

FATHER INVOLVEMENT TOOLKIT

Inclusion Plan

June 2019

Overview

The Florida Association of Healthy Start Coalitions, through its MIECHV Initiative, is committed to improve access to services for fathers/men in its home visiting efforts/programs. One of the first and initial steps in doing so requires assessing current efforts and operations at all levels. These efforts will be explored through both Inclusion and Engagement Plans.

This first plan will evaluate including him in the program and services. In order to be effective in reaching fathers through the home visiting model, they will need to be included and considered from the onset (or as early as possible) at every level of service delivery. The plan will include five stages to improve access and services while establishing the foundation for increasing inclusion and engagement.



INSIDE THIS PLAN:

- Phase 1 – Identification
- Phase 2 – Development
- Phase 3 – Implementation
- Phase 4 – Observation
- Phase 5 – Evaluation



Phase 1 – Identification

The first phase of the Inclusion Plan is to identify the tenor of including fathers in current home visitation programs. It is essential to acknowledge the attitude(s) toward including “him” in home visiting services. Therefore, the following 7 questions were asked using a Likert Scale 1= does not influence at all and 4= has great influence:

- Father’s influence on their children
- Father has influence on their child’s values
- Father has influence on their child’s behavior
- Father has influence on their child’s psychological health
- Father has influence on their child’s self-esteem
- Father has influence on their child’s educational ability
- Father has influence on their child’s social skills

Approximately 79 percent of the respondents said “have great influence.” Approximately 17 percent said “has good influence” and 4 percent recorded “has some influence.” No respondents answered “does not influence at all.” Questions 9 through 16 were qualitative in nature and required responses to be written. These questions included:

- Who comes to mind when you think of father?
- Who is a male hero to you?
- How often do you interact with men? What is the most positive word you have heard from your father?



- How much do you know about the importance of fathers to children’s well-being?
- What outcomes for children do fathers negatively affect when they’re absent?
- What outcomes for children do fathers positively affect when they’re present?
- Do I respect or lack respect for the father in my life? Do I respect him as a man and father?

These responses, though qualitative in nature, provided insight on attitudes toward men and fathers. The overall responses were very positive, but some had negative undertone. Most respondents agreed a father being absent impacted the child’s health and behavior. Several respondents stated they have no interaction with men outside of work, which is a concern, and some respondents said they have lack of respect for their fathers. The outcome of this survey was used to:

- a. Develop Inclusion and Engagement Plans
- b. Understand staff and leadership attitudes of fathers/men
- c. Create customized on-site training to funded sites to address gaps and barriers in serving fathers/men



Phase 2 – Development



The second phase is born out of the identification stage. This stage takes the lessons learned from both the survey and the initial trainings to create strategies to improve services/programs for fathers and men. The strategies address barriers, biases, and gaps in home visiting services. The common themes will serve as the starting point in creating common sense practices and tools that can be implemented in the day to day operations. The strategies will be offered at the individual, organization (operational), and system (Policy) levels. The strategies developed encourage input in order to increase acceptance and malleable adaptation.

The strategies will focus on the following areas:

- Educating on why to include him
- Creating a culture of inclusion
- Adapting practices that now include him
- Useful tools and techniques for including him



Phase 3 – Implementation



The third phase of the Inclusion Plan is the implementation of strategies that were developed to include fathers and men. This is a critical stage that requires commitment to improving services for the entire family.

The implementation phase addresses the following:

- What are the changes to be implemented?
- What is the expected impact/outcome of the changes?
- Who is responsible for implementing the changes?
- How will the changes be implemented?
- When and how long will the changes take place?
- How will adjustments be made and communicated regarding the changes?

In addition to addressing and answering these questions, this stage includes techniques and tools for helping to make the changes more smoothly with as limited interruptions as possible.



Phase 4 – Observation

The Observation phase allows for an objective and independent review of the Implementation stage. This phase evaluates the implementation of the strategies and how the staff and programs will deliver those strategies.

An assessment or monitoring tool will be developed for capturing feedback using the following framework:



Demographic

- What change is being observed?
- When is the change being observed?
- How long is the observation of the change?
- Who is observing the change?

Content Feedback

- Strengths
- Challenges/Areas of improvement
- Coaching/Feedback
- Recommendations
- Suggestions for overall improvement

After the observation is completed, the program team should reconvene and discuss the results. Feedback related to gaps and barriers in service should be forwarded to the leadership to encourage needed process and policy changes. Further consultation can include additional training both on and off site, working with a facilitator/consultant to help in making program changes, review and/or revise program budgets, and a look at other operational changes.



Phase 5 - Evaluation

The final phase is the Evaluation. This phase evaluates the effectiveness of the initial survey, pre and post-tests administered during the on-site trainings, the content and delivery of the initial on-site trainings. Additional evaluation will be built into the Evaluation Plan and program changes and strategies for continuous improvement.



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