## How do fathers affect the health and social and emotional wellbeing of Aboriginal and Torres Strait Islander children in Footprints in Time?

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### Introduction: Indigenous fathers’ research

While there is plenty of research available on how fathers in general make important contributions to children’s outcomes, there is little specifically about fathers of Indigenous children and how they affect children’s outcomes. This article will examine the impact of father involvement, fathers’ characteristics and partner relationship quality on the social and emotional wellbeing of *Footprints in Time* children.

Sarkadi et al. (2008) conducted a systematic review of longitudinal research showing effects of father involvement, finding that father engagement decreased children’s behaviour problems and improved social and relational functioning. Fletcher et al. (2011) found father’s depression in a child’s first year of life related to poorer social and emotional wellbeing when the children were starting school. Kahn and colleagues (2004, cited in AIHW 2012) have shown that high quality parenting and good marital relationships can mediate the effects of poor mother mental health.

It might be argued that fathering and outcomes for children are relatively similar across cultures and social groups and there is no need to consider Indigenous children’s outcomes separately. However, demographic differences with the general Australian population, such as the much younger age of Indigenous parents, higher rates of sole parenting, lower rates of employment and higher rates of living in remote areas (Biddle 2009) suggest fathers’ influences on Indigenous children’s outcomes should be considered separately.

D’Esposito et al. (2011) argue that research into the social and emotional wellbeing of Indigenous fathers and men caring for (Indigenous) children is ‘virtually non-existent’. The relationship between fathering and Indigenous children’s outcomes is also under-researched. Baxter and Smart (2010) use data from the Longitudinal Study of Australian Children (LSAC), to explore how fathers in couple families contribute to family life, including child wellbeing. Despite the very small sample of Indigenous fathers in LSAC; ranging across three waves from 0.8 per cent (equating to 23 fathers),  to 1.6 per cent (or 58 fathers) (Baxter & Smart 2010, p. 167), some significant differences were reported in the analyses: Indigenous fathers were (sometimes) more involved in activities, were more inclined to be overprotective and had lower self-efficacy than non-Indigenous fathers. The authors acknowledge in the closing remarks that the sample may be too small for statistical significance.

For all Australian children Baxter and Smart (2010) found better social and emotional child outcomes were associated with: older fathers, more highly educated fathers, fathers who had happier relationships with their partners and greater parenting support, and fathers with better mental health. Lower social and emotional wellbeing in children was associated with having an Indigenous father, or a father speaking a language other than English, poorer child health and being a boy rather than a girl. The report sheds some light on Indigenous fathering, but only in comparison with the Australian population as a whole and with such small numbers that relationships may not be replicated elsewhere.

**What about differences within the Indigenous child population?**

Armstrong and colleagues (2012) showed that Indigenous children involved in a greater number of activities—such as being read to, hearing stories and drawing with family members (including fathers)—had greater levels of prosocial behaviour than the children who did not experience as many activities.

The Western Australian Aboriginal Child Health Survey (WAACHS, Zubrick et al. 2005) found stressful events predicted emotional and behavioural problems for Aboriginal children, as did a child’s poor physical health and their carer’s ill health or use of mental health services. The WAACHS did not provide separate results for fathers and mothers; however, children who received poor quality parenting and lived in poor functioning families with poor communication, poor emotional support, little time together and poor cooperation were more likely to have emotional and behaviour problems (Zubrick et al. 2005).

Smyth et al. (2012) note that Indigenous cultural practices vary widely across Australia and that Indigenous fathers face compounding layers of social disadvantage but do not discuss research specific to Indigenous fathers and child outcomes. So although it is possible to find information about fathers’ effects on child outcomes and about the sorts of things that affect Indigenous children’s social and emotional wellbeing, there is little information available about how fathers affect Indigenous children’s social and emotional wellbeing.

It is hypothesised that social and emotional wellbeing for young Aboriginal and Torres Strait Islander children will be affected by fathers’ involvement in activities, the nature of the parenting relationship and fathers’ educational levels. It is expected that the relationships will still be evident while controlling for factors usually associated with social and emotional wellbeing, such as age, stressful events, living in a more advantaged area and being a girl (Wake et al. 2008), and the child’s own physical health (Zubrick et al. 2005).

### Methods

The data used in this article is from the *Footprints in Time* primary carer interview Wave 3 data, as Wave 3 includes questions about partners’ education and employment and about partner relationships. The primary carer interview is usually conducted with the mother of the study child and in Wave 3 only 36 fathers were interviewed as primary carers. Quantitative analysis of father responses alone is not desirable with such a small sample. Of the 1,276 responding mothers of the study child in Wave 3, 994 had a child older than 35 months, permitting analysis of their strengths and difficulties scores (Goodman 2012). These figures include three step and two foster mothers. Just over half (58 per cent) had a partner in the household. Primary carers who were grandmothers, aunties, cousins or of other relationship types (n = 84) were excluded as their partners were not likely to be fathers of the study child. It is not certain that the partner of the mother is the study child’s biological father, as relationship to study child was not collected in wave 3, but it is the closest approximation that can be used. It seems likely that males living in the study child’s household as a partner of the mother will at least be a father figure, if not a biological father. Of the partners, 76 per cent were Indigenous and 24 per cent were not.

**Outcome measure: child social and emotional wellbeing**

The final sample for this analysis includes 994 children with social and emotional difficulties scores (SDQ)[[1]](#footnote-1) ranging from 0 to 31, with a mean of 12.2 and a standard deviation of 5.8. The maximum score possible is 40. Continuous SDQ scores were used for the multivariate model with SDQ difficulties scores as the dependent variable.

Ordinary least squares (OLS) regression showed no statistical difference between SDQ difficulties scores for children whose mothers had a partner in the household and those who were living with a lone mother, nor between SDQ scores and the Indigenous status of fathers.

**Partner relationship and father’s characteristics**

A ‘good partner relationship’ score was created using 5 questions with answer options ‘never, rarely, sometimes, often and always’. ‘Showing signs that you care’ and ‘feeling supported as a parent’ were added to reverse coded scores for ‘disagreeing about bringing up the study child’, ‘arguing’ and ‘having arguments that lead to pushing and shoving’. There were 543 scores ranging from 8 to 25, with a mean of 20.6 and a standard deviation of 2.8. For the final statistical models, partner relationship scores were dichotomised at the mean, with scores above 20 equal to 1 and indicating a good, supportive partner and parenting relationship.

Additional father characteristics, sourced from mothers, include:

* education of father in household  (≤Year 11/>Year 11 = 52% of male partners)
* father in household working (no/yes = 73%)
* whether mothers sought advice about parenting from partners (no/yes = 20%)
* activities with father (whether mothers responded that children’s fathers read to them, told them a story, drew pictures with them and/or listened to the study child read) (no/yes = 47%).

**Other explanatory variables**

Study child’s characteristics included:

* age in months (range: 36 to 92 months)
* sex (male coded as 0/female coded as 1 = 50%)
* global health (very good, good, fair, poor coded as 0/excellent coded as 1 = 41%)
* had sleep problems (no/yes = 22%)

Mother’s characteristics included:

* mother’s social and emotional wellbeing: sum of 6 questions, dichotomised at mean (low/high social and emotional wellbeing = 64%)
* experience of four or more major life events in the past 12 months (no/yes = 55%).

At the community level a continuous measure of Indigenous socioeconomic outcomes in deciles (Index of Relative Indigenous Socioeconomic Outcomes—IRISEO) based on 2006 Census area data is used. Increasing scores indicate communities with increased Indigenous employment and income, higher education levels and better housing (Biddle 2009). As IRISEO is moderately to strongly correlated with remoteness in *Footprints in Time* and speaking a language other than English at home (see also Biddle 2009 for the latter) only IRISEO was included in the final models rather than including remoteness separately in the model.

### Results

In Wave 3, social and emotional difficulties scores were available for 994 children; however, only 580 mothers had a partner in the household. The final multivariate model has 450 observations and an adjusted R squared of 0.20, thus explaining 20 per cent of the variation in these children’s difficulties scores.

**Figure 14: Fathers’ contributions to reducing SDQ difficulties scores**

This figure shows the direction and magnitude of changes in children's difficulties scores with the presence of selected characteristics. The tabular version of this figure is available below. 

\*p<0.1; \*\*p<0.05; \*\*\*p<0.01.

**Tabular version of figure 14**

| **Factor affecting SDQ scores** | **Coefficient** |
| --- | --- |
| Positive partner relationship | -1.28\* |
| Mother seeks partner’s parenting advice | -0.74 |
| Partner educated Year 12 for further | -1.04\* |
| Mother’s partner works | -0.78 |
| Father does activities with study child | -0.67 |
| Mother has strong social and emotional wellbeing | -2.96\*\* |
| More than four major life events | 0.80 |
| Study child age in months | -0.04\*\* |
| Study child is a girl | -1.16\* |
| Study child has excellent health | 1.70\*\*\* |
| Study child has sleeping problems | -1.78\*\* |
| Indigenous socio-economic decile – top 2/3 | -1.51\*\* |

Figure 14 shows, as hypothesised, that social and emotional difficulties scores decreased significantly where there was a good, supportive relationship between mothers and their partners. Scores were also significantly lower for those children whose fathers had Year 12 or post-school education. Fathers’ employment and fathers’ involvement in specified activities did not significantly affect child social and emotional outcomes in the multivariate model.

As expected, social and emotional difficulties scores were significantly lower for children who were older, were girls, had excellent global health scores, were living in a more advantaged area and whose mothers had good social and emotional wellbeing. Difficulties scores increased significantly when children had sleeping problems but families’ experience of major life events was no longer significant in the multivariate model.

### Discussion

It is evident that the *Footprints in Time* children’s social, emotional and behavioural wellbeing is affected by their fathers or father figures, when partners are present in the household. The analyses showed significant variation for *Footprints in Time* children, showing small but clear reductions in social and emotional difficulties scores with positive mother–partner relationships and when fathers had higher levels of education (Year 12 or greater).

It is important to note a number of limitations about this research. *Footprints in Time* is not a representative sample and results should not be generalised to all Indigenous children. Although the term ‘fathers’ has been used in this article, the majority of the analysis relates to mothers’ partners living in the household rather than fathers specifically. Some children may have a father who lives elsewhere as well as their mother’s current partner and both fathers may affect outcomes. Mothers in this analysis were also responding on behalf of fathers about education levels, partner employment and activities the children did with fathers. Mothers may underestimate father involvement in activities such as reading to the child if, for example, the reading had happened while a mother was at work.

It would useful to control for fathers’ social and emotional wellbeing and their parenting style, as in addition to mental illness, parenting style has been shown to be associated with child wellbeing (Baxter & Smart 2010; Fletcher et al. 2011; Zubrick et al. 2005). Fathers’ social and emotional wellbeing and parenting approaches have been collected in *Footprints in Time* father interviews but the low response rates preclude much analysis (in Wave 1 approximately 1,630 primary carer interviews were conducted with females, plus 41 with male primary carers, but only 180 Parent 2 interviews with fathers are available). It would be interesting to see if the positive effects of father interaction—such as increased activities—help ameliorate the effects of paternal depression.

Indigenous fathers are more likely to suffer from mental health problems than the general population (ABS 2010) and these problems are known to affect children’s social and emotional wellbeing. Mental health problems can also affect Indigenous people’s health and wellbeing in different ways to the non-Indigenous population; for example, a strong link has been found between depression and anger for young Indigenous people (Thomas et al. 2010). It should not be assumed that Indigenous children’s social and emotional wellbeing is affected by their fathers in the same way as non-Indigenous children.

It is interesting that the children of sole mothers did not have significantly different SDQ difficulties scores than the children of partnered mothers. The variation within the groups is perhaps the key to understanding variation in Indigenous children’s social and emotional wellbeing, rather than comparing the two. Partners are not the only providers of social and emotional support and perhaps further work could explore differences in child outcomes according to the kinds of support mothers receive.

There is a great deal of scope for further research relating to fathers or father figures of Indigenous children. In addition to the variables explored in this analysis there are issues that are particular to Indigenous fathers—such as passing on Indigenous culture and teaching children how to deal with racism—that are worth exploring. As mothers’ sense of identity has been shown to affect Indigenous children’s social and emotional wellbeing (Armstrong et al. 2012), fathers’ sense of identity is likely to be important too.

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1. Refer to Appendix B for information about this scale. [↑](#footnote-ref-1)