A Study of the Lived Experience of First-Time Fathers in the First Six Months following the Birth of their Baby

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A thesis presented in fulfilment of the requirements for the degree of Master of Nursing

The University of Newcastle
I hereby certify that the work embodied in this thesis is the result of original research and has not been submitted for a higher degree at any other University or Institution.

Signed: ........................................................................................................

Date: .........................................................................................................
Dedication

This thesis is dedicated to the five fathers that allowed me the privilege and honour of spending such precious time with them in order to expose their experiences and feelings in relation to first-time fathering and in so doing led me to understand my feelings about my own father.

I attempt to understand myself

and I attempt to understand you and I search for the meanings

of what is presented or concealed in all of this.

(Munhall, 1993, p.31)
Acknowledgements

This thesis represents six years of part-time dedication, perseverance, adversity, challenge, excitement, passion, frustration and hope and would not have been possible without the support and encouragement of many people.

To Professor Diana Keating and Ms Denise Kinross, my thesis supervisors, I owe a debt of gratitude for their kindness, encouragement, and dedication to the task of guiding and helping me. They shared my enthusiasm and passion for the subject as well as their experiences as researchers, clinicians and scholars and kept challenging me further and further. Diana was particularly kind and helpful through the periods of my diagnosis of cancer and the battle to survive it and also the grief and loss associated with this.

When there were episodes where my enthusiasm was waning and I could not see a light at the end of the tunnel, my friend, mentor and clinical supervisor, Dr Teresa Stone encouraged me to see another perspective and to continue on. Dr Richard Fletcher was also interested and supportive of my research, and helped me source articles when this was difficult. Andrew King, an educator and co-ordinator of the national program, Mensline, and a passionate supporter of helping men, enabled me to understand the idea of generativity and fathers, and constantly gave me support by e-mail and putting me in touch with other researchers.
This thesis and study associated would not have been possible without the never-ending support from my husband David who has provided meals and unswerving emotional support for the last 6 years through thick and thin. My four children, especially my daughter Emma have understood how much this research meant to me and have often encouraged me to keep going so that fathers get the help and support they need.

Finally I am eternally grateful to my wonderful mother who taught me resilience, strength, hard work, dedication, kindness and understanding to all human beings, no matter their walk in life. My mother, who died last year always believed in me and was so proud of me that I know, she knew, I would eventually accomplish my task. I miss her so much – this is also dedicated to her.
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Key to Transcripts

The following abbreviations and conventions have been used throughout the transcriptions as per APA 5th style.

... : Three ellipsis points indicate an omission within a sentence.

.... : Four ellipsis points indicate an omission between two sentences.

[letters in brackets]: when enclosing material inserted in a quotation by a person other than the original writer as an explanation of context to improve clarity.

[sic]: used after a word in writing to show that it has been quoted even though it is a mistake or grammatically incorrect.

[italics added]: when a word is italicized to add emphasis for the reader but has been added by the researcher the bracket with 'italics added' follows.

Names: all names used are pseudonyms and are used when discussing the different fathers in the text and used in parenthesis at the end of each participant quote.
Glossary of Terms

The following terms have been frequently used in this study and are defined in the following way:

- **Child and Family Health Nurse (CFHN):** a Child and Family Health Nurse is a registered nurse with qualifications often in Midwifery and then Child and Family Health Nursing and most frequently cares for parents and their children from 0-5 years by home visiting, clinic visits and groupwork.

- **Child and Family Health Nurses (CFHNS):** the plural of CFHN.

- **Child and Family Health Nursing Service (CFH Nursing Service):** this encompasses the collective nursing service that Child and Family Health Nurses work within.

- **Parents:** the use of the term “Parent” in this study assumes the discussion about mothers and fathers as the female (mother) and the male (father) and does not take into account homosexual parents due to there being only heterosexual parents in this study.

- **Father:** male heterosexual father

- **Mother:** female heterosexual mother

- **Edinburgh Depression Scale (EDS):** this is a 10 question scale devised by Cox, Holden and Sagovsky (1987) that takes approximately 5 minutes to administer. It has been used worldwide to screen mothers and recently fathers (with different score cut offs) for ante-natal depression and post-natal depression. The score gives an indication of possible depression or anxiety and needs to be used with a thorough clinical assessment and evaluation of the client.

- **Families First Strategy – now called Families NSW:** commencing in 1998, this whole of government strategy in NSW aims to increase early intervention to parents and children to ensure they achieve happy and healthy families
with well adjusted children. The aim is also to help and support parents in maximising their child’s potential and to promote excellence in parenting.

- **Universal Health Home Visiting Program (UHHV):** this is the name of the first home visit offered by Child and Family Health Nurses to all families with a newborn so as to give early assistance and support with infant care, psychosocial issues and breastfeeding and prioritise families that need more help and support.

- **Integrated Perinatal and Infant Care (IPC) now called “Safe Start”:** is a NSW Health Government policy regarding the use of psychosocial questions at the ante-natal booking in visit to assist with early identification of women in pregnancy with psychosocial issues that require extra support and early psychological help in order to intervene early and promote health in the mother and her unborn baby and family. This policy requires multidisciplinary services to work together to organise early intervention and support.

- **Family Partnership Model (FPM):** this is the underpinning model of working with parents in NSW Health. This model is usually five full days training program and is now used in many parts of the world to improve nurses and other health professional’s ability to engage with parents by understanding how one works in partnership with parents, not in an expert model.

- **Parent Advisor Model:** the parent advisor model originated in England in 2002 and was introduced in 2003 as the FPM in NSW Health.

- **Clinical Supervision (CS):** this is the term used for a trained professional to help the staff undertake reflection, about staff and client attitudes, perceptions, and the impact of the work on the staff member. This encourages challenging the accepted care of clients and emotions that are involved and aims to improve client care by improving the way staff respond and manage client issues and manage their own emotional state.
Abbreviations

**CFHN**: Child and Family Health Nurse

**CFHNs**: Child and Family Health Nurses

**CFHN Service**: Child and Family Health Nursing Service

**C&FH Services**: Child and Family Health Services

**EDS**: Edinburgh Depression Scale

**UHHV**: Universal Health Home Visiting Program

**IPC**: Integrated Perinatal and Infant Care Program

**FPM**: Family Partnership Model

**CS**: Clinical Supervision

**ECHS**: Early Childhood Health Services

**UK**: United Kingdom

**HNEHHREC**: Hunter New England Health Human Research Ethics Committee

**TUNHREC**: The University of Newcastle Human Research Ethics Committee
Abstract

This phenomenological study describes the experiences of five first time fathers in the six months following the birth of their baby. The study, based in a regional city of New South Wales (NSW), Australia used a hermeneutic phenomenological framework to expose the underlying meaning of the fathers’ experience. The five fathers who participated in the study were aged between 30 and 36 years of age. Each participated in two unstructured interviews, during the six months following their baby’s birth.

Data analysis revealed a common journey which fathers experienced over the first six months of their baby’s life, however at times the journey differed for each participant or encompassed a different perspective of a shared theme. A descriptive model and statement of the essence of first-time fatherhood emerged from the study which captured these fathers’ expression of their journey of transition. Four of the fathers revealed that for them the experience of fatherhood commenced at the baby’s birth, and, one that this commenced before the birth. The fathers also revealed that although some wanted to be the same and others different from their own father they all wanted to be good fathers and tried valiantly to meet this aim. While they expressed their journey as often tumultuous and uncertain, by six months they all revealed that they had reached a time of harmony within themselves and their family. The findings that emerged from the interview data illuminated six main themes: The Dawning of Responsibility, Seeking and Finding Connection, Absolute
Joy, Wonder, Delight and Unconditional Love, Struggling towards being a Father, Moving towards Cohesion, and Arriving at Harmony – reflection on the journey.

The overall implication emerging from the study is that fathers, like mothers, need support during the early months of their baby’s life and their inclusion in health care services, particularly Child and Family Health Nursing (CFH Nursing) Services is essential.
Chapter 1
Introduction

This hermeneutic phenomenological study sought to capture and understand the phenomenon of each father’s experiences of being a first time father in the first six months following the birth of their baby. The study used a phenomenological philosophical and methodological framework to guide the study throughout. Data collection methods used in the study were unstructured interviews with participants, field notes and a reflective diary. Analysis of the data was assisted by referring to my personal and professional nursing experiences with the phenomenon, music, poetry and phenomenological literature about fathers. This chapter describes the background and justification for the study, its purpose and research question. It concludes with a description of the structure of the thesis.

1.1 Background to the Research

What first brought me to this study of first time fathers was my passion and interest in the topic of fatherhood stemming from the influence of my professional life as a midwife and then a Child and Family Health Nurse (CFHN) over the past 20 years. My original aim in researching this topic was to gain an understanding of the experience of first time fathers and in doing so, strive to improve nursing practice with fathers, particularly in the area of Child and Family Health Nursing (C&FHNursing). Later on I realised that my personal experience of having a neglectful father also had a great bearing on
the choice of this topic and may have been the original source of my passion in wanting to understand fathers’ experiences.

In my professional life over the past 20 years while working as a midwife and then a CFHN I have noticed that fathers are often ignored in health services for families. This was particularly obvious when I coordinated a new post-natal depression service for mothers at a major hospital in the 1990’s and realized that fathers were missing from the treatment model of care and were not included in this service, yet they were often distressed themselves. Then in 2001, the Edinburgh Depression Scale (EDS) was validated in Australia for use with men in the post-natal period (Matthey, Barnett, Kavanagh, & Howie, 2001). When I offered fathers the opportunity to complete this scale I found they spoke easily to me, a female nurse, about this often sensitive issue. This sometimes surprised me because I considered men might be less open to sharing emotions. Attendance at a workshop titled “Inviting Dads in” (Fletcher, 2002) about father inclusive practice highlighted to me how little the local area C&FHNursing Service included fathers. This also led me to reflect on and seek better understanding of the barriers to the inclusion of fathers in the C&FHNursing service in which I worked. These barriers included long standing policies and practices which focused on mother and baby. For example, state and regional policies and procedures now, and in the past, still encourage the registration of mothers and babies, but not of fathers unless there are exceptional circumstances (Fleming & King, 2010; Fletcher, 2002, pp. 25-26; Fletcher, Vimpani, Russell, & Sibbritt, 2008). This automatically excludes the majority of fathers and appears to indicate they are of lesser
importance. These and other barriers make it difficult for nurses to change practice when their workload is high and the policies and procedures do not support this change in practice.

Not only did my professional experience as a CFHN have an affect on me, but I also realized that this research was a deeply personal journey for my own search for meaning about my father. As a daughter, even with the experience of a wonderful mother, the negative experience of having a neglectful father was hurtful. In my later life I have seen first hand how important a good father can be to his children in the example of my own husband and his role as father to our four children, two girls and two boys. This suggested to me how important fathers and fathering is for both boys and girls. I also believe I am able to communicate and develop a connection with fathers easily because of my background of being the only girl in a family with four brothers. This seems to have given me a sense of normality being surrounded by boys and an ability to understand and be tolerant of their different behaviours.

This personal and professional journey has caused me to want to help fathers be all that their children need them to be. From a professional perspective as a CFHN I considered that in order to raise awareness of the importance of fathers in this service at least, it is essential to influence colleagues to better understand and empathise with fathers and to include them in CFHNursing Services.
1.2 Justification for the Research

The significance and value of this study is that to date there has been a large amount of published research relating to a mother’s first time experience of parenting but comparatively little about a father’s experience of this (Barclay & Lupton, 1999; Berger, 1988; Condon, Boyce, & Corkindale, 2004; Draper, 2002, 2003; Fletcher, 2002, 2009; Fletcher, Silberberg, & Baxter, 2001; Fletcher, Vimpani, Russell, & Sibbritt, 2008; Halle et al., 2008; Hynan, 2005; Lamb, 1997a; Pollock, Amandwaa, & Amankwaa, 2005). Habib and Lancaster (2005) identify this is particularly so in relation to Australian first time fathers and their infants. The value and worth of undertaking this study is therefore to ensure that Australian first time father’s experience of this phenomenon is identified.

The small amount of research that exists in relation to Australian first time fathers has largely adopted quantitative methodology (Buist, Morse, & Durkin, 2003; Condon, Boyce, & Corkindale, 2004; Fletcher et al., 2001; Habib & Lancaster, 2010; Habib & Lancaster, 2005; Russell, 1983; Russell et al., 1999). Thus in contrast to these studies, my study used a phenomenological approach, which enabled identification of the meaning of first time fatherhood to fathers themselves rather than quantitative findings in relation to this.

In addition, the methodology used in my study differs from that used in the few qualitative studies that exist in Australia concerning this topic (Barclay & Lupton, 1999; St. John, Cameron, & McVeigh, 2005). The value of my study is
that its use of a phenomenological approach enabled me to expand on some of the themes emerging in these Australian qualitative studies. Further, it has achieved a depth and understanding of fathers’ experiences, feelings and thoughts that has assisted in providing a broader picture of father bonding and attachment which will assist in clarifying conflicting ideas emerging from completed first time father’s research (Barclay & Lupton, 1999; Berger, 1988; Bremberg, 2004; Fletcher, 2009; Habib & Lancaster, 2010; Habib & Lancaster, 2005; St. John et al., 2005; Strauss & Goldberg, 1999).

The findings of this study are timely to CFHNs and their practice. This is because recent changes in these nurses’ role resulting from research highlighting the importance of a child’s early years (Karen, 1994; McCain & Mustard, 1999; Olds et al., 1997; Perry, 1993; Perry, Pollard, Blakely, Baker, & Vigilante, 1995), and the introduction of the NSW Government’s Families First initiative (Families First, 2002)\(^1\), have emphasized a need to support excellent parenting by both parents, that is both mother and father.

In order to support parents in the care of their children, an understanding of women’s mental health has been shown to be important (Austin, 2004; Cox et al., 1987; Matthey, Barnett, Howie, & Kavanagh, 2003; Matthey, Barnett, Ungerer, & Waters, 2000; Matthey et al., 2002; Priest & Barnett, 2008). In addition, men’s emotional health post-partum has been shown to impact on the relationship between their partners and their children (Condon et al., 2004; Genesoni & Tallandini, 2009; Matthey et al., 2003; Matthey et al.,

\(^1\) Currently known as Families NSW (NSW Health, 2008b)
Therefore increased understanding of a father’s experiences, as this is expressed by fathers themselves, may lead to identification of opportunities to offer greater support which may directly benefit mothers, children and families in general.

First time fathers were selected for this study because it appeared to me that the first transition to fatherhood was likely to have a more dramatic impact on their lifestyle. I considered that this being fathers’ first experience of this phenomenon enabled the fathers to describe it in more detail than would be the case for the second and third time. This ability to describe the phenomenon in detail is essential when phenomenology is used.

1.3 Aims, Research Question and Methodological Framework

The two main aims of the study were;

- To identify, explore and describe first time fathers experiences of fatherhood gained during the first six months of the birth of their infant; and
- To interpret the meaning this phenomenon of first time fatherhood holds for the father, in the context of contemporary Australian society.

The research question for the study was;

“What are husband’s/partner’s experiences of becoming a first-time father in the first six months following the birth of their baby?”
In the light of this question, phenomenology was considered to be the best “fit”, in terms of “methodological congruence” (Morse & Richards, 2002, pp. 32-33) to capture this experience of the “transition process of fatherhood” (Strauss & Goldberg, 1999, p. 3). Phenomenological philosophy focuses on “lived experience” and “human behaviour (as it) occurs in the context of relationships to things, people, events and situations” (Morse & Richards, 2002, pp. 32-33). It is this ‘everyday’ lived experience of first-time fatherhood that the researcher is seeking to uncover in the proposed phenomenological study. van Manen (1990) notes that phenomenology is not a methodology which can be followed exactly. Therefore, I used Lauterbach’s (1992) approach which is a combination of van Manen’s (1984, 1990) processes and Munhall’s (1992) existential investigation to guide the process of data collection and concurrent data analysis essential to hermeneutic phenomenology.

1.4 Structure of the Thesis

In this thesis Chapter Two commences a critique and review of the literature so as to identify what is already known about the study topic and elements impacting on it. This literature review provides a comprehensive review of existing research relevant to the father’s experience of being a first time father and also highlights gaps in the research. Literature reviewed in this chapter also discusses theoretical perspectives including transition theory, attachment and generative theory that assist in explaining processes found pivotal to considering the father’s experiences in my study. Chapter Three discusses
hermeneutic phenomenology as the appropriate philosophical and methodological framework in which to conduct the study and outlines Lauterbach’s (1992) approach as the hermeneutical perspective that guided me through the process of concurrent reflection and analysis of data throughout the study. Chapter Four presents the findings of the study, including the themes and sub-themes emerging from data. This is followed by Chapter Five which discusses the study’s findings in the context of the literature. At the commencement of this chapter is a model of the process of being a first time father which emerged from the study’s findings and a statement which captured the essence of the phenomenon of being a first time father as this was revealed during the study. This chapter includes a discussion about how rigour was achieved in this study, its limitations and implications and concludes with my reflections on first time fatherhood.
Chapter Two
Review of the Literature

The aim of this review of the literature is to provide a critique of contemporary literature, particularly research literature on the study’s topic and a rationale for the study design. This review explores the assertion that the contemporary view of the father is changing (Barclay & Lupton, 1999, p.432; Draper, 2002, 2003; Fletcher et al., 2001; Genesoni & Tallandini, 2009; Halle et al., 2008) and therefore research capturing fathers’ contemporary experiences of fatherhood is important. In contrast to research on women’s experience of motherhood, there has been comparatively little research on father’s experiences (Barclay & Lupton, 1999; Draper, 2002, 2003; Fletcher, 2002, 2009; Fletcher, Silberberg, & Baxter, 2001; Fletcher, Vimpani, Russell, & Sibbrit, 2008; Halle et al., 2008), and there is a gap in qualitative research in Australia and internationally, regarding first-time fathers. The research that has been completed on this topic (Barclay & Lupton, 1999; Berger, 1988; Bremberg, 2004; Genesoni & Tallandini, 2009; Fletcher, 2009; Habib & Lancaster, 2005, 2010; St. John et al., 2005; Strauss and Goldberg, 1999) presents conflicting ideas and conclusions regarding father-infant relationships that need to be clarified. In this study I will argue that it is entirely appropriate and timely that this phenomenological research be undertaken by a CFHN. This is because CFHN’s in particular, are in a position to benefit from consolidated knowledge and understanding of first-time fathers in order to be able to offer a more inclusive service as far as fathers are
This research may also be of benefit to other disciplines and directly to families by supporting the father.

This chapter commences with a discussion about research concerning the changing role of fathers, the importance of fathers, and father’s experience of parenting and fatherhood. The argument presented is that there is still a lack of understanding of the experience of fatherhood as this is expressed by fathers themselves; and this is one of the many barriers to the inclusion of fathers in many parenting and community services in Australia. Both qualitative and quantitative research on this topic is reviewed. In terms of qualitative research in this area there is a gap in Australian and overseas research which my research has sought to go some way to address, building on existing knowledge concerning first-time fathers. As part of this discussion, conflicting findings on father-infant attachment, bonding and involvement are reviewed. Since the methodology selected for the study is phenomenology, particular attention is given to two phenomenological theorists who have researched what is important in being a father.

The focus of this study is timely in that there has been a lack of attention to, as well as conflicting ideas about, fathers’ post-partum experiences and yet men’s emotional health in this period is crucial for family well-being and therefore there is a need for supportive communication with fathers. Becoming a father has been considered as a transition process (Chinn, 1986; Condon, Corkindale, & Boyce, 2008; Draper, 2003; Habib & Lancaster, 2010; Strauss & Goldberg, 1999), a process of attachment to their infant (Bowlby,
1997; Brotherson, 2005; Fletcher, 2009; Habib & Lancaster, 2005; Karen, 1994; King & Parquette, 2008) and having a sense of generativity; fathers’ ability to improve the meaning of their life by educating and encouraging the next generation (Berger, 1988; Brotherson, 2005; Dollahite & Hawkins, 1998; Drobeck, 1990; Genesoni & Tallandini, 2009; King, 2008; King & Parquette, 2008). Because of this, this chapter concludes with a review of four theories; Transition, Attachment, Generative Theory and Father Generativity theory as a basis from which to consider father’s experiences of transition to fatherhood.

2.1 The International Perspective on the Changing Role of Fathers

Literature identifies that there is a continuing worldwide change towards fathers having increased involvement with their children (Barclay & Lupton, 1999; Draper, 2003; Halle et al., 2008; Kaila-Behm & Vehvilaeinen-Julkunen, 2000). Pivotal to the role of midwives and CFHNs is involvement with both parents and thus it is critical that they understand both parents’ experiences of being a parent. It is therefore essential that these health professionals have the knowledge and support to carry out this new role.

Various terms are used to describe the new father’s changing role, for example, Kaila-Behm and Vehvilaeinen-Julkunen (2000, pp. 199-200) discussed the “growing man movement” in Finland in the 1990s. Further, Barclay and Lupton (1999, p. 1013) discussed “new fatherhood” in their study of first-time fathers in Australia, and in England Draper (2003, p. 2) used the term “the new involved father.”
2.1.1 The importance of fathers.

Since the 1970s there has been an increase in research and some acknowledgement that fathers are important in families, in particular that the highly involved father confers positive benefits for child development (Allen & Daly, 2007; Barclay, Donovan, & Genovese, 1996; Barclay & Lupton, 1999; Berger, 1988; Draper, 2002, 2003; Fletcher et al., 2001; Lamb, 1997b). This change in focus on fathers is reflected in the way fathers’ roles have been perceived in the literature. For example, in the mid 1970s, fathers were thought to be of little importance except as support persons to the mother, but by the mid 1990s there was an almost total reversal of this thinking (Berger, 1988; Lamb, 1997a). Fletcher et al., (2001) having discussed the importance of positive involvement of fathers with their children summarise this in the following:

Children with highly involved fathers are characterized by increased cognitive competence, increased empathy, and less sex-stereotyped beliefs. Such children are also likely to exhibit less externalizing behaviours during the pre-school years, less problematic and delinquent behaviours as they grow older, and a greater degree of emotional stability and demonstrate more locus of control (2001, p. Ill).

Allen and Daly (2007) have recently presented a research summary of the evidence of the effects of fathers’ positive involvement versus lack of
involvement on both boys’ and girls’ development. Their review indicates that positive father involvement has numerous beneficial implications “for their children in terms of social, emotional, physical and cognitive development”, (Allen & Daly, 2007, p. 1) which supports and develops Fletcher et al.’s (2001), conclusions. Positive outcomes of fathers’ involvement with their daughters has been found in the improvement of these girls’ self esteem in the long term (Allen & Daly, 2007; Fletcher et al., 2001), a reduction in “adult psychological stress” when they reach adulthood (Allen & Daly, 2007, p. 7) and the prevention of anti-social behaviour in adolescent girls (Allen & Daly, 2007, p. 8). Conversely, a negative outcome for adolescent girls living without their father from birth to 6yrs of age has been found to be that they are “seven times more likely” to become pregnant as a teenager (Allen & Daly, 2007, p. 11). Moreover Sanders, Dittman, Keown, Farruggia and Rose (2010, p. 563) reported that there is emerging evidence that “fathers make a unique contribution to their children’s behavioural and social development” that is different to mothers’ influences.

2.2 Father’s Experience of Parenting and Fatherhood

To date there has been a large amount of published research relating to mothers’ experience of parenting but comparatively little about fathers’ experience of this phenomenon (Barclay & Lupton, 1999; Berger, 1988; Condon, Boyce, & Corkindale, 2004; Draper, 2002, 2003; Fletcher, 2002, 2009; Fletcher, Silberberg, & Baxter, 2001; Fletcher, Vimpani, Russell & Sibbritt, 2008; Halle et al., 2008; Hynan, 2005; Lamb, 1997a; Pollock,
Amankwaa, & Amankwaa, 2005). Habib and Lancaster (2005) identify this is particularly so in relation to Australian first-time fathers and their infants. The value of undertaking this study is therefore to assist in building knowledge about Australian first-time fathers’ experience of parenting in the early months of their baby’s life. Until the late 1980s most research focused on women and their experience as mothers. Men were only mentioned for the support they did or did not provide to the mother (Barclay & Lupton, 1999; Draper, 2002; Fletcher et al., 2001; Henderson & Brouse, 1991; Morgan, Matthey, Barnett, & Richardson, 1997). Despite health professionals having been aware of the importance of understanding the family as a whole and the coping and adjustment strategies of the individual members in it, very little research has focused on men’s adjustment to this major life transition of becoming a father (Condon et al., 2004; Habib & Lancaster, 2010; Habib & Lancaster, 2005; Halle et al., 2008; Pollock, Amankwaa, & Amankwaa, 2005). Matthey, Barnett, Ungerer and Waters (2000, p. 2) who discuss the normal phenomenon of increased anxiety and depressed mood that can follow important life transitions, note that men’s experience of this is frequently ignored. This lack of research is particularly evident in relation to investigation of men’s adjustment to their wife/partner experiencing post-natal depression. For example, it was not until 1988 that men were included in research about post-natal depression when Harvey and McGrath’s (1988) study found that 42% of the fathers whose partner had been admitted to the psychiatric mother-baby unit had psychiatric diagnoses themselves (cited in Morgan et al., 1997, p. 913).
2.2.1 Lack of understanding of fathers' feelings about fatherhood.

Despite some increase in world-wide research on fathers and fatherhood in the last twenty years, many authors still conclude that information on fathers’ feelings about fatherhood and their needs in relation to this have either not been sought or have been misunderstood (Barclay & Lupton, 1999; Draper, 2002; Fletcher et al., 2001; Habib & Lancaster, 2010; Halle et al., 2008).

Hence, it is suggested that comparatively little is known about how men interpret and define “what being a father means to them” and therefore how they “perceive” themselves as fathers (Draper, 2002, p. 564; White, 1994, pp. 119-120).

The paucity of knowledge about fathers’ experiences and feelings is evident in Fletcher et al’s (2001) survey of 208 new fathers (mostly first time) in the Hunter Region of NSW. The findings in this study indicate that the fathers were not prepared for “the relationship and lifestyle changes accompanying the arrival of a new baby” and that they were “not aware of services available to assist families with new children” (Fletcher et al., 2001, p.32). Fletcher et al., (2001) concluded that there is a lack of knowledge about men’s feelings in the ante-natal period and at childbirth, compared to that of mothers. This gap in knowledge is highlighted by the fact that the fathers surveyed said that ante-natal classes were not meeting their needs, a finding also emerging from other Australian and English studies (Barclay & Lupton, 1999; Draper, 2002; Fletcher et al., 2001; Fletcher, Matthey, & Marley, 2006; Friedewald, Fletcher, & Fairbairn, 2005; Halle et al., 2008; Jungmarker, Lindgren, & Hildingsson,
Qualitative research methods attempt to fill this gap in knowledge by seeking participants’ perceptions, experiences and understandings of the phenomenon being studied. Thus, phenomenology, the philosophical methodology used in my study, seeks to shed further light on Fletcher et al.’s (2001) findings and the possible meaning behind the fathers’ answers to his quantitative questions. In this way, fathers’ feelings, experiences and needs may become clearer, allowing post-natal services for men (such as C&FHNursing Services) to develop in a manner more likely to meet each of these elements. Timeliness of this research is underscored by a relatively recent document about parenting services, including the C&FHN Service, which states “the role of a father has been acknowledged as important and challenging yet is often unsupported, with available services for parents not always inclusive of fathers” (Families First, 2003). It is anticipated that increased knowledge about first-time fathers, by C&FHN Services and similar services may help to address this deficit.

2.2.2 Barriers to inclusion of fathers.

Barriers to the inclusion of fathers in community services was particularly evident in Fletcher et al.’s (2001, p. 33) survey of these services, including the CFHNursing Service (called ‘Early Childhood Nursing Services’ in Fletcher et al.’s study). These researchers found “not all staff were enthusiastic about the notion of father involvement” and that “many services did not see any particular need to recruit fathers, although few fathers attended” (Fletcher et al., 2001, p. 33). Fletcher et al.’s (2001, p. 34) survey and the report that
followed, was funded by “Hunter Families First” to provide a basis on which to develop strategies for increasing fathers’ use of family services in the Hunter region. These researchers’ study identified barriers in every service included in their study and provided the opportunity for staff in these services to address these. In regards to CFHNursing services they indicated the barriers were difficult to address because of systemic issues arising from state policies.

Fletcher et al. (2001) stated that it was time to address the problem of NSW regional and state policy and procedures which continued to encourage the registration of mothers and babies but not of fathers, unless there were exceptional circumstances. They suggested that these state policies tend to exclude fathers or relegate them to a lesser importance.

In a similar way, Fleming (2007, p. 16) stated that fathers are often portrayed in a negative and “unhealthy” way; described in social work journals as not available, struggling or indeed as “perpetrators” of violence. This view tends to reinforce the exclusion of fathers due to them being perceived as a “risk”, rather than as “potential resources” (Fleming, 2007, p. 18), especially when they are young fathers (Lemay, Cashman, Elfenbein, & Felice, 2010, pp. 221-222). This has also been my experience as a CFHN where the compulsory education about domestic violence and sexual assault tends to inadvertently present all fathers in a negative light until proved otherwise. This experience appears comparable to the biased view of fathers discussed in the instance of early childhood health staff in England who, when trying to include male workers in their early childhood service found “women workers felt threatened by the idea of men working in the centre” (Ghedini, Chandler, Walley, & Moss,
1995, p. 17). This was because “some workers wanted to protect battered and abused women”, and wanted the women clients to see health facilities as a “safe haven”, implying that the presence of any men might undermine these goals. The early childhood staff also had “negative feelings” about men, relating to “personal experience”, and said they “were happier working in a ‘male free’ environment”. Education of staff and support of the parents attending the centre “overcame these concerns” and eventually enabled their inclusion of men who wanted to work in their service (Ghedini et al., 1995, p. 17). Fletcher et al.’s (2001) findings highlight the fact that increased education and training of staff about the importance of fathers and support from staff within parenting services to improve access to fathers, is required in order to change this bias. Similarly, this lack of staff knowledge about the importance of fathers in the early postnatal period especially for mothers’ support, has been highlighted recently in a Swedish study (Persson, Fridlund, Kvist, & Dykes, 2011). A better understanding of the way systemic barriers contribute to lack of change in focus from mothers only to including fathers may provide a basis from which staff can move forward and create change (Persson et al., 2011, p. 113). It is anticipated that a phenomenological study which focuses on the fathers’ experiences might not only improve CFHN’s understanding, but also that of other staff involved in provision of parenting services, of this feature. This might also promote changes to these barriers and encourage staff to be more inclusive of fathers in their practice, and supportive of them in their role as new fathers.
2.3 Gaps in Qualitative Research which Examines the Experiences of First Time Fathers

The small amount of research that exists in relation to Australian first time fathers has largely adopted quantitative methodology (Buist et al., 2003; Condon et al., 2004; Fletcher et al., 2001; Habib & Lancaster, 2010; Habib & Lancaster, 2005; Russell, 1983; Russell et al., 1999). In contrast to these studies, the phenomenological approach used in my study enabled the identification of qualitative factors namely the meaning of first time fatherhood to fathers themselves. Although some Australian qualitative research on this topic exists, this has used different methodologies and methods to phenomenology; including discourse analysis, (Barclay & Lupton, 1999) grounded theory (Barclay et al., 1996; Donovan, 1995; Holland, 1993; St. John et al., 2005) and qualitative survey (Halle et al., 2008) and these studies have often focused on both first time and subsequent fathers (Halle et al., 2008; St. John et al., 2005). Barclay and Lupton’s (1999) study is one of the more recent studies that focused exclusively on first time fathers. However, this study used discourse analysis to give a socio-political perspective of 15 first-time fathers from birth to six months post-partum. Discourse analysis particularly focuses on language and the interpretation of that language in terms of power relationships. This focus differs from fathers’ interpretations of meaning which phenomenology seeks to expose.

St. John et al., (2005) undertook a grounded theory study of Australian first-time and subsequent fathers. The topic was “Meeting the Challenge of New
Fatherhood during the Early Weeks.” They interviewed fathers from 5 to 12 weeks following the birth using grounded theory methodology. While grounded theory has some similarities to phenomenology in terms of the data collection and methods used within it, its aim is to enable the identification of concepts and ultimately, substantive theory rather than in depth understanding of the meaning of the phenomenon being studied. In addition, St John et al.’s (2005) grounded theory study included both first time and subsequent fathers and this may have blurred any distinction between these two groups’ experiences and/or feelings. Halle et al.’s (2008) qualitative and quantitative survey of Australian first time and subsequent fathers has the same concerns. The first transition to fatherhood is likely to be a much greater transition than that experienced following subsequent births and therefore more remarkable in terms of change in lifestyle and role. Further dilution of first-time fathers’ views in St John et al.’s (2005) Australian study may also stem from their decision to interview mothers and fathers together. Evidence reviewed by Fletcher et al. (2001, p. 8) about “mothers as gatekeepers” indicates mothers may feel threatened when the role of the father is given greater importance and this may cause conflict, and influence the way the father discusses issues around child-care. Another author who discusses this problem of the mother’s presence at interview is Kieffer-Andrews (1992, p. 113), who states that some researchers “have indicated differences in fathers’ responses when the infant’s mother was present.” Two other studies included mothers in the interviews with fathers (Garrett, 2000; Henderson & Brouse, 1991) although Garrett (2000, p. 47) changed this practice after three interviews with couples as he found that “the mothers were too focused on
their own experiences” rather than helping the father remember his experience.

This phenomenological study, in keeping with its philosophy focuses solely on first-time fathers’ experiences postpartum and therefore does not include partners or spouses, because “… phenomenologists (Strauss, 1987; van Manen, 1990) acknowledge that the mere presence of another human has an impact on the perception and recollection of the individual’s experience” (Kieffer-Andrews, 1992, p. 38).

### 2.3.1 International phenomenological and qualitative studies concerning first time fathers.

In the 1990s, American doctoral studies of first–time fathers were plentiful, with six studies written between 1990 – 2000 using phenomenological or grounded theory methodologies (Bradford, 1990; Drobeck, 1990; Dumas, 1990; Garrett, 2000; Hampson, 1997; Kieffer-Andrews, 1992). These studies and other overseas phenomenological studies (Henderson & Brouse, 1991; Sianga, 1998); have not yet been replicated in Australia and therefore although the research topics are relevant to Australia some of the findings from these studies may not be. Nevertheless, a number of themes in my study are similar to themes relating to first-time fathers’ experiences found in these American, Canadian and Botswana studies. For example, themes such as; changing identity (Bradford, 1990; Drobeck, 1990; Garrett, 2000; Hampson, 1997; Kieffer-Andrews, 1992; Sianga, 1998); increased or changed

Overall, overseas studies which have used qualitative methodologies focusing entirely on first-time fathers appear to be few and include six American studies, one Canadian study and a study of first-time fathers in Botswana. Although these studies have been undertaken in different cultural contexts to that of Australia all have used qualitative methodologies, mostly phenomenology and some of the findings identified closely reflect those identified in my study.
2.4 Conflicting Findings on Father-Infant Attachment or Bonding

Review of the Australian and overseas literature has revealed some conflicting ideas amongst researchers about father-infant attachment or bonding and involvement of fathers in their infants' lives. Some of these conflicting ideas have emerged from completed first-time fathers' research, including that of Barclay and Lupton (1999); Berger (1988); Bremberg (2004); Fletcher (2009); Habib & Lancaster (2010; 2005); St. John et al. (2005) and Strauss & Goldberg (1999). One of these conflicting ideas concerns the different factors thought to be the greatest influence on father-infant relationships. These include whether a good relationship between father and infant/child is dependent on time spent with infants/children, and/or the emotional quality of the relationship. Other areas where opinions and findings differ are in determining the most important factor in the relationship between a father and infant. Some of the differing opinions include whether it is more important that the father attaches meaning to fatherhood, or if factors of individual personality and attitudes of the father, partner's (wife's) attitudes, cultural background (Barclay & Lupton, 1999; Berger, 1988; Bremberg, 2004; Habib & Lancaster, 2010; Habib & Lancaster, 2005; St. John et al., 2005; Strauss & Goldberg, 1999) and/or the effect of father's distress or depression (Buist et al., 2003) have the greatest impact on the infant relationship.

Condon and Dunn (1988, p. 293) explored the “nature and determinants of ‘parent-to-infant attachment’ in the early postnatal period” of both mothers
and fathers, and concluded that negative attitudes towards the unborn child may have a negative effect on early parent-to-infant bonding. However, they state that this “parent-to-infant attachment” is a “complex” process that needs further “longitudinal research” (Condon & Dunn, 1988, p. 298). In addition, these authors note that data concerning the relationship between a father’s experience at birth and their later father-infant relationship are “contradictory” (Condon & Dunn, 1988, p. 293).

Condon (1993, p. 167) states that “90 per cent of the literature on attachment relates to the attachment of the infant to the parent (usually the mother)”, however in the last 10 years there has been an increased research focus on parent to infant attachment (Condon, 1993). Condon (1993, pp. 167-168) first defined what he thought was a bond from father to infant as the father’s “attachment” to or “love” for the infant or “unborn child”. Discussing father-infant attachment in more recent research, Habib and Lancaster (2005) state that; “one quality of the father-infant relationship that has not received much attention is the father’s perception of his emotional or psychological bond to the child” (Habib & Lancaster, 2005, p. 253). However, Habib and Lancaster (2005, p. 253) do not consider this bond should be called “the father’s attachment to the infant” as Condon (1993) has defined it. Habib and Lancaster (2005, p. 253) argue that the term “attachment”, according to Bowlby’s original 1969 theory (1997) refers in the strictest sense to a psychological dependency because the infant is dependent on the parent. They state in the context of father-infant attachment that this would mean the father is psychologically dependent on the child. They doubt, however, that
parents are dependent on their infants and therefore feel the term ‘attachment’ should not be used in relation to father-infant bond, unless it is understood that this refers only to the “emotional or psychological bond (of the father) to his infant” and not psychological dependence (Habib & Lancaster, 2005, p. 253). Habib and Lancaster (2010) later claimed that they agreed with the later Condon, Corkindale and Boyce (2008) “view that ‘attachment’ has several meanings” but state they will use the word attachment as meaning a “state of love for the foetus not a dependency on the foetus” (Habib & Lancaster, 2010, p. 131). With a different view again, Fletcher (2009, p. 38) suggests there is support for the claim by Grossman et al., (1999, p. 761) that at present there is a “narrow view of attachment” which needs to be widened to consider “the organisation of emotion and behaviours along the entire attachment exploration spectrum” (Grossman et al., 1999, p. 761 cited in Fletcher, 2009, p. 38) which would then include more evidence of infant-father attachment.

It is evident from the above that relationships and bonding are pivotal to attachment and a number of researchers have considered specific elements or factors required to enable the building of relationships and bonds (Ahlborg & Strandmark, 2001; Barclay & Lupton, 1999; Berger, 1988; Bremberg, 2004; Buist et al., 2003; Cabrera, Tamis-LeMonda, Bradley, Hofferth, & Lamb, 2000; Condon et al., 2004; Condon & Corkindale, 1998; Condon et al., 2008; Condon & Dunn, 1988; Fagan & Barnett, 2003; Habib & Lancaster, 2010; Habib & Lancaster, 2005; Pleck, 1997; St. John et al., 2005; Strauss &
Goldberg, 1999). These factors include time, the emotional quality of the relationship, meanings attached to fatherhood, and cultural backgrounds and attitudes.

2.4.1 The elements identified in the literature as necessary for building a relationship.

**Time.** Continuing to focus on research findings relating to infant-attachment, Habib and Lancaster (2005), discuss a summary of studies undertaken in Australia and overseas between 1960 and 1990 which included comparative data on time fathers spend with their children of various ages. They concluded that most quantitative studies such as some of those from Australia, for example Craig (2002, 2005) have produced large samples of Australian Bureau of Statistics (ABS) data to demonstrate the “combined time all fathers spend with different aged children” but do not specify the amount of time fathers spend with infants (Habib & Lancaster, 2005, p. 250).

Recent Australian qualitative research on the early post-partum period (Barclay & Lupton, 1999) concluded that men cannot hope to be the father they want to be in the contemporary economic climate as they do not have enough time with their infant because of work and societal pressures. Other authors indicate that the emotional quality of the relationship is more important than time spent with the infant anyway (Bremberg, 2004; Habib & Lancaster, 2005, p.263). From a psychological viewpoint, Strauss and Goldberg (1999) found that time spent with the infant seems to be related to
the value and meaning the father places on fatherhood, rather than their hours of work. Habib and Lancaster (2005) call for a “multi-dimensional” concept of fathering; meaning that, as with mothers, there are probably many factors that impact simultaneously in the development of a good relationship with children. An older account by Berger (1988, p.167 ) would seem to support this view, as he indicates that it would be a mistake to assess a father’s influence by “time spent in care-giving” because this would be dependent on individual characteristics, attitudes of their partner and their culture.

*The content and quality of father involvement.* Pleck (1997) explains how research has moved on since the 1990s to include not only quantitative measures of time spent by fathers with their children but also “content and quality” of that involvement (Pleck, 1997, p. 102). Cabrera, Tamis-LeMonda, Bradley, Hofferth and Lamb (2000, p. 129) agree that for increased involvement with the father to be beneficial to the infant the qualities of “warmth” and “sensitivity” are required. Pleck (1997, p. 102) explains that most measures of paternal involvement now assess “positive paternal involvement” as this is the “primary interest” and key factor in involvement. He explains further that “positive involvement means not just ‘going through the motions’ of fatherhood”, but being engaged, accessible and taking “responsibility”. This type of positive involvement may also be “the essence of what A.J. Hawkins et al. (1993) conceptualized as ‘generative fathering’” (Pleck, 1997, p. 102) which is described later in this chapter.
**The content and quality of family relationships.** An example of the use of phenomenology to illuminate meaning is Ahlborg and Strandmark’s (2001, p. 322) phenomenological study of Swedish first-time couples and intimacy, which made clear the complexity and multi-dimensional basis of family relationships and its influence on the father-infant bond. Coiro and Emery’s (1998, cited in Bremberg, 2004, pp. 246-247) American quantitative and qualitative study of marriage problems and their effects on fathering and mothering, had previously found that a poor relationship between mother and father will negatively affect the relationship between father and infant/child. The use of phenomenology by Ahlborg and Strandmark (2001) enabled these researchers to inadvertently find unique cases where the opposite of this finding occurred; that is, where a good relationship between father and infant flourished even when the parental relationship was very poor. These results may be explained by Buist et al., (2003, p. 176) who found results from an Australian longitudinal repeated measures study of 225 first-time fathers in Melbourne, regarding ‘men’s adjustment to fatherhood’ indicated that distressed men (depressed or anxious), tended to have a “lower quality of attachment to their infants”. Therefore it may be that the distress experienced by the father, not necessarily the poor relationship between mother and father, is one of the elements that influence the father-infant relationship. Fagan and Barnett (2003) also explored “the relationship between maternal gatekeeping, paternal competence, [and] mother’s attitudes about the father role and father involvement” (2003, p. 1020). They collected data via quantitative validated questionnaires sent to families, both mothers and fathers in two different groups of parents, one group of “non-residential fathers” and another group of
fathers that resided with the mother and child. They found that father involvement directly increased as a result of the father feeling competent with care-giving. However, they found that mothers’ “gatekeeping” could restrict the amount of involvement and therefore competence that the father could develop, and this in turn would influence father-infant attachment. They concluded that very little research has focused on “maternal gatekeeping” and the reasons for this, yet this is significant when seeking to understand the involvement of fathers. These authors suggest qualitative research, similar to my study may help to untangle and “better understand these family processes” (Fagan & Barnett, 2003, pp. 1037-1039).

2.4.2 Phenomenological theorists and their theories about what is important in being a father.

Given that phenomenology is the philosophical framework selected to identify first time fathers’ experiences in my study, a review of the phenomenological theorists who have conducted research in fatherhood is appropriate. After the key concepts of what is important in being a father are identified these will be related to more recent concepts of positive paternal involvement.

The two phenomenological philosophers who have illuminated the essences of fatherhood in the past, Marcel (1962) and Langeveld (1987) both arrive at similar descriptions of the essence of a “true” father. This is despite their studies being conducted nearly 25 years apart. Both indicate the elements or concepts in this essence as being, “responsibility”, “faithfulness”, and
“engagement”, which reflect those proposed by more contemporary authors using other methodologies (Habib & Lancaster, 2005; Lamb, 1997a, 1997b; Pleck, 1997; Russell, 1983; Russell et al., 1999). Marcel (1962) and Langeveld (1987) state that many fathers do not recognize these essential elements or concepts of fatherhood or their importance.

Marcel (1962, p. 107) suggests “responsibility”, can be identified as the test of fatherhood, across all generations and calls it a “vow of fatherhood” which he describes as a “vocation” and a “human act”. Thus to him the test of being a “true” father is that he recognises “that he is responsible for his child... [and] the words ‘his child’ only acquire a meaning ... when this responsibility is fully recognised and shouldered.” This requires “realising and acknowledging the obligations he [the father] has undertaken toward them [his children]” (Marcel, 1962, p. 107).

A second concept in the essence of fatherhood as Langeveld (1987, p. 15) identifies it is “faithfulness”, which indicates how “strongly fatherhood is related to making a ‘choice’ of whether to be a father or not, and therefore a choice of ‘faithfulness’”. Langeveld (1987, p. 15) explains his case for believing “faithfulness” is important in being a father when he states;

...strength of duty and this duty for strength in unselfishness and self – control are identical with the virtue of ‘faithfulness’ (Langeveld, 1987, p. 20). [And he continues]: ‘Faithfulness’ can only qualify for one who accepts the consequences of his actions. Faithfulness and
responsibility belong together and it is these two virtues which the
father… must live for his children and pass onto them – especially his
sons. (Langeveld, 1987, p. 15)

The third concept identified by both Marcel (1962) and Langeveld (1987) in the essence of fatherhood is “engagement” which is defined broadly by Marcel (1962). He argues that the “pure act of fatherhood”, requires “an engagement and a decision” of “providing” and “guiding spiritual development, not merely a wish to do so” (Marcel, 1962, pp. 116-118). Langeveld (1987, p. 17) calls this engagement a “commitment” to fatherhood that the father must demonstrate by being concerned about “the meaning of fatherhood”, the mother’s world and “matters of child-rearing” (Langeveld, 1987, p. 18). Langeveld (1987, p. 6) believes this commitment or engagement signifies security and protection for the child and mother and that “‘to have a father’ signifies having a leader, a guide to the world, into the future of life”.

In contrast to these phenomenological theorists, more recently, Habib and Lancaster (2005) explain how “three dimensions” of “engagement, accessibility and responsibility” now thought to be important in positive paternal involvement were first proposed by “Lamb, Pleck, Charnov, & Levine” (1985, 1987)” (2005, p. 250). Many researchers since 1985 have “framed their research around these types of involvement” (Lamb & Tamis-Lemonda, 2004, p. 2). Lamb et al. (1985, p. 884) originally defined these types of involvement as:
‘Interaction’ [or engagement], refers to the father’s direct contact with his child, through caretaking and shared activities. ‘Availability’ [or accessibility] is a related concept concerning the father’s potential availability for interaction, by virtue of being present or accessible to the child whether or not direct interaction is occurring. Responsibility is defined as ‘not…the amount of time spent with or accessible to the child, but the role father takes in making sure that the child is taken care of and arranging for resources to be available for the child’. (Lamb et al., 1985, p. 884)

Habib and Lancaster (2005, p. 251), conclude in their review of the literature that there has been “far less examination of the concept of responsibility” and “no consistent operationalisation” of the concept. They state this is because research about the father’s responsibility for the infant, sometimes includes different activities (direct or indirect) or processes involved in being a father and therefore is difficult to compare.

The second dimension identified as being involved in positive paternal involvement is the concept of ‘Accessibility’. Habib and Lancaster (2005, p. 251) state that this concept is seldom identified or discussed in studies and when it is, mainly involves Russell’s (1983) and Russell et al.’s (1999) concept of “time alone (that is, sole engagement and sole accessibility)” with the child. Habib and Lancaster (2005, p. 251) further consider the idea of “time alone” in relation to accessibility using a different concept. In their quantitative study of fathers and six month old infants they used the concept of ‘time alone’ with
the infant but not necessarily related to engaging with the infant. This they explain would tell them how accessible the father was in general to the baby, not necessarily related to interaction exclusively (Habib & Lancaster, 2005, pp. 251-252). It appears that this concept of accessibility is also assessed differently by different authors making it confusing to compare studies.

In summary, these more recent authors, from Australian and American cultures (Habib & Lancaster, 2005; Lamb, 1997a, 1997b; Lamb et al., 1985, 1987; Pleck, 1997a; Russell, 1983; Russell et al., 1999) have written of similar concepts of positive father involvement as the phenomenological theorists but in more refined terms than those of Marcel (1962) and Langeveld (1987). There are still different ways of assessing these more modern refined concepts and so consensus has not been reached. Phenomenology is used in this study to assist in uncovering the meaning of being a first-time father and the experience of first-time fatherhood, and this may help to disentangle some of the apparently conflicting research findings on father-infant involvement and attachment.

2.5 Differing Ideas on a Father’s Role in the Post-natal Period

My research focuses on fathers’ initial post-natal experiences because it appears that much of the research to date relating to fathers has been on the ante-natal period and there has been less research on post-natal experiences of fathers (Barclay & Lupton, 1999; Fletcher et al., 2001). Also, since much of the qualitative research concerning the post-natal period that has been
completed suggests that male partners do not feel like fathers until they see their baby (Ahlborg & Strandmark, 2001; Barclay & Lupton, 1999; Draper, 2002, 2003), the post-natal period seems to be a fitting place to commence research about the fathering role. In addition, some authors’ state there is no available support in the post-natal period for fathers to carry out their ‘idealised father’ role said by these authors to be espoused by modern society, nurses and midwives (Donovan, 1995; Kaila-Behm & Vehvilaeinen-Julkunen, 2000). Other authors (Barclay & Lupton, 1999; Fagerskiold, 2006; Gamble & Morse, 1993; Kaila-Behm & Vehvilaeinen-Julkunen, 2000) critique the idea of this “new involved” or “idealised” type of father because this role may not fit all fathers. They indicate that if a specific role is described it might then be likely that professionals will misunderstand or ignore other fathers that do not live up to this new role and yet it is important to support all fathers. Therefore classifying fathers into categories and types may limit understanding of individual fathers who do not fit easily to the types of fathers described. Two studies focusing on the post-natal period found that four specific styles of fathers (different in each study) could be elicited from their research (Gamble & Morse, 1993; Kaila-Behm & Vehvilaeinen-Julkunen, 2000) and that this categorising of fathers could be helpful for understanding how these particular fathers might react. According to other authors it would seem important to develop empathy towards a family’s particular circumstances, engaging with both parents as individuals rather than as “types” of parents (Draper, 2002; Fagerskiold, 2006; Kaila-Behm & Vehvilaeinen-Julkunen, 2000).
Following on from these different views of how to understand the father role, my study focused on first time father’s experiences in the first six months following the birth, using a phenomenological philosophical and methodological framework in an attempt to identify and describe these fathers’ feelings and experience as individuals. In this way I hoped to gain an in-depth understanding of the key elements of ‘transition to fatherhood’, from an individual’s perspective without seeking to relate this experience to a ‘type’ of father.

2.6 The Impact on the Family of Men’s Emotional Health and Wellbeing

The transition to fatherhood involves great change in the father’s attitudes and relationships and therefore it is acknowledged in the literature to be a stressful experience. Australian and overseas research that focuses on fathers and mothers coping with anxiety, distress or depression offers some interesting findings in relation to first-time fathers and the impact of their emotional health on the family. First-time fathers, particularly, have been found to experience anxiety/distress and depression in the transition period of becoming a father (Ahlborg & Strandmark, 2001; Buist et al., 2003; Condon et al., 2004; Lane, 2007; Matthey et al., 2000; Matthey et al., 2002; Morgan et al., 1997). A review of the literature for a study of “a group programme for postnatally distressed women and their partners in pregnancy and the postnatal period”, which included some first-time fathers, reported that fathers can have “feelings of isolation, jealousy, resentment, and concern about their own ability to be a father” (Morgan et al., 1997, p.3 ). This can culminate in anxiety
and/or distress felt by the father, that impacts on the family as a whole (Condon et al., 2004; Lamb, 1997b; Lane, 2007; Matthey et al., 2000; Matthey et al., 2002). This is specifically demonstrated by Ahlborg and Strandmark’s (2001) phenomenological study of Swedish first-time mothers and fathers “experiences of their intimate relationship”, in the first two years following the birth of their baby. These researchers found that first-time fathers may experience mental health issues that affect their relationships with family members and the health of their family (Ahlborg & Strandmark, 2001, p. 318; Matthey et al., 2001). Similarly Matthey et al.’s (2000) recent findings about the relation between fathers and mothers depressed mood and anxiety in Australian quantitative studies highlighted that when fathers are depressed, the impact on the family seems to be more pronounced compared to when mothers are depressed. More specifically, Matthey et al.’s (2001; 2000) studies found that if men are depressed, then their partner has a much greater chance of becoming depressed or anxious compared to that of a situation where mothers are depressed. Furthermore, if the father is depressed or anxious, this increases couple morbidity over the post-partum year, more markedly than if the mother is depressed. Matthey, Barnett, Howie & Kavanagh (2003, p. 143) suggest that first-time father’s may suffer from anxiety more than depression and this can also affect their adjustment to the father role, therefore, “this consistent finding is further evidence that clinicians working in this field who do not assess the father on an ongoing basis may be providing an incomplete service to the family.” This information emphasises the importance of fathers being considered by health professionals throughout the pre and post-natal period. This is because, in
most cases, health professionals cannot help families by helping the mother alone as nurses within child and family health services have frequently done in the past. Rather, these services and professionals within them must be more inclusive of fathers and their needs as well as those of mothers, and assist in helping parents communicate these needs to each other.

2.7 A New Focus on Families in NSW: The Impact of Changes in Policy on Child and Family Health Nursing Practice

More recently several changes in policy relating to C&FHN practice have recognised a need for this practice to be more inclusive of fathers of newborn babies. The increased complexity of families and the situations they face, coupled with an increasing body of research has demonstrated that the role of the CFHN “is expanding and becoming increasingly important” (Reed & Guest, 2008, p. 4). This has also prompted a review of CFHN competency standards and improved standardization of practice across NSW (2008, p. 4). Many recent changes have occurred in CFHNs’ practice due to this increased role, including the introduction, in 1998 of the Families First strategy (now called ‘Families NSW’) and recent developments associated with this, including Universal Health Home Visiting (UHHV), Integrated Perinatal and Infant Care program (IPC), the Family Partnership Model (FPM) and Clinical Supervision (CS). These changes in practice have had an impact on the role of the CFHN and increased his/her ability to be inclusive of fathers. As such, these changes are discussed in more detail below;
2.7.1 The *Families NSW* strategy.

In 1998, the NSW State Government commenced the *Families First* initiative in Western Sydney, NSW, Australia (Families First, 2002). This initiative is a whole of government strategy, which is co-coordinated by the Primary Health and Community Care Branch of the NSW Health Department (Families First, 2002). Its aim is to “increase the effectiveness of early intervention and prevention services in helping families raise healthy well adjusted children” and to provide “support and assistance” for families with children under eight years [in particular 0-3 years],” (NSW Health, 2008a, 2008b). It was prompted by the increasing body of international research evidence that identified the importance of a nurturing family environment during the child’s early years to ensure their future well-being and adjustment (Families First, 2002, p. 1). This notion of family brought into focus the importance of the role of parents and parenting at a time when children were developing. Thus, the intent of the *Families NSW* program was to “support parents and enhance their parenting skills before parenting challenges developed into problems resulting in significant family dysfunction” (McCain & Mustard, 1999; Olds et al., 1997; Perry, 1993; Perry et al., 1995). The focus on parents acknowledges the importance of both mothers and fathers, in the parenting process.
2.7.2 The NSW Universal Health Home Visiting Program (UHHV).

The Families NSW initiative, has highlighted the key role of CFHN in achieving NSW Health’s strategy of early intervention for families, by introducing the Universal Health Home Visiting (UHHV) program (Keatinge, Fowler, & Briggs, 2007, p. 29). This initiative has meant that CFHNs offer a home visit to all families with a newborn within two weeks of the birth in order to provide assistance and support to families (NSW Health, 2008b). As the UHHV is scheduled to occur within two weeks following the birth; the father is more likely to be present on this home visit and could be involved more easily in the first interview.

2.7.3 The NSW Integrated Perinatal Care System (Safe Start).

The first interview with parents also encompasses the Integrated Perinatal and Infant Care program (IPC) psychosocial questions asked of the mother. This is a screening tool to assess mothers in the post-natal period requiring early intervention for any issues or mental health concerns. If any concerns are identified then early help can be provided to families. Unfortunately at present these questions are only asked of the mother and not the father, however recent research points to the possibility of a different set of questions being suitable for fathers and helpful in addressing their needs (Fletcher et al., 2008; NSW Health, 2008b).
2.7.4 The NSW Family Partnership Model (FPM).

The philosophy underpinning *Families NSW* and the new policies and the associated assessments within them described above, recognised that the CFHN required extra skills to enable them to engage with parents. It was opportune that a model such as the FPM was made available to health professionals in order to improve nurses ability to engage with parents (Nemeth, 2008, p. 5). The FPM model originated in the United Kingdom (UK) as the Parent Advisor Model (Davis, Day, & Bidmead, 2002), and was introduced to NSW in 2003 as the FPM model to professionals who work within Early Childhood Health Services (ECHS), mainly CFHNs (2003, p. 1).

The importance of this model has been the acknowledgement that the CFHN’s role involves working in partnership with parents rather than in an expert model by providing conversational support backed with knowledge (Nemeth, 2008). The model provides a clear framework for nurses to develop skills in engaging with parents, and developing “supportive and effective relationships with them” (Guest et al., 2003; Keatinge et al., 2007; Lamont, 2008; Nemeth, 2008). This approach means recognizing and working with parents’ strengths so that they are empowered to tackle their own problems with support rather than the helper providing solutions to ‘fix’ the problem (Lamont, 2008, p. 23). Research in the United Kingdom (UK) has found that nurses who have completed FPM training were more competent and
confident in working with parents due to their increased understanding of the helping process and the improvements in their helping skills (Lamont, 2008, pp. 22, 23).

The introduction of the FPM in NSW has improved the understanding of health professionals in helping clients by learning the skills of “helping”, not just the theory of “empowering’ clients, strengths –based practice, family centred practice and solution focused care” (Lamont, 2008, p. 22). The model is underpinned by values including the key qualities required for working with men identified in recent research. This research identified a need for supportive interactions by health professionals in communicating with fathers and is highlighted in Vernon’s (2006) reflections on the 30 Australian fathers’ stories that contributed to his edited book, “Men at Birth”. He believes provision of information in a supportive manner by doctors or others provides “solace” and makes “a big difference to the father’s (and mother’s) ability to cope with the situation faced” (Vernon, 2006, p. 209). These supportive interactions are also highlighted in Smith, Braunack-Mayer, Wittert and Warin’s (2008, p. 618) study of the “qualities men value when communicating” with doctors or primary health workers. They demonstrated that the men in their study valued a “‘frank approach’, demonstrable competence, thoughtful use of humour, empathy and prompt resolution of health issues” (Smith et al., 2008, p. 618). Hynan (2005, p. 87) explains in the context of parenthood that both men and women value a “person-centred approach”, which indicates support and sensitivity.
These values underpin the FPM which is one of the key communication strategies that underpins the CFHNursing service in NSW (NSW Health, 2008a, 2008b). Training in this model therefore enables these nurses and other health professionals to have an understanding of communication skills regarded by Davis, Day & Bidmead (2002) as being essential for working with fathers and mothers.

2.8 Theories Relating to First-Time Fatherhood

There are four theories relating to first-time fatherhood that appear particularly relevant to understanding first-time father’s experiences. These are Transition Theory, Attachment Theory, the Theory of Generativity and the Theory of Generative Fathering. They have been touched on previously but a closer examination of these theories is important for this study.

2.8.1 Transition Theory.

Strauss and Goldberg (1999, p. 3) in their quantitative longitudinal study of American first-time fathers’ sense of self during transition to fatherhood, discuss the meaning of the word ‘transition’. They explain that; “Inherent in the word transition is the notion of change; both internal, psychological change as well as external behavioural change” (Strauss & Goldberg, 1999, p. 3). They make it clear that “developmental transitions are long term processes” (Strauss & Goldberg, 1999, p. 3) where people change how they understand and feel about themselves and their world over a period of time.
These transitions also involve a change in social external roles and relationships, especially when becoming a father. Thus there are psychological changes and social changes that must take place for completion of the transition. This transition can occur over varying lengths of time depending on how long it takes the individual to adjust to these changes (Strauss & Goldberg, 1999, p. 3).

The relevance of transition theory to nursing practice as a whole has been acknowledged by Chin (1986). She explained that it is important not only to have knowledge about the patterns of different transitions, but to know “how the transition and associated events are perceived by the person experiencing them” in order to plan health programs that cater for their needs (Chinn, 1986, pp. 242-243). She highlights that even in first-time parenting where there are similar circumstances, there will be commonalities of general structure, but the actual transition will be experienced differently by different parents (Chinn, 1986, p. 242).

In keeping with Chin’s (1986) ideas, Draper (2003, p. 75), an English nurse ethnographer, stresses the importance of nurses being knowledgeable about transition theory so that they are better able to support fathers in the ante-natal and post-natal period. Her theoretical analysis of longitudinal ethnographic interviews conducted in England with new fathers during pregnancy, birth and the post-natal period demonstrated the importance of transition theory to contemporary fathers (Draper, 2003, p. 66). Draper (2003, p. 75) argues that transition theory with its rites of passage and symbolic
meaning, can provide helpful information to new fathers about the normal changes in social status that occur during this transition. This information could be beneficial to new fathers in this contemporary age, and enable them to realize this transition is a common journey and they are not on their own. In this way, what she identifies as “Ritual transition theory” illuminates the “bodily, individual and social transitions” occurring over the course of time (Draper, 2003, p. 75). Draper (2002, p.75 ) argues that transition theory has the capacity to inform health care practice about the passage to fatherhood and therefore create the potential for further support for fathers experiencing this transition to improve their emotional health and wellbeing.

2.8.2 Discussion of Attachment Theory.

John Bowlby, a British psychoanalyst, was the first to synthesise other’s work, including Ainsworth’s “strange situation” (Karen, 1994) in the development of his classic work concerning the psychology of human attachment and relationships. This work resulted in the publication titled “Attachment and Loss” first published in 1969 (Bowlby, 1997). In it, Bowlby (1997) describes and categorizes the cognitive and emotional behaviour patterns he observed that children displayed when they were separated from their parents (who were mainly mothers). These patterns demonstrated the level of these children’s attachment to their primary care-giver (usually mother). Bowlby (1997) demonstrated that a child suffers if he/she does not have an attachment to a primary caregiver and that the child suffers in an irreparable way if that attachment is lost. Karen (1994, p. 4) states Bowlby “…developed
the concept of ‘internal working models’ to describe how the infant’s sense of self and other unfolds through interactions with that primary care-giver” and then is re-created in attachment relationships with others later in life. Mostly, this process is described as maternal - infant attachment since the mother is usually the primary care-giver. Fletcher (2009, pp. 37-38) indicates that this lack of research into infant-father attachment may be a problem in that father-infant attachment is likely to be different from infant –mother attachment. He cites a number of authors’ research (De Wolff & van IJzendoorn, 1997; Feldman, 2003; Grossman et al., 1999; Paquette, 2004), to demonstrate this problem. Like Brotherson (2005) and King and Parquette (2008), Fletcher (2009) suggests that fathers’ play with the infant may be of primary importance in infant-father attachment compared to research which concentrates on fathers’ care-giving activities.

2.8.3 The Theory of Generativity.

Another aspect of knowledge which may be important to professionals seeking to understand fathers is knowledge of the Theory of Generativity, originally proposed by Eric Erikson in 1963 (Berger, 1988, p. 449). The concept of “generativity versus stagnation” (Berger, 1988, pp. 36-37) was proposed by Erikson (1963) as one of the three psychosocial conflicts or crisis of adulthood that needed to be resolved, as a person becomes older. With no “sense of generativity”, life can seem “empty and purposeless” and thereby lead to “stagnation and impoverishment” (Berger, 1988, p. 432; Erikson, 1963, p. 267). Generativity therefore “involves the need to be productive in some
meaningful way either through work or parenthood” (Berger, 1988, p. 432). As adults start to mature they can feel an urgency to “achieve” and make their lives “productive and meaningful” in order to build self-esteem and feel successful (Berger, 1988, p. 449). There are many ways of being generative but its primary concern is in “establishing and guiding the next generation” particularly through parenthood (Erikson, 1963, p. 267). Erikson (1963, pp. 266-267) suggests that we are often blind to the fact that adults are as dependent on children as children are on adults. The mature adult “needs to be needed” and so the older generation is dependent on the younger generation and this is crucial to understanding this part of generativity – the “interdependence” of parents and children (Berger, 1988, p. 452; Erikson, 1963, pp. 266-267).

King and Parquett (2008, p. 3) suggest the concept of generativity is particularly relevant to first -time fathers as the experience of fatherhood may be one such instance that results in them becoming more generative in their thinking which then ignites their motivation to become a better husband, father and man in order to create more meaning in their life. Drobeck (1990, pp. 60-61) highlighted this when he suggested that for the American fathers in his study “the change in men’s priorities towards the unconditional love and selflessness for their baby” was very like the “generative” phase that Erikson (1963) describes. He found that this related to “generativity” in that “they [the fathers] are putting aside their own needs to foster the growth of another generation” (Drobeck, 1990, pp. 60-61).
2.8.4 The Theory of Generative Fathering.

Generative Fathering Theory, proposed by Hawkins and Dollahite (1997) is an extension of the Theory of Generativity (Erikson, 1963) which enables a framework through which to consider fathers from a “non-deficit perspective” (Fleming, 2007, p. 16). The notion of a “non-deficit” approach to fathering involves a positive view of fathers and their capabilities (Brotherson, 2005, p. 2; King & Parquette, 2008, p. 7). Fleming (2007, p. 16) explains that “these researchers [Hawkins and Dollahite] conceptualise fathering as generative work as opposed to a socially constructed role”. Generative fathering is therefore defined as positively involved fathering where the father is “significantly focused on nurturing his child and is actively seeking to improve the well-being of his children” (Fleming, 2007, p. 16). There are two central ideas in this concept of generative fathering; the first is that fathers have an ethical responsibility to meet the needs of their children and the second is that there is a reciprocal benefit for both fathers and their children in the development of themselves and their relationship (Fleming, 2007; Hawkins & Dollahite, 1997). In the structure of generative fathering, “key concepts such as ethical work, stewardship work, developmental work and relationship work are integral” (Fleming, 2007, p. 17).

Thus, Generative Fathering Theory corresponds well with the FPM which underpins the NSW CFHNursing Service as it too incorporates strengths-based approaches to helping parents build on their strengths and grow in maturity. By understanding the meaning of Generative Fathering and how this
will impact on fathers, communication by health professionals can take into
account and use the motivation to change that fathers may experience during
this transition period. It is hoped my study will uncover the importance and
meaning of being a first time father, including the relationship with his and his
partner’s child which may be the key to understanding a father’s motivation in
his father role.

2.9 Conclusion

This chapter has provided a justification for undertaking this study of first time
fathers. This comprehensive literature review and critique has focused on
existing research relating to first time fathers, identified themes and categories
in contemporary research related to this topic and provided an overview of
methodologies used to explore this experience and theoretical perspectives
that are pertinent to it. Barriers, particularly those relating to policy, and
developments in NSW policy and programs aimed at addressing these and
highlighting the need for more father inclusive child and family health
practices have been discussed. Overall, the rationale for considering why
fathers’ experiences of first time fatherhood is important, particularly in
relation to CFHNs’ practice has been developed on the basis of the literature,
and gaps in contemporary research on the topic demonstrated. The next
chapter explores the philosophical and methodological framework for the
study, its data generation and analysis methods and ethical issues relating to
it.
Chapter Three

Methodology and Methods

My interest in undertaking this study was to examine first time fathers’ experience of becoming a father in the first six months following the birth of their baby. Careful review of this topic identified that, given that I sought to discover the meanings of fathers’ experiences of this phenomenon in order to understand it, hermeneutic phenomenology was the appropriate philosophical and methodological framework in which to conduct this study. Reading widely about how to undertake this research within this framework led me to Lauterbach’s (1992) hermeneutic phenomenological perspective of enquiry and I recognised that this approach would guide me through the process of undertaking concurrent reflection and analysis throughout the study.

Lauterbach’s (1992) approach derives from an adaptation of van Manen’s (1984) approach to ‘doing ‘ phenomenology and Munhall’s (1992) model of existential investigation. Her approach comprises a series of four steps that encompass the process of the study and enable review and reflection of its topic; the identification of the research question, examination of its philosophical and methodological framework, identification of methods for data generation, the process of phenomenological reflection and thematic analysis and the writing up of the study’s findings. Thus, this chapter not only identifies each of these steps, but also facilitates a description about how each of these occurred in this study while demonstrating the concurrent process of data generation and analysis which took place.
Beginning with a description of Lauterbach’s (1992) hermeneutic phenomenological perspective of enquiry, this chapter continues with a discussion of each of the steps as these were applied in this study. Included in this discussion are the study’s philosophical and methodological framework and an outline of my assumptions about participants in the study which is a key requirement of this framework. The discussion also includes a careful explanation of the processes used to recruit participants in the study, a description of these participants and details of the data collection and generation process undertaken with participants. This is followed by a description of the data analysis that took place in the study including the continual reflection on parts and whole that is integral to phenomenology. The chapter concludes, with a careful review of ethical considerations.

3.1 Lauterbach’s (1992) Phenomenological Approach

This hermeneutic phenomenological study adopted Lauterbach’s (1992) hermeneutic process which enabled simultaneous data collection, interpretation and analysis of data throughout the process of the study. Lauterbach’s (1992) approach comprises a combination of van Manen’s (1984) method of “doing phenomenology” and Munhall’s (1992) “nursing perspective” and “model of existential investigation” (Lauterbach, 1992, pp. 142-143). It is noteworthy that van Manen (1990) particularly states his is not a method but an approach, consisting of techniques, ideas and processes to help interpret the data in the researcher’s own way; not a method to be followed exactly (1990).
Hermeneutic phenomenology using Lauterbach’s (1992) approach involves understanding and engaging with participants (first-time fathers) in the context of their world, using the qualitative method of in-depth interviews to acquire data that describes the everyday experience of first-time fatherhood. Lauterbach’s (1992) approach entails deep reflection on the interview transcripts, and a process of interpretation continuing through thematic analysis of data within these interviews. This process was thus articulated as a reflective back and forth, parts and whole approach, to weaving between the participants’ recollections of experience and the researcher’s experience, captured in a reflective diary, field notes, the literature and other artistic sources in an attempt to uncover meaning. Using this approach involved more than description in that it sought to uncover hidden “meaning” and the explication of this meaning from the perspective of the participants. “Artistic” findings were also woven through the data as a way of making more explicit “hidden” meaning (Lauterbach, 1992, pp. 135-137).

This was followed by writing, re-writing and re-writing again in order to expose me as the writer to a deeper layer of meaning. “The movement from identification and comparison of themes to a coherent picture of the whole occurs through this reflective process of writing and re-writing” (Cohen, Kahn, & Steeves, 2000, p. 81). This culminates in an overall description captured in a statement of the essence of the phenomenon as well as the concepts (themes) that describe it (Munhall & Boyd, 1999).
The application of each step in Lauterbach’s (1992) approach is now demonstrated interspersed with examples of how each was applied in my phenomenological study of first-time fathers.

3.2 STEP 1: “Turning to Phenomenon of Interest” – The First Step in Lauterbach’s (1992) Approach

The first step in Lauterbach’s (1992) hermeneutic phenomenological approach involves what van Manen (1984) calls “turning to the nature of lived experience” where the researcher tries to remember the “essential aspects” and meaning of an experience in order to be closer to the experience and recognize and interpret it (van Manen 1984 cited in Lauterbach, 1992, p. 145). Munhall (1994) further elaborates this first step of “turning to the phenomenon of interest” stating that it involves thinking and questioning about what it is like to ‘be’ (in this case) a first-time father by remembering the researcher’s personal and professional experiences with first-time fathers and passion about the subject (Munhall, 1994, p. 293). This activity includes immersing oneself as the researcher in the literature about the topic until one gets a sense of the question and the topic. Following this, the researcher must attempt to state clearly his/her “assumptions and biases” on the topic, then try to “ bracket” these thoughts, so that they do not bias the study’s findings (Munhall, 1994, pp. 293-294).
3.2.1 The research question, aims, and rationale for selecting the methodology for the Study.

Following extensive reflection on my experience as a CFHN especially in relation to the roles of both mother and father in the care of their baby as well as their participation in this, and an initial review of the literature I identified the study’s research question to be;

“What are husband’s/partner’s experiences of becoming a first-time father in the first six months following the birth of their baby?”

The study had two aims to:

- Identify first-time father’s experience of becoming a father, gained during the first six months of the birth of his infant;
- Interpret the meaning that the phenomenon of first-time fatherhood holds for the father, in the context of contemporary Australian society.

As this study sought to describe and interpret the father’s experiences, a qualitative research approach, namely hermeneutic phenomenology comprised the study’s philosophical and methodological framework. This framework has also guided the selection of the study’s methods and analysis processes.
3.2.2 Rationale for the choice of phenomenology.

Several methodologies, particularly ethnography, narrative enquiry, grounded theory and discourse analysis were considered and rejected prior to selecting phenomenology as the methodology for this study. One of the main reasons for choosing phenomenology was the study’s focus on a search for meaning of father’s individual experience of first time fatherhood. Other Australian researchers (Barclay & Lupton, 1999) examining first time fatherhood postnatally over a similar time frame as my study, have also used qualitative methods in their research. However, their different focus to mine has required the application of different qualitative methodologies. Therefore, Barclay and Lupton’s (1999) examination of the power struggles of the participants and their social world was facilitated by the use of discourse analysis, and St John et al.’s (2005) use of grounded theory allowed the identification of substantive theory relating to first time fathers in the first 12-16 weeks following the birth of their baby. In addition, Draper (Draper, 2002, 2003) used longitudinal ethnography to examine first time father’s experience of pregnancy and transition to fatherhood in England. This resulted in a longitudinal perspective of this experience, one that identified cultural factors relevant to its English context but not necessarily an Australian one.

I also considered narrative enquiry as a methodology for my study. However, this relates core archetypal stories about a clinical problem to further understanding of the issues within it. This can be useful in CFHNursing as other narrative enquiry studies have shown; for example, a study on parent’s
stories of sleep problems (Noble, Austen, & Parkinson, 2002). However, I perceived that my study was about uncovering the essential meaning rather than ‘understanding issues’ and therefore this methodology was unlikely to enable the depth of interpretation that would unearth these meanings and the associated deep understanding of first time fatherhood required in this study.

Overall, given the study’s research question and the above methodological considerations it appeared that a hermeneutic phenomenological study would offer insight into the lived experience of the first-time father, assist in revealing the meaning that each of these fathers attach to this experience, and promote a deep understanding of it. Further, amongst the many philosophical frameworks and philosophical interpretations of phenomenology, I identified that hermeneutic phenomenology was most congruent with the purpose of this study, and thus this was selected as the study’s philosophical and methodological framework. Hermeneutic enquiry focuses on interpretation and emphasizes “understanding more than description” (Holloway & Wheeler, 1996, p. 170) which this study aims to identify in relation to first-time fathers’ experiences following the birth of their baby. Therefore hermeneutic phenomenology was chosen for this research for three reasons:

1. This methodology fits well to the search for meaning and understanding in a transition process such as fatherhood;
2. This methodology enables the identification of both the unique and shared experiences of contemporary first time fatherhood in Australia (van Manen, 1990); and
3. The philosophy of hermeneutic phenomenology fits well with the discipline of nursing in that understanding of the human condition is valued (Cohen et al., 2000).

Hermeneutic phenomenology has been widely used in nursing research over the last decade (Benner, 1994; Izumi, Konishi, Yahiros, & Kodama, 2006; Munhall & Boyd, 1999) and its aim is to determine and promote understanding of lived experience. The insight from this methodology provides nurses with mechanisms for understanding person centred and holistic approaches to nursing care, which are likely to translate into changed practice. Of central interest in the proposed study is the transition processes to first-time fatherhood. Therefore, it appears hermeneutic phenomenology is particularly pertinent to this study and its topic because it comprises a methodology through which to “address human issues and concerns” by filling gaps and increasing understanding; and it is this understanding that can change health policy and practice (Benner, 1994, pp. 65-66). The applicability of hermeneutic methodology to my study of first-time fathers is reflected in van Manen’s (1990) statement that this methodology “aims at gaining a deeper understanding of the nature and meaning of everyday experience” (van Manen, 1990, p. 9).
3.2.3 Phenomenology as philosophical and methodological framework for the Study.

Phenomenology is both a philosophical and a methodological stance or approach which is mainly interested in the question of “What is the meaning of being human?” (Munhall, 1994, p. 31), or in this case what is the meaning of being a first-time father? van Manen (1990, pp. 28-29) concludes that phenomenology is not really a method as such but a way of thinking that stimulates “insight” and “inventiveness” underpinned by a “broad field of phenomenological scholarship” which can act as a guide and source of knowledge (van Manen, 1990, p. 30). Cohen (2000, p. 6) explains that this means “Phenomenological philosophy is central to hermeneutic phenomenological research” therefore it is important to make clear some of the philosophical assumptions that underpin it.

Phenomenology incorporates three major schools of thought, “but there is overlap and linkage between them” and they all have the same aim which is to generate understanding of the phenomenon (Holloway & Wheeler, 1996, p. 177). The three major schools of thought on phenomenology are those identified by Edmund Husserl (1859-1938), who focused on eidetic or descriptive phenomenology; Martin Heidegger (1889-1976), who was Husserl’s student and introduced hermeneutics or interpretation, and the Dutch school which aims to combine both description and interpretation. van

Edmund Husserl (1859-1938) is the core figure in the development of the phenomenological movement – his ideas included: “intentionality, essences and phenomenological reduction (bracketing)” (Holloway & Wheeler, 1996, p.174). Following on from this, colleagues and students of Husserl introduced the idea of ‘intersubjectivity’, which focuses on how people make sense of experience by feeling empathy towards another and represents the researcher and the informant subjectively understanding each other. The concept of ‘lifeworld’ was also developed in Husserl’s work which is about taking lived experience for granted to the point where it is hardly noticed (Holloway & Wheeler, 1996, p. 174).

Heidegger in his work “Being and Time” (Heidegger, 1962) discussed ‘temporality’ which means ‘lived time’ and indicates that a person comes with a unique history which will influence interpretation. He also introduced the notion of hermeneutics into the phenomenological framework as a way of interpreting meaning. In hermeneutics, “rather than suspend presuppositions, (as with Husserl’s bracketing) researchers examine them and make them more explicit” (Holloway & Wheeler, 1996, p. 175). In this way, the researcher can “come to terms” with their biases and pre-conceptions in order to confront these and expose the “shallowness” of them, rather than eliminate or exclude them which was originally the idea of bracketing pre-conceptions (van Manen,
Heidegger influenced the French philosophers, who in turn extended the phenomenological approach. The French philosophers including Sartre (1905-1980), an existentialist, discussed focusing on the real and concrete experience in order to get to the essence of being. Maurice Merleau-Ponty (1908 – 1961) focused on perception (Holloway & Wheeler, 1996, p. 63), which is important as the phenomenological approach is primarily an attempt to understand the perception of others – to enter their world and see things from their perspective (Cresswell, 1998, p. 275).

As is clear from this discussion of the different schools of phenomenology, this philosophy has been adapted and extended over a varied and complex history. Since, a hermeneutic phenomenological philosophical framework was chosen for this study it is important to state the key concepts in hermeneutic phenomenological research according to van Manen (1990, pp. 8-13). These are:

- **“Phenomenological Research is the study of lived experience”** (p. 9). That is, “pre-reflectively”, as if one had never seen or heard of this experience before (p. 9).

- **“Phenomenological Research is the explication of phenomena as they present themselves to consciousness”** (p. 9). This alludes to the existence of the world through the body – the unity of the mind-body and the fact that reflection of “consciousness” or awareness “of my own thinking” can only be after the event (p. 9).

- **“Phenomenological Research is the study of essences”** (p.10). That is, by studying the “particular”, one may come to understand the “essence” or universal structure of the phenomenon (p.10).
• “Phenomenological Research is the description of the experiential meanings we live as we live them (p.11).” This suggests that phenomenology focuses on “everyday” meaning (p.11).

• “Phenomenological research is the human scientific study of phenomena” (p.11).

• “Phenomenological research is the attentive practice of thoughtfulness” (p.12). For example, in this study this is the “wondering” of how first-time fathers live their lives.

• “Phenomenological research is a search for what it means to be human.” In this research it is hoped that the researcher and reader will come to a “fuller” awareness of what it means to be a first-time father, taking into account the “socio-cultural and the historical traditions that have given meaning to our ways of being” (p.12).

• “Phenomenological research is a poetizing activity (p.13)”. The method is in the reflective writing and re-writing and insights therein and the “evocative way” the words are written so that they are authentic and “reverberate” with others (p.13).

(1990, pp. 8-13).

The key to hermeneutic phenomenology is for the researcher to be open and acknowledge biases, and to let the reader know the researcher’s perspectives, so that the reader can determine whether or not the interpretation is a valid one, and that biases were not intruding on the interviewing and interpreting process (Benner, 1994).
3.2.4 The researcher’s perspective and assumptions about fathers.

Consistent with hermeneutic phenomenology, it is important to be open and acknowledge the researcher’s assumptions and biases so that the reader can decide for themselves, how the researcher’s understanding of the participants links with the interpretation of the study (Benner, 1994; Munhall, 1994). My assumptions about fathers come from experiences and influences from the past and what I believe about the future, and are thus described below so that the reader can be aware of my value position on this topic.

My interest in the topic of fatherhood stems from my personal and professional experience as a Registered Nurse, Midwife and CFHN. I have the belief that fathers are of vital importance and influence as a member of a family, and in need of emotional support and care in the new parenting role. I have a positive view of fathers in that I believe the majority of fathers just want the best for their partner and baby and are willing to do anything to help their family be a happy unit. I realize now that this is called looking at fathers from a ‘non-deficit perspective’, which means that one automatically assumes fathers have these strengths and will be like this until proved otherwise (King, 2000, 2005, 2008; King & Parquette, 2008).

It is hard to identify where the influences have come from to encourage my positive view of fathers; certainly there have been influences related to working in the field of midwifery and CFHNursing such as working with fathers who have a wife with post-natal depression (PND). Also, use of the Edinburgh Depression Scale (EDS) with fathers made me realize how much they wanted
to discuss and express their views when invited to do so. I have also been particularly influenced by attending workshops about focusing on engaging fathers in family services and international conferences with a focus on learning more about men and fathers. My personal experiences of men, fathers, brothers and sons and their emotions and thoughts has also intrigued me and I consider that only through research of this kind can health professionals and others come to understand fathers’ ‘lifeworld’. Accepting that a central tenant in phenomenology is that a person is made up of their personal history and that is what makes them who they are I conclude that personal influences have played a major role in my perception of fathers (albeit an unconscious one). While I recognize that not all CFHN’s will share similar views I am nevertheless hopeful that through my research interpretation as a CFHN and fellow colleague in the field, other CFHN’s may further understand and have empathy with the father’s perspective, especially for the first time father’s role.

In this study, my assumptions are acknowledged in the following;

1. Fathers are assumed capable of caring for their family until proved otherwise. Most fathers want the best for their partner and their children.

2. Fathers are able to speak and express their feelings when asked, if they perceive it is part of normal nursing care and part of caring for their family.

3. One cannot help mothers and babies without taking into account the thoughts, feelings, needs, influences and support of the father in the
family – this is particularly so when the mother has post-natal depression.

4. The historical and societal focus on women and their babies has ‘blinded’ many CFHNs, staff in family services, and also the mothers themselves, to the needs of fathers; thereby excluding a major source of support and influence in the mother’s and infant’s life.

5. There are many historical barriers to fathers accessing and receiving best practice care in CFHNursing services. It has become quite clear that despite an increasing body of research into fathers’ influences on children, it appears this research has not translated into evidence-based practice. Thus, CFHN’s seldom document fathers’ concerns and a separate file devoted to a father usually exists only if he is primary carer. Accessing CFHNursing services for the father in his own right also remains complex.

6. Men and boys can be soft, caring and emotional and they cherish those close to them, especially women, although this is demonstrated in a variety of ways.

7. I am intrigued by fathers and the ways they act and I find them a challenge to work with, but an extraordinarily enjoyable challenge – as in working with a new culture. I constantly find things that amaze me about them and this helps me understand them more.

Following Step 1 where I explored the phenomenological perspective and my perspective of first time fathers as well as the research question and aims of this study I proceeded to Step 2, the existential investigation. Lauterbach (1992) follows van Manen’s (1984) method of “exploring the phenomenon” or “generating data” and “consulting phenomenological literature” and Munhall’s (1992) “exploration of the scope of lived experience” (Lauterbach, 1992, pp. 145-146). Munhall (1994) later discusses this stage as comprising the “data collection and data generation phase” which involves investigating “experience as it is lived” (Munhall, 1994, p. 294).

3.3.1 Setting for the Study.

The study was conducted in an Area Health Service in NSW. This Area Health Service is the size of England and comprises remote, rural, regional and metropolitan populations. The major city within this Area has a population of 143,000 people and its neighbouring council area has a population of 188,000 people. The participants for this study were drawn from both the city and neighbouring area. The major regional hospital for this area had 3509 births during 2009 and provides ample opportunities for ante-natal class attendance, both night classes and weekend classes. Primiparous women mainly attend the ante-natal classes and in 2009, 889 women and 880 men booked into the birth and parenting programs offered at this hospital. It
also conducts a ‘being a father’ program. In 2009, 11 of these programs were offered with 122 fathers booking in to these (approximately 10 fathers in each program).

3.3.2 Inclusion criteria for participants in the Study.

Participants in the study were first-time fathers who were selected on the basis of the following inclusion criteria;

1. Consenting first-time fathers in the first four months following the birth of their baby, who were home-visited by the CFHN or arrived at a clinic visit to the Early Childhood Health Centre (ECHC) in the geographical service area in which the study focused;

2. Fathers who were English speaking and over 18yrs of age,

3. Fathers whose partner and infant were healthy and gestation was at term.

These criteria had been identified to ensure that:

- participants comprised first-time fathers who had experience gained during the period on which the study was focused;
- communication between the researcher and the participant could occur easily, and
- the researcher did not add to any complex situation being experienced by the father such as adolescent parenthood, infant’s prematurity or their partner’s or infant’s poor health.
3.3.3 Recruitment.

Approval to proceed with the study was obtained from the Hunter New England Area Health Service Human Research Ethics Committee (HNEHealth HREC), and the University of Newcastle’s Human Research Ethics Committee (TUNHREC).

Following receipt of ethics clearance I organized an information session with CFHNs in the two council areas of this major city requesting their assistance with recruiting participants for the study. This information session formed part of these nurses’ regular monthly meetings so as to negate the need for an additional meetings and possible additional disruption to service delivery.

The purpose of the information session meeting was to;

1. Provide each nurse with a copy of the study information letter (Appendix 1) and consent form (Appendix 2).
2. Outline the study to the nurses, stressing the participant inclusion criteria and noting that participants meeting this criterion could be offered the study’s information package (containing its information letter, consent form and replied paid envelope) during clinical or home visits.
3. Invite the CFHNs to phone the researcher if they wished to participate in recruitment of first-time fathers in the clinic and on home visits.
As a result of the initial information session 15 CFHNs from the metropolitan sections of the Area Health Service CFHNursing Service volunteered to assist with recruitment. In order to ensure that the study information packages for first time fathers were easily available to these CFHNs, I attended the premises from which the metropolitan CFHNursing services are administered, and where the first study information meeting for CFHNs was convened for various periods over two months following the start of recruitment. This also enabled me to address their concerns. By three months following the start of recruitment, 70 packages had been distributed to the CFHNs and they were still asking for more. However, after four months of the recruiting period only five first time fathers meeting the study criteria had returned a signed consent form.

**Issues arising in recruitment processes.** It was originally anticipated that approximately ten first-time fathers, who met the study’s inclusion criteria, would be purposively recruited so as to ensure that if some first time fathers ‘dropped out’ of the study for any reason, it was likely that five or six may still remain. However, recruitment was slow, even though the nurses were enthusiastic about participating in recruiting fathers for this study. When asked about this the nurses indicated to me that they thought the slow recruitment was because not many first –time fathers were in attendance at their baby’s first visit with the CFHN and so they were not able to give the information letter to them. I discussed this with my supervisors, and decided to change the initial recruitment process to allow nurses to give an information package to a mother to give to her partner if he was a first time father. This
required a variation application to the HNEHealth HREC and TUNHREC. Following ethics approval, twenty information packages to be given to mothers were distributed to the nurses involved in recruitment. However, this had no impact on further recruitment numbers. Six months following the start of recruitment it was decided to cease recruitment and complete data collection from the five participants. This decision was taken on the basis that it was likely that two interviews with each of these fathers would result in sufficient quantity and depth of data in the light of the phenomenological method being undertaken. Fortunately, these five fathers proved to be very committed in providing information about their experience and they participated in all the facets of the data collection process willingly.

3.3.4 An introduction to the Study’s participants.

The ages of the five first-time fathers in this study ranged from 30-36 years of age and they came from a broad range of cultural and socio-demographic backgrounds and occupations. Table 3.1 (below) identifies the selected pseudonym for each father, his age, his partner’s or wife’s age, whether they were married or in a de-facto relationship and the length of time that they had been in that relationship. Each father’s occupation, his ethnicity and the sex of his baby are also identified. Unfortunately, the age of Andrew’s wife and how long he had been married are omitted from Table 3.1 because I forgot to ask Andrew these details at the time of the interview.
Two fathers were from English speaking, Western European countries. John and his wife had emigrated from England one year prior to his participation in the study and Hans, who was from Holland originally, had been in Australia for ten years by the time he was interviewed for the study. The remaining three fathers were Australian born. Of the five participating fathers three were professionals (Hans, John and Andrew) and two (Larry and Bruce) were non-professionals or tradespersons. Bruce had his own business and he and Larry were negotiating with their partners about reducing their work time in order to look after the baby. This was partly because both men’s wives earned more than they did therefore it made sense financially for these women to work longer hours and their husbands to become the primary carers. However, neither Bruce nor Larry reduced their work hours or became primary carers for the baby during the study.

Table 3.1   Demographic Data

<table>
<thead>
<tr>
<th>NO.</th>
<th>PSEUDONYM</th>
<th>AGE</th>
<th>PARTNER AGE</th>
<th>MARRIED / DEFACTO</th>
<th>OCCUPATION</th>
<th>ETHNICITY</th>
<th>INFANT SEX</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Hans</td>
<td>32</td>
<td>30</td>
<td>Married 2yrs</td>
<td>Computer Analyst</td>
<td>Dutch</td>
<td>Female</td>
</tr>
<tr>
<td>2</td>
<td>Larry</td>
<td>32</td>
<td>29</td>
<td>Married 3yrs</td>
<td>Marine Tradesperson</td>
<td>Australian</td>
<td>Female</td>
</tr>
<tr>
<td>3</td>
<td>John</td>
<td>33</td>
<td>33</td>
<td>2nd marriage of 2yrs</td>
<td>Teacher</td>
<td>English</td>
<td>Male</td>
</tr>
<tr>
<td>4</td>
<td>Andrew</td>
<td>36</td>
<td></td>
<td>Married a number of years</td>
<td>Engineer</td>
<td>Australian</td>
<td>Female</td>
</tr>
<tr>
<td>5</td>
<td>Bruce</td>
<td>34</td>
<td>31</td>
<td>Defacto 10yrs</td>
<td>Own Business Carpenter</td>
<td>Australian</td>
<td>Male</td>
</tr>
</tbody>
</table>
During these interviews, the fathers also discussed general information surrounding the birth of the baby. Bruce was present at the birth of his baby and he assisted his partner during the normal birth of the infant. Hans was also present at the birth of his baby but his wife had to have a forceps delivery. Andrew observed his wife have an elective lower segment caesarean section (LSCS). John and Larry spoke about being concerned about their wives and their babies because of them having had an emergency LSCS. John (whose previous baby was still-born) had to endure his second baby not breathing for 8 minutes following birth. This baby required resuscitation and initially had a poor prognosis. He chose to stay in hospital with his wife for two weeks while his baby was being cared for in a neonatal intensive care (NICU). Following discharge home and for the first months his baby boy required multiple appointments to check on his development and any repercussion of his initial peri-natal lack of oxygen. On the other hand, Larry’s baby had mild respiratory distress following his wife's emergency LSCS and his baby was in NICU for 3 days only and had one check up with a neonatologist following discharge. The baby had no complications or concerns. All of the infants were breastfed following birth. However by the second interview Bruce’s infant had stopped breastfeeding and was being bottle fed.

John saw himself as a first-time father and yet he had previously had a baby who was stillborn. He signed the study’s consent form to say he was a first-time father and it wasn’t until he was interviewed that he discussed the fact that five years previous to the study, he and a different partner had a baby girl who was stillborn at 24 weeks of gestation. Despite this, during his first
interview John told me that he did not view himself as a first-time father until he “had a live baby” which is why he wanted to be in the study.

Hans, Larry and Bruce stated emphatically early on in the interview that they wanted to be the exact opposite of their own fathers. John and Andrew, however, wanted to be like their own dad or to emulate their dad but they did not mention this until asked by the researcher. John particularly didn’t want to be like his mother.

### 3.3.5 Data collection.

Data was collected through the use of field notes, diaries, journals, and unstructured interviews with the participants. These are described below.

**Unstructured interviews.** Both interviews with participants were unstructured and non-directive, apart from an initial open question and some prompts (Appendix 3) to ensure the conversation flowed. Unstructured interviews are suited to phenomenology because they enable participants to discuss their experience of the research topic in their own way and sequence and at their own pace. Following the opening question, I “follow[ed] the participant’s lead” (Streubert & Carpenter, 1995, p. 43), only asking clarifying questions in a conversational style if required to facilitate expression. In this way, I did not lead the interview and ensured that the participant decided on
where to start discussing his experience; a process in keeping with phenomenology. With participant’s permission I also recorded the interviews using a digital recorder.

The first interview with each father was held between five weeks and three months following the birth of the baby and focused on the father's initial experiences. The purpose of the first interview was mainly to establish some rapport in order to get to know the participant better and to listen to and gather information about his experience. I sought to gather some demographic information (Table 3.1) as well as general information about the baby's birth and their work situation in order to help me get a broader perspective of each participant and better understand them and their experience. I collected this demographic data prior to the start of the first interview with the first father, however this did not seem to encourage the flow of information and so, in further interviews, I chose not to seek the demographic information specifically unless this information was not forthcoming and then I sought this information at the end of the interview. This change seemed to improve the interview flow and the feeling of ease for both myself and the participant. However, in managing the interviews this way, I failed to collect some demographic data from one father (Andrew).

Unfortunately, unused to the digital recorder, I accidentally erased two first interviews; John’s and Andrew’s. This was discussed with my supervisors and it was decided that if the participants agreed, further first interviews would be held with each of these. Nevertheless, I found that I could review John’s
first interview rather than repeat it because I had written copious and specific
notes from memory the day after the deletion occurred. Unfortunately,
however, I did not have comprehensive notes from Andrew’s first interview so
he agreed to be interviewed again. Andrew was far more relaxed in this
repeated interview than when he was first interviewed and he verbalized his
experiences more clearly.

All interview transcriptions were labelled using a code number and then later a
pseudonym for identification purposes. All were transcribed verbatim.
Although I transcribed the first interview, I found this time consuming and
employed a transcriber to transcribe all further interviews. Each father was
sent the transcript of his interview so that he could make any comments, edits
and/or deletion that he wished. Each was requested in the information letter
and at interview, to return the edited transcript within two weeks. If I had not
received the reviewed transcript by the end of two weeks I telephoned the
father to inquire whether he would like to make any changes to the transcript
over the phone. All fathers had to be telephoned as transcripts were not
returned.

The second interview with each father was convened between three and six
months following the birth of his baby. Initially, my study was to focus on the
experience of being a first time father over the first four months following the
birth of their baby. However difficulty arranging the second interview, perhaps
because fathers were so busy in these early months, meant that three fathers
could not be interviewed for the second time until almost six months following
the birth. Hans and Bruce’s second interviews took place at three months following the birth of their baby and the other three fathers’ second interview occurred between five to six months following the baby’s birth. Some of these interviews were later than planned due to the time pressures on fathers, for example John cancelled his second interview and could not make a further date for this until his baby was nearly six months old; Larry went overseas for some months with his family and did not return until his baby was five months old and Andrew was difficult to contact between his first and second interview due to work issues. These factors resulted in data collection in the study taking place over six months rather than four as was originally planned.

The second interviews were again of approximately one hours duration and audio-taped. As with the first interview, I posted each father’s interview transcript to him for review and editing, asking him to return it within two weeks and prompting him via a phone call if he did not do this. All fathers were happy with their transcript and did not request any changes. Hans said he would keep the transcript to show his child when she was older.

Munhall (1994, p. 294) recommends a second interview provides an opportunity for further establishment of rapport and therefore enhancement of the data. In this study a second interview accomplished this, allowing the participant to elaborate and expand on previous themes, and to comment on his previous interview. It also enabled fathers to have additional time to reflect and develop their views more fully.
**Field notes.** Field notes were written before and after each interview to provide data about its broader context to supplement the interview data. Field notes enabled me to document:

1. The context and factors surrounding the interview including the setting, atmosphere and environment.
2. Participant's body language and the exact sequence of how the interview progressed.
3. Who was present at interview and the way the participant and their partner reacted to the interviewer.
4. Notes about ideas or questions that emerged from the interviews (Streubert & Carpenter, 1995, p. 43).

**A reflective journal.** I kept a journal throughout the project to capture and record my thoughts about the research, and of the topic in general, gleaned from my professional or personal experiences or from the interviews themselves. This assisted me to keep a record of how decisions were made in the research project, including analysis decisions and my thoughts about these including any biases I noticed in my thinking (Streubert & Carpenter, 1995). As well, I recorded and transcribed all meetings between myself and my supervisors at which general supervisory issues were discussed, emerging themes in the data debated and our life experiences of fatherhood and other topics relevant to the study exchanged. In this way, these discussions were helpful in clarifying direction and decisions made about sub
themes and themes. These transcripts also provided a record of how and why I made some decisions and the discussion surrounding this.

**Researcher's diary.** I used a diary throughout the study in which I documented the exact dates relating to recruitment, interviews, and phone calls to participants or the CFHNs who were helping with recruitment. I also noted particular dates when significant conversations took place and their context as well as the exact dates I sent or received mail from the participants or the CFHN recruiters. In addition I chose to record the dates when I decided to commence a new approach in my search for meaning and the reasons I had decided to pursue a different course of action.


The third step, according to Lauterbach (1992, p. 154) follows van Manen’s (1984) method which involves “phenomenological reflection” and includes two key activities: “conducting thematical analysis and determining essential themes”. Munhall (1994) explains these activities in a simple way using van Manen's (1990, pp. 59-63) lengthy description. She writes;

Conducting this thematical analysis has four parts:

1. Uncovering thematic aspects in life-world descriptions.
2. Isolating thematic statements (by highlighting these themes line by line and then clarifying with the participants that these were the core themes of meaning).
3. Composing linguistic transformations.
4. Gleaning thematic descriptions from artistic sources.

(Munhall, 1994, p. 243)

In my study thematic analysis began during the interview stage, when initial meanings were noted in field notes and my reflective journal. This was followed by more careful analysis subsequent to the first interview, when the researcher read and re-read the transcribed interviews and noted important phrases and identified possible themes and meanings (Cohen et al., 2000, p. 76). Nevertheless I had to remember not to determine the ideas and themes too early but rather listen to the first time father’s experiences throughout the data collection phase while noticing and further explaining emerging themes. Field notes helped me document and recall thoughts I had before and after each interview to further reflect on during this simultaneous data collection and analysis phase. This also assisted me to identify and seek more discussions about possible themes or gaps in the data during the interviews. All this time I listened and re-listened to the interviews and documented reflections while listening.

Once I identified that the transcribed experiences of being a first-time father were accurate portrayals of the interview, I began to take more thematic steps in the data analysis process. I looked for the way themes or ideas were described and what and how they were expressed, and the importance and verification of themes in the parts and the whole of the interview. I found that the themes could also be categorized in other ways. For example, when the
participant said he felt like a father and when he didn’t. In my study, ongoing personal reflections about fatherhood were constant as I came across information and insights about the contemporary father in newspapers and magazines and in my own life experiences. I looked up the etymology of words such as ‘first-time’, ‘father’, ‘fatherhood’, ‘fathering’, ‘mothers’, ‘motherhood’, ‘connection’, ‘attachment’, and ‘reciprocal’ as well as others to ensure the meaning of these words was clear to me.

Participant’s responses were numbered line by line on the transcript for ease of re-checking statements and meaning later on in the analysis. Significant statements were highlighted and meanings of these statements were written in the margins of the transcripts. To attempt to attain meaning the researcher examined examples that the fathers provided of the phenomenon again and again. Sometimes going line by line was the only way to try to understand what a father was saying and thinking about meaning. An example of this is the experience of ‘seeing’ when I went line by line in one of the father’s transcripts to explore why he was so philosophical and suddenly it became clear that he was ‘trying to keep things calm and in perspective’ which eventually became part of the main theme ‘Struggling to Find a Balance’ (see Appendix 4). I was constantly thinking of commonalities and differences. Possible emergent themes in the data were written as paragraphs and then more specifically as they became clearer. The researcher continually moved from the parts to the whole of the text ensuring meaning was verified until no new themes emerged. Although this may convey a linear process it involved instead a circular one because these steps are consistently repeated to get to
the underlying meaning required (Munhall, 1994; van Manen, 1990). In this process of analysis I discussed the themes at meetings with supervisors and clarified these sometimes adjusting wording slightly and questioning each theme and what it meant. Opportunities to present preliminary themes at conferences and education sessions meant I received feedback regarding these initial themes from others in the field. The process of writing, re-writing and re-writing again about the themes enabled me to build understanding and insights and clarify meaning. Reflective analysis ensued and led to “composing linguistic transformations” that more accurately reflected the meaning behind statements (Munhall, 1994, p. 245).

I reflected on the phenomenological existential themes in order to gain more understanding of the meaning of ‘being’ a first time father and considered themes emerging from the father’s interview data in relation to whether or not and how they reflected one or more of these existentials. This shed light on the broader context of these first time father’s experience which increasingly suggested a transition process. When stuck, I listened to a Computer Disc (CD) of contemporary songs about fathers and also read phenomenological literature that focused on fathers to gain more insights and underlying meanings of what the participant fathers were trying to explain. Ongoing reflections on my experience as a CFHN also offered further insights to possible meaning of themes.
3.4.1 Verification of preliminary themes.

At the conclusion of the analysis of all interviews a summary of preliminary themes emerging from data was offered to the participants so they could comment on whether these themes seemed to fit their experience of being a first-time father. Three of the five fathers communicated their response to this summary via an e-mail (see Appendix 5) as this seemed to suit them better than responding to a phone call or mailing their comments. The other two participants had not responded after one month following the summary of the themes being sent to them, therefore I telephoned them. They stated they would e-mail their response to the researcher but this did not occur.

3.5 STEP 4: Phenomenological Writing and Re-writing of Discovery –
The Fourth Step in Lauterbach’s (1992) Approach

Lauterbach (1992, p. 155) follows van Manen’s (1984) “fourth and final procedural activity”, however she also acknowledges that the analysis is a circular process, this fourth step being “ongoing throughout the investigation, from proposal to final writing” (Lauterbach, 1992, p. 155). Cohen et al., (2000, p. 81) explains that the phenomenological method is “the movement from identification and comparison of themes to a coherent picture of the whole” which can only occur “through this reflective process of writing and re-writing”. According to van Manen (1984, p. 65) phenomenological writing needs to contain examples and descriptions of the phenomenon expressed in a poetic way which “re-awakens our basic experience of the phenomenon”. The final
description of each theme in this study, provided rich interpretation of the fathers’ stories and the unique and shared meanings of first-time fatherhood (Munhall, 1994). The culmination of this enquiry provided an overall description of the phenomenon as well as the concepts (themes) that describe it which ultimately enabled a description of the essence of being a first-time father (Munhall & Oiler, 1986, p. 101).

3.6 Ethical Considerations

Prior to and during the research it was important to consider my “personal and professional responsibility” in ensuring that this qualitative study was “morally and ethically sound” (Streubert & Carpenter, 1995, p. 33) . The most important ethical principles involved in this research was the participant’s right to self-determination through voluntary participation on the basis of informed consent, maintenance of anonymity and confidentiality of data, and protection from harm.

3.6.1 Voluntary participation and informed consent.

All potential participants were provided with detailed verbal and written information about the study by the CFHN who was recruiting them. The inclusion of the CFHN in the recruitment process enabled me to remain at “arms length” from participants and to ensure that their participation was voluntary.
The information letter provided to each potential participant outlined the research, its aims, methods, and expectations of participants (Appendix 1). It also invited the reader to seek more information if required prior to consenting to participate in the study by phoning the researcher on the contact numbers provided. The letter also advised the participants that they had the right to withdraw from the study at any time without any negative consequences to themselves or their baby. Most fathers did not contact me directly but preferred to send the signed consent form to me, after receiving the information letter. On receiving the signed consent form, I then phoned the father to ensure he understood what the study entailed, prior to making a first interview appointment.

3.6.2 Anonymity and confidentiality.

“Research subjects have the right to anonymity and the right to assume that the data collected will be kept confidential” (Burns & Grove, 1995, p. 372). Therefore, the initial approach to participate was via the local CFHN who offered the study’s information letter to the first-time fathers. The nurses were not aware which fathers ultimately consented to participate as they had no further role in the study. Participants were advised that their confidentiality would be assured by not using the participant’s real name in the transcript, study, conference presentations or publications. The allocation of a number and pseudonym names to each father ensured their anonymity. This was further ensured by location of a master list of all real names and pseudonyms in a separate locked cabinet from the consent forms, interview cassettes and
computer information. The transcriber employed to assist with interview transcriptions was made aware of the need for confidentiality in relation to data and was requested to treat all information as confidential. Apart from this, my supervisors and I were the only people who had access to the data and written material which was stored in a lockable filing cabinet in my workplace or on computer accessible by a password. At the conclusion of the study this written material and computer device will be kept in locked filing cabinets at the School of Nursing and Midwifery at the University of Newcastle for five years and then destroyed.

3.6.3 Protection from harm.

“One of the most fundamental ethical principles in research is that of beneficence, which encompasses the maxim of “above all, do no harm”’ (Polit & Hungler, 1991, p. 31). On receiving the consent form, I contacted the participant directly by phone to arrange a first interview and to ask them if they were willing to have their interview audiotaped. I assured them that the tape would be switched off at any time on their request and not re-started without their permission.

I also ensured that processes were in place should any emotional issue or concern be experienced by the participant father. It was decided that if anxiety or distress was experienced by the father in any interview, the interview would be stopped and I would ask the participant if they would like professional support or assistance. Had any participant requested this they
would have been initially referred back to the participant’s General Practitioner for ongoing support. As a second source of support, if preferred participants could also have been referred to a social worker or psychologist. It was thought possible, that the process of disclosing experiences might be distressing at the time for some participants, however this proved not to be the case. In fact, instead, this process seemed therapeutic in that the fathers stated they found the process of “telling their story” personally helpful and were thoughtful and introspective but did not appear to be anxious or distressed at any time.

3.7 Conclusion

In summary, this chapter commenced with description and discussion of Lauterbach’s (1992) hermeneutic interpretive approach as it was applied to the study’s process. The four steps in this approach next provided a structure in which to identify the research question and aims of the study and provide a rationale for the choice of the study’s philosophical and methodological framework. My assumptions have also been outlined so as to acknowledge and identify my perspective on fathers prior to undertaking the study. The study’s recruitment processes and data generation tools were next discussed and their congruence with the methodological framework highlighted. A description of how Lauterbach’s (1992) approach enabled the process of concurrent reflection and analysis that is consistent with hermeneutic
phenomenology and enabled the analysis of the study’s findings was also identified. An outline of ethical considerations in the study concludes the chapter.

The next chapter identifies the findings from the study’s data analysis, including the themes and sub-themes that emerged from its data collection and analysis process.
Chapter Four

Findings

Essential Themes: The Phenomenon of Being a First Time Father in the First Six Months Following the Birth of his Baby

4.1 Introduction

In accordance with phenomenological analysis conventions, this chapter describes the themes emerging from the study data which capture the meanings expressed by first time fathers in their experience of the first six months following the birth of their baby. Phenomenological analysis values the unique and individual over the generalizable. Therefore understanding of how it is to be a first time father was explored identifying variations between each individual father’s experience and the context in which they live, as well as their experience of this phenomenon as a whole.

The research question focuses on the experience of being a first –time father in the first six months following his baby’s birth. However most of the fathers in my study started their story in the pregnancy itself stating they believed that this was the beginning of their story. Meanings in fathers’ experiences were found to be embedded in the existential ‘lifeworld’ experiences of relationality (lived other), corporeality (lived body), and temporality (lived time). In this study, fathers’ experience is one which incorporates finding responsibility, searching for connection with their baby and developing a sense of deep
belonging or embeddedness in the family. This journey is one of transition that takes place in lived time which includes each father’s life history and context of their lives and relationships with others, particularly that of their own father’s. For three fathers their relationship with their own father appears to have had a profound influence on their journey. Each father’s journey is an experience of trying to control the change that is happening in his life while reconciling the past, moving forward and once more achieving balance to his life, leading to a sense of relief and achievement.

The essential themes emerging from data are: The Dawning of Responsibility, Seeking and Finding Connection, Absolute Joy, Wonder, Delight and Unconditional Love, Struggling to find a Balance and Moving towards Cohesion and Achieving Harmony. These themes capture the experiences these first-time fathers described in this study and tell of their journey being “a bit of a roller-coaster” (Hans) of emotions and experiences. These themes and this journey of transition are now discussed.

4.2 The Dawning of Responsibility

The theme of responsibility comes through strongly in data provided by these five first time fathers and occurs prior to connection but is “shouldered and sustained” (Marcel, 1962, p. 116) by reciprocal connection to the baby. The father’s examples of their first feelings of responsibility alerted me to the difference between the way mothers and fathers react after first meeting their baby. This prompted me to consult the dictionary, phenomenological literature
and fatherhood songs in my search for the essence of mothering and fathering in order to help me clarify this theme. For these fathers responsibility was often expressed as “feeling like a father” and “taking responsibility” and a gradual realization of responsibility becoming more apparent as time went on. Xavier Rudd’s song ‘Little Chief’ reflects the essence of responsibility.

**Little Chief**

You are the one, for you I breathe  
You are my son  
Precious little life  
To guide and lead  
With open arms, with open eyes, with an open mind  
I’ll guide and I’ll lead  
You wherever your heart wants to go  

(Rudd, 2007 on Fatherhood, track 5)

This sense of responsibility is also indicated in the meaning of being a father, when, according to the Macquarie Dictionary ("The Macquarie Dictionary," 1991, p. 640), a “father” is defined as one who “take[s] the responsibility of [someone]”. This is in contrast to the Macquarie Dictionary’s ("The Macquarie Dictionary," 1991, p. 1117) description of “mother” which is one who “nurture[s] or care[s] for someone”.

van Manen (1998, p. 22) explains that “responsibility is the experience of ‘being there’ for the other”, and that fathers feel the “call to responsibility”
when they first see their baby (van Manen, 1998, p. 21). This sense of responsibility was evident in the fathers’ descriptions of the ‘call’ to responsibility experienced first when helping the mother in pregnancy and labour, and second, when the baby was born. Fathers noted that this ‘call’ to responsibility was sensed more strongly in the second instance than the first.

Marcel (1962, p. 106) explains that responsibility “exists whether he [the father] is conscious of it or not” and identifies that Fatherhood “only exists as the carrying out of a responsibility shouldered and sustained” (Marcel, 1962, p. 116). All of the fathers in this study had planned the pregnancies with their respective partners, and therefore had already made a decision to become a father prior to the pregnancy. However, it was clear that only Larry recognized and acknowledged the responsibility of being a father prior to his baby’s birth. This apparently did not ‘hit’ the other fathers until the baby was born or soon after when they started to realize and accept this responsibility.

Except for Larry, the fathers did not feel connected to the baby in pregnancy and therefore they felt no responsibility for him/her. They emphasized that they didn’t ‘feel like a father’ during this period. From their discussion, it seemed that these fathers did not ‘feel like a father’ until they felt a sense of responsibility for their baby. However, the pregnancy brought with it an increasing awareness of their partner’s vulnerability and a sense of growing responsibility for their partner.

John explained he started his story in the ante-natal period because he thought “that’s where it all sort of sinks in and…you start making plans for
things”, but he didn’t believe “fatherhood” started then. He stated he felt “no attachment until the baby’s born” and thought the ante-natal period was just about “becoming a better husband” where “your wife needs more care and love” [but was not] “related to the baby”. Two other fathers also illustrated this sense of need to care for their partner during her pregnancy; Larry discussed his wife needing a “hand to get out of the car and roll over in bed”; and Hans explained how his wife said in the last few weeks of pregnancy, “You know, I can’t tie my shoes” (he laughed joyfully remembering this). He commented that that’s when he started to feel some “involvement” in the pregnancy because he needed to help his wife and therefore felt the responsibility of this. Andrew, on the other hand, in comparison to the other fathers, reflected that although he had felt some “excitement” about the impending birth, he hadn’t really felt much responsibility for his partner or baby, until the baby was born. He cited several reasons for this. Firstly he thought this was because his wife was well during the whole pregnancy and he didn’t have to help her (like the other fathers). Secondly he “…didn’t really feel like a father” during pregnancy and he related this to their close friends having lost a baby a long time ago during a pregnancy. He suggested that because of this he and his partner had not wanted to “get our hopes up” as there was “still lots that can [could] go wrong”. A third reason why he didn’t feel much responsibility in pregnancy was because he didn’t really have any financial worries so there wasn’t any pressure to make any great decisions.

In contrast to the other fathers in this study, Larry described how he “felt like a father” immediately his wife became pregnant. Larry’s definition of “feeling like
a father” seemed to be related to feeling connection with his baby and therefore feeling responsible for his baby and partner together. Seeking to clarify Larry’s experience I explored the difference between the responsibilities that he felt during his wife’s pregnancy to those which he experienced when the baby was born. In response to my questioning he said the difference was that “it feels like there’s more responsibility” when the baby was born. He explained this further by stating that after the baby’s birth, “You [have] got two separate entities rather than just one”, so he not only felt responsible for his partner but also the baby as separate individuals.

Bruce expressed that even though he didn’t feel like a father in pregnancy he did feel like he had started “taking a lot more responsibility” in the pregnancy in a different way. He took more responsibility for his “…actions and the way I behave”. Referring to his behaviour he explained that he was starting to “tone it down”, and finally that he had started thinking about the “consequences” of his actions. He gave vague examples of how he felt he was more responsible in his behaviour since the pregnancy which included saying he was starting to “behave” instead of being a “bit rough and a ratbag occasionally” in the past. However, he gave specific, concrete examples of his change in driving because of this sense of responsibility just before and after his baby was born.

4.2.1 Being vigilant for the mother and the baby in labour.

From their interviews it appeared that during labour was the first time most of the fathers felt real responsibility for the mother and instinctively for their baby.
They all discussed the labour at length as part of their story but they viewed their role as one of maintaining vigilance and being a “close observer” (Larry) or one of “assessment of the situation” (Andrew). Nevertheless the length of time they spent discussing their partner’s labour appeared to indicate its importance in their experience of becoming a first time father. They explained how they were unprepared for the role they described, even though they had attended ant-natal classes. However, they also explained how they adapted to their role and told how they quickly started to observe the body language of the mother and particularly of the other attending health professionals. They also constantly “assessed the situation” (Andrew, Larry) to decide how they thought labour was progressing and how their partner and baby were managing and coping and then turned to thinking ahead about what might happen next.

Hans, who had been the most confused about his role in pregnancy, also described how unprepared he was for how “intense” labour would be and the responsibility of looking after his wife. He said his wife was induced and the “contractions just hit her”, and that “we didn’t expect it”. He explained that “it was just pain and there was nothing you could do”. He said he “saw tears coming out of her [his partner’s] eyes and I thought hmm – this is getting pretty serious”. Hans explained that he just felt “helpless” and “tired” with the “constant focus on helping her”. Later, he felt “a bit more in control” when he could help practically by giving her the gas, and helping her focus on her breathing. Hans had never imagined it would be “basically six hours…straight being on the ball”.
Hans explained his responsibilities in the close observer role which illustrated his sense of needing to be vigilant and the need to advocate for his partner. He “was reading the looks of the midwives” to gauge the progress of labour and explained that he “saw her [the midwife] looking at her watch in a different way ... like ‘where the hell is that obstetrician’?” He realized from this reaction and the fact that his wife was “really, really tired,” and “exhausted” that it wouldn’t be long before a “decision” was made. That decision was to perform a ventouse extraction. He said that he “didn’t anticipate it being that hurtful” and he sounded anxious and stressed as he led me through the course of events. He discussed how he tried to keep his wife going by letting her know when he could see the head, and he thought this gave her a bit more “confidence”.

Larry also explained that he realized he had to be vigilant when his wife was in labour. He said he “sort of cottoned onto” the body language of the health professionals during labour as he realized there was something wrong but his wife hadn’t noticed because “she was a bit impaired with her thought processes and things”. Larry had recognised as time went on that his wife’s progress was not good in labour, because there were a lot of “little setbacks” all the time, like the cervix not dilating, having to have the waters broken manually and checking the baby’s blood. Larry said he “saw the midwife and the obstetrician look at each other and you know take the scan” and he realized that “they knew straight away” that the heart rate of the baby wasn’t right, because it wasn’t “fluctuating”. He said that you could tell there “was some type of constriction or restriction during contractions”. Larry also had to
be vigilant to gauge when his wife was getting distressed about the changes they were experiencing to their birth plan and needed cajoling. He clarified that he felt distressed more for his wife’s sake than anything as he knew she would not get over this experience easily. Larry said that he understood the labour was very painful for his wife because “she’s a tough chick” and she kept saying “this hurts a lot more than I thought”.

John’s vigilant observance of verbal and body language in the labour room during the period in which his baby was born and didn’t breathe for eight minutes was particularly poignant. It illustrated his feeling of time standing still. He said how absolutely no-one spoke in those eight minutes and that no-one offered reassurance, and this demonstrated the seriousness of the situation. He stated everybody had their head down and looked anxious. He understood this silence, saying it was no good promising or reassuring someone if you couldn’t deliver on that promise. He decided to be an advocate for his wife by staying with her instead of being with their baby in NICU so he could be with her if their baby died and they would hear the news together.

Andrew seldom referred to his wife’s labour until asked, when he said he felt his role was just “assessing the situation”, almost like a type of problem solving. However, as he reflected, he told how he helped advocate for his wife and negotiated with the midwives about her not wanting an epidural, but being happy about a caesarian section. He explained that he “knew the thing that she was most worried about was to actually stick something into your spine [the epidural]”, so he explained this to the midwives so they would understand
his wife’s reaction when this was suggested. However, when they said “caesarian”, he knew that wasn’t a really big deal for his wife, as they had discussed this before, so he told the midwives this which helped keep everything calm. After his wife’s emergency caesarian section, he observed the health professional’s body language to gauge if his baby was healthy. He said the paediatrician checked their baby, and he knew everything was normal when the baby “came back crying” and “there wasn’t any panic stations everywhere, everything seemed to be going normal [sic] and people were still chatting.”

Bruce demonstrated advocacy and vigilance when saying he “took control’ of the situation as soon as his partner went into labour, by way of phoning the hospital and timing her contractions. However, he didn’t consider this as advocacy but rather suggested his role was as “bystander” at that stage, and “just there…for moral support”, which he identified as including “rubbed [ing] her back”, and getting her a “cold drink” and waking “her mum up”. Bruce particularly drove “nice [sic] and calm [sic]” to the hospital and “yeah [sic], didn’t speed or um go through any red lights or anything”.

Like Andrew, Bruce also demonstrated vigilance and played an advocacy role in negotiations between his partner and the midwife about an epidural that his partner wanted. However, for him this was more difficult and he described how “you’re stuck between a rock and a hard place” in deciding this. Observing the midwife’s body language he explained this dilemma saying, “she’s [the midwife] sort of looking at me you know as if to say ‘let her know
she doesn’t need it’ [the epidural]”. His partner kept saying “I want it, I want it now, give it to me I want it”, but he just kept on “trying to reassure her”, that she was “doing really well”. He said he felt it best “to keep everybody happy”, because he suggested that he didn’t “want to upset the midwife either, cause [sic] you don’t know what she’s gonna [sic]… [do]”. He had to make a decision in the end on what he felt his partner could cope with by being vigilant in observing his wife.

The above examples, illustrate how during labour all the fathers experienced feeling responsible to remain vigilant and advocate for the welfare of both the mother and baby. However even though this indicated that the fathers experienced responsibility for their partner and baby at this time, it was almost as if the fathers did not recognize this taking on of responsibility until their baby was born.

4.2.2 Feeling like a father – associating it with responsibility (sub-theme).

Apart from Larry’s experience of immediate responsibility in pregnancy, most of the other fathers felt the full impact of responsibility following the baby’s birth. They expressed this experience in different ways. Andrew explained, “I think the first time I felt like a father was um – once she was born, before that it wasn’t sort of real”. Andrew related feeling like a father to his first feelings of responsibility. He viewed a sense of responsibility as different to that of connection, which he commented didn’t occur for him until later. He discussed
how he first realized that he had a “whole new set of responsibilities” when he was suddenly left alone with the baby shortly after the birth. He explained that the realization that he was responsible for the baby came as a “different and strange” feeling and felt like a “weird situation” that he wasn’t prepared for. He said he had thought the hospital was “a safe environment” where he wouldn’t have to make any decisions and commented that he hadn’t felt like a father before because he thought “the focus” [in pregnancy was] “more just about” the changes occurring to his wife and “not the baby”.

Bruce also stated he “didn’t feel like a father till he [the baby] was actually born”, and he said “that’s when it hit me, yeah, I’m a dad now”. He said how the period after the birth “was totally different to pregnancy” in that he could see and hold the baby. He explained how he forgot about his partner for a while and just “looked at me [sic] boy”. When I asked Bruce what he had done with his baby in that space and time, he stated that he; “spoke to him, told him I was his dad, tell [told] him I’m gonna [sic] look after him and he’s gonna [sic] have a good life with us and I’ll do the best to take care of him and held his little hand…but he just wouldn’t open his eyes.”

Bruce’s words appeared to illustrate that he was quite aware of his responsibilities now and was trying to connect with his son from the first moment he saw him. Bruce also expressed that he was “taking more responsibility” once his baby was born. He pointed out that the first change he noticed which indicated to him that he was feeling more responsible took place; “As soon as he [his son] was born – as soon as he came out I could
see [the difference] with me driving down the streets, you know”. He explained a little later in the interview that usually, “I'll just cut em [sic] off. Now I'm always looking in the mirror making sure there’s no-one there”. When I asked him how he had suddenly made this change he explained in a matter of fact way; “Well I thought I’ve got to [pause] I've got no choice. [pause] I’ve got a little; I’ve got a little person to look after [pause] and I can’t you know – I can't end up getting hurt or injured or [pause]”

Like Bruce, Hans also described a change in his way of driving immediately after his baby was born. He explained;

Yeah, just um – I remember driving home [from the birth] and I go like [sic] [pause] it did feel like a different responsibility [pause] like [sic] usually I just you know [pause] you drive home you didn’t think about it [pause] I guess when I was driving home I did feel like [pause] well, I don’t want to get myself killed on the road this time! [Laughs] …surprised me a little bit.

(Hans)

Following the birth of their baby and the initial awareness of feelings of additional responsibility, two of the fathers explained this awareness seemed to increase over time. For example, at the second interview Bruce discussed how this realization about his importance and responsibility to his family was reinforced after a car accident he had around 3 months following his baby’s birth and reflected: “…And then after that [the accident] I thought what
happened if [pause] if it was a lot more serious, and – you know - you couldn’t work or I couldn’t come home for [pause] for a couple of weeks or so” (Bruce).

Andrew also reflected that, “…there’s um- like responsibility that I have and things that I’m responsible for now that I never really would have thought of being something that I would [be responsible for]— yeah”. He related an example of this new found responsibility as having to come home earlier from work now because of the responsibility of helping his wife with bath time and all the things that needed to be done, now that the baby was older and in a set pattern and he was aware that the actual time of helping was crucial. He explained; “Um, so then there’s [pause] that’s a responsibility that I really need to make sure that I’m ready to come home at 5pm”.

Hans explained that by three months following the birth of the baby, he had accepted responsibility was “not even something you’d think about anymore. It, it’s just there.” Bruce and Andrew explained that this awareness of increased responsibility seemed to develop over time, corresponding with an improved connection with the baby. This feeling of better connection which is discussed next seemed to be what “shoulders and sustains” the carrying out of responsibility in the long term (Marcel, 1962, p. 116).

4.3 Seeking and Finding Connection

All fathers either used words including, ‘connection’ or ‘connect’ and, or expressed a similar meanings to these words in other terms, for example,
“attachment” (Hans) in their interviews. This was so much so, that I felt I needed to seek a more extensive understanding of the meaning of these words. To do this I explored the meaning of the word connection itself and found that the explanation provided included all the words the fathers used when explaining what appeared to me to be connection. “Connection” according to the Macquarie Dictionary (“The Macquarie Dictionary,” 1991, p. 395), means “an association (or) relationship; a channel of communication,” and to “connect” is “to establish communication, or put in communication; to associate or attach, to associate mentally, to become connected, that is to join or unite.” Consistent with this meaning, all the men in this study expressed a need to seek connection with their baby and a sense of belonging in the family. In particular, these first-time fathers told how they searched for a reciprocal or shared connection with their baby. As may be seen from the fathers’ responses all talked about and reflected on their relationship with their own father, in relation to connection.

Larry was different to the other fathers in that he searched for connection from the beginning of pregnancy and felt mentally and spiritually connected with his baby over this period. He struggled to explain this and said;

Um, cause [sic] I know what it is. Yeah and it’s a part of me, part of us - its like its going to be the manifestation of, of our relationship when she pops out, but because she was there and you knew she was there and you knew it was a baby and [pause] when she comes out she’s another person and then we are
three. But while she is in J [his partner] she’s still the both of us and it’s, it’s, yeah, it’s the anticipation as well, maybe because….I’ve never been around children… (Larry).

It seemed that for Larry during pregnancy the baby was a shared entity with him and his partner but after birth she was a separate entity with the “three” members making up the family. Larry continually searched for ways to improve this connection in pregnancy through various verbal and bodily means and described how he talked to his baby in the womb. He explained that “We ran some names past her and things when we thought she was a boy”. When questioned if anyone had told him to do this Larry said, “Um no, it just felt like what we would do …”. He explained that he would “…include her as a family. And try and get some feedback, when she was kicking away”. It sounded like there was almost an urgency to communicate with the baby and that was extremely important to him. After the baby was born, he explained how he and his partner were having a conversation and a cuddle in bed and he felt like “…it’s really strange to have to cuddle you, to hold you and not have the kick [pause] hitting my stomach”. He seemed to miss this physical connection with his baby and his partner as a bodily integrated whole.

Larry’s behaviour in pregnancy is better understood when considering his own family context and his personality. He stressed that he really wanted a role and a sense of belonging to a family as his own family was not very close and did not have many members. He was also quite a philosopher and seemed to think abstractly in terms of spiritual and mental connection and meaning of life,
and therefore was able to connect with the unseen, [his baby before birth] which the other fathers could not do.

All the other fathers expressed a lack of connection with the baby in pregnancy in a similar way to each other. All of these fathers found it hard to relate to something they could not see or feel. Bruce expressed his reason for lack of connection in pregnancy clearly when he stated; “You’ve got to be able to see things to know they’re real, I knew he was in there, but it just wasn’t something you could see or touch”. He stated he didn’t feel like a father and didn’t feel connected at that time, however he did discuss talking to their baby in the last three months of his wife’s pregnancy because; “I knew he was in there. I knew there was someone in there. But I couldn’t see him. But I knew there had to be – [pause]…so there had to be something in there. The belly was getting bigger” (Bruce).

From this it seemed that Bruce found it very hard and confusing to connect with something unseen even though there were physical signs of growth. He later related this difficulty to his disbelief in “God” as this was also something he could not see.

Hans explained similar reasons to Bruce’s about why he didn’t really have a connection with his baby in pregnancy. In the following quote he discussed what he would say to his wife about this lack of connection;
I see you with a big bump but (pause) you know….it’s like you’re just gaining weight and in my opinion you know, I don’t feel anything moving, I don’t see anything – I just see you growing you know and I can feel a tiny bit of movement you know…(Hans)

John and Andrew identified further reasons about why they couldn’t connect in pregnancy. They said they felt hesitant about trying to connect in pregnancy because of the fear that something could go wrong during pregnancy and labour. Hans and Bruce in contrast, didn’t consider something going wrong during pregnancy or at the birth in much detail. Bruce didn’t ever discuss anything going wrong and he didn’t appear to know anyone with any birth difficulties. He explained that his personality was not to “dwell over things….just deal with it.” Hans and his wife, on the other hand had a scan which ruled out “serious conditions” but refused the Downs Syndrome Test as they had discussed that if the baby had that type of mild handicap, “they would just accept it”. In this way, Hans said he was not prepared to worry about whether there was something wrong with the baby as it would not have changed anything. He explained therefore that he didn’t set his “expectations to the level to think that I am going to be having the perfect, healthy baby.” I asked Hans if he thought those decisions had any impact on his connection with the baby during pregnancy and the first few weeks after his baby’s birth, and he said “it’s hard to say”.

However for John, the whole pregnancy was coloured by his previous experience of stillbirth, and therefore he was scared to become attached in pregnancy. Andrew also had a friend who had lost a baby and, being “logical and methodical” in his personality, he explained that he didn’t want to “get their [his partner’s and his] hopes up”. He said he tended not to feel connected or responsible during pregnancy, because as he stated, this helped him cope. For John, Andrew, Hans and Bruce the expression of their partner’s pregnancy was one where their emphasis was on “being a better husband” as John described it but not necessarily thinking about the baby yet. However, John, Andrew and Bruce said that they had not expected to experience connection with the baby in pregnancy and so did not feel any anxiety about this lack of connection. Hans was the exception to this as he expressed that he felt anxious about his lack of connection which he termed “attachment”, apparently associating this with connection. He explained that because of his own fathering history, he was concerned he would feel “no attachment” to his baby like he did with his father and therefore his relationship with his baby would replicate the disconnected relationship pattern of the past.

4.3.1 Feeling like a father - seeing is believing.

Most of the fathers said they did not feel like a father till they saw their baby. Even Larry who said he felt connected to his baby in pregnancy discussed the “huge impact” when the baby was born. John Butler’s song “Peaches and
“Cream” seemed to exemplify the feelings the fathers described to me when they experienced the birth of their baby;

**Peaches and Cream**

There you are right in front of me
A brand new day, sunrise over sea
No longer my cup half empty cause there you are
You and your mum in front of me
You’re peaches and cream to me

(Butler, 2007 track 13)

The fathers all talked about being able to see or gaze at the baby and to feel that reciprocal connection of the gaze. Bruce and Hans’s comments seemed to indicate that they were unaware that infants may not open their eyes till they are at least a week old, and they were disappointed when the babies eyes initially remained closed most of the time. They said it was important for the baby to see them and recognize them as their father. Even Larry who felt connected with his baby in pregnancy still felt differently once he had seen his baby. He said he wanted everyone to know he had just become a father;

And I thought but don’t you all know I’ve just had a baby and that’s fantastic! Why aren’t you all stopping and cheering or something? You know [he laughed with the interviewer] …

[pause] [and telling me what he said to himself he continued].

Yeah, look at me, I ‘m a dad, you know….Yeah, and it just never occurred to me that it would hit you that hard (Larry).
Bruce said he felt an immediate connection when the baby was born as he could see the baby and this made the difference for him. He explained; “He’s out – he’s screaming – and you can hold him – you can touch him”. Andrew expressed a similar experience to Bruce in that he also didn’t feel like a father till “she was there and real and holdable and all that sort of thing”.

John and Larry were similar in reaction to the birth of their baby, even though they had very different experiences in pregnancy. This similarity seemed to be because of the fact that both their wives had emergency caesarian sections, and therefore their babies were stressed and took a little while to take their first breath (Larry’s – 15 seconds; John’s – 8 minutes). Both fathers suggested that because of the traumatic delivery and concern about the baby breathing, they didn’t think immediately about feeling like a father. However, Larry felt that his baby responded to him in the first 20 minutes after her birth and transfer to the NICU. He thought this response was because she knew his voice. He showed me the photographs of the birth and was in a quiet reflective mood when he explained one of the photos; “They were putting all the stickers on her and stuff and they were all crowded around her and I, I spoke to her and she actually looked straight across [pause] at [pause] me. She was only 15, 20 minutes old”.

He expressed how he was particularly proud of his and his wife’s connection with their baby in pregnancy and how they had named her immediately when she came out because “she’s someone now!”
John was different to all the other fathers in that he needed to know his baby was alive (possibly because he had a previous stillbirth) to feel like a father. He expressed what was going through his head at this time in terms of connection and feeling like a father. He reflected; “I was probably thinking the experience suddenly became different [from his previous stillbirth]…it was different because he [his baby boy] had breathed for himself … He’d already done [sic] better than H [his previous baby girl] had done”.

John explained this was the first time he had felt some positive thoughts going through his head in relation to ‘his’ baby instead of “negative” ones. In the first week after John’s baby was born, during which time the baby was cared for in the special care nursery, he felt sure that their baby would pull through. He described how he had made a growing connection with their son at this time. He suggested that the more ‘his’ baby thrived the more connected he became with the baby, as he was consistently reassured by this progress.

4.3.2 Searching for reciprocal connection.

I recognized this as being a sub-theme of connection when I realized from their descriptions that the fathers were not just looking for connection but reciprocal connection with their babies. Thus, comments revealed that it wasn’t enough for the father to feel connected to the baby; he must also feel that the baby is connected to him. That is, that the baby knows he is the father and shows enjoyment and recognition of him as such. One explanation of reciprocal is “shared, felt or shown by both sides”, (“Merriam-Webster Online
Dictionary and Thesaurus," 2010) and states a synonym of connection is the word “complementary” meaning that “one completes the other.” The fathers when interviewed the second time when their babies were four to six months of age, used various expressions to indicate their baby made them feel “complete” and they got what Hans expressed as “the enjoyment of her [the baby]” when they had this type of reciprocal connection.

This feeling of reciprocal connection experienced by the fathers when they saw their baby gazing back at them seemed to me to be captured in a verse from “Little One” by Neil Murray;

Little One

When I gaze into your eyes I see where love resides
And you’re as happy as can be, cause (sic) you’re seeing it in me
And I’m so glad you chose me to be your dad
Little one you chose me, well pleased to meet you too

(Murray, 2007b, track 1)

Hans explained how his anxiety was fuelled when his baby was born; “I thought as it came out, you know – It would be instant there [connection]. I don’t know. I never really thought about it”. He was distressed when his expectations were not immediately fulfilled but highlighted how important the baby’s gaze was in reassuring him that this connection existed when he said, “I don’t really have any - any attachment – it is only starting now when she is focusing on us and … she is communicating with her looks basically” (Hans). However, by the second interview Hans was full of joy and excitement and felt
a sense of achievement because he had a role “like entertainment type thing” and his baby “Looks at you and then she just gives this smile. That’s what she does every morning now…. Yeah. Its just recognition and you know part of it. Part of each other, you know [pause] part of the family”. He said he felt “complete” as a man and had a sense of belonging to his family unit. He said he missed them when he was away from them and wanted to be with them again.

John was quite clear about the need for a reciprocal connection in order to feel like a father. Without this he said one cannot be a father. Although he previously fathered a baby who died he emphasized that “fathering is about being a father to a live baby”. John related his experience of feeling that the baby had taken four weeks to finally make a connection with him and his partner and started to know who they were. He explained;

But it was interesting within the time that they [the in-laws] were here we went from a point where almost she [his mother in law] was the only person that could settle him, cause [sic] we were uptight and stressed and tired and all those things. But by the time she left [at four weeks] we were like [pause] she couldn’t settle him, she would have to pass him back [to us] (John).

Bruce indicated that you need time to gain a reciprocal connection with the baby. He explained that when he minded the baby so his wife could go out,
he got”…some you know ah, private time with him as well…” and added “I’m the only one that gives him a bottle….It’s my little thing anyway”.

Like Hans, Bruce felt that by the time his baby was a few months old the baby recognised his father and this had brought a more reciprocal connection and a communication that wasn’t there before. He said he felt his son really knew that he was his dad. Bruce reflected back on the difference now compared to the time of his first interview at around five weeks when his baby would “settle” to his voice but “there was [sic] no facial expressions”. However, he explained that now, four months later “…he’ll actually give [sic] you lots of facial expressions you know he’s happy to see ya [sic]”.

Andrew also didn’t feel any connection in pregnancy to the baby and found it difficult to communicate and connect with his baby in the first three months. He explained “the thing I found tough in the first three months was that you don’t sort of get anything back from her.” After three months however, when the baby was more responsive, he “was just starting to enjoy her” and felt more “predictability” and expressed more reciprocal connection such as “you start to get stuff back out of it”, meaning the relationship with his baby. However, he also didn’t ever seem concerned or to question the lack of connection that occurred previously. It seemed he trusted this would occur.
4.3.3 Wanting to do things differently or wanting to be the same.

Wanting to do things differently from their own father in terms of connection with their baby and creating a father role was discussed frequently and with strong emotion by Hans, Larry and Bruce. These fathers identified a lack of connection with their own fathers, and appeared to feel pressure or anxiety to “get this right” with their first baby and to “do things differently from their own father”. John and Andrew, however who expressed that they had experienced a good relationship with their fathers, seemed to be calmer about the connection or even the lack of connection with their own baby. They attributed this to the trust and connection they had with their father and felt that this formed the basis for their connection with their own baby. They were happy to be the same as their own father.

There was also a difference between participants about whether they mentioned their relationship with their own father in the first interview or not. The first time fathers who had a lack of connection with their own father (Larry, Bruce and Hans) raised this in the first interview as it seemed an important issue for them that they felt influenced the way they were going to be a father. John and Andrew who explained that they felt closely connected to their father did not raise this issue until prompted about this at their second interview.

John explained that he would be quite happy to be like his father but not like his mother as he stated that she was a “very much half empty kind of person, and I find that quite difficult”. He highlighted that he and his dad were “both
sort of easy-going”, and they only needed to contact each other monthly but “we’re like happy with that”. However he added that “if we need him… he’d help out”. Recently John said he had been having more “interesting” conversations with his dad as he too had a new baby and now they had “a bit of a shared sort of thing”. However, normally he would describe his relationship as being;

… like most sort of blokes’ sort of have with their dads which is … almost awkward when it comes to talking about emotions and things like that. You know we find that quite hard still I think between us. But I can talk to dad about soccer or whatever till the cows come home (John).

Other than that, John said he had a “sort of good relationship with my dad” and remembered doing “nice things [with his dad] that didn't cost money” and where he was “involved” and taught by his father about the family fishing business. John concluded this conversation with explaining that he was very like his father and so would be happy to be like him. He explained further, “So, I’d [pause] I don’t think I’ve ever said I’m not gonna [sic] do that or I'm not gonna [sic] be like that [be like his dad]…. I’ve not sort of even considered it really”.

Andrew was also happy to be like his father. He talked about a father who did “lots of hobbies” with him and spent time with him, and accordingly he
seemed to be looking ahead to this time when he could connect like this with his daughter. He said he had wanted to “emulate” his father.

Hans, Larry and Bruce, who identified that they had had a poor connection with their own fathers, appeared to have reflected deeply about wanting to be the “exact opposite” to their father. Hans noted concern at his lack of attachment to his baby in the first four weeks in case “it (his baby) passed away” reasoning that he then wouldn’t grieve for his baby “because there’s no attachment”. He thought this was bothering him because “I had my father pass away and I had, you know, not much attachment to him and when he passed away [18mths previously to the interview] I [pause] I [pause] basically didn’t have to grieve whatsoever”.

At his second interview four months after the birth of his baby, Hans said he frequently became so focused on work that he forgot to connect with his daughter. He explained; “I guess there’s some fear that I will go down the same path [as his father who was a workaholic and was very focused on work]”. Nevertheless, aware of this danger he added he was “… just making sure it doesn’t happen to me”. He explained his plan for not going down this same path as his father was for his wife to keep a watch on him and let him know when he was getting too caught up with work. For example, he said, “I think I will have to keep B [his wife] as my gatekeeper”, which he explained was for her to remind him of when he was becoming too focused on work.
Bruce found connections growing as the baby communicated more. He said that he trusted that he would be a good dad as he would make sure he was “a lot different to what me [sic] dad was”. He explained, “I mean he loves me, but you don’t get the feeling of being loved from him. So hopefully, it will be different between me and D [his son]”. He told me he would make sure he was not like his dad in the future; “Hopefully I won’t be [pause] I’ll try not to be”. His expression conveyed a little uncertainty about whether or not he would achieve this however. During the interview he started to think about this and gave a few concrete examples of how he would be different. “Well, first of all the first priority after an accident will be to find out how D [his baby] is, rather than worry about his car”. Secondly, “I will be around a lot more for D [his baby] than my father was – he was always working” and thirdly, “I have already had a week off with D and now I will be taking all of January off to be with R [his partner] and my baby”.

Larry said he also had particularly avoided being like his father and his sister who he stated had a “hard time connecting with people”. He explained that they don’t give to others and don’t have many friends. He highlighted how he wanted to be “different” from his own dad but still felt he was not really able to do anything “concrete” about that yet. Eventually, Larry explained that he felt the way to be different from his dad was to be focused “about the little things”. He expanded his ideas about this;

I could probably spend half or three quarters of an hour every night reading to her or helping her with her homework later on or
something. And at the moment I – I feel like I’m gonna [sic] do what dad didn’t do, but I can’t do that yet. Cause she’s not communicating. And it’s just; I’m a bit out of the loop for getting my teeth into it sort of thing. I’m just gonna, [sic] I’m just gonna [sic] do something more yeah, just gonna [sic] be, try and be more proactive with it all. (Larry)

I asked Larry if he had a plan, but he responded; “I’ve got a few years to come up with that”.

4.3.4 Summary of seeking and finding connection.

The major themes of “the Dawning of Responsibility” and “Seeking and Finding Connection” are closely related and build on each other. It appears from the data and from the phenomenological literature that the realization of responsibility occurs first and a searching for connection follows. When that connection is found and reciprocal connection occurs it sustains and develops increased awareness of responsibility and the pattern continues, with a constant connection sustaining further feelings of responsibility. These two themes also illustrated that there were differences between the fathers’ expectations of connection compared to the reality of connection and how long this took to develop. It was, nevertheless, something that was at the forefront of the minds of these fathers who had not all experienced this with their own fathers.
4.4 Absolute Joy, Wonder, Delight and Unconditional Love

All fathers expressed these feelings and sometimes they were overwhelmed by them in relation to their babies. They all expressed unconditional love for their baby, but for some this started in the first few minutes of the baby’s life and for others it took more time because of particular birth circumstances. These feelings were expressed more strongly by those fathers who felt a reciprocal connection between them and their baby. The first few minutes after birth, for some fathers were particularly poignant for this expression of love and absolute adoration. Time stood still for some at this time. For Hans, this joy and delight was fleetingly expressed at birth, but did not re-kindle until he felt a growing connection with his baby. Once that had occurred his joy and love was effusive. John expressed a different experience, one impacted by the loss of a previous baby. For him it was important not to become “too attached” in case his baby died. Once he was aware that his baby would survive this joy, delight and unconditional love rapidly grew and was acknowledged and expressed.

Bruce was overwhelmed by his feelings when his baby was first born. He explained that “a couple of tears came out” and that he “couldn’t believe …that [he was] just so emotional, actually, when he was born, when he came out…yeah, it’s just phenomenal”.

At his first interview, four weeks following the birth of his baby, Larry also expressed his wonder and joy at the baby’s growth on breast milk and what it could do;

It’s like wow! Look at this, it’s [the baby’s] getting enormous and she’s getting longer and yeah it’s brilliant! It’s um, really strange thing to see happening to something you made as well. It’s really lovely. Yeah, it’s the nicest thing that’s ever happened to me [laughs]. I think [he laughs again so that we are both laughing]. (Larry)

Larry seemed to be almost in his own world when he was explaining this to me and at one stage he said each word slowly and carefully pausing slightly between each one as if he was thinking while he was talking and making a particular point. He also spoke very softly here which corresponded to the softness, beauty, sincerity and seriousness of the words he was saying. Then he laughed to lighten the mood or perhaps because he was becoming so serious.

John on the other hand was so stressed from his baby’s traumatic birth and being in NICU for two weeks following it that he felt that his baby didn’t start to develop a “bond” with his parents till at least four weeks of age, as there had been so much trauma and their baby had been “surrounded by all these different people” in NICU. At the first interview, John was focused much more on looking backwards, reconciling his past experience of loss and also the
most recent traumatic birth experience. As such, there was more focus about he and his partner’s concerns and worries about the baby and whether there was a handicap, rather than the joy and delight of the baby. John said far more about his enjoyment of the baby in the 2\textsuperscript{nd} interview when it seemed he was more confident about their baby’s outcome and was “looking forward rather than back.” This enjoyment was evidenced from the beginning of the second interview, where John said his overall general comment since last interview was that;

…we’re really enjoying it and I think we’re really enjoying it more because there’s that interaction, and that I think once he starts, once they start smiling and you can pick their like [sic] moods a little bit more, you’re, you’re more aware of what makes them happy so it makes that job much easier I think”.

(John)

John explained that he had just experienced a two week role reversal with his wife, who had gone to work while he stayed at home and said he was surprised because he “enjoyed it probably more than I thought I would”. He talked about being so “proud” of their baby and wanting to “show him off” to his family. He also continued to wonder if other parents “look at their kids like we look at A [his baby] and sort of say like how nice he is and how cute he is and like how proud we are”.

John continued in this interview to voice his thoughts about the things they (he and his partner) loved about their baby, saying “we just love sort of seeing the little milestones that he does [sic]….and
the things he [pause] like he laughs at things now and he just has us in fits sometimes”.

John described the unconditional love and acceptance for the changes that having a baby had brought as a natural development when he said; “I just think the changes that we’ve made have been natural ones so they don’t feel like something that’s been forced”. John said they still couldn’t believe “…that we’ve got him” as they explained that it was “…a miracle to us I think”, in this way expressing their constant wonder and joy about this baby surviving.

Bruce, in the second interview, was “still in awe about becoming a father”. He said he had “probably become a bit more relaxed” and more “accepting” now that “he’s [the baby] turning into a real little person, now a real little boy”. He felt he knew a lot about his baby by this time and there was joy and surprise at everything new including his son becoming “stronger” and a real person and that meant there was more acceptance of the work involved when he felt he was getting something in return. Other fathers expressed similar feelings. Bruce couldn’t hide his joy and delight at his second interview when he explained to me “…of course I am smiling, I’m a dad - I’ve got a gorgeous little boy there”.

When Larry’s second interview occurred and his baby was six months old he too explained the unconditional love and hope for the future that he felt for his daughter, and his father role which he felt was to guide and lead. He explained;
...Yeah, maybe I’m thinking more of her as part of me and being her own sort of her own little being but I’ve already had so much to do with her so um its sort of a fatherly thing but it’s a kind of a human to human thing as well I ’spose [sic]. It’s like well here you are and we’re here to give you this kick start , and get you on your way and then there’s so much we will tell you and there’s so much you will disagree with and there’s so much you will find out yourself.“ (Larry)

He explained that he felt he knew some of his baby’s personality already when he stated;

…she’s got a bit of spirit to her, a bit of an adventurous sort of streak and outgoing. If you know she’s having trouble settling or something for a day sleep just chuck her in the pram and go for a burn and she’s happy, sit her up, let her look around at all the trees and then she’ll squawk, lay down and she will go to sleep and she’s a really pleasant little baby (Larry).

He sounded so proud of his little girl when he was saying this.
4.5 Struggling to Find a Balance

The theme ‘Struggling to Find a Balance’ was a final insight that came to me after I had spent much time trying to understand why fathers were sharing so much of their philosophy about learning and life with me, and what the underlying meaning of this was. This insight also emerged from fathers’ discussions of both their excitement and anticipation of the fatherhood role, but also their feelings of isolation, confusion, ambivalence, fear and trepidation about the possible problems and the changes to come and what they would mean. At this time there was also a lot of reflection and reconciling of past events and of negotiating with their partner regarding the work/life balance. I finally realized that, in order to manage this situation, the fathers used and applied all their skills, experience and support systems and reviewed their attitudes and philosophy to try to put things into perspective in order to calm their situation and understand and manage their world which they seemed to feel was out of control at times and too complicated. These feelings and negotiations seemed to reflect a struggle to find a balance. The fathers spoke of denial, problem solving, avoidance, keeping things in perspective, caution, not worrying, and a belief that things would just happen naturally. These coping strategies seemed to enable them to manage while they slowly came to understand their new world and make it manageable and under control. Four to six months following the birth of their baby when the second interviews occurred they did not speak of these strategies as they seemed to be thinking ahead rather than backwards.
Several fathers explained their philosophy of learning to be a father as one of wanting to experience everything themselves. Bruce hadn’t wanted to rely “on someone else’s experience which isn’t gonna [sic] be the same as yours anyway”. This was one of the reasons Bruce, Larry, and Hans gave for not reading about pregnancy and the birth; as they explained, no book could ever tell them about their unique experience and therefore it wouldn’t be helpful and might confuse them. Hans suggested “Ignorance is bliss sometimes” when he explained why he didn’t read about pregnancy. Some seemed to feel safer not knowing about the information which may have caused anxiety. Hans and Larry emphasized this was so, whereas Bruce just wanted to “find things out for himself” as he wanted to know he could “solve it and fix it”. Accordingly, Larry felt that his wife caused herself [and him] needless worry during the pregnancy by reading so many books. He explained that he just “couldn’t do it” [read books];

Because the books like [sic] explore everything and they give you all the bad stuff and all the good stuff and she’d [his wife] be worried if something hadn’t happened yet, and worried if that happened too much and this and that. And it’s not, ‘you’re not sick, you’re having a baby’. You know it’s just…a phase and everyone’s’ gonna [sic] be a bit different, and um, and I couldn’t stand that she was [like that]… (Larry)

He explained that his philosophy was different from his partner’s in that “…I was happy just to let nature take its course … and talking to other people too.”
rather than reading books. He said there was no point in him reading as his wife read enough for the both of them and so she kept him informed. He said;

Yeah. Yeah, it's like quite often I'd go in the bedroom and I'd feel a bit guilty like she'd have, I think it was up to seven books on her bedside table [interviewer laughs] with cross referencing and book marks hanging out of everything and looking all the bookmarks [sic] up every week. And I had um, the K-mart catalogue [interviewer laughs] yeah, yeah, just nothing. But she was giving me enough. (Larry)

Identifying what he said to his wife in an attempt to calm her down when she got upset with him for not reading in pregnancy, Larry explained;

I’d say, “It’s all very interesting, absolutely. But it’s nothing you can read and tell me will change what’s gonna [sic] happen, cause [sic] I mean you can look out for certain things but you’re getting check ups anyway so you don’t really have to look out for anything. …. You don’t drink, you don’t smoke and they’re the two biggest things that you can do for the baby…. Just stay relaxed and, and you know, don’t panic.” And the whole way through it was “just be relaxed with it”. (Larry)

It seemed from this, that he was valiantly trying to keep things in perspective and calm things down, stop panicking and control the changes that were
occurring. Larry’s focus appears to be calming his wife’s anxiety as he stated she was prone to anxiety.

Bruce was similar to Larry about not reading. He said “she [his partner] bought me some books about fatherhood, but I never actually read em [sic]”. I asked was his wife upset about this to which he replied “Na [sic], she knows I don’t read books”. He explained that sometimes his wife would “read bits to me but I never actually sat down and read any books”.

Andrew’s philosophy was different to Larry’s, Bruce’s and Han’s, but appeared to have the same purpose. He used all his skills to manage the huge change occurring. He described himself as “more cautious”, and able to balance risk which he related to his being a “logical and methodical” thinker. As such, he was worried about the risk that they could lose the baby in pregnancy like their friends had experienced. He explained they had recognized “there’s still lots that can go wrong”. Therefore, he and his partner “didn’t finish the nursery until like [sic] the month before and that sort of stuff, because we didn’t want to have this fully finished nursery and...[have something go wrong].

Andrew also pointed out to me that he thought during the pregnancy he was “in some respects … probably in denial” which was part of his “cautious” coping strategy so that he and his partner didn’t “get our hopes up” and didn’t have to think about what was to come. He indicated that he had no idea what to expect, until he could experience it himself and work things out for himself.
He explained “But it’s not until you actually [pause] [experience it] that you start to realize all the different things it affects”.

Andrew’s cautious nature was also evident in the way he thought about the impending birth. He explained that; “B [his wife] and I talked about it and we decided that because there was just so many unknowns we just didn’t know what was gonna [sic] happen um that there was no point having a, a birth plan”. Instead, he said “every now and again, we just chatted about all the different scenarios” and this meant he was prepared for supporting his wife in labour, in a wait and see approach.

John described how he went into the pregnancy knowing things could “go wrong” but not letting his wife know what could “go wrong” as he wanted her “to enjoy her pregnancy”. He explained how he “wanted to go to all the appointments and I still do”, in order to “… be there and to share it all and to be there at the time” [in case they got bad news], to ensure his partner would not have to face this alone as his previous partner had. However there were some pitfalls with this coping strategy. He continued;

So it [the fear] all sits on your shoulders and you know you can see B [his wife] getting excited about the scan and the different things and I don’t think necessarily I got as excited as she did because there’s always potential of knowing what potentially could go wrong. (John)
He related how his wife helped him cope by not placing demands on him to be excited as she understood his past and so, for example, “she …did a lot of shopping with her mum and going to buy things and just putting them away somewhere” whereas, he explained, “ordinarily we’d be doing everything together.” John also had a motto or philosophy which was “Lightning never strikes twice in the same place” as he didn’t really believe that he could have this experience of a baby dying again and this philosophy helped to keep him calm throughout the pregnancy.

Following the birth, John used his previous skills as a Disc Jockey to help him cope with the stress that the birth complications and their baby’s difficulties had brought. This meant he started working out which songs perfectly fitted to the video clips of their baby at each month of age and this helped him deal with the grief and trauma he felt over this period. The songs he chose demonstrated his change in focus from negative to positive and the healing occurring for him over the first six months following the birth.

Balancing and managing financial concerns was another part of the struggle to find a balance. However the fathers varied in their strategies for managing this concern and the changes to come. Larry explained his philosophy about this in both interviews and described how he adopted a perspective of “not worrying” about financial concerns, or any other issues, as being one of his strategies. He said he discussed these types of issues with his work mates and adopted their perspectives which helped him control the pressures that were happening in his life. He described discussing these issues with an older
more experienced father (the boss) at work and how he then spoke of his perspective on how to manage a family and finances and not waste energy on worry:

And...he’s [the boss] just saying ‘well he does worry. He has to worry about money cause [sic] his outgoings are horrendous with having five kids.’ But um he said, it’s there but I don’t worry about it. It won’t help it to worry about it. So, but I’ll acknowledge it, but I won’t get hung up on it, whereas his Mrs. [sic] would rather get hung up on it. And so yes, we’re aware, but no, it won’t make it better by worrying. Like if you have a problem at work, if you want to get angry and frustrated about it, if that will help go right ahead. But if it doesn’t make it better don’t waste your energy [he laughed].(Larry)

Andrew was “always cautious” so he balanced the financial risks in pregnancy by thinking about “manageable risk” as he realized in the future he would be responsible for two people, his wife and his baby. Overall he explained “we’re in a good financial position and I’ve got a good job...so it wasn’t like I was sort of worried about how am I going to afford it.”

Apart from financial issues, both Larry and Andrew were relieved when they realized their wives, whose coping they had been concerned about, were managing well. Larry discussed how helpful it was, “seeing she’s [his wife was] confident with it all. Yeah, it’s not like she’s sitting here wondering what
to do and ringing me five times a day and saying it’s all too hard and all that sort of thing”. Andrew was also relieved when he realized his wife would have an “instant mother’s club” with some other mothers from their work as he knew his wife had wanted him to stay at home with her for longer, when he had to get back to work. Overall it appeared the realization that their wives were coping helped the fathers to manage the change as that was one less worry.

The two tradesmen, Bruce and Larry both appeared to attempt to keep themselves calm by concluding that having a baby was a natural thing that all people, including those in “third world [sic] countries” were able to do. Bruce discussed how in “Rwanda they don’t have formula” so they breastfeed as it was “natural” and related this to his wife breastfeeding. Larry explained how the Chinese lived in” mud huts in the snow” but still managed to look after a baby. He explained that “they just find things out as they go” and keep things simple. He said you don’t need much to “nurture a child”, which prevented him worrying about financial issues. Bruce explained that he didn’t need books because “it would all come naturally, everything would fall into place”. His verdict was that “like he’s survived four weeks with us and we haven’t read a book so we must be doing something right”.
4.5.1 Managing and negotiating the work/life balance.

The frequency in which the fathers discussed the work/life balance at first made me think it was a major theme. Eventually, however I concluded this was part of the major theme, ‘struggling to find a balance’.

All of the fathers discussed their struggle of negotiating with their wives the balance of their work life and their home life, taking into account their family’s needs, in order to eventually achieve a balance and a sense of cohesion in their lives. They said their work/life balance was impacted by; their attitudes to work and fatherhood, their wives intention to return to work, their financial and work situation, and the infant’s birth complications. All the fathers suggest this work/life balance would be an ongoing challenge that would be evolving and changing over time and would need re-negotiation at times. Nevertheless, most of them seemed to feel they had achieved more of a balance by six months post-partum. However, Larry was different to the other fathers in that he seemed to take longer than six months to strike this balance and Hans indicated he would need his wife “as a gatekeeper” in order to keep a balance and let him know when he was working too much.

Both Andrew and Hans indicated they were the main breadwinners of their family and both took their work life seriously, enjoying their work and experiencing support or satisfaction from being at work. Consequently, Andrew and Hans discussed having been requested by their wives to put less time into work and more time into family life or time with the baby.
There were also many decisions and negotiations to be made about time off work after the birth. Andrew related the dilemma of handling the situation of B (his wife) wanting him to spend more time at home after the birth, when work needed him at the same time. He explained;

> It was really frustrating because B wanted me to just have time off and not go to work. But it was right towards the end of the financial year which was when everything had to be wrapped up by …. there was a bit of pressure but I managed to [compromise] … (Andrew)

Andrew explained that this “compromise” effectively meant that B “knew that I was going to be there [home] at least 3 days per week um for sort of two months or so.” So she accepted the “deal” which Andrew had tried valiantly to negotiate with her, in order to calm her about the fact that he could not take much time off work straight after the birth. Another reason he wanted to return to work was to get back to normality for his own benefit, as he explained that this is where “most of my mates that I have are” and he “brewed beer” with, so it meant he could get more support earlier, and “… catch[ing] up with all my friends again”. (Andrew)

Larry, like Andrew said he got a lot of support at work from his work mates. By the second interview, he hadn’t cut his work back (which was his original aim) and then he received a promotion at work which was too hard to refuse.
Hans also explained that his decision to go back to work earlier than planned, had not worked out because he decided to “work from home for two weeks instead of taking a full week off” and then returned to work the third week instead of the second. Nevertheless, he felt this “was a very good arrangement” because his wife and baby were asleep a lot in the early days, so they didn’t need him constantly and work was “busy”. He explained he made this decision because the other dads at work had informed him that the new mother and baby just sleep in the first few weeks.

Hans explained that he wanted to do everything his dad did in terms of ensuring support for his family financially but also have a connection with his children that his dad didn’t have. He stated; “I’d still like to do what he did you know, provide everything but be at home at the same time ….and I’m succeeding at the moment”.

Bruce and Larry, who are both tradespersons, discussed their need to return to work as a financial necessity. They said that they saw fatherhood as the pinnacle of their achievements in life and that they would prefer to be home with the baby. However they were frustrated that they were not able to do that. They shared a similar financial situation in that both their wives earned more than they did, so there was an expectation and constant financial pressure for their partner to go back to work.

John and his wife were different from the other couples in their struggle to find a work/life balance. They had an equal partnership when it came to working
and child care due to the casual nature of both their professions. John explained that he was determined to put his baby first and his job second because of his previous experience of loss. They found they had to “play it by ear, when it [work] comes which is not the way we like to do things really”. He discussed how he had “basically done a role reversal for two weeks” which he thought was “… quite a significant amount of time” and in that time there was “a realization” of each other’s roles and perspectives which helped them both appreciate each other and helped John to become more “confident” with child care.

4.5.2 Feeling isolated – things left unsaid.

The couples in this study appeared to have left a lot unsaid between them during this emotionally challenging time of the first pregnancy, the birth of the baby and the early months of their first baby’s life. The fathers indicated that this period was like ‘walking on eggshells’ as they struggled to say the right thing or when they didn’t know what to say.

John exemplified this theme as there were many things he and his partner “left unsaid” during the pregnancy and until nearly a month following the birth. He said that “every ante-natal visit could potentially be a disaster” because of his extreme fear that something would go wrong in this pregnancy. However, he couldn’t discuss any of his fears because “she [his wife] was kind of like innocent in the fact that she didn’t maybe know everything that could go wrong” and he didn’t want to shatter her confidence.
The other event that exemplified the silence between this couple was when both parents found they had high scores on the Edinburgh Depression Scale (EDS). John explained that this was the “definite point” where the couple realized that they were “sort of down”. He said that they had been through “a real ordeal” with both parents staying in hospital looking after the baby together in NICU, (which was unusual), he was not working for the first month, the in-laws were staying, and the first two weeks at home were so stressful because of the concern for their baby. John related how it took the EDS to break the silence “And we both looked at each other’s [EDS score] and said ‘Oh, you’re pretty upset about things’”[the researcher and John laughed at this point in the interview as it seemed so absurd that neither knew the other was feeling so bad]. They were referred to a counsellor together and by the second interview both had realized and confronted just what they had been adjusting to in the postnatal period. John explained further that in that first month, we “check[ed] on him [their baby] all the time” in case of possible “fits or seizures”, because of his poor Apgar scores at eight minutes post birth. However, after that and the EDS incident, they decided together that they had to try and treat their “child as normal” even if he ended up having a “handicap” due to his poor start. By the second interview, John also said he felt able finally to ask his wife about what the pregnancy had been like for her when he hadn’t been able to support her practically or emotionally.

Things were left unsaid between Bruce and his partner also but this time in relation to when she would go back to work. Bruce explained that whether or
not his wife could have six months or twelve months off work, was dependent on his earnings. I found, however that when this was discussed by Bruce his partner at times remained very quiet and it appeared to me she was not keen to return to work early.

Hans too had left things unspoken. He felt that his wife may have thought he was a “wanker” during labour and she expected more from him. He had never raised this with her however.

Other fathers participating in the study also sometimes hinted at periods of silence when things were not discussed between them and their partners.

4.5.3 Confusion about what role a father should play.

Fathers often said or alluded to their experience of confusion about what role they should play in being a father. This emerged in discussion relating to several themes but seemed most about the major theme, ‘struggling to find a balance’.

Han’s confusion about what role to play occurred particularly during pregnancy and labour. However, for the other fathers the confusion was more often following the baby’s birth. Their role as a father seemed to become clearer for each father as the journey progressed, their baby was awake more and they had greater access to the baby enabling development of their new
role. Many of the fathers looked forward to a time when they believed their role would be clearer and their family involvement increase.

Hans experienced role confusion most intensely during pregnancy as he realized he felt no connection whatsoever with the baby at this time and this concerned him. This, he explained, became problematic because his feeling of non-connection was in direct contrast to his wife’s feeling of being a mother and feeling connected and she’d expected him to understand this. Consequently, he felt confused and fearful about his role as ‘father’ during pregnancy. Hans seemed quite upset with himself when he related how he got into serious trouble with his wife and in-laws over not buying his wife a mother’s day present and therefore not acknowledging his wife’s role as a mother during pregnancy. He explained;

I guess um (pause) if I, if I go back to the pregnancy because I had an interesting event during that is ah (pause) my wife saw herself as a mother but I didn’t see her as such because the baby wasn’t out yet – and I didn’t see myself as a dad [pause] at all [italics added], so when Mother’s Day came I didn’t do anything [laughs in embarrassment as if he can’t believe he made that mistake]….and when I get confronted with that … I think it is a bit strange that I didn’t see that. (Hans)

Hans also appeared to me to be confused about the type of information he wanted as a first time dad. He said there had been no information around for
him but when questioned about where he had tried to get information, he explained that he wanted to “… experience things”, so didn’t really look for information. Then he said “I do like to read development books or I’m interested in studies when they find out certain things”, however later he clarified this when he said “yeah, I ‘m not going to read a whole research article” but “I do like it when I hear it on the news….when its something on the TV”. Eventually Hans and I came to the conclusion that Hans only wanted information that was a quick snap shot where he didn’t have to read a lot.

Despite him appearing to be the most connected during pregnancy, at six months following the birth Larry remained confused and disappointed about his feelings about the father role. He explained that this was because when he came home from work he didn’t have a role at all with either helping with the baby or helping the mother.

At his first interview John said he had felt confused about his role during the first month after his baby was born. He explained this as relating to both he and his wife being overwhelmed and stressed by the NICU experience, money worries, their in-laws staying and the ‘things left unsaid’ between them. John linked this experience of confusion to his inability to settle his baby within the first month following the birth. He explained;

… You read the books, you go to the classes, you want to be doing a great job. To pass a baby … that you can’t stop crying
over to somebody else [his mother in law] was like a failure almost

I think - for us. (John)

For Andrew role confusion occurred in the first three months following the birth of his child. He attributed this to trying to problem solve for his wife, instead of just listening to her and he realized this didn’t work. He explained how he kept offering suggestions about how to manage the baby’s sleep and settling, and was getting frustrated when his wife wouldn’t follow through on these suggestions as it didn’t suit her lifestyle. He eventually realized he couldn’t get her to try these solutions if they were going to make life harder for his wife.

Bruce didn’t talk about confusion with the baby or his partner, instead his confusion mainly related to his relationship with his own father and how he was going to be different.

**4.5.4 Feeling left out.**

Feeling left out was discussed by Larry and Bruce in the first interview and then only by Larry in the second interview. This sub-theme was not discussed by the other fathers at all. However, it seemed a high priority for Larry and Bruce who mentioned it many times and seemed to indicate they felt frustrated and confused with their father role. From what they said, both these fathers saw fatherhood as the pinnacle of their achievements in life, and so they were looking forward to a more involved role with their baby and family.
They found, however, that their work commitments and the reality of their life did not match with their expectations of the ideal father role. In order to deal with these feelings, Larry and Bruce said that they constantly “looked forward to the future” in which they could visualize their role more clearly and tangibly with an older child, in order to relieve their frustration.

The feeling of being “left out” started for Larry and Bruce when they returned to work and missed their baby, and were not able to be as involved with their baby’s care. Larry used the term feeling “left out” in association with his not being able to help his partner as much as he would like. Bruce was not so concerned about this, considering he did not usually help with housework anyway. He explained that for him feeling “left out” was more about not being able to participate in a practical way with the baby as he couldn’t breastfeed. He explained that this limited his role with the baby in the early stages. Larry described “feeling a bit left out” early on in the 1st interview after reflecting on the fact that since he had gone back to work his role was different than before and the baby was changing rapidly before his eyes. In the first three weeks Larry was off work full time and felt that he really had a role. He explained that;

Initially when I wasn’t working I’d get up with J [his wife] in the evening in the night feeds. And I’d do all the changing and have the contact and get her ready to be fed, and J [his wife] would just concentrate on the feeding part of it… and putting her down.

(Larry)
However, after he reflected about being back at work he described how he only saw the baby briefly in the morning and he commented that it suddenly occurred to him in the week prior to the interview; “That I hadn’t actually held N [their baby] that day “(he remembered the actual day – Wednesday). He continued; “I think I’m sort of feeling a bit left out with it all anyway”.

Larry also reflected that he may have felt “left out” because he felt he was “missing out” on some of the baby’s growing up because he was at work for a lot of the time. He likened this feeling to “not missing out but you’re just skipping through....just reading the first page of each chapter rather than reading the chapter sort of thing”. It seemed from this that he wasn’t getting enough time to get to know his daughter in the way that he wanted and life was moving too fast for him. Bruce also described the feeling of being “left out” in the first interview when his baby was four weeks old and breastfeeding. He particularly described feeling a “bit of a loss” and expressed uncertainty in that his experience was “just not what I expected” to feel. He said he hadn’t realized the frustration he would feel when he wanted to do his “fair share” with looking after the baby but he couldn’t do anything when the baby was breastfeeding, and that’s “one place where you feel left out...is when R’s [his partner’s] feeding” because “its only something the mother can do at the moment”. Bruce expressed however, that he still “would prefer him [the baby] to breastfeed” and acknowledged that “it’s good that R [his partner] gets to spend that little bit of quality time with him as well”. However, he still could not stop saying that; “Yeah, part of me feels left out. Yeah a little bit left out at the
same time”… [and added again]”so it’s …yeah, left out” [he repeated], “Just sort of feeling left out”.

Bruce thought he might feel less left out when his partner stopped breastfeeding and this is what seemed to happen. In the second interview when the baby was four months of age, Bruce did not mention feeling “left out” anymore, possibly for a few different reasons that he discussed as being relevant to his experience of first-time fathering. Firstly, he explained that the baby had stopped breastfeeding by eight weeks of age and so he could “feed him a lot more now”. Secondly, he highlighted that he thought the week he had inadvertently been off work because of a car accident enabled him to experience “…the full week with me [sic] [his] boy”. He suggested that this would not have happened otherwise; and this time had enabled him to really get to know his baby who was around three months of age at that time.

Bruce related how now that the baby was older, his greater involvements had enabled him to use a lot of other strategies to manage him and develop a greater role. For example, when the baby was “irritable and grumpy” he said rather than just feeding he took the baby for a “walk around the backyard” and together they looked “… around at the birds, the trees, and … [watered] the garden”. This helped to “settle him [his baby] down a bit and he seems to enjoy that”.

In the second interview at five months post-birth, I asked Larry if he was still feeling left out or whether that feeling was now gone? He confirmed that he
was still feeling “left out”, but now described it as feeling a “bit out of the loop”. Larry sounded frustrated when describing how the baby being breastfed meant he could not settle her when she was hungry. He wondered why his wife let him take so long to try and settle the baby when she could have just fed her. He explained further;

Yeah, and she um she’ll often sort of we’ll put her down and she will have a grizzle and then um…. I will go and… and try and calm her down and if she won’t calm down the last resort is always I’ll try her back on the boob. That’s the be all and end all of ... (Larry)

I asked Larry if that meant he felt a bit helpless sometimes, to which he replied;

Yeah [pause] it’s always [pause] it’s always [pause] she’s got to finish it off anyway so I’ll go in and stand there for three quarters of an hour [pause]. I put earplugs in and just stand there and rock her cot and things like that and then J [his wife] will come in and takes her and says, ‘I ‘ll do it’. You know it’s um like you could have done that three quarters an hour ago so save us all the heat and the grief and stuff [pause]. (Larry)

When asked to reflect on feeling “left out” and the meaning of this especially since this feeling continued for him, Larry said that his wife was busier with the baby and “the work load hasn’t evened out yet sort of thing” and she was
“still doing a lot more for N [the baby]”. Larry explained that he felt left out in the care of their baby and had no great role yet, only a “behind the scene” role. He said that his father role was; “slow coming to me, yeah, where I can …where I can be a bit more pro-active”, but when he thinks ahead to a future time he gets more enthused. Larry sounded a little disappointed as he reflected on his role and continued;

… like I said before I thought it would have been between three and six months that it would have come on a bit more for me, didn’t I? [He is holding his baby while he is thinking and so speaks as if he is speaking to her]. But you just realize these things take time, got to build a whole little human here so we’ve got to get the building blocks right so um …yes, it’s a bit of a journey isn’t it? [Talking to his baby again].

(Larry)

4.5.5 Feeling ambivalent.

The feeling of ambivalence emerged in the data in subtle ways. For example even though there was joy, delight and love for the baby, fathers grieved for the loss of other freedoms and lifestyles that they had to relinquish.

When Larry expressed ambivalence he almost seemed to feel embarrassed for admitting this and so he quickly let me know that even though these feelings were there, fatherhood was still the best thing that had happened for
him. Paul Kelly’s song about his new daughter, Madeleine, although light-hearted, at the same time expresses some regret about changes to come in the future;

**Madeleine’s Song**

When I dream at night it’s you I see walking
And in the dream I hear you laughing and talking
When I’m all alone it’s you that I’m missing
When I think of fun it’s you that I’m kissing

My sweet Madeleine, my sweet Madeleine
My, my Madeleine, you never let me sleep

One of these old days you’ll have yourself a boyfriend
But you’ll always know my love will never end
When you cry so hard I wish you’d stop sobbing
You’re gonna grow up soon and just wanna go shopping

My sweet Madeleine, my sweet Madeleine
My, my Madeleine, you never let me sleep

(Kelly, 1995 from the album Deeper Water on Fatherhood, 2007)

Early on in the first interview, Larry discussed the positive and negative tensions he experienced as ambiguity while at the same time the sense of wonder and joy when watching the baby having grown. He explained, “Yeah,
feeling left out a bit, hmm [pause] but at the same time I’m just constantly amazed that this little whole person is growing just with the breast milk. And that's it”!

Larry also expressed ambiguity in the fact that “she is growing up so quick but at the same time there is a monotony to every day”. He seemed disappointed that the baby was not growing as quickly as he needed for his ‘father’ role to come to fruition. Further aspects of ambivalence are evident in his statement that;

…In some respects, it’s like wow she ‘s her own little person and she’s got her own personality, and then the other flip of the coin is she still knows nothing she doesn’t know hot or cold, sharp, stop, go, don’t, yes, no, anything and we’ll have to sort of teach her that but then there’s the other side to the same coin is how much she’s learning just by observation, and that’s absolutely astounding what she does with that so…(Larry)

In the first interview, John also expressed ambivalence about receiving help with the baby in the first two weeks at home. He explained that he wanted help with the baby from the in-laws while at the same time, wishing they weren’t there. He said that “there were probably times in that two weeks where I just thought for goodness sake you know just let us get on with it ourselves or [laughs], but there were other times when you were just like “thank god you’re here” (John). Ambivalence was also evident in John’s
comment that when he and his wife returned to work; “we’ve both enjoyed sort of having that time away but also missed him as well.”

Hans expressed ambivalence about wishing he had more information beforehand about how dads experience first time fatherhood, but on the other hand wanting to experience things for himself. For example he said that the ante-natal classes didn’t tell him what he needed to know, that its focus should be about caring for your wife more than caring for your baby. He explained that “we don’t realize that there is so much stuff that we don’t know or stuff that we need to be prepared for”. Then he said almost the opposite; “you learn as you go. You can’t know everything up front but sometimes it would be nice.”

Hans’s ambivalence is also clear when he related how nobody told him that labour would be so “very, very tiring, very stressful”. He said;

I guess it sometimes is good not to know. Cause like they say ignorance is bliss sometimes but, yeah, [pause] No, everybody prefers to know at least know a little bit. At least you know if somebody else has had an experience with something it’s nice to know, at least you know sort of what you can expect. (Hans)
4.5.6 Looking towards the future to a clearer role.

This sub-theme emerged in the father’s comments as they looked towards the future. Sometimes looking towards the future seemed to be a way of managing their lack of role in the early days, and constituted a looking forward to when that role would become more enjoyable, “hands on” and practical. At other times looking towards the future was about disappointment that the father role was at first, not living up to expectations so there was a sense of hoping for more. Often however, it seemed a natural part of being a father to look forward to the future.

Hans was different to other fathers however, because he mainly preferred to focus on the present with only the rare comment hinting at the future. He talked about making “the best of the early years when they [children] still want to listen to you and when they don’t run away and do their own thing” because he thought that in the future, “eventually they will stop listening”. He seemed to think he had only a small window of opportunity to influence his child.

In contrast, Larry was more open about looking forward to the future when he could be “more proactive” and have the father role he envisaged. He looked forward to a time when;

I can come home in summer in the afternoons and she’s running around like an idiot. Its like right give your mum a rest, let’s go and chuck the canoe in or let’s go and walk along the beach
down here and see what we can find….and I was thinking, oh, it’s gonna [sic] take her three years to get to that size (Larry).

He sighed apparently suddenly realizing how long it was going to take him to have the father role he was envisaging and it came as a disappointment to him. In another part of the interview, Larry stated that he and his wife were constantly looking forward to when their child was an adult. He said questions they asked each other were; “…what’s she gonna [sic] do for a job? And who’s she gonna [sic] go out with? And do you think she will want to travel?”

Bruce also thought about what sort of person and personality he wanted their baby to be. Speaking about how he wanted his household to be a happy household in the future, he explained “yeah I want a nice happy loving environment for him to grow up in, so maybe he’ll grow up to be a nice well mannered man maybe”. On the other hand, Bruce said he wouldn’t “… be happy if he’s not fiery” as he had named his son after the dragon in mythical culture.

In a similar way, John was thinking towards the future when their boy went to school and was hoping that he wouldn’t have “bad manners”. He explained how “little things like that are starting to become important”. John and his wife said they looked at other children, assessing what they didn’t want their child to be like, for instance hoping their child wouldn’t be like, such as their nephews who had bad manners. They were already “making judgments” about what they would or would not tolerate as parents. Summarizing at the
conclusion of the second interview, John said “I’m just looking forward all the time to things beyond baby’s that we’ve probably never looked at before”, including how to handle toddler situations, older child situations and choosing schools.

In his first interview, Andrew like John was also looking ahead a lot, considering schools and hobbies, and “looking forward to her [his baby girl] doing different things.”

4.6 Moving Towards Cohesion

In the second interviews each father expressed a feeling of movement towards cohesion, a process in which they had reflected on the past and reconciled it, and now felt they were moving forward and feeling better about themselves as fathers. They all exhibited a deep change in attitude which had come from heightened awareness about parenting in general and time spent in the parenting role, and also about an appreciation of their respective partner’s parenting role and their relationship with their partner. They had started to see themselves as embedded in a family unit, and had a deep feeling of belonging as part of their new family. They indicated that they were not just a part of a family but were also really needed by the other two individuals in the family. This gave them a great sense of achievement.
4.6.1 Reconciling the past and achieving harmony within themselves.

By the second interview, three to six months following the birth of the baby, most of the fathers appeared to have reflected on their experience of fatherhood so far and reconciled the past while learning from it. They seemed to have moved forward having achieved some harmony within themselves. However, the fathers’ words suggested that this reflecting and reconciling could only be done when life was more manageable and in balance, their emotions had stabilized and life was more predictable.

Hans had reflected on what he said in his first interview and now said;

… you know when you think back, you know like of course she’s [his partner] [pause] she’s been living with that baby for months so [laughs] I guess she is a Mum. So when I look back at it, [his ignoring Mother’s Day] I won’t make that mistake again”. (Hans)

Hans reflected that he wished he had done things differently in pregnancy in general. He mused;

I thought my role doesn’t start until it [the baby] comes out…..Yeah and I didn’t really think about it you know during [pause] for some reason I didn’t think during the pregnancy that I could have a different role for some reason [pause] I probably
was a bit more standoffish … It’s something that I would probably change if we had another one.(Hans)

John had also reflected and reconciled his behaviour during pregnancy and he had suddenly realized how upsetting this must have been for his wife. He had decided to ask her about this after our second interview. For the first time it seemed it suddenly occurred to him part way through the second interview, how much his wife may have been hurt during pregnancy because of his lack of excitement and planning. For instance, he wondered aloud if “she might have found it quite hard with me” in pregnancy because he didn’t “get that excited”. He wondered if she had wanted to say to him, “Oh for goodness sake you know we’re having a baby at least be happy about it.” I asked John whether he had ever questioned his wife about this, to which he replied, “No, I’ll ask her, actually it would be quite interesting”.

The other insight which occurred to John when reflecting about his past experience of stillbirth was that; “he wasn’t there when she [his previous partner] was told that the baby had died”. He said; “and that’s just something that’s come to me then [while we were talking] that [this time] I wanted to go to all the appointments and still do….Yeah, just to be there and to share it all and to be there at the time [in case of bad news]”. He explained that; “to me even like the most routine check could potentially be a disaster” and so he felt that “maybe not consciously …just I always wanted to be there”.
John reconciled his decision to stay with his wife following the birth and not go with his baby to NICU, which would be the more usual option. He reflected that he still “wouldn’t regret that decision” which was made in the light of his previous experience and the knowledge of how the death of a baby can break up relationships. However, he reflected further that he probably hadn’t really dealt with the previous experience and so “at the time” of the birth, all the emotions and feelings came back. John explained that he “didn’t really feel for A [his baby]” at all and was just remembering the previous experience and “what it would be like for us [as a couple]” if the baby died. He explained that he knew “it was quite a selfish thing but just knowing what it would be like for us afterwards” made him resolve that he and his wife should stay together no matter what.

Hans had a lot of reconciling to do with his past relationship with his father. He said that he had realized when reviewing the first transcript how much he had talked about his poor relationship with his father and his lack of grief at his father’s death, and he was embarrassed by this. At the end of the first interview he had noted he felt “resentment” about his father’s lack of connection with the family because originally, before his father got a huge promotion, he actually was “extremely involved with us”, which wasn’t the case later. In the second interview, however, he seemed to have worked through and reconciled what had happened and had found some forgiveness for his father as he had started to understand that his poor relationship with him may have been related to his father’s relationship with his mother and he had never thought to ask her about this before. He said;
He [his father] just um… took a wrong turn and ah, I know, like my dad’s relationship and mum wasn’t always good…. I think that I’ll ask my mum, you know this is for her to ah [sort out] [he laughs even though this is very serious for him]…. That’s it; it’s just a gradual process that happened. But yeah just making sure it doesn’t happen to me. (Hans)

Hans reflected again on how he would have to be vigilant in order to not become like his father by “… watching myself, that I, I get the right balance. And B [his wife] will tell me anyway”, he explained.

Perhaps the best illustration of why it was so important for these men to have reflected and reconciled the past and been able to move forward came from John’s insights regarding the difference between men and women, which particularly related to his own experience. He stated succinctly that; “generally males don’t put things behind them in the same way that women do perhaps”; women, he thought “would have perhaps done more talking about it” or “more of the …sorting things through in their own mind, and rationalizing things”. Consequently, he felt that “males would probably not have dealt with the original event, so it [the feelings] suddenly comes back,” because they wouldn’t have dealt with the feelings or emotions before. This was ultimately what happened to both Hans and John.
4.6.2 Heightened awareness leading to a deep change in attitude

By the second interview, all the fathers expressed that they had changed their attitudes towards life in various ways since having their first baby. Many of the songs from the contemporary Fatherhood CD (2007) seem to reflect what the fathers were telling me about a profound change in their attitude to life and fatherhood. Some of these words are;

The Day That You Were Born

I know I’m not so innocent
I know that I’ve done wrong
But to have you here by my side
Helps to keep me strong

You are the inspiration that
Always gets me through
But I’d hate to see what life would be like without you

You must always understand
All that we’ve been through
I’ll always love you no matter what you do
My eyes filled up with tears of joy
I cried from dusk to dawn
My life was changed forever
The day that you were born

(Edwards, 2007 from "Cooinda" album on Fatherhood, 2007, track 12)

Bruce explained in a matter of fact way in the second interview, that he had “changed me [sic] attitude, yeah, and changed me [sic] whole attitude really.”, in relation to being a father now. Larry too had changed his attitude towards having children. He put his new father role in perspective for me and for himself, with a mix of humour and seriousness when he said;

I thought buying a house was pretty important, you know, I thought getting married was pretty important. Or engaged and then married. But this is like wow! You know. It’s um [pause] I used to look at kids and think oh yeah wow! It looks like a real hassle, with all the gear, all the noise and all the mess. But when it’s your own it doesn’t matter, it just all [pause] Yeah, it’s just what you do, you know? (Larry)

On a more philosophical level considering his role as a first-time father in the universe he spoke as if he was asking questions and then answering them. He mused;
And what do you do if you’re not having kids? You know [pause] what are you here for? The next generation [pause] try to leave the place better than when you started, so leave someone good in it. [He laughs at his thoughts and how carried away he was getting] That’s the way I’m thinking about it. (Larry)

In the second interview when his baby was about six months old, Larry was again reminiscing about how he felt after the baby’s birth and how he wanted a sign to tell everyone he was a new dad and he couldn’t believe people were still going about their daily business, when he had just had a baby. He said;

I was amazed that this was still just planet earth - this happened every day and [ I ] never, never realized the um the enormity of it all. That you can actually just do this; you could potentially do it every nine months if you wanted to. (Larry)

John and his wife had changed their attitude towards family and friends since their baby’s birth. They now realized the high cost of their immigration to Australia prior to this pregnancy in terms of the loss of families and friends. John explained that “one of the frustrations generally for us is that we’ve got these really, really, really good friends [in their home country] and all the time you’re trying to like [make] surrogate friends that try to fill the gap but they don’t at the moment”. John and his wife also realized that before they had the baby they thought “quality time” with the family would be more important than everyday time, so that going back overseas each year would be enough for the grandparents. However, they had just started to recognize the difference
in watching a baby's everyday milestones and they now had some ambivalence regarding their decision to emigrate.

4.6.3 Heightened awareness and appreciation of the partner's parenting role.

All the fathers explained in different ways that the experience of having a baby had let them see another dimension to their wife or partner they had never seen before and were amazed at what she was capable of. In this way the experience resulted in their heightened awareness and appreciation of their partner's parenting role. They particularly acknowledged the isolation of the role of the mother at this time and her need for social contact. They realized they needed to help their partner in various ways, so that she could cope better. They seemed to see this now as part of their ongoing responsibility.

Bruce identified that he appreciated how difficult it was for his partner in her parenting role because his mother was “opinionated” and this was “harder on” his partner when the baby was first born, than previously. He took the responsibility of this situation by tackling this problem with his mother as he felt he had “to protect our [his and his partner’s] relationship”.

Larry also explained how he understood the difficulty of his wife’s role because he understood her personality. He said his wife was “feeling frustrated with not being able to do a thing” since the birth of the baby and that
she was used to being “pretty good with her time management [at work]”.

Accordingly, he felt a “lack of solid routine” for her could be “a bit confusing for her” but he explained “…she’s coping better than I thought she would be coping. I thought she’d be more in a tizz”. He also explained how he kept telling her that she was “…doing really well”.

Hans said how caring for a baby on your own was “…very stressful”, something he learnt after looking after the baby on his own for half an hour.

He said half an hour’s “…enough, you can’t do anything you know. I tried to do some work in my study and that doesn’t work. So you do something else and [laughs] can’t even make a cup of coffee for yourself [laughs]”. In this way, Hans explained that he did “really understand” how frustrating looking after a baby can be, and so appreciated his wife’s role.

Also, reflecting on the impact of the baby on his partner, Bruce explained that he realized being a father was about “doing your fair share” and that he couldn’t expect his partner “to do everything”. Hans echoed this sentiment saying “I like to help I guess. I do that more and think about that more.” While I was interviewing Hans in the second interview he couldn’t concentrate at one point because he explained “… I’m worried now. Cause I can hear [the baby] crying now, not wanting to go to sleep.” He said “I’ll just go and give her [his wife] a bit of a check, I think”, meaning he needed to help his wife. Hans also explained later that he didn’t “want to see…B [his wife] struggle as such … even if it’s only for half an hour or an hour that I can help her out”.

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Bruce also acknowledged the isolation of the partner’s role and her need for social contact. In the first interview he realized that his wife needed a break from the baby because she’s “stuck 24/7 with D [his baby], unless someone comes over to visit.” He explained how his partner found it “difficult to go [out] everyday” now she had the baby, so if she wanted to go out at night “for coffee with her girlfriends … I stay home and look after him and she gets a bit of time for herself as well”.

John reflected on the fact that if he and his wife had not shared the parenting she would also have been isolated. He said, “I think she [his wife] would have struggled because of the situation that we were in as far as being pretty new to Aus [sic] and not necessarily having that, you know, network of people around”

John expressed “complete admiration” for mothers that look after their baby on their own in the NICU, as he realized the enormity of the mother’s role when he stayed overnight for two weeks in hospital to help his wife with their baby’s care. Larry constantly expressed joy and admiration watching his wife grow as a mother and become closer to her own mother. He also admired how his wife looked after herself in pregnancy, and labour and the way she handled her job working from home, as well as looking after the baby.

Nevertheless, by the second interview, he was expressing frustration that she wouldn’t let him help out as much as he felt he could have, and therefore he felt “left out”.

Andrew expressed appreciation of what his wife had to contend with when she was on her own. He explained “it’s harder for B [his wife] to try and do a lot of things just by herself. Like even just bathing [the baby] if you forget the flannel and you can’t reach the towel then it’s easier for someone else to help.” He stated he and his wife “work as a pretty good team” he explained they were trying to continue this.

John and his wife attempted a role reversal for two weeks at about three months following the birth of their baby. His wife had gone to work and John had stayed home with the baby. He stated that he didn’t “think there’s ever a case where we didn’t appreciate what the other person did” but after the role reversal they both realized that “it was very easy sometimes to see it from your own perspective” and thereby not realize the pitfalls of the other’s role. He explained how each saw the other’s role in a different light and therefore gained more understanding of each other.

In a similar way, Bruce felt his relationship with his partner was enhanced, since the birth of the baby, in that they were committed to each other and “now we’ve got a baby that ties that all together”.

4.6.4 Heightened awareness of time.

First time Fatherhood was experienced by the fathers in a unique way as it was their first experience of this phenomenon. Even though many of the fathers had attended ante-natal classes, they said how nothing could prepare
them for this experience and the intensity of the moment when their baby was born, or the experience of playing and being with their own baby. This resulted in their heightened awareness of time passing throughout the different and new experiences of first-time fatherhood. The discussion of ‘time’ in various ways seemed to feature frequently in the interviews with the fathers.

Bruce, particularly expressed, that as a first-time father, he would only have this experience once in his life and so he had to savour the moment. He felt a lot closer to his boy after “spending a week with him” when he was about three months old when he (Bruce) was recovering after a car accident. He said that this time with his boy “should help us later on down the track” and that he could “look back on that when he’s [the baby’s] a lot older”. He indicated that this time spent together getting to know each other would stand them in good stead for the future, and would make him feel that he had been different to his own father.

Larry identified time as an issue during his baby’s birth and in the first few weeks after bringing his baby home. He talked about time in the context of his partner’s caesarian birth, when the umbilical cord snapped and “sent everyone into a tizz”. At first, Larry said everything happened in a “flash” but when the cord broke everyone waited for the baby to breathe, and time “seemed like a long time, it seemed like a minute, but it probably was 15 seconds or so.” He focused again on his rapidly changing experiences of time when the baby was born and said:
It was like um, it was like you’d had a day and boiled it down till it was the essence of it and then you know you made a big bucket of high concentrated day. And you packed all this stuff into one day and it was all intense coming up to that. Then she was here, but she hadn’t breathed yet and made a noise and it was like you’ve gone back to real time…..it was like we were cramming more into a minute the whole day. And then when she didn’t breathe it was back, back to normal time. In a way it was cause [sic] our ears [sic] are pricking up waiting for her, and it was like all other sounds stopped and it’s just like, yeah, it didn’t lengthen it went back to normal, you know?…. It was, it was because we were paying more attention to something minute, and the concentration had been on J [his wife] and her body and now it had all shifted to the new separate entity. (Larry)

For John time seemed most sharply etched in his mind in relation to the birth; the times he and his partner spent in NICU and the time it had taken for them not to be so concerned about the complications of the birth for their son. John discussed time and space when his baby was born explaining there was eight minutes of silence in the theatre, when their baby didn’t make a sound, which felt like time standing still. Time was highlighted again two weeks later through a sad story of one of the other parents in NICU, whose baby had just been taken off life support. Larry and his wife realized that if ten minutes had elapsed after the birth of their baby (rather than eight) and their baby hadn’t breathed, resuscitation would have been ceased. John said;
For us that was quite a sobering thing because we saw this family down in the cafeteria with a baby and passing the baby around and just four minutes difference really [between his baby A and this baby who was not going to survive]….I think they’d only resuscitated for the extra two minutes because her husband wasn’t there at the time, so it was horrible yeah….I think ‘miracle’ [italics added] gets banded around too often but it is to us, to us it is. (John)

Again in relation to time John said how he just had “… complete admiration for how …anyone [referring to the mothers] can do …that [be in NICU] on their own …cause [sic] the visits [visiting hours] now seem short when you’re there all the time. That’s kind of what struck me”. He explained further that;

I guess if you’re a dad coming in to spend five hours that seems a long time, but actually when you’re there all the time all through the night the actual time when visitors are allowed in feels short by comparison. (John)

Time was also associated with the frequency with which he and his partner had to check on their baby in the first three months because of anxiety about “fits and seizures”, something that decreased as the baby improved and checking became less important.
Larry speaking about time, said;

Sometimes it doesn’t feel like she’s been here for (pause) is she five or six weeks or six or seven weeks now? ….Sometimes it feels like [pause] longer and other times it feels like a flash, but it generally feels like not long at all [pause] really. It makes it feel longer when now I’m back at work I think…it’s like your coming back and you’ve missed part of the show. (Larry)

Half way through his second interview, Hans who appeared the most disconnected at first explained how he now enjoyed a reciprocal connection between him and his baby. He explained about losing track of time now when he was with the baby. He said;

Yeah, it’s full on, you know. But sometimes I don’t know that I’m in there for an hour. Just playing different music and just sitting there watching her you know watching all the colours with her and seeing how she reacts and [pause] and yeah it’s just very comfortable, very natural. (Hans)

Andrew discussed time more in relation to his work/life balance. After the first three months he explained about feeling that he had to be home “on time” in order to help his wife.
4.7 Achieving Harmony - Reflection on the Journey.

This theme captured the sense of ‘coming together’ that fathers expressed when discussing how life was getting easier and they were feeling like they had come to the end of a “roller-coaster” journey. John chose a song for his ‘blog’ about his baby at three months of age; called “3 is a magic number” and this seemed an apt title, because all the fathers stated that life became more predictable and manageable by around three to six months following the birth. Larry’s experience was different in terms of this time frame however as he did not feel that balance in his life was restored until nearly a year post birth. Nevertheless by the second interview, all the fathers indicated that they had gained a reciprocal connection with their baby; they had mostly negotiated their work/life balance in some way in that they had the change under control, at least to some extent, and had discovered a father role for themselves. They seemed able to reflect back on their journey as if wanting to review it as a whole and to offer some advice to others.

Andrew explained how at one stage in this early period he and his partner “… were really quite lost” as parents, and the “scheduled stuff” provided a structure for the baby. This in turn had provided “some predictability” so they could arrange a night out for instance, and have a bit more control over the routine. He expressed the relief of being able to manage his baby; and his realization that“… as long as we didn’t try and mess with her she wasn’t going to mess with, with us”. Andrew was very clear that his life had started to return to more predictability when his baby was about three months old and he
“could read his baby more” and therefore understand what she might need. He related this to the structured program that they followed (parent-led feeding), which suited him and his partner as parents and helped them understand what their baby wanted. His advice to other father’s was to; “Be prepared for the first three months just to be quite hard, but as soon as you get past the first three months it’s just - I don’t know what changes - but things just get better”.

Both Andrew and Hans related how their work/life balance became more manageable by three months following the birth. This included being able to accommodate being away overnight when their workplace required this. This was because both of their wives were coping better. Andrew explained that he was able to go back to his overnight meetings with work colleagues, because his wife was “more comfortable now and she goes and stays with her mum sometimes or with my parents”. He also related how after three months his baby was in a routine whereas before this he had been frustrated and disappointed as “when I came home she was just really grizzly and grumpy and you couldn’t really play with her or do anything” but that’s “all changed now” the baby was four months old.

Hans articulated some advice to new fathers near the end of his second interview. This was despite him saying that he didn’t listen to advice himself! He first suggested some improvements to ante-natal classes, saying they “focus too much on caring for the baby and not as much on caring for your wife”. He explained that “They [midwives] don’t tell you I guess…and we don’t
realize that there is so much stuff that we don’t know, or stuff we need to be prepared for. So it’s not knowing what you don’t know”. He particularly emphasized that “nobody told me” how “very, very tiring, very stressful (and) drained” you would be after the labour. He said someone should tell the guys “don’t forget to eat yourself you know [during labour] and that “when somebody offers you food, don’t say no, no, no”. Explaining that there’s “not much information [from other fathers]… on that level” because until you have experienced the birth and the new baby it is hard to “relate to it”. He explained also about how he now had “so much respect” for people whose babies hardly sleep because “the stress that it puts on everybody else is enormous.”

At his second interview when his baby was three to four months of age, Hans finally expressed how he felt “complete” because he had met all his goals and the difference for him was that; “Some of the stress is definitely gone and you get more comfortable with the baby you know”. He stated he now felt “complete and get [got] the enjoyment of her [the baby]”and expressed “… how all the pieces come together actually”.

Hans then moved to conclude that it had been “a bit of a roller-coaster I guess [of emotions]…you don’t realize that”. The “completeness” he felt he related to having achieved or accomplished all his goals. He explained that some of his recent goals had been, working hard on the challenges of reciprocal communication with his baby and getting his wife to help him keep a balance between work and home.
John on the other hand, expressed that he hadn’t accomplished all his goals and unlike Hans, didn’t feel complete. However, there was still a sense that he had achieved some balance in his life, and that he felt very lucky to have a baby. Both he and his wife felt they still almost couldn’t believe they really had a baby. John, particularly felt that their baby was a “miracle” and that there would still be many “hurdles” ahead in terms of parenting. He was starting to reconcile his past stillbirth experience and leave that behind and move forward to think about his and his wife’s future as parents. They had not really achieved a balance in their working life yet either, as both worked casually and they still hadn’t worked out exactly how this was going to work in reality.

John explained that he was very accepting and thankful for what their baby had brought and expressed that he believed the baby just fitted in to all their plans.

John’s advice to others seemed to be to encourage parents to be more “chilled out” and not stress about things. He explained that neither he nor his wife are “great planners”, so they tended to “go with the flow”. He explained specifically that “if you stress about breastfeeding then it’s getting you down, it’s getting the baby down and it’s not doing anybody any favours”. John also added that he felt it was interesting that now all their antenatal friends’ babies were six months of age, the parents have “all chilled out to some extent”, so he felt this must be a common experience of first time parents. His main philosophy after all his experiences was “I think you’re just to make the most of life when you’re here.”
Surprisingly, given his initial enthusiasm at the first interview, John expressed that he hadn’t felt the need to do songs and video clips correlating with the baby’s age now on his ‘Blog’, and couldn’t even remember the previous songs that had helped him grieve and process so much in those early months. The only one he could remember was the first song, “Wired”, as he explained “the first one is always the best”.

In the first interview Bruce’s advice to other fathers was to “just love em [sic] [your child]. Spend as much time with em [sic] as you can while they’re still young” and “you’ve got to find your own way”. At the second interview with his baby at four months of age, Bruce felt able to give more specific advice to other fathers because of his new knowledge. He said that he would suggest to dads that they “take a week off every three months if they can…or even long weekends, take a Friday and Monday off and look after your baby for those four days” in order to experience, “the full range” of the baby’s “personality” and “attitude”. He also explained that he would give advice to other fathers that they needed to “let your partner have a break, you know”.

He felt, like Hans, that it was “a waste of time” to have time off when the baby was born in terms of bonding with the baby, as at that stage the baby doesn’t know who’s “feeding him, changing him, holding him”. Bruce indicated that if you were able to have time off then it “would be good for …the partner” but felt the baby “wouldn’t have known who was there”; so in terms of bonding he thought it was better to take time off later as he had done.
Larry noted that he and his wife had a balance but it just needed a bit of “tinkering”. He was still feeling left out at this interview at six months following his baby’s birth and there was not so much of a sense of achieving a balance yet. However, when I phoned him later when his baby was 11 months old, to check on his interview transcript he explained that he had stopped feeling left out and that life was more balanced and his role was starting to come to fruition. He seemed much happier.

Larry’s last summation of his journey at the end of his second interview seemed to be a fitting ending to this findings chapter. I asked Larry to tell me in a nutshell, what it was like to be a first-time father?

He said;

Best thing ever…I don’t see her [his baby] so much as a strengthening of J [his wife] and my relationship but more like a reward…yeah, just everything makes sense, there’s nothing too much more apart from being career orientated as such or money orientated as such but um I think socially and spiritually, …it’s the pinnacle of it all. What did I say? Make the world a better place - leave someone nice in it”. (Larry)

4.8 Conclusion

This chapter has provided my interpretation of meaning emerging from the hermeneutic analysis of data concerning the phenomenon of being a first-time father. The illumination of this meaning occurred through using a
phenomenological framework. This ultimately enabled the identification of the essence of fatherhood, emerging from data. Six major themes and 15 sub-themes emerged from the search for understanding and meaning. The themes that emerged illuminated processes, including the change in responsibility and then emergence of father-infant connection as well as the struggle of the journey of transition these fathers experienced as they sought to become a good father. Ultimately this struggle appears mostly resolved to the extent that harmony has been achieved by about six months following the baby’s birth. This harmony is experienced as the ‘coming together’ of all the elements in the struggle of transition to first time fatherhood.

The following chapter discusses the findings of this study in relation to the literature. It also describes the essence of the experience of becoming a first time father, the process of transition that encapsulates their experience and the model emerging from my study that illustrates it. It also addresses how rigour was achieved in my study, its limitations and implications in terms of practice, education and research. It culminates in a conclusion to this study.
Chapter Five
Discussion and Conclusions

To have a father is all well and good; the father must, for his part also be a father. On the one hand we speak simply of a father relation, and on the other hand we speak of a good true father, and this father we value. To have no father is bad enough, but not to have a good father can be just as bad.

(Langeveld, 1987, p. 13)

5.1 Introduction

In this chapter the essence of first time fatherhood as this emerged from the data collected from the five participants in this study is described. The five participants were committed to their partners and their new role and wanted to be a “good true father” as Langeveld (1987, p. 13) highlights in the quote at the start of this chapter. A model which captures the father's journey and reveals it to be one of transition from men to fathers is explored and explained in the light of the study's findings. This exploration and explanation commences with a discussion of the phenomenological existentials of the father’s lifeworld; including their experiences of temporality (past, present and future contexts), lived other (relationality), lived body (corporeality) and spaciality (the space we occupy). In this study and the model that emerged from it (see Fig.1), the single term ‘connections’ is used to refer to two of these existentials, lived body and lived other. This is because it is through the
body that the fathers experienced and perceived relationships (van Manen, 1990, 1998). Thus, three (rather than four) existentials will be referred to in the following discussion.

When reflecting on the themes emerging from the study in the light of its phenomenological framework of existentials it became evident through the back and forth process of examining the parts and whole of data that the meanings of the experience, expressed in participant's interviews could be captured within emerging themes. These themes also revealed that the whole of the experience took place within the phenomenological existentials. Discussion of each of these themes situates them within the context of current literature, in turn helping to highlight what this study adds to what is already known about first time fathers’ experience of fatherhood in the first months of this experience.

The final sections of the chapter focuses on how rigour was ensured in this research, implications of its findings for theory, further research, education, and clinical practice, and limitations of the study. A reflection on first-time fatherhood is next captured in the conclusion to the thesis.

5.2 The Essence of the Phenomenon of Being a First-time Father

The themes and sub-themes developed from data collected in this study were the skeleton through which a phenomenological description was woven (van Manen, 1990). This description concerns the discovery of meaning in first time
father’s experience of being a father in the first six months following the birth of his baby. The father’s experiences revealed this process to be one of transition from men to fathers. One of the fathers (Andrew) likened this journey of transition to “a roller-coaster ride” of emotions. This is akin to Garrett’s (2000, p. 103) description of the transition period for the 10 first-time fathers participating in his study as being “tumultuous” in that they experienced difficulties but “tremendous joy”. Many authors believe this “tumultuous” experience to be a normal and healthy part of the transition phase in becoming a father for the first time (Bradford, 1990; Draper, 2003; Drobeck, 1990; Dumas, 1990; Garrett, 2000; Kieffer-Andrews, 1992; St. John et al., 2005).

The following description captures the essence of the experience of being a first-time father as this emerged from this study.

The transition process starts for some before the birth of the baby but for most following the birth. It commences with a feeling of responsibility for a child for the first time. A first time father’s experiences are of unconditional love, wonder and joy at the birth of the infant and a feeling that he has been chosen. However, this phase passes into a transition process of struggle and confusion over what role to play when being a father. The father struggles to maintain his identity as a man and at the same time is trying to incorporate how to be a father in his own unique way, while also supporting the mother, a situation which causes confusion. This confusion prevails throughout
the transition process to first-time fatherhood until tranquillity arrives. This confusion is reflected by the father in his struggle to engage with his infant and obtain reciprocal connection from him/her in return while simultaneously keeping life calm and in balance. As reciprocal connection develops, there is further expression of unconditional love, wonder and joy on the father’s part as he reflects on how this new person will turn out to be, and how he can guide and lead his baby. The father in this transition process struggles to reconcile his past experiences and relationships in order to achieve harmony within himself and move forward through the change. He moves from isolation towards a sense of warmth and cohesion which comes from a sense of belonging and becoming embedded within his family. This takes place as he develops a deep change in attitude and a new awareness of fatherhood as being of immense importance above that of all other. Along the transition journey, the father becomes a “better husband” (John), and at the same time, he experiences a heightened awareness and appreciation of the mother’s role. The transition process concludes following about six months of being a first-time father, by which time the father experiences a sense of being part of the whole family with a role and purpose.

5.3 The Model

The Model captures the essence of first time fatherhood over the first six months and was created to represent the experience of the transition journey
of first time fatherhood as it was described by the fathers. For clarity of explanation the model (Fig. 1) emerging from this study is depicted and described from the ‘outside in’ or from the perspective of the whole to the parts. Nevertheless it is important to note that the parts (thematic elements) both reflect and highlighted the whole. Together parts and whole encapsulate the meaning of the overall experience of being a first time father. Thus, the transition process of becoming a first time father takes place within a framework of the three existentials; temporality, connections (lived body, lived other) and spaciality.

**Figure 1 “A ROLLER-COASTER RIDE”; The transition process of becoming a first-time father in the first six months following the birth of his baby.**
5.4 The Existentials of the Model

The outer circle of the model (Fig. 1) represents the temporality of the experience of being a first-time father. Benner and Wrubel (1989, p. 64) compare the modern notion of time as “a linear succession of moments” with the existential concept of time, temporality, which they describe as “the way a person simultaneously lives in the present, is influenced by the past, and is projected into the future” (Benner & Wrubel, 1989, pp. 412-413).

In this study, the father's lived experience of being a first-time father reflects a heightened awareness and experience of “subjective time as opposed to clock time or objective time” (van Manen, 1990, p. 104). Consequently, the first-time father in this study, is focused on the new experience, so much so that he feels time slows down or moves fast or stands still when particular experiences are felt (see sub-theme ‘Heightened Awareness of Time’). Larry voiced this clearly. He said the birth felt like it happened in a “flash”, but when the cord broke everyone was “waiting” for the baby to breathe and time seemed to be longer. He stated, “Yeah, it seemed like a long time, it seemed like a minute, but it probably was 15 seconds or so”.

Benner and Wruble (1989) comment that temporality is also influenced by the past. This is reflected in this study when the fathers explain how their remembrances of their life history and experiences influenced them as a father, the way they see the world and what they plan to do in the future. van Manen (1990, p. 104) explains further that “it is true too that the past changes
under the pressures and influence of the present. As I make something of myself I may reinterpret who I once was or who I now am.” This means that the father’s reflection on the past may change what he now thinks and feels and the meaning he places on being a father and this in turn may influence the way he views and interprets the past.

It is evident therefore, that the experience of being a father for the first-time is an experience in temporality. The father changes through involvement and connection with his baby and partner over time and this changes his whole attitude toward life. Themes that emerged in data all reveal temporality as being the existential that captures the experience of first time fatherhood as being a process of transition experienced over time and within time.

As identified previously, the term Connections as used in the study and the model emerging from it captures two existentials, Lived Other (Relationality) identified on one side of the triangle and Lived Body (Corporeality) on the other. Lived Other (Relationality) represents one part of the Connections involved with being a first time father. In this study, the father’s journey of transition from man to father, which for one commenced during pregnancy, and for all others from the infant’s birth and continued over the first six months following it, involves developing Connections with both his wife or partner and baby together in pregnancy and then as two separate entities following the birth. The journey involves building relationships over time, feeling a sense of belonging and becoming embedded in the ‘whole’, which is the family.
“Lived Body (corporeality) refers to the phenomenological fact that we are always bodily in the world” (van Manen, 1990, p. 103). It is through our body that we experience others and they experience us. That is, through our body language we can choose to expose or cover up how we feel (1990). In this study, the fathers experienced the feeling of the gaze of their baby and their baby’s bodily movements next to theirs. This experience was profound and caused them to feel responsible. In time, the father realised that the baby enjoyed their interactions through the baby’s bodily responses of kicking, smiling and recognition. All themes and sub-themes illustrate Connections (lived other, lived body) and are reflected in Figure 1.

Spacality (lived space) in the model (Fig. 1) is represented by an ellipse which indicates it commences in pregnancy outside the triangle and extends into the triangle following the baby’s birth. Spacality is influenced by and experienced within time and changes of place such as hospital/home/work (lived space). This is interpreted as movement over time from the separate entities of mother, baby and father (individual space) to becoming a family (family space). It represents not only the space but the feelings that relate to that space over time (van Manen, 1990, p. 106). Lived Space includes the space surrounding work/life/family and how this is apportioned and re-balanced during the father’s transition. This re-balancing involves the father’s perception of how he prioritizes the position of fatherhood in his life. His thoughts about this are influenced by his past and present and what he is planning for the future. As Langeveld (1987, p. 5) suggests the father has a choice, he “… can take his place in this space or, even more, he can make
his place in this space”. Langeveld (1987, p. 5) suggests that in order to do this the father can make the most of his opportunities to create a role for himself. This he can do by being there and ensuring that his baby delights and depends on him. In this way he becomes a “natural” part of the baby’s close relationships and therefore makes his place in the household.

All themes and subthemes reflect the fathers’ expressions of spaciality which emerge as they move from a period of isolation as separate individuals to one of warmth and cohesion as part of a family. This again reflects their transition journey towards arriving at and returning to a sense of harmony and balance. The fathers expressed awareness that this balance constantly requires assessment to accommodate the continuing changes occurring over the life of the infant to adulthood.

5.5 Themes and Sub-themes of the Model

This transition journey evident in first-time father’s expressions of moving from two individuals to becoming a family is captured by the themes and subthemes emerging from data obtained from the study and identified in the model (Fig. 1). These themes and sub-themes are now discussed in relation to the literature regarding first time fathers.
5.5.1 The dawning of responsibility.

The overall theme, the ‘Dawning of Responsibility’ relates to the father’s gradual recognition of responsibility. Within this theme two sub-themes were identified, ‘being an advocate for the mother in labour’ and ‘feeling like a father – associating it with responsibility’. These illustrated when and how fathers recognised responsibility as part of their journey and how it manifested.

Despite having planned the pregnancies with their partner none of the fathers in this study, with the exception of Larry, appeared to recognise the responsibility they had undertaken until the birth of their baby. They had started to become aware of the mother’s vulnerability and growing size in pregnancy, which caused them to realise she needed more assistance and support, but, except for Larry, most participants did not allude to responsibility as occurring prior to the birth. Most only discussed responsibility describing their experiences following the birth. They explained in different ways how it had suddenly dawned on them that what they were feeling when they saw and held their baby was responsibility. As in St John et al.’s (2005) study findings, four of the five participants in my study did not mention feeling responsible until after the birth. Larry, however, not only chose to start his story ante-natally but also felt “additional responsibility” for “two separate entities” (mother and baby) after the birth, indicating he had felt some responsibility during pregnancy. Similarly, Drobeck (1990, p. 60) found some of his 30 American father participants in his study felt a gradual change in
responsibility before the baby came but for most this change was experienced after the birth when fatherhood became a “concrete reality” for them.

Interestingly, Barclay and Lupton’s (1999, p. 1018) discourse analysis of Australian first time fathers implied that their participating fathers had too much responsibility post-natally (see also Pollock et al., 2005, p. 19). However Barclay and Lupton (1999) do not indicate that their participants specifically mentioned the term responsibility in any way as part of their experience.

**Being an advocate for the mother in labour.** This theme illustrates all the existentials together; the heightened awareness of time; the space of the maternity unit and the father’s actions in that space. Further it also illustrates the experience of a deep connection because of the father’s increased awareness of his wife’s effort and baby’s heart beat as labour progressed and his realization and understanding of both their need for his support and advocacy.

This deep connection and understanding of the mother is demonstrated in a review of the literature undertaken by Callister (1995, p. 5) who found that the father’s main role in labour was a “sense of advocacy” mixed with an “understanding of the labouring woman” and “love for the mother and baby”. These findings are also reflected in this theme as it arose in my study. Like Callister’s (1995, p. 7) study, my study through its use of unstructured interviews enabled the fathers to share their perspective of the birth which allowed them to “make meaning of the experience”. In this way they were
able to reflect on what they thought was significant or important about the birth from their perspective. It was through their reflections that their advocacy and vigilance for the mother and sometimes the baby was demonstrated.

**Feeling like a father – associating it with responsibility.** All fathers discussed ‘feeling like a father’ when they first saw their baby and a sense of increased responsibility seemed to be associated with this feeling. In a similar way, Keiffer-Andrews (1992, p. 64) found that 12 out of 13 of her father participants did not ‘feel like a father’ until after the birth. The participants in my study explained that the realisation that they were now responsible for both mother and baby had suddenly “hit” them. This sudden experience of responsibility was similarly noted by one father in St John et al.’s (2005, p. 183) study when he suggested that;

> The first one [infant] changes your whole lifestyle, because although you are married you have nothing to worry about, no responsibility. Then all of a sudden up comes the handbrake. You now have responsibility.

van Manen’s (1998, pp. 21-22) discussion of embodiment (lived body) facilitates a deeper understanding of the feelings fathers’ expressed following the birth of their child in existential terms. He explains that following the birth the baby “calls” for responsibility when it is born and is “face to face” with the father and is a tangible entity; and the father experiences the “pull” of “being there” for the other (van Manen, 1998, p. 22). In my study it became clear that
for fathers the sight of their baby gave rise to their first recognition of responsibility. This is consistent with van Manen’s (1998, p. 22) suggestion that there is somehow another “dimension” when the vulnerable baby is “thrust” into the father’s world and the father experiencing, in this case the face of the baby “simply cannot help but feel that the other person… has made a claim on one’s responsibility” (van Manen, 1998, p. 22).

Habib and Lancaster (2005, p. 263) note from their quantitative findings of first-time fathers’ experience with a six months old baby that “responsibility did not seem related to bonding”. This corresponds with my findings that the feeling of responsibility was not necessarily related to the feeling of connection, or ‘bonding’, however when connection occurs it enhances the feeling of responsibility. An example is Hans, who said he felt sudden responsibility when his baby was born, in that he realised he had changed his driving immediately after this occurred. However, he said he was still disappointed that he didn’t feel any connection with his baby nor did he recognise his connection or attachment.

After the first sudden awareness of responsibility at birth all the participants in my study said that they no longer consciously considered responsibility as something they were experiencing. Instead, they explained, responsibility became just a part of being a father. This experience reflects that of one father in St John et al.’s (2005, p. 183) study who said he too “…just got in and just had to do what (he had) to do…”, without considering responsibility anymore.
In my study, it appeared that in some instances a new father’s feeling of responsibility affected his behaviour which challenged his view of himself. Thus, two of the fathers, Hans and Bruce, explained how they improved their driving as a result of the birth of their baby and their feeling of responsibility. In addition, Bruce changed his behaviour in general and became less of a “ratbag”. This reflects Drobeck’s (1990, p. 60) findings that fathers were “taking fewer risks” and “becoming more conservative” in response to maturing and becoming responsible after their baby was born. In the same way St John et al.’s (2005, p. 186) fathers took “greater self care, or [engaged in] less risk taking”.

Habib and Lancaster (2005, p. 263) found from their literature review that the concept of responsibility has seldom been studied. My qualitative study resulted in a much broader description of responsibility in relation to first time fatherhood than might have been possible from a quantitative study. This is because too often quantitative scales such as the Parental Responsibility Scale (PRS), used by Habib and Lancaster (2005, pp. 251,257) for their study limit the description of the concept.

The wider concept of responsibility espoused by Marcel (1962) and Langeveld (1987), both phenomenological theorists, also provides a broad understanding of responsibility. They propose a model of the essences of being a “true father” which they describe as faithfulness to mother and child; engagement, which is more than activities with the child but includes thinking about the
future of the child; and a broad view of the essence and commitment that responsibility entails. In their theories of being a “true father”, responsibility indicates acceptance of “shouldering and sustaining this responsibility” over the long term (Marcel, 1962, pp. 116-118); being predictable and constant (Langeveld, 1987, p. 15); providing and protecting and above all being “a leader, a guide to the world and to the future of life” (Langeveld, 1987, p. 6), all elements expressed by fathers in my study. In this way, participants identified they tried hard to be good fathers, constantly reflecting about fathering and their growing sense of responsibility for their child.

5.5.2 Seeking and finding connection.

This theme captures the sense that each father is attempting to seek out ways to find a connection with his baby. In my study each father is unique in the timing of when this connection was felt, however there were some similarities between them. This theme was found to have three sub-themes; ‘Feeling like a father- seeing is believing’, ‘Searching for reciprocal connection’, and ‘Wanting to do things differently or wanting to be the same’. These sub-themes reflect the uniqueness and similarity of the fathers.

In my study four out of five fathers felt a sense of disconnection with the baby in pregnancy. Three of these fathers expressed that they felt this was a normal reaction for a first-time father who was on the “outside” of the experience. One father, Hans, however felt this was an abnormal reaction which “bothered” him as he felt it could mean he would not be able to attach
to his baby after she was born. Larry, on the other hand, was the only father who stated that a feeling of connection to his baby commenced in pregnancy. Draper (2002, p. 566) calls experiences similar to Larry’s experience of connection to his baby during pregnancy “body mediated experiences” in which the father “uses the woman’s body to gain or mediate access to the foetal body”. Despite feeling connection to his baby during pregnancy, however, Larry described feelings of loss and sadness after he went back to work as he felt he “missed out” on connection with the baby.

Barclay and Lupton (1999, p. 1017) found that many of the first–time fathers in their study “were surprised that ‘bonding’ with their infants was not achieved immediately”. Halle et al.’s (2008, p. 62) study likewise demonstrated that bonding can take some time for a minority of fathers. In my study, Hans was one of these minorities as he did not form a bond with his baby at all until four to six weeks.

Many of the fathers in my study discussed how their first emotions of joy and wonder at the birth of the baby gave way quickly to a feeling of “being on call” (John). All the fathers hinted or described the first two months as being a struggle and hard work with the baby, with “little return” in terms of connection. In a similar way, Hampson (1997, p. 207) also describes first-time fathers’ first three to six weeks of fatherhood as the “awe-filled awful” in that there is “confusion, anxiety and self-doubt intertwined with wonder, awe and celebration over the baby”. In a different way Barclay and Lupton (1999, p. 1019) identified that “nearly all their participants found fatherhood ‘disappointing and frustrating’ in the first six months and most of the group
expected to be more involved”. In contrast to this my study’s participants (with
the exception of Larry) felt that these feelings had disappeared by the time
their baby was three months of age because of increasing feelings of
reciprocal connection with their baby. Therefore, like St John et al.’s (2005)
participants, they had a more optimistic view and a sense of moving forward
compared to Barclay and Lupton’s (1999). Given the time lapse between
Barclay and Lupton’s (1999) study and my own (10 years), this more
optimistic view may indicate fathers’ progress over recent years, in terms of
learning how to be involved with their baby and partner and to becoming a
family member. It might also indicate that Barclay and Lupton’s (1999) first
time fathers were a different demographic group who found fathering very
difficult or that discourse analysis does not expose fathers’ full expressions of
the positives of their experience.

**Feeling like a father – seeing is believing.** Following the birth of the
baby all fathers felt there was another dimension entirely when they were able
to see, hold and touch their baby. Often the fathers described not being aware
of space or time when they were just gazing at their baby in those initial first
moments. They all expressed that they ‘felt like a father’ once they had seen
and held their baby. Even Larry, who said he had felt like a father in
pregnancy and felt connected in pregnancy, felt a new sense of being a father
once this new “entity”, his baby, looked at him.

Draper’s (2002) findings from her ethnographic study of new and experienced
fathers in England in the antenatal and early postnatal period are similar to
most of the fathers’ experiences in my study. Draper (2002, p. 563) found that “men frequently spoke of a desire to become involved with their partner’s pregnancy and yet reported difficulty in engaging with its reality”. She also found that during pregnancy fathers suggested they had “little evidence” of a baby, a sentiment shared by four of the five fathers in my study who said it was hard to believe that the baby was “real” in pregnancy when they couldn’t see or feel something.

**Searching for reciprocal connection.** This sub theme captures fathers’ experience of searching their baby’s face for signs of changing facial expressions, verbalisations and bodily reactions that would give them evidence that their attempts to communicate with the baby have been reciprocated. All of the fathers spoke of their feelings of attachment to their infant when they could see that the infant enjoyed their interactions. This gave them a sense that their attempts to engage the baby were reciprocated. The fathers appeared to seek signs of this reciprocity from their baby as a way of knowing whether or not they were doing a good job. Drobeck (1990, p. 64) suggests that fathers find meaning and pleasure through this interaction. Fathers in my study indicated that they felt this reciprocal connection with their baby when he/she was around three to four months of age. Many of the fathers expressed their “amazement” that their baby “recognised” their voice and face which they interpreted as a strengthening connection with him/her. Like Garrett (2000, p. 97), Hampson (1997, p. 212) found that the father’s experience of having his role acknowledged and “recognised” by the baby provided further “reassurance” of the connection occurring with his baby. My
study resulted in a similar finding. In contrast, however, Barclay and Lupton (1999, p. 1016) indicated that first-time fathers in their study “expected that this involvement with the child would be reciprocal” but had not felt this by six months following the birth. St John et al. (2005, p. 184) in their more recent study, made little mention of this, although these researchers said that some “closely involved” fathers enjoyed interacting and “getting to know” their infant in the early weeks. Other fathers amongst St John et al.’s (2005) participants differed from those in my study in that they were not expecting interaction until the infants were in the toddler age group. A comparison of the findings of St John et al. (2005) with my study’s findings is difficult however because of the inclusion of both first-time fathers and subsequent fathers in her study.

From their comments, my participants revealed they took full advantage of opportunities to be involved with their baby. As Langeveld (1987, p. 5) found by three months following the birth they had been able to ensure they had a place in the child’s life through these efforts. They were constantly searching out ways for connection with their infant and ways of engaging and becoming important and needed by both mother and infant. Langeveld (1987, p. 5) indicated that to be a father, one also has to be able to “sustain and shoulder this responsibility”. My study demonstrated that by searching and finding reciprocal connection with the baby, responsibility was sustained. This then enabled the father to increase connection to his baby and become embedded in the family.
My study also demonstrated that the attainment of reciprocal connection seemed to lead to the father and infant being almost psychologically interdependent on each other. The story of John needing to fall into the arms of his boy at the end of a work day to relieve his stress is one indication of this. John’s experience corresponds to the idea captured in the Generative Fathering Framework that “interdependence is seen as a fundamental condition of father-child interaction” (Brotherson, 2005, p. 3). The concept and theory of generativity proposed by Eric Erikson in 1963, (Brotherson, 2005; King & Parquette, 2008) has much relevance to my participants’ stories and the way they describe their reciprocal relationship with their infants. This shift in “locus of concern” from self to other can be seen as a “maturational opportunity” as the father becomes more generative (Bradford, 1990, p. 139). This is an example of what Pleck (1997, p. 102) suggests is “positive paternal involvement” which “may be the essence” of what is conceptualised as “generative fathering” (Brotherson, 2005).

**Wanting to do things differently or wanting to be the same.** Three fathers in my study indicate that having a poor relationship with their own father made them question rather than accept fatherhood. Consequently they seem to have been more anxious about attaining a connection with their baby, apparently afraid that it would not happen. They appeared to have almost a “greater urgency” to “create a positive paternal self-image” (Bradford, 1990, p. 151). Bradford (1990, p. 152) suggests the reason for this is because one has to make a “new identity” in first time fatherhood that has not been “internalised”. This theory may help explain why Hans, Larry and Bruce,
seemed to be anxious as to their ability to connect with their own baby and did not appear to have as much trust in the natural process of fatherhood.

Accordingly, they did not appear to have been able to be as open as Andrew and John who were happy with their own fathering. Andrew and John expressed that the baby didn’t “give anything back” to them till 3 months following the birth; however, they saw this as a part of the process of fatherhood. As in my experience, Bradford (1990, p. 151) found the researcher had to “go out of her way” to ask the two fathers who had stated they had positive experiences with their own fathers to explain these experiences further, whereas those fathers who had negative experiences explained these without prompting (Bradford, 1990, p. 151). Larry, Bruce and Hans who experienced poor relations with their own fathers, had similar experiences to eight of the 13 fathers in Keiffer-Andrew's (1992) study. They all experienced discontent and sorrow about their relationship with their own father, and for most, an “angry”, yet kind-hearted understanding for the reasons for their father's remoteness (Kieffer-Andrews, 1992, p. 104). For example, Hans felt his parent’s marital problems may have prevented closeness with his father; and Larry felt his father's job and selfish personality made it difficult for him to father.

Similarly to other researchers, (Bradford, 1990, pp. 149-152; Daly, 1993; Kieffer-Andrews, 1992, p. 103; Lamb, 1997b, p. 81; Lemay et al., 2010, p. 228; St. John et al., 2005, p. 186), participants in my study either wanted to be the same or different to their own father; indeed, those that wanted to be different, wanted to be the opposite to their own fathers and to try not to repeat their
father’s mistakes of the past. Bradford (1990, pp. 149-152) suggested that this tendency to try to “self create” a different role than their own father “would add to the stress of an already trying transition”, however he felt fathers needed to be followed for longer than three months in order to assess this (something my lengthier study enabled). Following on from this, St John et al.’s (2005, p. 186) study found that in order to be different, many of the participating fathers “…wanted to be more available to their children and develop better relationships with them”. My participants stated similar views however; they also indicated anxiety and questioned themselves during this journey of transition to fatherhood. In contrast Barclay & Lupton’s (1999, p. 1015) study found that only two out of 15 fathers were wanting to be different from their own fathers by being “more involved” with their infants by “being there”. In a different way, participants in my study, as in St John et al.’s (2005, p. 186) study, associated being a ‘good’ father with emotional aspects of building a relationship with their infant, not just being there in a physical aspect. Habib and Lancaster (2005, p. 263) found that it is the “emotional quality of the father-child relationship” which is important in fathering, and my participants and those of St John et al., (2005, p. 186) demonstrated they understood this. Examples of this in my study included Bruce’s discussion about wanting to tell his child he loved her and show concern for her; Larry wanted to be better at the “little things” in life with his daughter rather than worrying about the family finances, and Hans wanted to be more mindful of being present with his baby in terms of emotional response rather than being focused on work.
It should be noted also that some of my participants not only modelled their behaviour on being like or unlike their father, but also incorporated aspects of peers’ and other people’s models (Daly, 1993, pp. 522-523). Daly (1993) suggests this is a common phenomenon for contemporary fathers. For example, John said that, even though he was happy with his own fathering, he based a lot of his parenting thoughts on “what I see other people doing”. He therefore used characteristics of observed fathers in order to identify a model he perceived as useful to him.

5.5.3 Absolute joy, wonder, delight and unconditional love.

This theme captures the reaction of “admiration or simple wonder” (Marcel, 1962, p. 118) experienced by a first-time father to seeing, holding and being with his baby in both mind and body. My participants expressed this love as “overwhelming”. Marcel (1962, p. 118) states that “something transcendent is involved” even if the father is not conscious of it as yet. Reflecting this transcendence, Larry indicated that he and his wife, as a couple together brought something far greater than themselves into the world. Marcel (1962, p. 118) explains that “it is this reaction, originally springing from the consciousness, which is expressed in the father’s act as he falls in adoration before his newly-born child”.

Other authors concur with this theme. St John et al.’s (2005, p. 187) fathers mentioned “wonder at the ability to create a new person” and to have “shared the joy that comes from a smile or response from their newborn”. Garrett (2000, p. 96) describes similar experiences by the fathers in his study which
he captured in the theme “the sudden new bond”. He described all 10 fathers in his study as experiencing a “deep and sudden relationship” that was “intense” when they “were able to see and hold their infants”. He states this provided the fathers with “a sense of profound love and elation” (Garrett, 2000, p. 96). This finding was reinforced by Keiffer-Andrews (1992, p. 99) who found that the fathers participating in her study described “feelings of attachment” that permeated “their entire lives”. Drobeck (1990, pp. 60-61) also explained that the fathers in his study recognised that the transition to fatherhood had changed them. His participants described how it was the first time they had put someone else’s needs before their own and therefore “loved someone in an unconditional, selfless manner”. Drobeck (1990, pp. 60-61) concluded that this means these fathers had “become more generative in that they are putting aside their own needs to foster the growth of another generation”.

Langeveld (1987, pp. 8,14) states that the true essence of “being a father” means that the child is not perceived as belonging to the father but that “the father belongs to the child”. In the same way, Marcel (1962, p. 120) explains that in the true essence of fatherhood, the father must understand that the child is for the universe and does not just exist for the father alone. Therefore, the father has no “right to decide what they [his children] were to become” (Marcel, 1962, p. 120). My participants also indicated this feeling of the child being its own person and not belonging to them but to the universe. This is evident when they stated in various ways that the father can only guide and
influence but the child will be whatever he/she is meant to be. Contemporary music about fatherhood also reflects the father’s position as one of guide and leader and of belonging to his child.

Trustingly smile
So sweet and safe
You are the one
For you I breathe
So touch me now
And trust always
For you are the one

You are my son
Precious little life
To guide and lead
With open arms
I'll guide and I'll lead

(Rudd, 2007)

Furthermore, common in these contemporary songs (George & Davies, 2007) is the idea that the child chooses the father. The lyrics of Neil Murray’s songs exemplify this. He writes “I’m so glad you chose me to be your dad” (Murray, 2007b) and “you don’t get to choose any of them, they come of their own accord” (Murray, 2007a). In this way Langeveld’s (1987) and Marcel’s (1962) phenomenological theories about fatherhood remain relevant today.
5.5.4 Struggling to find a balance

This theme reflected the finding that fathers struggle to find a balance in their lives and involves the transition from man to father experienced by my participants. Six sub-themes of this theme were identified.

My participants' expression of their experiences demonstrated their need to attempt to harness all their skills and knowledge to keep things calm and in perspective in order to feel in control and make life manageable. They also illustrated their philosophies, personality, beliefs and values in order to explain what type of man they were and what type of father they would be. Initially, I struggled to understand why my participants kept talking about their philosophies, personality and beliefs as well as their skills and experience. Reflection leads me to believe that these philosophical discussions were used by the fathers to explain what type of men they were and what values and beliefs they held, so that I would be aware of what type of father they wanted to be. Marcel (1962, p. 105) sheds light on the possible motivation for the fathers' discussions of these values. He explains that; “… the more totally an action [fatherhood] involves the personality of the agent, the more it is of the nature of vocation, and the more it is unique by its essence…” (Marcel, 1962, p. 105). Marcel's (1962) words lead me to conclude that my participants wanted to stress the uniqueness of themselves as men and fathers. They were therefore explaining why they found it difficult, (or chose to refuse) to learn from other father's experiences or from books. They seemed to indicate their view that the way they fathered would be different to other fathers,
therefore they had to “experience things themselves” (Bruce). This idea that each father is unique in the way they father suggests my participants concluded that fathers cannot gain knowledge about fathering until they have experienced it. Fowler (2000) demonstrated a similar view was held by mothers. My study’s findings therefore illustrated that even though the journey of transition experienced by each father is similar, each experienced differing feelings about each stage which made them unique and did not mimic any simplistic prescribed “type” of father as Kaila- Behm & Vehvilaeinen- Julkunen (2000, p. 6) and Gamble and Morse (1993, pp. 362-363) describe.

Furthermore, Langeveld (1987, p. 6) explains that fathers tend to be concerned with “wider horizons”, that is, “matters of the intellect and spiritual concerns”. My participants were frequently thinking about their philosophical concerns (Larry, and Hans), and personal mottos (John), the laws of nature (Bruce and Larry) and religion (or lack of), during their interviews. For example, Larry and Hans discussed the Buddhist philosophy, and other religious ideas. Bruce emphasised that not believing in God was part of his philosophy of life. Bruce and Larry highlighted their belief in all things happening by the laws of nature, which seemed to help them feel more secure in this transition period. John had lots of personal mantras that helped him in life. Andrew seemed to be trying to work out whether his personality or his type of work ruled how he responded to things in life. As a result of his study St John et al., (2005, p. 185) suggested that, in contrast to mothers,
fathers took a wider outlook because they had to cross between the world of work and the outside world and community in order to meet their families needs.

My study revealed that in the struggle to find a balance and become a father most participants were effective in dealing with the struggle in the transition to fatherhood (Halle et al., 2008, p. 64) and that “for most of the men their anxieties decreased steadily post-partum” (Buist et al., 2003, p. 172; Drobeck, 1990, p. 61). In contrast to these findings, other quantitative studies have found that the “peak period of distress” for first time fathers was “halfway through pregnancy” (Buist et al., 2003, p. 172; Condon et al., 2004, p. 56). Condon et al., (2004, p. 56) also suggested that following this peak, anxiety symptoms in first time fathers improved slightly in the first 3 months following the birth and had “little change thereafter”. However, in my study, there were shared patterns of peak periods of stress and adjustment, as well as individual variation, different to some of the quantitative studies (Buist et al., 2003; Condon et al., 2004). For example, most fathers in my study, seemed to experience heightened anxiety in the first few months post-natally and then this anxiety started to decrease as they understood and were better able to control their new world (Hans, Andrew, Bruce, John). However, there were some variations in this experience. John and Hans found pregnancy stressful for very different individual reasons and Larry found the post-natal period the most stressful.
Managing and negotiating the work/life balance. All the fathers discussed the balancing act required to negotiate work life, with home life and their family’s needs. Their attempts to achieve a balance between work and family reflected Drobeck’s (1990, p. 62) and St John et al.’s (2005, p. 186) findings. The fathers in my study felt they were starting to achieve this balance three to six months following the birth. In contrast, Drobeck’s (1990, p. 62) 30 American fathers and St John et al.’s (2005, p. 186) participants said they had achieved this balance by 12-16wks.

Barclay and Lupton’s (1999, p. 1019) study demonstrated that men were unrealistic in expecting that they could achieve any balance in their working life and be the involved father they wanted to be. Their study revealed that first-time fathers found fatherhood “difficult and distressing”, that these fathers could not move forward easily and they felt “anger and frustration”. These findings differed from more recent studies (Halle et al., 2008; St. John et al., 2005) and from my study in that in these studies the fathers expressed more optimism about being able to manage their new father role. For example, like St John et al.’s (2005, p. 187) fathers, my participants expressed that fatherhood was “rewarding” even though it could be “challenging” and “distressing” and at times was a “balancing act”.

The flexibility of work hours seemed to be a factor that helped some of my participants make the work/life/family balance easier as when work was flexible they could participate more in their father role. However, fathers’ perception of these hours, how they used these hours and whether or not
their partner restricted their participation in baby care in any way was as relevant as flexibility. My study also demonstrated that attitudes and perceptions seemed as important as flexibility and time spent with their baby and their hours of work. Some examples of these perceptions and circumstances are as follows: Larry felt “left out” yet he had no more hours of work than some of the other fathers, and had two weeks of “time alone” (Habib & Lancaster, 2005, p. 251) with his four month old baby. However, there was some evidence that his wife may have restricted his participation in both domestic duties and baby care, as in the role of ‘gatekeeper’ (Allen & Daly, 2007, p. 14).

My study demonstrated how some men obtained emotional support and satisfaction from their work (Hans, Larry, Andrew) and were very reluctant to let this support go. St John et al.’s study (2005, p. 186) similarly found that for first-time and subsequent fathers “work was an important commitment in these men’s lives, constituting social placement, personal identity, and their provider role within the family”. Like St John et al.’s (2005, p. 186) study, my participants mentioned a re-prioritising of work, decreased time at work and making sure they were home on time. However, unlike in Drobeck’s (1990, pp. 66-67) study they did not express that they took work more seriously after the baby was born.

**Feeling isolated – things left unsaid.** During the first two months after the baby’s birth, fear of their new role appeared to result in parents isolating themselves from one another at a time when they needed each
other’s support. Most fathers described how the first four to eight weeks seemed to be a stressful and challenging time for both parents, as they struggled to make sense of how to manage their new life and find a balance. It appeared that parents couldn’t talk to one another about their emotions while they were in this transition stage.

Hampson (1997, p. 210) found 14 weeks following the birth elapsed before parents are able to help each other “modulate the stress of new parenting for each other”. Mothers often have the support of “mothers groups” (Bradford, 1990, p. 161) but for fathers, their partner was their most important support (Halle et al., 2008; Hampson, 1997, p. 209). However, during this time the mother also is in a transition period processing her own emotions after becoming a mother and therefore she may not be able to be supportive to her partner (Bradford, 1990, p. 143; Halle et al., 2008, p. 64). Bradford (1990, p. 143) suggests that “the wife’s ability to acknowledge and integrate her transition to motherhood directly affects the father’s experience of becoming a father”. It seems likely during this transition journey, both parents are trying to make sense of their individual feelings. Until they can explain these feelings to themselves it appears they cannot express them to their partner. Some fathers spoke about a need to protect their partner from their emotions (John), which increased their isolation from each other. Fathers were uncertain of the right thing to say, so felt it was better not to say anything (Larry, Hans), and they feared sharing their concerns with their partner. John, who lost a baby in pregnancy, particularly wanted his partner to enjoy her pregnancy even though his worries and fears about a previous stillbirth prevented him from
doing this. Realisation of the isolation came for John and his partner following the administration of the EDS (Matthey et al., 2000) when both discovered they were “down” and had not let each other know. From then on they seemed able to discuss their fears and move on.

**Feeling confused about the role of being a father.** All fathers experienced confusion about their father role at some stage during pregnancy or following the birth, because they were “living in a new and overwhelming world” (Nystrom & Ohrling, 2004, p. 324). Barclay et al., (1996, p. 18) explain this separation from old to new roles as a time of anxiety for expectant fathers and a “fear that they would not fulfil the roles expected of them at different stages of pregnancy and after birth”. In my study, Hans, for example, was confused and “felt like a wanker” at the birth, because he was uncertain of his role. Four months later this uncertainty persisted but he no longer worried about it. John and Andrew also experienced this initial confusion for various reasons. As in my study, Hampson (1997, pp. 206,208) found that new fathers worked hard in the first 14 weeks to “make their lives and the lives of their partners more predictable and manageable”, but that “greater predictability” was assured by 3-6 months following the birth.

**Feeling left out.** Similar to my study, Langeveld (1987, p. 5) notes that “in many modern day families”, the mother still has the “central place” in the baby’s world. However, he argues that “in the beginning the father is a pure luxury of the child’s existence”. He explains that:
He is from the beginning ‘on the sideline’ and therefore, ‘for later’. In as much as he is there, he counts as ‘belonging to the mother’; he belongs to that which is extra, to that which will later be called ‘play’, and still later probably, ‘the world of work’ (Langeveld, 1987, p. 5).

This may be the reason that two fathers (Larry and Bruce) felt “left out” as they experienced confusion because their expectations of the father role did not match with the reality of it. They were also trying hard to be different and more involved than their own fathers. Larry eventually realised that his role was more “interaction than nurturing” but he had taken some time to realise this and he was disappointed.

Other studies also hint at the exclusion felt by a minority of fathers. Halle et al., (2008, p. 65) state two out of 22 fathers in their study “felt excluded from looking after their baby”. Barclay and Lupton (1999, p. 1015) found one of the fifteen first–time fathers felt “left out” and others “detached”. The researchers related this to the woman “breastfeeding” and therefore the father feeling as if he was missing out (Barclay & Lupton, 1999, p. 1016). Similar sentiments were expressed by two fathers in my study, Bruce and Larry who felt “left out”, as they also related breastfeeding to be something they couldn’t do and this seemed to be “symbolic” and of “practical significance” to the fathers (Barclay & Lupton, 1999, p. 1016). For Bruce feeling left out ceased when; at eight weeks, his wife had stopped breastfeeding, he could feed the baby the bottle, he had spent “time alone” (Habib & Lancaster, 2005) with the infant and felt
more confident in caring for his baby. Larry felt “left out” until he could feed his breast-feeding baby “solid food” at six months of age. However, in contrast, Hans, Andrew and John did not express ‘feeling left out’ despite their wives breastfeeding their babies.

When Larry and Bruce discussed their feelings of being left out they said or implied they were “missing out” on the care of the baby, and appeared to feel isolation, helplessness and frustration at not being able to be as involved as they would like. However, Dumas’s (1990, p. 206) study made me consider whether the feeling of being “left out” was associated with jealousy as she stated jealousy was a “normal phenomenon” in some first time fathers from four to ten weeks post-partum. I reflected however there was no evidence to support this as participants made no mention of feeling jealous of their wife or baby. Marcel (1962, p. 108) views a father having jealous feelings towards his child as so “degenerative” and “unreasonable” as to illustrate a “pathological” and immature type of fathering, something not evident in my study. Relatively recent studies make no mention of jealousy except when citing older publications (Barclay et al., 1996, p. 12; Morgan et al., 1997, p. 3). Two older studies which discussed jealousy were McNall (1976, p. 169) who found it could be a concern of some expectant fathers, and Osofsky (1982, p. 213) who discussed “rivalry”, “envy” and “hatred” of the child in pathological fatherhood transitions. Dumas (1990, p. 215) particularly notes that “being jealous” of the baby, is related to immaturity of the fathers maturation process, in that they acted like a “rival” to their baby. She suggests ways to avoid jealousy occurring in a first-time father are for the father to “feel included” and
“valued” by his partner (Dumas, 1990, p. 222). Larry and Bruce who felt ‘left out’ did not say specifically that they didn’t feel included or valued by their partners, just that they felt ‘left out’ in the care of the baby.

**Feeling ambivalent.** Two participants, Larry and John expressed ambivalence about returning to work. Others expressed ambivalence relating to fatherhood itself. These father’s expression of ambivalence was similar to St John et al.’s (2005, p. 187) participants who said that even though fatherhood wasn’t easy it was still the best thing that had ever happened to them. They used humour sometimes in order to downplay these feelings of ambivalence, talking seriously one minute and then laughing to make light of what they said the next. This may be because the experience of ambivalence can also be “closely related” to “anxiety” and “fear” of things “happening outside their control or understanding” (Barclay et al., 1996, p. 16).

Indications of anxiety were also present from time to time in participants and related to their struggle to become a father.

**Looking toward a clearer role.** Despite experiencing confusion and bewilderment most participants looked forward to a clearer role in being a father, one in which they would be able to guide and lead. Many of the fathers reflected on what their child would be like in the future, and discussed toddler management, schools, manners, personality, travel and hobbies. Hans was more focused on the present, expressing that he had only “the early years” to cement a relationship with his daughter before she would stop listening to him.
Looking forward to a clearer father role was discussed in different ways in both St John et al.’s (2005) and Barclay and Lupton’s (1999) studies. Fathers in Barclay and Lupton’s (1999, p. 1016) study “postponed their goal of ‘being there’ until the infant was older” as they were disappointed with their interaction with the infant. Gamble and Morse (1993, p. 360) suggested that fathers tend to “postpone” their relationship with their baby because of the demands of breastfeeding nevertheless emphasizing that postponement did not affect father-infant attachment in the long term.

In St John et al.’s (2005, p. 187) study some of the fathers found “barriers” including work and the baby’s development meant they had to defer “developing their relationship with the newborn” until they were older. As in my study, these fathers also “looked forward to the future for their families” in a supervision type of role (St. John et al., 2005, p. 187).

Similar to other studies, my study found that fathers felt excluded when the mother was breastfeeding, despite them wanting their wives to breastfeed (Barclay & Lupton, 1999; Gamble & Morse, 1993; St. John et al., 2005). Gamble and Morse (1993, p. 358) suggest that this feeling of exclusion can be overcome by fathers “postponing” their relationship with their infant. More positively, my participants dealt with feeling excluded by trying to find new ways to build a relationship with their baby and look towards the future.
5.5.5 Moving towards cohesion.

This theme reflects a movement towards the father feeling a sense of belonging and of being embedded and needed in the family. It and its subthemes emerged from participants’ accounts of struggling to see how their role fitted in with mother and baby and as a part of a family. As a result of reconciling the past and changes in attitudes and awareness, participants came to realise how important they were to their partner and baby. This engendered a sense of belonging (Hampson, 1997, p. 212) and of being embedded within their families. This also resulted in feelings of cohesion, with their partner which seemed to occur when the parents’ roles harmonised, each understood their role, each acknowledged the other’s stress and there existed a good working arrangement between them. Marcel (1962, p. 104) similarly concludes that both the mother’s and father’s role “should harmonise without encroaching on each other” since they are totally different “modes of experience”. Overall, my study found that participants moved towards cohesion with the family as a unit after they had started to resolve their struggles and anxieties in becoming a father.

Reconciling the past and achieving harmony within themselves.

This sub-theme captures father’s reflections on the past. My study found participating fathers changed their ideas about the past, and in so doing changed their ideas about their future selves. Similarly, Hampson (1997, p. 214) suggested his participants also resolved “old issues and challenges” and in a sense “grow[grew]up”. This appears reflected in Han’s forgiveness of his father, and his change in attitude toward future pregnancies evident in his
second interview; and John’s understanding of his anxiety relating to his previous experience of loss and how this had impacted on him and his wife.

This sub-theme reflected St John et al.’s (2005, p. 186) theme, “the self as father”. These researchers described this theme as capturing participant’s reflections on “what being a father meant to them, the way they themselves had been fathered, what was important in their lives and what sort of father they wanted to be”. This was very much in accordance with similar reflections of the fathers in my study.

*Heightened awareness leading to a deep change in attitude.*

Marcel (1962, p. 104) states that when a man makes a decision to have children his “… inner attitude toward life… has undergone deep change”. By the second interview my participants ‘signalled’ this deep change in attitude. They spoke of their heightened understanding and awareness of parenting as an entity, how they were managing all the changes required of them and how this had led to their more positive attitude towards parents and life in general. As Bruce explained, he experienced “a change in me (sic) whole attitude” when he became a father. Hampson’s (1997, p. 214) participant fathers expressed that since the birth of their baby they had a greater appreciation of others, especially their parents. John, Hans and Larry all emphasised experiencing this appreciation.

Langeveld (1987, p. 20) highlighted in a similar way to Marcel (1962) that “to be a father is a high development and therefore an enhancement of being a man”. He further explains that “one is both – father and man – at the same
time, but the man is secondary to the father." In my study two fathers, Bruce and Larry expressed a realisation that fatherhood was the greatest of their achievements. Hans also explained that he felt “complete as a man” because, having become a father he had accomplished all his goals. Other fathers, while not specifically expressing this, nevertheless implied it in comments such as John’s that he had developed into a much “better husband” and man.

St John et al (2005, p. 186) as a result of their study perfectly capture the way my participants expressed their thoughts on their change in attitudes;

All wanted to be ‘good’ fathers, with hopes and dreams for their children. Becoming a father led to changes in the way participants thought about themselves, often giving them a sense of personal purpose. To be the best father possible and to meet their new family responsibilities, some fathers identified a need for self-improvement, greater self care, or less risk taking. (St. John et al., 2005, p. 186)

_Formal awareness and appreciation of the mother’s role._

Fathers participating in my study expressed admiration for their partner in pregnancy, during the birth process and over the following six month period. Vernon (2006, p. 211) discussing findings emerging from his study of birth stories related by first time fathers, also highlighted this increasing awareness. He emphasised that “men greatly admire their partners for going through such labour” and suggested fathers’ presence seemed to “enhance the bonding between the man and his partner” (Vernon, 2006, p. 211) and his baby too, a
finding also demonstrated in my study. My participants’ expressed admiration and amazement at what their wife was capable of during birth and post-natally and this led to a heightened appreciation of the mother’s role. They said their heightened awareness of her need for support made them feel more responsible for helping her to adjust to her new role. St John et al.’s (2005, p. 184) study also found that fathers felt a “new appreciation of each other [their partners]”. Thus, for all the fathers in my study this new appreciation lead to what Drobeck (1990, p. 145) describes as a “deeper intimacy and commitment” towards their partner.

**Heightened awareness of time.** The experience and discussion of time itself featured in many conversations with the fathers. Time as a perception is part of the phenomenological concept of Temporality. First-time father’s discussion of time as a concept is seldom mentioned in recent qualitative studies featuring first-time fathers (Barclay & Lupton, 1999; Drobeck, 1990; Gamble & Morse, 1993; Garrett, 2000; Hampson, 1997; Lemay et al., 2010) nor is this mentioned in studies combining first time and subsequent fathers (Halle et al., 2008; Sanders et al., 2010; St. John et al., 2005). Yet, similar to my study, other hermeneutic phenomenological studies, where the focus was on interpretation and meaning, have demonstrated this focus and awareness of time in first-time fathers’ transition process (Kieffer-Andrews, 1992; Sianga, 1998).

Nevertheless, similarly to my participants, a number of studies have found the struggle to balance work and home time to have been a problem. Sianga’s
(1998) study of first-time fathers in Botswana and Keiffer-Andrew’s (1992, pp. 104-105) study of American first-time fathers, found “time conflicts”, between work and the baby. Sianga’s (1998, p. 90) fathers (like Larry, Bruce and John) “lamenting [lamented] the shortage of time” with their baby. Keiffer-Andrew’s (1992, p. 105) participants experienced a conflict between wanting to be with their wife and baby but also wanting “professional satisfaction”. This reflects Andrew’s time conflicts between his professional work pressures and his concern to be home on time because he felt a responsibility to help his wife with the baby.

My study also revealed different associations with time to other studies. For example, Larry and John discussed time in relation to their previous traumatic birth experiences. Larry focused on time in relation to the birth of his baby. John realised how close he and his wife came to losing their baby and this triggered a special awareness of time. In John’s experience of the NICU he became aware of how little time fathers spend with their infants compared to the mothers. Time was also discussed in relation to how quickly participant’s babies were growing up. They also found they were losing track of time when they played with their babies, so that ten minutes allocated stretched to an hour without them knowing (John, Larry, and Hans).

5.5.6 Arriving at harmony – reflection on the journey.

The theme, ‘Arriving at Harmony’ reflects the sense of relief that the fathers expressed when discussing how they had come to the realisation that they
didn’t have to keep everyone calm and manage the change anymore. This ‘space’ provided a calm where they could reflect on their own individual transition journey, consider how far they had come and then because of a “sense of belonging with other men” (Hampson, 1997, p. 216) feel able to give advice to others. In amongst these reflections, there is “pride and admiration” for their baby’s achievements (Hampson, 1997, p. 213) and a heightened appreciation of their partner.

Despite St John et al. (2005, p. 187) only interviewing first time and subsequent fathers for three months following their baby’s birth he found “some felt that having a child had led to a sense of fulfilment and a feeling of completion of themselves and their couple relationship with their partner”. A similar sense was evident in fathers in my study and this corresponded to some others’ findings on this topic (Bradford, 1990, p. 139; Drobeck, 1990, pp. 66-67; Hampson, 1997, p. 210).

This theme also captures the fathers’ expressions of feeling a sense of belonging by this time and that the three individuals had become one family. This, in turn, appeared to give rise to a sense of warmth and cohesion leading to harmony. This reflects the satisfaction and sense of achievement that this group of committed fathers experienced following their journey of transition of first-time fatherhood.

In summary this discussion has identified similarities and differences between my and other researchers’ findings relating to fathers’ experiences of
becoming a first time father. This is particularly so in the context of first time fathers in the first six months following the birth of their baby. It is suggested as the discussion reveals that the application of phenomenology as the philosophical and methodological framework for my study has enabled a more comprehensive and deeper understanding of the meaning of becoming a first time father over these early months as my participants identified this. Their experiences of this phenomenon are captured in the model (Fig.1) which emerged from my study.

5.6 Implications of and Recommendations from the Study for Fathers, Health Professionals, Nursing Practice and Research

5.6.1 Implications: for heightening the profile of fathers’ in relation to their role in the care of the infant and child.

When researching first-time fathers I became aware of the need to highlight the importance of the father’s role in the care of their children and therefore the importance of father inclusiveness by CFHN and other health professionals in service delivery and policy. The importance of the father’s role in infant development and later outcomes with their children is reflected in the literature (Allen & Daly, 2007; Fletcher, 2009; Fletcher et al., 2001). Nevertheless, the word father seldom appears in the spoken or written language of the local health service’s professional guidelines and policy documents. Despite frequent references to mothers and families, references to fathers are minimal and therefore their role is not highlighted. My study’s
findings highlight the importance of fathers in the early months of a baby’s life and hopefully will lead to a much greater emphasis on father inclusiveness in relevant documents and policies and health professionals’ practice.

It has also become apparent as a result of my study that first time fathers themselves consider it important to take time off work to care for and bond with their new baby. Although, In Australia, from January 2011, a change to legislation has directed that mothers will have access to paid leave at the minimum wage for 18 weeks, which they can transfer to the father (Australian Govt Family Assistance Office, 2010-08-02), there is still no paid paternity leave for fathers specifically. My study adds to existing research (Allen & Daly, 2007; Families First, 2003; Fletcher, 2009; Fletcher et al., 2001; Hawkins & Dollahite, 1997; Lamb & Tamis-Lemonda, 2004; Russell et al., 1999; Vernon, 2006) that demonstrates the importance of fathers spending time with their newborn baby and may encourage governments to enable this in their funding allocations.

5.6.2 Implications for essential education of fathers.

Given my study demonstrated differences in preferred methods and tools of learning and knowledge acquisition between fathers and mothers, it is important that this is considered and accommodated in ante and post-natal education. For example some fathers (Hans, Bruce and Larry) said they preferred to seek knowledge as and when they needed it; whereas their wives or partners preferred to read and learn prior to the knowledge being required.
Fathers preferences in learning tools also included the internet, television and the web rather than books which some said their wives or partners preferred. Therefore consideration should be given to making available relevant information via several mediums.

Some fathers also articulated changes they would like in the topics offered in antenatal education and these included more information on how to support and look after the mother in pregnancy and in labour prior to the baby’s birth. As a result, ante-natal education for fathers should incorporate a focus on ways of caring for mothers particularly during labour in pre-natal education sessions.

In addition, this study found that first time fathers in the first six months following the birth of their baby underwent a transition process to attain harmony with their infant and family. The model and the description of the process that emerged from this study demonstrated the journey of first time fatherhood was one of transition that took three to six months to accomplish. Therefore CFHNs should reassure fathers that this is likely to be their experience and this should also be highlighted to both mothers and fathers in antenatal education.

Education for fathers must also take into account my findings that fathers have existing strengths on which to build. My study has gone some way in identifying these strengths and may contribute to and encourage health professionals to use a strength based approach to educating and supporting
fathers to their new role. This education both ante and post – natally should be continued and is consistent with and builds on the Family Partnerships Model (FPM) training (Davis et al., 2002), which is mandatory training in NSW for all health professionals, caring for infants and young children.

Discussion with fathers also revealed the need for them to have time alone with the infant in order to gain confidence and competence with care-giving. Ante-natal education programs should emphasize this information because fathers in my study reflected that they needed to know it before the baby was born. This could then be reinforced in post-natal programs and on home visits in the post-natal period. It is therefore crucial that mothers, midwives and CFHNS encourage mothers to enable fathers to have time alone with their baby.

It was also evident that my participants’ experience of first time fatherhood raised issues in their own parenting. The fathers particularly wanted to discuss their own parenting, especially if they had a poor relationship with their father. Educational processes in the ante-natal and post-natal period need to encourage and support the father to reflect on his feelings about fatherhood, including those of being fathered himself, that currently my study demonstrated was rarely enabled. This process may assist fathers to resolve less positive experiences of this and their relationship with their own father.
5.6.3 Implications for education of health professionals.

This study has prompted me to understand the importance of ensuring education for this group of professionals includes information about theory and models relating to fatherhood so as to ensure understanding of the process of fatherhood itself. Theories and models that seemed most relevant to my understanding of the fathers experience of first time fatherhood are; the theory of generativity (Berger, 1988; Erikson, 1963), and in particular father generativity (Brotherson, 2005; Dollahite & Hawkins, 1998; Fleming, 2007; Hawkins & Dollahite, 1997; King, 2000, 2008; King & Parquette, 2008), attachment theory (Bowlby, 1997; Karen, 1994), the Family Partnership Model (Davis et al., 2002; Keatinge et al., 2007) and lastly transitional theory (Chinn, 1986; Draper, 2003). Discussion about the model and description of the transition process of first time fathers as revealed in my study would also be helpful to future, and/or existing fathers.²

A range of key qualities and skills important when working in partnership with families have been highlighted in this study. Many of these are addressed in Davis et al.’s (2002) FPM which already underpins the CFHN Service in a number of countries worldwide including the whole of Australia and New Zealand (NSW Health, 2008a). Continued education about this for CFHNs as well as health professionals working with young children may further enable

² See discussion Chapter 5.3, Pages 192-197
development of the skills and knowledge necessary to promote a partnership approach to working with families in particular with both mothers and fathers (parents) of newborns and older children.

5.6.4 Implications for clinical practice.

My study illustrated that “services for parents of infants should not assume supporting mothers is sufficient to address the total of infant and family needs” (Fletcher, 2009, p. 215). This study therefore highlights the importance of including fathers in the delivery of midwifery services and those relating to child and family health. Most importantly health professionals working in these services must be encouraged through education and access to resources to adopt this approach.

One way of including fathers and improving support for them is to extend the introduction of universal psychosocial assessment for mothers which has already been introduced in the antenatal and postnatal period, to include fathers as well. The complexity for fathers in their journey of transition from man to father captured in my study meant that there were many times when it seemed beneficial for them to have psychosocial support; to have someone acknowledge their past and how it affected them. Fletcher (2009, p. 215) suggests that “evidence based psychosocial questions” acceptable for fathers has been developed both in his study and in South Australia and these and like tools should be used to support fathers.
My study also demonstrated that the inclusion of certain questions appear to assist the first-time father to reflect on his journey of transition and change. These reflections appeared to encourage fathers to identify, consider and better understand their past and how that affects their connection with their baby as well as the meaning they place on fatherhood. From my study’s findings the questions that seem particularly important to father’s ability to reflect in this way are; “Would you like to be the same or different to your own father or mother?” and “When did you first feel like a father?” These seem to enable the father to focus and discuss important issues that affect them in the transition to fatherhood, something that is important for health professionals to take account of in their practice.

5.6.5 Implications for research.

This study identifies several opportunities for research:

1. First, in relation to CFHN services in NSW, assessment of whether or not and to what extent inclusion of fathers is occurring so as to assess the current level of father inclusiveness and prompt ways of research into achieving this if found necessary, should be undertaken. In addition, qualitative research on staff attitudes to including fathers in the practice of the CFHN over the first 12 months of a newborn’s life would also provide useful ‘base line’ information prior to engaging staff
in identifying their ideas about how to make their services more inclusive. This might be the beginning of a program of research to develop greater inclusiveness.

2. An interesting feature of the study was that some fathers felt “left out”. Further exploration and understanding of the factors leading to some first-time fathers feeling this way is needed. Studies identifying the ramifications of this and ways of addressing it might also ensure that this feeling was minimised.

3. An investigation of whether cultural factors impact first time experiences of fatherhood is relatively urgent given the increasing multicultural population in Australia. Two fathers in my study had differing cultural backgrounds which appeared to contribute to greater isolation of themselves and their family. A larger qualitative study including indigenous fathers and/or fathers with cultural and linguistic differences (CALD) might assist in determining whether their experience and needs are different to caucasian Australians and what support processes and services might assist them.

5.7 Ensuring Rigour in this Study

Munhall’s (1994, p. 190) phenomenological criteria has been chosen to affirm the rigour of this study. This is entirely consistent with the phenomenological framework and method utilised for the study. Munhall’s (1994, p. 190) criteria
through which to ascertain rigour includes; the phenomenological nod, resonancy, recognizability and responsiveness, reasonableness, representativeness, raised consciousness and relevance, readability, revelations, richness and responsibility. Each of these is now considered in the light of my study.

The 'phenomenological nod' alludes to participants or others 'nodding' in agreement to or recognition of the findings (Munhall, 1994, p. 189). When invited to review the study's themes, three of the five participants in this study stated that the themes and sub-themes resonated with them and reflected their experience (see Appendix 5). The other two fathers, although indicating they would respond to my request to review the study's themes did not do this.

Resonancy, Recognizability and Responsiveness are terms which indicate that on hearing this research, readers or participants recognise familiarity with their thoughts and feelings on the topic from their own or other’s experiences and this allows them to confirm these thoughts and feelings and or add to their perceptions on the subject (Munhall, 1994, p. 190). Preliminary findings from this research have been presented at a local writers group, child and family health nurses group and at two national conferences regarding men and relationships. Feedback from colleagues and delegates has indicated that some recognised similarities and with their own thoughts on and experiences of first-time fathering and thus the findings had resonated with them and caused them to realise their shared experience with others. Many
CFHNs told me they had or were thinking about changing their practice to include fathers because of their changed perceptions about fathers.

Reasonableness is a criterion that seeks to assess whether or not the study was consistent with the framework and method chosen. An audit trail of one of the themes (see appendix 4) provides an illustration of how this was ensured in this study. It indicates the congruence between the framework and the approach to its application and the methods used in this study and how and why decisions were made in regards to the identification of father’s expressions of the meanings and themes.

Representativeness concerns the study “adequately represent[ing] the various dimensions of lived experience” of the phenomenon (Munhall, 1994, p. 190). This research revealed that there is no one way to be a first time father. While the participants identified several commonalities in the journey of transition to fatherhood, there were also variation between the fathers including their context and the meaning they placed on first time fatherhood. These similarities and differences have been carefully outlined and discussed in the findings chapter and this discussion chapter. Phenomenology values the differences and similarities between individual participants’ experiences so these are, in themselves a form of validity of the study (Munhall, 1994, p. 189) and therefore address the need for representativeness in the study.

The richness of this study is demonstrated through the presentation and discussion of links between the phenomenological existentials and the themes
and sub themes that are reflected in these existentials. The depth of understanding and interpretation was enabled by the study’s methodological framework and method to its data generation, which facilitated a back and forth, parts and whole process when reflecting on data. A model (Figure 1) and description was also developed which explains this process.

Munhall (Munhall, 1994, p. 191) suggests the term revelations means that the study should reveal the expected as well as the unexpected. That is, the study should not be a “self-fulfilling prophesy”. In revealing new insights the researcher and reader start to experience a raised consciousness about the topic and the participant’s experiences. In keeping with this, I as a woman and a mother have been moved to question my beliefs and ideas about fathers following new insights provided within the data. I came to realise the experience of being a father was different to my own experience and those of mothers of motherhood. I was not only sometimes surprised by the father’s stories but also how these challenged my perceptions of fathers. There was an unexpectedness that two fathers started their stories in pregnancy, and the meaning that all the fathers’ stories uncovered. It was uplifting to hear that even though the fathers struggled through their journey of transition from man to father, they were also optimistic about the outcome. Furthermore, despite these fathers’ similarities in age and the stability of their marriages or partnerships, I learned they were very different in terms of context, culture and personality.
In this study, I have attempted to make the writing “concrete, readable and interesting (rather than) abstract”, in order for the reader to feel what it is like to be a first time father (Munhall, 1994, p. 192). For example, inviting the participants to relate their experience of first time fatherhood allowed them to tell their individual stories that could then be presented in a readable and interesting way.

In order for the study to be relevant to ourselves and society, Munhall (Munhall, 1994, p. 192) states that phenomenological studies “should bring us close to humanness, increase our consciousness, enable understanding, give us possible interpretations, offer us possible meaning, and guide us in our lives personally and professionally”. This study was genuinely interesting and exciting to me and has enabled increased understanding of my own father, husband and sons. Presentation of sections off this study has also impacted on CFHN colleagues and increased their understanding of the importance of fathers and willingness to include fathers in their practice.

Responsibility relates to the researcher’s responsibility to be aware and considerate of ethical considerations arising from the study. I considered consent was an “ongoing transactional process” (Munhall, 1988 cited in Streubert & Carpenter, 1995, p. 44) and consistently reaffirmed with participants their willingness to participate in the study. Participants’ identity was protected through the use of pseudonyms and their words were faithfully represented. Two interviews with each participant ensured expansion of previous information and clarification of experiences. Participant’s expressed
appreciation of being listened to and having an opportunity to tell their experience. This was in part due to letting the participants “control the pace of the interview” (Streubert & Carpenter, 1995, p.45).

5.8 Limitations of the Study

There are several limitations of this study. One of these is the small number (five) of fathers that agreed to be interviewed. The positive outcome of this however is that they were keen to articulate their experience and to remain in the study. Consistent with the aims of phenomenology, this smaller number of participants also enabled more in depth investigation of the topic. Further, it allowed comprehensive feedback to participants in relation to their transcripts and time for them to review these. However, this small number does result in an inability to generalize the study’s findings.

A second limitation was that two first interviews with participating fathers (those of John and Andrew) were inadvertently wiped. However, I immediately wrote extensive field notes regarding each interview, contacted my supervisor for advice and informed the two fathers about my mistake and apologised to them. Ultimately both agreed to another ‘first’ interview, which was not needed for John as I could re-construct the content of his first interview from written notes and verify these with him. Andrew’s second ‘first’ interview proved beneficial because he was more at ease and spoke without embarrassment. Nevertheless, it should be acknowledged that having to make up for these two
‘lost’ interviews meant both fathers were recalling their experience following a longer period of time since the birth of their baby.

Another limitation was the short time frame available to complete this research because of it being a component of my Masters degree. One further limitation is that this study was conducted by a female researcher and this may have influenced the way in which fathers related their experience and what content they wished to share.

5.9 Conclusion

This phenomenological study, contributes to the limited amount of qualitative knowledge currently available concerning first-time fathers’ experience of becoming a father in the Australian context. It provides a more comprehensive understanding of the “lived experience” of becoming a father over the first six months following the birth of his baby. The use of phenomenology assisted in increasing the depth of understanding of the “nature and meaning” of this “everyday experience” of being a first-time father (Munhall, 1994, p. 278). It is anticipated that the findings of my study might impact positively on professional’s understanding, empathy and compassion when supporting first time fathers through their transition into their new role. It is also anticipated that the study’s findings will contribute to a greater realisation amongst health professionals that first time fathers need to receive as much attention as mothers in terms of support and professional knowledge.
The study demonstrated that the CFHN or any other professional’s ability to help the father reflect on and reconcile their past, particularly their own parenting past was crucial. It also demonstrated that support is essential to assisting parents to communicate with each other; something that appeared to assist some fathers to move forward through the transition. This seemed to result in the couple working as a team and improve family life generally. The study revealed listening to be a key skill for health professionals, particularly the CFHN and to be an essential factor in supporting fathers to reflect and build on their strengths during the first six months following the birth.

Given the level of research knowledge available about the importance of the father’s inclusion in family services it is timely that CFHN education, practice and role is expanded to allow the inclusion of fathers (Australia.Department of Health and Ageing, 2008; Brotherson, 2005; Fletcher, 2002; Fletcher et al., 2001; Fletcher et al., 2006; Hynan, 2005; Lane, 2007; Lundqvist, Westas, & Hellstrom, 2007; Nystrom & Ohrling, 2004; Pollock et al., 2005).

In summary, the CFHN service is well placed to support fathers with some extra education required to increase understanding of the father’s transition role from man to father in the first six months. This small study demonstrated that first-time fathers appear to need just as much psychological and social support as first-time mothers in the first six months as they have their own psychological transition to deal with which is different to the mothers. It is also apparent from my findings that there is a need to individualise interactions and
care in relation to first-time fathers in the first six months, and it clearly emphasizes that a “one size fits all” approach is unlikely to be successful.

It is anticipated that further change will take place to enable this inclusion and change in practice. A new discussion paper by NSW Health about Child and Family Health services for the future promotes the inclusion of fathers in the C\&FHN service in general and this represents a starting point (NSW Health, 2008a). With the NSW Men’s Health policy (NSW Health, 2009) and the recent National Male Health policy (Australia. Department of Health and Ageing, 2010) which discusses the specific inclusion of expectant and new fathers, more change is on the horizon. Interestingly, the Australian election held recently on the 21st August, 2010 has highlighted parental and paternal leave as an important issue which if this translates to more fathers spending time with their baby, their family and therefore greater access to child and family health services at this crucial time in their lives, will be an important step forward.

Finally, Langeveld (1987, p. 20) issues a challenge to health professionals in relation to the inclusion of fathers in their care. He states that “we think only fleetingly of the father” and that “Men themselves think far too little about themselves as fathers”. Langeveld (1987, p. 21) implores society “to help men to become better fathers”, and says that “since we help to make the times, we must consider the question, ‘what are we prepared to do’?” This statement is as applicable to Child and Family Health Services today, as in 1987.


Appendices

Appendix 1 - Participant Information Sheet
CFHNurses Information Sheet

Prof Diana Keatinge
School of Nursing and Midwifery
University of Newcastle
CALLAGHAN NSW 2308
Ph 02 4921 6010
Fax: 02 49216301
Email: Diana.Keatinge@newcast le.edu.au

Version 2, 20.05.07

Information Statement for the Research Project:
INITIAL EXPERIENCES OF FIRST-TIME FATHERS - THE FIRST FOUR MONTHS

Thank you, for taking the time to read this information statement.

You are invited to take part in the research project identified above which is being conducted by Sherrian Price as part of her master’s in Nursing Research Degree, under the supervision of Professor Diana Keatinge from the School of Nursing and Midwifery, Faculty of Health at the University of Newcastle.

What is the purpose of this study?
The purpose of the study is to identify the experience of first-time fathers in the first four months of their baby’s life.

Who can participate?
First-time fathers who have a baby who is 4 months of age and:
- who is over 18 years age;
- can read and speak English;
• whose partner and baby are in good health, and the baby is not premature.

These criteria are intended to ensure ease of communication, and avoid additional demands on fathers whose partner or baby is unwell.

What choices do I have?
Participation in this research is entirely your choice. Whether or not you decide to participate is your decision and it will not disadvantage you in any way or affect your family’s health or access to health services. During the course of the study if you wish to withdraw you may do so at any time without giving a reason. If you decide to withdraw from the study after you have provided data, your data will not be included in the study.

What would I do if I agree to participate?
If you would like further information about the study please telephone Sherrian Price on mobile number: 0408 432 392. If you would like to participate in the study please sign and complete the attached consent form and return it in the envelope provided within the next two weeks. Sherrian will then contact you to make a date and time for an interview in a place convenient to you.

What would I be asked to do?
You will be asked to participate in two interviews and a follow-up session:
• At the first interview, you will be asked to provide a few background details including your age, which country you were born in, and your work hours. With your permission, the interview will be taped and last about one hour. At your request the tape recorder can be switched off at any time during the interview and any part of the taped interview edited or deleted.

• A second interview will be arranged approximately three to four weeks after the first so as to give you the opportunity to further discuss and add to (if you wish) the information you provided at the first interview. This second interview may give you more time to reflect on the answers you provided in the first interview and then develop or change your views if you wish, and also to feel more comfortable the second time of talking with the researcher. This interview will also, with your consent, be audio-taped. The tape can be stopped at any time and sections of the tape can be erased or edited at your request.

• Within a month after the second interview you will receive a typed copy of the interview transcript so that you can read, correct
and/or edit/delete any part of the interview and then return it in the stamped addressed envelope provided. If, after two weeks a revised transcript has not been received from you Sherrian will telephone you to inquire whether you would like to make any changes to the transcript over the phone.

- When some preliminary themes have been identified from the interviews conducted with you and other fathers, these will be sent to you for your consideration as to how closely these resemble your experiences of being a first-time father. Sherrian will telephone you after two weeks to seek any comment you might have about this.

**What are the risks and benefits to me?**

You may find it beneficial to have the opportunity to express your experiences of first time fatherhood and have these listened to. It’s possible however, that this process may raise emotions or concerns for you. If this should occur you will be offered the opportunity to obtain support to assist you with these.

It is important to inform you that if there is evidence of child abuse or neglect or domestic violence, the researchers are mandated by law to inform the Department of Community Services. You would be informed prior to any referral being made.

**How will my privacy be protected?**

At the first interview you will be asked to choose a false name, which will be used on all interview transcripts/written records arising from the study. Consent forms will be stored separately from all transcripts/written records. You will be asked not to use proper names during the recording of the interview, but if this occurs these will be erased and a false name inserted during the interview transcription. During the study data will be stored in a locked cabinet at the student’s work office at Hunter New England Health. Following completion of the study all data will be stored securely for 5 yrs at the University of Newcastle (Newcastle University) and then destroyed in compliance with the National Health and Medical Research guidelines.

**How will the information collected be used?**

The data will be reported in appropriate professional journals, presented at conferences and in a master’s thesis. Reports of this
study will not identify individuals involved in it. At the conclusion of the first interview you will be offered the opportunity to identify whether or not you would like to receive a summary of the study's findings at its conclusion.

Thank you for considering this invitation.

Yours sincerely,

Dr Diana Keatinge
Professor of Paediatrics, Youth and Family Nursing
School of Nursing and Midwifery
University of Newcastle
Callaghan. NSW. 2308
Ph 02 4921 6010

Ms Denise Kinross
Clinical Nurse Consultant
Newborn Services
John Hunter Hospital, Locked Bag 1, Hunter Region Mail Centre 2310
Ph: 49213597

Sherrian Price
Masters Student
Child and Family Health Nurse
Maitland Family Care Cottage,
4 Bonar St, Maitland.2320
Ph: 49392530 Mobile: 0408 432 392

Complaints about this research

This project has been approved by the Hunter New England Human Research Ethics Committee of Hunter New England Health, Reference 07/05/16/5.07. Should you have concerns about your rights as a participant in this research, or you have a complaint about the manner in which the research is conducted, it may be given to the researcher, or, if an independent person is preferred, to Dr Nicole Gerrand, Professional Officer (Research Ethics), Hunter New England Human Research Ethics Committee, Hunter New England Health, Locked Bag 1, New Lambton NSW 2305, telephone (02) 49214950, email Nicole.Gerrand@hnehealth.nsw.gov.au
Appendix 2 – Father’s Consent Form

Dr Diana Keatinge  
School of  
Nursing and Midwifery  
The University of Newcastle

Version 2 – Date: 20.05.07.

Faculty of Health  
CALLAGHAN NSW 2308  
Phone: 49216010 Fax: 49216301  
Email: Diana.Keatinge@newcastle.edu.au

Father’s Consent Form:

Name of Research:  
INITIAL EXPERIENCES OF FIRST-TIME FATHERS – THE FIRST FOUR MONTHS.

I agree to participate in the above research project and give my consent freely.

I understand that:

1. The research project will be carried out as described in the Information Letter (see attached), a copy of which I have retained.
2. If I do not agree to participate or decide to withdraw, my decision will be accepted (and my non-participation will not affect my care or the care of my baby).
3. My consent to participate is voluntary and I may withdraw from the project at any time. I do not have to give a reason for the withdrawal of consent.
4. I have read and understood the Information Letter and had all my questions answered to my satisfaction.

My personal information will remain confidential to the researchers.

Name:…………………………………………
Signature:…………………………………………

Date:………………………………………
Phone:………………………………………

I have informed the above person about this research and am sure that they understand both the content of the information statement and the additional information I have provided.

Researcher: Sherrian Price  
Signature:………………………………………
<table>
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<th>Position</th>
<th>Organization</th>
<th>Address</th>
<th>Phone</th>
<th>Mobile</th>
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<tr>
<td>Dr Diana Keatinge</td>
<td>Professor of Paediatrics,</td>
<td>School of Nursing and</td>
<td>Callaghan, NSW. 2308</td>
<td>Ph 02 4921 6010</td>
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<td>Midwifery</td>
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<td>University of Newcastle</td>
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<tr>
<td>Ms Denise Kinross</td>
<td>Clinical Nurse Consultant</td>
<td>Newborn Services</td>
<td>John Hunter Hospital, Locked Bag 1, Hunter</td>
<td>Ph: 49213597</td>
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<td></td>
<td></td>
<td>Region Mail Centre 2310</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Sherrian Price</td>
<td>Masters Student</td>
<td>Child and Family Health Nurse</td>
<td>Maitland Family Care Cottage,</td>
<td>Ph: 49392530</td>
<td>Mobile: 0408 432 392</td>
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<td></td>
<td></td>
<td></td>
<td>4 Bonar St, Maitland.2320</td>
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</tbody>
</table>
Appendix 3 - Interview Schedule

Participants will be invited to reflect and then relate their experiences and thoughts about becoming a father. This will be prompted by an opening question:

1. “Can you tell me about your experience of becoming a father and your thoughts about this?”
   
   It is important for the researcher to listen to the story without interruption as if they have never heard the topic before.

   Because, talking about an experience enables the participant to stay close to their experience as it is lived, the participant will next be asked to:

2. “Think of a specific instance or situation when you first felt like a father.”
   
   If the father cannot think of an experience one or more of the following prompt ‘questions’ about specific experiences will be asked so as to help him reflect:

   - “Can you remember what it felt like when you first saw/ held your baby?”
   - “Can you remember when you first felt like a father/ or when you did not feel like a father?”
   - “What were your thoughts on what sort of father you wanted to be?”

The only further prompts that may be used are those that will help the participant to explore the situation more fully. For example:

   “Can you tell me more?”
   “Can you give me an example?”
   “What happened next?”
   “What did you feel?”
   “What did you think?”
   “Can you describe it in more detail for me?”
   “What was it like?”
Appendix 4

An example of how Theme Four emerged in data.

Theme Four: Struggling to Find a Balance

7.2.08
Starting to “wonder” about the similarities and differences between the fathers as well as the commonalities that exist between them. Starting to look up words I don’t understand that the father’s use – e.g. feeling “complete”. Reading Lauterbach and van Manen, “Writing in the dark” and discovering wonder and processes and quotes from van Manen that help me understand this process.

25.2.08
Theme 4 commenced as:
Figuring things out for themselves –
4a - the relating of similar experiences to understand this experience of first time fathering. Not realising “the impact of things until they happen” (Father 2).
4b – Learning by experiencing – the fathers like the experiential learning and problem solving and the anticipation of something new – “I like to find things out for myself” (Father 5) and “I wanted to be able to feel it” (Father 2).

5th and 6th March, 2008
Attended Generative Fathering Conference – this really resonated with me about what the fathers in my study were trying to tell me with their philosophising – that they wanted to ensure the future of their child and saw this as part of their role to “make the world a better place”. Looked up Generativity and articles around this which helped me make sense of what the fathers were trying to tell me in talking about their role as father and about looking towards the future.

28th March, 2008
Work experience recorded about a father at work, who was different to the fathers in my study – he wanted to read books and wanted to be prepared, but was a much older man 40yrs of age and he thought older men read books but younger men used the internet – an interesting difference.

17th April, 2008– Presentation at International Community and family strengths conference – themes of “feeling left out” emerging and having the baby being “the start of manhood” and “wanting to be different from your own father”.

8.5.08 – Other themes developed around the original themes of learning by experiencing and figuring things out for themselves and confusion with the role.
When looking at the existentials of the experiences. e.g. Feeling left out (relationality); Creating a father role and role confusion (temporality, relationality); how to be different from your own father (temporality); Negotiating the work-life balance (relationality, spaciality, temporality) and Looking towards the future ( relationality – philosophising, generativity).
14th May, 2008 – Starting to listen to fatherhood songs to help me with data analysis. Themes emerging here were about “creating a father role”, sense of humour, angry at own father, looking towards the future, generativity, unconditional love and “manhood”, how having a baby makes one feel like a man – the whole world changes.

1.6.08 Creating a balance – creating the father role and the work life balance? main theme
Feeling left out becomes a theme under this main theme.

20.6.08 – Themes changed following reading phenomenological literature as well as listening to the Fatherhood CD.
- Deep change in attitude towards life and meaning of life
- Becoming part of a family
- Natural Attitude
- Keeping things calm – “My father’s calmness” song
- Keeping things in perspective
- Previous experience of own fathering
- Learning by experiencing
- “From you to me to mine” – the temporality of history of fatherhood in the generations of his family

9.7.08 Theme 3 ‘Keeping the change under control’ was written about in detail bringing all the examples of the fathers as a trial of this theme.

18.7.08 After meeting with supervisor and discussion – themes were re-arranged;
- Theme 3 – Reconciling the past and gaining understanding from it (could be its own theme or a sub theme of making the change more manageable)
- Theme 4 Making the Change more manageable
- Theme 4 A – ‘Silence between the couples’ seems a sub-theme of making the change more manageable.
- Theme 5 Creating a father role
- Theme 5A – feeling left out
- Theme 6 Learning by Experiencing

Encouraged to map out themes and link fathers experiences more.

11.8.08 – Theme 4 Keeping the change under control was a major theme
- 4.1 Managing and Negotiating the work-life balance
- 4.2 Creating a balance – life becomes more manageable
- 4.3 Reconciling the past and gaining understanding from it
- 4.4 Silence between the couples

Theme 5 – Creating a Father Role
- Role confusion
- Feeling left out
- Looking toward the future
- Ambivalence of fatherhood
- Becoming part of a family
17.10.08 Theme 4 ‘Keeping the changed under control’ was discussed with supervisors and led to thinking that the main theme was more about ‘Struggling to Find a Balance’
Sub themes were 4.1 Managing and negotiating the work/life balance
4.2 Silence between the couples became “things left unsaid” to be more phenomenological in the manner of expressing this.
4.3 Reconciling the past and achieving harmony within themselves
Theme 5 became more a sub-theme of theme 4 therefore became
4.4 Feeling confused about the role to play as father
4.5 Feeling left out
4.6 Feeling Ambivalent instead of “Ambivalence of Fatherhood” to be more about “being”
4.7 Looking toward the future to a clearer role.

26.11.08 – Theme 4 – became “Struggling towards being a father”
4.1 Managing and negotiating the work-life balance
4.2 Feeling isolated – things left unsaid
4.3 Feeling confused about being a father
4.4 Feeling left out
4.5 Feeling ambivalent
4.6 Looking toward the future to a clearer role.

Feb 09 – Theme 4 was changed back to the original “Struggling to find a balance” which seemed more cohesive to the whole picture of the fathers. The sub-themes stayed the same as above except for the sub theme “confusion about the role of being a father” which became better wording to describe the sub-theme than “feeling confused about being a father”.
Appendix 5

Father’s feedback regarding themes developed

Three out of five fathers responded to the themes and sub-themes and meanings of each that were sent out to them following data analysis. The participants’ words in e-mail will be used and presented verbatim;

HANS

I was really interested to go over the summary, and reading the comments of some of the other fathers. It definitely took me back again to those first 6 months and seeing how my feelings/experience/thoughts change over that time.

I have read it a few times to get a good impression and found that the findings were a good representation of my own experience, therefore I would not add anything further to this. Some of the quotes from older poems and quotes were very nice additions to see that fathers in the past were going through the same journey.

The journey has been the best thing in my life and I think it’s making me a better person. Especially now that she is copying everything, I am a lot more conscious of my bad habits. The only thing I often struggle with is time for myself and my wife. From 6am to 7.30pm we are on the go (mostly) with (baby’s name), work and domestic activities. It’s hard to do anything else on the side for example some exercise or hobbies. Having said that, I would not change it for the world, because
having her in our lives is something incredible. I am happy to help further where needed. (Hans, 29th Jan, 2009).

JOHN

Thanks for e-mailing the overview of your research document. A most interesting read, thought it would be interesting to see myself …..and there I was John!

I thought that it was interesting to see that you had identified a broad range of themes which I guess apply to us all in different ways and at different levels. I guess that makes it hard as there won’t be a one size fits all solution for involving fathers in pregnancy and childbirth, but there are lots of common issues to consider which you have identified. I guess that they could be used as discussion or reflective points. I guess you could consider, ‘Am I more like John or more like Hans?’

Better go,

With many thanks,

John (9th January 2009)

BRUCE

I have read over all the information and all looks good. All is well with us…. I will have to keep this short as I am extremely busy but I hope all goes well with your research.

Take care,

Bruce (End January, 2009)
Appendix 6a

Family & Community Strengths

The First National Indigenous and Fifth Australian Family & Community Strengths Conference

Tuesday, 11 March 2008

Ms Sherrian Price
Child and Family Health Nurse, Clinical Nurse Specialist
Maitland/ Dungog Child and Family Health Nursing Service
Maitland Hospital
New England Highway
RUTHERFORD NSW  2320

Dear Ms Price,

Please find below full details of your accepted abstract presentation(s), including session title, date and time for the 1st National Indigenous and / or 5th Australian Family and Community Strengths Conferences to be held from 14 - 16 and 16 - 18 April 2008 at the University of Newcastle, NSW.

If there are any amendments to your abstract or title please email them through to family@pco.com.au as soon as possible.

PIN: 631

Presentation Details

Abstract Title: When a baby is born – a father is born

Abstract Text:
Despite an increase in world-wide research on fathers and fatherhood in the last twenty years, many authors still conclude that father’s feelings about fatherhood and their needs in relation to this have either not been asked or misunderstood (Barclay & Lupton, 1999; Draper, 2002; Fletcher, Silberberg & Baxter, 2001). However, it is a possibility that qualitative research, particularly phenomenology, may shed more light on an accurate understanding of father’s unique and shared experiences. What is clear is that unless there is greater knowledge about father’s feelings, post-natal services for men (such as Child and Family Health Services) may also be at risk of not meeting their needs.

“The role of the father has been acknowledged as important and challenging yet is often unsupported, with available services for parents not always inclusive of fathers” (Families First, 2003).

A phenomenological study with first-time fathers focusing on the first six months uncovered some initial preliminary themes and one question that strongly emerges is “When does fatherhood start?” The father’s words are presented about this and also about their experience of first-time fatherhood and how this relates to current literature and ideas about how to help and engage with fathers in the ante-natal and post-natal period.

Presentation Type: Oral
Session: Father Inclusive Practise (2)
Date: Thursday, 17 April 2008
Session Start Time: 2:00 PM
Location: Location TBC
Family & Community Strengths
The First National Indigenous and Fifth Australian Family & Community Strengths Conference

Order in Session: 3
Your Start Time: 2:35pm
Duration: 15 mins

By now you should have registered to attend - at least for the day of your presentation. If you have not yet registered please do so by Friday 14 March as you must register in order to confirm your place in the program.

The latest version of the conference program is available on the website www.pco.com.au/family. Please take a moment to confirm your details in the program. Any amendments should be emailed through to family@pco.com.au no later than Friday 14 March 2008. The program will only list attending presenters so if anyone is missing or should be taken off please let me know.

We will require a biography for each presenter, so if you have not already done so please email a short bio (100 words) to family@pco.com.au.

You will shortly receive a speaker requirements form via email. If you have any specific set-up or AV requirements please fill out and return the form no later than Friday 14 March 2008.

A copy of your PowerPoint presentation is required in advance of the conference. Please email a copy of your presentation to family@pco.com.au no later than Monday 7 April 2008.

If you have any queries regarding your presentation or the conference please do not hesitate to contact me.

We look forward to welcoming you to Newcastle.

Kind regards,

Sarah Mason
Conference Secretariat

The First National Indigenous Family and Community Strengths Conference
Monday 14 to Wednesday 16 April 2008

The Fifth Australian Family and Community Strengths Conference
Wednesday 16 to Friday 18 April 2008

The University of Newcastle, NSW, Australia
Appendix 6b

Abstract Submission for Faculty Research Showcase Presentations 2009
20\textsuperscript{th} July 2009
and Abstract Submission accepted for 7-9\textsuperscript{th} October, 2009 National Men’s health Gathering at Newcastle University.

Sherrian Price
Master of Nursing Research student
Supervisors: Professor Diana Keatinge, Ms Denise Kinross

Title:
“A Roller-Coaster Ride”: Discovery of meaning in first-time fathers experience of being a father in the first six months following the birth of their baby.

Description:
A phenomenological study focusing on the first six months uncovered the meaning of being a father for five first-time fathers. This knowledge has built on and added to contemporary understanding of the unique and shared experiences of their transition to fatherhood. It is anticipated that these findings will promote empathy, understanding and support for fathers by health professionals, particularly Child and Family Health Nurses (CFHN).

Abstract:
Despite an increase in world-wide research on fathers and fatherhood in the last twenty years, many authors still conclude that father’s feelings about fatherhood and their needs in relation to this either have not been asked or misunderstood (Barclay and Lupton, 1999; Draper, 2002; Fletcher, Halle, 2008; Silberberg & Baxter, 2001). “The role of the father has been acknowledged as important and challenging yet is often unsupported, with available services for parents not always inclusive of fathers” (Families First, 2003).

A phenomenological study with first time fathers focusing on the first six months uncovered the meaning these fathers gave their experience. The fathers, aged from 30-36yrs were interviewed twice each asking them to “tell their story” with only some semi-structured questions if required. The study found that even though the men’s experiences were different, a common journey could be seen. A description and model was able to be developed which captured the essence of first-time fatherhood for these fathers over the first six months of their journey. Despite expecting fathers to begin their accounts in the post natal period, they unexpectedly started their story in pregnancy or just prior to the birth, therefore some of the findings are pertinent to midwives.

A summary of themes and sub-themes will be presented within the phenomenological framework of relationality, connection (lived other, lived body) and spaciality. The fathers either wanted to be the same or different from their own father. They all wanted to be good fathers and tried valiantly to meet this aim. Even though they expressed a tumultuous experience they all managed the transition and felt it was rewarding and that they all felt they grew as men and became fathers.
The major themes that emerged were;

The dawning of responsibility,
Seeking and finding connection,
Absolute Joy, Wonder, Delight and Unconditional Love,
Struggling towards being a father,
Moving towards cohesion,
Arriving at Harmony – reflection on the journey

Limitations and rigour of the study and implications for Health professional practice, emerging from the study, particularly for Child and Family Health Nursing Practice, will also be presented.