Biological Father-Child Relations: Paternal Deprivation

Description/Etiology

In recognition that a father’s influence plays an important role in a child’s development, increasing attention has been drawn to the need for a father in a child’s life. Researchers have found that a father’s absence from a child’s life is associated with negative social, emotional, and cognitive outcomes from infancy to adolescence. The research described in this quick lesson examines only the effects of paternal deprivation in children born to heterosexual parents and did not consider intentional single-parent families and lesbian couples. It also did not examine the effects of positive male role models other than fathers.

Fathers contribute to their children’s healthy development in ways that are distinct from mothers. Fathers tend to stress play, competition, teamwork, challenge, initiative, risk taking, and independence. Fathers’ involvement has been linked in children to greater self-control, improved problem-solving ability, and higher academic achievement. Fathers’ disengagement from the family poses serious risks to children’s development and overall well-being. Children deprived of a father are at greater risk of mental illness, drug and alcohol abuse, poor educational performance, adolescent pregnancy, criminality, poverty, and homelessness. They are more likely to commit suicide than those who grow up in a home with both parents. Studies suggest that the consequences for children in the United States of growing up without a father parallel those encountered in other countries. Increasingly, paternal deprivation is becoming an international problem, as upward trends in family breakdown continue.

The nature of children’s relationships with their fathers and the reasons for paternal deprivation vary considerably. Some children start their lives in a two-parent home and subsequently experience disruption in their relationship with their fathers when parents separate or divorce. In these situations, how well the pre-existing father-child relationship is able to be maintained is influenced by how the parents manage their separation. In some instances mothers may behave as “gatekeepers,” limiting fathers’ roles or their access to children. Other children may experience temporary separation from their fathers as a result of military deployment, migration, or incarceration. Children born to unmarried parents, particularly when there was not an enduring relationship between the parents, may not know or may have no relationship with their fathers, who may never have established legal paternity or custodial rights. Teen fathers are especially likely to have difficulty maintaining relationships with their children, even when they are interested in doing so. In instances of child maltreatment or intimate partner violence, the benefits of the father’s involvement may be outweighed by harmful effects of his violent behaviors. In some instances, prolonged separation between father and child may be necessary in order to protect the child from further harm.

Facts and Figures

› The U.S. Census Bureau estimates that in 2014 approximately 24% of children under age 18 lived with only their mother, 4% lived with only their father, and 4% lived with neither parent (United States Census Bureau, 2014)
› Central and South America have the highest rates of childbearing outside of marriage, followed by Northern and Western Europe. From 1998 to 2012, 84% of births in Colombia, over 50% in France and Sweden, and 41% in the United States were to unmarried women (Lippman & Wilcox, 2014)
The United States, United Kingdom, New Zealand, Canada, Central and South America, and sub-Saharan Africa have the highest rates of children living in single-parent households, whereas Asia, the Middle East, and Eastern Europe have the lowest rates (Lippman & Wilcox, 2014). In the majority of single-parent households the mother is the sole parent.

**Risk Factors**

Fathers who lack the education, job skills, or employment opportunities to support their children are less likely to be involved with them. Criminal activity, incarceration, substance abuse, mental health issues, having an uncommitted relationship with the child’s mother, involvement with a new romantic partner, or having a child with a difficult temperament or medical problems also are associated with less paternal involvement. A high number of risk factors during a child’s first year predicts a trajectory of poor child-father bonding and subsequent lack of involvement.

**Signs and Symptoms/Clinical Presentation of Child**

- Psychological: behavioral disorders, emotional distress, depression, suicide, identity confusion, loneliness
- Behavioral: delinquency, poor school performance, drug and alcohol abuse, poor impulse control, suicide attempts, delinquency
- Sexual: greater and earlier sexual activity, adolescent pregnancy
- Physical: aggression, self-mutilation
- Social: relationship problems, attachment issues, poor social adjustment

**Social Work Assessment**

- **Client History**
  - Conduct a biopsychosocial/spiritual assessment to include information on physical, mental, environmental, social, financial, and medical factors as they relate to the child’s treatment
  - Ask about the father’s involvement or absence, including incarceration and military service/deployment, and its impact on other life areas (e.g., school, peers, home life)
  - Ask about child and family history, level of functioning, history of substance abuse, history of physical/sexual/emotional abuse, exposure to violence, suicidal ideation/Attempts, and history of self-mutilation
  - Assess and understand the child’s developmental abilities, general personality, culture, religion, and support system
  - If family members are present, obtain as much information from them as possible regarding the child’s behavior and affect

- **Relevant Diagnostic Assessments and Screening Tools**
  - Tools for screening or assessing mental health and/or social-emotional functioning may be administered (e.g., Functional Behavioral and Emotional Screening System [BESS; ages 3–18 years], Ages and Stages Questionnaire–Social Emotional [ASQ-SE], Behavior Assessment System for Children–2nd edition [BASC-2], Child and Adolescent Needs and Strengths Assessment–Mental Health [CANS-MH])

- **Laboratory and Diagnostic Tests of Interest to the Social Worker**
  - No laboratory tests of interest are involved in the diagnosis and treatment of children deprived of their father

**Social Work Treatment Summary**

A complete psychosocial assessment is helpful to understand the effects of a father’s absence on the child and its impact on other life areas (e.g., school, peers, home life). This is essential for careful diagnosis, appropriate case management, and successful intervention. The social worker needs to engage both parent and child. The younger the child, the more the parent will need to be included, with some situations requiring a broad approach and others requiring highly specialized skills. Fathering programs typically emphasize one or more of the following: responsible fatherhood (e.g., building a strong parent-child relationship), couple relationships and co-parenting, job skills/employment, self-sufficiency, and risk factors such as criminal history, mental health problems, substance abuse, and intimate partner violence. Cognitive behavioral therapy (CBT) may be used with either the child or the father to examine the relationships between thoughts, feelings, and behaviors with the goal of assisting the client to modify his or her patterns of thinking and improve coping.

Social workers should be aware of their own cultural values, beliefs, and biases and develop specialized knowledge about the histories, traditions, and values of their clients. Social workers should adopt treatment methodologies that reflect their knowledge of the cultural diversity of the communities in which they practice.
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<tr>
<th>Problem</th>
<th>Goal</th>
<th>Intervention</th>
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<td>Child has behavior problems</td>
<td>Determine the underlying cause of the child’s behavioral problems</td>
<td>Establish a therapeutic alliance with the child, obtain an understanding of the problem</td>
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<td>Child has behavior problems that may be attributed to or exacerbated by father’s absence</td>
<td>Assist child to understand that he or she is not to blame for the father’s absence and to develop new coping skills and communication patterns</td>
<td>Consider pros/cons of trying to engage father in the treatment process, teach and reward positive behavior, provide negative consequences that are meaningful, create behavior intervention plan</td>
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<tr>
<td>Child has mental health issue that may be attributed to or exacerbated by father’s absence</td>
<td>Assist child in developing a more realistic representation of his or her absent father so child may view father more objectively and gain understanding that he or she is not to blame for father’s absence</td>
<td>Consider pros/cons of trying to engage father in the treatment process, utilize a genogram to help focus on the entire family system, cognitive restructuring, coping skills training</td>
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**Applicable Laws and Regulations**

› The United States federal government has numerous legislative proposals and initiatives that encourage responsible fatherhood. For example, the Claims Resolution Act of 2010 (CRA) authorized $75 million for grants to states and community based agencies for fatherhood projects such as the Responsible Fatherhood program (serving 55 grantees with about 14,900 participants) and the Fatherhood Ex-Prisoner Recently Pilot Project (serving 4 grantees with about 945 participants).

› In the United States state laws protect fathers’ rights in matters including custody, paternity, child support, and child visitation. These laws vary by state; state-by-state information is available at http://www.divorcedfathersrights.com/state-laws/ (Divorced Fathers’ Rights, n.d.)

› Each country has its own standards for cultural competency and diversity in social work practice. Social workers must be aware of the standards of practice set forth by their governing body (e.g., in the United States the National Association of Social Workers, in England the British Association of Social Workers), and practice accordingly.

**Available Services and Resources**


› Center for Urban Families: http://www.cufuf.org/

› Fatherhood Institute (United Kingdom): http://www.fatherhoodinstitute.org/

**Food for Thought**

› The Think Fathers campaign was launched in the United Kingdom in 2008 to initiate public debate around the importance of fathers’ positive involvement in their children’s lives

› Fatherless children are twice as likely to drop out of school. School dropout has profound effects on future economic well-being and other life chances

› Despite federal attention to and promotion of fathers’ involvement in the lives of their children in the United States, there are very few services such as drug treatment and transitional housing that serve single fathers and their children

› A father’s relationship with his children often mirrors his relationship with his own parents
Red Flags

- Daughters growing up without fathers are 111% more likely to have children as teenagers (Williams, 2011)
- Children deprived of their father engage in significant risk-taking behaviors; e.g., promiscuity, drug and alcohol abuse, delinquency
- There is a strong link between growing up without a father and suicidal ideation, suicide attempts, and self-harm
- Paternal deprivation may affect neuronal activity during development

Discharge Planning

- Provide referrals for parenting classes and assistance developing and practicing behavior management techniques specific to the child
- Provide education to the custodial parent and other family members regarding communication and children’s development to help them prepare their children for independent life and to enable the custodial parent to provide the emotional support the child needs as a result of his or her father’s absence
- Refer to appropriate peer support group(s) as indicated
- Refer to social services for possible health and monetary benefits (e.g., food stamps, cash aid, Medicaid, housing assistance)

References