationship. It's just what they *do*, I think."

Barriers to Child Care Responsibilities

We next investigated what barriers affect their levels of involvement. For nonmarried fathers, involvement was influenced most commonly by both the child's sex and their partners' expectations and negative feelings. In contrast, married fathers most often mentioned employment as the primary factor limiting involvement. Neither group mentioned lack of either income or ability to provide as a barrier.

Some nonmarried fathers were uncomfortable caring for baby girls, including performing such common child care activities as bathing and diaper changing. One father commented that he did most of the feeding but left the bathing and dressing of his daughter to her mother: "I don't bathe her . . . the mothers should bathe little girls." Another father echoed these sentiments: "I change my son's diapers, I clean his ass, but I will not clean my daughter's ass . . . I will never change her clothes, I will never go in the bathroom, I won't take a shower with her neither."

Not living up to the mothers' expectations was another theme that arose among some nonmarried fathers. Some felt mother "does a better job." One father described a typical mealtime: "When she feeds him the jar stuff, he opens his mouth and eats the stuff. Then when I try and feed him, different story. He plays around with the stuff . . . like, 'Oh, I'm with daddy, it's play time!' And then he gets it all over himself and then [his mother] is like, 'What the hell are you doing?'" Other nonmarried fathers were

concerned about whether mothers would try to undermine them when they were not around. As one father commented, "Sometimes women do try and turn kids against their fathers. Sometimes she might meet a man and he try and talk negative, when you're not there with your kids."

Among married fathers, the primary barrier mentioned was employment. As one father described, "I work from 6 in the morning until 10 at night, so when I come home [the baby] is asleep and that's basically how it is during the week." To compensate, some fathers increased their involvement on weekends with typical activities like "go for a walk or . . . I just sit down and hold him or walk around the house and hold him, watch him smile." However, lack of day-to-day contact did create feelings of insecurity for some fathers when they returned home from work and interacted with the infants: "When I get home I try to take off some of the stress on her [mother] . . . but she knows the [baby] better than I do. Five minutes by myself and I'm like, 'Oh!' I try to find a way but it is different. 'Mommy does it like this'—that's what's going through their minds. It's a little bit harder."

DISCUSSION

We have described, by means of qualitative narratives, substantial differences in the expectations, attitudes, and behaviors of nonmarried and married fathers with respect to their child care responsibilities soon after their child's birth.

These differences are not immediately evident in the quantitative survey results. Quantitatively, nonmarried fathers differed little from their married counterparts. With the caveat that our sample was fairly small, we found no statistically significant differences between the 2 groups on any of the attitude or behavior questions. As has been previously reported, a large majority of these nonmarried and married fathers were present at the infant's birth^{33,34}; such presence has been associated with greater attendance at future well-child visits.³⁵ Both samples of fathers initially expected to be involved with the child and to maintain that involvement in the future. Further, nonmarried fathers generally expected to marry the birth mother, suggesting that they saw their relationship as serious and long-term.

The story becomes more complex when we examine the qualitative interviews. Despite their responses in the quantitative survey, nonmarried fathers seemed acutely aware that they might not always be present in their child's life, and they acted accordingly. In the interviews, they discussed the importance of maximizing early child involvement in order to "let them know who I am," acknowledging the distinct possibility that they would not be there later. In contrast, married fathers' emphases on both modeling respect for mothers and prioritizing child-rearing duties above other non-job-related activities suggest a different, more secure commitment to family. Married fathers generally claimed to take more of a team approach to child rearing, with an early focus on balancing home and work responsibilities in the context of family

needs, including reconciling parenting schedules and establishing a division of labor.

These differences between nonmarried and married fathers suggest that pediatric clinicians working with this population might consider marital status as one marker of a family's parenting needs. There is ample literature to suggest that parental relationship quality affects paternal involvement and child outcomes.^{36–38} However, it is difficult to quickly assess relationship quality in a clinical setting. One of the potential benefits of this study is that for clinicians, marital status might prove to be a clinically useful initial screen for relationship quality. Many of the differences that we observed between nonmarried and married fathers appear to have their roots in relationship quality. For instance, nonmarried fathers base some of their behavior on the assumption that they may not be there in the future, and much of their access to the child depends on the mother and her relationship with the father.

Our finding that some nonmarried fathers were uncomfortable caring for female infants is another example of the potential clinical implications of this work. Recent research has shown that encouraging nonmarried fathers to fully engage in parenting activities has been associated with stronger ties between nonresident fathers and their children.³⁹ Fathers' lack of comfort with some aspects of caring for girls (eg, bathing, diapering) might be partly responsible for the relative lack of father involvement with girls compared with boys.^{40–44} In the nursery and in the office, clinicians are well positioned to address gender-appropriate care (including the sensitive tasks of bathing and diapering) with nonmarried fathers.¹⁹

Pediatric clinicians are also well placed to discuss discipline, and our findings suggest that these discussions—with nonmarried and married fathers—might need to be conducted surprisingly early (ie, within the first few months after birth). In our study, both nonmarried and married fathers saw discipline (eg, enforcing rules, not spoiling the baby) as one of their major responsibilities, even while their infants were extremely young. Men have been found to be more responsible for cases of child maltreatment, and unrealistic expectations of a child's behavior may increase risk for abuse.^{45–47} Discussions of discipline at clinical visits typically occur in late infancy or beyond, and generally only with mothers, who tend to accompany their children alone. If discipline is viewed as a father's territory, however, these discussions should occur sooner, and with fathers present. Increasing levels of fathers' attendance at pediatric visits remains a concern and focus for future research.^{18,19}

This study has several limitations. First, demographic differences in our sample may have confounded our qualitative results. For instance, nonmarried fathers' reluctance regarding their daughters' care might have been partly attributable to their somewhat younger age, more limited education, or different racial/ethnic composition. Better matching of the sample would aid future research in this area. Second, our sample was small, had slightly different participation rates between nonmarried and married fathers, and was restricted to lower-income, urban fathers

who were still involved with the mothers. Therefore, we hesitate to draw strong conclusions from the quantitative data of 75 subjects or to overanalyze subcategories with small numbers (eg, noncohabiting, nonmarried fathers). From a qualitative perspective, however, this study is actually one of the more representative of its kind. Our findings clearly suggest important avenues for further research that may have strong clinical implications.

Because the nonmarried fathers were still involved with the mother, we had hypothesized that we would see relatively few early differences in parenting expectations between nonmarried and married fathers. That we found differences so close to birth suggests that marriage retains potent meaning with respect to fathers, either as a marker or a driver of paternal commitment.

If this is indeed true, nonmarried and married couples may have different parenting needs. We hypothesize that at well-child visits, for instance, married couples might benefit most from counseling on optimal scheduling, sharing the responsibilities of child rearing, and balancing work and family commitments. In contrast, nonmarried couples might benefit more from counseling that teaches fathers routine child care skills and discusses how to integrate fathers into child care in ways that are compatible with the parents' relationship. Tailoring advice to include caring for baby girls might be particularly useful for nonmarried fathers in facilitating cooperative coparenting. These are the types of hypotheses that should be examined in future studies—studies that might ultimately improve our understanding of how to optimize the healthy integration of fathers, married and nonmarried, into family life.

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