Engaging Māori fathers

A literature review – father involvement, Māori parenting and engaging Māori fathers in parenting

Dr Will Edwards and Dr Mihi Ratima
Taumata Associates
August 2014

Executive summary

This literature review on engaging Māori fathers in their role as parents grew out of discussions between Mana Ririki, Brainwave Trust Aotearoa and Great Fathers. The three agencies have shared interests and wanted to develop a project that would enable meaningful collaboration. The agencies are committed to developing programmes and resources for Māori whānau, so focusing on Māori fathers was a good starting point for collaboration. This review is intended to inform the agencies' joint development of a campaign to foster better engagement between Māori men and their children. This is a critical focus area given the overwhelming research evidence that father involvement positively impacts on child development and outcomes can be sustained into adolescence and adult life.

While father involvement has been well conceptualised in the international literature based essentially on Western experience, fathering behaviours and their impacts are subject to much diversity between ethnic groups. Fathers play a number of significant roles and the quality of their fathering is a function of their performance in these various roles and the relative importance of those roles in their particular cultural context. There is a dearth of literature concerning indigenous concepts of fatherhood and father involvement and related issues (including best practice interventions). What is known, however, is that through the devastating impacts of colonisation and the perpetuation of historical injustices, indigenous fathers have been marginalised and have faced major barriers to participation as fathers within their families.

The ongoing impacts of colonisation among Māori are reflected in wide disparities according to almost all key indicators in the position of Māori men in New Zealand society relative to non-Māori men. This is apparent, for example, in unemployment rates, occupational groups, personal income levels, home ownership rates, educational attainment, health status and incarceration rates. Despite these huge challenges, Māori men continue to hold strong aspirations for father involvement and to do the best by their children.

Historically, Māori parenting was embedded within a Māori worldview that provided a framework of beliefs and values that shaped all aspects of everyday live. Children were highly valued as the continuation of whakapapa and therefore the key to not only survival, but thriving whānau and wider collectives. Children were socialised within the whānau collective, with wider whānau members sharing responsibility equal to that of parents.

Reports of early Europeans commented on what they considered an overly indulgent Māori parenting style which rarely saw children punished, and the resulting obstinate children. From a Māori perspective, it seems that this was a strategy to nurture the child's' self-efficacy and avoid taming the spirit and therefore curbing natural bravery – qualities of critical importance to the survival of the collective at that time. Māori children were introduced early to the practices of their fathers and mothers, to prepare

them for their future adult roles. For this reason, fathers took their children everywhere. Early European observers remarked on the 'nurturing warrior' in reference to the role of the fathers as carers of children. Observers most commonly noted shared and loving co-parenting between mothers and fathers, though it is likely that many of these 'loving fathers and mothers' were uncles, aunts and other relations.

Despite much loss of cultural knowledge, Māori worldviews and aligned beliefs and value systems continue to shape Māori approaches to parenting. Research indicates that for Māori fathers, cultural identity and fathering are inextricably linked and that high value is attributed to expressions of Māori identity. Whānau remain central to parenting within a contemporary Māori worldview. The reality of today's family structures and living arrangements mean that many Māori children are raised in extended-family households that include single parents. However, at the same time many Māori children also live in single-parent households with variable access to whānau support. Nevertheless, a secure cultural identity and functioning whānau are foundations of positive fathering and there is support for locating initiatives to strengthen fathering in Māori contexts.

Contemporary Māori fathering is also shaped by a complex interplay of factors, including historical (i.e. colonisation), social (e.g. education), economic (e.g. deprivation), and political determinants, that are barriers to Māori father involvement. While these barriers will need to be addressed through comprehensive approaches that include structural initiatives, there are also promising and less complex strategies to more directly promote Māori father involvement. These strategies include raising community awareness about the role of Māori fathers, reorientation of existing services towards the needs and preferences of Māori fathers, programmes that support couple relationships, and tailored information provision. In terms of parenting programmes, research indicates that there is value in both culturally-adapted generic interventions and kaupapa Māori programmes. It is, however, kaupapa Māori programmes that best meet the expressed preferences of Māori fathers and Māori communities given that they are inherently strengths based, aligned to Māori worldviews and driven by Māori.

Whatever strategies or initiatives are adopted, they will need to be targeted to the lived realities of Māori men if they are to be successfully engaged. Providing specific support for Māori men who are transitioning as first-time fathers and teenage fathers has been highlighted as important (e.g. addressing poor access to parenting information and antenatal classes). As is engaging with the group of Māori men aged around 21-45 who are the 'workers' in Māori contexts, to support the adoption of positive fathering values and develop positive role models within Māori communities. A further group that require specific support are incarcerated Māori men.

The overall conclusion from this review is that while there is a pressing need to fill knowledge gaps, we know enough to provide much stronger and immediate support for Māori men to better enable them to fulfil their aspirations to be the best fathers that they can be. Successful Māori father involvement intervention has the potential to make a real

and substantial difference to the lives of Māori fathers, mothers, children, whānau and future generations of Māori.

Introduction

This literature review emerged out of exploratory discussions between Mana Ririki, Brainwave Trust Aotearoa and Great Fathers. These three agencies have shared interests and wanted to develop a project that would enable meaningful collaboration. All three agencies are committed to developing programmes and resources for Māori whānau, so focusing on Māori fathers was a good starting point for collaboration.

The agencies intend to develop a campaign to foster better engagement between Māori men and their children. It is intended that the campaign will support Māori men to see children as a taonga, accept responsibility for their children's emotional and physical wellbeing, and be accountable for their behaviour around children. The purpose of this paper is to inform that work. The paper discusses research on indigenous fathers, the position of Māori men in New Zealand society, Māori parenting, international research on fathering and the impact of father involvement on child development, and evidence of what works in educating fathers about children and parenting.

Indigenous fathers

Research on indigenous fathering

The relatively recent (from the 1960s and 1970s) explosion of research on fatherhood, fathering and father involvement, has largely focussed on fathers of European heritage with an almost complete lack of studies on indigenous parenting (Ball, 2009). The research that has been carried out has tended to be about mothers (Australian Institute of Health and Welfare, 2012). Where studies included a focus on indigenous fathers, their voices were rarely heard (Pattnaik, 2013). More recently, there has been some effort to research indigenous fatherhood, fathering, and father involvement particularly in Canada and Australia. However, the capacity of Western methodologies to understand indigenous fathering and deliver effective fathering interventions has been questioned (Ball, 2009). Research findings have suggested that indigenous cultural strengths and sources of resilience are invisible in research and community programs driven by Euro-western perspectives (Ball, 2010).

Within the literature there is recognition of the huge diversity between indigenous peoples, and the need to avoid overgeneralising from the experiences of particular groups of indigenous fathers. Indeed, specific work will be required to understand fatherhood, fathering and father involvement among different groups of indigenous fathers.

> To avoid an overgeneralized "pan-indigenous" interpretation of indigenous fathers' experiences and the policy and practice implications of this knowledge, further research should explore the constitution of fathering and patterns of fathers' involvement across specific cultural groups and settings with varied historical and current circumstances. (Pattnaik , 2013, p.220)

Factors shaping indigenous father involvement

The impacts of colonisation have been devastating for indigenous family life and communities. In both Canada and Australia, government policies forced separation of children from their parents and extended families requiring children to live in state-run institutions (Smolewski & Wesley-Esquimaux, 2004). For example, in Canada, by 1960 over half the First Nations and Me´tis children were confined to Indian Residential Schools (Miller, 1996), and extensive foster placement and adoption in non-indigenous homes have continued from the 1950s onwards (Loxley et al., 2005). According to Ing (2000) there is wide acknowledgement that most indigenous Canadians are survivors of residential schools or have experienced 'secondary trauma', having been born to parents who were never exposed to parenting role models.

Ball (2010) highlights the destructive impact these policies have had on indigenous fathers based on findings of a study involving 800 indigenous Canadian fathers. Eighty-two percent of participants referred in some way to the disruption of intergenerational bonds and transmission of language and culture in their accounts of the harsh living conditions, psychological problems, or challenging relationships in their lives, including father–child relationships. According to Ball (2009),

> *Colonial government interventions disrupted Indigenous families and communities and, along with ongoing social inequities, created unique challenges for Indigenous fathers. Removal of children from family care and of families from traditional territories, along with high rates of incarceration of Indigenous men, have produced a fissure in the sociocultural transmission of father roles across generations and created monumental challenges for Indigenous fathers' positive and sustained involvement with their children. (p.29)*

Through a combination of historical displacement, intergenerational socio-economic deprivation and the absence of policies and programmes to encourage their active involvement, indigenous fathers have been marginalised and faced major barriers to participation within their families. This point has been well made in a series of research publications led by Dr Jessica Ball, the head of the Indigenous Fathers Research Cluster at the Father Involvement Research Alliance in Canada.

> *Indigenous fathers are arguably the most socially excluded population of fathers around the world. (Ball, 2009, p.624)*

> *Fathers expressed their acute sense of social exclusion in what seems to them to be a mother's world of prenatal care and education, child care, parent education, health services, home-school liaison, social services and other forms of support for parenting. (Ball & George 2006, p.2)*

Indigenous fathers' aspirations and practices

Despite the huge challenges faced by indigenous fathers, they continue to hold strong aspirations for father involvement (Ball, 2010) and indigenous communities recognise their importance in raising future generations.

> *Fathers may well be the greatest untapped resource in the lives of Aboriginal children today. If we could understand and support them to get involved and stay connected with their children, that would be a big protective factor for these youngsters as they grow up.*

> - *Ed John, Grand Chief of British Columbia First Nations' Summit, Aboriginal Early Childhood Development Leaders' Forum (http://fira.ca/cms/documents/202/IndigenousFathers_Journeys.Poster.pdf)*

Father involvement is considered an important element in the recovery of Indigenous peoples' ways of life and wellbeing. In Canada traditional circles of care for children are being re-established to mobilise extended family involvement in teaching men about caring and nurturing their children (Ball, 2012).

There is some indication in the literature that indigenous fathers' perspectives and experiences of fatherhood are different from those of non-indigenous fathers. For example, indigenous fathers have described the births of their children as having an important but gradually unfolding impact on them. In contrast, research involving non-indigenous men has found that fatherhood can be the single greatest shaper of men's lives (e.g., Palkovitz et al., 2001).

The position of Māori men in New Zealand society

Population size and age structure

At the time of the 2013 New Zealand census, the total Māori population was 598,605, making up 14.9% of the total New Zealand population (4,242,048). Therefore, one in seven people who usually live in New Zealand were Māori. Māori males comprised 48.2% of the Māori population, and Māori females 51.8% (Statistics New Zealand, 2013a).

Figure 1 shows the age structure of the Māori population by sex. Māori are a proportionately youthful population, but have an ageing population structure. While the size of the Māori population aged under 15 years is growing, it has decreased slightly as a proportion of the Māori population (from 35.4% in the 2006 census to 33.8% in the 2013 census) (Statistics New Zealand, 2013a).

Figure 1 Māori ethnic group by age and sex 2013 census

Source: Statistics New Zealand (http://www.stats.govt.nz/Census/2013-census.aspx)
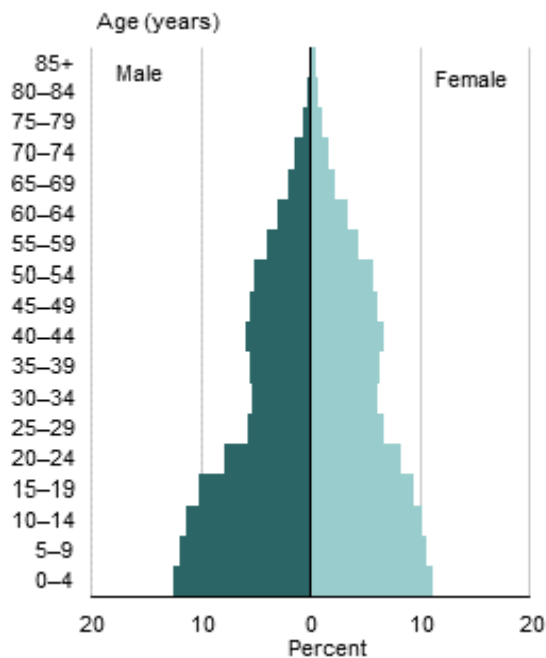
The median age of Māori males at the time of the 2013 census was 22.2 years (Statistics New Zealand, 2013a), compared to 36.9 years for all New Zealand males (Statistics New Zealand, 2013b). Of the 288,636 Māori males in New Zealand, approximately 188,500 or around 65% were under 35 years of age, and almost 85,000—approximately 30%—were between the ages of 15 and 34 years (http://www.stats.govt.nz/Census/2013-census.aspx).

It is estimated that by 2016 there will be 131,100 Māori males in the 15-39 years age group, and that this number will increase to 154,000 by 2026 (Table 1). This 31%

increase is substantially higher than the 3% increase in that age group projected for European or other males (though it is lower than projections for Pacific (63%) and Asian (65%) ethnic groups).

Table 1 Projected ethnic population of New Zealand males aged 15-39 years, 2006 (base)-2026

	European or Other (including New Zealander)	Māori
2006	509000	117900
2011	508600	124400
2016	508500	131100
2021	515900	138700
2026	524900	154000

Source: Statistics New Zealand (http://www.stats.govt.nz/browse_for_stats/population/estimates_and_projections/subnational-ethnic-population-projections.aspx)

Location and mobility

The percentage of Māori increased in almost every region between the 2006 and 2013 censuses (http://www.stats.govt.nz/maori#census). Gisborne and Taranaki experienced the largest increases (48.9% from 47.3%, and 17.4% from 15.8% respectively). Only Auckland (10.7% down from 11.1%) and the Bay of Plenty (stable at 27.5%) did not show increases. The highest proportion of Māori was in the Gisborne and Northland regions (48.9% and 32.4% respectively). Canterbury was the only region with a higher proportion of Māori males (50.9% or 21,324 people) than females. A high proportion (25%), of Māori men aged from 15-34 years, are resident in the Auckland region.

As shown in Table 2 the mobility of the Māori population increased between 1986-2006. In 1986 just under half (46.6 percent) of all Māori aged five years and over reported that they had lived somewhere else in New Zealand five years earlier. The proportion had increased to well over half (60.3 percent) by 2006 (Davies and Wereta, 2013).

Table 2 Percentage distribution of Māori by address five years ago 1986-2006

Address five years ago	1986	1991	1996	2001	2006
	Percent Māori population				
Same as usual address	51.7	45.8	44.5	40.2	37.3
Elsewhere in country	46.6	52.5	53.3	57.9	60.3
Overseas	1.7	1.7	2.2	1.9	2.4
Total	**100.0**	**100.0**	**100.0**	**100.0**	**100.0**

Source: Statistics New Zealand (Davies and Wereta, 2013, p.71).

Between the 2001 and 2006 censuses, 76% of 20-24 year olds, 80% of 25-29 year olds, and 75% of 30-34 year olds had shifted a minimum of once. Given that these are peak parenting years for Māori, not surprisingly children aged 5-14 years also had high mobility (e.g. 68% of all five- to nine-year olds) (Davies and Wereta, 2013).

Family formation and composition of Māori households

Marriage has become much less common among Māori over time (e.g. 62.4% of Māori aged 16 years and over in 1976 compared to 30.5% in 2001), accompanied by an increase in Māori living in de-facto relationships. Overall the percentage of Māori living with a partner remained stable between 1976 and 2001 (50.9% and 51.1% respectively) (Davies and Wereta, 2013).

Māori household composition has also changed over time (Table 3). One-family households of Māori couples with children have become less common over the period 1981-2006, while couples without children have steadily increased. The proportion of single-parent families has increased, and then stabilised (from 13% in 1981 to 24.4% in 2006). Multi-family households have seen some variation over the period, but continue to make up a small proportion of total households (8.3% in 2006) (Kiro et al., 2010).

Table 3 Composition of Māori households as at census years 1981 – 2006

Household composition	1981	1986	1991	1996	2001	2006
Couples without children	**14.1%**	**15.0%**	**15.8%**	**18.9%**	**20.2%**	**21.6%**
Couples only	13,095	14,778	17,808	28,404	28,032	33,744
Single-parent families	**13.0%**	**17.5%**	**25.9%**	**24.4%**	**26.4%**	**24.4%**
One-parent family	8,886	12,387	21,408	25,590	25,578	27,393
One-parent family plus others	3,168	4,932	7,665	11,133	11,022	10,764
Other one-family households	**68.3%**	**59.9%**	**51.7%**	**48.2%**	**46.9%**	**45.7%**
Couples only plus others	1,701	1,866	2,301	5,409	4,626	5,349
Couples with children	53,994	50,496	50,046	59,502	53,151	59,145
Couples with children plus others	7,728	6,786	5,751	7,560	7,365	7,062
Multi-family households	**4.7%**	**7.6%**	**6.6%**	**8.5%**	**6.5%**	**8.3%**
Two two-parent families with or without children	1,890	1,776	1,713	3,591	2,919	903
Two-parent plus one-parent family	1,635	3,342	3,345	5,160	2,187	2,640
Two one-parent families	513	1,584	1,857	3,102	15	2,619
Other two-family household	–	–	–	18	3,042	5,892
Three or more families	288	774	549	975	891	927

Source: Statistics New Zealand (Kiro et al., 2010, p.20)

Fertility and teenage parenthood

According to the 2006 census, the fertility rate (average number of births a woman can expect to have in her lifetime) for Māori women was 2.8 compared to 1.9 for European women (Statistics New Zealand, 2011). Māori rates of teenage parenthood are higher than for other ethnic groups. In 2006, 9.3% of Māori teenage women were mothers compared to 5.4% of Pacific, 3.2% of European and 1.0% of Asian teenage women (Families Commission, 2011). The fathers of babies born to teen mothers are often older than the mother, and therefore there are fewer teen fathers than teen mothers.

According to the National Ethnic population projections released in 2008, approximately one in four Māori births are to non-Māori mothers and Māori fathers (Statistics New Zealand, 2008).

Material wellbeing

Māori men are socio-economically marginalised in New Zealand. In 2013, their most common major occupational group was labourers (around one in four employed Māori men) (Figure 2), followed by technicians and trade workers, and machinery operators and drivers.

Figure 2 Major occupational groups for employed Māori ethnic group aged 15 years and over by sex 2013 census

Source: Statistics New Zealand (http://www.stats.govt.nz/Census/2013-census.aspx)
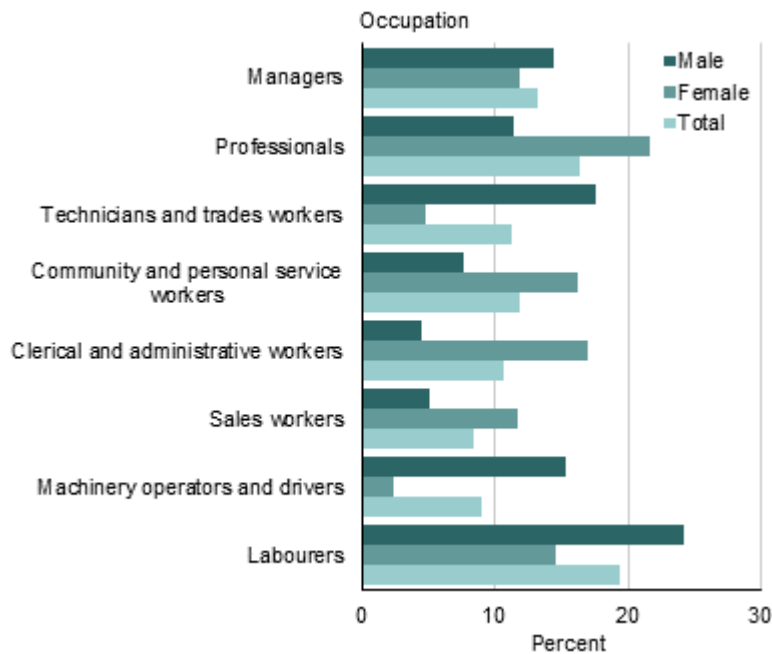
The average weekly income for Māori men in 2013 was $656 per week, compared to $924 for non-Māori men. Significant ethnic disparities in average weekly income have remained relatively constant between 2007 and 2013 (Table 4).

The median income for Māori men aged 15 years and over in 2013 was $27,200, compared to a median income of $36,500 for all New Zealand men. In 2013, around one in four Māori men had an income of $10,000 or less. Around one in 10 Māori men had a total personal income of more than $70,000 compared to around one in five of total New Zealand men (Statistics New Zealand, 2013a, 2013b).

Table 4 Income for all people by Māori, Non-Māori and sex 2007-2013

		Male	Female
		Average weekly income ($)	
2007	Māori	597	455
	Non-Māori	861	517
2008	Māori	648	490
	Non-Māori	869	536
2009	Māori	608	491
	Non-Māori	857	548
2010	Māori	594	504
	Non-Māori	860	561
2011	Māori	642	489
	Non-Māori	879	573
2012	Māori	668	502
	Non-Māori	890	599
2013	Māori	656	532
	Non-Māori	924	598

Source: Statistics New Zealand (http://www.stats.govt.nz/Census/2013-census.aspx)

Data from the Household Labour Force Survey show that for the five year period to March 2014, there was a consistent disparity in unemployment rates for Māori versus all ethnicities. For the year ending March 2014, the Māori unemployment rate was 12.8% compared to 6.1% for all ethnic groups (http://www.stats.govt.nz/browse_for_stats/income-and-work/employment_and_unemployment.asp). The Māori labour force participation rate over the year to March 2014 was 67.6% compared to 70.6% for European New Zealanders (Ministry of Business, Innovation & Employment, 2014).

In 2006, almost one in four Māori (24%) lived in decile 10 areas (the most deprived neighbourhoods) compared to seven percent of non-Māori. Three percent of Māori lived in decile 1 areas (the least deprived) compared to 12% of non-Māori (Salmond et al., 2007). The majority of Māori men (69.9%) do not live in their own home (Ministry of Health, 2010).

Education

In 2013, 7.4 percent of Māori men (compared to 12.3 percent of Māori women and 13.6 percent of all adults) stated a bachelor's degree or higher as their highest qualification (Statistics New Zealand, 2013a, 2013b). Around one in five (19.6%) Māori were engaged

in study in 2013, of which 41.0% were men, and 59.0% were women (Statistics New Zealand, 2013a). In 2013, over one third of Māori men aged 15 years and over (36.8%) had no formal qualifications (Statistics New Zealand, 2013a).

Health

There are enduring ethnic inequalities between the health of Māori and non-Māori in New Zealand. This is reflected in recently released (20 June 2014) analysis of the New Zealand Health Survey (NZHS). A summary of Survey data for Māori is shown in Table 5 (Ministry of Health, 2014). The rate ratios in the final column show the extent of ethnic disparities between Māori and non-Māori.

Table 5 Extract of summaries of key indicators from pooled 2011/12 and 2012/13 NZHS data for Māori adults aged 15 years and over

Indicator for Māori adults	Percent	Estimated number	Time trends since 2006/07	Māori vs non-Māori (significant adjusted rate ratios only)[1]
Excellent, very good or good self-rated health	84	375,000	↓ Decrease	0.9
High blood pressure (medicated)	13	60,000	↑ Increase	1.4
High cholesterol (medicated)	9	38,000	↑ Increase	1.2
Ischaemic heart disease (diagnosed)	5	22,000	≈ No change	1.8
Stroke (diagnosed)	2	8000	≈ No change	–
Diagnosed common mental disorder (depression, bipolar disorder and/or anxiety disorder)	16	71,000	↑ Increase	–
Psychological (mental) distress	9	38,000	↓ Decrease	1.7
Diabetes (diagnosed)	7	33,000	↑ Increase	2.0
Asthma (medicated)	16	73,000	≈ No change	1.6
Arthritis (diagnosed)	12	54,000	≈ No change	1.2
Chronic pain	18	83,000	≈ No change	1.3
Experienced unmet need for primary health care (any of the following) in the past 12 months:	37	155,000	na	1.4
• unable to get appointment at usual medical centre within 24 hours	20	75,000	↓ Decrease	1.3
• unmet need for GP services due to cost	22	93,000	na	1.6
• unmet need for after-hours services due to cost	12	50,000	na	1.9
• unmet need for GP services due to lack of transport	8	34,000	na	2.8
• unmet need for after-hours services due to lack of transport	4	16,000	na	3.0
Unfilled prescription due to cost in the past 12 months	15	64,000	na	2.7

Source: Ministry of Health (2014, pp.3-4)

Key findings from the NZHS included that relative to non-Māori, Māori experience: a higher level of unmet need for health care, particularly due to cost; a higher burden from long-term health conditions; higher rates of psychological distress; and, higher smoking and obesity rates.

Māori men have poor health status compared to non-Māori men. Many of the diseases that Māori men suffer from are preventable and/or manageable. Māori under-utilise primary medical care and related services given their high health needs, and this is reflected in findings of the 2012/13 NZHS. Māori adults reported a greater degree of unmet need for primary care (including GP services) (39%) than non-Māori. Māori were 1.5 times more likely than non-Māori to have an unmet need for primary care (after adjusting for age and sex differences). This indicates that disproportionately high rates of preventable and/or manageable diseases among Māori men are partly due to the failure of health services to facilitate the reduction of risk factors and the management of chronic disease through the provision of accessible primary health care.

Māori men have a lower life expectancy than non-Māori men. For the 2010-2012 period male life expectancy at birth was 76.8 years for Māori, compared to 80.2 years for non-Māori. At that time, the life expectancy at birth for Māori women was 76.3 years. (http://www.stats.govt.nz/browse_for_stats/health/life_expectancy/NZLifeTables_MR10-12.aspx).

Leading causes of death for Māori men are cardiovascular disease, cancer, diabetes, suicide and respiratory disease. The most common cause of cancer is lung cancer, followed by prostate cancer, colorectal, stomach and liver cancer. Māori men have more than three times as many hospital admissions for chronic obstructive pulmonary disease and are nearly twice as likely to suffer from asthma as non-Māori men. While the self-report prevalence of diabetes is similar for Māori and non-Maori men, there are wide disparities in terms of complications. Renal failure with diabetes was 9.96 times higher in Māori men than non-Māori men. Lower limb amputation with diabetes was 4.28 times higher among Māori men than non-Māori men (Ministry of Health, 2010).

Māori men are 1.5 times more likely to be current smokers than men in the total population, and 41.9% of Māori males between 15-64 years of age smoke. In terms of alcohol and drug use, 88.7% of Māori males have consumed alcohol in the past 12 months (15-64 years) and 32.6% of Māori males have used cannabis in the past 12 months (15-64 years) (Ministry of Health, 2010). Māori male patterns of alcohol consumption are different from those of non-Māori men. While the frequency of alcohol consumption is higher for non-Māori (days per year), the volume drunk on a typical drinking occasion was consistently about 40% less than for Māori. Therefore, while Māori men drink less often than non-Māori men, they drink more on a usual drinking occasion (Bramley, Broad et al., 2003)

Self-reported health status (as measured in the 2012/2013 NZHS) of Māori was positive, with 84.2% rating their health status as excellent, very good, or good (compared to the total population figure of 89.6%).

Cultural identity

Of the total Māori population, 535,941 identified with an iwi. The 10 largest iwi identified in the 2013 census were Ngāpuhi, Ngāti Porou, Ngāi Tahu, Waikato, Ngāti Tūwharetoa, Ngāti Maniapoto, Tūhoe, Ngāti Kahungunu ki Te Wairoa, Te Arawa, and Ngāti Kahungunu (region unspecified) (http://www.stats.govt.nz/Census/2013-census.aspx).

A survey of 825 Māori aged 30-79 years (Gee et al., 2003) found that satisfaction with level of fluency in te reo Māori was positively associated with life satisfaction and psychological wellbeing and with aspects of cultural involvement, such as marae participation. A 2013 Statistics New Zealand survey of Māori well-being found that 55% of Māori adults had some ability to speak Māori, and 11% indicated that they would speak Māori well or very well (Statistics New Zealand, 2013c). Generally, what little data is available regarding Māori cultural identity has not been analysed separately for Māori men.

Māori parenting

Māori parenting prior to colonisation

Customary Māori society was built on whakapapa or descent lines that dictated membership within a kinship-based hierarchy. The whānau was the basic unit of this social structure and the collective within which everyday life was lived in kāinga (villages with around 40 people). Whānau comprised three or four generations linked by a common ancestor (Walker, 1990). Life centred on the survival of the collective, and within this context Māori approaches to parenting were necessarily pragmatic.

Māori parenting was embedded within a Māori worldview that provided a framework of beliefs and values that shaped all aspects of everyday life. Creation narratives relating to the primordial whānau (Ranginui and Papatūānuku and their tamariki) and other spiritual beings modelled Māori concepts of whānau and parenting. Among Māori values of particular relevance to parenting were whakapapa (literally genealogy but more broadly relationships between physical and social environments and material and non-material realms), whanaungatanga (nurturing kinship relationships, whānau cohesion and reinforcement of obligations and commitments), tapu (restricted access), mana (power and authority), and aroha (love and deep caring) (Te Awekotuku, 1991; Ratima, et al., 1996; Durie 1998a; Powick 2002; Hudson et al., 2010; Kennedy & Cram, 2010; Tupara, 2011).

Children were highly valued as the continuation of whakapapa and therefore the key to not only survival, but thriving whānau and the larger social structures formed by collectives of whānau (hapū and iwi). Jenkins & Harte (2011) reviewed Māori approaches to parenting prior to 1642, and drew on the writings of observers at the time (the remainder of this section draws largely on their review).

Working collectively and helping one another was a fundamental expression and responsibility of whakapapa relationships. Parenting was a shared responsibility amongst adult whānau members (e.g. grandparents, aunts, uncles), with older cousins and siblings as minders. Responsibilities and obligations of raising children were shared on a day-to-day basis, including monitoring, personal care and discipline. Children were socialised through a tuakana/teina (elder/younger) model within the whānau collective. This parenting approach naturally flowed from a worldview that positioned children as belonging to whānau (and beyond that to hapū and iwi), rather than being the sole responsibility of biological parents (Mikaere, 2002). In this model, relatives have responsibility for children that is equal to that of fathers (Polack, 1840, cited in Jenkins & Harte, 2011). Having many adults responsible for children helped to moderate their behaviour in the sense that they were constantly monitored by a large group of minders. This approach to parenting was pragmatic in that it best ensured the safety and wellbeing of individual children.

According to Jenkins and Harte (2011), in customary Māori society children were tapu and therefore subject to special rules and protections and were recognised as having their

own mana (power) that was to be respected through aroha (loving care). Punitive discipline was not accepted as a means of socialising children. As a general rule all children were cherished and indulged, and punishment of children saw the perpetrator subject themselves to retribution from the wider whanau. This may have taken the form of seizing of the offender's property (Shortland, 1882, cited in Jenkins & Harte, 2011). Children after all belonged to whānau collectively, and it was unacceptable for individuals to transgress collective parenting norms in that way. Shared parenting among whānau provided a safeguard for the protection of children from violence (Taonui, 2010).

The ways in which individual children were treated differed according to their status within a whakapapa-based hierarchy (e.g. highborn, commoners, slaves). For example, for high-born children, ceremonial birth rites, other rites of passage, and the composition of oriori reinforced their cherished status. Oriori are 'lullabies' or chants for infants that generally linked them to their whakapapa and shared whānau aspirations for their development – which were essentially for children to be bold, brave, independent thinkers within whānau and hapū. Oriori served an inspirational and educational purpose.

Child prisoners were valued highly and lived with whānau, but remained slaves. The children of slaves were not treated harshly and joined with children of commoners and high rank in day-to-day life. While children of slaves commonly had no prospects of power or prestige within society, there were exceptions based on skill.

Reports of early Europeans commented on what they considered an overly-indulgent Māori parenting style which rarely saw children punished, particularly among ranking families, and the resulting obstinate children. Physical, verbal and emotional punishment was not a norm in socialising children. This approach was likely enabled because of the collective nature of parenting such that children could be easily passed on to one of a team of relatives who provided care to distract them when overly demanding.

From a Māori perspective, it seems that this parenting style was a strategy to nurture the child's' self-efficacy and avoid taming the spirit and therefore curbing natural bravery – qualities of critical importance to the survival of the collective at that time. Māori children were described as robust and lively, and were introduced early to the games and practices of their fathers and mothers, to prepare them for their future roles in whānau and hapū as, for example, food producers, warriors, marital partners and parents. Everything that was done was to prepare them for those roles. For this reason, fathers took their children everywhere, including to hui and even military expeditions (Nicholas, 1817, cited in Jenkins & Harte, 2011).

Early European observers remarked on the 'nurturing warrior' in reference to the role of fathers as carers of children alongside the mother and other whānau members. Commentators noted the high level of skill fathers displayed in caring for young children, including taking over day-to-day care once children were weaned so that mothers could focus on new babies (Polack, 1840, cited in Taonui, 2010).

The father, or uncle, often carried or nursed his infant on his back for hours at a time, and might often be seen quietly at work with the little one there snugly ensconced. (Colenso, 1868, cited in Taonui, 2010, p.30)

Observers most commonly noted shared and loving co-parenting between mothers and fathers, though Polack (1840, cited in Taonui, 2010) commented that boys were brought up entirely by males. However, as observers did not know clearly the relationships between children and their adult carers, it is likely that many of the 'loving fathers and mothers' described were uncles, aunts and other relations.

The boys are brought up entirely by the men; and it is not uncommon to see young children of tender years, sitting next to their parents in the war councils, apparently listening with the greatest attention to the words of war uttered by the chiefs…(p.378) They also ask questions in the most numerously-attended assemblies of chiefs, who answer them with an air of respect, as if they were a corresponding age to themselves. I do not remember a request of an infant being treated with neglect, or a demand from one of them being slighted. (p.379)

Māori parenting in contemporary times

Determinants of Māori parenting

The vitality of Māori civilisation and the capacity to adapt to change is testified to by the very survival of Māori in the face of the adversity of colonisation, which brought with it introduced infectious disease, systematic land alienation, and political oppression (Durie 1998b). However, these challenges to their integrity have been costly and despite the signing of the Treaty of Waitangi in 1840, which set ground rules for the relationship between Māori and the Crown and provided a framework through which Māori could assert their unique rights as tangata whenua, historical injustices have continued to be perpetuated. As a result, Māori are marginalised within contemporary New Zealand society. The extent of marginalisation and ethnic inequalities is reflected in the social, economic, cultural, and political status of Māori in New Zealand (Reid & Robson, 2007).

As expressed poignantly by Tūhoe leader Tamati Kruger,

Survival has been expensive. The price is the loss of cultural knowledge, identity and practices, the breakdown and dysfunction of whanau, hapu and iwi, the confiscation and theft of Maori land and the pauperisation of Maori. The contemporary outcomes are epidemic violence and systemic dysfunction. (cited in Cooper & Wharewera-Mika, 2009, p.29)

Pihama (2012) further states that,

As with other Indigenous peoples, the effects of colonization had – and continue to have – radical impacts on the makeup of Māori communities and how we are able to maintain matters of importance such as the raising of children within supportive family and community environments. (p.25)

Kelly et al (2014) also comment on the impacts of colonisation.

This process [colonisation] has interfered with the transmission of traditional Māori parenting knowledge and has left many without the necessary parenting skills or child development knowledge whether it be from a Māori or non-Māori knowledge base. However parenting

Cram (2012) describes a number of determinants (e.g. poverty, mental illness, abuse and racism) that impact on the ability of Māori to parent. According to Wesley-Esquimaux and Snowball (2010, cited in Cram 2012), these determinants are "More reflective of larger society than a microcosm of isolated dysfunction" (p.12).

With the eroding of traditional Māori values and whānau dysfunction, parenting shifted from a whānau-controlled model, whereby the collective sanctioned parenting approaches, to one of increased individual control by parents (Ritchie & Ritchie, 1993, cited in Cooper & Wharewera-Mika, 2009).

Despite much loss of cultural knowledge, Māori worldviews and aligned beliefs and value systems continue to mould the lives of many Māori, including their approaches to parenting. At its core however, contemporary Māori parenting generally and fathering in particular, are shaped by a complex interplay of factors including historical (i.e. colonisation), social (e.g. education and lack of social support), economic (such as unemployment and poverty), political and cultural determinants. What does this mean for Māori fathers? Māori fathering is not solely determined by the characteristics of individual fathers, but primarily by wider systemic factors that shape the lives of Māori men and the genuine opportunities they have to be involved fathers. It will therefore be important to not only address individual factors, but also relationship, family, whānau, community and societal factors that impact on father involvement. The implication here is that while parenting programmes have much potential value, they are just one contribution to the comprehensive strategy that is required to address the structural drivers of Māori fathering.

Whānau and parenting

Whānau continue to be central to parenting within a contemporary Māori worldview. A major theme identified in the literature is that parenting is the responsibility of whānau, and is not solely the responsibility of parents and immediate families (Cram, 2012; Pihama 2012; Irwin et al., 2013; Social Policy Evaluation and Research Unit, 2014). Expressed another way, parenting is a function of whānau (Irwin et al., 2013).

Pitama et al (2002, cited in Cram, 2012) identify four principles for caring for Māori children – the importance of whakapapa; children belong to whānau, hapū and iwi; shared rights and responsibilities for raising children; and children's rights and responsibilities to their whānau. According to Pihama (2012), "Both whakapapa and whānau are grounded within notions of relationship, responsibilities, and obligations which enable all adults to take a 'parenting' role for Māori children." (p.4)

A Families Commission research report on what works for Māori (Irwin et al., 2013) discussed findings from five wānanga held with Māori about how to strengthen whānau, including with regard to parenting education. Participants emphasised that parenting can draw on traditional concepts in a way that is empowering. According to the report,

The ideal of the child being raised by the village was a firmly held aspiration. Parenting was often seen as a shared responsibility between parents, grandparents, as well as other relatives including aunts, uncles, cousins and siblings. The marae was viewed as a key site of potential support and strength for whānau…There was a strongly held view that, despite the varying configurations of whānau in contemporary New Zealand society, the Māori cultural values underpinning the caregiving and caretaking aspects of cultural practices such as whangai are still valid and remain viable options. (p.86)

Within functioning whānau, rights and responsibilities are shared between parents and the wider group. In practice this means that other whānau members also parent – providing physical care, love and discipline across the range of settings and whether or not the actual parents are present (Mikaere, 2002). This does not mean that other whānau members replace parents, but rather that there is a collective approach to parenting as is common across most non-Western societies. Therefore, Māori children who are part of functioning whānau experience a breadth of relationships with their relations of all ages (Pere, 1982, cited in Mikaere, 2002) and are subject to a rich parenting experience.

Shared responsibility within a whānau model provides a strong system of support that is particularly important for young parents, in that they enter a parenting system that enables them to continue to develop their own potentials (Pere, 1982, cited in Mikaere, 2002). The reality of today's family structures and living arrangements mean that many Māori children are raised in extended family households that include single parents. However, at the same time many Māori children also live in single parent households (Herbert, 2011, cited in McIntosh & Mulholland, 2011) with variable access to whānau support.

Māori parenting

Herbert (2001) ran separate focus groups with kaumātua, Māori parents and caregivers (almost all of whom were women), and three kaupapa Māori health and social service providers about their experiences and views on childrearing practices. The research identified whakapapa (genealogy), whanaungatanga (family connections) and awhinatanga (support) as key concepts related to effective individual and family functioning, and relevant to childrearing. The theme of sharing of activities and responsibilities was also identified across groups as an important aspect of family functioning.

Parents in focus groups were asked about how Māori values might be expressed in a family. According to participants, they would expect to see – children staying in different households, that aunties and uncles are very important, that older children are protective of younger children, that instead of being offered a cup of tea you would be given a meal, and that everyone holds the baby.

Māori fathering

Māori fathers experience wide ethnic inequalities in many aspects of daily living in New Zealand that challenge their capacity to engage positively in parenting their children.

Despite these challenges, like other New Zealand fathers, Māori fathers are highly motivated to do their best by their children.

A telephone survey of 1721 New Zealander fathers, of whom 14% were Māori, was carried out to investigate fathers' roles, access to support, and what helps and hinders them as fathers (Luketina et al., 2009). On average, participants in the survey spent 40 waking hours weekly with their children. This figure was slightly higher for Māori fathers (40.8 hours). A higher percentage of Māori fathers (69%) reported that they were totally or very involved in family chores than Pākehā fathers (61%). The top three descriptors of fathering style identified by Māori fathers, in this order, were income earner and provider (56%), friend/playmate (51%) and coach 48%).

Māori fathers were less likely to say they were 'more involved' and 'more hands-on' than Pākehā fathers. They were also less likely to say that they were trying to be the same as their own father. Māori fathers were more likely than Pākehā fathers to say that their own fathers were absent when they were young.

There were large differences in the percentage of Māori and Pākehā men who reported that they had read something about parenting, 37% and 50% respectively. Māori fathers were also less likely to have attended antenatal classes than Pākehā fathers, 14% and 23% respectively.

Fathers were asked if in their view there was sufficient information available about how to be a good father. Only 36% of Māori fathers thought there was sufficient information, compared to 46% of Pākehā fathers. Nearly one-third of Māori fathers said that there was not sufficient information on fathering available to them. Thirty-four percent were not sure (34%). The researchers noted that a response of 'not sure' may indicate that they had not previously looked for information.

When asked about other support needs, family and friends were more commonly mentioned by Māori fathers than other ethnicities.

A focus group with Māori fathers was run as part of a project that involved scoping fathering in Waitākere City, West Auckland (Pudney, 2005/2006). Feedback from participants indicated that cultural identity and fathering are inextricably linked and that strengthening fathering should be done within a Māori cultural context. A secure cultural identity and functioning whānau were considered to be foundations for positive fathering. But, even where whānau were sharing parenting responsibilities, parents remained important in child-rearing.

Focus group participants attributed high value to expressions of Māori identity, such as tikanga and valuing collectivity. Whakapapa was identified as a construct that is central to positive fathering for Māori. Concepts of whakapapa, whanaungatanga and collectivism, and the notion that children belong to their whānau, hapū and iwi, were identified through interviews with service providers as informing kaupapa Māori views of what it means to be a father.

After cultural factors, 'good parenting' and literacy were identified by participants as important in enabling positive Māori fathering. Participants understood the importance of good fathering, and stated that fathering should be a leading priority for whānau, and that whānau have a role in challenging men to fulfil their responsibilities to parent their children. According to participants, men are important role models for Māori boys.

A young father shared his struggles with expectations that he would provide financially for his family, when he wanted to focus on nurturing his child and being a husband. He expressed the view that being a good husband is central to being a good father.

Focus group participants made suggestions about strategies for engaging Māori fathers about parenting issues. First-time fatherhood was identified as a major transition point by Māori fathers that presents an opportunity to work with them to support their father involvement. They stressed the importance of engaging Māori men who are aged from around 21-45 years and are workers in Māori contexts (e.g. put down the hangi at marae), and who would benefit from intervention to support the adoption of positive fathering values and support to strengthen their intergenerational relationships. Participants saw that there was much potential for these men to be positive role models within Māori communities.

Focus group members suggested that Māori men could be encouraged to talk about their own fathers and their personal experiences of fathering as a child. Further, that they would likely benefit from activities to heal their wairua (spirit).

Māori have higher rates of teenage fatherhood than non-Maori. There is little information available for teenage fathers about fathering, as most information targets mothers. Teenage fathers have raised concerns that they are marginalised by service providers (Families Commission, 2011). A Families Commision research report (2011) on teenage pregnancy and parenting noted that often teenage fathers are not engaged well in their parenting role, and stressed the importance of providing culturally appropriate support for teenage parents, and involving young Māori and their whānau in the development and delivery of support services. As well, the report referred to the need for work to strengthen whānau and community networks of support. Specific mention was made in interviews with former teenage parents of the need for specific support for teenage fathers given that currently the focus tends to be on mothers.

The massive over-representation of Māori within the prison population (Māori comprise 50% of prisoners) is reflective of the systemic disadvantage of Māori within New Zealand society. A substantial proportion of Māori children will have a father in prison. Incarceration greatly reduces father involvement both during incarceration and after release from prison (Pattnaik, 2013). Intervention to support father involvement among prisoners and those who have been released will be important for Māori.

Fatherhood and father involvement

Fatherhood

It was only in the 1960s and 1970s that research about parenting moved beyond mothers and mother-child relationships, with a rapid expansion of research about fathers (Pattnaik, 2013). There is now a burgeoning literature on fatherhood, fathering and father involvement and for that reason this and the following section rely largely on identified reviews.

While fatherhood has for many years been understood as multidimensional, the central constructs have changed over time. In the past 100 years early conceptualisations viewed fatherhood in terms of status within family structures—from one of moral guidance to breadwinning (economic provisioning). From the 1970s the role began to be understood by virtue of the relationship with children—sex-role modelling, to psychosocial and emotional support of mothers (and therefore better enabling them to care for children) and to nurturance (Lamb, 2000, 2013). Within public discourse, the nurturance role of fathers has tended to be viewed as less important than the nurturing or mothering role of mothers (Lamb, 2000), however, all of these identified constructs inform modern conceptualisations of fatherhood.

Father involvement

Prior to the mid-1980s, the paternal factor most commonly studied was the presence of fathers in the child's household (Pleck, 2010). Father involvement at that time was narrowly understood as a number of dichotomies – involved/uninvolved, absent/present, visiting/not visiting children, responsible/not responsible, providing/not providing financially. This approach did not reflect the realities of non-residential fathers whose level and quality of involvement varied (Pattnaik, 2013). While there was some investigation of paternal behaviour and father-child relationships, it was limited in scope and did not address how much fathers do as parents (Pleck, 2010).

The concept of father involvement was expanded in the mid-1980s to include three dimensions – engagement, accessibility and responsibility (Lamb et al., 1985; Pleck et al., 1985). Engagement—time fathers spend in direct one-on-one interaction with their child—such as in providing personal care, or playing. Accessibility—being available to the child, such as cooking while the child is playing in the next room. Responsibility— ensuring that the child is taken care of and that required resources are arranged.

Father involvement research tended to focus on the engagement dimension (direct interaction with child), such that the terms became almost synonymous (Lamb, 2000), and was measured through time use (total interaction time with child or time spent in highly interactive defined activities with child). The dimensions of warmth-responsiveness and parental control (e.g. paternal monitoring and involvement in decision-making) were also added to research assessments of father involvement. Indirect

care (activities carried out for the child but not involving interaction with them) and process responsibility (taking initiative and monitoring what is required) were investigated in a much more limited way (Lamb, 2010). As well, accessibility received a little attention (see Bianchi et al., 2006, Yeung et al., 2001 as cited in Pleck 2010). Based on the evolution of father involvement research, Pleck (2010) proposed a re-conceptualisation of the construct. That is, father involvement conceptualised as incorporating three primary elements—positive engagement activities, warmth and responsiveness, and control; as well as two auxiliary domains—indirect care and process responsibility.

Contemporary understandings of fatherhood and father involvement draw on a range of constructs (moral guidance, breadwinning, maternal support, nurturance etc.) (Lamb, 2000). As noted by Lamb (2013):

> *…fathers play a variety of roles – as sources of love and care; as guardians, protectors, providers, and teachers; as models of behaviour to both emulate and abjure; and as supportive partners to others who have similarly complex roles and responsibilities. (p.97)*

Emerging issues in father involvement research

The 'essential father' versus the 'important father'

There are a number of discourses about fathering that are not substantiated by empirical evidence. While there is consensus that fathers impact substantially on the well-being of their children (Lamb, 2010, 2013) since at least the 1940s (Pleck, 1981) it has been widely assumed that fathers make unique and essential contributions to child development based on being male and their masculinity. Pleck (2010) has labelled these views as the 'essential father' hypothesis and identified three linked ideas on which it is based.

> *First, fathers make a contribution to children's development that is essential. Second, fathers make a contribution that is unique; what makes fathers' contribution essential is precisely that it is unique. Third, fathers make a contribution that is uniquely male and uniquely masculine; that is, fathers' contribution is unique specifically because fathers are males and have masculine characteristics . (p.34)*

In a review of the evidence, Lamb (2010) concluded that paternal non-residence (previously called 'father absence') may be detrimental to child development not because of the absence of a sex role model, but rather because many of the paternal roles are not sufficiently filled (e.g. economic, social and emotional roles). Further, that the absence of a male sex role model is not of high significance in terms of the impacts of fatherhood or father absence. Also based on a review of the evidence, Pleck (2010) states that while good fathering is important as one factor promoting positive outcomes for children, it is not essential or unique and is not necessarily connected to fathers' masculinity. This does not change the value that should be attributed to good fathering, but rather brings the

understanding of the impact of good fathering on child development in line with research evidence. He labels this perspective the 'Important father' hypothesis.

Overwhelmingly consistent themes in the research are that the nature of the relationships with both mothers and fathers matters, and that the ways in which they influence child development are similar rather than different (Lamb, 2010).

> *Sensitive fathering – responding to, talking to, scaffolding, teaching and encouraging their children to learn – predicts children's socio-emotional, cognitive, and linguistic achievements just as sensitive mothering does. (Lamb, 2010, p.4)*

Research evidence also indicates that new mothers and fathers are equally competent in parenting (Braungart-Rieker et al., 1998, Parke & O'Leary, 1976, Parke & Sawin, 1980 as cited in Lamb, 2012). Parenting skills are largely acquired through doing, and because mothers spend more time parenting than fathers they become more adept.

Low income fathers

Within the academic discourse is the view that a good father successfully combines economic provisioning for his family and a nurturing parenting style (Hoffman, 2011). These ideas are exclusive of the realities of many fathers (Long, 2008). They are also linked to notions that low income fathers care less about their children and are uninvolved (Tamis-LeMonda & McFadden, 2010). However, research demonstrates that despite daily challenges the majority of low-income fathers, regardless of whether or not they are resident, are highly involved with their children in a wide variety of ways (Phares 1996, Mincy & Sorensen 1998, Cabrera, Ryan et al., 2004, as cited in Tamis-LeMonda & McFadden, 2010).

Tamis-LeMonda and McFadden (2010) caution against assuming what the motivations might be for low income fathers who are "...seemingly absent from their children's lives...", and note that these fathers may lack skills necessary to take the steps needed to be there for their children (e.g. negotiating legal co-parenting arrangements). Hoffman (2011), in reviewing the literature, notes that research indicates that marginalised sub-populations of fathers, including young fathers, indigenous fathers, and those involved with child welfare, care more for their children than what public discourse would have us believe (Ball, 2010, Devault et al., 2008, Pratt et al., 2008, Strega et al., 2009, as cited in Hoffman, 2011).

Gay fathers

Public discourse on children from gay father families promotes the notion that these children are likely to be maladjusted, have issues in terms of gender identity, be homosexual and/or effeminate. While there is relatively little literature about gay-father families (particularly around family environment versus genetic factors in influencing sexual orientation) and there are limitations in much of the work that has been done, these views are at odds with the evidence (Golombok & Tasker, 2010).

Research indicates that the sexual orientation of homosexual fathers does not increase the chances of their children being homosexual, effeminate or maladjusted (Turner et al., 1990; Golombok et al., 2014). A study by Farr et al (2010) found no differences in sex-typed behaviour by family type, though Goldberg et al (2012) found less sex-typed behaviour among children with same-sex parents. Specifically, findings indicated less feminine play among girls with gay fathers.

A recent study (Golombok & Mellish et al., 2014) of adoptive gay father families indicated more positive parenting in gay father families relative to heterosexual parent families, and greater child externalising problems among children in heterosexual parent families. Gay fathers included in the study showed greater warmth and amounts of interaction, lesser disciplinary aggression and higher levels of responsiveness. These findings are consistent with earlier research reporting quality parenting and children's psychological wellbeing in adoptive gay father families (Averett et al., 2009, Erichet et al., 2009, Erich et al., 2005, Leung et al., 2005, Ryan, 2007, as cited in Golombok et al., 2014). An analysis of published accounts of the experiences of young people with gay or lesbian parents in the New Zealand, the United Kingdom and the United States indicated that problems they encountered almost always arose from the negative views of others (Fairtlough, 2008, as cited in Golombok & Tasker, 2010).

Father incarceration

Father incarceration complicates father involvement. Incarceration impacts on father-child relationships, relationships between parents and the capacity of fathers to contribute economically to their families. During incarceration contact with children is difficult and limited (Nurse, 2004), the majority of romantic relationships end (Western, et al., 2004, as cited in Roettger & Swisher, 2013), and the capacity of fathers to contribute economically to families is compromised (Edin et al., 2004, Griswold & Pearson, 2003, Hairston, 1998, Pager, 2003, 2007, as cited in Roettger & Swisher, 2013). These are all factors that impact negatively on child outcomes. The exception is where incarceration results from extreme criminality or domestic violence, and father imprisonment may improve child outcomes (Nurse, 2002; Braman, 2004).

Cultural diversity

There is now recognition that fathering behaviours and their impacts are subject to much diversity among different ethnic and other groups (Lamb, 2013; Pattnaik, 2013). Fathers play a number of significant roles and the quality of their fathering is a function of their performance in these various roles and the relative importance of those roles in their particular cultural context (Lamb, 2010). While fatherhood and paternal involvement have begun to be investigated in much broader ways, there remains a relative dearth of literature relating to cultural variations in concepts of fatherhood (Lamb, 2000).

The role of fathers in child development

The impact of father involvement

The evidence overwhelmingly demonstrates that father involvement positively impacts on child development (Amato & Gilbreth, 1999, Belsky, 1996, Furstenberg & Harris, 1993, Lamb, 1997, Parke, 1996, 2002, Yeung et al., 2000, as cited in Tamis-LeMonda & Cabrera, 2002; Tamis-LeMonda & McFadden, 2010).

Fathers influence their children's development both directly (e.g. through their behaviours and attitudes) and indirectly. Indirect influences include the level of emotional and other support they provide to mothers and their economic support of the family and therefore the socio-economic circumstances within which children grow and develop (Lamb, 2010). There is now a common understanding that indirect influences are of huge importance (Lamb, 2010).

It has been well demonstrated that there are many positive benefits of high levels of father involvement in child care when this is the preference of both parents (Pleck, 1997; Pruett, 1983, 1985, Radin, 1982,1994, as cited in Lamb, 2010). There is, however, evidence that when fathers have been forced to become more involved (e.g. because they were laid off work) there were instead adverse affects on children (Lamb, 2010).

Mechanisms through which father involvement impacts

Adjustment is a broad term that encapsulates personal characteristics that enable people to function well in their daily lives. The term also includes the absense of behavioural problems and psychological or psychiatric symptoms. After reviewing hundreds of studies, Lamb (2012) concluded that psychological adjusment in children is substantially affected by three factors. First, the quality of parenting and parent-child relationships. Second, the quality of relationships between the parents. Third, the socio-economic resources available to the family. These factors explain child adjustment regardless of family structure (e.g. single-parent families, stepparent families etc) once process variables have been controlled for. Put another way, it is these factors rather than family structure per se that affect psychological adjustment (Amato, 2005, Crawford et al., 2011, Goodman & Greaves, 2010, Kiernan & Mensah, 2010, Lansford, et al., 2001, as cited in Lamb, 2012). This is supported by research using data from the Christchurch Health and Development Study that shows that the social and economic functioning of families is what is important, rather than the single-parent family structure (Fergusson, 2007, as cited in Luketina et al., 2009). Further, father or male parent absence is not in itself a cause of increased levels of maladjustment among children living in one parent families. Rather, it is the quality of the parent-child relationships, the quality of the relationship between the parents and the greater likelihood of inadequate family resources in one parent families (Lamb, 2012).

The associations between parental warmth and the extent of adjustment have been well established (e.g. Collins et al., 2002, Steinberg & Silk, 2002, as cited in Lamb, 2012).

Different types of parental socialisation have been shown to impact the social skills of children among peers and with adults. The "authoritative" parenting style characterised by warmth, moderate control, respect for child autonomy and self control was demonstrated by Baumrind to promote social competence among children (Baumrind, 1971, 1975, as cited in Lamb, 2012). The high value of authoritative parenting has been demonstrated in subsequent studies for young and older children, and for adolescents (Barber, 2001, Collins et al., 2002, as cited in Lamb, 2012).

The quality of the relationships of parents (i.e. harmonious or conflicting) impacts positively or negatively on child wellbeing including child and adolescent adjustment (Cummings, Merrilees et al., 2010).

Lamb (2012) identifies a huge literature on the risks to children raised in poverty, and socio-eonomic status is recognised as a key determinant of child development (e.g. Cawson et al., 2000, Radford et al., 2011, Sedlak et al., 2010, Arrighi & Maume, 2007, Brooks-Gunn et al., 2000, Hansen et al., 2010, as cited in Lamb, 2012).

Child development outcomes

Mental, emotional and social wellbeing

A meta-analysis of 52 studies of nonresident father involvement and child wellbeing found that positive father involvement was linked to child wellbeing, in particular social wellbeing, emotional wellbeing, academic achievement and behavioural adjustment (Adamsons & Johnson, 2013).

In an extensive review of the literature, Allen and Daly (2007) demonstrated that father involvement was associated with positive impacts on children's; cognitive development, school performance and retention, problem solving abilities, emotional development, appropriate management of emotions, self-acceptance and reduced depression, social development, positive peer relations, higher tolerance and less agression, empathetic concern, and physical health.

Many aspects of psychological adjustment and emotional development and wellbeing for children from infancy through to adulthood, were positively associated with father involvement (Hoffman, 1971, Parke & Swain, 1975, Kotelchuck, 1976, Lamb, 1987, Mischel et al., 1988, Biller, 1993, Furstenberg & Harris, 1993, Radin, 1994, Field, et al., 1995, Mosley & Thompson, 1995, Zimmerman et al., 1995, Pruett, 1997, Harris et al., 1998, Williams & Radin, 1999, Ross & Broh, 2000, Veneziano, 2000, Dubowitz et al., 2001, King, 2006, Formoso et al., 2007, cited in Allen & Daly, 2007). For example, five-year-old children whose fathers are sensitive to their emotional states, show higher social competence three years later (Gottman et al., 1997, cited in Lamb, 2013). Links have been shown between father involvement at five years and the feelings of children when they are in their early 30s (Koestner et al., 1990). The self-worth of teenagers is associated with the quality of their play with their fathers 13 years previously (Grossmann et al., 2002). Further, children of warm and affectionate fathers have a

higher likelihood of being well adjusted at age 41 in terms of mental health, coping and psychosocial maturity (Franz et al., 1994, cited in Lamb & Lewis, 2013).

Father involvement is linked to children's social competence, social initiative, social maturity, and their abilities to relate to others (Amato, 1987, Forehand & Nousiainen, 1993, Gottfried et al., 1988, Krampe & Fairweather, 1993, Mischel et al., 1988, Parke, 1996, Snarey, 1993, Stolz et al., 2005, cited in Allen & Daly, 2007). Fathers' acceptance and assistance when their five year old children are upset (sad or angry) is associated with their social competence three years later (Gottman et al., 1997, cited in Cabrera & Tamis-LeMonda, 2013). There is less negativity among girls, and less aggression among boys. Adolescents who are securely attached to their fathers report less conflict in their interactions with peers (Ducharme et al., 2002). Similarly for adolescents, levels of father involvement are positively linked to friendships and peer experiences (Updegraff et al., 2001, cited in Allen & Daly, 2007). In contrast, negative paternal affect such as high hostility, negatively influenced adolescent social behaviour including their levels of hostility and ego resilience (Paley, 2000, cited in Allen & Daly, 2007; Allen et al., 2002, cited in Cabrera & Tamis-LeMonda, 2013). In reviewing the literature, Leidy et al (2013) conclude that,

> …in the context of father-child interaction, children learn not only the communicative value of emotions for modifying others' behaviour during social exchanges, but also important lessons in emotional regulation as well. These "emotion lessons" in turn, contribute positively to children's social development. (p.156)

In a review of 10 research projects using Millennium Cohort Study data it was concluded that father involvement positively influences child mental health. There was particularly strong evidence in the studies for the relationship between father accessibility and child mental wellbeing (Dex & Ward, 2007, Emerson et al., 2010, Essex & Pickett, 2008, George, Hansen, & Schoon, 2007, Kiernan & Mensah, 2009, Kiernan & Pickett, 2006, Mensah & Kiernan, 2009, 2010, Sullivan et al., 2010, cited in Twamley, et al., 2013).

Father involvement is protective against many behavioural problems (Amato & Rivera, 1999, Howard et al., 2006, cited in Allen & Daly, 2007) and risky behaviours including conduct disorder and hyperactivity (Flouri, 2005, cited in Allen & Daly, 2007), delinquency (Barnes, 1984, Harris et al., 1998b, Zimmerman et al., 1995a, cited in Allen & Daly, 2007) and substance abuse among adolescents (Coombs & Landsverk, 1988). It is also linked to decreased externalising and internalising symptoms including disruptive and antisocial behaviour, sadness and depression, and lying (Flouri & Buchanan, 2002, King & Sobolewski, 2006, Mosley & Thompson, 1995, Peterson & Zill, 1986, cited in Allen & Daly, 2007). Father involvement is linked to reduced bullying behaviour, and was protective against extreme victimisation from bullying (Flouri, 2005, cited in Allen & Daly, 2007).

A systematic review of longitudinal studies (Sarkadi et al., 2008) found that father engagement reduces the frequency of behavioural problems among boys, and psychological problems among young women. Among low socioeconomic families, the review found that father engagement improved cognitive development while concurrently decreasing delinquency and economic disadvantage .

Strong identification with fathers among adolescents was protective against incarceration (80% less likely) and becoming unwed parents (75% less likely) (Furstenberg & Harris, 1993, cited in Allen & Daly, 2007). Father involvement among 7-year-old children protected against socio-economic disadvantage at age 33, and children were less likely to have been homeless, received state benefits or lived in subsidised housing (Flouri, 2005, cited in Allen & Daly, 2007).

Lack of father involvement due to incarceration is associated with family instability, chronic poverty, and other factors that lead to poor development outcomes among young people (Foster & Hagan, 2007, Giordano, 2010, Hagan & Palloni, 1990, Wilson, 2003, cited in Pattnaik, 2013). For example, father incarceration during the first 10 years of a boy's life led to more internalising problems as men (Murray & Farrington, 2008).

Cognitive development

Sarkadi et al (2008) carried out a systematic review of 24 longitudinal studies involving 22,300 children. Twenty-one of the studies showed positive effects of father involvement on child cognitive and personality development.

For preschool age children, having supportive fathers is linked to positive language and cognitive development (Cabrera et al., 2007, cited in Lamb & Lewis, 2013). At school age the children of involved fathers show higher academic performance across a range of measures (Astone & McLanahan, 1991, Blanchard & Biller, 1971, Cooksey & Fondell, 1996, Feldman & Wentzel, 1990, Gadsden & Ray, 2003, Goldstein, 1982, Gottfried, et al., 1988, Howard et al., 2006, McBride et al., 2005, Shinn, 1978, Snarey, 1993, Wentzel & Feldman, 1993, cited in Allen & Daly, 2007).

Following a review of the evidence, Cabrera et al (2013) concluded that the the quality of fathers' interactions (e.g. levels of sensitivity and support) and particular features of their language can predict children's language and cognition. Children benefit from interacting with fathers who are sensitively attuned to their cues, who frequently engage in activities such as book reading, who use relatively large vocabularies, and who use language to express a range of communicative functions (Tamis-LeMonda et al., 2013).

Warmth and parental control by both mothers and fathers in children's life and education has been associated with increased persistence, effort and performance as well as fewer behavioural problems at school (Amato & Fowler, 2002, Collins et al., 2000, Lamb & Lewis, 2011, Nord & Zill, 1996, J. Pleck, 2010, Simons, 1996, cited in Lamb, 2012).

Among adolescent boys, the academic support of fathers was associated with academic motivation, and the valuing of grades and education (Alfaro et al., 2006, cited in Allen & Daly, 2007). Children of adolescent mothers showed better socioemotional and academic functioning with father contact (Howard et al., 2006, cited in Allen & Daly, 2007). Research has also shown that children of involved fathers were more likely to enjoy school and have positive attitudes regarding school (Flouri, 2005, Flouri et al., 2002, cited in Allen & Daly, 2007).

Paternal involvement is also linked to higher child IQs (Gottfried et al., 1988, Honzik, 1967, Radin, 1972, Shinn, 1978, cited in Allen & Daly, 2007). An association between early father involvement and IQ at 11 years was reported by Nettle (2008) and Lamb & Lewis (2013).

Positive outcomes were sustained into adolescence and adulthood. Children with involved fathers show a greater likelihood of high educational expectations, higher economic and educational achievement and outcomes, career success, occupational competency and psychological wellbeing (Amato, 1994, Barber & Thomas, 1986, Barnett etc., 1992a, Bell, 1969, Flouri, 2005, Furstenberg & Harris, 1993, Harris et al., 1998, Lozoff, 1974, Snarey, 1993, cited in Allen & Daly, 2007).

What works? – engaging fathers in parenting

Key factors have been identified in the literature that influence the way in which men undertake their fathering roles and responsibilities and build father-child relationships (Hoffman, 2011). This section briefly highlights these types of factors, alongside evidence about what works in engaging fathers in parenting and educating them about children and parenting. Because there is only a very small literature base specifically around what works for fathers, this section also draws upon evaluations and reports on parenting programmes generally.

The purpose of parenting programmes has been described as:

> *enhancing parenting practices and behaviors, such as developing and practicing positive discipline techniques, learning age-appropriate child development skills and milestones, promoting positive play and interaction between parents and children, and locating and accessing community services and supports.*
> *https://www.childwelfare.gov/preventing/programs/types/parented.cfm*

United States research (Child Welfare Information Gateway, 2013) has identified the following key characteristics as predictors of programme effectiveness – strengths-based focus; family-centred practice (this includes use of culturally-appropriate strategies); a combination of individual and group approaches; well-qualified staff (including cultural competence); targetting of programmes; and clear programme goals and ongoing evaluation. As well, the following evidence-based strategies to reinforce protective factors were identified – encouragment of peer support, promotion of positive family interaction, use of interactive training techniques, provision of opportunities to practice new skills, and the involvement of fathers. On that last point, There is evidence (Lundahlet al., 2007, cited in Kelly, 2014) that involving fathers in parenting programmes improves outcomes and family cooperation and cohesion. Programmes that exclude fathers are less likely to be successful.

Socio-economic resources

A research review by Doherty et al (1998) indicated that fathering is contextually sensitive, that is, that external factors have a greater influence on fathers than mothers in terms of their level of engagement and investment in their role as parents. According to Hoffman (2011):

> *It is not that any single challenge – unemployment, insufficient social support...or living apart from children after separation – will prevent a man from taking on the kind of fathering role his family needs. However, a father may be severely challenged if negative contextual influences cluster together...with other factors...such as poverty, lack of education, addiction, mental illness or racism. (pp.11-12)*

Doherty et al (1998) opined that initiatives focusing only on fathers (e.g. parenting skills, understandings of child development etc.) will inequitably benefit those men whose social and economic environments are already supportive. Those whose social and

economic environments are difficult (e.g. non-resident fathers, fathers living in poverty, fathers living with mental illness, incarcerated fathers) will not enjoy equal benefits. It may be unrealistic to expect men to be involved fathers if they are struggling to meet the challenges of day-to-day living. In these types of circumstances, policies, programmes and practices are required that address the social and economic barriers to father involvement.

Among the conclusions of a review of Canadian fathers' programmes (Hoffman, 2011), was that vulnerable fathers (e.g. indigenous and young fathers) require intensive interventions that provide support at multiple levels (i.e. employment, education, partner relationships etc.) in addition to efforts to increase their understanding of children and enable positive parenting. The report also highlighted that promoting positive parenting among vulnerable fathers would be more effective when combined with services that support them to deal with their life challenges.

Raising community and societal awareness

The ProsPere project was carried out over 10 years and involved development, implementation and evaluation of projects for low income fathers in Quebec. The initial strategies used in the two selected communities were raising awareness in order to move along community thinking about fathers as a start point, to mobilising the communities and fathers towards positive father involvement.

The research found that promoting the role of fathers (i.e. through a media campaign and children's art project) increased community leader support, created increased openness to working with fathers among practitioners and increased the participation of fathers in the programmes and social activities (Dubeau et al., 2009, cited in Hoffman, 2011).

Reorientation of services

Based on a review of key evidence-based documents about programming for fathers, Hoffman (2011) identified best practices for organisations that included the following:
- Recognise that it takes time and effort for organisations to learn how to work with fathers
- Raise community and societal awareness about the importance of fathers
- Assess your organisation's 'father friendliness'
- Include fathers meaningfully in planning and delivery of services
- Adapt your organisation's strategies and services to the realities of fathers
- Work from fathers' strengths
- Build partnerships with other service providers

Adopting these practices will facilitate reorientation of services such that they are better able to engage with fathers and strengthen father involvement.

Transition to parenthood

The transition to parenthood has been identified as a critical period for intervention to support father involvement, and is also a time when fathers have high needs for support (Luketina et al., 2009; Bryanton et al., 2013; Mitchell & Chapman, 2006). Although there is no consensus in the literature around the benefits of transition to parenthood programmes for parents and newborns (Bryanton et al., 2013), fathers have reported feeling uninformed and ill-prepared for their new role (Luketina et al., 2009; Mitchell & Chapman, 2006).

> *Some fathers found themselves unprepared for fatherhood and would have appreciated more pre-birth and post-birth training that included information on the implications for them. They wanted the processes surrounding the birth of the baby to be more inclusive and welcoming of them. They wanted to help their partners following the birth, but felt peripheral and excluded. Some of them felt bewildered by their loss of freedom at the birth of their first child, and wished they could have been better prepared. (Luketina et al., 2009, p.18)*

Studies suggest that younger, first-time parents are more likely to benefit from parenting programmes (Social Policy Evaluation and Research Unit, 2014).

Fathers' attitudes

Personal attitudes and traits (e.g. openness, sociability and extroversion) influence father involvement (Tourcotte et al., 2001, cited in Hoffman, 2011). Home-visiting and parenting education and support programmes have been shown to have small to moderate positive effects on children's health and development, and on parents' behaviours, attitudes and beliefs (Social Policy Evaluation and Research Unit, 2014).

Quality of relationships between parents

Good relationships between parents and supportive co-parenting contribute to increased father involvement and good parenting practices among fathers (Cowan & Cowan, 2009). The Supporting Father Involvement Programme was developed out of a 30-year research project that demonstrated that an intervention focussed on the couple relationship reduces marital stress, increases father involvement, improves parenting and is linked with cognitive and social gains for children (Cowan & Cowan, 2009). The intervention focuses almost exclusively on the parents' relationship and runs over 16 weeks.

A 2011 Canadian survey of programmes for fathers found that recruitment of fathers into interventions was difficult, but that the most successful strategy was providing information to mothers to pass on to their partners (Hoffman, 2011).

Fathers support for mothers

One of the indirect pathways through which father involvement affects child development is through the support they provide to mothers. The benefits of that support are well documented in the literature (Pedersen, 1975; Feldman et al., 1997; Lamb, 2010). Prenatal and new-parent education and resources should provide information about how fathers can support new mothers (e.g. in caring for infants, breastfeeding

success, to seek help for postnatal depression) and the importance of that support (Hoffman, 2011).

Parent-child relationships and quality of parenting

Most infants form attachments to their fathers, and just less than two-thirds of attachments are secure (e.g. Ahnert, 2006, cited in Lamb & Lewis 2013). The security of infant-father attachment (Van IJzendoorn & De Wolff, 1977, cited in Lamb & Lewis, 2013) is a function of father sensitivity (i.e. responsiveness and affection). Differences in father sensitivity may be related to personal characteristics, perceptions of early experiences and the adverse impacts of stress (Lamb &Lewis, 2013).

Parents should understand the importance of father-child attachment. Based on reviews of the literature it has been recommended that father-child relationships be included in prenatal and early parenting education curriculum and resources (Hoffman, 2011). A meta-analysis of sensitivity and attachment intervention in early childhood found that attachment interventions to improve positive parenting were more effective when fathers were included (Bakermans-Kraneburg et al., 2003). A review of research assessing the effectiveness of 12 interventions for fathers and their babies and toddlers, identified those programmes that involve fathers' active participation with their children as most promising (Magill-Evans et al., 2006).

Indigenous fathers

First Nations' fathers in Canada have identified the need for community-based services for fathers and political bodies to support healing programmes, undertake work to reduce negative stereotypes of indigenous fathers and families, and outreach to support fathers in learning about fatherhood (Ball & George, 2006).

The Strong Fathers Strong Families (SFSF) programme is a flagship Australian intervention for Aboriginal and Torres Strait Islander fathers. Strong Fathers Strong Families promotes the role of Aboriginal and Torres Strait Islander fathers, partners, grandfathers and uncles, and encourages them to actively participate in their children's and families' lives, particularly in the antenatal period and early childhood development years (Government of Australia, 2013).

According to stakeholders, participation in the programme delivered a number of positive outcomes for men, including:
- increased self-esteem
- improved health outcomes and increased health literacy
- improved access to services
- education, training and employment opportunities
- increased connection to community and willingness to share issues and concerns
- strengthened connection to culture.

At a community-level, stakeholders reported that the programme improved networks and partnerships among key community stakeholders. Knowledge and skills gained by men

through participation in the programme also reportedly had a flow-on effect in the home, improving family and community relations.

This research identified key success factors associated with an effective SFSF programme including:

- a respected and well-connected SFSF Coordinator
- an implementing organisation that can adequately support the SFSF Coordinator and is committed to delivering the programme in a culturally-appropriate way.
- strong partnerships with other community organisations and key community members, including elders
- a focus on holistic support for men
- a structured programme that is consistent and meets the needs of the local community
- an incremental approach to discussing and dealing with sensitive issues
- practical, hands-on activities (e.g. fitness, cooking).

Teenage fathers

New Zealand research shows teen fathers feel isolated from support and advice about being a father, and they have been neglected by services (Ministry of Social Development, 2010). The Ministry of Social Development (2010) identified evidence from local and overseas studies of ways to effectively work with teen fathers:

- having positive attitude toward them as young men and fathers is one of the most critical principles (King et al., 2005);
- delivering services in ways that are appropriate to teen fathers, their culture and their age (Bronte-Tinkew et al., 2008);
- focusing on the significance and value of fathers' relationships with their children is also important (Bronte-Tinkew et al., 2008);
- ensuring the service is responsive to the needs and preferences of young men, such as through male-focused approaches (King et al., 2005);
- addressing the broader needs as well, even when programmes are intended to deal with a specific issue, as they are then likely to be more effective (Barwick, 2004).

One of the few services offered to teen fathers in New Zealand is the Ministry of Social Development-sponsored Christchurch Teen Dads Programme administered by the Waipuna Youth and Community Trust and Father & Child Trust. These trusts advocate for optimal benefits for children, mothers and fathers working together cooperatively. (http://fatherandchild.org.nz/projects/teen-dads/teen-dads-chch/).

We sincerely hope that this new way of providing services to teen parents will, in the long run, become a model for most publicly funded teen parent's services, rather than a specialised

Māori Fathers

Qualitative research indicates that Māori parents have difficulty accessing information they need about parenting (Strickett, 2012). Echoing Māori community concerns, Māori academics have also emphasised the need for parenting programmes for Māori whānau to be consistent with principles, values and beliefs aligned to Māori worldviews (Herbert, 2011, Cram, 2012, Cargo, 2008, Pihama, 2012, cited in Social Policy Evaluation and Research Unit, 2014). They have also expressed concerns about the acceptability and effectiveness of programmes based within Western worldviews for Māori (Altena & Herewini, 2009, Cargo, 2008, Durie 2004, 2006, cited in Sturrock & Gray, 2013).

In response to these concerns both culturally-adapted and kaupapa Māori parenting programmes have been developed. Kelly (2014) identified the main ways in which programmes located within a Western worldview have been adapted for Māori – the application of tikanga Māori (Māori process) within programmes, delivery on marae, incorporation of Māori language, and delivery by Māori facilitators. Herbert, in comparing the effectiveness of a standard parent-training programme versus two culturally-adapted programmes concluded that parenting outcomes improved in both types of programmes. She did, however, find that participants found the adapted programmes more enjoyable and they were better attended and had better retention rates (Herbert, 2001).

Herbert (2011) reviewed literature about the most effective ways to engage, motivate, and maintain parenting changes among Māori. She identified the following themes – the value of including parenting programmes within broader health and social service contracts (Herbert, 2001; Gifford & Pirikahu, 2008), household and whānau approaches as opposed to parents and individual approaches, the potential of programmes that integrate parenting skills and Māori cultural values, and the value of role models.

There is very little rigorous research assessing the effectiveness of culturally-adapted or kaupapa Māori parenting programmes. Most studies evaluate pilot programmes or programme implementation. Greater priority needs to be accorded to building an evidence base through evaluation of new and existing programmes, in order to inform future programme development and delivery. The following two sections summarise existing research on the effectiveness of parenting programmes for Māori. The extent of father involvement in these programmes was generally not identified.

Research on parenting programmes observed that the engagement and retention of parents in programmes is more likely when programmes take account of their culture. Some programmes have been developed specifically for Māori, using Māori conceptual frameworks (e.g. Whānau Toko i te Ora and Te Atawhaingia te Pā Harakeke), and some international programmes have been adapted for different cultural groups. Relatively

little research has considered the effectiveness of parenting programmes specifically designed for Māori fathers. Further programme development, research and evaluation is required, particularly given the over-representation of Māori in the vulnerable children population and some evidence that Māori fathers consider that they had insufficient information about fathering (Luketina et al., 2009).

Parenting programmes adapted for Māori

Parents as First Teachers (PAFT)

The PAFT programme is an adaption of a United States programme based on research from Harvard University. The low-intensity home-visitation parent-education and family support programme is delivered to at-risk families with children aged up to three years. The programme aims to support families to participate more actively in their children's early development and learning (Social Policy Evaluation and Research Unit, 2014). A Ministry of Social Development rapid review of PAFT (Praat et al., 2010) found that higher-income nuclear families and European mothers were better engaged with the programme. Analysis did, however, suggest that there may have been vision and conduct benefits for families with Māori mothers.

The Incredible Years Parenting Programme

The Incredible Years Parenting Programme is an evidence-based initiative developed in the United States and adapted for delivery among Māori. The programme focuses on parent training, teacher training, child social skills, and emotion and problem solving training (Sturrock & Gray, 2013). A finding of an evaluation of the programme (Cargo, 2008) was that Māori were concerned that culturally-adapted programmes are philosophically underpinned by beliefs and values of other cultural groups and may be at times at odds with Māori values. Further, Māori expressed preferences for programme delivery by Māori. Research findings also indicated that cultural responsiveness of the programme is heavily reliant on the skills of facilitators (Webster-Stratton, 2007, Berryman et al., 2009 cited in Kelly, 2014).

Both Māori participants and facilitators found engagement with the programme difficult at times, and resources used by the programme were not adequately adapted to the New Zealand context (Berryman, Woller et al., 2009). Māori facilitators raised concerns about having no options in terms of what is delivered, a lack of acknowledgment of their indigenous status, and that uniquely Māori practices are not taken into account.

At a series of annual hui for the programme's Māori Group Leaders (e.g. Werry Centre 2008, 2010, cited in Sturrock & Gray, 2013), participants have consistently advocated for measures to embed their delivery strategies for Māori in the programme to ensure the best results for whānau. In 2012 the Werry Centre (2012 cited in Sturrock & Gray, 2013) published resources for Māori Group Leaders, developed in collaboration with experienced Māori Group Leaders and kaumātua. Principles of engagement are also provided to non-Māori facilitators to guide their work with whānau.

A 2013 programme review report (Sturrock & Gray, 2013) included findings from an independent kaupapa Māori evaluation. The Māori programme evaluators (Berryman et al., 2012, cited in Sturrock & Gray, 2013) noted that many of the Māori facilitators delivering the programme had high levels of Māori knowledge, and indicated that in delivering the programme they themselves adapted it to Māori preferences in order to better engage whānau. Evaluation findings indicated the importance of sufficient time and resources to enable culturally-skilled facilitators to connect with whānau and adapt programme delivery. The report concluded that while the Incredible Years Programme was potentially effective for Māori, further work is required to increase the responsiveness of the intervention to better ensure its optimal effectiveness for Māori families. This is consistent with international evidence of the importance of cultural competency. For example, a recent systematic review of appraisals of interventions to improve cultural competency in healthcare found evidence of improvements in patient outcomes (Truong et al., 2014).

Hoki ki te Rito

Hoki ki te Rito (Mellow Parenting Programme) is an intensive parenting course to support families experiencing relationship problems with their infants and young children (Social Policy Evaluation and Research Unit, 2014). The programme is delivered to mothers for one full day per week over a 14 week period. The programme was adapted to align with the following Māori principles - 'aroha ki te tangata' (to express kindness towards people); 'kanohi ki te kanohi' (face-to-face); titiro, whakarongo, kōrero (look, listen, speak); manaaki ki te tangata (to care for and look after people); and, kaua e takahi i te mana o ngā tangata (don't trample the feelings of others). Evaluation findings indicated improvements in maternal mental health and reduced stress levels when parenting (Penehira & Doherty, 2013, cited in Social Policy Evaluation and Research Unit, 2014). Participants attributed changes made to being respected, listened to and learning anger management.

Kaupapa Māori parenting programmes

The engagement and retention of parents in parenting programmes is more likely to be achieved when programmes take account of potential participants' culture. Kaupapa Māori parenting programmes are explicitly located within a Māori worldview, and are therefore inherently consistent with Māori beliefs and values. There are few programmes specifically designed for Māori fathers and there is a dearth of rigorous programme evaluation. Further programme development, research and evaluation are required.

Tikanga Whakatipu Ririki

Mana Ririki is a national Māori child advocacy body that seeks to eliminate child abuse within two generations. The organisation's parenting model Tikanga Whakatipu Ririki is a framework for violence-free parenting for whānau that is founded on pūrākau (cultural stories that express Māori worldviews and carry cultural values). Pūrākau provide signposts to enable participants to navigate relationships as they establish cultural norms based on Māori principles (Kelly, 2014).

A train-the-trainer approach is taken, whereby Mana Ririki provides training in Tikanga Whakatipu Ririki to providers who then use it as a training tool in their work with whānau. There are three training modules. The parenting programme based on the model is being evaluated in stages using a kaupapa Māori methodology. An initial report by Kelly et al., (2014) evaluates module two which involves six two-hour workshops for groups. The evaluators concluded that programme participation led to improvements in parenting behaviour, and strengthened cultural awareness and connection. Parents indicated that they had participated in the programme because it offered a Māori parenting perspective and took a strengths-based approach. Initial whānau engagement was facilitated through the provision of transport and incentives, but ongoing engagement was attributed by whānau to the content and parenting empowerment as Māori.

The model used kaupapa Māori principles (e.g. tino rangatiratanga/self-determination, taonga tuku iho/cultural aspiration, ako Māori/culturally preferred pedagogy) to enable whānau enlightenment. Essentially this is a strengths-based approach that locates the programme within a Māori worldview that resonates with participants. It also enables whānau to understand Māori worldviews and their application to contemporary circumstances and to parenting.

The evaluation identified a number of domains within which whānau were empowered through their participation in the programme; that in the main related to their identity as Māori, as parents, and as Māori parents. Further, involvement normalised their parenting anxieties and supported them to learn and take on a new belief system. Whanaungatanga with programme staff and other participants was identified as important, and those taking part requested further parenting support from Mana Ririki.

Whānau Toko i te Ora

The Whānau Toko i te Ora national parenting programme is an initiative of the Māori Women's Welfare League that involves intensive home-based parenting support for families with young children (Livingston, 2002, cited in Social Policy Evaluation and Research Unit, 2014). Participants reported to evaluators that programme impacts included: improved relationships between parents and children; improved parenting skills; increased access to health services, housing and transport; greater Māori language use; and improved Māori community connections, including with marae.

Features of the programme identified as underpinning its success were – it is broadly based and goals are negotiated with individual whānau; it is delivered over an extended period, allowing time for whānau change; targeting of whānau with high needs; flexibility, including with regard to timing of visits and the way resources are used; and, strong commitment by kaiāwhina who are highly regarded by participants (Livingston 2002, cited in Social Policy Evaluation and Research Unit, 2014).

Additional strengths of the programme have been identified as: the incorporation of cultural knowledge and practices, the strengths-based approach, and the use of Māori facilitators to enhance cultural responsiveness, create cultural links and to validate knowledge (Kelly, 2014).

Te Atawahingia te Pā Harakeke

A strand of Te Atawahingia te Pā Harakeke was run at the Rimutaka and New Plymouth men's prisons and evaluated in 1999 (Young et al., 1999, cited in Social Policy Evaluation and Research Unit, 2014). According to the Māori evaluation team, introducing a tikanga Māori programme within the prison system was challenging. Evaluator's recommended further work to strengthen Māori identity and links to whānau, hapū and iwi for participants. Evaluation findings concluded that the programme had potential as an intervention to reduce family violence, including its intergenerational transmission.

Concluding comments

There are fundamental gaps in the literature about Māori father involvement, including Māori fathering in the context of whānau. We have little understanding of how Māori conceptualise fatherhood and father involvement, and what the issues are for Māori men from their own perspectives. Further, there is little research about what constitutes best practice in terms of effective parenting programmes for Māori fathers.

What we do know is that Māori fathers face substantial barriers to fully engaging in their role as fathers. While many of these barriers are systemic and will need to be addressed through multifactorial structural interventions, there are also promising and less complex strategies to more directly promote Māori father involvement. These strategies include raising community awareness about the role of Māori fathers, reorientation of existing services towards the needs and preferences of Māori fathers, programmes that support couple relationships, and tailored information provision. In terms of parenting programmes, research indicates that there is value in both culturally-adapted generic interventions and kaupapa Māori programmes. It is, however, kaupapa Māori programmes that best meet the expressed preferences of Māori fathers and Māori communities given that they are inherently strengths based, aligned to Māori worldviews and driven by Māori.

Whatever strategies or initiatives are adopted, they will need to be targeted to the lived realities of Māori men if they are to be successfully engaged. Specific support for Māori men who are transitioning as first time fathers and teenage fathers have been highlighted as important (e.g. to address poor access to parenting information and antenatal classes). As well there is a need to engage with the group of Māori men aged around 21-45 who are 'workers' in Māori contexts, to support the adoption of positive fathering values and develop positive role models within Māori communities. A further group that require specific support are incarcerated Māori men.

The overall conclusion from this review is that while there is a pressing need to fill knowledge gaps, we know enough to provide much stronger and immediate support for Māori men to better enable them to fulfil their aspirations to be the best fathers that they can be. Successful Māori father involvement intervention has the potential to make a real and substantial difference to the lives of Māori fathers, mothers, children, whānau and future generations of Māori.

References

Adamsons, K., & Johnson, S. K. (2013). An updated and expanded meta-analysis of nonresident fathering and child well-being. *Journal of Family Psychology,* 27(4), 589-599. doi: 10.1037/a0033786

Allen, S., & Daly, K. (2007). The effects of father involvement: an updated research summary of the evidence. Guelph: Center for Families, Work, & Well Being, University of Guelph.

Australian Insitute of Health and Welfare. (2012). A picture of Australia's children 2012. Canberra: Australian Insitute of Health and Welfare.

Bakermans-Kraneburg, M. J., Van Ijzendoorn, M. H., & Juffer, F. (2003). Less is more: meta-analyses of sensitivity and attachment interventions in early childhood. *Psychological Bulletin,* 129(2), 195-215.

Ball, J. (2005). Early childhood care and development program as hook and hub for intersectoral service delivery in aboriginal communities. *Journal of Aboriginal Health*, 2(1), 36-50.

Ball, J. (2009). Fathering in the shadows: indigenous fathers and Canada's colonial legacies. *ANNALS of the American Academy of Political and Social Science,* 624(1), 29-48. doi: 10.1177/0002716209334181

Ball, J. (2010). Indigenous fathers' involvement in reconstituting "circles of care". *American Journal of Community Psychology* 45(1-2), 124-138.

Ball, J. (2012). 'We could be the turn-around generation': harnessing aboriginal fathers' potential to contribute to their children's well-being. *Journal of Paediatrics and Child Health,* 17(7) 373.

Ball, J., & George, R. (2006). Policies and practices affecting aboriginal fathers' involvement with their children. *APR*. 3(7):2. Ottawa.

Barwick, H. (2004). Young males: strengths-based and male-focused approaches: review of the research and best evidence. Retrieved from http://www.myd.govt.nz/about-myd/publications/young-males-strengths.html

Berryman, M., Woller, P., & Glynn, T. (2009). The incredible years: learning from the experiences of Māori whānau and Māori staff in special education. Evaluation report prepared for the Ministry of Education, Special Education, 2009. Tauranga: Poutama Pounamu.

Braman, D. (2004). *Doing time on the outside: incarceration and family life in urban America*. Ann Arbor: University of Michigan Press.

Bramley, D., Broad, J., Harris, R., Reid, P., & Jackson, R. (2003). Differences in patterns of alcohol consumption between Maori and non-Maori in Aotearoa (New Zealand). *The New Zealand Medical Journal,* 116(1184) 1-17.

Bronte-Tinkew, J., Burkhauser, M., & Metz, A. (2008). Elements of promising practice in teen fatherhood programs: evidence-based and evidence-informed research findings on what works. Retrieved from http://dcfs.co.la.ca.us/katieA/docs/EPP.pdf

Bryanton, J., Beck, C. T., & Montelpare, W. (2013). Postnatal parental education for optimizing infant general health and parent-infant relationships. *Cochrane Database of Systematic Reviews* (11). doi: 10.1002/14651858.CD004068.pub4

Cabrera, N., Ryan, R., Shannon, J. D., Brooks-Gunn, J., Vogel, C., Raikes, H. (2004). Fathers in the Early Head Start national research and evaluation study: how are they involved with their children? *Fathering: a Journal of Theory, Research, and Practice about Men as Fathers* 2(1), 5-30.

Cabrera, N. J., & C. S. Tamis-LeMonda (Eds.) (2013). *Handbook of father involvement: multidisciplinary perspectives (2nd ed.)*. New York: Routledge.

Loxley, J., DeRiviere, L., Prakash, T., Blackstock, C., Wien, F., Thomas Prokop, S. (2005). The journey continues: national policy review on First Nations child and services. Research project - phase three. Ottawa: First Nations Child & Family Caring Society of Canada.

Child Welfare Information Gateway. (2013). Parent education to strengthen families and reduce the risk of maltreatment. Retrieved September 2013, from https://www.childwelfare.gov/preventing/programs/types/parented.cfm

Coombs, R. H., & Landsverk, J. (1988). Parenting styles and substance use during childhood and adolescence. *Journal of Marriage and Family* 50(May), 473-482.

Cooper, E., & Wharewera-Mika, J. (2009). Maori child maltreatment. Auckland: Te Kāhui Mana Ririki.

Cowan, P. A., & Cowan, C. P. (2009). How working with couples fosters children's development: From prevention science to public policy. In M. S. Schulz, M. K. Pruett, P. K. Kerig & R. D. Parke (Eds.), *Strengthening couple relationships for optimal child development: lessons from research and intervention* (pp. 211-228). Washington, DC: APA Books.

Cram, F. (2012). Safety of Subsequent Children Project – Māori children and whānau: a review of selected literature. Wellington: Families Commission.

Cummings, E. M., Merrilees, C. E., & Ward George, M. (2010). Fathers, marriages, and families. In M. E. Lamb (Ed.), *The role of the father in child development* (pp. 154-176). Hoboken, New Jersey: John Wiley & Sons, Inc.

Davies, L., & Wereta, W. (2013). A demographic and statistical profile of whānau from 1975 to the present. In Families Commission, *Families and whānau status report: towards measuring the wellbeing of families and whānau* (pp. 65-94). Wellington: Families Commission.

Doherty, W. J., Kouneski, E. F., & Erickson, E. F. (1998). Responsible fathering: an overview and conceptual framework. *Journal of Marriage and Family* 60, 277-292.

Durie, E. T. (1998a). *Ethics and values*. Paper presented at the Te Oru Rangahau Māori Research and Development Conference, Massey University, Palmerson North.

Durie, M. H. (1998b). *Whaiora:Māori health development* (2nd ed.). Melbourne: Oxford University Press.

Families Commission. (2011). Teenage pregnancy and parenting: an overview. Wellington: Families Commission.

Farr, R., Forsell, S., & Patterson, C. (2010). Parenting and child development in adoptive families: does parental sexual orientation matter? *Applied Developmental Science* 14(3), 164-178. doi: 10.1080/10888691.2010.500958

Feldman, R., Greenbaum, C. W., Mayes, L. C., & Erlich, H. S. (1997). Change in mother-infant interactive behavior: relations to change in the mother, the infant, and the social context. *Infant Behavior and Development* 20(2), 153-165.

Gee, S., Stephens, M., Higgins, T., & Liu, J. (2003). Toku reo, toku mana! Toku reo, toku tuakiri! Toku reo, toku mauriora! Te reo, ethnic identity and wellbeing. *He Pūkenga Kōrero,* 7(2), 16-24.

Gifford, H., & Pirikahu, G. (2008). *Engaging Māori whānau: evaluation of a targeted parenting programme.* Wellington: Families Commission.

Goldberg, A., Kashy, D., & Smith, J. Z. (2012). Gender-typed play behavior in early childhood: adopted children with lesbian, gay, and heterosexual parents. *Sex Roles* 67, 503-515. doi: 10.1007/s11199-012-0198-3

Golombok, S., Mellish, L., Jennings, S., Casey, P., Tasker, F., & Lamb, M. E. (2014). Adoptive gay father families: parent-child relationships and children's psychological adjustment. *Child Dev, 85*(2), 456-468. doi: 10.1111/cdev.12155

Golombok, S., & Tasker, F. (2010). Gay fathers. In M. E. Lamb (Ed.), *The role of the father in child development* (pp. 319-339). Hoboken, New Jersey: John Wiley & Sons, Inc.

Government of Australia. (2013). Descriptive analysis of the Strong Families, Strong Fathers Programme. Final report. Retrieved from http://www.health.gov.au/internet/main/publishing.nsf/Content/oatsih-sfsf

Grossmann, K. E., Grossmann, K., Winter, M., & Zimmermann, P. (2002). Attachment relationships and appraisal of partnership: from early experience of sensitive support to later relationship representation. In L. Pulkkinen & A. Caspi (Eds.), *Paths to successful development* (pp. 73-105). Cambridge: Cambridge University Press.

Harris, K. M., Furstenberg, F. F., & Marmer, J. K. (1998). Paternal involvement with adolescents in intact families: the influence of fathers over the life course. *Demography,* 35(2), 201-216.

Herbert, A. M. L. (2001). *Whānau whakapakari: a Māori-centred approach to child rearing and parent-training programmes.* Unpublished doctoral dissertation, University of Waikato, Hamilton, New Zealand.

Herbert, A. M. L. (2011). Māori perspectives on parenting in Aotearoa New Zealand. In T. McIntosh & M. Mullolland (Eds.), *Māori and social issues* (pp. 67-87). Wellington: Huia Publishers.

Hoffman, J. (2011). *Father factors: what social science research tells us about fathers and how to work with them.* Peterborough: Father Involvement Research Alliance.

Hoffman, M. L. (1971). Father absence and conscience development. *Developmental Psychology,* 4(3), 400.

Hudson, M., Milne, M., Reynolds, P., Russel, K., & Smith, B. (2010). Te ara tika. Guidelines for Māori research ethics: a framework for researchers and ethics committee members. Auckland: Health Research Council of New Zealand.

Ing, N. R. (2000). *Dealing with shame and unresolved trauma: residential school and its impact on the second and third generation adults.* Unpublished doctoral dissertation, University of British Columbia, Canada.

Irwin, K., Hetet, L., Maclean, S., & Potae, G. (2013). What works with Māori: what the people said. Wellington: Families Commission.

Jenkins, K., & Harte, H. M. (2011). Traditional Māori parenting: an historical review of literature of traditional Māori child rearing practices in pre-European times. Auckland: Te Kāhui Mana Ririki.

Kelly & Associates, (2014). Evaluation of Tikanga Whakatipu Ririki. Auckland: Te Kāhui Mana Ririki.

Kennedy, V., & Cram, F. (2010). Ethics of researching with whānau collectives. *MAI Review* 3, 1-8.

King, A., Sweeney, S., & Fletcher, R. (2005). A checklist for organisations working with fathers using the non-deficit approach. *Children Australia,* 30(3), 32-39.

Kiro, C., von Randow, M., & Sporle, A. (2010). Trends in wellbeing for Māori households/families, 1981-2006. Auckland: Ngā Pae o te Māramatanga.

Koestner, R., Franz, C., & Weinberger, J. (1990). The family origins of empathic concern: a 26-year longitudinal study. *Journal of Personality and Social Psychology* 58(4), 709-717.

Kotelchuck, M. (1976). *The infant's relationship to the father: experimental evidence.* New York: Wiley.

Lamb, M. E. (1987). Introduction: The emergent American father. In M. E. Lamb (Ed.), *The father's role: cross-cultural perspectives.* (pp. 3-25). Hillsdale, NJ: Erlbaum Associates.

Lamb, M. E. (2000). The history of research on father involvement. *Marriage & Family Review,* 29(2-3), 23-42. doi: 10.1300/J002v29n02_03

Lamb, M. E. (2010). How do fathers influence children's development - let me count the ways. In M. E. Lamb (Ed.), *The role of the father in child development* (5th ed., pp. 1-26). New Jersey: John Wiley & Sons, Inc.

Lamb, M. E. (2012). Mothers, fathers, families, and circumstances: factors affecting children's adjustment. *Applied Developmental Science,* 16(2), 98-111. doi: 10.1080/10888691.2012.667344

Lamb, M. E. (2013). The changing faces of fatherhood and father-child relationships. In F. D. F. Mark & A. Fine (Eds.), *Handbook of family theories: a content-based approach* (pp. 87-103). New York: Psychology Press.

Lamb, M. E., & Lewis, C. (2013). Father-child relationships. In N. J. Cabrera & C. S. Tamis-LeMonda (Eds.), *Handbook of father involvement: multidisciplinary perspectives* (2nd ed., pp. 119-134). New York: Routledge.

Lamb, M. E., Pleck, J. H., Charnov, E. L., & Levine, J. A. (1985). Paternal behavior in humans. *American Zoologist,* 25(3), 883-894.

Leidy, M. S., Schofield, R. D., & Parke, R. D. (2013). Fathers' contributions to children's social development. In N. J. Cabrera & C. S. Tamis-LeMonda (Eds.), *Handbook of father involvement: multidisciplinary perspectives.* (2nd ed., pp. 151-167). New York: Routledge.

Long, D. (2008). All dads matter: towards an inclusive vision for father involvement initiatives in Canada. Ontario, Canada: Father Involvement Research Alliance.

Luketina, F., Davidson, C., & Palmer, P. (2009). Supporting kiwi dads: role and needs of New Zealand fathers. A Families Commission Report. Wellington: Families Commission.

Magill-Evans, J., Harrison, M. J., Rempel, G., & Slater, L. (2006). Interventions with fathers of young children: systematic literature review. *Journal of Advanced Nursing* 55(2), 248-264.

Mikaere, B. (2002). Maori concepts of guardianship, custody and access: a literature review. Wellington: Ministry of Justice.

Miller, J. R. (1996). *Shingwauk's vision: a history of native residential schools*. Toronto: University of Toronto Press.

Ministry of Business, Innovation, and Employment. (2014). Quarterly Labour Market Report. Wellington: Ministry of Business, Innovation, and Employment.

Ministry of Health. (2010). Tatau kahukura: Māori health chart book. 2nd edition. Wellington: Ministry of Health.

Ministry of Health. (2014). The health of Māori adults and children, 2011-2013. Wellington: Ministry of Health.

Ministry of Social Development. (2010). Supporting Teen Fathers - a resource for service providers. Wellington: Ministry of Social Development.

Mitchell, D., & Chapman, P. (2006). Couples' views of men's transition to first time fatherhood. Nelson: Nelson Marlborough Institute of Technology.

Murray, J., & Farrington, D. P. (2008). Paternal imprisonment: long-lasting effects on boys. *Development and Psychopathology* 20, 273-290.

Nettle, D. (2008). Why do some dads get more involved than others? Evidence from a large British cohort. *Evolution and Human Behavior,* 29(6), 416-423.

Nurse, A. (2002). *Fatherhood arrested: parenting from within the juvenile justice system*. Nashville, Tenn: Vanderbilt University Press.

Nurse, A. (2004). Returning to strangers: newly paroled young fathers and their children. In M. Pattillo, D. Weiman & B. Western (Eds.), *Imprisoning America* (pp. 76-96). Thousand Island: Russell Sage.

Palkovitz, R., Copes, M., & Woolfolk, T. (2001). "It's like . . . you discover a new sense of being": involved fathering as an evoker of adult development. *Men and Masculinities* 4(1), 49-69.

Pattnaik, J. (Ed.). (2013). *Father involvement in young children's lives: a global analysis*. Netherlands: Springer.

Pedersen, F. A. (1975). *Mother, father and infant as an interactive system. Paper presented at the 83rd annual meeting of the American Psychological Association,* Chicago.

Pihama, L. (2012). Overview of Māori teen pregnancy. Wellington: Families Commission.

Pleck, J. H. (1981). The myth of masculinity: Cambridge, MA: MIT Press.

Pleck, J. H., Lamb, M. E., Levine, J. A. (1985). Facilitating future change in men's family roles. *Marriage and Family Review*. 9(3-4),11–16.

Pleck, J. H. (2010). Fatherhood and masculinity. In M. E. Lamb (Ed.), *The role of the father in child development* (5th ed., pp. 27-57). Hoboken, New Jersey: John Wiley & Sons, Inc.

Pleck, J. H. (2010). Paternal involvement: revised conceptualization and theoretical linkages with child outcomes. In M. E. Lamb (Ed.), *The role of the father in child development* (5th ed., pp. 58-93). Hoboken, New Jersey: John Wiley & Sons, Inc.

Powick, K. (2002). Ngā take matatika mō te mahi rangahau Māori. Māori research ethics: a literature review of the ethical issues and implications of kaupapa Māori research and research involving Māori for researchers, supervisors and ethics committees. Hamilton: School of Education, University of Waikato.

Praat, A., Davies, S., & McGray, S. (2010). Parents as first teachers evaluation: phase I report. Report prepared for Family and Community Services by Centre for Social Research and Evaluation. Wellington: Ministry of Social Development.

Pudney, W. (2005/2006). Fathering our city: a scoping report on fathering our children in Waitakere City. Auckland: AUT University.

Ratima, M. M., Allan, G. R., Durie, M. H., Edwards, W. J. W., Gillies, A., Kingi, T. K., & Waldon, J. (1996). Oranga whānau. Māori health and well-being, and whānau. Palmerston North: Massey University.

Rawiri, C. (2007). *Adolescent Māori mothers experiences with social support during pregnancy, birth and motherhood and their participation in education.* Unpublished masters dissertation. University of Waikato, Hamilton, New Zealand.

Reid, P., & Robson, B. (2007). Understanding health inequities. In B. Robson & R. Harris (Eds.), *Hauora: Māori standards of health IV. A study of the years 2000-2005* (pp. 3-10). Wellington: Te Rōpū Rangahau Hauora a Eru Pōmare.

Roettger, M. E. & Swisher, R. R. (2013). Incarcerated fathers. In Pattnaik, J. (Ed.), *Father involvement in young children's lives: a global analysis.* (pp. 107-122). Netherlands: Springer.

Salmond, C., Crampton, P., & Atkinson, J. (2007). NZDep2006 index of deprivation. Wellington: University of Otago.

Sarkadi, A., Kristiansson, R., Oberklaid, F., & Bremberg, S. (2008). Fathers' involvement and children's developmental outcomes: a systematic review of longitudinal studies. *Acta Paediatr,* 97(2), 153-158. doi: 10.1111/j.1651-2227.2007.00572.x

Smolewski, M., & Wesley-Esquimaux, C. C. (2004). Historic trauma and aboriginal healing. The Aboriginal Health Foundation research series. Ottawa: Aboriginal Healing Foundation.

Social Policy Evaluation and Research Unit. (2014). Effective parenting programmes: a review of the effectiveness of parenting programmes for parents of vulnerable children. Wellington: Families Commission.

Statistic New Zealand. (2008). National ethnic population projections: 2006 (base) – 2026. Retrieved from www.stats.govt.nz.

Statistics New Zealand. (2011). Demographic trends 2011. Retrieved from www.stats.govt.nz.

Statistics New Zealand. (2013a). 2013 census quickstats about Māori. Retrieved from www.stats.govt.nz.

Statistics New Zealand. (2013b). 2013 Census quickstats about national highlights. Retrieved from www.stats.govt.nz.

Statistics New Zealand. (2013c). Te kupenga. Retrieved from www.stats.govt.nz.

Strickett, E. (2012). Literature review: marginalising Māori adolescent parents. Auckland: Massey University.

Sturrock, F., & Gray, D. (2013). Incredible Years pilot study - evaluation report. Wellington: Ministry of Social Development.

Tamis-LeMonda, C. S., Baumwell, L., & Cabrera, N. J. (2013). Fathers' role in children's language development. In N. J. Cabrera & C. S. Tamis-Le Monda (Eds.), *Handbook of father involvement: multidisciplinary perspectives* (pp. 135-150). New York: Routledge.

Tamis-LeMonda, C. S., & Cabrera, N. (2002). Multidisciplinary perspective on father involvement: an introduction. In Tamis-LeMonda, C. & Cabrera, N. J. (Eds.). *Handbook of father involvement: multidiscplinary perspectives* (pp. xi-xiii). Mahwah, NJ: Lawrence Erlbaum.

Tamis-LeMonda, C. S., & McFadden, K. E. (2010). Fathers from low income backgrounds: myths and evidence. In M. E. Lamb (Ed.), *The role of the father in child development* (5th ed., pp. 296-318). Hoboken, New Jersey: John Wiley & Sons, Inc.

Taonui, R. (2010). Mana tamariki: cultural alienation. Māori child homicide and abuse. *AlterNative: An International Journal of Indigenous Peoples,* 6(3), 187-202.

Te Awekotuku, N. (1991). He tikanga whakaaro. Research ethics in the Maori community: a discussion paper. Wellington: Ministry of Māori Affairs.

Truong, M., Paradies, Y., & Priest, N. (2014). Interventions to improve cultural competency in healthcare: a systematic review of reviews. Retrieved from http://www.biomedcentral.com/1472-6963/14/99

Tupara, H. (2011). Ethics, kawa, and the constitution: transformation of the system of ethical review in Aotearoa New Zealand. *Cambridge Quarterly of Healthcare Ethics, 20*(3), 367-379.

Turner, P., Scadden, L., & Harris, M. (1990). Parenting in gay and lesbian families. *Journal of Gay and Lesbian Psychotherapy*, 1, 55-66.

Twamley, K., Bruton, G., Sutcliffe, K., Hinds, K., Thomas, J. (2013). Father's involvement and the impact on family mental health: evidence from millennium cohort study analyses. *Community, Work & Family*, 16(2), 212-224.

Walker, R. (1990). *Ka whawhai tonu matou: struggle without end*. New Zealand: Penguin Books (NZ).