NRCF Webinar Series
Healthy Fathers, Healthy Families
Presenter Responses to Additional Questions

May 18, 2017

Moderator:
• Nigel Vann, National Responsible Fatherhood Clearinghouse (NRFC).

Presenters:
• Charles Daniels, Founder/CEO, Fathers’ Uplift, Inc., Roxbury, MA
• Craig Garfield, Associate Professor, Northwestern University Feinberg School of Medicine, Chicago, IL
• Albert Pless, Program Manager, Men’s Health League, Cambridge Public Health Department, Cambridge, MA

This document addresses three of the questions presented, but not addressed, during this NRFC Webinar. There were two other questions that the presenters did not feel qualified to answer. For questions addressed during the webinar, please refer to the Webinar Transcript. For more information contact NRFC via email at info@fatherhood.gov.

Question Submitted for Charles Daniels:
Charles talked a little bit about perception of self—can you talk about how a father might interpret a diagnosis of an illness or issue as a label of them as a man or dad? (e.g., a diagnosis of depression may be internalized as a label of being a weak person/unfit dad, instead of a condition that can be addressed and doesn’t define who they are.)

RESPONSE FROM CHARLES
An alarming number of people are misdiagnosed. I encourage mental health practitioners to take the necessary time to assess the presenting symptoms, understand the situation at hand, and develop a relationship before assigning any diagnosis. I recommend engaging the father in developing a “shared formulation” that can bring concerns of stigma to the forefront of the conversation. Involving the client in the discussion can be empowering to them and help them understand what is going on with them.

Often, when working with fathers a presenting issue surfaces that is contributing to significant stress. We can immediately conclude that they are experiencing a life struggle that has been stressful. We shouldn’t assign a severe diagnosis without thoroughly assessing the situation at hand (via a psychosocial assessment and time with the client). It could just be a stressful period for the father, instead of a serious condition.

I encourage mental health professionals and fatherhood practitioners to be cautious, sincere, and maintain open dialogue in their interactions with fathers. I often talk about “Adjustment Disorders,” which can be identified by emotional symptoms, such as stress, feeling sad or hopeless, and physical symptoms that can occur after someone goes through a stressful life event. The symptoms occur because they are having a hard time coping, and the reaction may be stronger than expected for the type of event that occurred. For example, you could talk with a father and help them understand that experiencing some symptoms of depression doesn’t mean that they have a “Disorder.” Rather, what they are experiencing may just be a reaction to stressful life events; a diagnosis is designed to help them deal with the stress they are experiencing.
General Questions

One of the areas I would like to learn more about is specific strategies to engage and retain fathers in services.

RESPONSE FROM NRFC
You can find information and tips on this topic in the NRFC’s Responsible Fatherhood Toolkit and two NRFC webinars: Outreach and Recruitment: Best Practices for Fatherhood Practitioners (2014) and Recruitment & Retention: Getting & Keeping Fathers Involved in Program Services (2007) – webinar slides, transcripts, and resources lists are available for download from the NRFC webinars page.

What are some ways to get Dads more involved in events at their child's school?

RESPONSE FROM NRFC
J Michael Hall of Strong Fathers Strong Families addressed this topic during our webinar Strengthening Literacy and Father-Child Relationships through Reading (2015). Materials from the webinar are available for download from the NRFC webinars page. To learn more about Mr. Hall’s work to engage fathers in school events, go to Strong Fathers Strong Families.