## Two To Tango: Enhancing Paternal Involvement to Improve Pregnancy Outcomes



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## Introduction

Men are important to maternal and child health.<sup>1</sup> A large body of research exist on a father's influence on child health and development, but little is known regarding the role of the expectant father in pregnancy outcomes.<sup>2</sup> A growing body of literature suggest that marital status, maternal psychosocial stress, and ethnicity are important risk factors for adverse pregnancy outcomes and partner support can modify that risk.3

This study employed the Life Course Perspective to investigate pre and peri-natal measures and predictors of paternal involvement on pregnancy outcomes contingent upon a father's 1) social factors 2) race/ethnicity 3) human capital.

#### Four Basic Factors of the Life Course Perspective

- 1) Historical times and events experienced over a life time (i.e. a relationship, marriage, an ethnic or racial slur, the loss of a job);
- 2) The developmental impact of a succession of life transitions or events is contingent on when they occur in a person's life (i.e. the impact of marriage or the decision to have children);
- 3) Lives, and social-historical influences are expressed through a network of shared relationships which can influence decisions to marry, have children or even return to school;
- 4) Individual-life influences constructed through choices and actions taken within the opportunities and constraints of history and social circumstances particularly related to a man's decision to marry and have children.

Researchers have disagreed about what it means to be an involved father. Three dimensions of father involvement are described as a multidimensional, frequently evolving concept, both culturally and scholarly.

Three Dimensions of Father Involvement (Lamb et al.)

- 1) Engagement (i.e., the extent to which fathers experience direct contact and shared interactions with their children in the context of caretaking, play, or leisure);
- (2) Availability (i.e., a father's presence or accessibility to the child);
- (3) Responsibility (e.g., the extent to which a father arranges for resources to be available to the child, including organizing and planning children's lives).

## Hypotheses

- H1: Paternal involvement is a more important predictor of pregnancy outcomes than social factors or human capital.
- H2: Paternal involvement does not mediate the effects of social factors, ethnicity (W, AA, or H), or human capital on pregnancy outcomes.

### Methods

Using Binomial Logistic Regression, a secondary analysis of the Early Childhood Longitudinal Study, Birth Cohort was conducted via SPSS 15.0 to calculate odds ratios with 95% confidence intervals.

Approximately 10,600 African American, Hispanic and non Hispanic White resident and biological fathers of children born in the United States (2001-2002) were observed.

The logistic function, the logarithm of the odds:

Z = a + b 1X1 + b 2X2 + b 3X3

Listen to baby's heartbeat

Attended childbirth classes

Purchased things for the child

Feel baby move

In delivery room

Saw baby in hospital

- Z is the natural logarithm of the odds (logit)
- a is the regression constant
- Ь is the regression coefficient

#### Study Variables

Independent	Dependent
Social Factors Index	Pregnancy Outcomes
<ul> <li>Marital Status</li> </ul>	
<ul> <li>Relationship Status</li> </ul>	Birthweight
Ethnicity	
<ul> <li>African American</li> </ul>	
<ul> <li>White American</li> </ul>	APGAR Score (1-10)
<ul> <li>Hispanic American</li> </ul>	Adverse (≤ 6)
Human Capital Index	
Income	
<ul><li>Education</li></ul>	
<ul> <li>Work Status</li> </ul>	
Paternal Involvement Index	
<ul> <li>Discuss pregnancy pre birth</li> </ul>	
<ul> <li>See ultrasound</li> </ul>	

## Results

#### Independent Variables Dependent Variables Social Factors Index **Pregnancy Outcomes** (Mean = 29.3, S = 9.75, Range 1-40) Married (66%) Birthweight Adverse (26.2%) (≤ 2,500g) ♣ Unmarried (34%) Optimal (73.4%) (≥ 2,500g) Relationship Status \* argued about chores (24%) APGAR (1-10) \* argued about money (22%)

Adverse (2.5%)(≤ 6)

Optimal (77%) (≥ 7)

\* White (56%)

Ethnicity

- African American (12%)
- Hispanic (4%)

Human Capital Index

(Mean = 8.7, S = 8.55, Range 1-29)

- Income (Mean = \$28,654)
- Employment (≈42% worked full time)
- Education (HS Grad 13%, BA 11%, PhD, MD, 3.5%)

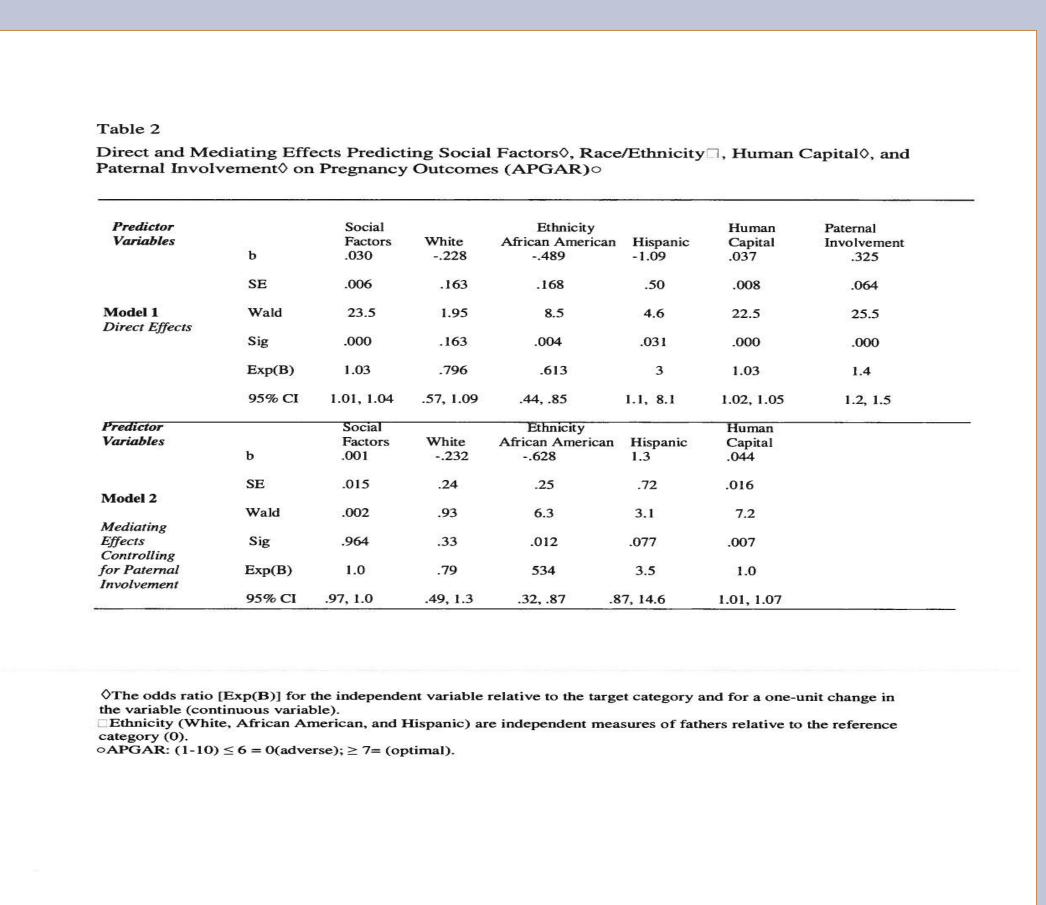
Paternal Involvement Index

(Mean = 7, S = 1.0, Range 1-8)

- Discuss pregnancy pre birth (93%)
- See ultrasound (95.6%)
- Listen to baby's heartbeat (94%)
- Feel baby move (55.5%)
- Attended childbirth classes (44.4%)
- Purchased things for the child (51.7%)
- In delivery room (95%)
- Saw baby in hospital (98.3%)

Direct and Me Paternal Invol	diating Effe vement◊ or	ects Predict Pregnancy	ing Socia Outcome	l Factors◊, Rac es (Birthweight	e/Ethnicity )o	√ , Human	Capital◊, and
Predictor Variables	b	Social Factors .015	White	Ethnicity African American 583	n Hispanic 1.85	Human Capital .016	Paternal Involvement .200
	SE	.002	.060	.064	.204	.003	.028
Model 1	Wald	48	7.0	84	82	36.5	51.5
Direct Effects	Sig	.000	.008	.000	.000	.000	.000
	Exp(B)	1.016	.854	.558	6.3	1.01	1.22
	95% CI	1.01, 1.02	.76, .96	.49, .63	4.2, .9.5	1.01, 1.02	1.15, 1.3
Predictor Variables	b	Social Factors .005	White .23	Ethnicity African American 598	Hispanic	Human Capital .014	
Model 2	SE	.005	.091	.101	.27	.005	
Mediating	Wald	.951	.064	35.3	47	6.9	
Effects Controlling	Sig	.330	.80	.000	.000	.009	
for Paternal Involvement	Exp(B)	1.00	1.02	.550	6.34	1.04	
	95% CI	.995, 1.0	.85, 1.2	.45, .67	3.7, 10.7	1.01, 1.08	
the variable (con □Ethnicity (White category (0). ○Birthweight: ≤ 2  n = 106 R²=.006 -2*log-1 Chi-Squ	tinuous varial te, African Ar 2500g = 0 (ad 88 5 likelihood ( 1are (-2*log	ble). merican, and I lverse); ≥ 250 (Full Model	Hispanic) at 0g = 1 (options) 4207.28	36 3; p value .955			14.00

#### Results



#### Conclusion

This study revealed that paternal involvement in pregnancy is a more important predictor of optimal pregnancy outcomes than social factors or human capital but not race/ethnicity.

Including men in reproductive health initiatives, enhancing family planning and attention to the preconception health and care of men are necessary for improving pregnancy outcomes.

#### Literature cited

<sup>1</sup>Lu MC, Jones L, **Bond MJ**, et al. Where is the F in MCH: Father Involvement in African American Families? Ethnicity & Disease. 2010:20 (Suppl.2),49-61.

<sup>2</sup>Bond MJ, Heidelbaugh JJ, Robertson A. et al. Improving Research, Policy and Practice to Promote Paternal Involvement in Pregnancy Outcomes: The Roles of Obstetricians-Gynecologist. Current Opinion in Obstetrics and Gynecology. 2010:[Epub ahead of print].

<sup>3</sup>Hoffman S and Hatch MC. Stress, Social Support and Pregnancy Outcome: A Reassessment Based on Recent Research. Paediatr Perinat Epidemiol.1996:10,380-405.

#### For further information

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