



Transitions to fatherhood: a constructivist grounded theory study

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**Transitions to Fatherhood:
A Constructivist Grounded Theory Study**

Suzanne Hodgson

A thesis submitted in partial fulfilment of the requirements of
Sheffield Hallam University
for the degree of Doctor of Philosophy

July 2021

Candidate Declaration

I hereby declare that:

1. I have not been enrolled for another award of the University, or other academic or professional organisation, whilst undertaking my research degree.
2. None of the material contained in the thesis has been used in any other submission for an academic award.
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Abstract

Fathers who are involved with their infants have the potential to make significant positive contributions to their children's future health, wellbeing, and development. Transitions to fatherhood and the factors that shape those experiences, for some men, are poorly understood. There is a need for an improved awareness of the experiences of first-time fathers to inform policy and practice and improve support and outcomes for these men and their families.

The primary aim of this work was to explore contemporary transitions to fatherhood. To this end, a constructivist grounded theory study (CGTM) was undertaken. Twelve new fathers were recruited in the North of England and data were gathered from semi-structured interviews where participants shared their experiences and perspectives of becoming fathers for the first time.

Concepts relating to becoming and being fathers were explored in addition to fatherhood identity development. Following analysis of the data via processes fundamental to CGTM, the core category of *reconciling father identities* was constructed consisting of three theoretical categories: *anticipating fatherhood*, *tensions in fathering* and *the fluidity of fathering*.

All participants had strong aspirations for involved fathering performances and took steps to prepare for their new roles. However, they faced various tensions in the workplace, in healthcare and in the normative, often traditional, expectations influenced by social and structural gendered norms.

The father roles that they were ascribed by others frequently did not fit with their aspirations during pregnancy and the early months as fathers. They therefore found themselves working through periods of identity reconciliation which impacted upon their self-concept as fathers, their parenting confidence, and their parenting autonomy.

Broader consideration of the needs of fathers is required across the arenas in which they perform fatherhood to support the development of positive father identities. This has the potential to benefit the wellbeing of the men themselves, their partners, and their infants. The implications for workplace, healthcare policy and practice are offered including suggestions for future research.

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Chapter 1 Introduction

This thesis aims to uncover and explain the experiences of a group of men's transitions to fatherhood. The rationale for the study derives from academic literature and current policies related to becoming and being a father in the UK. My background as a nurse and health visitor further positions this study and offers a practice-based justification for the exploration of first-time fatherhood. Data, from qualitative interviews, were collected from twelve first time fathers in the north of England. This chapter provides the background to the study by summarising the literature on fatherhood ending with an overview of the structure of the thesis.

1.1 Fatherhood

In Western contexts, fatherhood and what it means to be a father is changing (Bosoni, 2014). Men becoming fathers now, may have experienced fathering quite differently to how they wish to father themselves. The 'New Father' movement founded in the 1990's gave men a novel opportunity to perform more caring roles with associated generative benefits seen for both fathers and children (Höfner et al., 2011). There is a consensus that to be a 'good father', men in the 21st century need to do more than just financially provide for their family (Collett et al., 2015). However, social norms influenced by culture, socioeconomics and gender substantially impact upon the opportunities men have in their fathering performances (Gregory & Milner, 2011). Both mothers and fathers are now expected to combine a multitude of parenting roles including breadwinning and the provision of both emotional and

practical care to their children (Genesoni & Tallandini, 2009). Masculinity, fatherhood, and paternal identity are intrinsically linked (Plantin et al., 2003) and, as masculinity continues to evolve, men are now required to demonstrate their enthusiasm for childcare in addition to the traditional expectations on them to be successful and goal orientated in their careers (Johansson & Klinth, 2008).

Social constructions of both masculinity and father identity are complex in nature and deeply rooted in historical and cultural contexts. Whereas the roles of breadwinner and disciplinarian have dominated fathering narratives for many generations (Brannen & Nilsen, 2006), many new fathers in contemporary Western contexts have begun to incorporate caring roles into their repertoire of fathering performances (Johansson, 2011). The binary ascribing of characteristics to men and women continues to contribute to the division of labour into these categories (West & Zimmerman, 1987) and there are multiple factors which cement these prescriptive roles. Despite the increasing momentum of the equality movement, changes in social norms are often uncomfortable and slow (Höfner et al., 2011). Notably though, evidence from evolutionary and cultural anthropology argues that human fathering has often been of a caring nature across time and cultural contexts (Bribiescas et al., 2012; Cabrera et al., 2007; Geary, 2000). Thus, whilst the breadwinner and disciplinarian roles have long dominated in Western contexts, they are far from fixed. At micro levels, some contemporary UK fathers appear to be negotiating this change well, nevertheless meso and macro social and institutional norms appear to be lagging, particularly in workplace practices and health service provision (Bateson, et al., 2017; Petts & Knoester, 2018).

This evolution of fatherhood has implications for workplaces in relation to parental leave and for healthcare practitioners who will find themselves working increasingly

with fathers. Kuhlman (2002) argues for the incorporation of gender theory within health sciences education. However, in current practice, this is largely lacking which is likely to present continued challenges to the way men access help and support for both physical and mental health concerns (Galdas et al., 2005).

There is growing interest in men's experiences of becoming fathers although there is still less research focused on fatherhood than motherhood (Condon, 2006).

However, studies based within the healthcare arena consistently report men's feelings of exclusion during pregnancy, labour and birth and during the postnatal period (Alio et al., 2013; Baldwin et al, 2018; Hodgson et al., 2021). There is a lack of father focussed antenatal preparation (Carlson et al., 2014), poor communication from healthcare professionals (Bäckström & Wahn, 2011) and despite an increase in studies which identify a range of mental health problems in new fathers (Bradley & Slade, 2013) there is little consideration of paternal distress. There are however growing arguments supporting screening for paternal postnatal depression (Nazareth, 2011).

Hormonal changes occurring in pregnant women have been well documented and investigated. However, there is increasing evidence from clinical, psychological, and anthropological research to suggest that there are also significant hormonal changes experienced by men during their transitions to fatherhood (Gettler et al., 2011; Gordon et al, 2010; Machin, 2018; Naber et al, 2010). Testosterone levels are at their peak during conception but decline rapidly at birth (Gettler et al., 2011) and new evidence has seen levels of prolactin and oxytocin in new fathers mirroring those of new mothers (Machin, 2018). In new fathers these levels are also correlated with both affective behaviours between fathers and infants and with play interactions (Gordon et al, 2010; Naber et al, 2010). This emerging evidence provides further

justification to increase awareness of the multiple, social and biological changes occurring in men as well as women, as they become parents.

Socialisation theorists suggest that children are primarily socialised by their parents implicit and explicit actions with secondary socialisation occurring via peers, schools, workplaces and structures such as the media (Macionis, 2017; Maccoby, 2000).

From this theoretical perspective gendered norms are intrinsic to making sense of the world for many families including the use of gendered clothing and in interactions with babies (Maccoby, 2000). The toys children are exposed to (Fulcher & Hayes, 2018; Mesman & Groeneveld, 2018) and their permitted emotional expression (Maccoby, 2000) are gendered from an early age reinforcing prevailing stereotypes. Despite the equality movement, caring continues to be predominantly associated with femininity (Elliot, 2016) whereas stoicism, strength and power continues to be associated with hegemonic masculinity (Connell, 2005). Regardless of contemporary fathers' openness to enacting caring masculinities (Elliot, 2016), there remain limited opportunities to prepare boys for their future roles as fathers with the primary benchmark being their own experiences of being fathered (Höfner et al., 2011).

1.2 Policy context

1.2.1 Maternity and well child provision.

In the context of the present study, the UK, maternity care is provided by the National Health Service (NHS) at no cost to those who are 'ordinarily resident' (Birthrights, 2021). By 2030 it is estimated that there will be approximately 686,000 births in England (NHS, 2016). During a routine pregnancy, a woman can expect to

receive approximately 10 antenatal contacts from a midwife and/or an obstetrician in cases of complex pregnancies (NHS, 2021). This provision is offered throughout pregnancy and ends two to four weeks postnatally at which point the care is transferred to a universal health visiting service. This service provides both maternal health and well child assessments throughout the first five years of a child's life (DOH, 2009). Health visitors also provide one antenatal contact after 28 weeks gestation to introduce the service to the expectant parents (DOH, 2009).

Perinatal mental health services are also commissioned to provide support to pregnant women and new mothers who may have existing mental health problems or for whom mental health problems develop during the perinatal period (NHS, 2016). The NHS Long term Plan (NHS England, 2019) has made a commitment to provide assessment and signposting to partners of women engaged with perinatal mental health services. These services have been relatively slow to be rolled out but are increasingly visible and are now well supported by good practice guidance for engaging fathers, partners, and family members (Darwin et al., 2021). There is currently no formal provision for men or partners experiencing perinatal distress independent of their pregnant partner or the new mother other than a generic referral to psychological services.

Most births in England take place within a hospital obstetric unit setting (NHS, 2016). These births tend to be in traditional hospital environments where there is minimal provision for fathers and partners despite most co-resident fathers being present at the birth (Machin, 2015). Some trusts offer reclining chairs next to their partners bedside for fathers to stay overnight for at least the first night post-birth although this is far from universal across NHS provision. Following an uncomplicated birth however, it is not uncommon for women to be discharged home on the same day.

Fathers and partners are mentioned in different ways and to varying degrees throughout maternity and well child service provision policy, and in guidance relating to the preparation for labour and birth, but in the UK, they are still not viewed as the core business of these services.

1.2.2 Parental leave policy

Statutory maternity leave is provided for women in the UK and consists of 26 weeks of 'ordinary maternity leave' and 26 weeks of 'additional maternity leave' (GOV.UK, 2021). It is not compulsory to take 52 weeks but there is a requirement to take the first two weeks after the birth of a baby which increases to four weeks for those who work in factory settings (GOV.UK, 2021). Individual employers will have their own maternity leave provision and so individual women's remuneration will vary according to their contract of employment. Recent policy changes in England now include further paid leave for parents who have a baby in neonatal intensive care units (HM Treasury, 2020).

Paternity leave was introduced in the UK in 2003 giving new fathers who are in contracted employment two weeks of leave following the birth of their child paid at statutory parental leave rates (Smith, 2010). In 2018 it became possible for mothers and fathers to share parental leave of up to 50 weeks in total including 37 weeks of pay (GOV.UK, 2018). However, this results in a reduction in maternity leave.

There is no formal requirement for employers to allow partners or fathers to attend scans or appointments during the antenatal period and therefore this tends to be at the discretion of individual employers. In law all employers in the UK are required to reasonably consider requests for flexible working for any employee (ACAS, 2020) but there is no legal requirement for this to be granted (GOV.UK, 2021). There

continue to be inconsistencies and inequity in the provision of parental leave for men and women in the UK. This may serve to reinforce the traditional view of the woman as primary care giver thus providing few governmental, or workplace endorsed opportunities for men to assume such a role.

The relatively rapid development in the parenting roles available to and required of men, has not been complemented by the availability of guidance and resources to support involved fathering (Baldwin et al., 2019; Carlson et al., 2014; Daniels et al., 2020; Hodgson et al., 2021). Moreover, many contemporary new fathers not only have insufficient access to involved fathering role models (Barclay & Lupton, 1999; Singley & Edwards, 2015; Williams et al., 2008), they also indicate different ways of understanding fatherhood and generally suggest that they would prefer to distance themselves from their own fathers parenting style (Collett et al., 2015; Höfner et al., 2011; Wilkes et al., 2012; Williams, 2008). Structural factors such as the limited paternity leave afforded to fathers in the UK further constrains their capacity to be fully involved fathers.

There now appears to be multiple different fathering roles and performances available to men or as Cannito (2020) suggests, “several fatherhoods” (p661). With these expanding options available to men for their performance of fathering, renewed exploration of the transition to fatherhood in this context is required. How men experience transitions to fatherhood and why they may experience it in different ways is still not well understood and further exploration of these transitions from multiple perspectives is warranted.

1.3 Thesis outline

The ensuing thesis is structured in the following way.

Chapter 2 Literature review

The literature review spans several overlapping academic disciplines in relation to fatherhood, fathering and fathers' experiences. Masculinity and relevant theoretical perspectives on identity are explored to inform how identity is understood in relation to the findings and discussion chapters of the thesis. Men's constructions of fatherhood including involved fathering, generational influences, egalitarian parenting, and intersectional identity are critically reviewed. Literature on fatherhood and the workplace is explored and critiqued. Finally, the extant knowledge of men's experiences in perinatal healthcare is presented.

Chapter 3 Methodology, design and conduct of the study

This chapter provides a theoretical and practical overview of the use of constructivist grounded theory methodology (CGTM). Perspectives on epistemology, ontology and methodology are offered. Reflexivity and positionality are explored and the use of literature in CGTM is explained. The methods are then presented including recruitment and sampling. Ethics and research governance are followed by an explanation of the methods of data collection and subsequent data management. The final section covers the process of data analysis through to the formulation of the theoretical categories and overarching core category.

Chapter 4 Anticipating fatherhood

The theoretical category of anticipating fatherhood is presented in chapter four and includes the subcategories of **starting the transition**, **hopes for a fathering role** and **relationship dynamics and change**.

Chapter 5 Tensions in fathering

Tensions in fathering encompasses the challenges and barriers participants faced in performing their aspired-for fathering roles. The subcategories of **navigating gender**, **negotiating the workplace** and **healthcare holds power** are presented and demonstrate the various tensions fathers face in their transitions to fatherhood.

Chapter 6 Fluidity of fathering

The theoretical category of fluidity of fathering comprises the subcategories of **time facilities opportunity**, **perceiving a role** and **role endorsement**. Here, participants share their perspectives on early fatherhood, access to roles and perceiving greater involvement as their infants grow older.

Chapter 7 Contribution to knowledge

In chapter 7, the unique contribution to knowledge is presented. The core category of **reconciling father identities** is explored, and findings are synthesised with extant knowledge. The chapter then sets out how this study furthers existing knowledge of transitions to fatherhood.

Chapter 8 Final recommendations from the study

In the final chapter, the quality, strengths and limitations of this study are stated followed by recommendations for future research. The actual and potential

application and impact of the findings are shared in the context of workplace and healthcare policy and practice. Finally, dissemination and plans for future research are followed by the conclusion and final thoughts.

Chapter 2 Literature review

This chapter critically reviews the relevant literature on transitions to fatherhood, drawing on research and theories from psychology, sociology and health including cross-cultural and international studies. Whilst it is acknowledged that there is a growing body of literature related to same sex parents (for example, see Andreasson & Johansson, 2017; Bergman et al., 2010; Schacher et al., 2005), the present literature review focuses on the experiences of heterosexual, cis gender fathers, reflecting the participants in this study. The rationale for this is based in the belief that transitions to fatherhood are intertwined with masculinity, hence with gender and sexuality, thus any examination of transitions to fatherhood must be understood in that context. The participants in this study all identify as cis gender, heterosexual men, correspondingly the thesis focusses directly on this body of literature.

The chapter is organised in the following way. Firstly, to position and contextualise this thesis, the literature related to masculinities will be explored. This includes studies of gender and masculinity as performance and theoretical perspectives on identity relevant to the findings of this thesis. Then, extant knowledge of men's constructions of fatherhood identity, including consideration of intersectionality, social and gendered norms and generational influences. This is followed by a review of studies of fathers in the workplace, associated policy contexts and the experiences of stay-at-home fathers. Finally, the literature investigating men's experiences within perinatal healthcare including pregnancy, labour and birth and postnatal experiences will be examined. The chapter concludes with a summarising critique of current multidisciplinary knowledge on transitions to fatherhood followed

by the justification for this study and the presentation of the research question, aims and objectives.

2.1 Theoretical perspectives

2.1.1 Masculinity

Theories of masculinity and the associated identity development of new fathers is intrinsic to the work of this thesis. The following section provides a brief overview of the position taken in this thesis in relation to the concept of multiple masculinities which will be further developed in the findings and discussion chapters.

The term 'hegemonic masculinity' describes a set of characteristics associated with the gendered norms of men which serve the patriarchal subordination of women (Connell, 1995). The routine practices and displays of hegemonic masculinity are related to what might be described as traditional masculine norms such as emotional suppression, breadwinning, lack of engagement with domestic labour, physical strength, and a discourse of domination (Connell, 1995; Connell, 2005; Connell, 2012; Connell & Messerschmidt, 2005; Schippers, 2007). Under the original concept, it was argued that those who were most advantaged by hegemonic masculinity were white, straight, upper /middle class men. Although it is suggested that some men may suffer negatively from the hegemonic masculinity narrative, in relation to its impact on help-seeking behaviours (Addis & Mahalik, 2003; Evans et al., 2011), access to support for mental health problems (Johnson et al., 2012) and the reporting of domestic abuse by male survivors (Russell & Kraus, 2016) and therefore being a white straight man is not always an advantage.

More recently, several authors have suggested that non-hegemonic masculinities are becoming embedded in the performances of contemporary men and that the notion of hegemonic masculinity is dated, does not account for women's agency and ought to be re-considered (Connell, 2005; Connell, 2012; Connell & Messerschmidt, 2005; Demetriou, 2001). Depending on the context, men appear to adapt the presentation of their masculine identities to meet their needs, embodying hegemonic masculinity in some contexts whilst increasingly enacting caring masculinities in others (Brandth & Kvande, 2018). This reinforces the notion that masculine identities are fluid, flexible and must be adapted over the life course, for example, in meeting the requirements of fatherhood (Finn & Henwood, 2009). Hunter et al. (2017) suggest that rather than replacing hegemonic masculinity, caring masculinity is an extension of hegemonic masculinity. Nevertheless, Connell and Messerschmidt (2005) suggest that instead of masculinity describing a type of man, "it is a way that men position themselves through discursive practices" (p841) with such practices subject to change in differing contexts and within different social structures and influenced by gender relations.

Masculinity and health

Stereotyping in relation to gender and health outcomes has been largely critiqued where the male role and female role have been associated with unequal gendered health outcomes thus suggesting gendered determinism in relation to health (Courtney, 2000a; 2000b). Harrison (1978) suggests that the male role is dangerous to health as male role conformity is related to risk taking behaviour, alcohol use and poor diet. In the current Covid-19 pandemic, higher rates of fatalities have been seen in men (Jin et al., 2020) and some commentators have related this to "masculinity" (Mahdawi, 2020) as if it is a homogenous concept, contrary to the perspectives of

Connell and others (Connell, 2012). There is also the potential to for this perspective to blame men for not accessing early medical help (Noone & Stephens, 2008; Johnson et al., 2012) ignoring structural factors such as the nature of service provision (Courtney, 2000b).

Despite the criticisms of categorical thinking in relation to gender, this enactment of masculine behaviours continues to reflect men's coping mechanisms in the health literature especially amongst lower socio-economic groups (O'Brien et al., 2017; Pérez et al., 2017; Schofield et al., 2000) and are intrinsic to features of hegemonic masculinity such as power, suppression of emotions, and not being seen as weak.

2.1.2 Gender and masculinity as performance

Both Goffman (1959) and Butler (2004) see gender as performance in the context of traditional socially based notions of masculinity and femininity and their enactment in everyday lives. According to Goffman (1959), in our interactions with others, we are consistently performing roles for and with our audiences which are situationally dependent, influenced by gender expectations and societal beliefs (Collett & Childs, 2009). When an actor does not perform the role expected by their audience they can suffer "performance disruption" (Goffman, 1959, p152). This has implications for how the actor is both perceived and received by the audience (Collett & Childs, 2009) thus affecting their identity or self-concept in relation to the specific situational performance. In relation to fatherhood, role performance is seen throughout the arenas in which fatherhood is enacted, for example, organisations may have traditional ideas around the performance of men returning to work and taking leave after the birth of a baby (Harvey & Trembley, 2020).

As individual families evolve in redefining gender roles, conflict may occur between themselves and traditional cultures within organisations and institutions resulting in discrepancy between actors and audiences (Levine, 2015). In more traditional workplaces, new fathers may be reluctant to take parental leave or ask for flexible working (Borgkvist et al., 2021; Harvey & Trembley, 2020) for fear of repercussions related to the perception of others as lacking workplace commitment or not performing in a traditionally masculine way (Acker, 1990). In such workplaces the culture may be inhibitive of individual men becoming the co-parents they wish to be, ultimately continuing to compound inequality in the workplace for women (Jackson, 2018). The practicing of new roles for fathers within the confines of their own home supports Goffman's (1959) perspective on front stage and backstage performances, where front stage performances may be at work, in the park or with grandparents, for example. It is likely however, that the backstage performances in the private sphere are at times, shared with a partner and so may not be the types of performances enacted if the father is alone with his child. Indeed, studies of men taking parental leave at a different time to their partners have noted that the performance of caring displayed by fathers during this time is significantly different to when they are caring for their child with their partner present (Beglaubter, 2019; Brandth & Kvande, 2018). The front stage performance of involved fathering e.g., outside the private sphere may be disrupted for those with a less progressive attitude in broader social life leading to these fatherhood performances remaining behind closed doors. Whilst ever progressive fatherhood practices and performances are not displayed regularly in the public domain, there will be fewer visible role models for contemporary fathers, leading some to be frustrated in their desire to enact new fathering (Williams, 2008). Understanding the facilitators and inhibitors of fathering performances in the arenas

where fatherhood is enacted would provide further insight into the social and cultural factors influencing transitions to fatherhood and the development of positive father identities.

2.1.3 Identity Theory

Identity is the human capacity - rooted in language - to know 'who's who' and hence 'what's what' (Jenkins, 2014, p6).

The study of identity is a core interest across both psychological and sociological realms. There are numerous theoretical perspectives, and vibrant fields of contemporary enquiry e.g., Social Identity Theory (Tajfel et al., 1979); identity as performance (Goffman, 1959) described above. One perspective that has particular relevance for the current study is Stryker's Identity Theory (1968; 2001). This theoretical perspective was originally offered in its application to family research and has been further usefully applied to the study of fatherhood (Adamsons & Pasley, 2013). Stryker's theory is based on the concept of structural symbolic interactionism (Stryker, 1968; 2001), building upon Mead's original theory of symbolic interactionism (Mead, 1934) and demonstrates the power of individuals, language, organisations and communities in facilitating or inhibiting father's role performances and therefore the development of a positive fathering identity.

The concept of multiple father identities and the complex interactions between each (Doucet, 2004; Lewington et al., 2021) is acknowledged in that identities are associated with the networks and relationships in which a person holds a position and wherein they perform roles (Stryker & Burke, 2000). Stryker's identity theory indicates that role choices are a function of identity and that an individual's identities are ordered into a hierarchy of salience. Identity salience is defined by Stryker as

"the probability for a given person, of a given identity being invoked in a variety of situations or, the differential probability among persons with a given identity being invoked in a given situation" (Stryker, 1968, p 560).

From an identity salience perspective, a man may build up the salience of his father identity in one context and minimise it in other contexts depending on the performances expected of him. Identity commitment is core to the identity salience hierarchy, for example, commitment can be seen in two ways, that is, the extensivity of relationships or the number of relationships entered into by way of a particular identity and the intensity of relationships, or the depth of those relationships entered into by way of a particular identity (Stryker, 1968). Commitment is therefore measured in the context of the costs of giving up meaningful relationships to others should alternative courses of action be pursued or required by others.

Stryker (1968) hypothesises that an identity will be higher in the salience hierarchy where commitment to that identity is reinforced by the "extensivity or intensity of relationships entered into by way of the identity" (p562) and also where there is congruence between "the role expectations of those to whom one is committed by virtue of a given identity" (p562). Finally, Stryker (1968) also posits that the level of identity salience is related to the "number of persons included in the network of commitment premised on a given identity for whom that identity is high in their own salience hierarchy" (p 562).

Stryker's identity theory (1968) was further developed by Stryker and Burke (2000) and by Adamsons and Pasley (2013) in their application of the theory to fatherhood identity. Identity is viewed by both Stryker (1968) and Adamsons and Pasley (2013) as a concept which is neither fixed nor singular but is processual, multiple and

influenced by structural factors, normative expectations and the demands of those with which we have close relationships (Adamsons & Pasley, 2013; Stryker, 1968; Stryker & Burke, 2000). Furthermore, Brubaker (2004) suggests that rather than identity being the motivator for action, the performances by individuals demonstrate their identity thus identifying the link between role performance and identity.

Building on Goffman's (1959) theory of the presentation of self, role performance is thought to impact upon identity, and identity influences role performance in different contexts for different audiences. The salience (Stryker & Serpe, 1982) of identities is hierarchical and it is suggested that an individual may be externally identified by others, for example, as a father in one context and as a worker in another (Jenkins, 2014). Stryker's identity theory provides a theoretical lens through which the findings in this thesis can be viewed. Identity salience and its relationship with role performance further supports the findings presented in chapter seven and to the broader theoretical framework of **reconciling father identities** presented in this thesis.

2.2 Men's constructions of fatherhood identity

A new wave of Western cultural perspectives, examining and reimagining fatherhood is argued to have shaped narratives of contemporary fatherhood that the current generation of new fathers are immersed in (Collett et al., 2015; Kaila-Behm & Vehviläinen-Julkunen, 2000). Whilst possibilities abound about what it means to be a 'good father' (Williams, 2008), they are all necessarily embedded in the given social cultural context (Sansiriphun et al., 2010).

2.2.1 Involved fathering

There is a strong narrative of 'involved fathering' interwoven through contemporary life distinguishing it from the traditional, distant, breadwinning father of the past (Singley & Edwards, 2015). This 'involved father' provides care for and interacts with his child in a way that would historically be seen as a mother's role. It is not necessarily the case that traditional fathers of the recent past were not involved with their children at all. It may be that the nature of involvement has expanded to include more play, reading and transporting children to activities coupled with more intimate care and emotional involvement such as providing comfort and reassurance.

Research shows that fathers can offer a unique relationship with their children (Coley & Coltrane, 2007) and fathers have been shown to play differently to mothers, engaging in more monitored risk taking and physical play which can positively influence child development (Volling et al., 2019). Care given by fathers complements the mother's interactions with their babies and children (Grossman et al., 2002; Machin, 2018) with the negative impact of absent fathers seen across emotional and social development (Cabrera et al., 2000; Cabrera & Tamis-LeMonda, 2013). A positive relationship between fathers and infants demonstrated by father-infant sensitivity and play has immeasurable benefits including a significant positive impact on emotional and behavioural development (Cabrera et al., 2007; Ramchandani, et al., 2008; Ramchandani et al., 2005; Sarkadi et al., 2008; St George et al., 2018; Tamis-LeMonda et al., 2004).

Studies have however reported that fathers frequently receive praise and congratulations for merely spending time with their children and keeping them safe (Beglaubter, 2019; Höfner et al., 2011). These attitudes serve to compound the incompetent father stereotype portrayed in the media which is frequently in stark

contrast to the multi-tasking 'expert' mother, and reinforces the high expectations perceived by new mothers to perform all aspects of parenting to an unachievable set of standards (Anderson et al., 2018; Mihelic et al., 2016).

Knoester and Eggebeen (2006) analysed US based data from structured interviews undertaken between 1987-1994 and found that becoming a father, or the addition of subsequent children, altered the composition of men's lives and for men who lived with their children, their wellbeing was positively influenced. Whilst caution is required in applying this to men in the contemporary UK context, the findings are consistent with several other studies exploring the health, wellbeing and experiences of both resident and non-resident fathers. Whilst fathers were shown to have increased interactions with their extended family, how these interactions influence fatherhood performance and identity development requires further exploration to fully understand the nature of these relationships in the fathering context.

2.2.2 Generational influences and role models

In constructing a fathering identity, looking back at one's own experience of being fathered has been found to be essential in having a benchmark or a reference point as a new father (Finn & Henwood, 2009). Reflecting on this experience guides men in whether they want to replicate their own fathering or to reject that particular fathering model (Bolzan et al., 2005). Research suggests that commonly, contemporary fathers want to be more emotionally available and involved than their own fathers were (Finn & Henwood, 2009). Evidence from multiple studies highlights that contemporary fathers, young and old, aspire to be different to their own fathers who they described as anything from emotionally distant breadwinners to absent and in some cases abusive (Collett et al., 2015; Höfner et al., 2011; Lewington et al.,

2021; Wilkes et al., 2012; Williams, 2008). Participants in Enderstein and Boonzaier's (2015) study identified this aspiration as they shared their stories of becoming young fathers in South Africa. Using a narrative methodology, these young men, who had all fathered a child before they were 21 years old shared stories of abusive, neglectful, or absent fathers (Enderstein & Boonzaier, 2015). These young fathers also saw an opportunity to turn negative lifestyle choices around in becoming responsible fathers seeing themselves as the protectors and carers of their children and identifying with an emotionally supportive role with their children framed within their masculine identity (Enderstein & Boonzaier, 2015). Whilst this study of 10 fathers was small, it explored the previously undocumented experiences of young fathers in this context.

In a qualitative study using semi-structured interviews Williams (2008), recruited 40 fathers from a range of socio-economic backgrounds including employed, unemployed, student and professional fathers. In this study, men identified differences in relationships with their partners and children referring to a change from previous generations. Most of the men interviewed in this study rejected their own father's style of parenting, largely because it was viewed as no longer relevant to the circumstances in which they found themselves parenting (Williams, 2008). Whilst this study was based on a small, localised sample of fathers, it concurs with larger studies which demonstrate movement away from traditional notions of fatherhood and masculinity to a more emotionally involved fatherhood incorporating caring masculinities (Collett et al., 2015; Elliott, 2016; Höfner et al., 2011; Wilkes et al., 2012). These men admired their fathers as providers but identified them as out of date with current parenting approaches (Williams, 2008).

Many fathers, as described above, want to move away from the roles their own fathers played in their childhood, but frequently struggle to identify alternative fathering role models (Knoester & Eggebeen, 2006). In countries such as Sweden, this level of social change has now been seen for more than two generations (Plantin et al., 2003; West & Zimmerman, 1987). There is a growing body of research indicating that the UK is witnessing the first few generations of fathers who are, on the whole, adopting a more gender equal approach to parenting, prioritising, philosophically at least, a more emotional connection to their children (Enderstein & Boonzaier, 2015; Henwood & Procter, 2003; Larsson & Björk, 2017; Lee & Lee, 2018; Williams, 2008).

The notion of fatherhood as evolving throughout a child's life is supported by fathers describing the tensions between their personal experiences, social context and their relationships, which impact upon their father identities (Finn & Henwood, 2009). Men in different social contexts have been noted to receive little positive reinforcement for their involved fathering practices such as being present at the birth, pushing buggies or changing nappies, from both their own fathers and their male siblings (Höfner et al., 2011).

In studies exploring the influences on new fathers' identities, norms for fathering have been found to be transmitted from one generation to the next and appear to exert the most influence over the approach contemporary fathers will take. This was a finding in both Finn and Henwood's (2009) qualitative study of 30 new fathers and in the Brannen et al. (2011) intergenerational study comparing fathering practices in case studies of British families and migrant Irish and Polish families. Other studies such as Williams (2008), Collett et al. (2015), Höfner et al. (2011) and Wilkes et al. (2012) concur with these findings, thus providing a broad evidence base to indicate

that generational influences have a significant impact on contemporary fathering practices. This is especially pertinent when considering Singley and Edwards' (2015) suggestion of a "father socialisation generation gap" (p310), which argues that the current population of new and recent fathers have few role models on which to base an involved, emotionally connected fathering identity. In current generations of fathers, the generational influences appear to be at a crossroads where there are numerous possibilities for fathering which may not be embedded in a man's own experiences of being fathered but may be more to do with a shift in societal expectations and notions of gender (Plantin et al., 2003; West & Zimmerman, 1987). Further research has demonstrated that the relationships between new fathers and their own parents, especially their fathers, may have a direct influence on their fathering identity and actions. Different aspects of fathering appear to evolve or remain static across generations depending on the cultural and structural context (Brannen & Nilsen, 2006). The breadwinner identity is reported to permeate generations whereas other fatherhood identities such as primary caregiver and involved father seem to evolve in reaction to cultural or societal influences (Brannen & Nilsen, 2006). Men's pursuit of involved fatherhood can be derailed because of traditional gendered norms which endure throughout many of the spaces in which fathering is performed. Social, financial and structural constraints experienced in transitions to fatherhood such as workplace policies, healthcare practices and the social expectations of family and friends, frequently undermine new father's co-parenting goals (Finn & Henwood, 2009; Höfner et al., 2011). Traditional notions of masculinity infiltrate many social arenas including workplaces, thus influencing the extent to which new fathers are facilitated in their pursuit of involved fatherhood.

For men currently becoming fathers, there is a much broader and diverse range of fatherhood narratives from which they can now draw, although individual, family, community and broader social factors such as those related to the workplace may present barriers, thus requiring men to compromise on their ideals (Petts & Knoester, 2018). This is reflected in a study by Plantin et al. (2003) who interviewed 50 couples across the UK and Sweden and found that a social discourse of 'involved' fathering was more embedded in Swedish than British culture. Key influences were the structural factors which either facilitated or inhibited involved fathering practices such as paternity leave and workplace flexibility. The longevity of the equality agenda and its impact on policy and practice in countries such as Sweden (West & Zimmerman, 1987) is likely to have played a role in the Plantin et al. (2003) study. While this highlights the need for caution in comparing fathering practices within different policy contexts, it emphasizes the significance of supportive policy frameworks and as with all identities and practices, there may be other intersecting factors at play. However, gendered workplace norms continue to influence the relatively poor uptake of paternity leave in Sweden (Haas & Hwang, 2018) and so from this perspective comparisons could be made.

The strong desire to move away from their own father's models of fathering, the multitude of different fathering performances available to them, and the normative expectations of those around them, require a deeper and more holistic exploration of new fathers' experiences during this time of transition.

2.2.3 Egalitarian parenting

In addition to factors such as socioeconomics, experience in parenting may influence the adoption of more egalitarian parenting practices within couples. Whilst many

expectant parents idealise an equal parenting approach including involved fatherhood, other studies have found that this does not often materialise post birth (Höfner et al., 2011; Machin, 2015). Katz-Wise et al. (2010) measured gender role attitudes and identity salience in 205 first time couples and 198 experienced couples antenatally and postnatally. They found that gender role attitudes become more traditional for both groups of parents up to 12 months postpartum. Subsequently, more egalitarian approaches to parenting returned for the first-time parents whilst experienced parents remained more traditional in their attitudes to parenting. Katz-Wise et al. (2010) drew upon identity salience theory in order to account for these findings. As previously stated, identity salience proposes that individuals hold multiple identities and therefore place more importance on one than others in certain circumstances and contexts (Callero, 1985; Stryker, 1968). In the Katz-Wise et al. (2010) study, there was an increase in family salience and an associated decrease in work salience noted for all mothers and fathers. Identity salience was seen to change more for mothers than for fathers and change more in first time parents (Katz-Wise et al., 2010). It is notable that this study only compared the status of the parents i.e., first time versus experienced, paying little attention to the structural and social factors which may influence their identity salience. It may be that there is an association between unsupportive workplace and parental leave policies. Those which do not endorse fathers as primary caregivers are likely to reinforce gendered inequality in relation to both working and home life affecting both parents. Broader family circumstances, workplace influences and experiences should be considered in future work on identity salience and gender role attitudes, to better understand the influence of structural factors on identity salience.

2.2.4 Intersectionality

It has been suggested that the 'new man' movement may favour the circumstances of middle-class men (Ericsson, 2011 cited in Larsson & Björk, 2017). Hauari and Hollingworth (2009) investigated the experiences of 29 ethnically diverse families in the UK by exploring parenting practices of mothers and fathers. Their findings highlighted the disparity in parenting practices between mothers and fathers with the fathers spending most of their parenting time in play and recreational activities.

Across all ethnic groups, the traditional breadwinner role was found to be ingrained in the concept of fathering and all participants acknowledged that the role of fathers was evolving and multifaceted which often made the ideal of the new and involved father feel impossible to achieve (Hauari & Hollingworth, 2009). Socioeconomic factors were also found to be influential in the participant's ability to adopt multiple identities of contemporary fatherhood such as combining breadwinning with involved fathering. More traditional views were articulated by some of the Pakistani and Black African families believing that the disciplinarian role of the father was particularly important (Hauari & Hollingworth, 2009).

Salway et al. (2009) identified that, irrespective of ethnicity or socio-economic background, fathers were more likely to engage in recreational activities with their children than put them to bed or undertake other traditional caring roles concurring with the findings from the Hauari and Holligworth (2009) study. In a cross-cultural study undertaken by the Equal Opportunities Commission (Dex & Ward, 2007), parents generally indicated that they did not spend enough time with their children. However, differences were noted between parents of different ethnicities with fewer Black Caribbean, Bangladeshi, and Pakistani fathers indicating this. Whilst different fathering practices were observed within different ethnicities, associated with their

individual priorities for fathering (Dex & Ward, 2007) there were similarities between self-identifying White British and Asian fathers in the UK (Salway et al., 2009). Whilst both sets of fathers reported the pressure to financially provide for their families, there were cultural differences in their ability to act out caring masculinities. Asian fathers experienced gatekeeping by both their children's grandparents and by their partners, in addition to receiving chastisement for poor parenting performance which further acted as a barrier to them undertaking caring roles (Salway et al., 2009). In other studies, young fathers have experienced gatekeeping by both grandparents and the wider community where, for fathers not currently living with their children, such gatekeepers may both restrict and facilitate access to their children (Bunting & McAuley, 2004; Fagan & Cherson, 2015; Reeves, 2006). However, where positive relationships with the mother and wider family exist or can be forged, improved social, financial and emotional support for young fathers has been identified as supportive to their parenting goals (Enderstein & Boonzaier, 2015; Reeves, 2006). Asian fathers in the Salway et al. (2009) study report particular challenges related to the need to build resilience in their children to deal with prospective racial abuse and to connect their children with ethnic, cultural and religious parts of life (Salway et al., 2009). It is unclear whether fathers from other culturally diverse backgrounds also identified this as a challenge in their parenting practices.

Connell (2005) suggests that socio-economic factors heavily influence desired fathering performances, with men from lower socio-economic backgrounds who work long or unsociable hours being less able to spend time with their children. In low-income families, the father's employment may be critical in keeping the family out of poverty (Dex & Ward, 2007) thus reinforcing the breadwinner expectations on them and influencing the salience of this particular fatherhood identity. Gilles (2009)

argues that men with access to resources exhibit an outward display of involved fathering by engaging with parenting tasks which would support their children in pursuit of achievement and excellence in recreational activities. Working class men or those fathers with access to fewer resources, may adopt a more traditional fathering identity, prioritising breadwinning, engaging in less flamboyant displays of involved fathering. Moreover, time spent with children appears to increase for some unemployed fathers (Hauari & Hollingworth, 2009). However, fathers in these circumstances, overrepresented by young fathers, culturally diverse fathers, immigrant fathers and those with criminal backgrounds, may report fewer benefits from experiencing fatherhood (Settersten & Cancel-Tirado, 2010).

2.3 Fatherhood and the Workplace

In the UK, the 20th century brought significant social change including the mass entry of women into the workforce (Cabrera et al., 2000) and reformulation of the concept of family (Tremblay & Pierce, 2011). Traditional notions of masculinity were questioned and the concept of 'the new man' and caring masculinities began to emerge (Scambor et al., 2014). The traditional provider role illustrated as the breadwinning, distant, disciplinarian is now out of favour with many men who identify with a more emotionally involved fathering ideal (Dex & Ward, 2007). Fathering and the role of men in relation to childcare is constantly evolving together with the equality agenda (Scambor et al., 2014) in the workplace, and in the home.

2.3.1 Paternity leave

Paternity leave across the globe varies considerably with Nordic countries such as Sweden and Finland, offering the most generous of benefits to new fathers (Duvander & Johansson, 2019; Johansson, 2011). In most of these instances, paternity leave is significantly more than the two weeks offered in the UK and time is protected for both mothers and fathers (Sigurdardottir & Garðarsdóttir, 2018). This contrasts with the policy on shared parental leave in the UK where maternity leave is reduced to make provision for the shared aspect (GOV.UK, 2018). There are significant differences in fathers' use of and access to different types of leave and flexible working. Men in manual, semi-skilled and unskilled occupations have less flexible work options and access to leave than those in professional occupations. (Dex & Ward, 2007). Men in higher occupational groups, for example those in consultancy roles, will have more access to shared parental leave which is, in some cases, supplemented to full pay by their employers (Scott, 2018). Moreover, these employees, due to the nature of their work, may have more options to work flexibly than fathers who may be engaged in work which cannot be done at home, such as, in manual roles or in the service industry, for example (Birkett & Forbes, 2019).

2.3.2 Shared parental leave (SPL)

Building on knowledge gained from expectant new mothers' attitudes towards shared parental leave (Twamley & Schober, 2019), Birkett and Forbes (2019) undertook a qualitative study with both mothers and fathers (n=70) and further elucidated the decision-making process involved in taking up SPL. Gendered norms, finance, maternal influences and structural barriers were all seen to impact upon the uptake of SPL. Couples in lower paid and lower skilled jobs were less likely to take shared

parental leave than couples where the mother was more career ambitious or earned more than the father. This is one of only a handful of studies related to decision making regarding shared parental leave and reveals significant barriers to co-parenting (Birkett & Forbes, 2019). Despite the policy changes which aim to provide more opportunities for men to undertake childcare, it appears that more than just policy change is required to maximise this uptake.

There has been more than 40 years of parental leave provision in Sweden with specific allocations assigned entirely for either mothers or fathers increasing since this time. Much of the provision, however, can be shared by both parents, as mentioned above, and compensated at 80% of their salary (Duvander & Johansson, 2019). Nevertheless, despite the generous welfare state in Sweden which offers significantly more parental leave than most other countries in the world, some fathers continue to take on a traditional role within the family, which may explain the minimal uptake of the two months of allocated paternity leave (Johansson, 2011; Ma et al., 2020). Working fathers in Sweden have a legal right to reduce their working hours to 75% until their child turns eight or completes the first year in school. In other countries, such as the UK the law is much looser and states that parents have the right to *request* part time working without an obligation for employers to agree (Larsson & Bjork, 2017). Despite these possibilities and the associated supporting legal framework, there are very few fathers, approximately 10%, who engage in part-time work in Sweden, the majority of whom work 'long part-time hours' of between 20-34 hours per week (Statistics Sweden, 2020, p55). Those who choose to do this, do so to facilitate involved fathering and to spend more time with their children whilst they are young. They express a desire to feel closer to their children and to provide them with emotional support, thus, strengthening the relationships with their children

is a key motivator for choosing to work part-time (Larsson & Bjork, 2017).

Johannsson and Klinth (2008) explored constructions of fatherhood with men in the context of the images used in a Swedish parental leave campaign. Their aim was to understand how these men constructed fatherhood in the context of managing societal expectations and lived experiences. Applying Connell's (1995) model of the multiplicity of masculinities, they hypothesised that men would have different perspectives on shared parental leave which would be informed by their constructions of a "gender equal man" (Johannsson & Klinth, 2008). These authors argue that opportunity afforded to some men to decide how much caring they will do, sustains their position of power. Picking and choosing how much or how little caring they will do whilst always having to engage in paid work to justify this is not something that women are necessarily able to do.

As is demonstrated by the discussion above, parental leave policy in isolation does not provide all fathers with the opportunity to co-parent their children and deeper social and structural factors are also involved (Ma et al., 2020; Plantin, 2007). In further studies, additional factors have been identified including views on traditional masculinity (Connell, 2005) and persisting traditional gendered norms related to whose job it is to care for children (Birkett & Forbes, 2019; Dex & Ward, 2007; Sriyasak et al., 2018). As the above discussion illustrates, policy alone is not enough to influence change in paternity leave uptake and further attention to the social and cultural barriers to men taking paternity leave is warranted.

2.3.3 Workplace experiences

Bolzan et al. (2005) conducted qualitative narrative interviews with 40 new fathers. Despite participants wanting to be more "hands-on carers", those with a lack of

flexibility and autonomy in their working conditions were prevented from fully enacting caring masculinities and experienced more stress, unhappiness, and anxiety postnatally (Bolzan et al., 2005).

In a qualitative study of nine fathers, Chin et al. (2011a) identified that returning to work was both challenging and rewarding with some of their participants dreading returning to work and, like working mothers in other studies, wishing to have more time at home with their baby. Other participants felt regret about how much time they would now spend away from the family citing missed opportunities to attend development and health checks, whilst others report finding a new sense of purpose in work, feeling useful in the workplace compared to some of the experiences in the early days and weeks of fatherhood (Chin et al, 2011a). It is useful to note that this study recruited directly from National Childbirth Trust who provide privately funded antenatal classes, potentially limiting the diversity of the participants regarding social class. However, any insight into transitions to fatherhood has a place in generating a synthesised account of men's experiences during this time. Plantin (2007) analysed qualitative interviews conducted with 30 couples which indicated that fathers were more likely to take leave to care for an older sick child than to take paternity leave. This may be related to the temporary nature of common childhood illnesses compared to paternity leave and does not explore the willingness or ability to take leave to care for a seriously ill or disabled child. This may further relate to the pressures men perceive to be committed to their workplace or the traditional philosophies of individual workplaces in relation to the provision of flexible working opportunities for either parent.

2.3.4 Autonomous fathering

The findings by Plantin (2007) described in the previous section may be related to evolving fatherhood identities and mirror findings in a number of studies including Hamilton and DeJonge's (2010) qualitative study of new fathers. In this study, men report feeling as though they have less of a role in the early few weeks and months of an infant's life, perceiving the mother to be the primary caregiver and report struggling to find a role for themselves (Hamilton & DeJonge, 2010). Similar findings were also reported by Chin et al. (2011b) and further explored by Elliot (2016). Hamilton and DeJonge's (2010) findings were potentially skewed by the small sample size recruited using the snowball sampling technique and reflecting the similar perspectives and circumstances of a group of men, who were likely known to each other.

The extent to which men feel involved with the care of and decision making for their infants may be related to facilitative or inhibitive parental gatekeeping (Birkett & Forbes, 2019). This concept was further specified as maternal 'gate-opening' and 'gate-closing' by Olsavsky et al. (2019, p5) whereby fathers' closeness to their infants was facilitated or inhibited by their female partners. Furthermore, there was a strong association between maternal gatekeeping and both co-parenting closeness and higher relationship functioning. In a grounded theory study of 33 couples, Beglaubter (2019) found that men who took paternity leave alone i.e., not at the same time as their partner, reported an increased sense of parenting competency and tended to identify more strongly with caring masculinities. Moreover, they made autonomous decisions for, and felt a closer connection to their babies, indicating an improved understanding of the nurturing role of a parent (Beglaubter, 2019). In contrast, when men took leave alongside their female partners, they identified more

as secondary parents adopting more traditional fathering roles and deferring to their female partner for decision making about the child (Beglaubter, 2019).

The term paternal involvement is closely associated with the development of fathering identity and has been interpreted in a number of different ways by fathers themselves, by their partners and by academics. Lamb et al. (1985) and Lamb (2000) suggest three different facets of paternal involvement: interaction, availability and responsibility. Interaction is to the extent to which fathers have direct contact with their child by providing care and engaging in activities with them. Availability is how accessible the father is perceived to be to the child irrespective of direct contact with them. Responsibility is the extent to which fathers ensure that the child is well cared for and having their needs met by others e.g., healthcare appointments and other sources of childcare (Lamb et al., 1985). These factors combine to identify the extent to which parental involvement is assessed as *involved* by fathers themselves and others. These elements of father involvement are both facilitated and inhibited by factors such as maternal gatekeeping and structural norms surrounding the father such as the opportunity to take parental leave and to be a primary caregiving parent.

Future studies of shared parental leave and the formats in which this is taken may shed further light on which factors facilitate and inhibit autonomous decision making for fathers. Moreover, the pressures felt by mothers in being seen as the default primary decision maker for infants and children and the impacts upon couple relationships warrant further exploration.

2.3.5 Stay at home fathers

The growth in women taking up managerial and highly skilled roles (Latshaw & Hale, 2016) and the financial benefits of this coupled with the decline of heavy industry has

led to an increase in the number of men undertaking the role of primary care giver and becoming 'Stay at Home Fathers' [SAHF] (Finley & Schwartz, 2016; Lau, 2016). Whilst this is an active choice for some fathers, for others, economic circumstances have determined this position, such as redundancy or material priorities. Being a SAHF may increase the emotional connection a father has to his children and increase parenting satisfaction in seeing children reach developmental milestones (Lee & Lee, 2018). However, Latshaw and Hale (2016) suggest that even with the perceived reversal of gendered norms in relation to breadwinning mothers and stay at home fathers, "doing gender" (West & Zimmerman, 1987, p125) and "undoing gender" (Brandth & Kvande, 2018, p72) presents a more complex picture of roles within individual families where parents resume traditional gendered roles during evenings and weekends. In Lee and Lee's (2018) qualitative study of SAHF's, men wanted to be acknowledged as primary caregivers in their own right. They rejected perceptions of them 'helping out' with or 'babysitting' their children. An emphasis for the men in this study was about being perceived as a man despite taking on a caring role. These findings concur with those of Snitker (2018) who found that SAHF's wanted to develop a distinct identity which Snitker (2018) argued, placed them in a position of continued masculine privilege. Moreover, despite being content in this role, these men wanted to ensure that they were not perceived as feminised by way of performing this role, emphasising instead being seen as a man with a caring responsibility (Snitker, 2018). This finding has consequences for the continuation of care being seen as a feminine role and may therefore compound men's reluctance to perform caring activities, particularly in public spaces. This perspective further reinforces the challenges faced by new parents in adopting the parenting role most suited to them or one which is most economically sensible rather than defaulting to

the mother as primary caregiver and the intrinsic perspective of caregiving as a female role (Elliot, 2016).

Research has found that social connections for SAHF's can offer some protection against the implications of isolated parenting (Boyce et al., 2007) and in constructing a positive fathering identity which may encompass caring masculinity (Lee & Lee, 2018). In the absence of father friendly social groups in the community, SAHF's seek out online forums as a place to form social connections and as a place to reinforce their primary caregiver identities (Caperton et al., 2019). When mothers were not available, SAHF's reach out to extended family members for social and practical support (Lee & Lee, 2018). In the Lee and Lee (2018) study, participant relationships with partners did not change significantly by them becoming stay at home fathers. This self-selecting group of fathers were from higher income families and were voluntarily in the role of SAHF. These characteristics potentially indicate fewer fixed ideas around concepts of masculinity facilitating their roles as SAHF's in the first place. However, this group of SAHF's did report having less alone time with their partners (Lee & Lee, 2018) which has the potential to be detrimental to both parents' mental wellbeing as studies have shown that poor relationship quality can be a strong predictor of postnatal distress in both new mothers and fathers (Sockol & Allred, 2018). Irrespective of whether this role is through active choice or necessity, these men face both internal and external negotiations in establishing their masculine and fathering identities (Caperton et al., 2019).

2.4 Men's experiences in perinatal healthcare

“Helping men successfully prepare for and make the transition to the new role of father is a contemporary challenge to services” (Dallos & Nokes, 2011, p163).

Men were first ‘allowed’ in the labour room in the late 1960’s (Leavitt, 2003) after it was identified that they could provide welcome support to their birthing partner (Jomeen, 2017). It is now usual, if not expected for men in the UK to be present at the birth of their babies with approximately 98% of men who are co-resident with their partners being present (Machin, 2015). Whilst there are traditional clinicians who argue for the exclusion of fathers from the birth (Odent, 1999), it is acknowledged by others as a significant time of transition for couples in the formation of new families (Draper, 2003; Hildingsson et al., 2014). Fathers who are present at the birth have, in some studies, been identified as demonstrating more social attachment behaviours towards their babies than fathers who are not present (Bowen & Miller 1980).

Given the lack of access to health services by men, (Courtenay, 2000b) the interactions with perinatal healthcare providers may be the most consistent contact they have with health services in their adult lives outside of serious illnesses. This presents both opportunities and challenges for providers, expectant parents, and new parents alike. One of the complexities for men is the woman-centred nature of maternity and well child services which arguably, is entirely appropriate considering the physical implications of carrying a baby for nine months. However, emotionally and psychologically, this is a profound time for both parents and whilst women tend to have access to perinatal services, research suggests that men do not (Baldwin et al., 2019; Darwin et al., 2017; Daniels et al., 2020). Adequate, holistic support for whole families from the antenatal period and beyond has far reaching consequences

for couple relationships, maternal and paternal mental health and social and emotional development of their children (Finnbogadóttir, et al., 2003; Gage & Kirk, 2002; Ramchandani, et al., 2008; Ramchandani et al., 2005; Rosich-Medina & Shetty, 2007; Widarsson et al., 2012).

2.4.1 Preparation, pregnancy and the antenatal period

Studies of fathers in the antenatal period have covered a variety of topics including individual preparation, antenatal education, expectations and support needs (Deave & Johnson, 2008; Gage & Kirk, 2002; Hamilton & DeJonge, 2010; Premberg, et al., 2008). Furthermore, a Swedish study of seven new fathers during the late stages of pregnancy, noted that the “time of transition” (p98) was significant (Finnbogadóttir et al., 2003). During pregnancy, these participants described feelings such as “insufficiency”, “inadequacy” (p99) and “exclusion” (p100) which was potentially further compounded by an inability to fully comprehend the reality of the baby. In this study, intimate partner relationships were found to improve over the course of the pregnancy (Finnbogadóttir et al., 2003). However, in other studies such as Barclay and Lupton (1999), the requirement for new fathers to balance several roles such as provider, nurturer and supportive partner in the early weeks of parenthood was a cause of significant strain on relationships. Cultural differences should be taken into consideration however as these two studies were undertaken in Sweden and Australia respectively. As highlighted above, Sweden is well known to have a generous parental leave system which supports both parents to be actively involved in childcare (Duvander & Johansson, 2019). In contrast in Australia, like in the UK, there is significantly less provision for fathers within parental leave stipulation (Australian Government, 2020).

Fenwick et al. (2012) explored antenatal education in Australia in a small qualitative study where mixed feelings were experienced by men, expressing pregnancy as a time of great joy. Nevertheless, they also reported feeling side-lined during antenatal care expressing a sense of isolation as a consequence of being ignored by healthcare professionals. However, Friewald et al. (2005) found that all-male discussion forums provided a safe space for prospective fathers to share their worries and concerns with others in a similar position. Classes with specific father components such as allocated time for new fathers to speak together away from their partners, being able to ask questions about their specific roles and worries in addition to classes led by male facilitators have been well received by prospective fathers (Premberg & Lundgren, 2006; Symon & Lee, 2003)

A range of psychological, social and physical support needs have been identified by prospective fathers including acknowledgement of their own unique transitions to parenthood, peer support, the ability to share their experiences with others, their change in identity, their relationships and their future roles as fathers (Baldwin et al., 2018; Baldwin et al., 2019; Barclay et al., 1996; Widarsson et al., 2015). Providing support that extends beyond a focus on labour and birth has been shown to be of value in further studies of antenatal education and support (Matthey et al., 2002; Darwin et al., 2017). Matthey et al. (2002) surveyed 201 expectant mothers and 182 expectant fathers to identify the psychological and infant care topics which they thought about most during pregnancy. Worrying about coping as a new parent coupled with the impact on their relationships were common concerns identified by both men and women. A broader range of topics are required during antenatal classes to improve the preparation for post-birth life (Matthey et al., 2002).

The theme of preparation for lifestyle and relationship changes after birth is further explored in a quantitative survey of 212 fathers and 216 mothers undertaken by Fletcher et al. (2004). The fathers in this study encountered antenatal preparation which identified them solely as a support person to the mother during labour and birth and did not meet their needs as individuals experiencing a life changing transition in their own right (Fletcher et al., 2004). Baldwin et al. (2019) conducted a UK based qualitative exploratory study of 21 first-time fathers' experiences of mental health and wellbeing in transitions to fatherhood. Key findings including preparation for fatherhood, barriers to accessing support, changing relationships and new fathers' needs, and highlighted specific needs to support the mental health and wellbeing of new fathers (Baldwin et al., 2019).

Attendances at midwifery appointments and scans have been shown to be facilitative in promoting a sense of inclusion during pregnancy for prospective fathers (Rosich-Medina & Shetty, 2007; Thomas et al., 2011). However, the focus frequently remains on the mother and unborn baby and men's thoughts and concerns about the challenges of parenting are often not considered or discussed during these times (Thomas et al., 2011). First time fathers are potentially the most vulnerable to the consequences of exclusion from interactions with health care practitioners and have identified that antenatal education does not focus on fathers' needs, leaving them feeling significantly underprepared for birth and the care of their new-born infant (Hamilton & DeJonge, 2010; Thomas et al., 2011). Fathers have reported that they gain a much broader range of information and support from social media, books and websites rather than antenatal education (Fletcher et al., 2008; Premberg & Lundgren, 2006). Nevertheless, further information and guidance in relation to relationship changes and parenting stress may be beneficial for both prospective

parents via inclusive, facilitated antenatal preparation. In a study of the use of an online chat room related to parenting, the topics that fathers searched for comprised of those relating to a lack of inclusion in service provision and the complexities of balancing different demands such as breadwinning and nurturing (St George & Fletcher, 2011). Overwhelmingly fathers want to be involved and informed in relation to their interactions during pregnancy and require support from their pregnant partners and from professionals (Poh et al., 2014b).

2.4.2 Labour and Childbirth

Much of the literature concerning men's experiences of transitions to fatherhood focuses on men's encounters of labour and childbirth. Since men are noted by many researchers as being perceived as 'hard to reach' (Culley et.al., 2013) it makes sense that studies focus on a time when men are a captive audience and can be recruited often in person whilst present on maternity units. Positive and inclusive experiences during labour and birth can be the foundation for men's future adaptation to fatherhood, further underpinning their experiences and relationships post birth (Daniels et al., 2020; White, 2007). Men generally have mixed feelings about labour and birth, finding the experience to be both simultaneously wonderful and distressing but also frequently express feelings of failing to live up to expectations of them during the birth (Dellman, 2004) or being confused about the role they should undertake (Bartlett, 2004). Positive birth experience for men has been associated with supportive relationships with midwives including their ongoing presence in the delivery room and their continued updates regarding the progress of labour (Hildingsson et al., 2011).

Etheridge and Slade (2017) noted that improved communication with fathers during both routine procedures and in emergency situations, where fathers are more likely to feel a loss of control and distress, should be considered to improve the birth experience for both parents. In a meta-synthesis of new fathers' birth experiences, Johansson et al. (2015) found that most men were keen to be involved in their partner's labour and to be present at the birth. They wanted to be respected for what they could contribute but also realised that the event was something that they needed to be well prepared for.

Rosich-Medina and Shetty (2007) evaluated 142 first time fathers' experiences of pregnancy and delivery via a questionnaire and found that men experienced increased anxiety during emergency deliveries with feelings of helplessness and frustration. Pre-birth expectations are often not met during emergency deliveries when compared with fathers whose partners experienced routine vaginal deliveries (Rosich-Medina & Shetty, 2007). These findings mirror those of women experiencing a birth which is different to the one they planned (Hollander et al., 2017) and for both new parents this may be a risk factor for birth trauma and associated post-traumatic stress disorder (PTSD) (Daniels et al., 2020; Etheridge & Slade, 2017; White et al., 2007). Being prepared for labour and birth and associated professional interactions are core to men's experiences of all types of birth with communication being fundamental to creating a positive experience.

Chan and Paterson-Brown (2002) noted that during labour and birth, men and women's perspectives on men's usefulness during labour and satisfaction with the birth were inconsistent. Men felt that they were less useful than their partners perceived them to be, and mothers reported that they thought the fathers were less happy with the experience than they actually were (Chan & Paterson-Brown, 2002).

Furthermore, Kainz et al. (2010) found, overwhelmingly, that mothers described positive feelings towards their partners being present throughout labour where they describe the moment of birth as becoming parents together and being a team. Men are more able to perceive being of benefit during labour and birth if they feel better informed during the antenatal period and are further supported and communicated with by professionals during labour and birth (Porrett et al., 2013). These are important findings which reinforce not only the practical support fathers provide to their partners during labour but also the psychological and emotional transition from childless couple to parents, a key developmental stage for both parents and one which fathers could miss out on if not present at the birth (Draper, 2003; Hildingsson et al., 2014). Being present fosters a team approach to labour. Moreover, anxiety and concern for the mother is reported to reduce when the father is empowered to be assertive and able to act as her advocate (Kainz et al., 2010). This supports the notion of adequate preparation for labour and birth for fathers in order to not only provide meaningful support for their partners and to advocate for their own needs (Kainz et al., 2010). Vehviläinen-Julkunen and Liukkonen (1998) highlighted that fathers wanted midwives to listen to them more and to value their opinions in order for them to better meet the needs of their partners. Further research suggests that the increase in fathers' attendance at birth and their support postnatally reduces levels of anxiety and stress felt by women who feel isolated post birth (Kainz et al., 2010; Porrett et al., 2013). However, a Polish study of over 500 men found that of those men not attending births, the reasons given were complex in nature, citing issues such as the fear of an impact on sexual relationships, what they might observe and respecting their partner's choice not to have them present (Weilgos et al., 2007). Overwhelmingly however, across studies, men want to be present during

labour and birth and are noted to gain significant benefits from positive experiences during this time.

2.4.3 Postnatal Period

There appears to be less focus on fatherhood research during the postnatal period and this may relate to the availability of fathers who predominantly have returned to work by this stage. The limited number of postnatal studies that are available tend to focus on support, information needs, transitions to fatherhood and the retrospectively perceived usefulness of antenatal preparation. Premberg et al. (2008) undertook a phenomenological life-world study of new fatherhood where men identified this as a time of great joy and completeness in their lives where they developed sensitivity and maturity. Postnatal practitioners however have been found to ignore the close relationship between mothers and fathers, leaving fathers frequently feeling left out and like an outsider in their own homes during visits (Baldwin et al., 2019; Ellberg et al., 2010; Fletcher & St George, 2011). Men have described postnatal care as entirely female orientated with staff being paternalistic in their approach to decision making, thus reinforcing their unequal approach to caring for mothers and families (Ellberg et al., 2010). In the early weeks of parenthood, new fathers perceived their role to be more about helping out than having a clearly defined fathering role and they lacked awareness about the positive impact that activities such as basic play and reading to infants could have on their child's developmental outcomes (Hamilton & DeJonge, 2010, Ramchandani et al., 2005). In a significant finding from the Born and Bred in Yorkshire cohort study (Darwin et al., 2017), men doubted the validity of their feelings of distress in the postnatal period. They were concerned that if they shared these feelings, it would result in a change in the focus of professional's

attention away from their partners. Furthermore, in a study of couples' experiences of postnatal psychosis, fathers here too were disinclined to ask for help despite feeling overwhelmed by their experiences (Doucet et al., 2012). These reported sentiments may compound the reluctance of men in accessing support for their mental health needs and further reinforce traditional male gendered norms around help-seeking especially for mental health problems (Seidler et al., 2016).

Hildingsson et al.'s (2009) survey of new fathers aimed to establish their level of satisfaction with postnatal care after a more family centred model of care was introduced in a maternity unit. Family centred care in maternity moves on from an entirely women centred approach to acknowledging all members of the family as integral to the wellbeing of each other. This model has been used in children's nursing in the UK and internationally for a number of years and focusses on a strengths-based partnership between parents and healthcare providers (Shields, 2010). There is however some debate about how achievable true family centred care is and that a family inclusive practice philosophy should be considered as a compromise. Whilst Hildingsson et al. (2009) did not report any significant difference in men's satisfaction from before to after the implementation of the model, they did find that the men's dissatisfaction was related to a lack of support from staff as opposed to whether the provision was woman centred or family centred (Hildingsson et al., 2009). However, in this study different groups were used to assess satisfaction before and after the introduction of the model and questionnaires were sent to women to pass onto their partners thus introducing the potential for gatekeeping and differing characteristic between the samples used before and after implementation.

Fathers are sometimes required by healthcare professionals to assume primary care of their infant due to maternal ill health or post-delivery complications and in

instances where they find themselves with a child in neonatal intensive care (NICU) or special care baby unit (SCBU). In a phenomenological study involving 15 fathers, Erlandsson et al. (2008) aimed to understand the meaning of men's lived experiences whilst being in sole charge of their infants immediately post birth. The fathers described a feeling of isolation and a perception of their presence as unusual by other parents in this environment when they were caregiving without the mother present. Fathers experienced a variety of feelings during this time including a gradual acceptance that they were in charge of their baby and that they needed to rise to the challenge. These feelings were accompanied by other ones which included being in a privileged position and getting to know their babies better than the mother at this point (Erlandsson et al., 2008). However, Lundqvist and Jakobsson (2003) identified that new fathers find it difficult to carve a place for themselves if both parents are present in the NICU, mirroring findings in relation to fathers' care of their children in the home environment when the mother is also present (Beglaubter, 2019). When general anaesthetics are required for caesarean sections, both parents miss the birth and therefore a significant "episode" in their transitions to parenthood. The emotional work done by fathers under these circumstances is often overlooked (Barnard, 2014). Nevertheless, opportunities for skin-to-skin contact for fathers may provide bonding opportunities to mitigate the experience of missing the birth (Lundqvist & Jakobsson, 2003) and support groups for new fathers with pre-term babies alongside good communication has been identified as good practice. However, Barnard (2014) also argues that the opportunities for father inclusivity may depend on the philosophy of the particular NICU/ SCBU and the practitioners therein.

Research suggests that the main causes of concern and distress in new fathers are comparable to those of new mothers and include crying babies, settling babies and the impact of other major life events which occur at the same time as becoming a new father (Bartlett, 2004; Fletcher et al., 2008; Rathbone & Prescott, 2019).

Meaningful social support has been shown to be protective of issues such as postnatal depression in both mothers and fathers (Schumacher et al., 2008; Wee et al., 2011). Castle et al. (2008) identified that both mothers and fathers who reported high levels of social support antenatally showed less distress at 6 weeks postnatally. The perception of emotional support available to fathers and both the practical and emotional support available to mothers decreased from pregnancy to the postnatal period. Informal support from different platforms has been shown to be essential for prospective and new parents (Castle et al., 2008; Fletcher & St George, 2011; Morse et al., 2000). However, since community and healthcare provision generally lack a father focus and as antenatal classes have been deemed to have limited value for fathers, there is potential for more marginalised new fathers to fail to receive the support they desire or need (Carlson et al., 2014).

As previously discussed, there is an increase in new fathers' use of the internet for both formal information and as a tool to gaining support from their peers (Eriksson & Salzmänn-Erikson, 2013; Fletcher & St George, 2011) with websites such as 'The Dadsnet' reporting subscriptions of around 10,000 fathers (A. Fergusson, personal communication, 31st October, 2019). Asenhed et al. (2014) analysed the content of blogs from 11 first time fathers. Men used these blogs to gain tips on positive fathering but also expressed frustrations such as exclusion in visits to professionals (Asenhed et al., 2014). This relatively novel source of information has the potential to shed new light on the needs of fathers which can be missing from more traditional

studies and could be incorporated into more formal support. In an effort to innovate and improve access to support for men postnatally, Fletcher et al. (2017) developed a series of mobile phone text messages aimed at providing support to new fathers from 12 weeks gestation to 24 weeks post-birth. The content of the texts included positive relationship support, physical health tips and specific support for lone parents. They also included links to information and mood tracking and in the post-study survey of 101 men, 92.8% indicated that the text messages supported them in their roles as new fathers. They acknowledge that traditional methods of receiving health promotion information may not be relevant or accessible to new fathers and that innovative ways to support their mental health would be required moving forward (Fletcher et al., 2017).

2.4.4 Paternal perinatal mental health

There is increasing acknowledgement from both researchers and practitioners of the distress and mental health problems which men can experience in the perinatal period (Scarton, 2008). Where there was once a perspective that these were maternal problems and associated with hormonal imbalances, it is now understood that fathers can experience perinatal depression and anxiety and poor mental health in response to birth trauma. Nevertheless, the basis of perinatal mental health problems is also known to be associated with gendered and social pressures and expectations (Buist et al., 2003) which both mothers and fathers are subjected to.

Paternal postnatal depression

Rates of fathers experiencing postnatal depression vary due to the different contexts, countries and measures used (Pérez et al., 2017). The most frequently quoted rate

suggests that approximately 10% of fathers experience postnatal depression (O'Brien et al., 2017) but, since routine screening does not take place in the UK (Philpott, 2016) this number is likely to be an underestimate. Da Costa et al. (2019) found that men who experience depression during their partners pregnancy are seven times more likely to experience depressive symptoms two months after the birth.

There are a number of psychological reactions experienced by men as they transition to fatherhood and try to find their place and role as a father in relation to their partner, their child and paid work (Chin et al., 2011b; Morse et al., 2000). Considering the lack of access to services (Schofield et al., 2000) and different manifestations of perinatal distress reported in men, for example, substance misuse, anger and avoidance behaviours (O'Brien et al., 2017; Perez et al., 2017), paternal postnatal depression may be under-reported, under-screened and therefore under-identified. Studies have recommended antenatal and postnatal screening for paternal postnatal depression (Da Costa et al., 2019; Dallos & Nokes, 2011; Fletcher et al., 2008; O'Brien et al., 2017) but this is far from routine in maternity or well child service provision. Fletcher et al. (2014) called for more focussed treatments which appreciate the uniqueness of the fathering role and its implications thus raising the profile of men's experiences in their transitions to parenthood. Moreover, low parenting related self-efficacy and lower self-esteem in new and prospective fathers has been associated with paternal postnatal depression (Singley & Edwards, 2015).

Paternal postnatal depression and anxiety are recognised clinical diagnoses, the impact of which affect not only the father but the mother and developing infant (Leach et al., 2016; Ramchandani, et al., 2008; Ramchandani et al., 2005). Perinatal depression affects a father's ability to bond with his baby or to develop a close

relationship with them and has been shown to impact on emotional wellbeing and the behaviour of children as they go through the early years (Letourneau et al., 2012; Ramchandani, et al., 2008; Ramchandani et al., 2005). Depressed fathers in the postnatal period have been found to read less (Davis et al., 2011) and sing less to their infants (Paulson et al., 2006) both impacting on child development (Paulson et al., 2009). In addition to the direct effects on their infants, paternal postnatal depression impacts significantly on partner relationships (deMontigny et al., 2013).

Paternal postnatal depression is strongly associated with maternal postnatal depression (Baldwin et al., 2018; Figueiredo et al., 2008; Goodman; 2004; Wee et al., 2011) with 50% of men whose partners have postnatal depression also experiencing depressive symptoms (Letourneau et al., 2011). Paternal postnatal depression is associated with a number of other factors such as unrealistic expectations around pregnancy and becoming a parent, perinatal relationship difficulties, lack of social support, lack of paternity leave and isolation (Baldwin et al., 2018; Barclay & Lupton, 1999; Condon et al., 2004; Philpott & Corcoran, 2018; Morse et al., 2000). In new fathers in the USA, Bamishigbin et al., (2020) found that factors such as parenting self-efficacy, material provision and time spent with infants were protective of paternal postnatal depressive symptoms in the first year postnatally.

Studies of perinatal anxiety, depression and stress in fathers has predominantly used quantitative methodology with a view to providing measures of incidence or prevalence (e.g., Bamishigbin et al., 2020; Bergstrom, 2013; Fisher et al., 2012; Leach et al., 2015; Underwood et al., 2017) and so little is known about the lived experiences of men who have had postnatal depression. Many studies have been conducted on populations outside of the UK e.g., in Sweden (Carlberg et al., 2018),

in the USA (Bamishigbin et al., 2020; Fisher et al., 2012; Sockol & Allred, 2018), in Germany (Gawlik et al., 2014) and in Australia (Leach et al., 2015) and many use existing measures used for studies on mothers e.g., the Edinburgh Postnatal Depression Scale (EPDS). Massoudi et al. (2013) suggest that this tool, used for assessing maternal postnatal depression, is not useful for new fathers except to detect major depression and that it is more likely to identify worry, unhappiness and anxiety as opposed to mild or moderate postnatal depression (Massoudi et al., 2013) therefore endorsing the call for a more accurate measures for new fathers (Freitas et al., 2016). In a recent evidence synthesis, Darwin et al. (2021a) suggested that the EPDS produces notably variable results and argue for further research to inform more evidence-based assessment of partners' mental health perinatally.

It is also suggested that men may display depressive symptoms differently to women, for example. with anger, irritability and withdrawal, which would not necessarily be identified using current screening tools (Singley & Edwards, 2015). Caution should be applied in generalising findings across all groups of men (Singley & Edwards, 2015) and there is a need to identify a more robust tool for measuring postnatal depression in new fathers and at different time scales throughout the postnatal period. It has been identified that paternal postnatal depression contributes significantly to healthcare costs in the UK (Edoka et al., 2011). Further research and analysis of paternal perinatal mental health problems is warranted to make a comparable estimate with the £8.1 billion (per one year cohort of UK births) identified as the cost to society of maternal perinatal depression, anxiety and psychosis (Bauer et al., 2014).

Fear of Childbirth

Fear of childbirth, also known as Tokophobia, has been studied in both prospective fathers and mothers (Nilsson et al., 2018; Serçekuş et al., 2020) and has been associated with poorer postnatal mental and physical health outcomes, increased levels of perinatal stress (Philpott et al., 2017) and an increased preference for elective caesarean deliveries (Nilsson et al., 2018). Hildingsson et al. (2014) surveyed 1047 expectant fathers, followed up at two months and one year post birth and found that men with fear of childbirth perceived more difficulties in pregnancy, attended fewer antenatal classes and struggled with identity during this time. Fear of childbirth in prospective fathers may manifest itself independently to that of the mother (Ryding et al., 2018) and further studies are necessary to establish specific risk factors for fear of childbirth in men. Traditional masculine identities such as being strong and emotionally restrained are likely to be at odds with expressing childbirth fear and may present as a challenge to masculine identity and fathering identity development (Hildingsson et al., 2014) potentially compounding the reservations men have in articulating their fears and therefore gaining the support they may need.

Men's experiences of birth trauma and associated post-traumatic stress disorder (PTSD) or post-traumatic stress syndrome (PTSS) have gained increased research attention in recent years. In White's (2007) qualitative study of 21 fathers who had experienced birth trauma, a lack of inclusion and communication during the birth, visual flashbacks and the long-term impact on sexual relationships were some of the experiences shared by the participants. White (2007) also highlights the importance of recognising that new fathers may experience a birth as traumatic even if the event was not perceived as traumatic by their partner and/ or professionals.

In further work by Etheridge and Slade (2017), eleven men were interviewed who had witnessed a traumatic birth and offered vivid accounts of the event alongside expressing the fear and the lack of control they experienced. Alexander et al., (2019) undertook a pilot study to compare rates of PTSS in fathers of very low birth weight babies (VLBW) with fathers of full-term babies 2-4 years after the birth. The fathers of VLBW babies were found to experience significantly higher levels of PTSS compared with fathers of term babies which also concurred with findings from the associated mothers (Alexander et al., 2019). Other research further indicates that fathers' experiences go underacknowledged by professionals in relation to birth trauma (Daniels et al., 2020). However, when men are well supported and communicated with, they are found to be better positioned to be calm and effective supporters of their partners (Kainz et al., 2010).

2.5 Summarising critique

Overall, this review of the literature identifies a continued need to better understand the experiences of men as they transition to first time fatherhood. Being a father can positively influence wellbeing if men are well prepared and are able to reconcile their identity and role changes. It is acknowledged that whilst men are more involved in pregnancy, childbirth and parenting than ever before, they continue to face barriers to accessing the information and support that they need (Bateson et al., 2017).

There is a consensus in most studies reviewed here, spanning the past thirty years, which points both to a continued lack of concern regarding father's needs and a tendency toward exclusion of their voice in research related to many aspects of reproductive and maternity care (Culley, 2013; Ellberg, 2010; Mitchell & Chapman,

2001a; 2001b). Men have been described as 'hard to reach' from a research and service provision point of view (Bayley et al., 2009). However Culley (2013) proposes that, particularly in research, strategies are often not designed to maximise male recruitment. Other authors such as Draper (1997) have suggested that in arenas such as child-birth education, men are seen merely as an extension to mothers and that there is a lack of longitudinal data related to the impact on antenatal education and men's experiences of fatherhood. Whilst attempts are being made to innovate and improve access to information and support for new fathers (Fletcher et al., 2008; 2019), more in depth and nuanced understanding is required to more fully understand their needs in relation to becoming fathers.

Previous studies have, for the most part, focussed on one aspect of fatherhood, for example, paternity leave, experiences in healthcare, generational influences and so on. What is currently lacking, which this study aims to address, is an exploration of how these multiple factors interact during transitions to fatherhood to influence identity development.

Many of the studies around transitions to fatherhood identify significant barriers to fathers' inclusivity within healthcare settings (Finnbogadóttir et al., 2003). In these circumstances, men describe feelings of being a bystander and ignored by professionals (Widarsson et al., 2015; Barclay & Lupton, 1999) and a recognition that fathers have individual needs beyond merely being a support person to the mother during labour and birth (Thomas et al., 2011; Widarsson et al., 2012). These themes have repeatedly featured in studies over the past thirty years but do not appear to have made a significant impact on policy and practices in health care or employment settings. While many men are embracing the roles and responsibilities

of 'new fatherhood', these structural barriers together with gendered norms and social expectations, are impeding progress.

As this review of literature has shown, transitions to fatherhood are complex, multi-faceted and not well understood. Further research is required to improve our understanding of the factors which facilitate or inhibit fathering and fatherhood. There is of course diversity amongst the experiences of fathers and the fatherhood experiences of differing groups of men including gay, bisexual or trans fathers, non-biological fathers, non-resident fathers, immigrant fathers and young fathers can be expected to vary. However, it is argued that an improved understanding of transitions to fatherhood is required in order to provide evidence to support policy and practice developments, specifically in the UK. To provide a broader, in-depth exploration of transitions to fatherhood without pre-determined expectations of the findings, an exploratory study of transitions to first time fatherhood was undertaken. Adopting a constructivist grounded theory methodology (Charmaz, 2012a; 2012b; 2012c) provided a platform for adaptively pursuing the lines of enquiry highlighted by the participants as important to them. This approach therefore grounded the findings and theoretical framework within the stories and narratives of these new fathers.

2.5.1 Research question, aims and purpose of the study

Research question

- What is the experience of transitioning to fatherhood amongst heterosexual cis gender men in the contemporary UK context?

Aims

- To understand and explain the experiences of these men as they transition to fatherhood.

Purpose

- To develop a constructivist grounded theory of heterosexual cis gender men's transitions to fatherhood in the contemporary UK context

Outcomes

- Gaining an improved understanding of heterosexual cis gender men's transitions to fatherhood and their experiences and interactions with others during this time to inform policy and practice.

Chapter 3 Methodology, Design and Conduct of the Study

This chapter presents the research paradigm, laying out the ontological, epistemological and methodological features that shaped the design and conduct of the study. Constructivist grounded theory methodology and methods of data collection are detailed alongside ethical considerations and a personal narrative on my reflexivity and positionality throughout the study. The final section of this chapter describes the process of analysis which led to the three theoretical categories and associated subcategories presented in the subsequent findings' chapters.

3.1 Research Paradigm

A research paradigm is “the set of common beliefs and agreements shared between scientists about how problems should be understood and addressed” (Kuhn, 1962/2012) and includes ontology, epistemology and methodology (Sullivan, 2019). This thesis is framed within the constructivist/ interpretivist paradigm, the elements of which will be explored below.

3.1.1 Ontology

Ontology is concerned with beliefs about the nature of reality, what exists and what is real (Walsh et al., 2014). A realist ontology provides the foundation for positivist

approaches to research which assume that there is one singular reality to be discovered using objective measurements (Guba & Lincoln, 2005). Those conducting research within this paradigm argue that due to their objective approaches, and large sample sizes, generalisations can be drawn (Denzin & Lincoln, 2011). In contrast, relativism acknowledges multiple realities and therefore multiple truths, proposing that an individual's reality evolves depending on their experiences and the meaning ascribed to those experiences (Appleton & King, 1997; Charmaz, 2017). Those conducting research underpinned by a relativist ontology are often concerned with participants' experiences and interpretations of the world, acknowledging that these will be unique to the person but may share commonalities with others (McLeod, 2001). For example, transitions to fatherhood are likely to be shaped by individual men's experiences and interactions with others, but there may also be similarities with other fathers. Findings from studies conducted from a relativist ontological perspective do not seek to offer widely generalisable claims, however knowledge may be transferrable in some instances where commonalities between the characteristics and the contexts of participants exist (Lempert, 2007). This research is conducted within a relativist ontology.

3.1.2 Epistemology

Epistemology is concerned with what can be known about reality, knowledge, beliefs and truths requiring the interpretation of the meaning of events and interactions between individuals and groups. Epistemology informs the subjectivity or objectivity of research approaches and that of the researcher (Annells, 1996). The 'insider' or 'outsider' positionality of the researcher identifies aspects such as their objectivity or subjectivity. Outsider approaches typically align with a positivist stance, seeking to

explore phenomena 'at a distance'. This approach contends that the distance between the researcher and the phenomenon under investigation permits objectivity and prevents undesirable researcher influence on the study process and outcomes (Whorley & Addis, 2006). Conversely, insider approaches are inherently subjective. They value interaction with participants and view such interaction as integral to the research process, exploring participant versions of reality. Thus, insider approaches are routinely employed within an interpretivist and/or relativist paradigm (Ponterotto, 2005). In such an approach, the influence of the researcher is acknowledged and embraced via processes such as reflection and reflexivity (Eatough, 2012). However, in this study I am not claiming absolute insider status and I acknowledge that my positionality will be distinctly different from that of my participants. Whilst I experience them subjectively, my distance allows some level of objectivity in the analysis.

This research adopts a subjective epistemology and explores fatherhood through the lens of symbolic interactionism and interpretivism.

3.1.3 Methodology

Methodology is the process by which knowledge can be derived and how data can be meaningfully and systematically analysed (Birks & Mills, 2015; Denzin & Lincoln, 2011). Different methodologies are separated by their ontological and epistemological roots indicating quantitative, qualitative or mixed methods approaches. Quantitative approaches to the study of fatherhood have included a focus on areas such as rates of paternal perinatal mental health problems (e.g., Condon et al., 2004) and the psychological and infant care topics which prospective parents think most about during pregnancy (e.g., Matthey et al., 2002). Such

research contributes useful data to support areas of practice such as the commissioning of services. Other quantitative studies have measured factors such as gender role attitudes (e.g., Katz-Wise et al., 2010) and rates and frequency of fathers reading to their children (e.g., Duursma et al., 2008), amassing knowledge that is frequently found to underpin children's educational and developmental policies e.g., The Healthy Child Programme (Department of Health, 2009). Whilst quantitative research provides a broad insight into different aspects of fatherhood, such as changing trends in the gendered division of household labour and rates of paternal postnatal depression, these findings can only go so far in telling the story of transitions to contemporary fatherhood. These experiences and contexts may influence men's answers to more rigid questions on outcome measures, thus restricting the ability to contextualise these answers (Schwandt, 1994) and thus preventing a deeper exploration of the findings.

Qualitative approaches to research allow access to the nuance, complexity and multiplicity of men's experiences that is not constrained by pre-existing assumptions or attempts to classify or quantify. To date, qualitative approaches to exploring new fatherhood have used interviews and focus groups to elicit men's experiences of specific factors, such as their mental health needs (e.g., Baldwin et al, 2019; Fletcher & St George, 2011), preparation for fatherhood (e.g., Barclay & Lupton, 1999; Fenwick et al., 2012; Gage & Kirk, 2002), experience of birth trauma (e.g., Daniels et al., 2020; White, 2007), interactions with health services (e.g., Finnbogadóttir et al., 2003; Hildingsson et al., 2011) and the social aspects of fathering (e.g. Beglaubter, 2019; Finn & Henwood, 2009). These studies have provided deeper insight into the experiences of fathers in different contexts, providing the foundations for an increasingly clear evidence base related to men's needs and experiences during this

time. What remains scarce are studies which attempt to explain *why* men experience fatherhood the way that they do. Furthermore, the singular focus of many of the aforementioned studies, may prevent this deeper understanding of the complex interactions of the different contexts in which new fathers enact fatherhood and as such, there lacks a more comprehensive or overarching understanding of this phenomena. To provide an in-depth exploration of the complex experiences of men in their transitions to fatherhood, and acknowledging the multiple realities of new fathers, a relativist ontology and constructivist-interpretivist epistemology is adopted in the present study.

The methodology applied in this research is constructivist grounded theory methodology (CGTM) (Charmaz, 1990; 2014), providing a lens through which the transitions to fatherhood can be viewed and more deeply explored. This methodological approach acknowledges not only the multiplicity of experiences and interactions which shape men's constructions of fatherhood, but also that the performative nature of fatherhood means that it takes place in arenas that variously facilitate, manage or constrain how fatherhood can be done. It is helpful at this point to consider the theoretical perspective of symbolic interactionism and epistemology of social constructivism in order to assess their applicability to the study of transitions to fatherhood.

3.1.4 Symbolic interactionism

Symbolic interactionism is a theory of social action underpinned by pragmatism and is based on the theoretical perspectives of George Herbert Mead (1934), further explicated by Herbert Blumer (1969). Pragmatism in research relates to the usefulness of the knowledge gained, its applicability to people's existences whilst

simultaneously, not claiming to uncover a singular reality (Cornish & Gillespie, 2009). Symbolic interactionists propose that humans are active participants in the way they interpret, react to, and respond to the actions of others and as such are unpredictable in those reactions (Sharp, 2010). By “taking the role of other” (Mead, 1934, p362), during interactions with people, individuals respond in a manner, influenced by their interpretations of the person they are interacting with from said individuals’ perspective (Charmaz, 1990). They consider the action and reactions of *the other* and respond according to their analysis of their motivations and characteristics (Mead, 1934). For example, a new father’s reaction to a friend joking about life as a new father may be different from how the same new father might react to a nurse offering a similar ‘joke’ whereby he is likely to analyse the motivation of the *other* and react in response to this. There may be a different response based on his interpretation of the interaction, for example, to the ‘banter’ from a friend compared to the nurse as someone in a position of power, where there is potential for him to query his position and role.

The me (public) and I (private) concepts within symbolic interactionism (Mead & Morris, 1967) align with the theoretical perspective of Erving Goffman (1959) and the front stage and back-stage components of dramaturgy. Goffman’s theory and its application to fatherhood was reviewed in chapter two and is further applied in chapter eight in relation to the theoretical framework produced by this thesis.

3.1.5 Social constructivism

Social constructivism aligns with symbolic interactionism and contends that human development is located within an individual’s social environment. Therefore, knowledge is constructed by way of social interactions, with knowing and learning

engrained in social life (Riley & Wiggins, 2019). Charmaz (2014) purposefully chose to label her methodology *constructivist*. At the time when Charmaz was developing CGTM in the early to mid 1990's, social constructionist research did not fit with her philosophical position in that social constructionist research was being presented as 'truths' of the worlds being studied as opposed to recognising the inherent social construction of such (Charmaz, 2014). In the development of constructivist grounded theory methodology, Charmaz contested the objectivity of the researcher in traditional GTM and instead proposed that "we must take the researcher's position, privileges, perspective and interactions into account as an inherent part of the research reality" (Charmaz, 2014, p 13). To this end, the constructions of the researcher are acknowledged as being fundamental to the resulting co-construction of the participants' reality.

3.2 Traditional to Constructivist Grounded Theory

In order to describe the constructivist grounded theory approach, it is useful to explain the theoretical roots of the methodology and why this approach is appropriate to meeting the objectives of this study. Grounded theory methodology (GTM) initially developed in the work of Glaser and Strauss (1967) which was focally concerned with examining the experiences of dying in hospitals and hospice settings. GTM employs an inductive approach to data collection and analysis which aids substantive or context specific theory development derived directly from the data gathered and therefore contrasts with grand theorising (Heath & Cowley, 2004). GTM is not only a method and process by which analysis is undertaken but is also, although not always, a product of the research itself in its production of a substantive

theory (Bryant, 2002). Such theory is grounded in the data, which is collected most often, but not exclusively, via interviews (Higginbottom & Lauridsen, 2014).

Traditional GTM is influenced by positivist epistemology, the major bedrock of social research conducted during the 1960's (Bryant & Charmaz, 2007). Glaser and Strauss (1967) argued that GTM offered a qualitative approach which was systematic, replicable and rigorous thus aligning it with objectivist methodologies seen as the gold standard at the time (Charmaz, 2000; 2008). However, rejecting the positivist concepts of falsification and hypothesis testing, they describe an organic process of theory 'emergence' based on the data gathered (Dunne, 2011). Glaser and Strauss (1967) argue that instead of continually testing existing theories there is an opportunity to 'discover' new theories concerning different phenomena which can be achieved directly from the analysis of the data gathered. At the time of its foundation, GTM provided a fresh mechanism via which phenomena could be understood outside existing theoretical frameworks. GTM is a methodology considered to be well suited for a novel area of interest such as the one being investigated in this current study or when phenomena are not well understood or require further exploration (Suddaby, 2006). The iterative nature of GTM thus enables the researcher to base theory development on the data itself providing an opportunity for a fresh perspective, removing external agendas and the avoidance of forcing the data into existing theoretical constructs (Urquhart & Fernandez, 2006).

Since the original development of GTM, the methodology has developed further and there are now several iterations of grounded theory such as CGTM (Charmaz, 2000; 2012a; 2014) and Clarke's situational analysis based GTM (Clarke & Friese, 2007). These are recognised as a family of approaches with differing epistemological underpinnings (Bryant, 2009; Charmaz, 2012b). At the core of these approaches lie

a set of unique methodological stages including theoretical sampling (Dunne, 2011), constant comparison (Gordon-Finlayson, 2019) and explicitly addressing the theoretical sensitivity of the researcher (Bryant, 2009; Charmaz, 2014; Dunne, 2011; Suddaby, 2006). The explanation of these core components and application to the present study are described throughout the rest of this chapter.

Integral to Charmaz's approach, is the role of the researcher in influencing theory development, thus indicating one of the fundamental differences between CGTM and traditional GTM (Charmaz, 2012b, 2014). The researcher is an active agent, engaged in a creative process whilst conducting research (Suddaby, 2006). In contrast to Glaser and Strauss (1967), Charmaz (2008) contends that researcher interpretations and constructions should be embraced and must not be separated from those of the participants. The researcher's previous experience and knowledge is argued to shape the research process and data analysis and as a social being, the researcher will also construct their own reality based upon their experiences and education (Charmaz, 2008; Clarke & Friese, 2007). This in turn shapes research questions and interview schedules and will have a substantial influence on data analysis and theory development. Indeed, the later development of a more formulaic approach by Strauss and Corbin (1998) was criticised for being over prescriptive and potentially stifling the creative component required for true conceptualisation (Breckenridge & Jones, 2009; Reichertz, 2007).

3.3 Reflexivity and Positionality

Charmaz (2014) defines reflexivity as

“The researcher’s scrutiny of the research experience, decisions and interpretations in a way that brings him or her into the process” (p344).

Reflexivity in this research required that I explicitly embedded practices of critical reflection in my work, such that I continually evaluated my positionality, interests and personal experiences and considered how they contributed to and impacted upon all stages of the research process. (Birks & Mills, 2015; Clarke & Friese, 2007; Cooney, 2011; Hoare et al., 2012; Suddaby, 2006). In this thesis, my reflexivity is illustrated in memos written throughout the process (see appendix A). Whilst memo writing serves the reflexive process, it is also essential to the analytic process (see section 3.10.6 for further explanation of memo writing). Consideration of the participants as individuals, their narratives and how their experiences compare, contrast, and synthesise to form the theoretical framework of **reconciling father identities** is demonstrated by way of memo writing throughout.

Further reflexive practice occurred via critical conversations with my supervisors, offering an additional layer of questioning adding further rigour to the process. Discussions with academics, service providers and service users at conferences and workshops added to my learning and reflections from these interactions, further shaping my analysis (Starks & Brown Trinidad, 2007). Fathers I have met either informally or through research networks have indicated that they identify with my findings. In conversations during supervision, I have been challenged to think more broadly than just from my perspective as a former healthcare practitioner. In further sections and in examples of memo’s (see Appendix A) reflexivity is discussed in

relation to my exploration, analysis and interpretation of the data (Engward & Davis, 2015).

Discussion of reflexivity and positionality are core to CGTM (Eatough, 2012). Via memo writing (Hoare et al., 2012; Holton, 2007) I was able to continually explore and reflect on my interactions with participants during interviews, my reaction to the data and to recognise the influence of my own world view and experience on my analysis and findings (Charmaz, 2014; Frost & Bailey-Rodriguez, 2019). In this way, memos served as both an analytical tool and a tool for reflexive practice.

This research study began in the discipline of health sciences with the original aim to explore men's experiences of service provision in the perinatal period. As a healthcare practitioner, I had developed an interest in working with new fathers having worked with children and families in a number of clinical and community settings. My initial motivation for undertaking this study was my perception that men were not well provided for by health services during their transitions to fatherhood. Having engaged with the literature in this area, it became clear that prospective and new fathers may have challenging encounters with health professionals and so this was the starting point for my study.

In addition to my academic knowledge and professional experience, I have recently become a mother. I have seen my husband make this transition and have heard my friends' stories of their experiences. It was therefore not possible for me to approach this study with as open a mind as the original incarnation of grounded theory would advocate (Glaser & Strauss, 1967). Fortunately, as grounded theory has evolved and particularly in CGTM, the researcher's positionality has been discussed and acknowledged much more. Moreover, the original requirement of the researcher in

grounded theory to be a passive participant in the research process both in interviews and in the subsequent analysis of transcripts has been acknowledged as flawed in contemporary versions of the methodology (Charmaz, 2006; Bryant & Charmaz, 2007).

After the first year of this study, I moved countries and changed disciplines which opened new lines of empirical and theoretical knowledge in psychology and sociology and a shift in the lens through which I was viewing my research and process. Whilst the initial set of interviews posed a variety of questions to the new fathers, there continued to be a focus on health. However, as the iterative process of data collection and analysis ensued, in the first few transcripts I saw that there were more than just the experiences in health services being shared by participants and that their identity development was significant in their narratives. This initial analysis provided the rationale for further focussed lines of enquiry related to life change and identity development whilst continuing to provide the participants with the opportunity to share other experiences of their transitions to fatherhood. Having paused engagement with the literature between confirmation of the PhD and the development of the theoretical categories, on re-engagement with more recent studies, I found that whilst my findings echoed analyses from others' studies, they also contributed new, original insights into the multiple factors influencing identity development in transitions to fatherhood.

3.3.1 A woman interviewing men

Being a woman interviewing new fathers, requires significant discussion and reflection in order to ensure reflexivity has taken place in the research process. Power dynamics within interviews can vary depending on such factors as the topic

matter and the location of the interview and perceptions of both the interviewer and interviewee (Mills et al., 2006a). In CGTM, a reciprocal relationship with participants is embraced in contrast with objectivist approaches where the researcher is seen to be detached from the process (Mills et al., 2006b). Arendell (1997) suggests that gender dynamics have the potential to result in a female interviewer being exposed to more misogynistic and patriarchal attitudes if they are interviewing male participants about a particularly masculinised topic. The topic of transitions to fatherhood appeared not to fit with Arendell's (1997) hypothesis and despite discussing concepts such as masculinity and fatherhood identity, I did not encounter any animosity or challenging attitudes towards me. In the process of conducting the study, several of the participants described the process of participation as cathartic and most were eager to share their experiences. Other studies have also highlighted the potential therapeutic benefits of qualitative interviews for participants (Murray, 2003), particularly when studies focus on taboo or hitherto under-researched phenomena and where other spaces for reflection and sharing may be lacking.

As a white, cisgender, heterosexual woman, married to and having procreated with a heterosexual man I fit with the normative construction of *parent*. Despite having a working-class background, I am a trained professional and academic which shapes the position from which I engaged with this study. I acknowledge that this affected not only my responses and interactions with the men during interviews but in the emphasis placed on certain findings in the literature and how this was applied to my study. There was a dichotomy for me as a practitioner turned researcher in wanting to hear men's accounts of becoming fathers whilst attempting to resist the role of helper. I initially perceived my role as the interviewer to be both as empathic but objective as possible during the interviews to prevent me from influencing or

endorsing individual perspectives and accounts. As the interviews proceeded and I learnt more about CGTM I understood that I was not required to be objective and that I needed to be at ease with the influence I had on the data, that I could not avoid this and nor should I (Charmaz, 2014; Mills et al., 2006a). I acknowledged my active participation in the subjective nature of this research methodology and associated processes.

The interpretations in the findings' chapters are grounded in my own experiences as a practitioner, researcher and a parent. By using Charmaz's (2014) guidelines for constructivist grounded theory methodology, I was guided by the data and therefore this superseded any preconceived notions and allowed the data to guide theory development. In appendix 2. and 3. I have presented images and photographs of my analytical process to provide insight into the path to the substantive theoretical framework presented and to show rigour in the methodological process undertaken. Due to the requirement to conceptualise findings in CGTM, being faithful to participant's views and accounts was challenging. CGTM requires the researcher to take descriptive accounts of participants and ask "why" and "how" questions with the purpose of conceptualisation and therefore formation of a substantive theory or theoretical framework (Charmaz, 2014). Because of this abstraction of the data, individual narratives may be lost. One way to mitigate this distance from the men's voices was to present a brief biography of each new father (see Chapter four) to provide a further element of subjectivity and to reflect my commitment to sharing their stories. In addition to this, verbatim extracts from data are used to support the theoretical categories and allow for some of the men's experiences and voices to be shared.

3.3.2 The literature review debate

The very nature of grounded theory methodology denotes that all findings must originate from the data collected and analysed, and that traditional grounded theorists suggest that extant knowledge should have no influence on this (Glaser & Strauss, 1967). It is useful to highlight that, engagement with existing literature in this thesis takes an approach, which directly aligns with Charmaz's flexible and creative CGTM (Charmaz, 2014).

To be open minded is a key element of the original incarnation of GTM (Glaser & Strauss, 1967; Glaser, 1978) and to prevent a bias in the interpretation of the data, some researchers have avoided undertaking literature reviews prior to commencing a GTM study (Dunne, 2011; Hallberg, 2010). Charmaz (2014) argues that this is an unrealistic and potentially unethical approach and one which could lead to poor analysis and weak theory development due to issues such as a lack of theoretical sensitivity in the researcher, for example. Theoretical sensitivity in this study (see section 3.5.6) benefited from my engagement with current literature and a reflexive approach was embedded throughout to ensure that data were not forced into existing theoretical frameworks (Urquhart & Fernandez, 2006).

A level of understanding of the participants and their life situations alongside knowledge of previous research in the area is required to prevent unnecessary duplication and to create a robust research plan. Without this approach, it would be challenging to formulate an appropriately focussed interview schedule or to apply the concepts of theoretical sensitivity (Hallberg, 2010) (see section 3.5.6) and theoretical saturation (Roberts, 2008) (see section 3.5.8) to the study. A broad understanding of the subject matter is also essential in ensuring that the developing theory is

applicable to the topic area and subject group (Urquhart & Fernandez, 2006). In traditional GTM, the main concern is that a researcher's familiarity with the literature would have the potential to inhibit the open-mindedness required for rigorous data analysis and therefore development of the evolving theoretical framework. Being open to the meaning of the data does not require complete unfamiliarity to the topic at hand (Dey, 2007). The process of undertaking a literature review facilitates the identification of knowledge gaps, the formulation of robust research questions and determines appropriate methodological choices (Urquhart & Fernandez, 2006). In order to authentically provide a rationale and justification for this study, and to meet the requirements of the PhD confirmation a review of the literature was undertaken. As mentioned above, this study was initially commenced within health sciences in New Zealand, with a focus on men's experiences within healthcare during the transition to fatherhood. After confirmation of the PhD and subsequent relocation to the UK, no further literature was accessed until the tentative theoretical categories were developed. At this stage, a broader review of psychological and sociological literature was required due to the direction the analysis had taken. On re-engagement with both newly published health literature and new psychological and sociological literature not previously engaged with, the analysis and emerging theoretical framework in the present study were seen to concur with, complement and add to the existing evidence base. This re-engagement with the literature also provided me with further level of theoretical sensitivity in the final stages of my analysis and as Charmaz (2014) suggests this literature can also be seen data, adding further context and nuance to the formation of the theoretical framework.

Summary

Constructivist grounded theory methodology complements the research objectives for this study as it aims to improve the understanding of and provide a theoretical explanation for the multiple factors influencing transitions to fatherhood.

3.4 Methods

3.4.1 Recruitment & Sampling

Recruitment advertisements were initially placed on the social media sites, Twitter and Facebook and the university staff intranet pages (see appendix D).

Subsequently, these advertisements were shared further by those viewing the adverts and by some third sector parenting organisations who had, after seeing the adverts, expressed a desire to support the recruitment. The new fathers contacted the researcher directly via email or telephone.

Purposive sampling (Crowley, 2019) was undertaken with the criteria of recruiting self-identifying heterosexual men who had recently become a first-time father. CGTM does not require a representative sample of the population, but ideally recruits those with a similar or shared experience (Coyne & Cowley, 2006). In keeping with the exploratory nature of this study and the lack of requirement to recruit a representative sample of the population there were no specific inclusion or exclusion criteria related to ethnicity, English as a first language, socio-economic status or marital status. However, given that the study was undertaken in English and used particular channels of recruitment, it was likely that the sample would be English speaking and of a narrow demographic. When prospective participants made

contact, participant information sheets (Appendix F) were emailed back to them, enabling them to make an informed decision about participation (British Psychological Society [BPS], 2021). Of the 21 information sheets emailed out, twelve men consented and participated in the study over a period of 12 months from November 2016 to October 2017 inclusive.

3.4.2 Theoretical Sampling

In line with the CGTM concept of theoretical sampling (Breckenridge & Jones, 2009; Charmaz, 2014), this commenced with the recruitment of five new fathers. Coding, initial analysis and memo writing commenced with the first participant and recruitment was pragmatically paused after five participants were interviewed. At this point, the transcription of all five participant interviews was completed and the stages of coding ensued. This supported the iterative nature of CGTM thus informing the research process, highlighting areas of enquiry to be pursued and focussed on with subsequent participants. Analysis of the first five participant interviews indicated that an adaptation to the inclusion criteria to include men with their first child under two years would be useful. It was found that the men with children who were close to one year of age could not only vividly remember pregnancy and the birth but were also able to describe changing fatherhood from the first few weeks to months later. Interviewing men with slightly older children, it was felt, might provide further insight into the changing nature of fatherhood. Furthermore, the interview schedule was adapted, becoming more focussed on questions related to identity development in the transitions to fatherhood as a consequence of these developing concepts featuring in the initial analysis (Baker et al., 1992). Following this stage of the

analytical process, a further seven new fathers were recruited to the study with theoretical saturation (Coyne & Cowley, 2006) identified thereafter.

The main purpose of the study was to explore the transitions to fatherhood underpinned by the structural gendered norms and policy in the UK context. Since young fathers' (Duncan, 2007) and gay fathers' (Schacher et al., 2005) experiences are known to be unique in many ways, these fathers were not included in the recruitment for this study. Potential participants in this study were recruited because they had the common experience of being first time new fathers and the following inclusion and exclusion criteria were applied.

Inclusion criteria:

- A first-time father with a child under one year of age (initially; then under 2 years of age)
- A first-time father over 18 years of age
- Heterosexual first time fathers

Exclusion criteria:

- Fathers under the age of 18 years
- Gay fathers

3.4.3 Ethical considerations and practices

Gaining approval for the study.

This study was approved by Sheffield Hallam University's Faculty Research Ethics Committee (FREC) in November 2016 (Appendix E). The research was undertaken in accordance with the British Psychological Society's ethical requirements for

conducting research (BPS, 2018) namely, *respect* for participants, *competence* in conducting the study, *responsibility* for handling data and acting in the best interests of the participants and *integrity* in the authenticity of the study and presentation of the findings. There were no external funders of this study and participants were recruited independently of any other organisations, therefore no further ethical approval was required.

Consent procedures and confidentiality

Consent to participate was underpinned by the provision of a participant information sheet (Appendix F) that enabled prospective participants to make an informed decision about taking part in the study (BPS, 2021). Following initial contact from interested participants (n=21), the participant information sheet was emailed to them with a further two attempts made to contact prospective participants who had not confirmed an interview time and date. Acknowledging that becoming a parent for the first time can be stressful and challenging (Baldwin et al., 2018; Chhabra et al., 2020; Leach et al, 2015) and to mitigate against adding to this burden, if potential participants did not respond after the two follow up attempts, they were not pursued further (n=9). Therefore, in total, 12 men consented to participate in the study over a recruitment period of 12 months as stated previously.

Once a participant's interest was confirmed, they were given the choice of interview location. For most participants this took place on university premises with only one participant requesting to be interviewed at home and the University risk assessment procedures for undertaking home visits and lone working were followed (Sheffield Hallam University, 2013).

Prior to commencement of the interviews, the participant information sheet was revisited, and any questions or concerns addressed. Participants were given an explanation about what would happen to the information they shared during the interview, including maintenance of confidentiality and anonymization of any of their data used for publication and PhD examination purposes. Further to this, demographic details were obtained from each participant (Appendix G). Their right to withdraw at any stage up to ten days after the interview was reiterated and all participants consented to the audio recording of the interview. They were further informed that the audio files would be transferred from the recording device to a secure data file until the outcome of the PhD was decided and ratified, at which time they would be permanently deleted. No incentives or financial rewards were offered to participants (BPS, 2018). The processes described above were discussed in the context of the Data Protection Act (1995) as ethical approval and data collection for this study was completed before the introduction of the 2018 updated Data Protection Act and associated General Data Protection Regulations (GDPR). Following full explanation of their rights, the participants gave consent by reading and signing the consent form (Appendix H). All but one of the participants engaged in one interview and the interviews lasted from 45- 60 minutes. One participant requested an additional interview in order to finish exploring key points.

Risks of the study

Throughout the conduct of the interviews, the ethical principles of justice, autonomy, beneficence and non-maleficence (Beauchamp & Childress, 2001) were adhered to in order to ensure that the rights of participants were respected and maintained, and that the integrity of the study was preserved.

3.4.4 Data collection

Semi-structured interviews

Interviews were chosen as the method of data collection providing an opportunity for participants to share their experiences in a one to one, confidential space. Interviews are useful, particularly when exploring sensitive topics (Elam & Fenton, 2003) and can be considered a form of social interaction in their own right (King & Hugh-Jones, 2019).

Charmaz (2014) describes intensive interviewing, a technique which lends itself well to the creative and iterative nature of CGTM as it does not stifle the participants' flow. The interview schedule was therefore used as a guide to explore certain aspects of transitions to fatherhood with lines of enquiry pursued to fully explore key points made by participants and in some instances to gently challenge assumptions. Questions such as "can you explain that a bit more?"; "what do you think that is about?"; "why do you think that is?" were used to explore significant points further. Those advocating for a constructionist approach to interviews also highlight the influence of the researcher on the interview and the direction it takes. This also emphasises that the conversation and interview itself is a heuristic device to explore how participants construct their version of reality (King & Hugh-Jones, 2019). In this iterative, constructivist approach there is less requirement to have consistency between interviews or for the interviewer to take on a neutral stance (King & Hugh-Jones, 2019).

When conducting the interviews, aspects such as turning on the recording device at the commencement of informal conversation aimed to ensure a smooth transition to the questions being asked as part of the study. After explaining the ethical

parameters of the research, the first question asked was to encourage the participants to tell their stories of becoming fathers. Subsequent questions included, for example; "How would you describe your role as a father"; "What sort of things do you do?" and "Have any of your relationships changed since you have become a father". See Appendix E for the initial and adapted interview schedules.

Debrief

At the end of each interview, it was acknowledged with each participant that as a result of taking part in the study, the topics discussed may have reminded them of potentially challenging or upsetting experiences. They were therefore alerted to the written debrief information on the original participant information sheet and an informal verbal debrief was given (Appendix F). This process also included monitoring of their reactions during and at the conclusion of the interview and providing further information about where they could gain support if needed (BPS, 2014). One father who disclosed a particularly distressing experience during the interview, was provided with additional support information and was signposted to his GP and local NHS post birth counselling service. I felt confident in providing this level of support due to my previous clinical background. Contact details for the researcher and the director of studies were also included on the participant information sheet should further questions or concerns have arisen or if the participant chose to have his information withdrawn from the study. No participants requested to withdraw from the study.

3.4.5 Data management

Upon completion of the interview, the recording was downloaded onto an encrypted research site file on the university server. Audio files were labelled by participant ID

number and date of interview only. The recording was then deleted from the recording device. The transcription of the audio files commenced ten days after the interview took place to allow for any potential request to withdraw data, however, no participants requested to do so. After this period, audio files were transcribed by the researcher and stored within a secure file on the university's server. Names of people or places were either pseudo-anonymised or removed to ensure confidentiality and anonymity. In accordance with university policy, all audio recordings are retained until conferment of the PhD award, at which point they are permanently deleted. Non-identifying electronic copies of transcripts were kept on an encrypted file on the university server, or for printing purposes, on an encrypted memory stick. All other data will be kept for ten years as per the university policy, only accessible to the researcher and supervisors. After this time, data will be disposed of securely. Publication of the data will be initially in the form of PhD thesis which will be submitted to Sheffield Hallam University. This will be made publicly available via the University library. Any data used for publications or presentations will be done in such a way as to ensure the anonymity of the participants. Information regarding potential publication was provided on the participants' information sheet and consent forms.

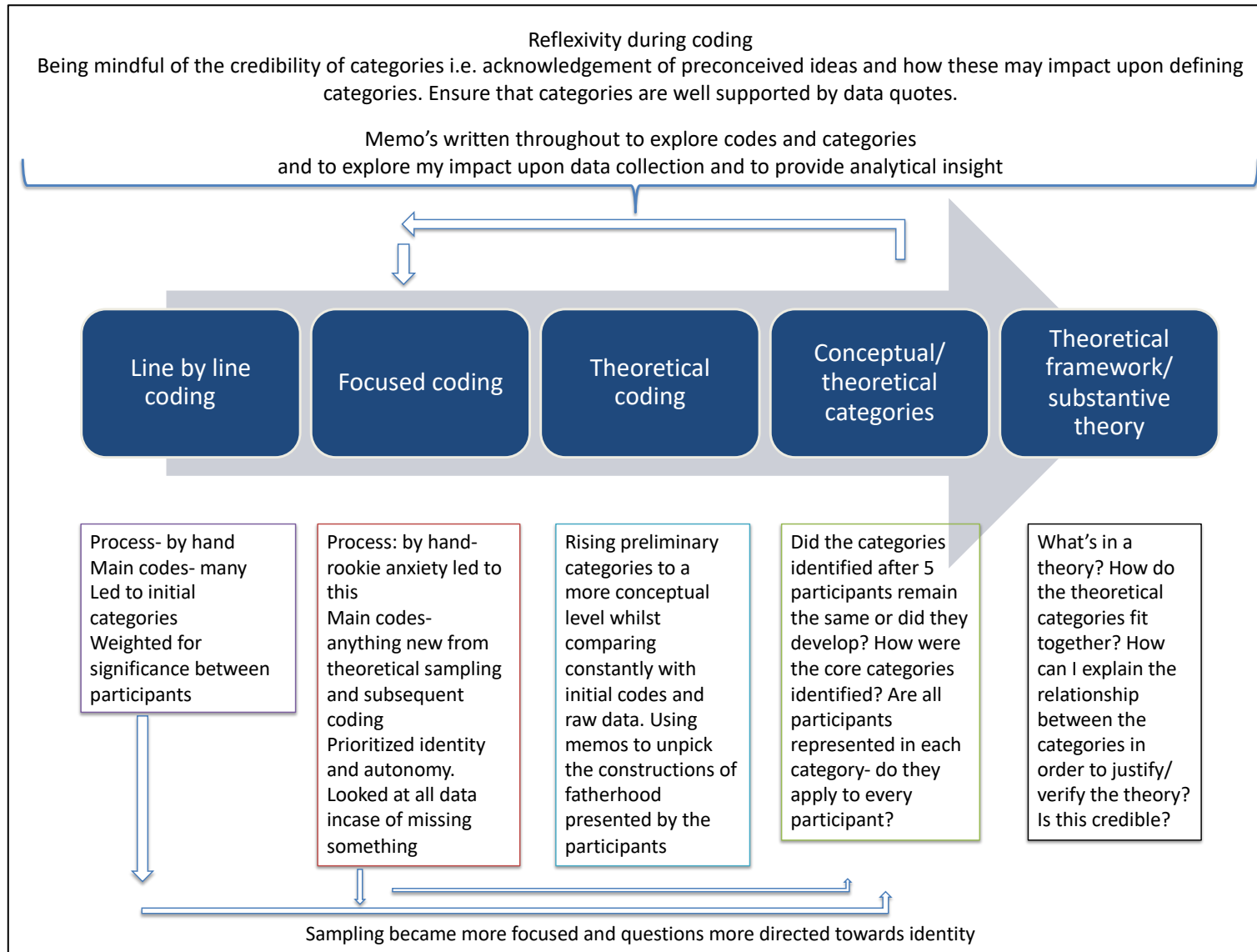
3.5 Process of data analysis

This section presents the analytical process underpinned by CGTM culminating in the construction of the theoretical categories and subsequent theoretical framework. The process of manual line-by-line coding through to the formulation of initial categories is described including the development of early theoretical ideas

(Charmaz, 2014). Abduction, the process of forming an explanatory hypothesis (Suddaby, 2006) was incorporated into this study whereby 'analytic induction' moves the researcher between induction and deduction whilst practicing the constant comparative method (Reichert, 2007; Suddaby, 2006). Figure 1. provides a snapshot of the process of analysis and theoretical questions asked throughout. It was formulated to add rigour to the analytic process and provides transparency in what can be a complex and non-linear process in CGTM. Further examples of the different stages of analysis undertaken can be found in appendices A, B, C and J.

Where extracts of transcripts are presented in the rest of this thesis, they are labelled using the participant's pseudo-anonymised name and either line numbers (lines) or page number (e.g., p47) of the transcript for cross reference. Copies of transcripts are available upon request.

Figure 1. The process of data analysis



3.5.1 Transcription

Transcription of interview data followed by handwritten line-by-line coding provided me with an opportunity to become immersed in the data and gave a deeper insight into the words used by the participants and the areas of fatherhood they particularly focused upon. Personally undertaking the transcription added further authenticity to coding and analysis with Charmaz (2014) noting that it provides a wealth of information on which to base theoretical sampling ensuring that the process is rigorous and reliable (Charmaz, 2014). The purpose of audio-recording the interviews was not only to capture everything that was said verbatim, but also to offer consistent attention to the participant in ways that note taking may not allow. Audio files were then available to review throughout the process of analysis and theory development. Data were transcribed verbatim using standard orthographic transcription techniques (Gibson, 2019). For the purposes of this study, emphases, pauses and other such conversational idiosyncrasies were less important to the analysis. Other observed behaviours, actions and reactions of the participants were captured via the process of immediate post-interview memo writing and not via the transcription.

3.5.2 Coding and subsequent recruitment

In CGTM, the coding phases and recruitment stages are inseparable and are interwoven with constant comparison, concurrent theoretical sampling and analysis which are fundamental components of this approach (Heath & Cowley, 2004). Coding of text is a core process in CGTM which provides a structure for breaking data into its component parts. Data is broken down into bite sized chunks (Chametzky, 2016), compared with other data, inspected and then reconstituted as

conceptual/ theoretical categories which form the basis of any emergent substantive theory development (Charmaz, 2014).

In total, approximately 3000 codes were initially identified via line-by-line coding of the first five participant transcripts. These codes included several similar codes across the different participants and so were not, in the end, 3000 unique codes. Line by line coding was used as a heuristic device for learning about each participant and examples can be seen in Table 1.

Via coding, questions such as 'what is happening in the data?', 'what is going on here?', 'what is the main concern being faced by the participants?' (Glaser, 1998, p140) can be considered. These questions nurture the researcher's theoretical sensitivity, and the coding procedure stimulates conceptual ideas and furthers the processes of focussed coding through to theoretical coding (Charmaz, 2015).

Throughout the initial coding process, codes were named using gerunds, as recommended by Chametzky (2016) and Charmaz, (2012a), see Table 1. Gerunds are action verbs and by using them to code, a sense of process is maintained, core to CGTM (Charmaz, 2012a).

One concern related to coding is in becoming too descriptive in the process and merely rewording lines from the transcript (Holton, 2007). It is however argued, that whilst codes eventually need to be conceptual, descriptive codes can be used initially and then further analysed into more conceptual ideas as the constant comparison process proceeds. "In-vivo codes" (Charmaz, 2014, p 134) can also be extracted from the data where the participants' own words provide a rich insight into a particular experience or situation which could not be described or conceptualised better via an alternative code (Chametsky, 2016). "In-vivo codes" (Charmaz, 2014,

p134) were used as a coding tool for when the new fathers' words provided a theoretical insight even if this wasn't the intention e.g., "crying on the bus" became synonymous with the representation of the men's experiences of going back to work following paternity leave.

I remember as well, crying on the bus on the first day, I remember falling asleep on the bus in those first few weeks back at work a number of times.

(Frank p16)

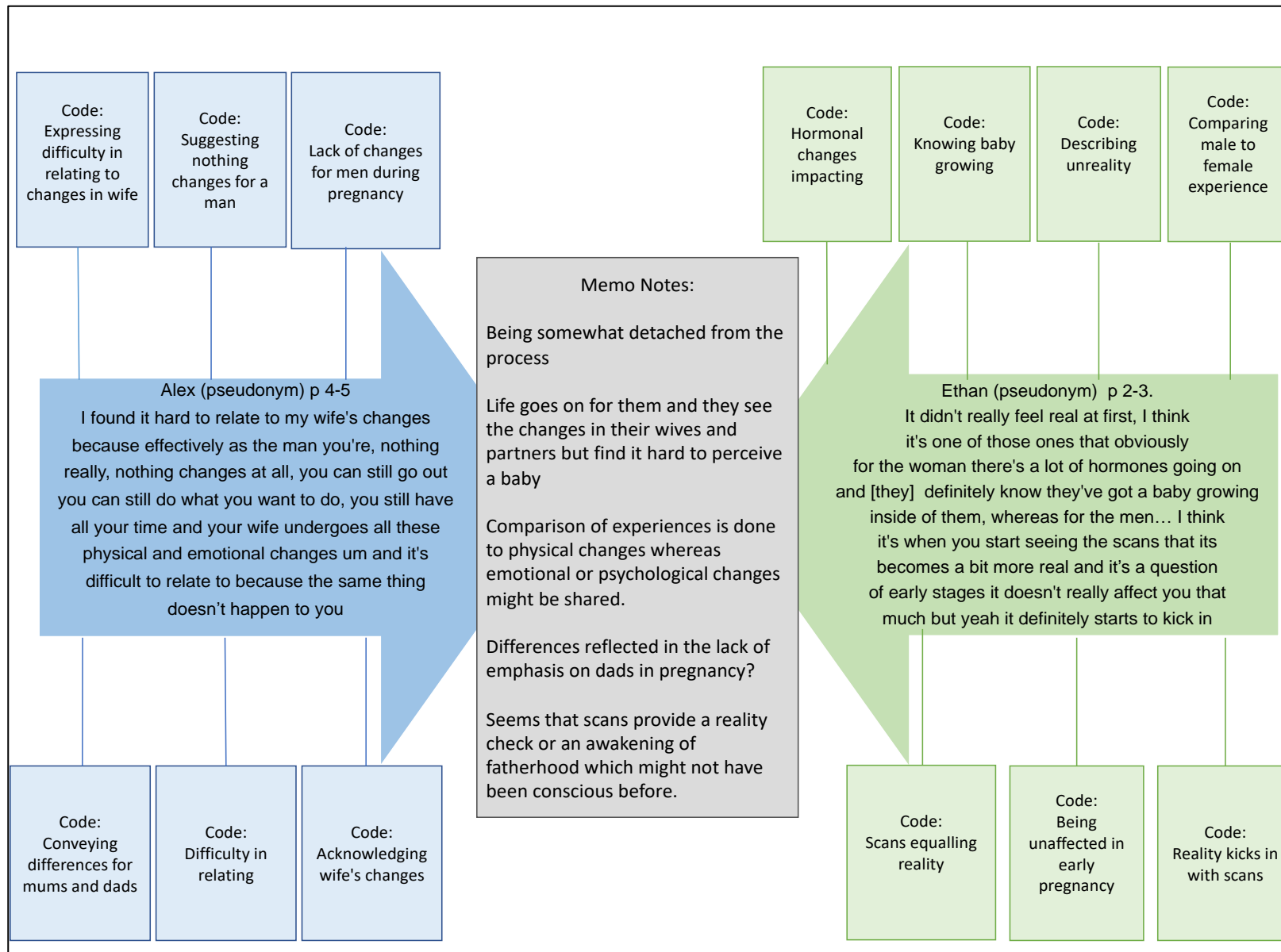
Table 1. line by line coding with gerunds

Archie (pseudonym) lines 69-96	Line by line codes
I wasn't as worried about those risks, I mean, probably that's easier for me to say	<u>comparing</u> levels of concern male v's female <u>Considering</u> risk
we both definitely right at the beginning when we first met we definitely both wanted kids you know	<u>desiring</u> a family <u>planning</u> a baby
The pregnancy was er, I don't know, was ok, er, I don't think it was from people I know I don't think it was too bad in general you know she had vari- you know usual symptoms and you know, kicking and all that waking her up- it was ok	<u>comparing</u> experiences with others <u>experiencing</u> a normal pregnancy <u>normalizing</u> pregnancy
she ended up, she had like a really long labour, I think it ended up being... 36-48 hours, maybe, something like that. technically in labour	<u>enduring</u> a long labour <u>emphasizing</u> time
they ended up like you know inducing and then that didn't really get it going enough, the dilation wasn't proceeding fast enough so they did a C-section er the c section itself like seemed like it was really fast, not complications or anything	<u>having</u> things done to wife <u>failing</u> to go to plan <u>describing</u> "them" <u>handing</u> over control <u>needing</u> surgery
so I was like the first to see her cos you know they bring you into a little room to weigh her or whatever and it its it was weird really, it's just a weird, it was very happy but er it's almost like you have this alien all of a sudden covered in this weird slimy stuff, it's so, and then um the the, I was very scared to just hold her	<u>being</u> the first to see the baby <u>meeting</u> her for the first time <u>bringing</u> the baby to him <u>being</u> happy <u>experiencing</u> a life change <u>commencing</u> fatherhood <u>conveying</u> fear

3.5.3 Constant comparison

By constantly comparing codes with codes, categories with codes, and categories with categories, data was checked and re-checked as part of the process of theory development (Charmaz, 2014). Evolving concepts decided what information was sought next and the interview questions changed and adapted slightly as the ongoing analysis sharpened the focus of the study (Baker et al., 1992; Coyne & Cowley, 2006). This process therefore facilitated theoretical sampling and eventually led to the point where theoretical saturation was achieved (Coyne & Cowley, 2006). Data collection can be focussed by theoretical sampling thus allowing further analytical abstraction and identification of gaps in the data which require further explanation (Breckenridge & Jones, 2009). By constantly comparing these elements it was concluded that no new information was being or was likely to be found, all aspects of the theoretical framework had been gleaned from participants and this had been further verified in the final interviews (Starks & Brown Trinidad, 2007). The literature was then searched further in relation to the core categories in order to extend, develop and apply them to existing knowledge (Coyne & Cowley, 2006). Via the process of constant comparison individual codes from the same and from different participants were assessed side by side to identify if the meanings bore similarities or differences. Figure 2. gives an example of the comparison in coding from two different participants demonstrating the significance of these particular concepts and to illustrate the process of constant comparison (Engward, 2013). See Appendix C for further images of the initial codes and constant comparison.

Figure 2. Example of the process of constant comparison from participants Alex and Ethan



3.5.4 The focussed coding phase

As codes became more developed, categories were constructed using the process of focussed coding and constant comparison (Engward, 2013). At this point it was no longer a requirement that all data were coded. Coding at this stage was now dedicated to development of the theoretical or conceptual categories which ultimately meld together to form the substantive theoretical framework (Charmaz, 2104). Being more focussed at this stage encouraged a richness and attention to the most pertinent and important elements of the experiences of the participants (Urquhart, 2012). During this stage of the methodological process, it was often necessary to return to initial coding and raw data to identify any gaps in data or to ensure that key aspects had been explored and conceptualised. The process of memo writing remained the same throughout this focussed coding process adding further theoretical insight (Chametsky, 2016).

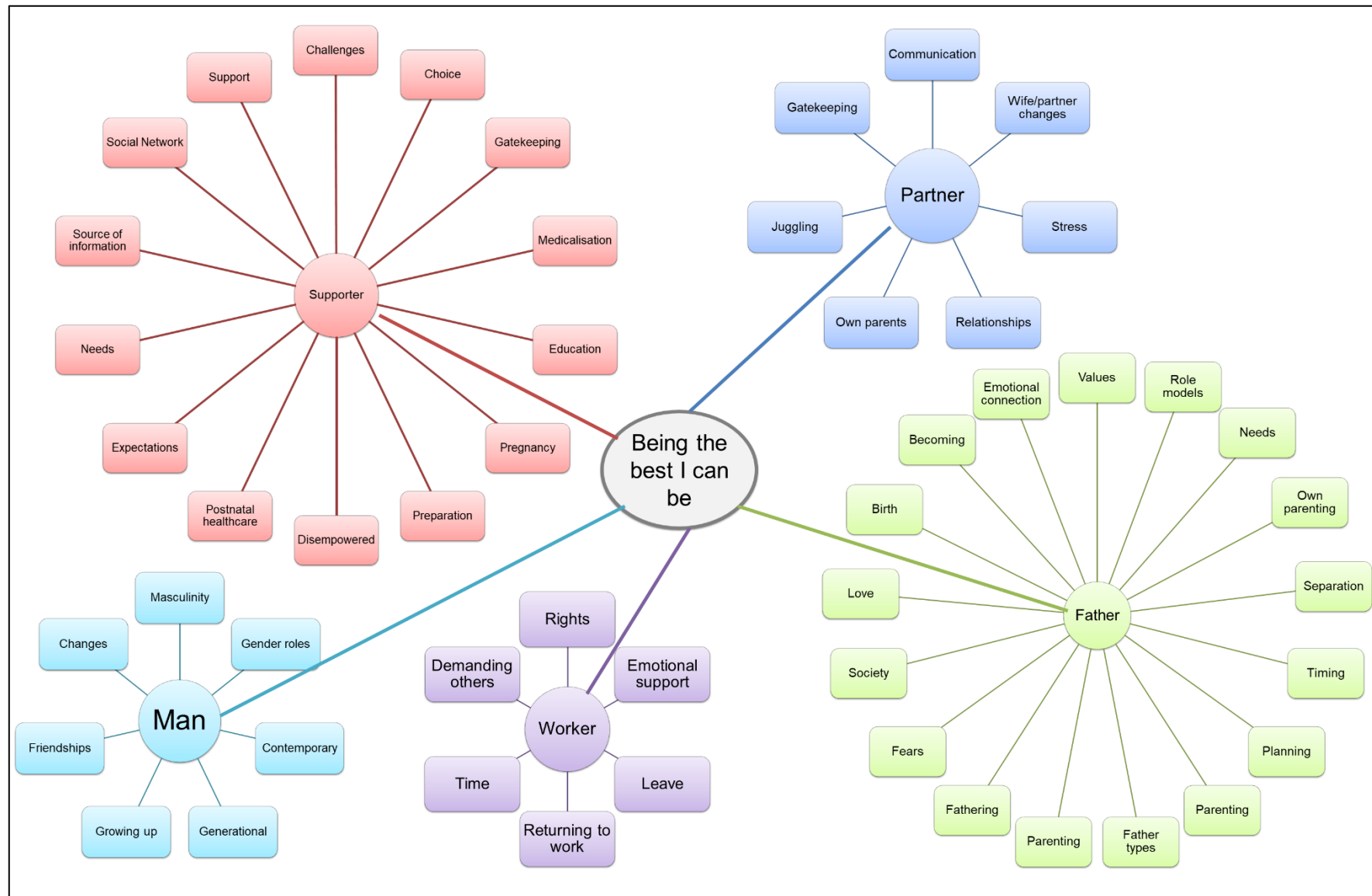
Focussed coding ran concurrently through the data collection process following the initial coding of the first group of participants and the subsequent initial coding of the final seven participants. Using the refined set of codes identified from the initial coding of the first five participants, more focused codes were formulated which were based upon the regularity in which this topic was discussed and the commonality in meaning between codes and participants (Holton, 2011). Initially all the codes on each transcript were re-read and then a map was made of more clustered or focussed codes that these codes seemed to represent, indicating how they might fit together. Following the process of initial and focussed coding, a concept expressed across the data from these new fathers was about 'being the best they could be' in all different elements of their lives. Figure 3. provides an insight into

the initial focussed codes formed for the first five participants around a core idea of 'being the best I can be'. Some of the focussed codes overlapped but were placed close to their greatest association and connections between other focussed codes were identified. See Appendix B for the image of the original mapping process.

The next stage of focussed coding was to take the codes with limited commonality across participants i.e., represented by few codes from few participants, and put them to one side (Gordon-Finlayson, 2019). This allowed further pursuit of significant conceptual leads which were more common or frequent between the participants.

On further reflection, the theme of 'being the best I can be' was deemed to be too vague and descriptive and although this concept appeared to feature in many of the interviews, it was deemed prudent to elicit a deeper understanding of how this manifested further in the realities of fatherhood.

Figure 3. Mapping of codes around an initial theme of 'Being the best I can be'



Example of a focussed code

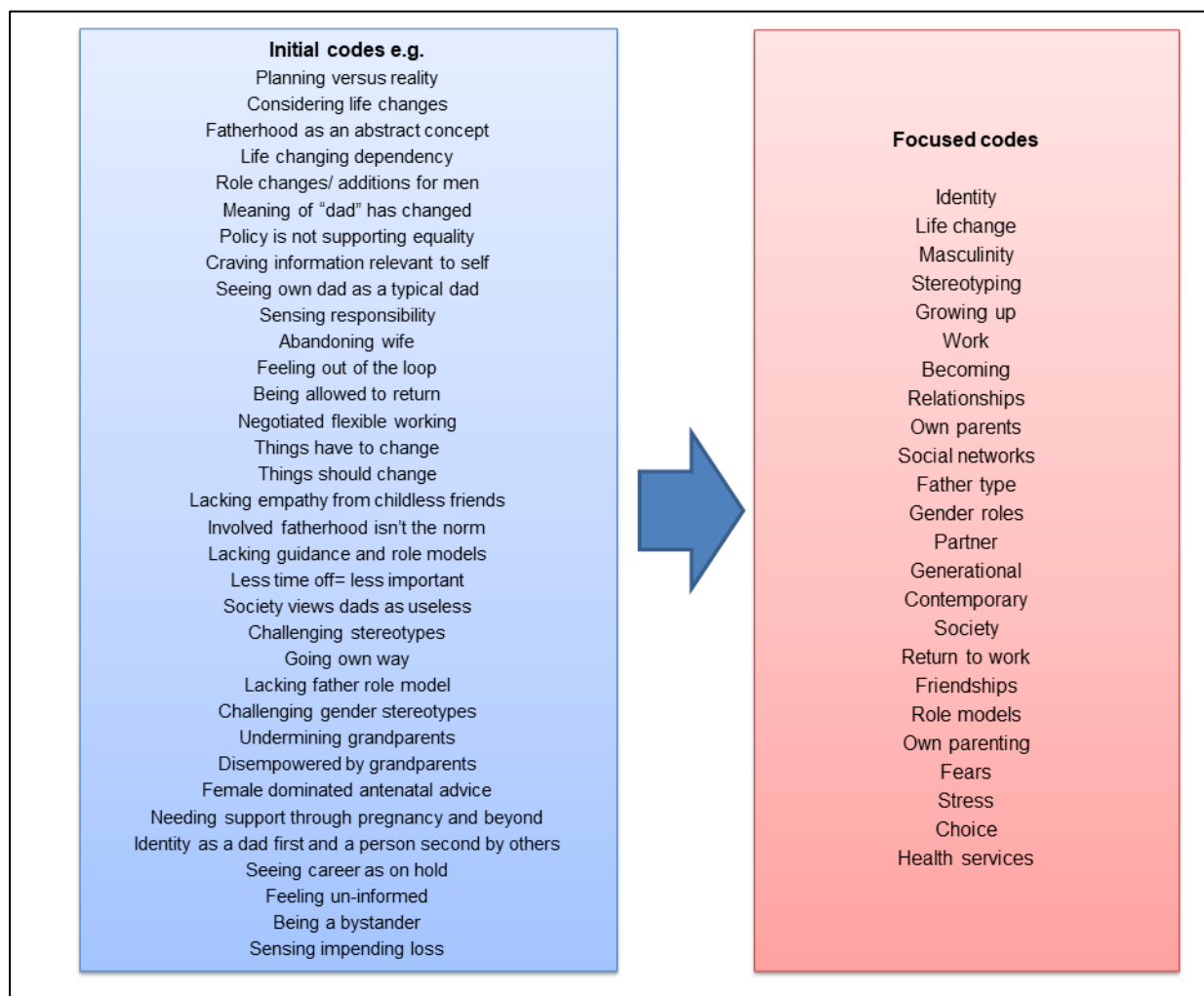
Through the process of focussed coding and constant comparison (Gordon-Finlayson, 2019) a preliminary cluster of focussed codes related to the influence of generational norms and the men's own parenting experience on their approach to fathering. Table 2. displays the individual initial codes which were identified from the first five participants. Via this process, codes were compared, and similarities and differences noted. Comparing themselves with their own fathers and desiring to be different was a recurrent theme throughout this cluster of focussed codes and this was developed as a further line of enquiry in subsequent interviews. These focussed codes were representative of initial codes from all five initial participants.

Table 2. Codes related to generational factors and own parenting experiences.

Defining a better dad	Own fathering comparable	Comparing to own father	Describing friends' fathers	Positive role models-own parents	Reflecting on own parenting	Describing own parenting	Comparing father
Experiencing good fathering	Nostalgic for a different parenting experience	Demanding mother	Emphasizing that this will not be his way	Aspiring for a better father	Being with mum	Own father was a stay-at-home father for younger sibling	Comparing with own parenting
Wishing for a better dad	Living with a mother with bipolar	Experiencing parents' marriage break up	Being like own mum	Having a positive fathering experience	Caring for siblings as a child	Own father not ideal role model	Not wanting to emulate own father due to personality
Acknowledging difference	Not wanting to be like own father	Hoping for a different future	Grieving own mum	Reflecting on memories	Working class background	Female dominance	Reflecting on advice
Experiencing a personality clash with dad	Describing love for own father	Lacking a positive role model	Regretting mum not meeting baby	Comparing wife with mother	Comparing own parenting	Missing out on own father	Own father is boring
Own parenting impacted on later development	Reflecting on perception of own father	Becoming a father has changed dynamic with own father	Mothering was solely for women	Seeing dad at allocated times	Comparing own experience	Acknowledging generational differences	Changing parenting advice and practices
Feeling envious of others	Worsening relationship with dad	Looking up to others' fathers	Refusing to replicate father's mistakes	Reasons for parenting failures	Vowing to be different	Comparing own childhood	Empathising with own parents
Externalising own parenting experience							

As the process of analysis proceeded, there were further groups of focused codes which were indicating an important theme relating to the facilitators and inhibitors of fatherhood identity development and the roles and responsibilities placed on them as contemporary fathers. Each of these focussed codes were further analysed in order to facilitate more conceptual labelling and to further refine them, elucidated in figure 4. Focussed codes which were common across participants' experiences informed questions incorporated into the interview schedule for the next phase of sampling.

Figure 4. Initial codes to focussed codes.



3.5.5 Participants six to twelve

Participants six to twelve were recruited following the initial analysis of the first five participants. As previously stated, in concordance with theoretical sampling (Charmaz, 2014) the interview schedule was adapted to focus on the broad observations from the first five data sets. Questions were asked about identity change in the context of how the participants saw themselves now compared to before having children. How others saw them as a consequence of becoming a father was also asked as it is understood that it is often hard to perceive identity changes in oneself but may be easier from the perspectives of others. Some of the topics expressed by the first group of fathers (1-5) were raised with this second group (6-12) to check whether these were also concepts they identified with. In order not to disadvantage the next group of participants, they were also encouraged to share their stories of becoming a father whilst also being asked more focussed questions based on the data collected so far. In this context, theoretical sampling allowed a sharper focus for the study and a unique perspective directly based upon the data thus far analysed. Text box 1. relates to a memo on theoretical sampling in relation to fatherhood identity.

Text box 1.

Memo on Identity:

Having adapted the interview schedule, I now have a question which asks men directly about their identity change since becoming a father. This was based in analysis of the initial five interviews. Having gained a lot of information from the first five men regarding their identity without overtly asking them about it, now I am asking this question, they seem flummoxed by it. This may well be due to a lack of understanding about what identity is or what it means. When I ask about identity, many of the responses deal with personality or life change but not necessarily about a sense of identity change with becoming a father. They do not see that becoming a father is an identity change. I discussed this with one of my supervisors who suggested having a question in reserve if men are not able to answer the identity question e.g. "There is a school of thought that believes that identity is not just your view of yourself but of how others see you too and so the impact on your thoughts of how others see you affects your sense of who you are. Do you think people see you differently now, your friends, family, How about your partner."?

Line by line coding and constant comparison, as previously described, was also applied to this next set of data. Since CGTM is not overly prescriptive and encourages creativity and flexibility within the process (Charmaz, 2008), it was felt that the robustness of the final theoretical framework would be enhanced via full exploration of the data. Whilst this was a time-consuming process it allowed me to be immersed once again in the data and to more easily identify comparisons within and between the interviewed fathers. At this stage I was asking more analytical questions of the data i.e., what these data and codes might mean at a more conceptual level.

3.5.6 Theoretical Sensitivity

In CGTM it is acknowledged that the researcher is an active and subjective participant in the development of the theory and that their previous knowledge and experience is a key instrument in the construction of that theory (Charmaz, 2008; 2014). This is not to say that I automatically made assumptions or presumptions

about my findings, more that my awareness, knowledge and experience of working with families allowed me to be more open to the developing theory with less bias (Dunne, 2011). My prior knowledge sensitised me to the topic and therefore enhanced my ability to pick up on certain aspects of the phenomenon, enhancing further the theoretical development e.g., by having a knowledge of the culture within large healthcare organisations, I was able to locate these specific experiences within this culture to better explore and understand men's experiences here. However, I was mindful throughout that my 'sensitivity' to the topic could potentially constrain my noticing of other aspects. Further exploration of theoretical sensitivity (Hoare et al., 2012) was provided in section 3.3, in relation to reflexivity and positionality.

3.5.7 Memo writing

Holton (2011) describes the challenges of coding and emphasises the requirement to complete memos at every stage of the coding and analytical process. Memos are the foundation of theory development (Glaser & Strauss, 1967; Charmaz, 2014) and memo writing and the development of theory in CGTM cannot be discussed in isolation. Memo writing is the tool by which a substantive theory is developed, where conceptual codes and categories are explored and which provides a narrative of the researcher's thoughts and analytic processes (Holton, 2011), aligning it in many ways to reflexive processes. Whilst it is acknowledged that memo writing is not unique to CGTM, it is considered an integral part of the methodology and is a key tool from which the evolving theory develops (Hoare et al., 2012). This process sees the researcher making notes about all aspects of the research process and their interactions with data and codes, thoughts and observations about the participants and the data gathered from them (Coyne & Cowley, 2006). Memos are initially for

the eyes of the researcher only, can be informally written and do not need to follow any particular structure (Charmaz, 2014). Glaser (1978) suggests writing memos to help capture ideas, note associations between categories and document recurring themes and categories noted in the data. This process encourages creativity and idea development (Coyne & Cowley, 2006) where memos become more theoretical as a study progresses allowing theoretical and conceptual development of the data (Holton, 2011). Via the compiling of and sorting of memos, the analysis evolves, further aiding the construction of the final theory (Hoare et al., 2012).

Memo writing commenced immediately after each interview, during transcription and during the initial coding phase. Further memos were written throughout the research process and became the basis for the analysis of the data underpinning theoretical development and the subsequent findings chapters in this thesis. Text boxes 2. and 3. present example extracts of memos written during the study. The first follows an interview with Iain and the second relates to the overall analytical process. Memos continued throughout data collection and analysis and provided the foundations of theoretical code development and thus the theoretical framework.

Text box 2.

Memo: Iain

Returning to work creates an invisible wall between self and routine. There is little time to practice as child development is so rapid that you might master one stage but then another one is entered and you don't have the week days to master this new stage. There are element of missing out and suddenly seeing a toddler in front of you and wondering where the time goes. Paternity leave- feeling that the two weeks of leave is a reflection of how much the government thinks of fathers. Feeling that if this is the perception of the government then society will have that perspective too.

Text box 3.

Memo: general analysis

They describe being asked to leave the hospital soon after the birth of their baby. Neither man describe this being a conversation between them and staff, merely an order e.g., being told to go home. Both describe not wanting to do this and a feeling of abandoning their partner, their baby or both. Where does empowerment fit into this process? Most maternity hospitals do not have formal provision for fathers to stay, thus splitting up a newly formed family very soon after it has been formed. Why are men, who are presumed to have much of the power in the world and assumed to have strong voices and demands, unable to voice their discomfort and disagreement with the demand to leave the hospital?

3.5.8 Theoretical saturation

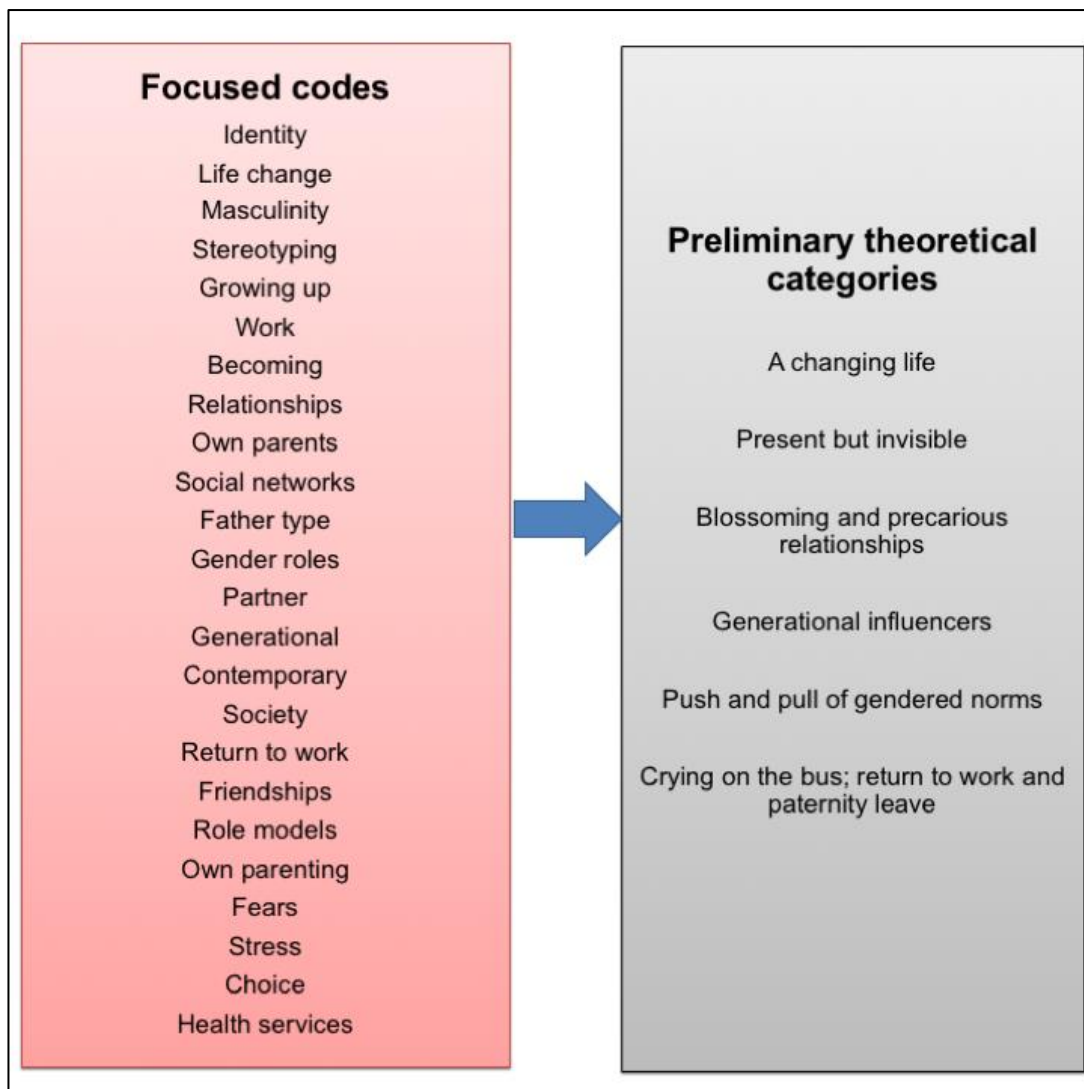
The concept of theoretical saturation (Holton, 2011) has been debated due to its subjective nature but is generally the point at which 'enough' data has been collected and analysed and no new information is obtained (Gordon-Finlayson, 2019). It has, nevertheless, been argued that theoretical saturation can never be truly achieved as individuals will continue to evolve in the construction of their realities and there will always be new perspectives to take into account (Coyne & Cowley, 2006). In the context of the present study theoretical saturation may be the "best that is achieved" for these new fathers at this particular time, in these circumstances (Coyne & Cowley, 2006, p513). After ten fathers were interviewed and interviews transcribed and analysed, it was found that there were few if any new ideas being shared during the interviews. To ensure that theoretical saturation had been reached, two more participants were interviewed whose analysis confirmed that recruitment to the study could be ceased.

3.5.9 Construction of theoretical categories via theoretical coding

Theoretical coding was undertaken in the next stage of analysis in order to begin to understand how codes may start fitting together to form categories and the developing theoretical framework (Thornberg & Charmaz, 2014). It was also felt at this stage that many of the focussed codes constructed remained quite descriptive and that a process of asking analytical questions about these codes was necessary to move from a description of experiences to an attempted explanation and understanding of the core processes involved. Theoretical coding in this study produced several preliminary categories identified following the focussed coding phase and are illustrated in figure 5.

One of the advantages of CGTM is its flexibility, in that categories and the emerging theoretical framework can be shaped, refined and refocussed as the writing up phase continues. This ensures that the resulting substantive theory is conceptual enough to be deemed to be a grounded theory and that all analytical questions are thoroughly asked of the data, codes, categories and concepts. With this in mind, the preliminary categories illustrated in figure 5. were subjected to further analytical questions and scrutiny. This enabled a deeper and more conceptual exploration of the meaning of and authentic representation of these categories.

Figure 5. Focussed codes to preliminary theoretical/ conceptual categories.



3.5.10 Final theoretical categories leading to the core category and theoretical framework.

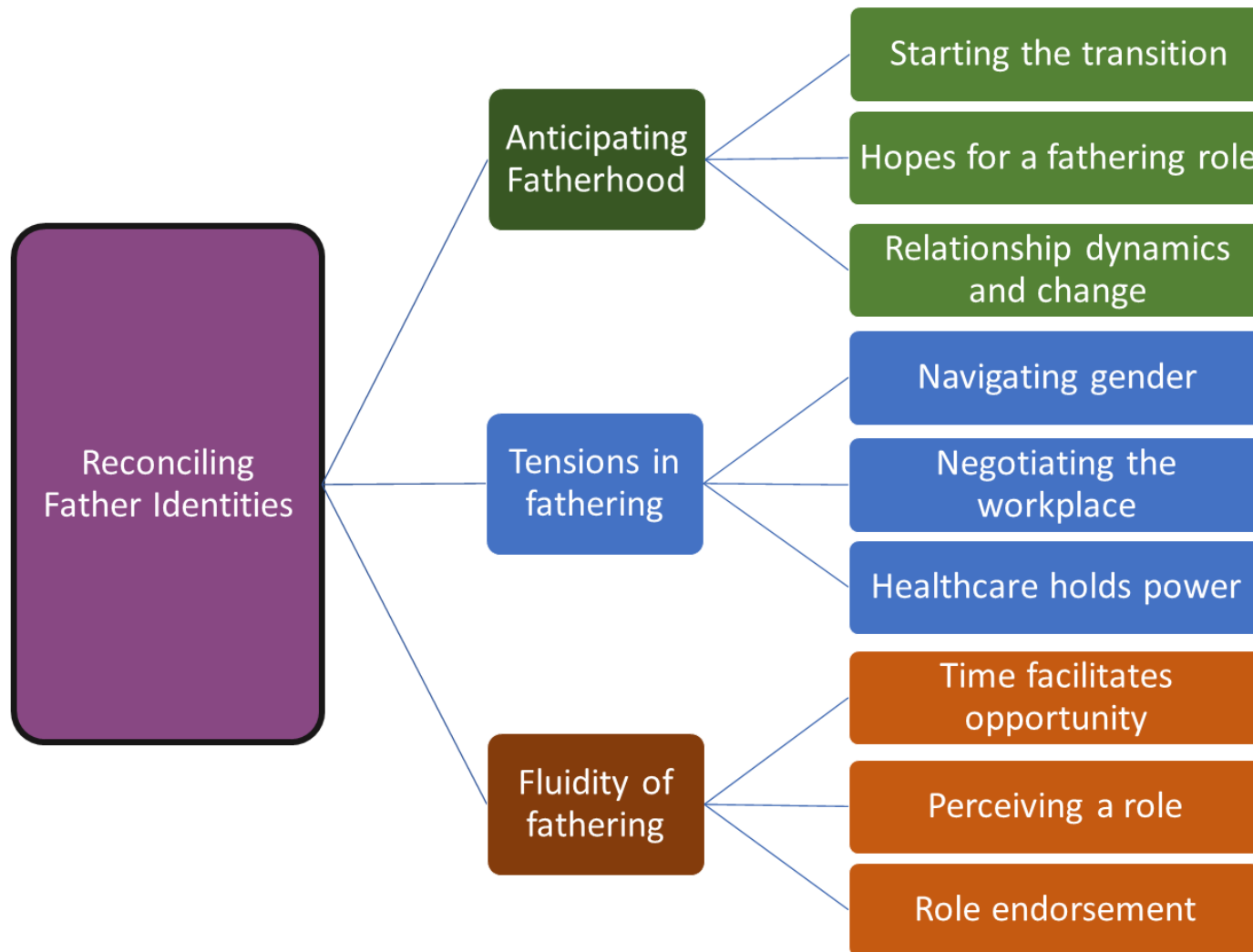
A substantive grounded theory is a theory applicable primarily to the phenomenon, participants and context in which the research was conducted. There is the potential for transferability to similar people in similar contexts (Cooney, 2011) but overall, these theories are not perceived to be generalisable. These contrast with formal theory which is more broadly applicable to different people in different spaces and times (Bryant & Charmaz, 2007) and when considering rigour, trustworthiness and

reliability of a grounded theory study, transferability has been identified as an important component of the theoretical framework (Lincoln & Guba, 1986).

The main aim of using CGTM is to formulate a substantive or middle range theory grounded in the data collected and therefore most grounded theorists warn against the application of existing theory, and that its inclusion should be heavily justified (Glaser and Strauss, 1967; Charmaz, 2014). Applying existing theory potentially negates the value of data gathered from the experiences of participants and may potentially present something other than a grounded theory (Suddaby, 2009). Once all data are collected, analysed and the theory is formulated, existing theories can however, be introduced as a means of comparison and for discussion.

Following further analysis to ask questions such as, 'what is really going on here?', 'what does this mean' and 'how are these men navigating their way through early fatherhood' the final core category of **reconciling father identities** was formulated. Three main theoretical categories; **aspirations for fathering, tensions in fathering and fluidity of fathering** are presented, demonstrating the process of father identity development which these participants were navigating. The subcategories comprising each theoretical category are further presented to indicate the different dimensions of each theoretical category and can be seen in figure 6.

Figure 6. The core category, theoretical categories and associated subcategories.



3.6 Summary

Data were gathered, transcribed and analysed following the conventions of constructivist grounded theory methodology. Reflexive practice was undertaken throughout the whole process from initial data collection and throughout the analysis and subsequent formulation of this thesis. In the next three chapters, the theoretical categories and associated subcategories will be explored and are supported by extracts from participant interviews.

Chapter 4 Findings

Chapters four, five and six each present one of the theoretical categories and associated subcategories that collectively become the core category of **reconciling father identities**. Each chapter will present the analytic work involved in the development of each category, sharing data extracts to evidence the analytic claims which are central to the theory formulation. See appendix I for an example of a full list of extracts related to one of the theoretical subcategories. First, the demographics and brief biographies of the participants are presented followed by the analysis of each of the theoretical categories.

4.1 Demographics

Twelve new fathers shared their experiences in this study. Six were aged 25-34 and six aged 35-44. All lived with their partners or spouses; six were married and six were co-habiting. Eleven of the fathers had a baby under one year and one had a child under two years. All were employed for 30 hours or more and all had completed formal education with five having post graduate qualifications, four with university degrees, one with a further education certificate or diploma, one having left school at aged 16 and one leaving education after A-levels. Eleven participants identified as being of White British ethnicity with one identifying as White, Other.

Table 4. Demographics

	Age	Ethnicity	Living circumstances	Marital status	Age of child	Educational status	Employed
1	25-34	White (other)	Lives with partner/ Spouse	Married	Under 1	PhD	yes
2	35-44	White British	Lives with partner/ Spouse	Co-habiting	Under 1	Undergraduate degree	yes
3	35-44	White British	Lives with partner/ Spouse	Co-habiting	Under 1	Undergraduate degree	yes
4	35-44	White British	Lives with partner/ Spouse	Co-habiting	Under 1	Undergraduate degree	yes
5	25-34	White British	Lives with partner/ Spouse	Married	Under 1	Post grad (not specified)	yes
6	35-44	White British	Lives with partner/ Spouse	Married	Under 1	PhD	yes
7	35-44	White British	Lives with partner/ Spouse	Co-habiting	Under 1	Post grad certificate	yes
8	25-34	White British	Lives with partner/ Spouse	Married	Under 1	A levels	yes
9	25-34	White British	Lives with partner/ Spouse	Co-habiting	Under 2	FE Certificate/diploma	yes
10	25-34	White British	Lives with partner/ Spouse	Married	Under 1	Undergraduate Degree	yes
11	25-34	White British	Lives with partner/ Spouse	Co-habiting	Under 1	Left school at 16	yes
12	35-44	White British	Lives with partner/ Spouse	Married	Under 1	PhD	yes

4.1.1 Brief biographies

Archie, Harriet and Cecily

Archie is a new father in his 30's, married to Harriet and living together with their three-month-old baby, Cecily. Initially Archie appeared unsure of himself and spoke mainly about his wife's experiences prior to prompts asking about his own experiences. As an academic Archie felt constantly under pressure and said he found the work life balance with a new baby particularly hard. He did not cope well with sleep deprivation and having a baby with feeding problems was problematic. He shared relationship issues prior to conceiving but described some improvement in his relationship postnatally. Archie and Harriet were socially isolated with both

families living overseas and had a limited friendship and support network due to being new to the area.

Frank, Karen and Sophie

Frank is a new father in his late 30's, living with his partner Karen and his four-month-old baby Sophie. Frank talked about his own experiences in the context of his wife's pregnancy. This couple had a difficult pregnancy having been told that there was a good chance their baby might be born with a significant disability or with significant health problems. He states that he felt an overwhelming sense of relief when his baby was born fit and healthy although also felt guilty about this relief. Frank talked openly about his experiences, showing vulnerability and stating that he had "grown as a man" in the process of becoming a father.

Mick, Selena and Stan

Mick is a new father in his late 20's living with his partner, Selena and their baby, Stan. Mick presented as laid back and relaxed. He was open about his sex life and his easy-going approach to parenting. Mick had not felt the need to prepare for parenthood and felt that there were some things that could not be prepared for. He was informally employed and spent a significant amount of time as primary caregiver to his son. He was the only father in the study to have had a home birth and although keen to participate in the study, shared far less than the other participants.

Neville, Marissa and Erica

Neville is a new father in his late 30's living with his partner Marissa and their baby Erica. Neville and Marissa had experienced pregnancy loss in their first pregnancy, and this had influenced Neville's detachment from the second pregnancy. Whilst he

acknowledged it was happening, he felt unable to engage with it in order to protect himself from another loss. He made significant changes to his lifestyle during pregnancy but suggested that he only really began to believe that he was really going to become a father on commencement of labour. He had a challenging relationship with his own father and categorically did not want to emulate this in his own fathering identity.

Albert, Elaine and Alicia

Albert is a new father in his mid-30's married to Elaine and living together with his seven-month-old baby Alicia. Albert spoke specifically about a loss of identity in his working life after the baby was born and later in his personal life. Whilst he was embracing 'new fatherhood' felt that there were elements of traditional masculinity he would like to embrace such as the ability to do DIY. He felt that fatherhood had impacted significantly on his career but equally loved being a father. He was conscious of how he should present himself as a father and felt scrutinised in public when alone with his baby daughter.

Alex, Ann and Billy

Alex is a new father in his late 30's, married to Ann and living together with his son Billy. Alex had a PhD working in industry and his work identity had been impacted significantly on becoming a father. Alex was clear that he did not feel sentimental about having children, more of a biological imperative which had resulted in actively seeking a partner via online dating and being very clear from the beginning of the relationship about wanting children. Alex participated in two interviews and had a lot to share about his experiences. He was one of the few fathers who wanted to emulate his own experiences of being fathered in his own parenting practices.

Ethan, Susan and Arabella

Ethan is a new father in his late 30's living with his partner Susan and their baby Arabella. Ethan worked as a manager in a large organisation and was the only participant who had taken shared parental leave. He was comfortable in sharing his experiences of an unexpected pregnancy early in his and Susan's relationship. They had discussed wanting children very early on as Susan was in her early 40's. Ethan and Susan's relationship had become solidified by the birth of Arabella and he described teamwork and a co-parenting approach. Ethan gave significant insight into his perspective on issues around feminism, women's equality and its impact on men's ability to father. He had a positive experience with his own father and acknowledges that this would be his only example on which to base his fathering.

Fred, Donna and India

Fred is a new father in his mid-30's married to Donna and living together with their new baby India. Fred wanted to be an involved father and happy to work less than his wife. Fred spoke about his sex life which appeared to be an important aspect of his relationship. Fred spoke at length about trying to find appropriate materials on preparing for fatherhood indicating that what was available was stereotypical and reinforced traditional versions of masculinity.

Mark, Sarah and Hermione

Mark is a new father in his mid-30's living with his partner, Sarah and their baby Hermione. Mark and Sarah became parents unexpectedly, having been told that natural conception for the couple would not be possible. This 'unplanned' pregnancy did not appear to impact on Mark's engagement with the pregnancy nor his preparation for becoming a father. He spoke about difficulties with grandparents

disempowering the couple in their parenting. He also spoke about the costs of having a baby and the financial strain to support the family.

Iain, Michelle and Timmy

Iain is a new father living with his wife Michelle and 11-month-old son Timmy. Iain spoke at length about the inequity related to paternity and his feeling that this reflected the lack of importance the government places on fathers. He also shared some discrepancy between his and his wife's perceptions of returning to work and shared his views on the different approaches to raising boys and girls. Iain was making attempts to co-parent within the confines of his working life and described the impact of a relatively flexible employer who appeared willing to facilitate this.

William, Carol and Bess

William is a new father in his early 30's living with his partner Carol and their baby Bess. William shared some of the most traumatic experiences in his transition to fatherhood in this study. Their pregnancy was a surprise as they did not think they would be able to conceive due to Carol having an underlying health condition. William, Carol and Bess had a very difficult start as a new family due to complications in labour and immediately post birth. This shaped the narrative of the experiences which William shared and required further signposting and debrief post interview. William was frequently torn between work commitments and wanting to share parenting with his partner due to the financial burden he perceived in providing for his family.

Rob is a new father in his early 40's, married to Louise, living together with their baby Amelia. Rob and Louise suffered pregnancy loss in their first pregnancy which impacted significantly on Rob's engagement with the subsequent pregnancy which resulted in Amelia. In this second pregnancy, Rob described reading everything and weighing up the science and evidence to inform all their decision making. Rob's perspectives on work and home life changed significantly on becoming a father where he prioritised time at home above work.

The rest of this chapter focusses on the presentation of the first theoretical category, **anticipating fatherhood**.

Anticipating fatherhood

The theoretical category of **anticipating fatherhood** is multi-dimensional and comprises the subcategories of **starting the transition**, **hopes for a fathering role** and **relationship dynamics and change** including the changes that the participants anticipated, instigated and experienced as they navigated their way through pregnancy and the first two years of fatherhood. Anticipating fatherhood reflected a narrative of significant life changes. Life changes were experienced as unpredictable and related to the 'who', 'what' and 'how' of early fatherhood and the psychological and practical changes which were experienced during the transition. The participants anticipated the need to perform different roles at different times and in different contexts coupled with an awareness that their roles and responsibilities would evolve and change throughout their child's life. They suggested that this would continue to feel like a transition for quite some time i.e., an ongoing journey to becoming a dad.

4.2 Starting the transition

The point at which participants perceived starting their transition to fatherhood and associated life change varied considerably. For some, the sense of connection could be felt as early as the confirmation of the pregnancy. For example, Iain (p 47) said "I suppose, it's weird how much you do care for them even straight away, even when I found out my wife was pregnant". This was further exemplified by Fred (p18) who stated, "I was keenly aware that as soon as she came out of there, then it would be my job to keep her alive and so I tried before the birth to think in that way already".

Iain's words indicate a sense of surprise that he could be so connected to his yet to be born child despite the lack of concrete evidence of the baby's existence. Whereas Fred spoke more about preparing for the changes as a consequence of the birth.

For participants who were able to connect with the pregnancy in the early stages, their actions and thought processes began to include a consideration of the baby in aspects such as decision making and lifestyle choices from this point onwards.

I've thought a lot more about looking after my body, so I've joined the gym... I don't want to be a dad who can't run around with his kids and my job's sat down at a desk all day so I'm not getting any exercise through work, so I needed to make some changes to at least try and be healthier and fitter for things to come (Iain, p25)

Iain's comments are reflective of several practical and lifestyle changes made by these participants and are demonstrative of the practical planning for parenthood which they engaged with. The lack of tangible changes was, however, challenging for some of the participants as described by Alex.

I think there's an immediate sort of responsibility towards your wife and your unborn child, so there's that aspect of the feelings to provide, to care for, to make sure everything goes ok, but at the same time, nothings actually changed, for you physically, at that time, so there's that little bit of disconnect with everything at the same time. (Alex, p8)

Despite Alex experiencing an immediate sense of responsibility, this was felt alongside a lack of concrete changes in himself. Whilst some participants experienced their own emergent life changes early in pregnancy, others pointed to a disconnection between their own and their partner's experiences. This disconnection

between the experiences of men and women during the early stages of pregnancy provides an opportunity for health professionals to promote couple communication but the connection can also be facilitated by attendance at appointments and scans.

4.2.1 Scans

Attendance at scans offered the tangible evidence many of the participants needed to be able to more fully grasp the pregnancy.

It didn't really feel real at first...obviously for the woman there's a lot of hormones going on and [they] definitely know they've got a baby growing inside of them, whereas for the men... I think it's when you start seeing the scans that it becomes a bit more real. (Ethan, p2-3)

It was surreal, very strange, the first one was the most unusual I think I've ever felt in my life because you think you know, oh there's a baby in there, but being confronted with this sort of evidence of no, but there really is one in there...seeing it for the first time, it was an absolute thrill. (Fred, p18)

The thrill of hearing the heartbeat and seeing their baby on the screen facilitated an understanding of the life changes ahead. Looking back at the pregnancy, the presence at scans was described by several participants as a defining moment, instigating a sense of pride and transformation.

Yeah, excitement I think and pride, I was proud, I was very proud when I saw her, I didn't know what to expect from the scan and to see her you know only 12 weeks old sort of jumping up and down, it was pride really, that's my daughter jumping up and down (Albert, p7)

Attendance at scans was often a moment that turned an abstract concept into a lived reality. Furthermore, aided by scans, the participants expressed a sense of increased responsibility towards both their partner and their unborn child which continued to develop throughout the pregnancy.

Whether or not they indicated an emotional connection with the baby during pregnancy, all the men felt a sense of protection and an apprehension about different aspects of the life to come. The changes observed in their partners were somewhat imperceptible until the point at which tangible evidence was available to them. Participants indicated that seeing the scan acted as a catalyst in their transition to fatherhood and the creation of a father inclusive atmosphere during these consultations may be vital in connecting them to an otherwise indiscernible event.

4.2.2 Planning for parenthood

All the participants in this study had wanted to become fathers, although for two of the men, becoming biological parents was something they had believed not to be possible due to fertility issues.

So, it were a big surprise when we found out she were pregnant, I did nearly fall down the stairs when she told me...I don't think I was mentally prepared for it. Cos I think for girls it's all their life it's oh yeah, I wanna be a mum. I think for a bloke it's not, it were very difficult to get my head around, but we kind of embraced it, it's happening. (William, p1)

Despite William embracing the pregnancy, there appeared to be an element of resignation to his narrative. Furthermore, his perspective on gendered norms becomes apparent, in assuming that girls are primed to be immediately accepting of

pregnancy whereas boys are not. This perspective contributes to the narrative on gendered notions of parenting and early socialisation.

Mark articulated the unexpectedness of the pregnancy from a different perspective.

It's just given another reason for coming to work, doing anything. It's just given a new light or direction in life and especially it's one that we didn't think we'd ever had. (Mark, p18)

Here, the surprise pregnancy instigated a new direction and renewed sense of purpose. However, for men who have resigned themselves to the inability to conceive by natural means, a surprise pregnancy may impact upon the initial opportunity for pre-pregnancy and antenatal preparation and planning.

4.2.3 Loss

Two of the participants in this study experienced pregnancy loss which affected their response to subsequent pregnancies.

First time I was really doting, thinking so far ahead and I wish I hadn't. It would have been easier if I hadn't. I don't wish I'd changed anything but...I do get a bit ahead of myself and excited, I'm a bit of an excitable person with stuff like that, something new. Yeah so [it] definitely changed the way I dealt with it second time. (Neville, p 36)

In the extract above, Neville indicates how experiencing a pregnancy loss led a reluctance to emotionally invest in the subsequent pregnancy and further explains his response:

Yeah I would have held back a bit...Sort of think almost the same but you don't get quite as into it and you just keep that voice in the back of your head,

don't go too far ahead... just remember. The further it goes on the chances lessen so ideally, I probably wouldn't want to know, if we did have another child. I probably wouldn't want to know until Marissa just tapped me on the shoulder and said we're going for the twelve-week scan...or even better, just turn up with a kid after nine months. That would be ideal cos it takes the stress out of it then. (Neville, p 37)

This hesitancy to engage with the second pregnancy might have been a way to protect himself from another disappointment and to buffer the possibility of a second loss. This is an understandable response given the lack of support that both Neville and Rob describe after the loss of their first pregnancy: "I mean when we lost first one, we didn't get any, Marissa got offered, got given a sort of pamphlet about counselling, but I didn't" Neville (p39); "No, I don't remember any bits being specifically offered for me" Rob (p7). Whether Neville felt able or entitled to grieve is not clear, although the lack of support and seeming lack of acknowledgement for his bereavement is likely to have compounded his connection to the second pregnancy. Rob, who also experienced a pregnancy loss, described going through a contrasting process to Neville.

With the first pregnancy I didn't really feel that I was that emotionally connected or involved, engaged whatever, whereas the second one, yeah much more so. We were looking out for everything. (Rob, p4)

The loss of Rob and Louise's first pregnancy, and his perceived lack of emotional connection to it led to a contrasting and amplified response in the second pregnancy. The differing reactions of these men highlight the subjective nature of transitions to fatherhood and the impact of individual men's experiences. However, both examples

indicate that whatever the transition, effective support and resources should be in place for fathers as well as mothers prior to the birth including in response to pregnancy loss and other pregnancy concerns.

4.2.4 Preparing

It was frequently articulated by participants that fatherhood was difficult to prepare for due to the lack of a comparable experience.

I honestly don't think you can really be fully prepared because it's unlike anything you've ever done before. (Fred, p10)

Irrespective of the ability to perceive what it would be like to have a new baby in their lives, some form of preparation, either practical or emotional, was undertaken.

In terms of preparation, I don't think we were mentally prepared. The house was prepared, and her room was prepared, everything was ready, all the clothes and nappies and all that stuff but I think mentally I don't think you are prepared. I think I had this ideology that she was going to pop out and happy days she's going to sleep all night and it'll be great but I don't think I was mentally prepared for it... probably could have done it a bit better, I don't know how, but it was the sleepless night, the crying, I wasn't prepared for that. (William, p20)

William highlights a distinction between the physical and the emotional preparation for parenthood where it is perhaps easier to physically prepare, for example, buying equipment and decorating nurseries and in doing so, the gradual connection and understanding of the changes required to accommodate a new baby might, by

default, manifest themselves. The imagery of the 'perfect baby' described by William, in retrospect, indicated a lack of realistic expectations about what was to come.

There are similarities in both expectant mothers' and fathers' abilities to plan and prepare for life with a new baby. Neither can fully emotionally prepare for what is to come, insofar as, for example, sleepless nights are likely to be a shock for everyone. However, relevant literature and sources of professional support, including more regular interaction with health professionals, are primarily targeted towards women. In contrast men are required to be proactive in seeking out information from resources aimed predominantly at mothers or from online sources. Finding appropriate literature related to preparation for fatherhood was frequently described as challenging.

There was nothing really for fathers, I think most of it was like Mumsnet, and women's stuff, that I just read about and there were a couple of blokes on there asking questions but, you could get most of your answers just straight off the internet. (Neville, p35)

The tone of the literature aimed at the preparation for fatherhood was perceived to be somewhat inadequate and ill-considered.

I liked reading about what was coming, when I eventually found something that was relevant to me, I mean I found the vast majority of the publications for me with regards pregnancy and childbirth and then having a child was aimed at someone who was not like me...it was almost kind of dumbed down, a lot of blokey language, a lot of sports metaphors and commando dad and all that kind of stuff. I don't need that, I'm a grown up and I can read books so, please just write something that's aimed at me...It felt like it was almost how

to survive your wife's pregnancy. It's like I don't want to survive it I want to be part of it. I don't just want to get through it [and] onto the next thing so I can go back down the pub, ... I want to be involved, I want to be as helpful as I possibly can be. (Fred, p 7-8)

Much of the written information was deemed to be incongruous with the needs of men who did not identify with hegemonic masculine norms. It was important to Fred for example, that intended fatherhood was acknowledged and from his perspective, that most men would actively be seeking information to support their transitions.

Reading to prepare for fatherhood presented different challenges for other participants.

I should be reading a lot more, she reads almost constantly about all sorts of baby related things, breast feeding too and so you know I don't know nearly as much of the facts and the science and everything, so yeah I mean what I do read helps, you know just there's only so much time, and again my job pressure is like above ten, you know, very high. (Archie, p24-25)

I did plan to read stuff but then other things came along at the same time so during the pregnancy... I ended up getting a different job through the restructure that coincided roughly with when our baby was born so it's also full on at work learning a new role and having a lot of thinking time I suppose [taken] up by that which wasn't great timing but it was how it was...I probably wasn't the most prepared person in the world so I didn't particularly do any reading or anything like that. I had a couple of friends who had had babies recently so I had been around them so I had a good idea of what was coming, but I can't think of much more preparation we did for it. (Iain, p9)

Work pressures, busy roles and therefore limited time impacted upon time to read in preparation for fatherhood. Nevertheless, there was both an implicit and explicit assumption that their partners would be doing so in preparation for motherhood. By deferring to the prospective mother to undertake preparation by way of reading presented a mismatch between their desires to be involved fathers and the steps they took to support this goal. Moreover, this perspective reinforces the mother as primary caregiver and as the parent who has the responsibility to hold all the knowledge of parenting. The reason for an active avoidance of reading was shared by Mark.

We both sort of said we wanted to take it on as organically as possible rather than having read this book oh you should be doing this, we wanted to just see how, just see what suited us. (Mark, p6)

Reading as a form of instruction was interpreted as being at odds with an “organic” preparation for parenthood. However, for Fred and his partner, books were their main source of antenatal preparation and were chosen in preference to attending classes.

My wife had a number of books as well and we're both big reader people and we didn't feel like necessarily we would get anything from it that we weren't already prepared for. (Fred, p9)

The lack of father focussed material aimed at preparation and support emphasizes further the lack of attention to transitions to fatherhood and thus perhaps men's perceptions of their roles during this time. Moreover, being able to sense a place for themselves in their transitions to parenthood is likely to be impacted by the dearth of father focussed literature and resources.

The above extracts indicate that there is not a one size fits all approach to the preparation for fatherhood and that the ways in which men do prepare are underpinned by a range of motivations. The assumption that the participants partners would undertake this reading emphasizes some of the traditional gendered norms related to matters of pregnancy and the early care of infants, contrasting with the participants' contemporary aspirations for involved fatherhood.

4.2.5 Honest and open conversations

Further impacting on the participants' abilities to prepare adequately for fatherhood was a perceived hesitancy of experienced parents in speaking openly about the challenges of parenthood.

Don't know if it's people not wanting to put negative spin on it ...painting it as if it's a positive thing all the time, or people not wanting to be honest, not wanting to say, oh they might think I'm weird if I said I was a bit upset during this time, things like that. Everything was fine, we was [sic] all happy but not really [being] given the underlying truth almost of be ready, there are some times that are difficult and are kind of really hard work. (Iain, p12)

Participants referred to fatherhood as an external reality; as something that they were trying to attain the truth about. This was highlighted in the above reference to having honest and open conversations where participants pondered on why others had not been open about their own experiences of new fatherhood. They perceived this as something being concealed from them as if there was a singular reality of fatherhood that they were being denied access to. This may reflect the uncertainty of evolving roles for fathers in contemporary society and a desire to be told what to do and what to expect, rather than following the uncertain path of new parenthood.

Clichéd jokes around sleepless nights or the financial strain of fatherhood were unappreciated, and participants indicated that they would have liked more honest discussions about the different experiences of other recent fathers.

One of my friends...whether I take it wrong or not he just comes across as quite condescending sometimes. 'You can't possibly have experienced it unless you experience it the way I experience it'. I was very conscious that that's not a way to go, it's just not going to be very helpful, so I try to give zero advice to my friends other than just enjoying. (Alex, interview 2, p31)

Despite articulating a need for the 'truth' participants said they would find it difficult or did not want to give advice to prospective fathers. They acknowledged that everyone's experiences and motivations were different and there was not a 'one size fits all' model of advice thus contradicting their desire for the truth from other parents.

There is definitely an issue, not an issue as such but finding your own way as a dad, being able to make not necessarily mistakes but just people have different approaches to the way they're going to parent whether that's the people across the street or whether that's you both as individual parents. (Alex p 9-10)

Albert (p8) reiterated the inability to prepare for fatherhood "You know everyone says nothing can prepare you and that is true to a certain extent" and thus because of this perspective, any truth telling may have equally been met with cynicism and scepticism. Acknowledging the sentiments expressed in the extracts above, it then became difficult to understand how and from whom, this "truth-telling" should have come.

Unexpected pregnancies, pregnancy loss, and the motivation to prepare for fatherhood had an impact on the way participants experienced pregnancies. A lack of self-directed preparation coupled with the inadequacies of formal antenatal preparation exposed a significant gap in supporting participants to proactively prepare for fatherhood.

4.2.6 A process of transformation

The moments after the safe delivery of the baby were a significant time of joy and evident expression of emotion, for example Mark (p27) shared his experience of holding his baby for the first time: “they put her into my arms, and it was just tears of joy, I couldn't stop crying”. And for Mick:

I cried like, well, someone that cries a lot when he arrived... I think that's the...most amazing part of it is, I keep thinking when's he going to become less amazing to me and then he just doesn't...yeah its damn good. (Mick p 7)

Becoming a father was a transformative experience for participants and was felt most strikingly at the birth. The challenging experiences during pregnancy, labour and birth faded, at least temporarily, with the safe arrival of a healthy baby.

I guess the birth itself was quite an experience...[it] went completely the opposite way to how we wanted to go, which was what lots of people were saying...don't plan for things to happen the way you want them to but, lots of issues but you end up with a baby at the end of it so, that definitely outweighs all the negative stuff. (Ethan, p2)

The gratitude expressed in such circumstances raises a concern about whether the participants were able to subsequently express any enduring distress or worry in

relation to traumatic experiences. The idea that one should be grateful for a healthy baby no matter the consequences is not unique to new fathers. Moreover, the receptiveness of perinatal health practitioners to enquire about and discuss these feelings with both parents postnatally could be protective of future postnatal distress. Reflecting on their pre-birth feelings and priorities provided an opportunity via which participants understood the transformative nature of fatherhood.

There are of course times when it doesn't feel so great and it all feels a bit much and sort of what the hell am I doing but, no and I've loved being a dad far more than I ever thought I would do before that day happened. (Alex p33/2)

But in terms of how it's changed my life it, it's for the better, I just feel like there's a purpose, other than going out on a weekend and going to work, but it is extremely life changing, I can't explain it in words. (William, p5)

Changing life for the better and perceiving fatherhood to be their greatest achievement reflects the transformative process of becoming a father.

Summary

Despite the challenges, fatherhood was seen as a welcome, albeit in some cases, an unexpected enhancement to the participants' lives which overall had a positive impact on them.

4.3 Hopes for a fathering role

Participants shared a multitude of hopes in relation to the potential enactment of their fathering role. These hopes were, in some cases, underpinned by prevailing gendered and social norms around parenting practice and concepts of masculinity or 'being a man'. Participants referred to their own fathers as benchmarks for their fathering practice and discussed facilitative and inhibitive factors affecting their hopes and aspirations for fatherhood.

4.3.1 A correct way

Participants referred to a somewhat linear way to organise life in anticipation of pregnancy and not doing so was predicted to contribute to increased financial worries and stress.

Fred appeared to have concerns with his partner about the 'correct' order via which parenthood should be pursued.

We wanted to ...do things in what we perceived to be the right order so we wanted to get married, have somewhere to live and then have a child, all of which we managed to do in the order which was quite nice. Basically we came up to the conclusion that if we didn't do the things in the order that we said we were going to it would mean that one of the things would get dropped. So, if we had a child before we bought a house it would mean that we couldn't afford then to buy a house therefore we wouldn't have a house so that's why we did things in that particular order. (Fred, p2-3)

The quote above suggests that for Fred, becoming a father should happen in a certain way and deviating from this, posed a risk to other material aims. Concern for

the type of and location of homes, car ownership and doing things in the 'correct' order were also identified as benchmarks against which families appear to be measured. Perhaps these opinions originate from constructions of the normative family and parenting which endorse a linear path with clear milestones.

Participants routinely referred to money and material concerns as pressing issues in relation to becoming a father.

My main scare was money, cos obviously she's going to be off work for this length of time, I've got to singularly support a full family, we've got a house and its daunting, I felt like I wasn't in control of the situation, I felt like it's going to crumble, I'm going to fail. I remember the main scare [was] can I be a responsible adult? can I be a father because I've never had that in school, this is how you do it, this is what you do, this is what you should do. (William, p6-7)

William appeared burdened by the financial implications of new fatherhood which left him feeling vulnerable and wondering about his capacity to effectively perform as an adult, to provide for his family and to authentically parent. His perceived lack of preparation for the role reinforced his anxiety, as if diving into the unknown on one hand but being very aware of the financial responsibilities of fatherhood on the other. This appeared to strengthen the traditional social norms of the breadwinning father although it is unclear whether his partner also felt this burden in equal measures.

Going against these norms is perhaps perceived as risky and that timing is everything when it comes to parenthood. However, as can be seen in the literature, becoming a parent as a teenager for example can be more challenging.

Nevertheless, in many cases, it provides the motivation and impetus to complete

education and work hard for one's family (Duncan, 2007), mirroring the wishes of the participants in this study.

Notions of the normative approach to fatherhood are frequently seen to originate from the images of the participants' own fathers, Neville explains:

Growing up a dad [was] sort of a set way, he swore, he worked, they were very man type in the eighties, even early 90's, the dad who'd wear slacks and a jumper and watch channel four. Yeah, when I was 16 [or] 17, a father had a good job, two cars, a house, like a mortgaged house, he didn't rent, I don't know how to describe it these days. Like your classic man, went to the pub at weekends, missus did the cooking, that sort of man. (Neville, p8-9)

A key aspect of the 'correct' way to do fathering and to earn legitimacy was demonstrating the ability to materially provide. Participants reflected on their own growth into what is perceived as an 'appropriate father'.

I dunno if this is an age thing or this is anything to do with the baby, I just realised that a lot of my clothes are just band t-shirts and things like that, film references and I dunno whether I should be dressing like that, [it's] not really that that's an important thing but it's something that I do think about. (Albert, p4)

Being seen to do fathering in the right way is associated here with physical appearance and clothing, indicating that there is a perception of an appropriate way to present oneself as a father. This links closely with the dynamics of the presentation of self (see Chapter 2) and in the findings related to role, identity and performance (see Chapter 6). Accepting that new mothers might also experience pressure to perform 'correctly', the predominance of visual and narrative

representations of motherhood in contemporary parenting media potentially increases the likelihood of more diverse and nuanced portrayals accessible to new mothers. For new fathers however, a great deal appears to rest on their experience with their own fathers as previously described by Neville.

4.3.2 Mixed feelings about fatherhood

The desire to become a father varied considerably for these participants in relation to their age, life stage and relationship status.

As a young man, as a teenager and that kind of thing, I wasn't interested at all in that kind of existence. I didn't have any kind of experience that would inform my thinking in that way, but... when, when I met Donna and it became very obvious exceedingly quickly that... we kind of clicked together, suddenly you start thinking about that kind of stuff. (Fred, p15)

For participants like Fred, meeting his partner prompted his interest in starting a family whereas for Alex his perceived *need* to reproduce was juxtaposed with his self-perception of having a lack of enthusiasm for fatherhood compared to his friends.

Some of my friends who haven't, weren't fathers and now are fathers, you could tell they much more excited about when your friends start having children and you can see them wanting to play with them and wanting to interact and I was never that person... and partly because of, don't know what to do, you don't know how to behave and also you don't have that experience and also not really being that interested, so despite the underlying feeling of wanting to become a dad, I wouldn't say I was ecstatic about looking forward to it in a way. (Alex p3-4)

In the above quote, it appears that despite Alex thinking that he wanted to become a dad, he lacked the confidence, experience and desire for interaction with children he observed in others. This point emphasises the complexity and variability in men's feelings about becoming a father which vary considerably.

In retrospect, despite these sentiments, Alex reveals that becoming a father was the best thing he had ever done: "from someone who you know wanted to be a dad but was not sure how much they wanted to be a dad necessarily to then realising that I think becoming a dad has been the best thing I've ever done" (Alex, p39).

4.3.3 Hopes and possibilities

Anticipating fatherhood was reflected in several ways by the participants in this study and was frequently related to a consideration of the type of father the participants wanted to be. Many of them spoke about being as good a father as they could be and expressed a variety of hopes and aspirations for their children.

When considering their hopes, participants described them in the context of being able to be whatever their child needed at a particular time.

I hope I'm caring and...available for her when she needs me, I don't know how it's going to work when she gets older and her needs change. (Ethan, p11)

Based on societal expectations of what counts as 'good' parenting and the requirement to be an 'all round' parent, Ethan anticipated a constant change in the roles he would be required to perform as a father, in response to his developing child. There is an indication that these participants were open to adapting and

changing to meet their child's needs and being accessible and whoever their child wanted or needed them to be.

These high hopes for fatherhood were paralleled by aspirations for co-parenting and with a common desire to be the best version of themselves for their baby and for their partners.

Overall, I'd like to share as much of the parenting as I can with Karen. I want him to be my number one priority more than work or, hobbies or anything, and I want him to know how much he means to me. Yeah, and I want him to know how amazing I think his mum is and to show him that through how I parent him. (Frank, p21)

Whilst Frank frames his aspirations in the context of prioritising family orientated roles, this idealised approach to fathering and partnering may be difficult to maintain in the context of new parenthood. Indeed, Albert indicated that this reformulation of the hierarchy of importance in the family was challenging.

I suppose..., it's sort of recognising that I am ...the third and least most important person in the house, that Alicia and then my wife are more important, so adapting to those changes has been massive. (Albert, p2-3)

Fred however appeared more content with the idea that his life belonged to his wife and child.

My life doesn't belong to me anymore, it hasn't since we got married basically, it became my wife's and that's perfectly fine and now, she is having to share that with my daughter as well and I'm really ok with that. (Fred, p31)

This hierarchical change within the family unit was articulated by several of the participants in different ways and at a relatively early stage of fatherhood. Whether this status continued to be accepted as the families became more experienced is something which merits further exploration. However, it is important to note that there is no indication that this is resented, more that this readjustment takes time.

Participants saw new possibilities in their fathering role, both in learning new skills and in sharing existing interests with their children.

I think of myself in certain ways as a modern man, I think myself as quite open minded, I just want to do all the things that will make her happy, I wanna learn how to, what's that thing with her hair? (Albert, p11-12)

Several participants expressed a variety of different activities where they saw the potential to connect with their children. Whilst Albert specifically framed *doing* hair as a role for the 'modern man', suggesting that this might be a departure from traditional acts of fathering, Iain described a more traditionally masculine way of connecting with his son.

I like to watch football and I like to try to get my kid in to watch it with me and he doesn't have a clue what's going on, he doesn't know what it is but I find it quite nice playing with him and pretending he likes it and when a goal goes in I'll cheer with him and play around with him, so I want him to be involved in the things that I like and be there with me so in the future, hopefully he will like it and have it as something we can do together. (Iain, p 39-40)

The varied activities through which these new fathers hoped to engage with their children ranged from those embedded within traditional fathering to progressive fathering norms. Iain appeared to be actively influencing the future choices and

interests of his son. This perhaps is a way of exerting a level of control in circumstances where participants have frequently described a lack of control or power. However, both Iain and Albert described gendered activities and it would be interesting to understand if Iain would engage in the same activities with a daughter and whether Albert would focus on more masculine activities if he had a son.

Summary

Overall, these men are finding their way through their new role as dad, perhaps not unlike the ways in which new mothers tread their new path. There are a multitude of influences shaping their hopes and dreams for fatherhood including their perceptions of a 'correct way' to be a father which ultimately may prove to be an impossible ideal.

4.4 Relationship dynamics and change

Some of the early postnatal life change was related to the participants' relationships. Relationship changes were discussed in the context of the couple and social friendships. Because of the generational nature of relationships with the participants own parents and parents-in-law, and the implicated traditional gendered norms, these relationships are discussed in Chapters five and six. Fatherhood identity formation was strongly associated with a multitude of relationship changes, and these changes were considered to be vital in supporting the development of fatherhood identity.

4.4.1 The Couple

Intimate partner relationships were enhanced by feelings of increased closeness and enhanced respect for the mothers of their babies.

We feel a lot closer, even though I don't see her very much. I feel we are and when we do see each other it's not just me and her now it's the little family we've got, so yeah so I think it has made a big difference to me and her. I do feel a lot closer to her. (William, p28-29)

This growth of intimate relationships was identified despite an increase in stress and arguments particularly in the first few weeks and months of parenthood.

Yeah well I think with my wife I've realised how amazing [and] strong [she is] but we've had more rows in the past four months than we've had in the six or seven years previously. Which you know, the kind of three am rows, don't really know what's going on but I'm sure it's probably your fault. (Frank, p25)

I think we do still spend a lot of time together but it's not, specific time together, d'you know what I mean? Which I think like there was a point a little while ago where we were both a bit antsy with each other just cos I think we, we forgot that we have to make time for each other as well as for ourselves.

(Mick, p 16)

If the lines of communication remained open, the fathers were able to have honest and open discussions about the arguments and disagreements they were having with their partners. The nature of communication and interactions between couples had however, changed to become more practical and child orientated.

It's definitely changed mine and my wife's relationship; it feels more functional than what we used to have. But we're very supportive of each other and luckily when one of us is kind of struggling, we've been very supportive of each other. (Albert, p17)

The neglect of intimate relationships was discussed at length and whilst there was an acknowledgement that this was, to some extent, inevitable there was a keenness, where possible, to prioritise being a couple.

At first, we were making a point of it, we said from the get go, a lot of our parent friends don't really get on with each other, it kind of feels like they're together because they've got a baby, I said I don't want to be that couple, I said, lets dedicate a night a month to me and you to keep this spark alive cos ultimately that's what's going to keep Bess in a family is if we are a team. So we do; once a month I'll take her out for a meal or go to the pictures and my mum will have [the] baby. (William, p33)

Time to be a couple became something that require planning and prioritisation. For some couples, this was either unexpected or seen to be an unusual consequence of new parenthood. Actively planning time away from the family home appeared to aid in the restoration of the relationship to its pre-pregnancy quality. Other couples spent this time differently to the same effect.

Honestly when India goes to bed, it is a bit of a relief because we can do normal things like watch a film or, have dinner or whatever. I love spending time with her I really do, it's the best use of my 24 hours but sometimes it's great to just be by ourselves. (Fred, p40-41)

Couple identity appeared shaken when time as a couple had become a rare event or had to be actively planned for.

It's difficult for us to be a couple, so I think we've made it out of the house for dinner once since Amelia arrived, which obviously isn't unusual, that's standard for new parents but that's quite demanding I think on the relationship

and we do have a good relationship, but it's certainly not the same relationship that we had before Amelia arrived. (Rob, p41)

However, there was a strengthening effect of facing the challenges and life changing moments of early parenting together and the couple's identity could be re-imagined and restored over time.

[We] have to try to remember, not remember but [to] make a more of a conscious effort to show my love to Elaine, but it is difficult, life's just so busy with a baby and it's just remembering how my wife might be feeling. (Albert, p18)

There was a regular requirement to compromise on couple relationship time in order to get through early parenting.

Yeah, well you know if Amelia [is] having a bad night and is gonna need lots and lots of feeds in the night then, she'll sleep in with Louise and I'll go to the spare room so we constantly put Amelia above our relationship to make it work. (Rob, p42)

Parenting was all-consuming in the early weeks but became less so with the passage of time which offered a gradual relief from intensive parenting.

But now you've got this little person taking up all your time, it's much more difficult to get that time together, but also to do things independently without a sense of guilt ...because it does take up so much of your time and effort to look after a small baby... you can't really have your own space and then when we do get that space as a partner, not to kind of points score off each other or to feel guilty too much about that because you just need that open space I guess. (Alex, p4-5)

Participants navigated feelings of guilt that stemmed from enjoying personal space and taking some time alone. However, generally, this was infrequent as the needs of the family took priority.

For Ethan, becoming a father brought him closer to his partner because they shared a common goal and parenting philosophy: "I think I'm closer to Susan now just cos I suppose we were just on the same page and communicating more and have the same goal in mind" (p14). In Archie's experience, existing relationship difficulties continued post-birth.

So, what's interesting is that so before the baby, I tend to just like not talk basically if I'm mad or something like that and so that happened a lot over the years where we didn't really talk for periods of time. But with the baby you just can't do that you have to communicate constantly, there's just no choice so, there's that change. There's a kind of, underneath that superficial, needs a nappy change, let's take care of this, there's still tension, we still have the same problems we did, they don't go away. But I guess the baby kind of becomes the primary thing that you focus on, it's a good thing really. (Archie, p34-35)

The nature of communication between Archie and his wife changed post-baby as a result of changing dynamics. He appeared to find some benefit in the nature and frequency of the required communication related to the baby's needs.

Participants' intimate partner relationships were further affected post birth by an increase in arguments and lack of time, alone as a couple. Positive relationship enhancements were experienced as a consequence of improved or different communication and a heightened respect for their partners as new mothers.

4.4.2 Friendships

Friendship changes were explored by all participants and without exception, the men described the change in friendship groups from pre-birth to post birth.

Friends, I hardly see my friends at all anymore. I don't know if that's just time or because it's harder to go out and see them. Although saying that, you probably see your friends who've got kids more often, so maybe your groups of friends change so you see some more than others and the ones who are going out partying and drinking and stuff you don't tend to see them that often.
(Ethan, p14)

Longstanding friendships became precarious, and the continuation of these friendships frequently depended upon having children in common.

Obviously everything has changed, you don't go to the pub all night anymore but, the people that I have seen have been other couples with kids and not so much other friends who don't or certainly not so much my single male friends ...I've got close personal male friends who I'd go and have a one to one chat with about stuff and so I guess that's still there but that hasn't really happened too much because of the limited time that you've got. (Frank, p5-6)

Participants had become somewhat detached from their childless friends and had started to spend more time with existing friends with children or with other new fathers they had met via antenatal classes.

So yeah, don't see friends as often. Ones who have got kids are the ones I tend to visit. Friends who haven't got kids, they're the ones that you don't tend

to see as much... whereas friends with kids generally come round a lot more.

(Neville, p30)

The fathers appeared to be grieving for lost friendships. This was intertwined with a sense of a loss or a changing self in their evolving fathering identities as friendship groups altered to socialising predominantly, with other families.

We had friends who had children not long before us so that slotted into what they were going through anyway so nowadays we see the friends of ours who have kids much more often than we see the friends who don't. Simply because that just seems more plannable somehow, I don't know why. (Rob, p38)

A certain level of empathy came from identifying with people in similar circumstances and friendships based on common interests or children aided longevity.

New friendships were commonly accompanied by a sense of solidarity with men who were also fathers.

You need to be able to talk to people about things but this is the only thing that you've got to talk about and you need to talk about it because sometimes it's very stressful and the only thing that you can do, because you can't walk away from the situation, the only thing that you can do is talk to somebody who understands, or at least pretends to understand and so when you're confronted with friends who have no interest in what you're talking about; very quickly you turn to other people who do. (Fred, p33-34)

However, this came with a potential cost in terms of a lack of depth to these friendships and the inability to gain the support they needed from these interactions.

I mean the dads are you know, they're just, essentially, they're blokes I don't know particularly well so the conversations are all fairly superficial. It's nice to talk to people who have gone through similar things and we tend to, but it tends to be always quite, oh I tried this, try buying that, fix this to that, or it's that kind of advice, we definitely haven't sat down and talked about how we feel about becoming fathers, it's not that kind of support group. (Rob, p37)

Conversations with other new fathers not well known to the participants, remained superficial and were practical in nature. There was also an expectation that they would socialise with the partners of the women their partners had met via baby groups or other postnatal social activities and to prioritise friends with children.

I've got friends with babies who [I], probably wouldn't spend that much time with before, there's kind of an expectation now that you've got this massive thing in common so, you're probably gonna hang out, which could be a bit awkward sometimes, kind of, well there's probably reasons why you didn't hang out with them that much. (Frank, p26)

Participants lacked choice and felt forced into these interactions based purely on of having a child in common. The loss of close connections in the process of becoming a father has the potential to create vulnerability as social support is known to be protective of new father's mental wellbeing and also their ability to support their partners.

4.5 Summary

The life change participants underwent in becoming fathers began, for some, even before conception but for most, became a reality at birth. Attending appointments

and scans enabled fathers to begin to prepare for an event which is otherwise somewhat abstract and imperceptible. The participants wanted to be the best they could be for their child and their partners. They worked hard to achieve this in what are arguably shifting times for fathers and fatherhood. Relationship changes were significant and impacted upon the levels of social support and the men's self-concepts as friends and as intimate partners. The aspirations participants had for fatherhood were embedded in an idealised family life and the reality of life change for these men, in many cases, was not anticipated.

Chapter 5 Tensions in fathering

The theoretical category of tensions in fathering incorporates the subcategories of **navigating gender**, **negotiating the workplace** and **healthcare holds power**. The participants' perceptions of societal and family expectations regarding their fathering roles and demonstration of 'good' fathering featured throughout the participant interviews. Furthermore, these were interwoven in their narratives on gender, generational differences, the workplace and experiences in healthcare settings. Participants frame these expectations within a perceived shift in social norms relating to the enactment of both motherhood and fatherhood in Western contexts. Via the experiences shared within these subcategories, it becomes apparent that as new fathers begin to perform caring roles and more involved fatherhood practices, they face similar challenges to mothers particularly in relation to gendered norms and in the context of workplaces. Furthermore, this chapter builds on the analysis presented in Chapter 4 highlighting experiences of transitions to fatherhood and the interpersonal and structural factors which facilitate or inhibit the development of their fathering identity.

5.1 Navigating Gender

Prevailing gendered norms underpinned many of the participants' experiences of transitions to fatherhood, impacting upon how they anticipated fatherhood, their

hopes for fatherhood and their couple, family and social relationships seen in Chapter 4.

5.1.1 Being a man

On learning of the pregnancy, participants shared their immediate concerns related to normative social expectations on them associated with the responsibilities of fatherhood.

I was petrified that I couldn't support her through it, that was the main concern, money and support... Can I step up and be a man? (William, p6).

William's concerns were constructed within the framework of a breadwinning identity and the norms associated with hegemonic masculinity and therefore 'being a man'. The anxiety of not being able to provide financially for his family and the internalised requirements for fathers to "step up" in response to fatherhood is clearly evident.

The concerns William had about being a father were perceived differently by Frank who felt that fatherhood, at its core, exemplified his manhood and masculinity.

There's a bit of me that did think... ok well... in a way it proves your masculinity a bit, if you've got a kid then it means... that you've achieved... [the] number one thing on the man list of things to do to prove you're a man. (Frank, p20)

Frank indicates a duality in his thinking when he refers to proving something to himself at the same time as a more generalised sense of needing to prove himself as a man. Internalised expectations of others appear to sit alongside intrinsic self-perceptions in relation to enacting masculinity and what this looks like. Despite the common narrative of these participants in relation to egalitarian parenting

approaches reflected in other sections of this analysis, there remains a perception that in becoming a father, you are more of a 'real man' and perhaps essentialist notions of manhood are being achieved.

Fred frames his role as a man in relation to his focus in life.

I think of raising a family as being like a man's job but not in the kind of football hooligan way, it's difficult to describe, the way that I think of manhood is more... traditional I guess in that, everything, my entire existence, is geared towards my wife and my daughter. (Fred, p31-32)

In the above data extract, Fred suggests that fatherhood is intrinsically linked to being a man. His somewhat traditional beliefs about masculinity are demonstrated by a shift in his priorities whilst at the same time identifying himself differently to hegemonic masculine norms. There is a distinction made clear here by Fred between a traditional way of being a father and ensuring that this is not confused with problematic displays of masculinity.

In the following extract, Archie highlights specific parenting practices that he associates with a positive fathering identity.

This has never happened to me, but I hear stories of people giving weird looks or insulting a guy for 'wearing a baby' which is pretty bizarre, I like it, I almost feel tougher, I can't explain it, it's like I'm a dad, I'm tough. (Archie, p31)

Archie's perspective may reflect traditional notions of the father as protector of the baby and thus by carrying the baby, there is an outward display of such. He reinforces this with his sense of toughness in carrying his baby around which suggests that this is perhaps a "front stage" performance of masculine fatherhood

manhood for the benefit of others. He emphasises that, whilst this is not something he has experienced himself, he is aware of this practice being problematic for other fathers.

5.1.2 The business of babies

Participants considered whose business the care for infants is thought to be.

I still think that there's part of that mentality out there [which] is, dad you're the breadwinner, go and earn money and mum looks after the baby, it's not what I buy into personally but I still think that's out there... but I think it's generational, I think the older generation do have the power in the media that push those ideals out. (Mark, p31-32)

External social and generational influences appeared to govern the 'right' or 'wrong' things to do as a father. The internalising of such norms is apparent in the way that Mark debates these and feels the pressure of them. There is a reference here to the older generation and their influence on parenting practices, where traditional beliefs are perhaps seen to be hindering the movement towards co-parenting and involved fatherhood.

Behaving in a way that challenges traditional fathering norms was considered in relation to being seen as less of a man, or in having one's masculinity undermined.

I mean certainly for the first part of his life he needs his mum a lot more, I think but, as long as it's got somebody that loves it and is kind to it then great ... I think it's seen as a woman's job isn't it to raise a kid? Maybe by some people, so if people think it's woman's job to raise a kid then a man doing that

job is doing a woman's job in their eyes, it emasculates them somehow.

(Mick, p10- 11)

Mick presents conflicting perspectives here with his impression of infants needing their mothers more in the early weeks and months. He suggests people 'out there' consider child rearing to be women's work and as such there is a perception of emasculation for the men undertaking primary caregiver roles. Nevertheless, he indicates that he does think that infants require their mothers more than their fathers initially and so is personally endorsing 'woman's work' here despite suggesting this is other people's opinions.

Despite these perspectives being acknowledged by participants as out of date, they were still considered to influence family life. Traditional ideals of family life and gendered roles within it are ingrained in the dominant institutions that govern social lives.

Participants highlighted that some family and friends assumed that they would not get involved with intimate care of the baby. In some instances, their peers were surprised about how 'hands-on' they were.

One of my friends mentioned about pushing the pram, he's like you won't see me dead pushing the pram around I was like, why? The thought never even crossed my mind, I'm happy to be walking around, I'm quite proud to be there with my kid and so I suppose a societal thing... men don't do that or... are his family weird like that, I don't know...I suppose the same with things like changing nappies. I was also a bit shocked with almost the sexism around that, expecting me to have a problem with it, if my wife went to do it, no one would have turned around and gone let's watch her do this..., I'm not

bothered about it but why would I be, it's my kid, I'm going to help as much as possible. (Iain, p 35-36)

Iain appears surprised about enduring gendered norms related to the care of infants. The expectations that men would have a problem undertaking care is something he suggests he has not considered. However, when faced with this attitude, he demonstrates his confidence in performing his fathering role and confidence in his own values and beliefs as a father, regardless of external endorsement. He suggests a double standard between what is expected of men and women as parents and his suggestion of sexism is framed in the context of being observed more in his fathering activities than a mother would be.

5.1.3 A boy or a girl

Gendered norms were interwoven into the narratives of participants related to the sex of their child. Despite wanting their child to be able to be whoever they wanted to be, gendered stereotypes were described, for example the fragility of girls or the robustness of boys.

I was happy it was a boy; I think being my first child, I'd probably be more worried if it was a girl. I wouldn't know as much to look after her, if that makes sense, at least with a boy I would think I can do boys' stuff with them and know roughly what I'm doing then. I probably would have felt more like I would break a girl than a boy...I don't know why, it probably sounds really sexist, yeah but I feel I could be a bit more boisterous, I feel like if he fell over and hurt himself it would be ok whereas I think a girl I would have been a bit more trying to wrap them up a bit and mollycoddle them a bit more. (Iain, p8)

There is a possibility that the perceptions of a biological pre-disposition to delicacy for girls and toughness for boys is embedded in these participants' individual socialisation and their own experiences of being parented.

William, albeit unwittingly, and perhaps, despite his best intentions, also appears to reinforce gendered stereotypes.

If you want to work on my car, come and work on my car with me, if you want to paint your nails with your mum, do what you want. That's the kind of life I think she should lead, no limitations. (William, p17)

There was a dichotomy in his statement which pitched gendered activities against the "no limitations" about the life his child could lead. This highlights the pervasiveness of gendered norms in social discourse and therefore represents a cyclical debate over equality and opportunities. William and Iain's perspectives highlight the tensions in gendered norms and how heavily ingrained these can be and these two participants, perhaps unconsciously, appear to be simultaneously rejecting and re-cycling them.

Understanding gender in relation to fathering aspirations is complex and framed within the context of pervading traditional fathering norms and the frequently unachievable societal expectations of what is expected of fathers and mothers in contemporary social life. The traditional gendered norms of fathering practice framed the participants' experiences whilst navigating their transitions to fatherhood and as they construct their own images and ideals of fatherhood. This did however present a tension between their own desires and ambitions for fatherhood and the possibilities which they saw or perceived in the social world around them.

5.1.4 Different to past versions of dad

Participants consistently said that the parenting practices of previous generations influenced their own fathering performances. There was a tendency to reflect upon experiences of being fathered and the differences between social norms now and those of previous generations. Participants' experiences with their own fathers were often used as a touchpoint when describing the kind of father that they hoped to be. They discussed the 'type of dad' they wanted to be embedded within an increase in fathering options compared to the traditional, predominantly breadwinning activities of past generations of fathers.

When I was growing up dad was out working a lot, did long days often seven days a week so he wasn't really around much when I was younger. I said to myself I don't want to be that sort of dad. I want to be there as much as possible. (Mark, p9)

Being present was seen as a priority for Mark compared to his own father. It is interesting that he shapes his father's practices as being a "sort" of father perceiving a choice which may not have been available to his father. Mark indicates here that the role performance of his father was linked to the type of dad he perceived him to be, thus suggesting that the roles performed by fathers, help to shape the fathering identity seen by others.

Participants also described their own fathers in the context of the caring activities they undertook, and in comparison to their mothers.

My dad was a fairly standard working class 1980's dad, he was out most of the time I remember playing with him and that kind of thing, I don't remember him as a care giver in the way that my mum would have been. (Rob, p33)

This 'standard' dad which Rob refers to, indicates that there was a predominance of this 'type' of father in his own father's generation, with few other comparable options. From the narratives throughout this study, there now appears to be multiple fathering styles, represented by the different roles participants perceive to be available to them.

Alex explains this further when referring to his own experiences of being parented, contextualised by the social norms of the time, compared to contemporary norms.

I sort of wanted to be much more involved maybe with Billy..., but not that my dad wasn't involved in my upbringing... My dad was never really very good around the house I suppose in terms of doing like the cooking and things like that, mum always did all of that, but then mum didn't work for seven or eight years and I think society has changed so much. (Alex interview 2, p 21-22)

Experiences of childhood were contextualised for all participants by their mother's presence in the home, describing a traditional home life with mothers undertaking childcare and domestic tasks and fathers engaging with paid work outside of the home. Alex positions his experiences within a dualistic framework of unpaid work in the home versus paid work outside of the home. Because mothers were not expected to work, they bore the burden of domestic responsibilities with few requirements for fathers to engage in such activities. His reference to societal changes indicates a recognised shift in these roles.

5.1.5 New possibilities

The possibility for different types of masculinity to be displayed by contemporary fathers was presented as a comparison with the one type of "masculine" demonstrated by participants' own fathers.

I don't think there was anything other than, than seeing my dad, you know known as masculine really, I don't think there was any other version of a dad when I was a kid. Whereas now I think society's made it more acceptable, I think, there [are] a lot of comedians who are dads who ... there not the alpha male and they are more effeminate man [sic] and that...seems to be a lot more prevalent in society now Albert, p31

With participants' own fathers as a benchmark for fathering, the exploration of the way that well known fathers act and present themselves in the media opens up the opportunity for different masculinities and associated fathering performance.

New fathering practices were described which, in most cases, compared positively with past fathering practices and participants own experiences.

I guess there are lots of things that just seem like a natural thing for me to do now like carrying Amelia around in a sling, which probably wouldn't ever have happened to my dad's generation. (Rob, p36)

Rob views carrying his baby as a “natural” thing to do without reference to how people might perceive him. His confidence in his choices and fathering performances, may be facilitated by his community social norms. The parenting norms at the time when participants were children contrasted starkly with those deemed to be ‘acceptable’ practices now and the growth in different fathering types compares significantly to more limited versions in the past.

The progress in roles undertaken by men in the family home offers new possibilities for current fathers. Participants spoke frequently about sharing domestic roles prior to becoming parents which reflected subsequent parenting practices and a more shared responsibility for the caring role.

I think in terms of what we do around the house together, in terms of cooking for each other and that sort of thing ...compared to my parents' role, my dad has never cooked, it's not because he can't cook although his cooking range is quite limited but, mum always did it when we were younger and I don't think those roles are what we have in my marriage with my wife. (Alex, p25)

Alex makes a direct comparison with the traditional roles undertaken by his parents. He appears to emphasise that his parent's roles were not necessarily related to capabilities indicating that when he was growing up, men were not expected to cook. The concept of 'hands on' fathering was influential, albeit within the context of the expectations on participants to undertake paid work and provide materially.

I think I'm a pretty hands-on dad, when I'm there ...I think when I'm there it's as fifty-fifty as it can be apart from breastfeeding... I hope, Karen would agree, but that's only when I'm there so overall, that's 50% of a bit of a day. And then at the weekends then I am. (Frank, p18)

Frank implies that he adopts as much of a co-parenting role as he can, despite this being restricted to the time before going to or after arriving home from paid work. In the way Frank frames this, there is perhaps an underlying tension in not being able to undertake as much of the childcare as he would like and also hoping that his wife perceives the situation in the same way as he does.

With an increase in the opportunities for men in their performances of contemporary fatherhood, such as changing nappies, attending play groups, carrying babies in slings and being more overtly emotionally in tune with their children, the participants suggested that men will adopt their own idea of what a father should be and what they should do. These options are situated within the context of a comparison

between traditional gendered norms related to fathering and contemporary expectations to be both breadwinner and involved father. Participants spoke about being different to their own fathers, being more involved in care and being more emotionally available to their children. There is an indication that the participants in this study continue to be influenced by internalised societal expectations of them conveyed via the media, from family members such as their own parents and their partners and from examples of fathering performances they may see in the social spaces they occupy. This requires them to be 'hands-on' parents, emotionally in tune with their children whilst continuing to perform as primary breadwinner, a role magnified during maternity leave.

Summary

Implicitly and explicitly, the participants in this study acknowledged changing and evolving masculinities and the opportunities this presented to them to expand their fathering roles in comparison with their own fathers. The participants' ideas of the fathering role were heavily bound within normative societal gendered expectations about how men ought to perform as fathers. Participants internalised these normative expectations and felt that their performance against them was something they were routinely measured against by others and through their own self-evaluation. Gendered norms related to the role of the primary caregiver was discussed in relation to how significant others facilitated their role as involved fathers.

Whilst some participants spoke clearly of their hopes for limitless opportunities to be afforded to their children, regardless of gender, they nonetheless positioned these hopes within somewhat stereotyped gendered notions and expectations of 'boys'

and 'girls'. Despite their articulated desire for involved and egalitarian fatherhood as seen in Chapter four, pervasive gendered norms surfaced, albeit perhaps unconsciously, in these participants.

Participants *doing* of masculinity along with wider societal expectations of fathers contributes to tensions in the workplace and healthcare provision where these expectations are reproduced and reinforced by traditional practices and attitudes towards men's fathering performances.

5.2 Negotiating the workplace

The workplace presents an arena where new fathers are required to navigate both gendered norms and socially grounded demands and expectations. Participants described paternity leave and their subsequent return to work as a time of great challenge and negotiation. All participants were employed, and spoke extensively about the challenges related to poor paternity leave provision, their return to work, the pressure to financially provide and workplace based support for prospective and new fathers.

5.2.1 Paternity leave

Paternity leave was discussed at length with an overwhelming sense of dissatisfaction with current policy, as Ethan indicated: "two weeks of paternity leave which is ridiculously short" (p19). Iain expands on this further with his perspective on this policy:

I found that almost ridiculous that the man doesn't get any time off; a week, two weeks but it's definitely not long enough to get used to it. Even if they did

extend it to a couple of months maybe just to get used to this change in your life and then you could go back to work at least...I get two weeks and I'm thrown straight back into work and the biggest change of my life, I don't know what I'm doing at all at that point and then I just go back to work ...I'll see you tonight for an hour. (Iain, p29-30)

There was a consensus across all participants that two weeks of paternity leave was inadequate and that this paid leave should be significantly longer. Not having enough time to get used to being a father and being pre-occupied with what Rob described as “husbanding” (p31) commonly underpinned this perspective.

I was just mainly running around, just doing whatever I could to try and make things a bit easier. I don't think, there was much fathering there, as much as there was husbanding. It was very much supportive...trying to predict what Louise might need. (Rob, p30)

Rob indicates that he played more of a supportive role in the two weeks of paternity leave and because life was so busy, he attended to whatever needed to be done. He suggests that the activities undertaken during paternity leave were less about bonding with the baby and more about meeting the support needs of his partner. Whilst this may be what is required at this time, the consequences are that fathers may have little time, prior to their return to work, to get to know their infants, further emphasising the inadequacy of two weeks paternity leave.

Frank explains further:

Yeah two weeks I think is pretty derisory really, it's no time at all to actually get to know a child really because you're dealing with all the practicalities as a dad, I found anyway because, Karen had just given birth and she was

breast feeding,[and] that much as I wanted to spend all of the time just there as a big pink mushy emotional blob, getting to know him and holding him all the time [I] couldn't because you've got to do stuff so, by the time you've done the stuff, for a week, then that's half your parental leave gone. (Frank, p29-30)

There was a common notion that an increase in paid paternity leave would have provided more of an opportunity to become closer to, and more familiar with the needs of their babies, providing more opportunities for bonding. This would also have enhanced both the practical and emotional support they could have offered to their partners.

William adds a further perspective on the inadequacy of paternity leave provision.

I don't think society thinks it's important because after two weeks you're going to go back to work and it's not really your job. I think that's what it really all boils down to. It's not our job, but now it is and it should be and I want it to be. (William, p22-23)

William interprets paternity leave as an indication of the lack of importance placed on fathers in government and workplace policy and therefore in broader social life.

William feels his job as a father is limited by such policies and feels a sense of injustice and limitation on his fathering performance.

William expands further on his perspective on paternity leave in his perception of abandoning his family:

It was the most stressful two weeks of my life and I thought, that's it now, I've got to go back to work and leave it all to you. You've got to do this on your own now, no sleep... I was kind of like, here's the baby you're on your own

kind of thing. I don't think it should be like that, there should be more time.

(William, p24-25)

Similar to several other participants, William's sense of leaving his family behind feels raw, and these circumstances have the potential to be traumatic for both parents. There was a feeling of not having had enough time to settle as a new family and that inadequate paternity leave may be denying new families the opportunity to properly bond.

Participants indicated that their role as fathers was not currently endorsed by policies related to paternity leave. They understood the consequences to include missing out on family time and on their child's developmental milestones, and in being able to properly support their partners. The inequality felt in relation to leave was unmistakable in participant's stories and a significant point of regret. In the current two weeks of paternity leave provision, new fathers appeared to be undertaking fewer 'paternity' duties and more household and supportive duties, enabling their partners to focus on the care of the baby.

5.2.2 Shared parental leave

Shared parental leave was discussed by participants although only one family had taken up this provision.

We took shared parental leave...and apparently, I'm the first person who has ever requested it... So HR weren't quite sure what to do with it and the forms that they get you to fill out didn't really make much sense. HR were saying can you just request it as unpaid leave cos we know what we're doing with that, so I said well no, I want to do it like this because they can refuse unpaid leave whereas they can't refuse the shared parental leave...but yeah two

weeks is a joke really, having eight weeks off was really nice, spending all our time together it was lovely. (Ethan, p19)

Despite facing organisational challenges in arranging shared parental leave and subsequently facing barriers to enacting a co-parenting role, Ethan offered a rare insight into the possibilities for fatherhood when shared parental leave was taken. This included time for family formation, bonding and togetherness, the opportunities for which are frequently challenged because of current paternity leave provision. Participants overall disagreed with reducing maternity leave to provide for shared parental leave.

Shared paternity leave, I don't think it's right because it's taking maternity away from the woman so the father can have time off... fathers should get more than the statutory two weeks. You know it shouldn't have to take time off the woman to have that... it's pretend... 'we'll pretend it's, you know, for the fathers'. (Mark, p33)

Shared parental leave policy was interpreted as not being 'real leave' as it did not increase overall parental leave entitlement and none of the time was dedicated to fathers. Mark suggested that whilst he agreed that paternity leave was inadequate, shared parental leave was a poor solution because it required sacrificing of part of maternity leave entitlement, the right to which is embedded into contemporary UK culture.

Paternity leave policy appeared to pervasively reinforce a felt lack of importance in the fathering role, particularly in early parenthood. It has the potential to contribute to a lack of workplace equality, ultimately reinforcing gendered roles and perpetuating women's responsibilities for child rearing and care.

5.2.3 Returning to work and worker identity

In addition to the perceived lack of importance exemplified by parental leave policies, the feelings of abandoning or leaving behind their partner and baby on return to work were commonly shared.

I'd not really thought about coming back to work and kind of knowing that I will miss a big chunk of his life because I am at work, I'm out of the house most of the day and thinking about, is this what it will be like for me not forever but for the long-term future and I'm out of his life for more time than I'm actually in it. I get to spend about an hour with him each night after work and that's just like I said feeding him, bathing him which is nice but I don't get to do the fun stuff that she'll have been able to do. (Iain, p27)

The separation from their infants on returning to work, provided a stark reminder of the deep emotional investment these fathers had already made with their new family. In the extract above, Iain appeared resigned to a different kind of father son relationship to the one he had aspired for. He saw himself missing out on important time with his son and hinted at a level of resentment towards the level of maternity leave provision afforded to his partner. Many participants were developing their fatherhood identity as being jointly responsible for the care of their babies. The return to work punctuated this transition in that it provided a further barrier to enacting involved fathering roles and achieving the fathering identity they appeared to be striving for. This required compromise and further re-negotiation of roles, thus impacting upon their fatherhood identity.

Participants expressed difficulty in motivating themselves when they returned to work. They questioned their impact and usefulness as paid employees when they were exhausted and distracted in the early weeks of fatherhood.

I remember... crying on the bus on the first day, I remember falling asleep on the bus in those first few weeks back at work, a number of times, and luckily waking up in time to get off the bus. So a combination of just being sleep deprived and really not wanting to be there when I was at work, I felt pretty rotten, definitely for the first few weeks back at work. (Frank, p16)

The distress and exhaustion felt by Frank is clear in the extract above. The risk to his mental health from returning to work whilst emotionally vulnerable and sleep deprived is apparent. Participants were trying to fulfil their roles as co-parents in attending to their babies overnight, wanting to share this responsibility with their partners. The return to work impacted upon their ability to achieve this and consequently compromised their performances of worker, father and partner. Lack of sleep impacted on participants engagement with work, and many found it difficult to perform as they previously had or to even muster an interest in work at this stage of new fatherhood.

Workplace pressures and expectations further impact upon new fathers during the early weeks and months of fatherhood.

I felt like I was abandoning my duties. If she's crying her eyes out at ten o'clock at night and I'm up at four I'm like 'will you see to the baby' and you can see in her eyes she's like kind of 'what'? And you feel so guilty but what can you do, you know what I mean, you're not given much choice but to live

that kind of life...That feeling you can't help somebody even though it's part of your job as well but you just can't help. (William, p25-26)

Tensions were present in the context of the competing responsibilities between employer and partner. Moreover, participants described having little choice because of these expectations. Attempting to enact a fathering identity within the workplace, for some participants, was challenging.

No, you can't be a dad because we need you to be working here and obviously you shouldn't be trying to do this anyway, why bother with that kind of thing ... yeah it's really frustrating when you want to do things to be a better dad but you're kind of impeded from doing that. (Ethan, p23)

Workplace culture had the power to significantly influence participants evolving identities. The expectations to be focussed on work and the perceived lack of importance that employers in traditional orientated work environments placed on new fathers presented barriers to balancing these competing demands. Whilst participants wanted to be involved fathers, workplace culture was seen by participants to facilitate or inhibit this ambition. Their parenting status was frequently overlooked and the support available for new fathers during this critical and vulnerable time in their transitions to fatherhood appeared to be minimal.

Participants attempted to find other ways to balance work expectations with fatherhood responsibilities in the early weeks of their return to work.

It's about managing a little bit of work to still keep a job but most of your time devoting your energy towards him for those or supporting Ann for those twelve months and that's what my family has needed and, yeah that's the way

I've viewed it essentially and so my career has probably been secondary.

(Alex, p18)

Priorities had shifted away from workplace goals and career development to focus on financial provision and support within the home. Putting a career on hold or pausing career development was a temporary necessity in order to meet the needs of their new families.

This pause was framed as temporary with the underlying assumption that at some stage, participants' career trajectories would be reignited, as Mark indicates, "now she's got to that year old, it's like it's given me the chance now to start looking at getting my career going again and look to move on" (Mark, p23).

This temporary hold on career planning and promotion was in place while participants focussed on being the main breadwinner for the family. At around one year post birth, there was an indication of a resumption in their career focus, often corresponding with the mother returning to work after maternity leave. This career refocus however, was not discussed in relation to their partner's careers or with reference to parenting commitments.

There was also a reflection on changes in their values and attitudes towards their professional identity.

I feel like if I did act stupid and got sacked or quit then that's having an effect on the baby because she's not going to be able to have the things she wants and that's not a good role model. (William, p28)

Worker identity had changed in tandem with a perceived change in the meaning of paid work in their lives. Work meant more now, in some ways, because of their responsibilities at home and there was more motivation for staying employed and

doing a good job. This was not only about financial provision and job security but also about being a positive role model to their children.

Rob reflected that becoming a father had shifted his priorities away from work.

My non-work hours are quite important now and they're full of really important things and I guess I've become a bit more mercenary about work and because of that, because there's something a lot more important now and my career is fine, but the point of my career is much more about supporting Amelia than it is about getting me another bit of wall bling, like I could care.
(Rob, p44)

Rob's quote emphasises a shift in his worker identity, where extra time spent in the workplace appears to take on new meaning and holds less value to him than it once did.

Challenges were faced in performing a fathering role in the workplace. Moreover, participants' worker identities had become less salient, at least in the first twelve months of fathering. There was a tension between their priorities at home and their work pressures which were managed in different ways. Those in professional roles perhaps had more confidence in their job security and so felt able to actively prioritise home life and focus less on career progression.

5.2.4 Being supported by the workplace

The extent to which workplaces supported prospective and new fathers varied amongst participants. Some managers allowed attendance at antenatal appointments and provided extended leave whilst others provided barriers by refusing or limiting the options for flexible working.

Active support for new fathers was reflected in managerial practices. The challenges of the early weeks of new fatherhood appeared to be understood by some employers where expectations on participants workplace performances were lowered, at least in the initial weeks.

I think I've been lucky in that my boss, my manager at work is very understanding, kind of put me in a quiet corner for those first few weeks back.
(Frank, p2-3)

Frank considers himself lucky to have an understanding manager who responded to his needs as a new father. However, the practical accommodation of the workplace would have been enhanced further by support for psychological wellbeing.

That's the thing perhaps I struggled with the most, was being able to put it to the back of my mind for a bit. Maybe if there had been a bit more support there from my workplace rather than just letting me go to an appointment and not worrying about that and then you know, maybe it, maybe that side of things, yeah I would have really valued a bit of you know actual interaction and support from work. (Frank, p9-10)

The flexibility of employers impacted upon the ability to attend appointments and therefore potential engagement with the pregnancy. In some cases, participants had very positive experiences with employers extending leave or providing compassionate leave if their babies had been unwell post birth.

Certainly, in the last year my work have been pretty flexible I think in terms of allowing me a little bit more leeway of coming maybe slightly later and maybe not working, not exactly working all my hours in a week things like that they've been quite good with. (Alex, p14)

Having a less flexible working environment may reduce the ability for prospective fathers to attend scans and other appointments (see chapter 4) thus creating a tension between the breadwinning role and work commitment and that of an involved and connected father. Since dedicated paternity leave in the UK remains minimal, workplaces may be well positioned to offer psychological support to new fathers on their return to work to help mitigate postnatal distress.

Summary

Negotiating the workplace in transitions to fatherhood presented a number of challenges, including inadequate paternity leave, inflexible working practices and a change for some participants in the prominence of their worker identity. When flexibility was available to participants, the connection to the pregnancy was enhanced by being able to attend scans and appointments. Participants with professional occupations and associated job security, actively changed their perspectives on work, prioritising home life and doing enough to ensure that they remained under the radar of management. However, this was seen by some as a temporary readjustment of priorities and that given time, their career trajectories would be back on track. Participants interpreted traditional gendered workplace culture as one which encouraged men to *do* fathering via their role as a breadwinner but discouraged or inhibited them from taking time away from the workplace to enact other forms of fathering. Participants wanting to be co-parents found that traditional workplace practices did not necessarily facilitate this and they had to actively assert their parental rights.

5.3 Healthcare holds power

Interactions with health professionals from pregnancy through to the postnatal period were discussed at length by participants. There was an overall appreciation for the care received by their partner and baby, but the participants consistently reported a poor level of father focussed care and communication. This ranged from a lack of father inclusive antenatal preparation to being ignored in emergency situations during labour, birth and at postnatal consultations. This lack of inclusion is described in the contexts of antenatal, labour and birth and postnatal encounters with healthcare practitioners from a range of professional backgrounds.

Reflecting on his motivation for participating in the present study, Iain highlighted the tendency for people to focus on his wife's feelings and experiences.

I suppose I've not actually been asked much about how I feel about it and, it's more a 'how does my wife feel about it' type question usually and more based around her than my perspective and feelings. (Iain, p50-51)

The lack of father inclusive conversations, decision-making and service delivery had an impact on participants' sense of importance as fathers and may ultimately impact upon their perceived role and therefore the development of their fathering identity.

5.3.1 Antenatal experiences

During pregnancy, participants described a lack of father focussed preparation in both the content of antenatal classes and in the literature available to them (see chapter 4).

It strikes me that a lot of the advice beforehand is tailored towards mothers and perhaps something similar for fathers would be good. (Mark, p16)

Whilst this is a simple statement by Mark it indicates who is seen as a priority during antenatal preparation, that is, mothers not fathers. A simple broadening of the focus could provide prospective fathers with, not only the information to make informed choices but with an opportunity to prepare for their future fathering roles. Frank further identifies where the emphasis of perinatal healthcare lay.

I think I felt supported as part of a family to be, um I don't remember any, there wasn't any specific, dad to be stuff, that was kind of going on that I remember, there might have been some kind of posters up for dads' groups in [hospital] I think. (Frank, p8)

Missing from formal antenatal preparation provision were topics such as the consideration of the specific challenges for first time parents and preparation for life and relationship changes.

So, I don't know if that's well sort of the way men are, and that the lack of support is why more, to me more men fail as parents than mums, so I don't know if that is, cos it isn't real to you until it happens, so you don't know how you're going to react until the situation happens, you can prepare yourself. The more preparation you have, to me the better chance you've got of coping with it so, I don't know, to me whether that is the lack of information. (Neville, p40)

Neville reflects on this lack of support and information and relates it to fathers "failing". He suggests that enhanced support and father focussed information would both equip fathers better for their future roles and also have a positive impact upon overall family functioning and stability.

The topics focussed upon during antenatal classes appeared to prioritise practical issues such as parking the car on the day of the birth.

Certainly, that's one of the things the NCT classes told us to expect...the father would have to drive away and come back. It's one of the things that the NCT class were very, hot on was that the fathers needed to know about the parking arrangements (laughs) which seemed a bit- it's just parking- not really worth worrying about. Bigger fish to fry right there. (Rob, p26)

Whilst addressing practical considerations such as parking may help prospective father's to navigate additional stresses at key moments such as arrival at the labour ward, it also frames and constrains the contribution men might be expected to make during such key times.

5.3.2 Labour and birth

During labour and birth, participants had varying experiences of support and communication with practitioners. Whilst sharing an overwhelming desire to 'be there' for their partners, the lack of inclusion left them feeling disempowered and isolated. Participants perceived themselves as being in a supportive role for their partners during labour and birth but their lack of agency in this context was evident, as Albert suggests.

The sort of business end, you certainly feel terribly useless, terribly, terribly useless, so all I could be was just there, and just, to just offer whatever my wife felt would help, but you know you do feel, you do feel utterly utterly useless, especially when you see, your loved one in so much pain and there's just nothing you can do. (Albert, p26)

The helplessness felt by Albert appeared to be associated with a lack of role and the inability to ease his wife's pain and suffering. Being offered a role during labour could provide men with a focus and empower them to be the support person they wish to be. Being left without a role during labour and birth emphasised their sense of exclusion from the process. This was further compounded by an overall lack of communication generally, but particularly in emergency situations.

It was a traumatic seven and a half hours. Quite stressful and I found as a father I wasn't necessarily told what was happening. You know, stand here, it's an emergency C section there were that many people there, what's this, what are we doing? (Mark, p25)

In emergency situations, the sense of disempowerment was magnified, and the lack of information exacerbated these feelings. The nature of communication between practitioners and participants was unidirectional and provided few opportunities to ask questions or clarify actions and decisions. This lack of information led to increased stress and perhaps, in itself, discouraged participation.

Being able to understand what was 'normal' and how they could better support their partners was key information that was lacking in these circumstances.

I know I'm not in pain but I'm still sat there worrying all night like is everything going ok, should this be happening, I don't know what's happening here, is this normal, is this? (Iain, p45)

Minimal communication at key moments left participants creating their own reality of events. Their fears for their partner and baby may have been heightened by a lack of clarity regarding the normality of the situation.

Feeling invisible when important and potentially life changing communication occurred, left some fathers fraught and unable to process or comprehend the information being discussed.

I'm sat in a little chair in the corner of the hospital thinking, so she's basically just told me that my partner could die, basically the words were, you might not make it through and there w[as] no, 'are you ok with this?' 'Do you want any input into this?' I was on the back burner a bit, the whole hospital experience weren't very nice. (William, p2-3)

During dangerous or life-threatening situations, it appeared inconceivable to these fathers that a shared conversation inclusive of both parents would not occur. The power held by the health professionals conveyed in the above quote was unmistakable and the lack of control felt by William, profound. None of the participants suggested that the focus should have been on them. However, improved communication during this time would have supported them better, particularly when feeling a significant loss of control and potential disempowerment.

Shortly after the birth, Archie describes having his daughter “shoved” at him with Neville describing this as “all of a sudden” implying this was not expected.

So I was very scared of you know they just sort of shoved the baby on to me and then I just don't move at all cos I was afraid of shifting position or anything. (Archie p4)

She didn't know where she were, what really were going on, and then all of a sudden they just handed me a baby, I was like fuck, this is a bit weird.

(Neville, p 3-4)

A sudden life change was experienced by participants on being handed their baby immediately after the birth, providing an abrupt reality check of their new identity. The suddenness of both Archie and Neville's experiences above suggest that they might not have been as involved in labour and birth as they could have been and being handed their baby in this way was a bombshell moment. Had they played more of a role during this time, perhaps holding their babies might have merely been a natural extension to the birthing process.

In the immediate post-birth context, participants continued to find it difficult to advocate for their partners.

Yeah I think it was definitely more a case of us not being heard because at each point when someone had a go [at suturing] and it didn't work out we were quite clear... they would ask us 'oh do you wanna go to theatre instead' and we would say 'yes' and then they'd pause and then they'd ask again until we said no. So it really didn't feel like we weren't making our case I just think I could have made the case more effectively somehow. (Rob, p22)

Rob, found it challenging to advocate for his partner during immediate post-birth care. However, there is an indication here that this was not just Rob's voice which wasn't being heard but also that of his wife. Whilst Rob perhaps felt that he had failed to act on behalf of his partner, it may be that this is not a gendered issue but more of a question of patient voice. Irrespective of this, Rob indicated a feeling of regret and disempowerment.

Labour and birth were times of joy but were also accompanied by experiences of exclusion from the process. More inclusive roles for fathers, coupled with improved communication could serve to emotionally bolster prospective fathers during the

point at which they feel most “useless” (Albert, p26), out of control and disempowered in their transitions to fatherhood.

Having to leave

Not being ‘allowed’ to stay with their partners for the first night after their baby was born was a considerable challenge faced by the majority of participants. Fred (p23) said “I was quite irritated about that as well. I would happily have slept on the floor; I really didn't care at all” furthermore Albert (p16) suggested it felt, “a bit rushed, a bit forced, like you get a little hold... and then it was then right ok yeah it did feel rushed and interrupted”.

There was a lack of time following the birth for participants to spend with their new baby and they felt hurried along by the requirement to leave.

Fred was sent home in the middle of the night after the birth of his baby.

It got to midnight and erm nothing had happened erm and they said right well you should go home.... and was like what? ...it might be a while, you should go home... So Donna was still exceedingly tired [and] she now has to look after this tiny baby without me for the night and she's like, ok, well I can't go to sleep then obviously, so I got sent home. (Fred, p 24)

Being told to leave, knowing that his partner and baby were not yet settled further exemplified the experience of being rushed out of the hospital, a common occurrence in the middle of the night. This felt exclusion from maternity services was a continuation of experiences in the antenatal period. Moreover, this lack of importance experienced by participants had the potential to affect both their father

identity development and the opportunities for fathering role performances in maternity contexts.

Being sent home following a potentially traumatic experience, such as an emergency delivery, resulted in participants having to deal with this alone with some recalling the inability to sleep or to rest.

Just difficult really, just difficult because feeling separated from your wife in that way anyway, so she's gone into the hospital, you're not seeing her and then to go home but then [for] all of that stuff to happen and then to see the sights that you've seen and the emotions that flood through. (Alex, p15)

I was aware that I might not be able to stay, yeah that was just really strange, just [to] become a father and then, you just have to walk home and go home to an empty house and wait and I didn't get much sleep that night, just a whole wave of emotions, excitement and worry and yeah an odd feeling. (Albert, p15)

Returning home after difficult experiences during labour and birth was a potentially vulnerable time for participants. Being asked to leave the hospital presented a pause in the formation of their new family, and for some participants, the concern for the welfare of their partner and baby was significant. Having to manage a multitude of intense feelings at home, alone, may increase emotional vulnerability, particularly in instances where birth plans had not come to fruition.

Throughout their pregnancy, Frank and his wife had been told that there was potential for their baby to be born with significant additional health or developmental needs. Being asked to leave on the night of his birth further compounded his fear of losing his baby.

I found the most difficult, was the very first night he was born, I couldn't stay in the hospital, I had to go back home and I remember that night as being just awful...all I could think about [were] the things like, is he still going to be breathing if no one's looking at him...it was mixed with those feelings of he'd been taken away from me which I guess, in a way I'd been terrified would happen for nine months and he was and not being fully convinced that the next morning that he'd still be there, I hadn't had enough time with him to really believe that he was gonna be there all the time. (Frank p12-14)

Despite being a temporary separation from his new baby, this appeared to reinforce the fears that Frank had throughout the pregnancy and was a potential source of trauma. The anxiety that Frank experienced is significant and under such circumstances a more compassionate and individualised approach from healthcare professionals would have supported both Frank and his partner in these first few hours of parenthood.

A different kind of experience

Mick was the only participant to have experienced a home birth and shared a very different experience of labour, birth and the immediate postnatal period.

We had a pool downstairs and all that so it was just, the midwives left and then we were like fuck! This is real then... but it was amazing like absolutely fucking brilliant, he's he was a star. It all went pretty easily and then, it think I went and got fish and chips (laughing) brought them back, yeah no it was good. (Mick, p7)

Throughout Mick's interview he stressed a relaxed approach to his fathering role. He was co-parent to his baby sharing care with his partner. He indicated little

preparation for parenthood and stated that he didn't think too deeply about his fathering role. His experience of a home birth was something that he was fully involved with, and it would be useful to know whether this inclusive experience provided a greater level of empowerment to Mick. His experience contrasted significantly with participants who experienced a more standard engagement with health service culture and practices. Although it cannot fully account for his overall approach to parenting, this lack of exposure to strict institutional rules and minimal role during the birth may well have protected him from the disempowerment felt by many participants.

5.3.3 Postnatal

Strengths and challenges related to interactions with postnatal healthcare professionals influenced participants' sense of autonomy and fathering identity.

I think the key thing [is] I felt massively wonderfully supported as a family to be by doctors, by GP's midwives and all the rest of it... and that was perfect in terms of everything but like I said before you can't really say you need it cos I didn't get it and things turned out alright but I think it would have been interesting to have [had] some kind of father specific stuff. (Frank, p36-37)

Where positive interactions were described, this was in the context of appreciating the support received as a family or gratitude for the support their partner and baby had received in contrast to specific support aimed at new fathers. Frank and other participants felt that it was difficult to know what information and support was needed and while he suggested that "things turned out alright", if they had not, father focussed support and information may have bolstered his resilience to deal with any challenging outcomes.

Postnatally, participants continued to feel a sense of exclusion from services despite appreciating the input for the mother and baby.

Yeah [I] feel [like] a bit of a spare part sometimes I felt [the] conversation was just between my wife and the health visitor, and you know I was just there really, but on the whole I think the service, that whole system, I think works really well, the amount of visits that we get, but yeah felt a little bit like a spare part I guess. (Albert, p25)

Despite being present at visits, Albert indicates a level of exclusion from conversations where the focus appears to be on the mother and baby. Being ignored in such a situation further emphasises a lack of importance placed on father's contributions to such visits, particularly in the immediate postnatal period.

William considers whose business babies are perceived to be:

I think that's the problem, it's that it's all centred, and I know I keep going back to that but it's very much female orientated when it comes to a baby, all the care [is] for them, the after care is for them. (William, p22-23)

Feelings of worth and equal partnership are discussed in relation to their perceived invisibility in interactions with midwives, health visitors and other healthcare providers. The lack of a family focussed ethos in perinatal service provision coupled with inadequate paternity leave contributes to the perception that fathers are not as important as the mother despite their aspirations to be a supportive partner and involved father.

5.4 Summary

Fathering performances were inhibited or facilitated by participants' experiences of perinatal healthcare provision. This was further influenced by a perceived exclusion at antenatal appointments, a lack of father inclusivity in antenatal classes and inadequate parenting literature for fathers. Experiences in labour and birth reflected exclusion from active participation and from important conversations, in some cases, causing significant worry and distress. Being asked to leave soon after the birth of their baby was perceived as a level of exclusion and potential interruption to the formation of their new family, reflecting their perceived sense of importance within perinatal service provision. This exclusion continued into the postnatal period and compounded a sense of disconnection from observing developmental milestones and involvement in the routine care of their babies because of their return to work. Participants' comments indicated that there were a broad range of external influences which affected their fathering practices which at times were at odds with the way that they had anticipated fatherhood in Chapter 4, thus reinforcing the notion of **tensions in fathering**.

Chapter 6 Fluidity of fathering

The theoretical category of ***fluidity of fathering*** signifies a continuously evolving fathering role and the formulation and reformulation of fathering identity as children grow and as men settle into fatherhood. This theoretical category comprises the subcategories of **time facilitates opportunity**, **perceiving a role** and **role endorsement**. The participants in this study generally suggested that they perceived more of a role for themselves as their baby grew older. Furthermore, the child's age and developmental stage presented opportunities for participants which were expressed in their descriptions of play, care, and interactions with their children. Being able to perceive a role was fundamental to an engaged and involved fathering performance and the development of a positive fathering identity. Perceiving a role was consequently influenced by the roles endorsement by partners, family, and friends, interwoven with normative social and gendered expectations on new fathers. Endorsement relied on those people with whom participants had relationships, validating the involved father role which therefore contributed to fathers feeling more empowered to perform this role.

6.1 Time facilitates opportunity

The subcategory of ***time facilitates opportunity*** relates to both time in generational terms and time related to the growth and development of their infants. The passage of time since the participants were children themselves has led to more options in

parenting roles for these contemporary fathers. The possibility of an opportunity for them in taking on the primary care giver role and becoming co-parents, however unlikely it might be, contrasts with the roles ascribed to and undertaken by their own fathers.

6.1.1 Early roles

Participants perceived a change in fathering roles as their children grew and developed.

At the moment it's relatively straight forward, just make sure that she's happy and fed and watered and changed her nappy and that kind of stuff. When she grows up a bit and needs a bit more stimulation, I guess that's a different challenge, but I guess she's constantly developing so how you interact with her is going to change. (Ethan, p11-12)

Meeting the emotional and physical needs for their children as they grew was perceived as becoming more complex as time moved on and it was suggested that infant care was basic and straight forward. As previously discussed in Chapter four the point at which participants identified as fathers differed and the fathering roles required during the first few weeks varied considerably to those required once their babies were walking, talking, and were more physically demanding of them.

The early weeks of fatherhood were perceived to be about supporting their partner, earning money and 'helping out' around the house.

I think the role changes...I feel now as a dad I'm more involved with Billy generally because he has grown up, so he's now crawling, pulling himself up, sofa surfing, [there's a] bit of chatter. I can play with him, we can build trains,

you know, it's that sort of interaction. Whereas I guess... probably [in] the first twelve weeks or so, I saw my role more to be [around], if there was anything that needed doing in the house, that was down to me because, my wife was too busy, that was my own interpretation of what I should be doing, so that's cooking, cleaning, making, all that practical stuff is down to me to sort out.

(Alex, p24-25)

Fathers of more mobile and interactive babies felt that they were now able to be more involved with them, with an associated increase in confidence in their parenting abilities.

As babies became more interactive, a more reciprocal relationship started to form which participants suggested gave them a stronger fathering role than one enacting partnering or “husbanding” as described in Chapter five. To this end children appear to be agents of fatherhood identity formation. The progressing stages of development and communication abilities of infants may be facilitative of a more interactive parenting role and therefore providing more opportunities for involved fathering. Moreover, this perception of a lack of role in the early days and weeks of parenthood may impact on parenting autonomy in new fathers, particularly in caring for very young infants where the dominant discourse is that the basic needs of infants are best met by mothers. It is interesting that participants saw more of a role as the complexity of care increased compared with the more ‘basic’ care of infants normatively positioned as women’s work.

The fluidity in fathering was anticipated, by participants, to continue throughout theirs and their babies’ lives.

They change that rapidly that you're not used to the next stages and now he's kind of a toddler and I've not been around other than the weekend for any of that stage so I am completely out of the loop with what happens in the day time routine with that (Iain, p31).

Keeping up with the ever-changing needs of their babies was difficult when participants felt “out of the loop” due to being at work. Whilst an evolving fathering role was anticipated as their babies grew, many felt they were missing out on key stages, potentially affecting their confidence in parenting and insight into their baby's needs.

I think I'm a pretty hands-on dad, I think when I'm there it's as fifty: fifty as it can be apart from breastfeeding. I think, I hope, Karen would agree, but that's only when I'm there so overall, that's 50% of a bit of a day and then at the weekend, then I am and I think at the moment, I'm a fun daddy. (Frank, p18)

There are multiple caveats related to how participants describe involved fathering. Frank indicates that by returning to work and by not being able to breastfeed there were structural and biological factors which affected his calculation of involved fathering.

6.1.2 Back to life

Participants described becoming a father as a major life change. However, the chaos and lack of direction experienced in the early days and weeks of parenthood were generally perceived as temporary.

Being a dad is better than anything I imagined before Billy's birth but there comes sacrifices with that and you can't do some of the things that you used

to be able to do and then, I think it's about somehow trying to find ways of building those back into your life as Billy becomes more independent... it's about somehow finding ways that you can return to some aspects of your old life that you may have lost in that transition. (Alex, p27-28)

As life settled down, a new 'normal' was identified and participants suggested that at this stage it was acceptable to consider taking time for themselves again and to reassess their personal goals and professional development ambitions.

Now she's got to that year old, it's given me the chance now to start looking at getting my career going again and look to move on. (Mark, p23)

As the considerable life change experienced at birth and in the early weeks and months of fatherhood started to ease, there were possibilities of these participants regaining something for themselves. The notion of "rebuilding your life" suggests that life was almost put on hold, albeit temporarily, during early fatherhood.

Maybe it's part of my view; long term view of rebuilding your life after becoming a dad to then think more about your career if possible. (Alex, p15)

Alex's suggestion that having a baby disarrayed his life somewhat, consequently required a level of reconstruction of his life. This only became a possibility as babies grew older, where the refocussing of career aspirations was recognised. Regaining or re-elevating professional identity was contemplated, indicating a re-evaluation of the different worker identity associated with initial weeks and months of fatherhood. It is paradoxical that, despite these men's aspirations to be involved fathers, in many cases the breadwinner role was seen to become more prominent in early fatherhood. That participants didn't consider themselves to be work focussed as such suggests

that work during this time was seen as a financial necessity and not necessarily one associated with career development and life enhancement.

There is a common social narrative that men do not miss out on career goals and or career advancement when becoming a fathers compared to when women become mothers. However, this evidence suggests that men do pause their career aspirations during this time to focus on the breadwinning aspect of their jobs.

Furthermore, in choosing to be involved fathers, men may also find themselves navigating career challenges.

The point at which mothers returned to work after maternity leave became a point of possible rebalancing of roles for participants.

When Louise goes back to work too our time with Amelia will be much more balanced too. Obviously at the minute, I'm at work and Louise is at home with Amelia all the time. It's bound to be imbalanced; I'm bound to play a supportive role if I'm there for a quarter of the time that Louise is and have no boobs. (Rob, p32)

Rob highlights the perception of mothers as the primary care giver for infants, suggesting that this is mainly related to breastfeeding and therefore any of the roles he is able to perform are more supportive in nature. However, from the end of maternity leave there was an increased possibility of co-parenting. At this point in particular, participants expressed empathy with the challenges that their partners may now face in returning to work.

Now it's coming up to him going to nursery and my wife's not there all the time for him, thinking about how I can support her through that as well... it was hard coming back to work and that's one of the things I've tried to get my wife

to understand... if I'm not pulling my weight with stuff that it's because I'm back at work and you'll realise when you go that... I'm not sad that I'm leaving you in bed in the morning cos of you getting a lie in or something...I know I'm leaving you and you've just got to look after our son on your own all day and I'm not going to see him for a day and I've got to go to work and think about other stuff that I don't really want to be thinking about...So it's that and I'm used to it now but it's been the best part of a year to get used to it. (Iain, p26-27)

Towards the end of maternity leave, there was an awareness of increase in the opportunity for more balance in parenting roles between participants and their partners. However, this was also a time when participants perceived the opportunity to concentrate on their careers again. Whether this then manifests a co-parenting opportunity is questionable as career and workplace ambitions will arguably require more workplace commitment and therefore further tensions between work and home life may occur. However, if both parents return to full time work, the balance of care at the weekend, provides an opportunity for more equal parenting roles. If mothers return to part-time work and fathers re-focus their career goals, the imbalance of gendered contributions to domestic duties and childcare may endure.

Summary

It appears perhaps that when less parenting is required by the parents because it is being done by others, for example at nursery, the parenting roles have the potential to become, or at least to be perceived as being more equal. Perhaps being able to perceive an involved fathering role and subsequently have that role endorsed

increases the salience of the involved fathering identity. This perhaps contributes to increased equality in parenting and further development of involved fathering roles.

6.2 Perceiving a role

For these participants, being able to perceive a fathering role was influenced by several factors including their relationship with their partners, having realistic expectations of household workload, and consideration of the opportunities that contemporary fatherhood held.

Louise got told this bit of advice and it's really neatly expressed, that, being a new parent it can feel like you're doing 90% of the work and your partner is only doing ten percent, whereas the actual fact is there is 180% of the work there used to be, so even if you're splitting it evenly it still feels like you're doing a lot more than you used to. (Rob, p45)

The pre-birth expectations of fatherhood were challenged for some participants who were able to see more of a role for themselves with their infants than they expected, even if they had to search hard for it.

I kind of expected to be a pretty hands off dad and like she would do the nappies and she 'd basically take care of the kid until, you know, an older age, you know, that she'd start to do science toys and things and I would do the science toys with her but you know as a baby I'm like yeah I didn't think I could really do anything, which is still kind of true but nappies, I can do that and I can hold her and try to comfort her you know...give her a bottle of pumped milk. (Archie, p22)

For participants, care of the mother appeared to be part of fatherhood, seeing caring for their partners as integral to their fathering role.

I was fully prepared to go to an all-night supermarket to buy her peanut butter and apples if she wanted [me] to do that. What I wanted was that during the course of the pregnancy, I was whatever she needed at that time, which meant that when the baby was here, that would continue and so I would be able to be whatever she wanted I really didn't care, whatever it was. (Fred, p5)

In most cases, participants commenced this role during pregnancy. In the first few days of being at home with their new baby, participants often saw their purpose rooted in household tasks such as organising, cooking and cleaning. Those with a pre-existing egalitarian approach to domestic chores indicated that this also translated into their parenting roles.

I think we do things between us so I think that is also maybe reflected a bit more in the parenting, trying to spread it a bit between comforting Billy when he needs it, going to see him in the middle of the night when he needs it. (Alex, p25)

In the initial days and weeks of parenting, participants overwhelmingly described their role as supportive and spoke more of tending to their partner's needs than undertaking direct infant care. This role, framed around the needs of their partner rather than their baby, was nevertheless a performance of both provider and protector and is associated with a traditional hegemonic masculinity. This role further reflects an implicit tension with their aspirations for fatherhood described in Chapter four.

6.2.1 Agency and autonomy

Participants reflected on a lack of preparation for understanding the needs of infants and they often relied on their partners to 'train them up' for the role. Whether their partners felt confident themselves in these aspects of infant care is unclear, but it was assumed by participants.

If she's doing stuff, I'll go and wash the pots and make the food which I've always done anyway but there's other things like then thinking to go and maybe get a bottle ready or get his nappy sorted out before we go in the bath or bath time stuff ready. At first my wife was doing it all, I [wasn't] even aware to do those things so over a year it's kind of training me up I suppose, and getting involved and doing my share of things... Yeah, I am a lot worse at it than my wife especially at the start cos I would be doing it less and as we've discussed that I wouldn't necessarily know to do certain things so I suppose from an outside perspective I could be portrayed as kind of a bit of a bumbling dad in some of those things. (Iain, p17-18 & p37)

The reliance on mothers to make decisions was considered by several participants and appeared to be something they had not considered or questioned previously.

So, you have those discussions where, and in some respects, I suppose as a dad, I have left it a bit up to Ann in the past to make those decisions, reflectively thinking about it. I don't know whether that's just a default position, whether that's something I should... have more of an opinion of, I don't know. (Alex, p13)

Perceiving a role in decision making goes beyond taking sole care of their child and leans towards the mother as the default decision maker, particularly when making

significant decisions. Whether participants actively avoided decision making and whether they fundamentally believed it was not part of their role is unclear.

However, when mothers were not present, participants were required to make decisions, leading to an increased self-recognition of their parenting capabilities.

The return to work further impacted upon the fathering role and a feeling of being 'out of the loop', distanced participants from the daily lives of their partner and baby.

It's quite hard for men that would come back to work after such a short period and then my wife's done basically everything over the last year when I'm not there so then on weekends when if I'm looking after him on my own, what is completely natural for her, what she does in the day, I've never done in a day so I don't know that stuff to do. I'm a bit like oh, so what do I do, almost like give me a list of what I should be doing and when I should be doing it and what things he needs... I suppose nervous in a way that when I was looking after him that I would miss something out and I wouldn't even know that I'd missed it out and it's the kind of unknowns that you don't even know about that you've not done. (Iain, p19-20)

The frequent changes in the needs of their babies presented a challenge in keeping up to date with routines and care needs particularly as participants returned to work. This led to a level of anxiety about feeling competent and informed enough to undertake autonomous parenting.

6.2.2 Evolving norms

As a result of evolving social and gendered norms in relation to parenting practices, participants recognised the increased opportunities for shared parenting roles and responsibilities.

It seems more partnership now where growing up it was, the end of that sort of stage, but the woman looked after the kids, the bloke did the work and it was no kids at work, can't remember any kid at work, I mean like a dad look[ing] after her or him, or even take them to school. I can't remember any dad taking anyone to school, it was always the mums, everything was the mum. Your mum took you to the hospital, took you to school, dad was there at holidays and then out at work. I mean like my dad, he worked early in the morning til late at night so when I was little I didn't see him til weekends and that was the only time I saw him when I was growing up, and now I think it's a lot more even. (Neville p12)

Neville acknowledges a change in the roles performed by men in his own father's generation compared to the more egalitarian parenting roles available in contemporary life.

The opportunities to define their own fatherhood identity was seen through the lens of a perceived evolution in masculinity where masculinity was intrinsically linked to becoming a father. Albert said: "[There] certainly seems less pressure on men to fit a traditional stereotypical masculine image today, I think that definitely affects fatherhood as well" (Albert, p32). The options to identify with and display different forms of masculinity were observed in relation to the opportunities for different types of fathering practice. Participants described a broadening in the performances expected of and available to fathers which has occurred since their own childhoods. Their peers and contemporaries are seen moving beyond worn stereotypes of masculinity, and this presents a greater latitude for these new fathers to embrace fatherhood in a manner that is less constrained by historical gendered expectations.

Whereas now I think society [has] made it more acceptable, there [are] a lot of comedians who are dads who, you know, talk about how...the[y]'re not the alpha male and they are more effeminate men and that seems to be a lot more prevalent in society now. (Albert, p31)

Albert's reference to 'effeminate men' suggests that to be an involved father or be different to fathers of the past requires the presentation of more feminine performances or at least fewer hegemonic masculine ones.

Neville notes a variety of father types emerging.

Yeah there's, there is a new sort of breed of dads, I don't like clichéing [sic] things but you know, so you get the yummy mummies, you sort of get this weird dad now with the weird baby sling feeding baby organic peas. Looking about I'd say there's five or six different types. If you went to the park or walked through your estate, you can probably put people into five pigeonholes if you know what I mean? (Neville, p 13 & 15)

The discussion above relates significantly with **navigating gender** presented in Chapter five. From Neville's perspective, there are a variety of options for fathering performance available to men now. The potential lack of role models for these different "types" of fathers has the potential to isolate different groups of men who individually adopt different fathering roles and therefore endorsement of these roles, even by peers, may be lacking.

6.2.3 A role with healthcare

During interactions with health professionals some participants found it hard to identify their role.

Yeah, feel a bit of a spare part sometimes I felt, you know, conversation was just between my wife and the Health Visitor and you know I was just there really, but on the whole I think the service you know, that whole system, I think works really well, the amount of visits that we get, but yeah felt a little bit like a spare part I guess. (Albert, p25)

Overall, participants showed an appreciation for the care that their partner and child received but generally felt excluded from conversations and therefore experienced barriers to settling into their fathering roles. This experience may further question their status as a father and therefore their perceived importance compared to mothers in these interactions. This in turn can challenge their sense of identity and the ability to perform parenting roles such as settling their baby.

William indicated that improved postnatal communication with fathers during visits from healthcare professionals could support more involved fathering.

Expand on what they're already doing, involve me, this is how you put your baby to sleep, this is how you feed your baby, pretend that I'm a single dad, don't just assume that she's doing it all cos she doesn't want to do it all, all of the time. Health visitors coming around, trying to involve the partner more maybe? If that's a fair comment I don't know. But I do feel it was very one sided towards the female. (William, p9)

Being excluded from decision making added to an already stressful experience in Archie's case.

It was very hard for me to just follow that advice. It was unclear like well how long does she have to cry for before you just give in and feed her, you know? Me and Harriet had different views on that basically, I just was like we should

just feed her, she's hungry and we need to feed her and I mean, different Health Visitors, have different, everyone has a different opinion on this, someone else might say oh no you just feed her and that's their own style... so I was probably the downfall of that plan cos I would just kind of feed her, I would just get tired of trying to rock her and all that and, I couldn't calm her down without feeding her. (Archie, p29)

Summary

Being able to perceive a role as a father appears to influence the development of a positive fathering identity. Lacking a role in decision making may conflict with participants aspirations for fatherhood and the reality of parenting may not match with their hopes and expectations as described in Chapter four. This is also implicated in the subcategory of **healthcare holds power** and provides further evidence of the lack of a fully endorsed role within healthcare environments or in interactions between healthcare practitioners and fathers. Healthcare professionals endorsing an involved father role for men during pregnancy, labour and birth provides a level of external recognition of their role and may enhance the father's agentic potential and faith in themselves. In the postnatal period this may be fundamental to positive transitions to fatherhood and the associated self-concept as an involved and competent father.

6.3 Role endorsement

Being able to perceive a role and therefore adopt such a role was frequently influenced by the role being endorsed by others i.e., whether others perceived it as

an acceptable or appropriate role for a father to undertake. Interpersonal relationships, performing fathering in public spaces and the wider social norms of fatherhood significantly influenced this process.

6.3.1 Family

Participants relationships with their own parents matured together with the 'growing-up' process associated with becoming a father.

I didn't think I would ever have kids, I didn't really have the kind of lifestyle where I think I would...so it came as a big surprise to my parents and my family that we decided to have kids so, I think that it's been...celebrated and more of a fuss and more of a wow factor, than perhaps maybe it might have been to my family, which has been really nice. (Albert, p3)

This was particularly poignant when grandparents had not expected their sons to become fathers. In this case, fatherhood was somewhat viewed as an achievement and in some cases facilitated a more positive relationships between participants and their parents. In many cases, participants saw their own parents thrive as grandparents, particularly their fathers who, for the majority, were from a generation where breadwinning where long working hours was the norm.

He did miss quite a lot of both of his kids' life cos... he was in the army. I think it is a fresh start for him to maybe see a baby through the growing up process instead of being at war or whatever but yeah I've seen a different side to my dad. He's absolutely amazing, I mean I didn't think he could change a nappy and we said are you sure you're going to be alright with her on your own- 'why do you not think I can do it'? I've never seen you do it before, don't worry

about me I'll do it and he sits and watches TV with her and it's good to watch. He's really good with her. (William, p19)

Grandfathers appeared more involved with their grandchildren than they had been with their own children, experiencing generativity via this relationship. Seeing grandfathers enact parenting was often a catalyst for remembering some of the more positive interactions participants had with their own fathers when they were children.

I'd rather be at home; I'd rather be at home in the same way that my dad would rather be at home than be down the pub. Some people's dads are pub dads, mine never was. It's not something that interests him at all. (Fred, p30-31)

An element of nostalgia, in some ways minimised the lack of involvement by their fathers, seeing participants emphasise the positive, albeit less frequent, father-son interactions they experienced as children. Identifying with their fathers in this way provided further endorsement of their choice in fathering approach.

The response of grandparents to their sons becoming fathers and their facilitation or inhibition of a positive fathering role was described frequently.

Anything I have concerns with, if they bathed her and I said to them just be careful with whatever, I mean this is all stuff my mum knows but I'll say to her, just be careful how you're bathing her because she might be allergic to the kind of soap you're using and even though she already knows what I'm talking about she just pretends, and she [is] really supportive in that respect. If I tell her not to do something or not to go somewhere with her...if I said to them 'don't take her...somewhere, because I don't want you to', they wouldn't question it, they'd just not do it and ...I would imagine every grandma and

grandad would do that, I don't know if they do? But... they've supported me all the way through it. (William, p30)

Both paternal and maternal grandmothers had the capacity to empower fathering and to reinforce a competent father identity despite their comparative levels of experience. Where family relationships had developed positively, participants felt a new appreciation for their siblings with children. Ethan said, "It's brought me a bit closer to my brother and sister cos they've got kids as well and you kind of have more in common" (p14). Having a fathering identity in common provided an increased connection with siblings and has the potential to raise the salience of the fathering identity for participants.

Frank reflected on his personal development related to his perceptions of family life and having children.

I kind of there was maybe a bit of a snobbishness about me; about domestic life and just now and how that could be fulfilling and that obviously has totally gone now and in that I think that, so that's been really good for me and there's been, yeah and that's really kind of enriched a lot of the, of certainly in terms of some of my family interactions, it's made them a lot better. (Frank, p28)

The enrichment of family relationships provided further endorsement to the involved father identity.

Say trusting in me, they know I can do it I suppose is the thing and they see me go in and happily change the nappy and play with him and things like that so I suppose they've told me I'm a good dad in those respects...I suppose my mum's proud of me in a way. I guess that I am helping and I feel that maybe that's something that's maybe changed in generations. I don't think my dad

was that involved in that side of things when I was younger so for her to see that I am, she's quite happy and proud of the fact that things are changing maybe and that she feels like she raised me properly to at least be helping my wife in them situations...I think also from the in-laws' side as well. They're happy that I'm there for their daughter and I'm helping her, I'm not just kind of leaving her to it and not helping out. (Iain, p 34-35)

Participants' own parents heavily influenced their sense of autonomy and agency as new fathers and the praise frequently received for being a 'good father' or 'good husband' was associated with undertaking caring responsibilities. Where positive relationships exist, grandfathers especially, have the potential to see their own sons as role models.

In contrast, Mark experienced disempowerment by the actions and attitudes of what he perceived to be overly involved grandparents which led him to question his parental agency.

Family has become more strained. Especially with my parents, they're very hands on and don't let us try to get on with things us self. It sometimes feels like they're interfering...It sometimes makes me feel like we're failing, I know we're not but it gives us that impression at times that they think that. (Mark, p11-12)

It makes me feel even more that they weren't really that bothered with me, we've got a son yeah, we'll speak to him occasionally but now it's like [we] see them three or four times a week and it's difficult to get that breathing space... I've always been my own person and wanted to do my own thing, having that interference sort of stops us from doing that. (Mark, p21)

Whilst Mark's experiences do not reflect those of the other participants, there is nonetheless an important influence here on the development of both his fathering identity and parenting autonomy, associated with role endorsement.

Mick described managing a similar situation differently.

Selena and I are raising Stan very differently to how they raised me... my brother [and] my sister, I think that's hard for mum to get her head round. She wants to be a lot more involved; she wants maybe to look after him for a day whilst we go and do shit, but we don't feel like it's the right time to leave him with people, but we've just been really open with that. Me and mum and Selena as well, the three of us and everyone's got their cards on the table and there's...no hard feelings, I mean, every now and again Selena will go 'oh fuckin I wish she'd leave us alone', or mum will go, 'oh please just let me spend more time with Stan', but like it's never a big deal, we always talk it out.
(Mick, p 14-15)

Confidence in their own parenting, alongside a strong couple identity and autonomous displays of parenting empowered Mick and his partner to manage his mother's expectations of how involved she would be. Whilst frustrating at times, they do not feel burdened by the involvement as they had provided clear boundaries and open discussion about his mum's involvement. There is perhaps a move away from the expectation that grandparents would be fully involved in family life as families have become more geographically isolated from their extended family.

6.3.2 Partner endorsement of the involved father

Participants and their partners were navigating their way through early parenting with an element of trial and error.

There is...not an issue as such but finding your own way as a dad, being able to make not necessarily mistakes but just people have different approaches to the way they're going to parent whether that's the people across the street or whether that's you both as individual parents within the one family so. And sometimes there's that balance between being led and being almost being taught yourself how to be a parent by your wife who has much more contact and who has a much closer relationship with your son. (Alex, p9 -10)

Alex implied that the opportunity to gain confidence in parenting was affected by the presence of his partner and learning about different parenting styles may be useful for couples when preparing for parenthood. Alex's experience indicates a level of maternal gatekeeping which appears to impede his fathering self-concept. "Learning yourself" seems important here and requires significant openness by both parents to be able to communicate better to identify anxieties and concerns over one another's parenting approaches.

Positive intimate partner relationships which were more equal contributed to a fathering identity which was more involved, egalitarian and supportive, in turn supporting father autonomy.

I think Louise sometimes thinks we can just be as we were despite all of the things and, I think sometimes she doesn't necessarily see the husbanding, the partnering whatever you want to call it, me trying to support her and predict her needs and, I think sometimes that can go unnoticed and instead, there's just the absence of the way things used to be, that can be quite tricky. (Rob, p42)

Participants saw the husband or partner role as intertwined with their fathering role particularly in the early days and weeks of parenthood. However, at times, participants felt that this domestic work and effort went unseen or un-appreciated, potentially impacting upon relationship harmony. Whether participants noticed or applauded their partner's domestic contribution is unclear, but realistic expectations about early parenting and effective communication throughout is fundamental to both parent's successful transitions to parenthood.

Where couple relationships were strained, unsupportive or heavily influenced by gendered norms, new fathers struggled to enact the fathering roles they had aspired for during pregnancy. They were potentially forced to undertake roles which compromised their expectations and frequently navigated them back to traditional fatherhood norms such as being the secondary parent and breadwinner. There was an element of their partner's control over fathering roles.

I had to go back to work. We talked about sharing the parental leave, but my wife was definite, she was very definite that she wanted the whole year for herself, which was fine, so I went back to work after a fortnight, and I think that was when I sort of realised the emotional attachment was when I had to go back to work. (Frank, p2)

The lack of discussion related to shared parental leave influenced the fathering role options available to Frank. His reflection on his emotional attachment to his child is framed in the context of returning to work and he associates that choice as one which was entirely his partners.

Participants looked to their partners for encouragement that they were performing adequately and going about their role in the right way.

She told me I was good, and I was helpful, and I was there when she needed me and I weren't overbearing... she doesn't praise me very often so I know when she praises me I must have done something right. (Iain, p46-47)

Partner endorsement of masculinity or manhood contributed to a sense of doing well with fathering. Their perceptions of agency as fathers were heavily influenced by the masculine norms perceived and reinforced via the couple relationship.

Partner endorsement of more caring attitudes displayed by participants was reflected upon.

She says I'm more of a man, more of a gentleman kind of thing, but yeah I do, I feel a lot more caring towards people, a lot more caring towards other parents...my partner, she's noticed a massive change in my, how I act, how I consider other people and stuff. (William, p26 & 27)

Framed around an identity of 'being a man' suggests that this concept is perceived to part of caring masculinity when performing fathering. Father identity is impacted by the relationships men have with close family members who, in a variety of ways, affect participants self-concept.

Problems occurred when the fathers tried to share the parenting burden, particularly overnight.

The only like problem we've had is with Karen trying, occasionally like during the night and stuff she tries to tell me not to get involved so I can sleep more so that I can go to work the next day and I, I don't care about you know, I'm quite happy to feel shit at work if I'm doing what I need to do to help out at home. (Frank, p19)

Whilst Frank saw himself as a co-parent his performance of this role, in these circumstances resulted in a, perhaps well-meaning, challenge by his partner. Regardless of his partner's intention, the meaning Frank derived from this interaction served to undermine his co-parenting goals.

In Neville's case, the decision to share parenting was more pragmatic and based on the earning potential of each partner.

I think dads now are more involved day to day, a lot of my friends, they work part time, rather than the mum, either taking work off, or going back part time, a lot of the dads have done the part time side, a lot of my friends, the women seem to earn more money than the men, same situation with me. Marissa earns a lot more money than I do, so it makes sense for me to take time off work. (Neville, p 12)

Neville indicates that this is a norm in his social circle, thus providing wider endorsement of a change in the usual or perhaps expected norms in relation to part-time or flexible working. For Fred, the share of breadwinning was weighted towards his partner but was equally something which he, like Neville, appeared comfortable with.

Donna actually works now more than I do. When she went back to work after her maternity leave had finished, we both dropped down from a five-day week to four so that we could work basically alternate days and then there would be one day left over, that India would go to my mother for the day. But then she changed jobs a couple of months ago and she has gone back up to full time so, I actually work less than she does, and so I have more child rearing responsibilities. (Fred, p27)

There were differences between individual couple's approaches to shared parental leave and flexible or part-time working which served as a means via which involved father roles may have been endorsed. The lack of negotiation regarding their partners taking the full allocation of maternity leave sees fathers return to work potentially before they are ready, impacting further upon where they saw roles for themselves as fathers.

Overall, perceptions of being equal in parenting i.e., doing the same things as mothers has the potential to lead to conflict around roles and responsibilities. Via improved couple communication, the division of responsibilities could be better negotiated where fathering roles are, whilst different, seen as holding equal importance with the mothering role.

6.3.3 Social norms and roles

Participants' perceptions of the importance of fathers was discussed in relation to the broader societal attitudes.

I don't think necessarily that fatherhood in society is seen as a bad thing, but I don't think a huge amount of emphasis is placed on it really. (Fred, p44)

The participants in this study spoke frequently about the roles and activities they were expected to undertake as fathers which were based on the social norms they perceived or were exposed to.

Maybe [it] is quite a traditional feeling that I might associate with fatherhood. It's that kind of being the provider, but I think that is what the situation seems to expect of me now, but I think society, like movies, TV and films and newspapers and books seem to kind of expect me to be a touchy feely dad

and to get involved in everything and change the nappy's and that's fine whereas the actual people that I've met on a day to day basis perhaps aren't quite there in that they still sort of just assume that Karen would do most of that and that I'll kind of bob in and out. (Frank p23)

This encompassed the traditional breadwinner identity, particularly in early parenthood, where they perceived that their main role was to financially provide for their newly formed family. Whilst men in this study expected this to be part of their role, they frequently ruminated over how this matched with the broader contemporary expectations of them as 'involved fathers' who were fully engaged with their children; physically, emotionally and socially as well as contributing equally to domestic activities.

I guess things have changed so much over the last fifty years, that I think society's view of what being a dad means is completely different. And over the last 20 years say, they're obviously much more involved in bringing up children and you're not just there to make money, so I think people see you differently but then at the same time there's still however much percent of bringing up the children is done by the mothers and on the occasions that I've gone to the playgroups and stuff, I'm often the only man there so I think there has been a shift in terms of its kind of more the norm for dads to get involved and then in reality it's not that evident. (Ethan, p20-21)

Fathering identity was dependent on the endorsement of the roles undertaken by fathers and therefore their ability to consolidate these roles. There was a tension between participants individual aspirations for fathering seen in Chapter four, and the normative social expectations of them. If involved father roles were not endorsed by

significant people around them, their performance of these roles may be disrupted or not possible, thus influencing their transitions to fatherhood.

6.3.4 Contravening the norms

Many of the social norm's which impacted upon participants involved father roles related to factors such as carrying infants, providing intimate care and being alone in public with their babies.

[I'm] aware of the fact that loads of guys don't like carrying babies and I think that's a really weird like idea, cos I love carrying him it's like a cuddle all the time. I think that's the weirdest thing from other guys who are dads, to not want to carry the baby and be close to them, it's strange, that's the strangest societal opinion that I think I've found. (Mick, p10)

When fathers strayed beyond their normative performances, for example carrying a baby in a sling there was the potential for this to be perceived as problematic.

Despite the aspirations of participants to be involved co-parents, some felt constrained by enduring gendered norms which dictate the parenting activities seen as inappropriate for them as men. These included changing nappies, pushing buggies and attending to their infants during the night.

I've been a bit surprised how many people have been surprised by the fact that I am quite hands on and that I am like, again, going back to a very small sample, going back to the NCT group talking to one of the other dads, who just seemed a bit baffled by the idea that I would be getting up in the night and stuff. (Frank, p21)

Participants who took an active part in childcare outside the home involving being out alone with their babies frequently felt scrutinised.

One thing I do feel more aware of is when I am out with Alicia in public, I do feel like whatever it is I'm doing, it is being watched and judged. That's something that I was never really bothered about before, I'd just go about my business...and it's probably not happening at all, but I do feel like, how I hold her you know, we're starting to feed her, what I feed her... I'm just more conscious of that. If toys fall on the floor, I would clean it anyway but to be seen cleaning it, yeah I do feel like eyes are on me more and I don't know if that's the case or not but certainly it's something that I feel. (Albert, p13)

Whether this was attending a class or being alone in the park, these men felt out of place and seemingly more 'on show' and ripe for judgement.

You know some people see the wrong, you know it's just a man out with his daughter, the other end of the spectrum is like - he's stealing that child and, I think there's still a lot of that that people don't expect to see dads out with their daughters. (Mark, p34)

The norms men perceive in relation to fatherhood provide a strong basis for both role endorsement and role disapproval. Despite the narratives that participants alluded to in relation to the 'involved father', these men perceived judgement and scrutiny when attempting to enact this role in the public domain. Whether this is reality or perception, it has the potential to significantly impact upon their sense of autonomy and self-concept in relation to being a competent father.

Summary

The theoretical category of the fluidity of fathering explores participants' perspectives on their roles as fathers and their ideas about the progressive development of their fathering roles. The ability to perceive a role for themselves and the subsequent endorsement of that role appears to influence their level of involved fathering. In turn this has the potential to promote an increasingly positive fathering self-concept. Participants' partners, wider family and the social arenas where fathering is performed all functioned as individual or structural role endorsers or role prohibitors. When participants' roles were not endorsed, transitions to fatherhood, the adoption of aspirant roles and their parenting self-concept became more precarious. The nature of the fluidity of fathering meant that as children grew older, new roles became available to fathers but also were subject to further endorsement or lack thereof.

6.4 Overall summary of the findings

During pregnancy, participants had a range of aspirations for fatherhood and for their emergent father identities. Overwhelmingly, these men held desires to be involved fathers, combining caring masculinities with primary responsibilities for ensuring the material provision for the family. However, they faced tensions by way of structural factors, social norms and interpersonal relationships which appeared to have a significant impact on realising their ambitions, particularly in the early weeks of parenthood. Facilitative interactions with healthcare providers and workplaces, relationships with family members and social networks supported participants in perceiving roles for themselves as involved fathers and had a positive impact on father identity development. Throughout the early months and years of fatherhood

described by these participants, when any of the arenas or relationships in which fatherhood was performed did not endorse involved fathering performances, participants found their transitions to fatherhood were less straightforward. This required compromise on, and a continuous, potentially long-term, reconciliation of their father identities.

Chapter 7 Contribution to knowledge

This chapter will discuss the theoretical framework which underpins the core category of **reconciling father identities** and the unique contribution to knowledge offered by this thesis. The findings presented in Chapters four, five and six are synthesised with current empirical and theoretical knowledge on transitions within fatherhood from multiple disciplines and perspectives. This chapter demonstrates the complex interactions between role performance, interpersonal and structural factors and broader social norms in the development of father identities.

7.1 Overview of the findings

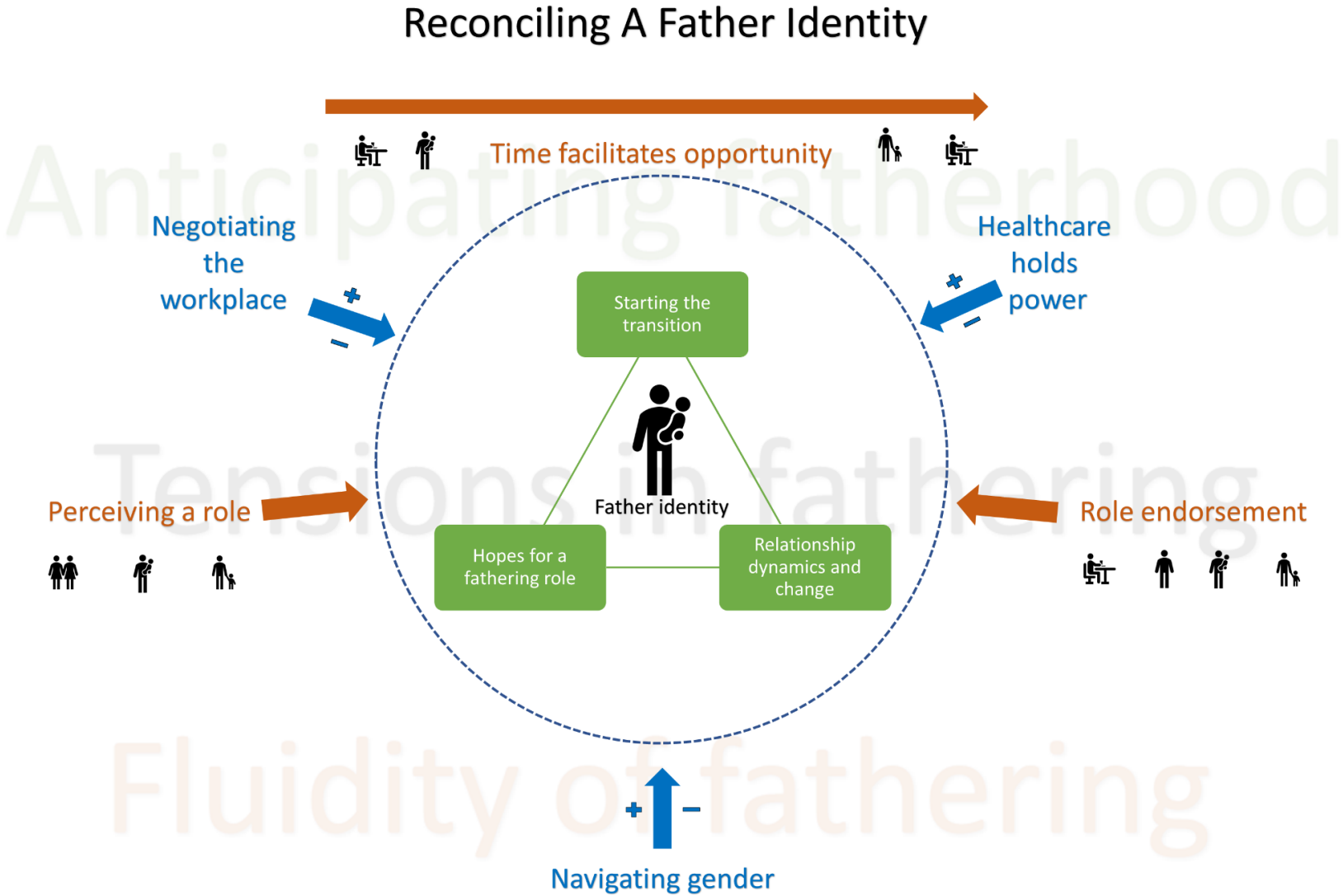
This thesis reveals the multi-factorial influences on transitions to fatherhood for this sample of first-time fathers in the contemporary UK context. The core category, **reconciling father identities** brings together participants aspirations for fatherhood with their individual realities of first-time fatherhood and the settling of father identities. This core category demonstrates that new fathers are faced with enduring facilitative and inhibitive structures and processes which shape their role performance and the development of their father identities. Specifically, the participants' aspirations for fatherhood are significantly influenced by their own experiences of being fathered, domestic factors, and broader family influences.

Structural tensions within workplaces and experiences with pre and post birth healthcare and practitioners also facilitate or inhibit their aspirations for fatherhood.

Figure 10. illustrates the core category of **reconciling father identities** underpinned by the tensions involved in navigating transitions to fatherhood. It is meaningful to situate these experiences in the dominant social, cultural, and political context in which these new fathers exist and consider how their experiences are mediated by deeply gendered norms and ideals. The notion of performative identities (Butler, 2004; Goffman, 1956) can be applied in understanding these participants' experiences of fatherhood. These are identity performances which adjust in response to men's interactions and the 'stages' they encounter which require them to perform. As previously discussed, Butler's (2004) theory of undoing gender is reflected in the **aspirations for fathering** seen in Chapter four where men perceive possibilities for fathering performance which would not traditionally be associated with men or masculinity. Therefore, the theoretical category of **tensions in fathering** reflects challenges to the undoing of gender. Workplace and healthcare environments saw these tensions manifest, where participants faced competing demands on their time and uncertainty of their roles, impacting on their enactment of fatherhood. **Perceiving a role** and the extent to which these roles were **endorsed** by people in their social lives, workplaces and within perinatal healthcare influenced the extent to which participants were required to reconcile their father identities. These fathers had to recognise, whether implicitly or explicitly, that fatherhood is fluid and requires different roles to be undertaken at different times depending on factors such as the age of their child, the circumstances in which they find themselves fathering and the social requirements of said circumstances. Father identity development is shaped by the wider social norms encompassing men's social lives

and those which permeate the arenas where fatherhood is performed. The drivers of the need for continued reconciliation are multiple and additional to the slow pace of social change.

Figure 10. The theoretical framework: Reconciling Father Identities



It is clear from the findings of this thesis that transitions to fatherhood are fluid with no obvious end point. The salience (Stryker, 1968) of the father identities which participants started to form from conception ebbed and flowed in response to the life stage of their child, the quality of their relationships, and the social contexts in which they performed fatherhood. Parenting autonomy and empowerment was impacted by the interactions participants had during their transitions to fatherhood and the acknowledgement of the importance of fatherhood by those people they have interactions with. Having a positive role model provided participants with a grounding for their own approaches to fathering, but negative interactions with service providers and inflexible workplaces served to frequently inhibit them from enacting their desired father identities.

Being able to adequately prepare for fatherhood was essential in creating realistic expectations of the changes initiated by the arrival of their new baby. Moreover, this impacted upon intimate partner and family relationships, friendships, and their workplace identity. The most flexible and forward-thinking employer may provide a caring and understanding environment for a new father, to facilitate a successful return to work. However, if the same man is not adequately prepared for the realities of fatherhood, experiences poor intimate partner relationships, a loss of friendships or significant parenting stress, this may negatively impact upon his mental health and ultimately impede a successful return to work and further reconciliation of what their version of fatherhood is.

7.2 Synthesis with existing knowledge

The findings of this study may be viewed from the theoretical position of Stryker (1968) in his structural identity theory focussing on identity salience. The concept of multiple identities is reflected here in that identities are associated with the networks and relationships in which a person holds a position and wherein they perform (Stryker & Burke, 2000). The synthesis of the findings in this study will be presented in the context of domestic life, the workplace, perinatal healthcare and wider social norms.

7.2.1 Domestic life

As the images invoked within different contexts span from traditional to more involved meanings of fathering, potential tensions arise between fathers' identities, as they consider who they are, can be and should be as fathers (Humberd et al., 2015 p261).

Participants in the present study began to anticipate fatherhood from before conception, throughout pregnancy with the most profound life change at the birth. By the time of the birth, all decisions began to revolve around their infant and the stark realisation of having another person to consider in all decision making was sobering. They identified significant changes in themselves and sensed personal growth and development. For some participants, prior accomplishments were surpassed by them becoming fathers, despite fatherhood not being something they would have previously identified as a life goal. Lack of time and changes in friendships were challenges articulated by participants. Blossoming relationships with partners, interpersonal fulfilment and renegotiation of priorities were positive elements of the transformation.

In **hopes for a fathering role**, participants wanted to be the best they could be for their child and their partners and worked hard at this in what may be considered challenging social and political arenas for fathers in the context of equality. Williams (2008) identified a desire amongst his participants to be more than financial providers and to incorporate a caring and an involved fathering identity. However, Collett et al. (2015) suggest that those men who struggle to identify a role other than that of financial provider find that their desire to be different can be impeded.

Participants had a strong desire to embrace life change and consistently made modifications to their lifestyle to be ready for the challenges of parenthood. This change in life was also observed in studies by Chin et al. (2011a) and Hamilton & DeJonge (2010) who identified that men saw more of a role for themselves and therefore became more involved in caring for older children. Furthermore, bonding opportunities including reading and play in the early weeks and months of fatherhood has been shown to be beneficial for infants, fathers and the whole family (Cabrera et al., 2007; Davis et al., 2011; Ramchandani, et al., 2008; Ramchandani et al., 2005; St George et al., 2018).

In this study, despite the overwhelming sense of joy and excitement felt at the arrival of a new baby, there was also a need to come to terms with the reality of the impact of having a child and therefore a different existence. The weight of dependency appeared to rest heavily for some participants and was coupled with a recognition of the inability to escape this new situation. There were gains and losses experienced by the participants in this study which related to couples' relationship changes and in their friendships. It has been acknowledged in previous studies that this is a time of significant transition for couples (Draper, 2003, Hildingsson et al., 2014) where poor relationship quality has been identified as a strong predictor of perinatal distress in

both parents (Sockol & Allred, 2017). Communication was fundamental to thriving intimate relationships and a shift in priorities for the couple risked 'losing themselves'. Lee and Lee (2018) also noted that couples have less time alone during transitions to parenthood due to competing priorities. The findings of this study demonstrate that some participants saw this as a temporary adaptation in order to survive early parenthood, whereas others had ensured that they carved out time for date nights and time as a couple throughout early parenthood. Sriyasak et al. (2018) noted that prospective fathers worked hard to support their partners in the best way they could despite the demands on them to provide for their families.

In the subcategory of **relationship dynamics and change**, the changes in friendships described may impact on the availability of informal social support for new fathers. Where friendship changes were experienced, the pressure on the participants partners as the sole source of emotional support may have been overwhelming, potentially creating vulnerability to perinatal distress for both partners. Meaningful social support has been found to protect both maternal and paternal perinatal mental health (Schumacher et al., 2008; Wee et al., 2011) with informal support provided by friends and family deemed critical for new parents (Castle et al., 2008; Fletcher & St George, 2011; Morse et al., 2000). The isolation of the early weeks and months of parenthood described in this study, coupled with friendship losses had the potential to significantly impact upon the mental wellbeing of these new fathers.

Study participants implied a singular reality of fatherhood or a "truth" about fatherhood despite their articulation of the different possibilities they saw for themselves in becoming fathers. The search for this singular reality may create unrealistic expectations of transitions to fatherhood, known to be associated with

postnatal distress (Barclay & Lupton, 1999). **Anticipating fatherhood** and associated early life change are reflective of the multidimensional and individualised nature of transitions to fatherhood. Throughout the findings, participants shared their hopes and aspirations in the context of contemporary UK social life framed with prevailing images and models of traditional roles and of traditional fathering responsibilities. They did however have hopes for a more emotionally involved and egalitarian approach to parenting and had taken both practical and psychological steps to facilitate this. Nevertheless, as described in **tensions in fathering**, generational gendered norms influenced participants in their fathering approaches, frequently transmitted from their own fathers and served to disrupt their egalitarian aspirations. **Hopes for a fathering role** reflects prior research, where there has been a tendency for men to refer to the way they were fathered and to use that as a benchmark for developing their own ideas of fathering. In this and previous studies, they wish to emulate certain elements of this, but more frequently indicate that they want to be different to their own fathers (Collett et al., 2015; Enderstein & Boonzaier, 2015; Höfner et al., 2011; Wilkes et al., 2012; Williams, 2008). This reflects findings in previous studies where men's fathers were identified as having the greatest influence over their parenting approach (Finn & Henwood, 2009; Brannen et al., 2011).

Participants commonly described their own fathers as performing traditional roles and, as in Williams' (2008) study, whilst they showed admiration for their fathers as breadwinners, they were likely to suggest that such fathering approaches were now outdated. The narrative of the fathers in the present study reflects Singley and Edwards (2015) "father socialisation generation gap", where participants indicated that they had few role models on which to base an involved, fathering identity.

Some of the participants in this study indicated that they felt self-conscious and under scrutiny when out alone with their children thus reinforcing the idea that men are not routinely considered as primary caregivers. The experience of micro-level scrutiny has rarely been reported explicitly in the literature although Doucet (2009) does refer to this in her narrative around peer judgment of fathers performing fatherhood in female dominated environments. The scrutiny described by participants in my study contributes to an improved understanding of the performance of fathering 'front stage' in public arenas.

The relationships between participants and their own parents, especially their fathers was a key element of the theoretical category, **navigating gender** and had a direct influence on their fathering identities and performances. In previous research, the breadwinner identity has been shown to permeate generations whereas other fatherhood identities seem to evolve in reaction to cultural or societal influences (Brannen & Nilsen, 2006).

Role endorsement occurred in the context of social interactions and the associated praise or criticism they received for performing a particular role. Some participants were praised by their own parents and parents-in-law, for simply 'being there' and 'helping out' with few expectations other than this. It seemed enough for some of the participants parents and parents-in-law to endorse a role they saw as being significantly different to that required of fathers in past generations, even if it did not meet participants aspirations for co-parenting or involved fathering. Where roles were not necessarily perceived as being available to participants, they equally appeared not to be endorsed by other key individuals in their lives such as partners, friends and family or by the wider societal structures such as the workplace. Moreover, these low expectations of fathers from key individuals in their lives was

observed in studies by Höfner et al. (2011) and Beglaubter (2019) who reported that fathers frequently receive praise and congratulations for merely spending time with their children and keeping them safe. These low expectations of fathers magnify the perceived lack of importance of the fathering role therefore impacting upon the agency and autonomy of new fathers. When roles and identities are fluid and fragile, it may result in new fathers believing they are doing enough just by being present. However, this may also be reflective of the **roles endorsed** by others such as grandparents, partners and members of their communities.

In this present study, participants who described stronger couple relationships prior to having children, or those who had an egalitarian approach to domestic duties appeared to experience less maternal gatekeeping. Facilitative and inhibitive parental gatekeeping was explored by Birkett and Forbes (2019) and was further specified as maternal gate-opening and gate-closing by Olsavsky et al. (2019), observing mothers as facilitative or inhibitive of fathers' closeness to their infants. This phenomenon was also associated with co-parenting closeness and higher relationship functioning.

The theoretical subcategory of **relationship dynamics and change** incorporates the influence of relationships on new fathers and the interactions they have which either facilitate or inhibit their fathering identity. Endorsement and criticism of fathering performances have been evidenced cross-culturally impacting upon men's willingness to enact traditionally female roles especially with younger babies (Dex & Ward, 2007). One of the criticisms of Stryker's identity theory is that it falls short of explaining father identity because of the minimal attention it gives to relationships and environmental (contextual) influences (Adamsons & Pasley, 2013). Adamsons and Pasley (2013) thus extended identity commitment as not only being influenced

by the number and importance of supportive relationships but also the number and importance of relationships which are not supportive of a new father's identity (Adamsons & Pasley, 2013).

7.2.2 Workplace

Fathering often occurs when men are not in the home; they may be at the workplace, travelling, deployed in the military...Far too often policymakers and others neglect to see how fathers' options and constraints are fundamentally influenced by aspects of the physical sites where men do their fathering...the sites shape men's parenting, but men can also reshape the sites to better fit their expectations and desires for engaged fathering (Marsiglio & Roy, 2012, p23).

In the subcategory of **negotiating the workplace** both the work culture and generational factors provided more significant barriers to participants becoming the involved fathers they wish to be. Workplaces have the power to shape fathering identities in all different contexts depending on their respective philosophies and practices. A workplace dominated by men displaying traditional masculinity in middle management may struggle to acknowledge the changing nature of fatherhood and the work-based flexibility and support required by new fathers (Humberd et al., 2015).

As the current study's findings demonstrate, a lack of flexible working opportunities, poor mental health support, limited access to paternity leave and traditional endorsement of hegemonic masculinity all permeate workplaces and impact upon fathering identities.

Participants discussed putting their work life and career progression on hold with some indicating that they were doing 'just enough' to keep their jobs, implying a potentially reduced worker identity salience. As time moved on, they were able to see the opportunity to reassert their committed worker identity, focussing on aspects such as promotions and extended roles. However, they also experienced a multitude of feelings ranging from a sense of abandonment of their new family to a lack of work motivation with strong sentiments of missing out on their babies' lives. This is reflected in the work by Bolzan et al. (2005) who noted that fathers with inflexible working conditions experienced increased levels of stress, unhappiness and anxiety which prevented the performance of caring masculinities and/ or caring fatherhood and parenthood. In the present study expectations from employers were varied and when returning to work in traditional male workforces, their ability to talk about their babies, express their tiredness and parenting stress was minimal. Significantly here, Haas and Hwang (2019) suggest that gendered workplace norms heavily influence the uptake of paternity leave with Plantin (2007) suggesting that parental leave policy is not enough on its own to facilitate a family's desire to co-parent and that social factors such as socioeconomics and traditional gendered norms influence these opportunities.

Paternity leave was identified as insufficient by all participants where they expressed missing out on time with their child and missing developmental milestones. Chin et al. (2011b) identified that returning to work is both challenging and rewarding with some men dreading the return to work. Shared parental leave was rarely discussed in this study and only one couple took it. Financial implications, the pressure of gendered parenting norms and associated maternal gatekeeping and organisational barriers have all been found to affect shared parental leave uptake (Birkett & Forbes,

2019). In Begalubter (2019), men who took paternity leave alone i.e., not at the same time as their partner, reported an increased sense of parenting competency and tended to identify more with caring masculinities. Conversely, when men took leave alongside their female partners, they identified more as secondary parents adopting more traditional fathering roles and defaulting to their female partner for decision making about the child (Beglaubter, 2019). Thus, the current findings make plain that whilst access to shared parental leave is important, the question of *how* families organise shared parental leave, and opportunities for men to spend time as the primary care giver without daily oversight of their partner might be equally critical to the development of paternal autonomy and fathering self-concept. Participants described feeling 'out of the loop' because of returning to work and an increase in leave during the first year of their infants' lives might have provided opportunities for increased confidence in parenting particularly if able to do so alone.

All participants described a change in their outlook on work. Prior to fatherhood, some of the participants found it hard to identify a purpose in going to work over and above financial rewards, which on becoming a parent changed significantly. They indicated that work had taken on new meaning, they were less likely to do anything that might jeopardise their jobs and they spoke of being role models for their children. Others indicated that as childless men, they had been expected to work above and beyond their contracted hours and having a new baby created a new priority where time outside of normal working hours had become more precious and family focussed.

Workplace has a role to play in facilitating transitions to fatherhood and empowering men to undertake more caring responsibilities. Arguably, the workplace acted as a gatekeeper to involved fathering and in the present study, this was reflected in

parental leave policies, the availability of flexible working and the traditional gendered norms of individual working environments.

7.2.3 Perinatal healthcare

Healthcare holds power saw participants describe feelings of being somewhat disconnected and detached from the process in some ways. Seeing their partner change physically in response to the growing foetus plus the attention she receives from maternity services has the potential to separate partners' lived experiences during the antenatal period. Draper's (2003) application of transition/ritual theory to the journey to fatherhood provides a complementary theoretical perspective relating to the experiences of prospective fathers during the antenatal period. During pregnancy, the men in my study, echoed by Draper (2003) were in a state of flux, where they are no longer a childless man without responsibility, but neither are they a father with a baby. The lack of attention to paternal wellbeing or father inclusive maternity services experienced by the participants in this study, may compound this state of flux and hence potentially creating a vulnerable time for expectant fathers. During pregnancy, participants lacked the information and support that can empower fathers to be more involved in the care of their infants.

Attending appointments and scans enabled participants to begin to prepare for the event which is otherwise somewhat abstract and imperceptible. These findings mirror those seen in previous studies where attendance at scans provided a 'reality check' for prospective fathers in lieu of experiencing the physical changes women undergo (Rosich-Medina & Shetty, 2007; Thomas et al., 2011). Well prepared fathers with realistic expectations of the variability and uncertainty of parenthood and

therefore fatherhood have been shown to experience fewer perinatal mental health problems (Barclay & Lupton, 1999; Dukes & Palm, 2019; Gage & Kirk, 2002).

As mentioned above, participants felt significantly underserved by the parenting literature available to them as fathers to be, resulting in more engagement with information from online sources. This reflects the work of several other authors who have noted that men not only use the internet to access peer based social support but also in some circumstances instead of or to complement their attendance at antenatal classes (Eriksson & Salzmänn-Erikson, 2013; Premberg & Lundgren, 2006; St George & Fletcher 2011). Further to this, analysis of the popular literature aimed at prospective and new fathers suggests that it may further compound their confusion during this time by endorsing feelings, yet at this same time discouraging their expression (Edgley & Roberts, 2021), reinforcing the emotional suppression associated with hegemonic masculinity.

The practical preparation described by participants may serve to mask some of the emotional preparation undertaken, also seen in the work of Gage and Kirk (2002). Nevertheless it should not be considered as reflective of the level of their investment in the pregnancy. Physical preparation may be easier to articulate for men because of the contemporary social expectations of them. Equally, physical preparation is more visible and is perhaps more likely to be endorsed by others resulting in fathers gaining the affirmation they desire.

Disempowerment and a lack of attention to the health and wellbeing of fathers in the perinatal period weaves through the accounts of participants in this study. It has been recognised throughout the literature that women tend, overall, to be better served by perinatal services than men (Baldwin et al., 2019; Daniels et al., 2020).

In Fletcher et al. (2004) fathers experienced antenatal education which identified them solely as a support person during labour and birth, indicating that it did not meet their individual needs. Men frequently find it hard to **perceive a role** for themselves in healthcare interactions. Other studies have further identified that a lack of focus on fathers' needs and the practical aspects of caring for a baby including aspects such as feeding, leaves them feeling significantly underprepared for caring for new babies (Hamilton & DeJonge, 2010; Thomas et al., 2011).

In the subcategory of **healthcare holds power**, labour and birth were key points when participants felt excluded from communication and decision making. The disempowerment experienced by participants within healthcare reflects previous findings where men's ability to advocate for and support their partners was diminished by a sense of invisibility (Baldwin et al., 2019; Daniels et al., 2020; Widarsson et al., 2012,). Kainz et al. (2010) found overwhelmingly, that mothers described positive feelings towards their partners being present throughout labour and birth, describing the birth as the moment of becoming parents together and being a team. In Porrett et al. (2013) male partners' perceptions of beneficial presence during the birth were enhanced by feeling informed and supported during the antenatal period and by being involved and supported by staff during the birth. Being present fosters a team approach to labour and in cases where fathers have been empowered to be assertive and act as the mother's advocate, they have been found to experience less subsequent anxiety and overall concern (Kainz et al., 2010). This supports the notion of inclusive preparation for labour and birth to empower men to support their partners, to **perceive a role** and advocate for their own needs too (Kainz et al., 2010).

Participants indicated that more support for the whole family would have been beneficial and would have provided them with further confidence and autonomy as fathers. From the antenatal period and beyond, good support for both parents has far reaching consequences for couple's relationships, maternal and paternal mental health and the subsequent emotional development of their children (Finnbogadóttir, et al, 2003; Gage & Kirk, 2002; Ramchandani, et al., 2008; Ramchandani et al., 2005; Rosich-Medina & Shetty, 2007; Widarsson et al., 2012).

A significant element of **healthcare holds power** was being unable to stay with their partner and new baby on the first night after the birth and was discussed in various levels of detail by all but one participant. The separation of these newly formed families, soon after birth and particularly following a traumatic birth, forced both parents to deal with this alone. Birth trauma is being increasingly observed in new fathers (Daniels et al., 2020; Elmir & Schmeid, 2016; White, 2007) with approximately 5% of men who have experienced birth trauma, subsequently developing post-traumatic stress disorder (PTSD) (Ayers et al., 2007).

Participants expressed gratitude for the care received by their partner and child and reflects Ives' (2014) findings which indicates that this gratitude is outcomes based as opposed to gratitude for feeling involved or engaged. Furthermore, for my participants, this gratitude appeared to de-value their own feelings and experiences with the impression that since all was well with their partner and baby, to complain, speak up or express these feelings would be inappropriate. This concurs with findings from the Born and Bred in Yorkshire (BaBY) cohort study (Darwin et al., 2017), where new fathers were found to question the acceptability of their negative thoughts and feelings, ultimately impacting upon their help-seeking behaviour.

If postnatal visits occurred when participants were at home, they described feeling left out of conversations. Previous studies have noted that postnatal practitioners frequently ignore the close relationship between mothers and fathers which serves to further exclude fathers from conversations, leaving them feeling like outsiders during home visits (Baldwin et al., 2019; Ellberg et al., 2010; Fletcher & St George, 2011). Whilst a new father might perceive a role for himself, if this role is not endorsed during interactions with those who are perceived to hold power, the salience of their involved father identity might be diminished. This may also reinforce the reservations they have in articulating their feelings at this time, potentially resulting in unchecked postnatal distress. Paternal postnatal depression is strongly associated with maternal postnatal depression (Baldwin et al., 2018; Figueiredo et al., 2008; Wee et al., 2011) and with several associated factors such as unrealistic expectations of pregnancy and becoming a parent, perinatal relationship difficulties, lack of social support, lack of paternity leave and social isolation (Baldwin et al., 2018; Barclay & Lupton, 1999; Condon et al., 2004; Morse et al., 2000; Philpott & Corcoran, 2018). There is evidence to suggest that increasing father inclusive practice can reduce perinatal anxiety scores in new fathers (Tohotoa et al., 2012) thus demonstrating an association between healthcare practices and paternal mental health.

In sum, within healthcare, the inclusion or exclusion of participants in clinical conversations and visits to the home and in service provision may have acted as a form of gatekeeping because of their perceived exclusion, and therefore lack access to information and support in these environments. The restrictions imposed during the Coronavirus pandemic have excluded partners from attending scans, thus potentially impacting on their ability to connect with the pregnancy, clearly expressed as a key moment by the participants in this study. The consequences of this

restriction for new families are currently unknown but in relation to the extracts contained within Chapters four, five and six, is likely to have some impact on transitions to fatherhood.

7.2.4 Wider social norms

The 'should' of fathering was frequently referred to by the participants in this study. This was based on contemporary social norms around men's roles and normative displays of masculinity. In **perceiving a role** there was a common perception that there were now more opportunities for fathers to adopt their own roles and fathering identities, nevertheless, frequent barriers were described. Participants wanted to do things in the 'correct' order which is reflected in the literature as something that couples aspire to when relationships are new (Ylänne & Nikander, 2019). Whilst such a traditional linear process might not match with 21st century lifestyles, Duncan (2007) argues that there are pervasive cultural and religious norms which continue to influence factors such as the 'should' of fathering.

Balancing the competing roles of breadwinner with involved fathering was articulated by participants and has been explored in several studies including those with young fathers who, despite taking on traditional breadwinning roles, were equally seen to spend days off and evenings interacting with and caring for their children (Hauari & Hollingworth, 2009; Sriyasak et al., 2018). However, Salway et al. (2009) noted that the fathers in their study spent most of their parenting time in play and recreational activities and were less likely to undertake bedtime routines and other traditional caring roles. In the present study however, participants described a range of roles with their babies including settling them at night, bathing them and changing nappies. The differences in the age of my participants and those in studies of young

fathers may be reflected here where my participants did not have the challenges of adolescence to face alongside their transitions to fatherhood.

In **fluidity of fathering**, waiting to perform fathering appears to be reflected in the findings from the present and previous studies and the opportunities to father seem contingent upon the roles ascribed to fathers and the roles **endorsed** by significant people around them. Fathers in this, and in other studies have indicated that they perceive less of a role in the early few weeks and months of an infant's life and identify the mother as the primary caregiver and therefore they struggle to find a role for themselves (Chin et al., 2011a; 2011b; Hamilton & DeJonge, 2010). Participants in the present study perceived their role to be more about 'helping out' in the early part of parenthood although not necessarily separate from their fathering role.

Roles perceived by participants in this study were shaped by the nature of their intimate relationships, negotiation with their own parents who were now fulfilling a grandparent role, workplace demands and healthcare interactions. Despite their aspirations, participants in the present study frequently found themselves in the traditional role of breadwinner which tended to be affected by the norms of maternity leave, paternity leave and the societal perception of the mother as primary caregiver. Whilst participants acknowledged that being an involved father was more than being a breadwinner, those in the study by Williams (2008) still perceive this to be an essential aspect of fathering. This perspective indicates competing expectations from people and organisations about what fathers should be contributing to family life. Elliot (2016) suggests that new parents face challenges in adopting the parenting role most suited to them or the one which makes most economic sense for the family, defaulting to the mother as primary caregiver and therefore reinforcing caregiving as a female role.

Despite the aspirations of the fathers in this study to be involved co-parents, some of them felt constricted by social norms which suggested that they should refrain from engaging in parenting activities which were not deemed appropriate for them as men. These included changing nappies, pushing buggies and attending to their infants during the night. This created a tension between the social expectations placed on fathers to expand their caring repertoire whilst being monitored in the performance of this care and concurrently being judged on what is socially acceptable for them to do. Höfner et al. (2011) identified that some men received little positive reinforcement from their own parents and male siblings for their involved father actions. The performance aspect of this relates to Goffman's (1978) concept of 'dramaturgy' wherein new fathers' enactment of caring masculinities that are deemed to be disagreeable to their audience, creates a performance disruption. Whilst fatherhood is performed in multiple locations, it appears that the safest place for men to enact involved fatherhood is, in Goffman's terms 'backstage' where they are protected from judgement (Goffman, 1978). In a study by Johansson and Klinth (2008), images from the 1970's of men pushing buggies were viewed by workers in the field of social justice and described as the height of manliness at the time, equating it to raising the status of new fathers. This concurs with some participants views related to carrying babies in slings and pushing prams which was stated as being both inherently masculine and emasculating in different contexts by different participants. Social norms and arenas established the extent to which carrying babies and its associated status was deemed to be an appropriate activity for a man. Community context will influence such activities and increasingly, involved fathers in all different contexts could act as role models for those without generational ones.

Perceiving a role and **role endorsement** are the means by which participants began to settle on their father identities albeit subject to change over time. For participants in the present study, reconciling their father identities was required where their aspirations for fatherhood were met with tensions. These tensions relate to the multiple demands and expectations placed on them, coupled with a lack of father inclusive practice in perinatal healthcare. The eventual adoption of the roles available to them, endorsed by those around them may lead to the formation of different father identities than those they had anticipated during pregnancy. How these new fathers deal with this compromise may be reflected in rates of perinatal distress, relationship difficulties and subsequent risk taking seen in previous studies (see section 2.4.4) particularly if they do not receive appropriate support.

7.3 Conclusion

The tensions experienced during transitions to fatherhood, the roles available to fathers and those validated by people in their social arenas influence father identity salience. When an involved father role is endorsed by others, their commitment to this involved father identity is stronger and therefore the salience of the involved father identity is higher. Where an involved fathering performance is neither endorsed nor available to them, the salience of their involved fathering identity is likely to be less, giving way to the breadwinner and committed worker identities traditionally more available to men. These fathers were engaged in a continuous process of reconciling and settling their father identities merging their aspirations for involved fatherhood with the realities of fathering in contemporary contexts. Whilst their aspirations for involved fatherhood were most precarious in the early weeks and

months of their child's life, the fluidity of fathering did provide opportunities for more father involvement as time moved forwards both in historical terms and in the growth and development of their children. It may be that less reconciliation of identities are required in fathering older children as social norms appear more accepting of these roles for men.

This study was undertaken to further explore and develop the understanding of transitions to fatherhood. The findings of this study provide important insight that is relevant to a variety of arenas where fathering is performed. The unique contribution to knowledge of this thesis is in its holistic account of the structural influences on fathering identity development. It brings together health, workplace, family and normative expectations on fathers in the contemporary UK context.

Chapter 8 Final recommendations from the study

In this chapter, the quality of the study including trustworthiness, authenticity and rigour will be discussed, followed by a final comment on my reflexive practice. A summary of the study's strengths and limitations and related suggestions for future research will follow. Finally, application of the findings to healthcare and workplace policy and practice will be presented and concluding thoughts offered.

8.1 Quality of the study

In qualitative research, trustworthiness and authenticity are concepts used to determine the quality of a study and therefore its legitimate application to knowledge, policy and practice. Four criteria are frequently cited as a means of providing evidence of the rigour of a study which Lincoln and Guba (1986) describe as credibility, transferability, dependability and confirmability.

The credibility of research is determined by the trustworthiness and value of its findings. In CGTM, the terms 'accurate' and 'correct' are erroneous as ultimately the researcher is constructing a theory based on the constructions of the research participants and their interpretations of their experiences. However, where a rigorous process is followed and evidence is offered to demonstrate this process including an

analytical audit trail, the credibility of the research process should be evident. In this thesis, the process of CGTM analysis was detailed in chapter three supported by further evidence of the coding process and theoretical development provided throughout the chapter and in the appendices.

Following the core methodological facets of theoretical sampling, constant comparison and theoretical sensitivity originally defined by Glaser and Strauss (1967) and subsequently further refined by Charmaz (2014), allows contemporary researchers to show rigour in their use of CGT methodologies. Having a well-established albeit non-linear process to 'follow' adds further rigour and reliability to this methodology. The audit trail of memo writing and the provision of images of coding and analysis throughout Chapter three, and further demonstrated in appendices A, B and C, offers evidence of the rigorous processes employed throughout this study. Moreover, this reflects Cooney's (2011) assertion that care in applying grounded theory methodology authentically is the single most important factor in ensuring rigour. Equally, as Glaser and Strauss (1967) have urged, my emerging theory should fit the situation being studied, it should work and therefore be of use to the people it is aimed at, and thus allowing them to better understand their situations and experiences (Cooney, 2011). In their assessment of credibility, Guba and Lincoln (1989) suggest that a study is deemed to be credible when it draws such a faithful description that those people experiencing the phenomenon would immediately take ownership of it. However, unlike other qualitative methodologies, CGTM does not set out to accurately describe participants' experiences but aims to further explain a situation. The emphasis therefore shifts from how accurately the theory describes the phenomenon to instead how well it explains it (Cooney, 2011). The findings underwent a rigorous analysis and process

of theory development (see section 3.5.4-3.5.10) from descriptive to conceptual formulations and therefore attempts to provide more explanatory than descriptive findings.

Another way to ensure the rigour of a grounded theory is its fittingness and transferability to others in similar situations. Asking the question: Does the theory fit into contexts outside of the study it was developed from? (Cooney, 2011). The findings of this study lend themselves to understanding men's broader experiences of different aspects of the healthcare environment and workplace settings, not just related to fatherhood. The theory is more likely to have generality or fittingness if the data on which it is founded was sampled in a way that ensured data saturation in its purest sense stemming from comprehensive sampling and conceptual and broad interpretation (Cooney, 2011). Men's experiences of healthcare in general may be better understood from the findings of this study and there are implications for understanding the social and gendered pressures on men which are easily transferrable to the workplace.

8.2 Reflexivity revisited

Core to CGTM is the active involvement of the researcher and acknowledgement of such. In chapter three my positionality and process of reflexivity were described to demonstrate recognition of my prior knowledge, gender, professional background and social status and how this impacted my research process. Further to this, while conducting this study, I have been changed in several ways through the process of completing a PhD. I commenced this study with a clear idea that expectant and new fathers were not well served by perinatal healthcare. However, via the process of

learning, self-reflection and being open to new disciplinary perspectives, I have been able to offer a much more nuanced and conceptual account of men's experience as they transition to fatherhood. The knowledge I have gained and the theoretical exploration I have undertaken was bound to have changed me but also, via this process, I feel I have offered evidence of a rigorous and transparent method. There were times when my immersion in the data was so deep that my supervisors were required to 'pull me out' and provide a balanced and rational voice. For example, during the analysis and development of the theoretical categories, I was absorbed by my participants' stories to the extent that it was hard for me to be objective and to see other interpretations of their narratives. My supervisors' input enabled me to step outside the data and developing theory and to see it from the outside and with a certain level of objectivity. My engagement with the literature was significant in the initial stages of this work to be able to ethically justify the need for the study. However, there was a substantial pause in the engagement with further literature until the analysis was almost complete. Following the establishment of early theoretical categories, renewed, and expanded searches of the sociological and psychological literature were undertaken in order to apply and compare my findings to extant knowledge. To this end, the findings of this thesis are truly grounded in the data.

8.3 Strengths of this study

The strengths of this study are reflected in its attention to the specific experiences of men as they become fathers for the first time. Whilst other studies clearly exist, this study of fatherhood is unusual in its constructivist grounded theory approach, its

interwoven findings and broad application to both policy and practice. The direct recruitment of men via social media had two primary motivations. Firstly, it conveyed a message to fathers that their voices were important and that their experiences were valid in the context of becoming a parent. Secondly, direct recruitment reduced the potential for maternal gatekeeping which has been observed in other studies where fathers have been recruited via mothers (e.g., Condon et.al., 2004; see also Gage et al., 2006), or where fathers involvement has been explored from the perspectives of mothers only e.g., Redshaw and Henderson (2013). In the former examples, it was unclear whether poor recruitment and subsequent attrition was related to maternal gatekeeping or not. Direct recruitment in my study contributed to reducing the potential for this to be an issue.

8.3.1 Unforeseen therapeutic benefit

The participants in this study said they were taking part in the research largely because they wanted to make a difference for other new fathers. Some said that they found the experience to be cathartic, having never spoken in depth about their own experiences of becoming a parent. The openness of the participants and willingness to share intimate details of their relationships and emotional wellbeing, highlights that, rather than men being reluctant to talk about their feelings, it is perhaps those services in the position to receive men's stories which potentially create barriers to their disclosures (Malcher, 2009). There is a tangible therapeutic potential in participating in qualitative research, particularly for groups who are not well served by health or social care provision or those who are deemed to be hard to reach (Murray, 2003). Whilst it is disappointing that these men had to engage in research to have their stories, thoughts and feelings heard, I am proud that my

reflexive practice and way of working with them, provided a safe enough space for honest and emotional disclosures.

8.4 Limitations and ideas for future research

This thesis has uncovered some of the gendered barriers to father inclusive practice particularly in healthcare settings and a further unpeeling of the other barriers to inclusivity is now required. The experiences of marginalised groups need to be explored to ensure that their voices are heard to improve inclusivity and equality and to challenge issues such as institutional racism and classism in health care policies and practices.

The sample of participants in this study are white, cis gender predominantly middle-class men and their experiences may not be representative of fathers who identify differently from these demographic characteristics. Whilst in CGTM studies, there is no requirement to be demographically representative of all fathers there is a limitation on how far these findings can be applied to other fathers, for example from different ethnicities or cultural backgrounds. Evidence presented in the literature review indicates potential similarities between fathers (see section 2.2.4 on intersectionality), regardless of ethnicity or cultural background (Dex & Ward, 2007; Hauari & Hollingworth, 2009; Salway et al., 2009) and so the findings may be somewhat applicable to other groups of fathers. However, future research needs to explore the transition to fatherhood from the perspectives of men who self-identify from ethnic backgrounds other than white British. This would contribute to a deeper understanding of men's experiences of fatherhood from groups not traditionally represented by research but significantly representative of the demographics of the

UK population. Parenting in different cultural contexts has been shown to impact upon parenting styles, confidence and self-concept and therefore, the experiences of immigrant families are similarly important to consider.

Participants in the present study were from a range of socio-economic backgrounds although pre-dominated by middle-class professionals. The literature indicates that men from different socio-economic backgrounds might have different experiences in their transitions to fatherhood. These may be particularly compounded in relation to traditional job roles and the necessity to work longer hours to materially provide for their families (Connell, 2005). The involved father role described by the participants in this study may not be widely available to men from lower socio-economic groups and further exploration of the intersection between fatherhood and socio-economic status warrants further research attention. Therefore, future studies could examine how fathers from different social classes and material (dis)advantage experience transitions to fatherhood and perhaps the specific implications for maternity and well child services.

The participants in this study were all cis gender, heterosexual men and therefore may not represent the views and experiences of men who do not identify in this way. There is a growing evidence base of the experiences of gay fathers (see Caneiro et al., 2017) and the various tensions which they are required to navigate in becoming fathers including acceptance from the gay community and from their own parents (Bergman et al., 2010). Since the expression and performance of masculinity appeared integral to fatherhood in this study, it would be interesting to explore whether or how notions of masculinity impact fathers who identify as GBTQ+. Transgender fathers may not be represented by this sample although gender identity was not asked in this study. The gendered norms that men are measured against, as

exposed in this study, would be useful to consider in the context of fathers who are not cis gender or straight and the intersection between their gender, sexuality and transitions to fatherhood.

Participants in this study were all over 18, in committed relationships with their child's mother and all co-located with their partner and child. Young fathers, estranged fathers, adoptive, step-fathers and non-resident fathers may have further tensions to navigate and may have quite different experiences, not reflected in these findings. As the normative version of family becomes increasingly diverse, exploration of fatherhood with these groups of fathers will be necessary to understand and represent the experiences of broader groups of fathers.

8.4.6 Research on couples and grandparents

There are several unanswered questions in relation to the perceived motivations for participants' partners' actions and interactions. Previous research has indicated that couples' perspectives on certain aspects of perinatal experiences can be contradictory (Chan & Paterson-Brown, 2002). Further study would be useful in gaining perspectives from partners separately and together to be able to provide the context for some of these unanswered questions. The experiences of grandparents have garnered minimal attention and further exploration of the generational perspectives influencing current fathering practices would be useful to explore. A further element of this is how contemporary fathers may be role models for their own father's grandparenting practices where grandparenthood perhaps provides traditional breadwinning fathers of the past with the opportunity to perform more roles with their grandchildren. The extent to which contemporary fathers can model

this would clarify the transference of parenting norms forwards and backwards between generations.

8.4.7 More similarities than differences

The findings in this study have been found to relate closely to the experiences of mothers, and whilst they are not the same, there may be more similarities than differences between the transition to motherhood and the transition to fatherhood, particularly in the contemporary Western context. Whilst policy and practice suggestions lend themselves to improved support for and acknowledgement of the needs of fathers, mothers too may benefit from these changes. However, factors such as flexible working may present different challenges to families. Chung and van der Horst (2018) suggests that doing gender via flexible working and the increased hours worked when employed flexibly have been seen to increase family life conflict and increase the gender pay gap. However, a family approach to researching parenting may further uncover the commonalities between fathers' and mothers' experiences. Perhaps if parenting was not viewed through a gendered lens, then neither would the associated policies and practices need to be.

8.4.8 Member checking

Formal member checking of data and analysis was not undertaken in this study. Clarification of meaning occurred regularly throughout the interviews and the conceptual nature of the theoretical framework led to the decision not to verify the findings with the individual participants (Morse, 2015). Instead, the validation of findings was undertaken via frequent informal peer review during supervision, at conferences, in speaking with practitioners and in conversations with other new and experienced fathers.

The limitations of this study present numerous opportunities for future research and I see this PhD as the start of my journey researching this important and complex phenomenon.

8.5 Application and impact

The following section will address the potential policy impact of this thesis spanning parental leave policy from a governmental perspective to local and national health policy, including the implications for public health and service provision. Application to health care practices will be discussed in the context of perinatal health provision followed by the academic impact of this thesis.

8.5.1 Policy Impact

The theoretical framework presented in this thesis highlights the need for policy makers to collaborate to address the multifaceted impact on father identities and the potential for fathers to be involved co-parents. Predominantly, this spans employment policy and health and social care policy, although there are also implications for policy in areas such as education and leisure. Both healthcare provision and workplace practices heavily influence a new father's sense of self and autonomy, facilitating or inhibiting a positive fathering identity. Fourteen years ago, the Equal Opportunities Commission called for policy change in access to and extension of paternity leave and the right for fathers to be able to request flexible working conditions (Dex & Ward, 2007). This report also called for early diagnosis and treatment of paternal postnatal depression. Though none of my participants disclosed having had diagnosed paternal postnatal depression they did experience

challenges to their mental health and wellbeing. Furthermore, they argued for services to shift from being mother-centric to father inclusive (Dex & Ward, 2007). Since 2007, paternity leave has expanded to include the option of shared parental leave but there is still no routine screening for paternal postnatal depression or specific services for fathers in distress. Interventions and community services for new parents continue to be woman focussed even if they are not advertised as such. Despite guidance in The Healthy Child Programme (DOH, 2009) to work with fathers including those who are non-resident, this continues to be a challenge for practice (Bateson et al., 2017). There is a growing momentum in fatherhood research and increasing attention to men's mental health in the media. Honest conversations are needed in workplaces and healthcare environments to address the barriers to change.

8.5.2 Employment policy and the workplace

Since fathering is performed within the workplace, this seems an appropriate place to support the fathering roles men want, and to provide a platform for emotional support. Role modelling by managers and leaders may provide men with permission to become the involved fathers they wish to be. Much more work is needed in this area of policy and development of inclusive and equal workplace philosophy. The present study confirms that returning to work following the birth of a baby is a psychologically challenging time for new fathers.

There continue to be calls for the extension and expansion of paternity leave in the UK (Jackson, 2018) mirroring the offer in Scandinavian countries such as Sweden and Finland (Johansson, 2011). When men take up extended leave in these countries, there are benefits for the whole family, and fathers change their

perspective on work; this results in happier employees and increasing productivity and retention (Taylor, 2016).

Recent policy changes in England have been welcomed and include paid leave for parents who have a baby in neonatal intensive care units (HM Treasury, 2020) providing welcome relief for those parents concerned about balancing a return to work with caring for an unwell baby. However, as discussed in chapter seven, whilst policy change would be welcome, there are a broad range of factors which influence the uptake of paternity leave, and these must be addressed alongside any policy implementation (Kaufman, 2018). Coupled with this, shared parental leave is only an option for a few new families and most of the men in this study would not have wanted to reduce mother's leave to be able to take it. Financially, unless well compensated by employers, taking shared parental leave is prohibitive for many families (Kaufman, 2018). What is well known and illustrated in the present study, is that men returning to work at this time are vulnerable to experiencing postnatal distress and that flexibility in employment could be supportive of paternal mental health (Bolzan et al., 2005). In partnership with flexible working options, workplace culture change is warranted and one which acknowledges the importance of involved fathers in their child's lives as much as mothers are. Challenging workplace gendered norms may be difficult but is essential in order to promote equality with the potential to benefit all employees. On this basis, I suggest the following policy developments.

Policy Suggestions:

- Programmes of awareness raising about the challenges facing new father's and encouraging the development of father supportive and inclusive work environments.
- Manager and HR training around how to support fathers returning to work during the early weeks of parenthood.
- Enhanced flexible working options for new fathers and new mothers.
- Extension of dedicated paternity leave in place of shared parental leave.
- Access to work based psychological interventions to support new fathers.

8.5.3 Health policy and practice impact

Small steps are being made in different NHS trusts throughout the country, but most of the support specifically aimed at new fathers appears to be provided by third sector or grassroots organisations, with little evidence of evaluation. There is no national strategy for paternal mental health and father inclusive practice is dependent on individual team philosophy. Some maternity units provide reclining chairs for fathers to be able to stay overnight after the birth of their babies. Others do not see this as a priority, citing space and health and safety as their rationale. Whilst maternity care continues to exclude fathers, mothers are forced into the position of primary care giver thus anchoring them in gendered norms of parenting and what is perceived as woman's work.

Antenatal preparation and increased support for fathers is essential to ensure that men are equipped with knowledge of the challenges they may face so they can transition more smoothly to their new role (Steen et al., 2012) and with more realistic expectations (Chin et al., 2011b; Dallos & Nokes, 2011). This is especially important

in the context of men having pre-established ideas about what sort of father they wish to be and how they may cope with the barriers to fulfilling that role (Bolzan et al., 2005). Participants in the present study frequently suggested that it was difficult to prepare for something which is like “nothing you have ever experienced before”. It is argued here that this could be related to poor antenatal preparation, the dearth of couple focussed approaches and the lack of open and honest discussions about the realities of parenthood from friends, family and via the media. These challenges have potential to be exacerbated for fathers who are at risk of poor mental health including those from lower socio-economic groups, those who have experienced several adverse childhood experiences or past trauma and young or estranged fathers. Individualised antenatal support may help to mitigate the impact of this significant life event on mental health of these vulnerable men.

The lack of representativeness within the healthcare workforce may exacerbate the barriers to father inclusive practice (Bateson et al., 2017). Furthermore, the structure of healthcare organisations are patriarchal but the patriarchy does not serve the best interests of men who want to be involved, emotional parents. It is argued by Connell (2005) that patriarchal forces within healthcare organisations have persistently marginalised women's interests leading to the women's health movement. However, it may be argued that the contemporary institutional gendered norms within healthcare workforces may serve to exclude men from certain specialities e.g., in maternity and well child services.

Men's presence in these environments can be seen as unwelcome and treated in such a way as to create health inequalities in service provision (Kimmell et al., 2004). Fitzgerald et al. (2015) suggest that the lack of paternal involvement, particularly during home visits, may be less about the individual father and more about the

person visiting, thus drawing attention to a training need for practitioners visiting the home. There are many opportunities for creative work on gender issues, provided health workers are willing to connect widely, to think imaginatively about prevention and to look for the resources as well as the constraints in gender relations. This will sometimes mean moving outside professional comfort zones but will also mean finding new ways to apply existing skills and services (Schofield et al., 2000).

The NHS Long Term Plan (2019) has committed to the screening and signposting of the partners of women involved in perinatal mental health services. Recent guidance has been released which facilitates the move to more father and partner inclusive practice within perinatal mental health services (Darwin et al., 2021b). Whilst this is a welcome move, there is much more to be done for the general population of fathers who may be struggling with this change in life and who may experience perinatal mental health problems independently of their partner. A fundamental culture change is required from all maternity and well child services to be father inclusive from conception services, through pregnancy and beyond. This lends itself to improved paternal mental health, further impacting upon developmental outcomes for children (Davis et al., 2011; Sarkadi et al., 2008;), relationships and improved self-esteem (Bateson et.al., 2017).

How and whether men choose to access support is also implicated in traditional concepts of masculinity and men's help seeking takes on many forms (Addis & Mahalik, 2003; Galdas et al., 2005; Mahalik et al., 2003). It must not be assumed that men will access services in the same way that women do, nor that all men have the same health beliefs and behaviours (White, 2006). Education about gender and identity performance in nursing and midwifery education may begin to break down some of the barriers to both men's help-seeking and to father inclusive practice. If

the future workforce were more able to explore gender and the associated performances of such, they may be better placed to understand the behaviours of both parents in their care during the transition to parenthood. In the context of contemporary social norms, being able to understand concepts such as front stage and backstage performances in the context of parenting may generate more empathy for how all parents enact parenting alone and with others.

Midwifery services are notably understaffed and therefore from a purely pragmatic perspective, involving partners and fathers may reduce the burden on staff whilst at the same time promoting family inclusive maternity services. In consolidating the above discussion, the following recommendations for practice are offered.

Suggested practice development:

- Improved acknowledgement of paternal mental health during pregnancy and in antenatal preparation including preparation for their return to work.
- Couple focussed preparation for relationship changes and challenges.
- Improved support for both parents following pregnancy loss including signposting and referral to psychological services as appropriate.
- A change to a more family centred philosophy throughout the perinatal period.
- Provision for new fathers and partners to stay overnight with their new baby and the mother.
- Training for practitioners and students around intersectionality and inclusion of gender and sexuality studies in pre-registration healthcare training.
- Acknowledgement of birth trauma as experienced by fathers and access to counselling and support.

8.5.4 Methodological impact

Rarely has constructivist grounded theory methodology been used in the exploration of the transition to fatherhood and so this thesis contributes a relatively novel approach to the exploration of this phenomenon. Previous studies which have used CGTM have explored different aspects of fathering e.g., gay fathers (Malmquist & Ekholm, 2019; Roughly, 2014) and grandfathers (Sorensen & Cooper, 2010). Undertaking this research, in this policy and cultural context with these particular participants, contributes new knowledge to the field of fatherhood research.

8.6 Dissemination

Via this study, I have developed a strong network with other fatherhood researchers, alongside practitioners interested in improving outcomes for fathers. I have presented my findings at several local, national and international conferences and have been asked to sit on steering and advisory groups for several projects and studies. The networks I have generated throughout my doctoral studies are proving to be the foundation of potential post-doctoral research collaborators in this field.

Due to my clinical background, I have insight into how research can be disseminated into practice and have developed close links with practitioners in the community and in acute care who are keen to develop their paternal perinatal mental health offer. I have used the findings from my study to contribute to inter-professional research-based teaching within the university which has also sparked interest at the national and international conferences where we have presented. I teach into midwifery

courses at the university with the aim of applying the knowledge of the transition to fatherhood into their practice.

Addressing traditional workplace philosophies and practices is diplomatically challenging. I acknowledge that a significant shift in social gendered norms for men and women is required to gain equality in parenting in addition to the policy and infrastructure required to facilitate this. However, individual conversations and presentations can contribute to a trickle effect and where traditionally trained practitioners' perspectives are challenged sensitively and considerately, changes in social norms can be slowly accomplished. I believe that my approaches to the dissemination of my findings will have an impact on future practice, both in healthcare and in the workplace and as an educator of the next generation of healthcare practitioners. This study was not commenced as a theoretical exercise and was always intended to make a difference to the wellbeing of men as they become fathers. This, I hope I have achieved.

8.7 Conclusion and final thoughts

This study contributes to a growing body of evidence related to men's experiences of becoming a father. This thesis offers a framework for an improved understanding of these experiences in the context of identity, incorporating the multiple arenas where fatherhood is performed. The interactions between men, these contexts and the relationships within, provide a holistic theoretical framework of identity development in the transition to fatherhood. The cross-disciplinary nature of this study demonstrates its application in several academic and applied disciplines creating evidence applicable to practitioners, employers, employees and families alike.

The theoretical perspective presented in this study clearly demonstrates that relationships and contexts combine to influence fathering identities. Alongside this, fathering identities are neither fixed nor linear (Humberd et al., 2015) with differing identities being performed at different times, in different contexts and with different people (Settersten & Cancel-Tirado, 2010). Being provided with more appropriate services and opportunities to share experiences is likely to contribute to more positive mental wellbeing for new fathers.

Participants spoke of multiple factors which influence their sense of autonomy as fathers, and which facilitate their evolving identities. This is also reflected within generational relationships both socially and in the workplace. Where the men's parents and partners have traditional views of parenting and where workplaces also endorse these attitudes, new fathers returning to work can face tensions in developing their father identity.

This study aimed to identify how men transition to fatherhood and found that whilst men would like a more egalitarian approach to parenting, there are significant barriers to this. Cultural endorsement of a more gender equal approach to parenting will ensure that men feel more able to co-parent their children and women may be empowered to fulfil career ambitions and aspirations. It is acknowledged that despite the need for cultural change, policy change is the pragmatic way forward for the near future, acknowledging that cultural shifts are deeply embedded and take a significant time to undo. However, equality in parenting policy and practice coupled with culture change will eventually provide increased opportunities for whole families and provide positive role models for future generations of parents.

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Appendices

The challenge of coding.

I am finding it quite difficult to code analytically initially and so I have decided not to put too much pressure on myself and to code both descriptively and analytically for the initial coding. I realise that this adds another layer to the coding process, but I feel that this will in the long term mean that I can step up to analytical coding as I look back at these more descriptive codes. This is allowing me to code more easily at this stage and to really engage with the data. It also allows me to practice coding with gerunds so that once I take the next step to applying analytic codes; I will already be in the habit of using action words in my coding. This concurs with Urquhart's (2013) approach to initial coding in GTM where she often summarises descriptively before raising the codes to an analytic level. However, she does not appear to use gerunds in her coding, although does identify that her approach is more attuned with the original Glaserian version of GT.

There seems to be many different approaches to coding, and I can only think that this may well relate to the GTM experience of the coder. Charmaz recommends keeping codes short and action orientated. Urquhart suggests that some of her codes are longer than the text from which they are based. She justifies this by suggesting that some text says a lot more than the words used and so in order to fully understand and get into the text, a longer description is needed which would then be followed by an analytic code afterwards.

I guess that as long as the steps of GTM analysis are followed in their true form i.e. open coding; focussed coding, theoretical coding and theory development alongside constant comparison, concurrent data collection and analysis and theoretical sampling, then the thesis shows validity and trustworthiness.

Thoughts on the analytic process

Having completed coding for the first five interviews, including completing handwritten codes followed by typing these codes out, I feel immersed in my data. It gave me the opportunity to be able to map out significant categories based on a review of the codes. The next step is to allocate each code to these numerous categories and to be able to label them in a more conceptual and analytical way. This will allow comparisons of codes between participants in order to identify the categories which share commonalities. This will enable me to focus on those categories which are emphasised by the participants, and which feature prominently in participant's accounts of their experiences. These most popular categories will then be used as a basis for further theoretical sampling based on the data gathered so far. This process has thus far been labour intensive but has enabled me to really know my data, codes and tentative categories and has also allowed me to identify a preliminary core category. This however is likely to change as more data is collected or as I become more conceptual in my analysis. From this process the interview schedule will be refined and will become more focussed on the categories which

have come to the fore in the analysis so far. As more data is collected a theoretical framework will be formulated which will be taken forward in the final stages of sampling to be "tested on participants" or to follow the abductive element of grounded theory methodology. However, these participants will be asked to share all of their experiences with the researcher so as not to disadvantage them in the research process and so that theoretical saturation can be reached, i.e., in their accounts, no further new data is found.

Being less important than before

Describing his demotion in the household pecking order is quite interesting. He describes being the third least important person in the household now, suggesting his needs are less important than those of his wife and child. Prioritising his child is one thing but feeling less important than his wife could be detrimental to both their mental wellbeing. Feeling important as a husband and father is key to a healthy family unit; appreciating your contribution and that should you not be cared for and looked after- your ability to care for your wife and child may be jeopardized. Albert

The constantly evolving father role- it is neither linear nor static.

Role change from infant to developing towards toddlerhood. Perceives more need to be involved now. Is this something to do with a lack of early engagement with the infant due to a lack of awareness of the importance of fathering an infant? Does this provide a barrier to earlier engagement due to a sense of lack of requirement as society perceives all needs will be met by the mother? Fatherhood appears paused in favour of husband hood/ partner hood and reignited with evolving developmental milestones which emphasise reciprocity. Relate to Rob in relation to husbanding. Described picking up the slack for all tasks non-infant related whilst doing basic cares too. Alex

Handed the baby then asked to leave.

Again, at this moment, many things are crossing his mind including concern that he might drop the baby- this is a common concern across most of the men I have spoken to so far as they have all felt that they had just been handed the baby and quite often had them taken away again quite quickly. Following this being asked to leave the hospital also punctuates fatherhood or the forming of a family. Basically, it has to start again the next morning; meanwhile the mother is becoming a family with the new baby whilst procedures and institutional rules exclude the father from this crucial time. Neville

Being made to leave the hospital.

He and several other men have talked about having to leave the hospital soon after their babies were born, and I would like to do some comparisons of "incidents" regarding this. I see this having an impact in several ways. Firstly, it is a physical interruption to the transition to fatherhood. Briefly meeting your baby and then being forced to separate from your baby can impact on the early transition and sense of fatherhood. Secondly, it treats the father as less important than the mother and suggests that this time is to meet the needs of the healthcare providers rather than

the new family. Thirdly it increases the stress and anxiety new fathers feel by creating a sense that they are abandoning their partner at a very vulnerable time for them. These men argue that they would happily sleep on the floor or in a chair and that they would likely not sleep because they would be looking after both their baby and partner. I wonder what the motivation really is for fathers not to be able to stay. Fred

Seeing a scan helped to make it real.

Being overwhelmed by joy offers the sense again that all the angst and worry was/ is worth it. Becomes something tangible whereas it was just a concept before. Enables increased empathy with partner and therefore enhances a sense of support for her. Initiated the need to physically prepare for the baby arriving- so what happens if men do not attend any scans? Do they miss out on this sense of increasing reality? Do they miss out here and therefore is the birth even more of a shock and change in life? Do scans provide a welcome connection for men and unborn babies which in older generations would not have been possible? Is this one of the reasons why men are more engaged and emotionally invested in their children now. If so it has been a relatively short amount of time since scans have been available and so generationally, grandparents especially grandfathers may lack an understanding in the connection and investment of their sons. Ethan

Gendered children/ gendered activities

It is interesting that whilst he is speaking about society and their traditional gender-rolled attitudes, he apologises for suggesting that the doll he practiced changing a nappy on belonged to a nephew and corrected himself to say niece. Whilst speaking about the desire for fathers to be treated equally or at least have society acknowledge more equal gender roles when it comes to parenting, he is reinforcing a gender stereotype himself. Does this reflect people's broader understanding of equality? People want individual equality but do not realise that there needs to be changes in wider narratives. In addition to this his desire for his daughter to be anything she wants to be reinforced by him stating that if she wants to do her nails with her mum or work on the car with me then either is fine. Whilst on one hand this suggests acceptance of whomever his daughter wants to be whilst also reinforcing gender stereotypes which he may be doing throughout his daughter's life without being aware of it. William

Thoughts on structural factors and social norms

Whilst at micro levels of society, for some families a true sense of Co-parenting is becoming a reality, at a macro level societal shift is tardy especially within larger institutions and organisations. This anomaly contributes to the challenge men have in playing out the role of a Co-parent and for some can result in some kind of punitive reaction from employers should they take shared parental leave or ask for flexible working. This can be framed within Goffman's dramaturgy. If Men are expected still at a macro level to play the part of traditional breadwinner in a heteronormative male style and their audience (the employer) has traditional expectations and ideas of gender roles relating to child rearing, should these men

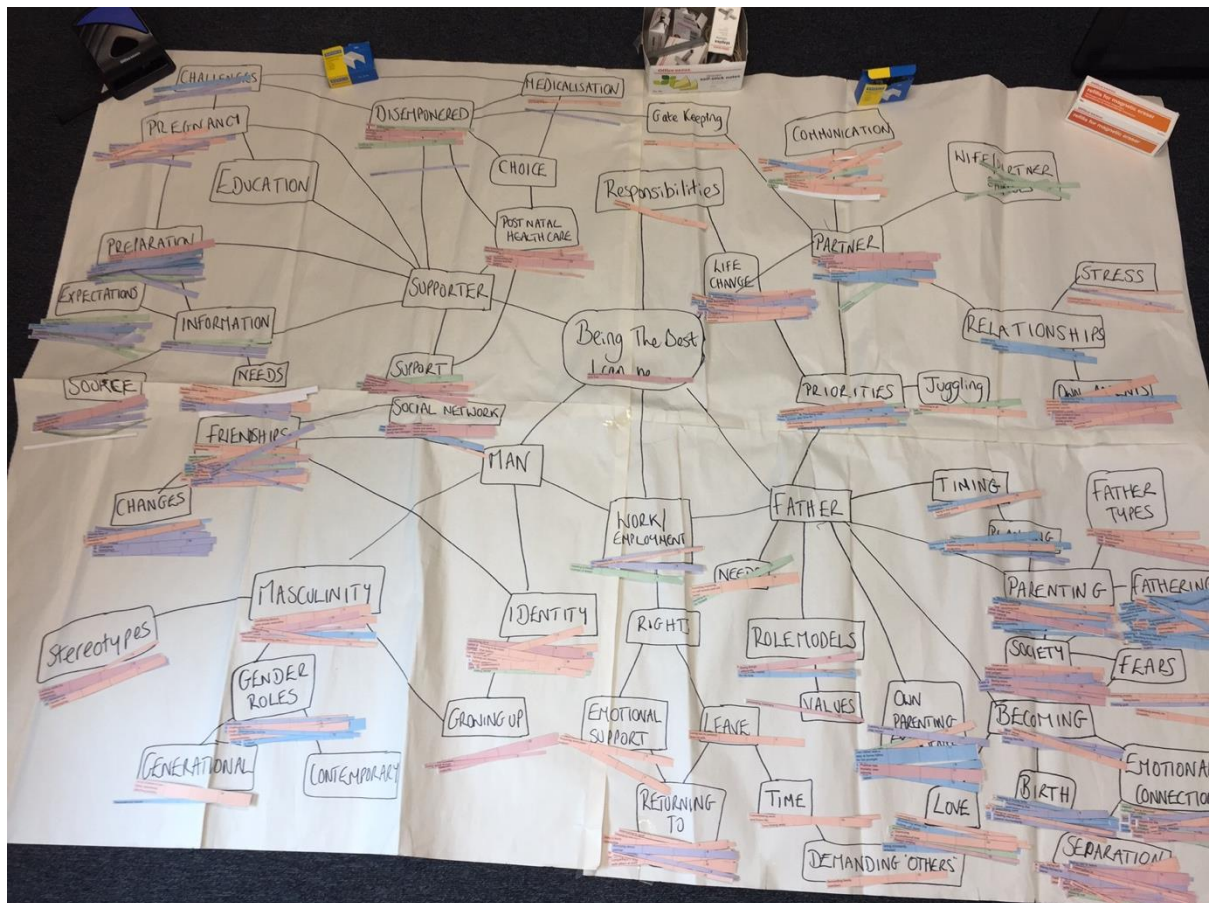
play the role of involved caregiver and go against these gender role expectations, their audience will be thrown off. The response of the audience may be to dole out a punitive response to the man for shaking their expectations of role resulting in pressure to conform to gender role expectations as they continue in their working role. This serves to warn others of the risks of defying the gender expectations of the company or organisation feeding into traditional gender roles at a micro level, thus ultimately preventing men from becoming the Co-parents they wish to be. All the while this continues to feed into inequality in the workplace for women. In the health care environment older practitioners have two views of men/ fathers. One is the feckless father who is disinterested and useless; the other is the father who is fully involved and attends every appointment. The latter father raises suspicion, and it may be suggested that he is controlling and there may be suspicions of domestic abuse. The former may be related to a self-fulfilling prophecy for some less confident or articulate men who may well wish to be involved but lacks the confidence to assert himself. If a dad is treated as useless and in the way, will it be long before he behaves in such a way as to meet the expectations of those bestowing this identity upon him. Goffman suggests the idea that there is some kind of audience disappointment if an individual behaves in such a way which is not expected of him. Men wanting to be fully involved in supporting their partners through labour and birth and want to go on to be Co-parents may incite an alarmed response from those expecting and indeed perhaps hoping for a man who will do as he is told and behave as instructed. This throwing off of the audience may result in poor communication and care from those expecting a different type of father.

Parenting role models/ norms

Described relationships changes with mum and wife. Mum traditional in many ways around raising children and would like to have more time with baby. Parents not wanting this at the moment. However, his own mum went back to work, and his dad was a stay-at-home dad with his younger sister o somewhat non-traditional in other ways. His own father was not a positive role model for fathering and specifically said he didn't want to be like his father as a dad to his son.

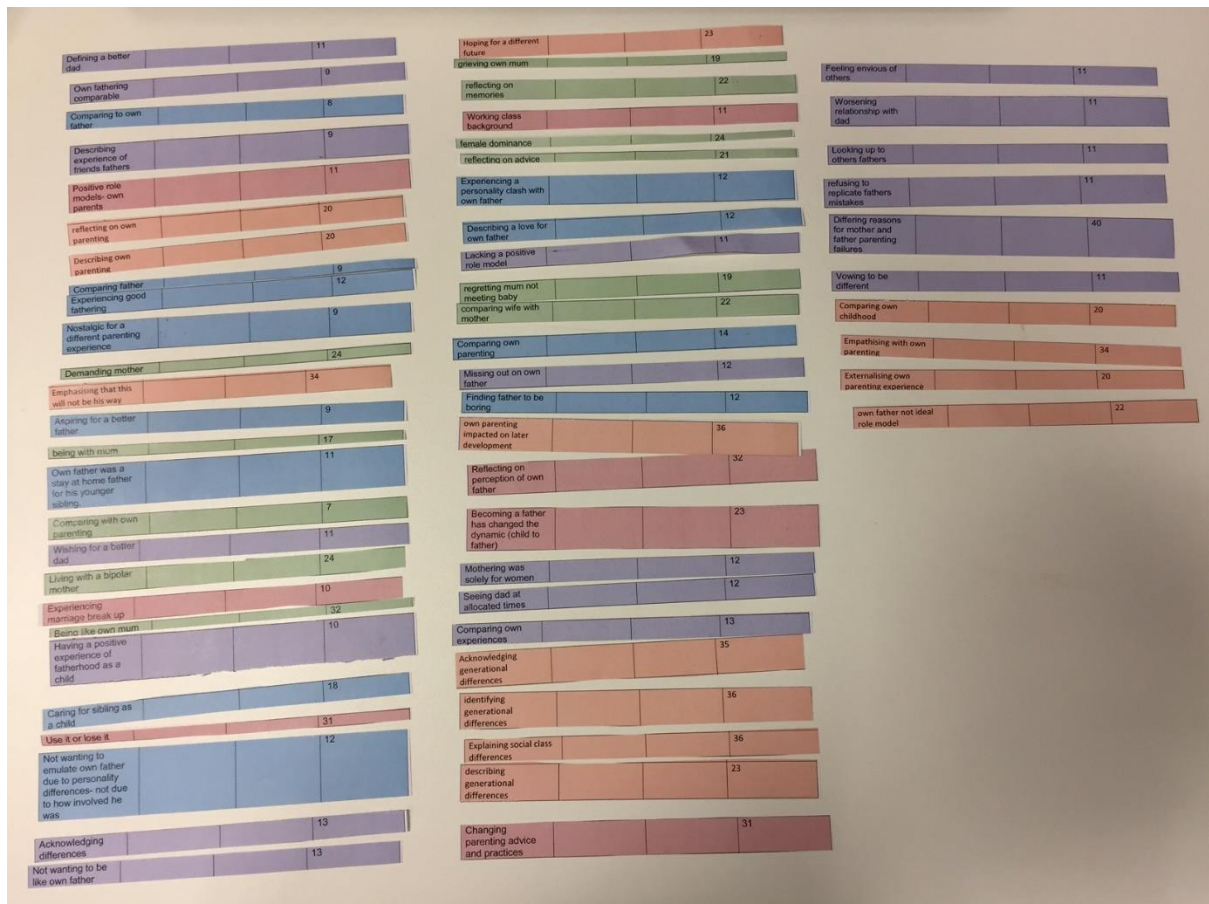
Identified a work mate/ old boss as someone he looked up to as a role model for fathering. Mick

Appendix B. Image of mapping



Appendix C. Images of analytic process initial coding

Generational influences



Experiences in healthcare



New Dads Needed!

**Are you a new father with a baby
under 1 year?**

**We want to hear from you to find out what its
like to become a father**

**If you are a heterosexual man aged over 18 years
and would like to share your experiences of becoming a
father in a one to one interview**

Contact:

Suzanne Hodgson

Doctoral researcher

phone: 0114 225 2099

email: suzanne.hodgson@shu.ac.uk

**THIS STUDY IS SUPPORTED BY SHEFFIELD HALLAM UNIVERSITY AND
HAS RECEIVED APPROVAL FROM THE UNIVERSITY ETHICS COMMITTEE**

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Appendix E. Ethical Approval Letter



Our Ref AM/KW/D&S-311
8 November 2016

Suzanne Hodgson
Sheffield Hallam University
Department of Psychology, Sociology and Politics,
Heart of the Campus
Collegiate Crescent Campus
Sheffield S10

INTERNAL

Dear Suzanne,

Request for Ethical Approval of Research Project

Your research ethics checklist (SHUREC1) entitled "**A Grounded Theory of Men's Transition to Fatherhood**" has been submitted for ethical review to the Faculty's rapporteurs and I am pleased to confirm that they have approved your project.

I wish you every success with your research project.

Yours sincerely

A handwritten signature in black ink, appearing to read "A Macaskill".

Professor A Macaskill
Chair
Faculty Research Ethics Committee

Office address :
Business Support Team
Faculty of Development & Society
Sheffield Hallam University
Unit 4, Sheffield Science Park
Howard Street, Sheffield, S1 1WB
Tel: 0114-225 3308
E-mail: DS-ResearchEthics@shu.ac.uk



Research Participant Information Sheet

A theoretical explanation of the transition to fatherhood in 21st century society

Principal investigator:

Suzanne Hodgson, Doctoral Researcher

Email: [REDACTED]
[REDACTED]

You are invited to participate in a research study to explore and understand how heterosexual men transition to fatherhood. This study will form the basis of my PhD and is supervised by the Department of Psychology, Sociology and Politics at Sheffield Hallam University.

What will I be asked to do?

You will be asked to participate in an interview with me at a time and place convenient to you. The interview will take around 40 minutes to one hour and you will be asked for permission to audio-tape the conversation. I may need to contact you after the interview if I have any queries about the information you provided, this would be no more than a brief phone call or email.

What questions will you I be asked?

You will be asked to describe your experience of becoming a father including your contact with any services and the wider community. You will be asked questions about fatherhood in general and about the needs of men during the process of becoming a father.

Your rights

Taking part in this study is voluntary and you may choose not to answer any questions with which you are uncomfortable or halt the interview at any time. You may also withdraw yourself and any data you have provided up to 10 days following your interview without having to give a reason. After this time your interview will be transcribed and is anonymised so that it can be collated with other data. At this point it is no longer possible to remove your data from the research. Your name and any personal details e.g., names and locations, will be altered during the transcription process to protect your anonymity. No participants will be personally identifiable in any published reports or presentations about the study.

What will happen to the information?

Once transcribed, the information you provide will be analysed and collated with other participant's information to help us better understand the transition to fatherhood. The anonymised information will

be shared with my supervisors, Dr. Laura Kilby and Prof. Julia Hirst, used in my thesis and publications and shared with other researchers as appropriate.

The original audio files, and the transcribed data will be stored on a password protected memory stick and /or password protected pc. The audio-files will be destroyed once all transcription is completed. The anonymised transcribed data will be retained for a minimum period of 10 years in line with university data management procedures.

What are the benefits and risks of participating in this study?

By participating in this study you will be helping to better understand the experiences of men as they transition to fatherhood and how services and society can better meet the needs of men during this time.

It is acknowledged that sharing your experiences of fatherhood may be a sensitive topic and there is a possibility that you may experience feelings of stress or anxiety related to your personal experiences. You may decline to answer any questions you may feel uncomfortable with. It is not anticipated that participation in this study will cause distress, but should this occur, the researcher will offer you information about how to access support e.g. from organisations who work with fathers, your own GP or other support services which may be appropriate.

What will happen to the results of this study?

The findings of this study will be used to fulfil the requirements of the researcher's PhD. Therefore they will be written up in a thesis and presented orally for examination at the conclusion of the researcher's PhD process. Findings may also be published in an academic journal or presented at a conference but you will not be personally identifiable in any publication or presentation.

Who pays for the research?

This research is self-funded by the researcher supported by Sheffield Hallam University

Who has reviewed this study?

This study has received ethical approval from Sheffield Hallam University

What do I do now?

If you wish to participate please contact Suzanne Hodgson by phone, text or email:

Phone [REDACTED]

Email: [REDACTED]

Who do I contact if I have any concerns about this research?

Director of Studies: Dr Laura Kilby

Email: [REDACTED]

Supervisor: Professor Julia Hirst

Email: [REDACTED]

Thank you for considering participating in my study

Yours sincerely

Suzanne Hodgson

Appendix G. Demographic questionnaire

Participant's background questionnaire

ID number:

Please circle your response

1) How old are you?

18-24

25-34

35-44

45-54

55-64

65+

2) What ethnic group do you identify with?

A: White

British

Irish

Any other White background (please write in)

.....

B : Mixed

White and Black Caribbean

White and Black African

White and Asian

Any other mixed background (please write in)

.....

C : Asian or Asian British

Indian

Pakistani

Bangladeshi

Any other Asian background (please write in)

.....

D : Black or Black British

Caribbean

African

Any other Black background (please write in)

.....

E : Chinese or other ethnic group

Chinese

Any other (please write in)

.....

F. Prefer not to answer

- 3) What are your living circumstances?

Live alone

Live with partner/spouse

Live with partner/spouse and extended family

Live with extended family

Live with friends/ flat mates

Other.....

- 4) What is your relationship status

Single

Married/ Common Law

Separated

Widow/ Widower

- 5) How many children do you have?

Expecting first baby

One baby under one year

Expecting second or subsequent baby

One or more children plus a baby under one year

- 6) What is your educational status?

Secondary school incomplete

Secondary school completed

Certificate/ diploma

University degree

Postgraduate qualification

- 7) What is your employment status

Employed Part time/ full time

Self employed

Unemployed

Student Full time/ Part time

8) What was your approximate annual household income last year?

Up to £15,000

£15,000- £35,000

£35,001-£50,000

More than £50,000

Appendix H. Consent form



Participant Consent form

Title of research study: ***A theoretical explanation of the transition to fatherhood in 21st century society***

Please answer the following questions by ticking the response that applies

	YES	NO
1. I have read the information sheet for this study and have had details of the study explained to me	<input type="checkbox"/>	<input type="checkbox"/>
2. My questions about the study have been answered to my satisfaction and I understand that I may ask further questions at any point	<input type="checkbox"/>	<input type="checkbox"/>
3. I understand that I am free to withdraw from the study within the time limits outlined in the information sheet, without giving a reason for my withdrawal. I can also decline to answer any questions in the study without consequences for my future treatment by the researcher.	<input type="checkbox"/>	<input type="checkbox"/>
4. I agree to provide information to the researcher under the conditions of confidentiality set out in the information sheet	<input type="checkbox"/>	<input type="checkbox"/>
5. I wish to participate in the study under the conditions set out in the information sheet	<input type="checkbox"/>	<input type="checkbox"/>
6. I consent to the audio recording of the interview.	<input type="checkbox"/>	<input type="checkbox"/>
7. I consent to the information collected for the purposes of this research study, once anonymised (so that I cannot be identified), to be used in publications, conference presentations and potentially for future researchers' use.	<input type="checkbox"/>	<input type="checkbox"/>
8. I understand that the researcher's supervisory team will have access to anonymised information	<input type="checkbox"/>	<input type="checkbox"/>

Participants Signature: _____ Date: _____

Participants Name (Printed) _____

Contact Details: _____

Researcher's Name (Printed) _____

Researcher's Signature _____

Researcher's Contact details:

Suzanne Hodgson, Doctoral researcher, Faculty of Development and Society, Heart of the Campus, Collegiate Crescent, Sheffield Hallam University Tel: 0114 225 2099

Appendix I. Interview schedule

- Can you tell me your story of becoming a father?
- Tell me about your experiences of becoming a father
 - What was it like for you when your partner was pregnant?
 - When you got your baby home
- During this time was there anyone in particular who was helpful or unhelpful to you- can you explain how they have been helpful/ unhelpful
 - Has any organisation been helpful/ have to accessed any formal support?
- How would you describe your role as a father- what sort of things do you do?
- What do you think society thinks of fathers/ what are society's expectations of fathers?
 - What are the perceptions of fathers within your family/ workplace/ community?
- Have your thoughts or feelings about fatherhood changed since you have become a father? Please explain
- Have you had any contact with any formal support services during pregnancy or since your baby was born- how was this
- Have any of your relationships changed since you have become a father
- What do you think men need as they become fathers?
- Is there something else you think I should know to understand your experience better?
- Is there anything you would like to ask me?

Additional questions asked of participants 6-12

- Do you see yourself differently now that you have become a father?
- Do other people see you differently now that you have become a father?

Appendix J. Further examples of analytical process

Data extractions: Negotiating the workplace (pseudo-anonymised)

again I was lucky in that, I was allowed, work didn't get in the way of me going to as many of the like appointments and things, so I felt I definitely felt like I was involved and part of it, very definitely part of it, you know, I couldn't turn off from the worry of it all the way through, Frank p 6
Again it think it related to work as well, it was times like that you know, the morning after when something had been horrible, having to go back into work again (pause) and yeah and kind of feeling like I really would have appreciated someone, or maybe having being able to talk to someone at that point about how I was feeling, would have been yeah I would have really appreciated Frank, p9
I think, I think that's the help, that I would have really appreciated, as I say because for me, because it was always kind of there at the front of my mind, that even when I was at work, or whatever, then there, then I did, that's the thing perhaps I struggled with the most, was being able to put it to the back of my mind for a bit, to do some kind of banal paper work, that's the kind of thing I struggled with, so maybe having a bit of support, if there could be some support for that kind of problem, yeah that would have been really good. So yeah maybe it relates to the work place, perhaps. Maybe if there had been a bit more support there from my work place rather than just letting me go to an appointment and not worrying about that and then you know, maybe it, maybe that side of things, yeah I would have really valued a bit of you know actual interaction and support from work. Frank, p9-10
and then it was sort of just towards the end of the two weeks Karen got quite bad mastitis as well and she was really like really ill for a night or so and then that was just before I went back to work which wasn't particularly good timing for either of us really. And that, so I think I was quite worried again by the time it was time to go back to work. Frank, P15
as well as him like being a thing to worry about and a thing to be fantastically happy about then he was also just a thing that you had to be practically all of, every decision was based around him now and that was, yeah, and that was quite a big thing to realise Frank p16
I remember as well as crying on the bus on the first day, I remember falling asleep on the bus in those first few weeks back at work a number of times, um and luckily waking up in time to get off the bus. So yeah combination of just being sleep deprived and very, really not wanting to be there when I was at work, I felt pretty rotten, definitely for the first few weeks back at work, Frank p16
I had to go back to work. we talked about sharing the parental leave um but my wife was definite , she was very definite that she wanted the whole year for herself, which was fine, um so I went back to work after a fortnight erm and er yeah, um and I think that was when I sort of realised the emotional attachment was when I had to go back to work Frank p2
I was given the support in that, you know, my, I guess I was put on pretty light things to do and nothing gruelling but, not really the support in that, it wasn't that you know, there wasn't any kind of talking support, um which I don't know, I don't

know whether it would have helped or not but yeah, that wasn't part of the offer, um which might have helped. Frank p16-17

the expectation I feel on me, I don't feel an expectation on me to be like the authority figure and to be that kind of thing which I think, I think the expectation, I feel, the expectation I feel on me is to be, is that em, that at the moment, when he's little, there an expectation that I'm going to have to provide more financially and because, practically that's the way it has to be at the moment and so, there's and so I have to be more focussed on, I suppose yeah, there's a kind of expectation at the moment that I need to be more focussed on my work so that I can be the one that provides for the family but it's actually the most difficult time I've ever had a t work because I really struggling to care about it Frank, p22

yeah two week I think is pretty derisory really, in terms of (pause) it's no time at all to actually get to know a child really because it's so, you're dealing with all the practicalities as a dad, I found anyway because, you know, (wife) had just given birth and she was breast feeding and you know, that much as I wanted to spend all of the time just there as a big pink mushy emotional blob, getting to know him and holding him all the time you couldn't because I needed to, you've got to do stuff so, by the time you've done the stuff, for a week, then that's half your parental leave gone, Frank, p29- 30

maybe having those two weeks, I think those two weeks you need, are necessary but it would have been really, really helpful to have a bit more um and then yeah, um definitely, more paternity leave, yeah, Frank, p 31

she had to stay in for a week so, luckily with work they said, that weren't the start of my maternity cos Erica needed me to look after her so, I spent visiting times in the hospital and then I'd have to go home and then come back in't morning. I think that was a week, might have just been over a week, and then Erica got released and then I had another week at work look, just looking after her, cos of her stitch, it was a caesarean so, looked after Erica and then I took my maternity in half days, Neville, p4-5

I do an awful lot of stuff at work that only I know how to do so it's very hard for me to get a full weeks' worth of cover like holidays and stuff are a nightmare, so I agreed with work, I'll do half day, I'll do all me work so that I can work as fast as I want, I work fast anyway Neville, p5

I think dads now are more involved day to day, I mean, a lot of my friends they work part time with the mum, rather than the mum, either taking work off or going back part time, a lot of the dads have done the part time side, a lot of my friends, the women seem to earn more money than the men (laughs), same situation with me. Erica earns a lot more money than I do, so it makes sense for me to take time off work, Neville, p 12

I like to be up on things and I like to discuss the latest films with my students and that kind of stuff and you know, I dunno losing, losing a little bit of that identity about you know I'm kind of kind of known at work as the film buff and someone to talk to about those things and that is kind of slowly going and people are saying, oh have you seen this film (name) and I'm like, what's that? And they're like it's the new Scorsese film, so you know, not even small films I'm I'm kind of losing track of there Albert, p3

certainly in the last year my work have been pretty flexible I think in times of allowing me a little bit more leeway of coming maybe slightly later and maybe not working, not exactly working all my hours in a week because of leaving early

and stuff like that, I mean maybe having to go and be with Billy when Ann has had a medical appointment for example or things like that they've been quite good with that Alex, p14
So there are aspects of my job that I haven't been too happy with career wise in the last couple of years but I haven't pushed them too much in terms of looking for a new job or creating too much of a fuss at my current employment because we just have to have an income each month with Ann on maternity leave and with nursery fees coming up and all of that stuff Alex, p 14-15
maybe it's part of my view; long term view of rebuilding your life after becoming a dad to then think more about your career if possible Alex, p15
I can't travel that weekend, I can't be away that week because I've got this this. So it's about balance, somehow finding a balance. And that maybe might have affected my career prospects with the company because I don't have that experience necessarily of being away doing the job as much as somebody else in the company and that impacts your future I suppose so, it about trying to get that balance back now Billy has matured enough that he'll be in nursery and things and he won't change dramatically if I don't see him for ten days, maybe time to switch back maybe more into accepting those roles rather than putting up more barriers or excuses or however your work might view it Alex, p 17-17
he is the most important thing, arguably the most important thing in the last twelve months bar nothing and so it's about managing a little bit of work to still keep a job but most of your time devoting your energy towards him for those, or supporting Ann for those twelve months and that's what my family has needed and, yeah that's the way I've sort of viewed it essentially and so my career has probably have been secondary. Alex, p18
there is an element of that, you can feel somehow escapism but also sometimes it's quite hard to kind of come back and your wife is and having Billy is exhausting and then to sort of have a baby thrust into your arms as you walk through the door, kind of just have him sort of moment and you're just like well I have... I don't know it's a different kind of tiredness in a way, going to work and then dealing with Billy. It's interesting but I'd say definitely gets easier but I think part of that is he changes and part of that is you just becoming used to what you have to do in terms of juggling everything. Alex, p 18-19
one thing that I did was that I asked to go down to four days a week, which was refused Ethan, p18
Susan is going to take some more time off work erm, so, erm, but yeah I'd like to spend more time with I and be more involved in being there for her and obviously it gives her more to time to do other stuff as well. Ethan, p18
so obviously had the two weeks er paternity leave which is ridiculously short, luckily they gave me another two weeks compassionate leave erm, unpaid because I was in hospital for two weeks so I think I would have had to come back the day after we got home or something ridiculous like that ... they gave me a couple more weeks which was good but obviously that was at their discretion so they could easily have said no to that. Ethan, p19
we took shared parental leave, so I had eight weeks which was two weeks of annual leave and six weeks of shared parental leave and apparently I'm the first person who has ever requested it. Ethan, p19
So HR weren't quite sure what to do with it and the forms that they get you to fill out didn't really make much sense, erm yeah HR were kind of saying can you

just request it as unpaid leave cos we kind of know what we're doing with that, so I said well no, I want to do it like this because a. they can refuse unpaid leave whereas they can't refuse the shared parental leave erm, and just thought they need to get their processes sorted out really. Erm, but yeah two weeks is a joke really, erm yeah having eight weeks off was really nice, spending all our time together it was lovely. Ethan, p 19

being refuse the part time working erm, yeah it, it's like they're trying to impose this, this kind of split- no you can't be a dad because we need you to be working here and obviously you shouldn't be trying to do this anyway, why bother with that kind of thing, Ethan, p23

I had to go to an un-scheduled one for which I had to go to work in the morning, leave work, go out from City all the way to another city back to City and then back to work. Cos I was working at that time for a company who em weren't the nicest company to work for and so, you know, if it was one of my employees now, I'd say just take the morning or whatever, or you know, if you need the day off, fine, I'll cover it, don't worry about it, um but I had to go back to work after that but er, the scan was fine, she was perfectly normal Fred, p11-12

Donna actually works now more than I do. Erm, so when she went back to work after her maternity leave had finished, erm she erm we both dropped down from a five day week to four so that we could work basically alternate days and then there would be one day left over, that India would go to my mother for the day, erm so er so that was ok but then she changed jobs a couple of months ago and erm, she now has gone back up to full time so, I actually work less than she does erm, and so I have more erm child rearing responsibilities. Fred, p27

because, technically I had left and come back I had lost basically all of my paternity time, that I would have accrued previously and so erm, when I erm, when I went off because India was born I was off for five days and that was it. And then I went back to work and Donna suddenly had to do everything by herself and she found that really difficult and I don't know if that's specifically about erm the way society views erm fathers and that kind of stuff but I would have thought that there would have been ok, yeah technically I'm a new employee but still you know, Fred, p43

it wasn't literally like this but I'd come home from work and she'd basically hand the baby to me and just be like can you just take her and fine, no problem, absolutely fine, like I'd go to work, it would be intense because it was Christmas but I'd come home and my actual job would start. That's how I kind of see it now, it's significantly more tiring being at home than it is being at work, Fred, p44

now she's got to that year old, it's like it's given me the chance now to start looking at getting my career going again and look to move on. Mark, p23

I think the shared paternity leave is, I think it's, I don't think it's right because it's taking maternity away from the woman so the father can have time off, it's like there... fathers should get more than the statutory two weeks. You know it shouldn't have to take time off the woman to have that... it's pretend, it's like. (Inaudible), but we'll pretend it's you know for the fathers. Mark, p33

I took two weeks paternity leave so I took both weeks of that, that flew by, that was two weeks stuck in the house, people coming round to visit, bringing biscuits and chocolates and things like that, so an unhealthy two weeks for me there then I came straight back to work after that, Iain, p3

work have been quite good they're letting me, whilst he's in nursery for the full day I'm going to work at home for the first four weeks just because erm, we

commute on the train so it's quite far for us to get there if there are any problems at the start so at least I'm on hand to go up and help and then I'm also planning to leave, I say half an hour early on a Friday just so I can get the earlier train as our trains are generally once every hour so as soon as you miss that it kind of puts you back another hour so at least I can get home Iain, p5

I did plan to read stuff but then other things came along at the same time so during the pregnancy erm, I work in the** department here and we were going through a restructure there so it was quite a stressful time at work with that and then I ended up getting a different job through the restructure that coincided roughly with when our baby was born so it's kind of also full on at work, kind of learning a new role and having a lot of kind of thinking time I suppose took up by that which wasn't great timing but it was how it was Iain, p 9

maybe taking paternity, starting a bit early. Yeah like I'd been at work again, all that day, so it had already been a long day, just things that we could have changed, I know you can't predict when its going to happen so it might be hard but maybe things to think about. Iain, p 13-14

now it's coming up to like him going to nursery and my wife's not there all the time for him, thinking about how I can support her through that as well so I know from coming back to work it was hard coming back to work and that's one of the things I've tried to get my wife to understand when, it's not having a go at me but kind of saying if I'm not pulling my weight with stuff that it because I'm back at work and you'll realise when you go that you are, I'm not like sad that I'm leaving you in bed in the morning cos of you getting a lie in or something like that its more, I know I'm leaving you and you've just got to look after Timmy our son on your own all day and I'm not going to see him for a dad and I've got to go to work and think about other stuff that I don't really want to be thinking about but you've got to. So it's that and kind of, I'm used to it now but it's been the best part of a year to get used to it but I feel that was hard Iain, p26-27

I'd not really thought about that it was kind of coming back to work and kind of knowing that I will miss a big chunk of his life because I am at work, I'm out of the house most of the day and kind of thinking about is this is this what it will be like for me not forever but for the long term future and I'm out of his life for more time than I'm actually in it. I get to spend about an hour with him each night after work and that's just like I said feeding him, bathing him which is nice but I don't get to do the fun stuff that she'll have been able to do. Iain, p 27

I've moaned at my wife quite a lot that men obviously aren't as important at bringing up a child because we only get two weeks, well a week off really for most places and you can have the year off so the government say I'm not as important as you so. Iain, p 29

I get two weeks and I'm thrown straight back into work and kind of like the biggest change of my life, I don't know what I'm doing at all at that point and then I just go back to work oh I'll see you and the baby, I'll see you tonight for an hour. Iain, p 29-30

I found that a bit almost like ridiculous that the man doesn't get any kind of time off- a week, two weeks but it's not, definitely not long enough to get used to it. Even if they did extend it to a couple of months maybe just to get used to this change in your life and then you could go back to work at least. I wasn't very functional at work in those early months anyway so, Iain, p30

It's all a bit of a blur now looking back, it all kind of blurs into one but it, yeah I weren't like upset and sad generally that I'm leaving them behind and then like I

say thinking, this is what it's going to be like for me now, out of no involvement, well a lot less involvement and I've just got to go to work and get on with it. Iain, p30

yeah if they'd had offered me the year I'd have took as long as I could have to be around with them, I think it's, your one opportunity to see them and get used to life at that time and just the changes in the whole kind of family dynamic and think you're not part of so that yeah, I'd definitely say that we should have a longer paternity leave to help in that respect. Iain, p 31

I suppose even from also understanding my wife's point of view, a lot of the time she said I'd rather be at work, like you have got the good end of the deal today, you've been at work where I've been home with the baby screaming all day who, there was nothing I could do to calm him down today, he's has an off day. You're much better off at work and I'm thinking to myself well yeah but I'd still rather be at home and I've not seen how bad it is and then you get the weekends where he's that bad on the weekends and I'm thinking to myself, yeah you're right, I would have rather been at work in these situations. Iain, p 31-32

I could have took some of her maternity leave but I wouldn't have wanted to do that to my wife, I feel like she would want the full time... so I wouldn't have wanted to impede on that but it would have been nice to have the option Iain, p 32

everything got on top of me, erm, I had to go back to work and leave a baby crying, erm because, have I told you she was allergic to milk? Cos obviously her guts were playing up and she's absolutely screaming, partner were getting really tired and I felt really helpless, I felt like I can't just not go to work, as much as I'd love to stay here and help you, I can't, erm because I'm only allowed I think it were two weeks, that's all you're allowed William, p24

I mean luckily our boss is alright he gave me is it compassionate leave so all the time she was in special care, I was on compassionate leave which I think it was two or three weeks and then my maternity stated the day she came home, he said make sure you tell me when she comes home and I'll start your maternity leave then so I did get the two weeks at home but that was two weeks of crying, she couldn't poo, so we were up at 2in the morning screaming house down because she couldn't do a poo and it was the most stressful two weeks of my life and I thought, that's it now , I've got to go back to work and leave it all to you. You've got to do this on your own now, no sleep. William, p24

I was kind of like, here's the baby you're on your own kind of thing. I don't think it should be like that, there should be more time. I mean she's got now off til April, just short of a year isn't it? Maternity? So she would have quite happily halved it and share the responsibility but it's not, it just you back to work, you do what you need to do and I'll just stay here and handle a crying baby that won't go to sleep William, p25

I felt like I was abandoning my duties kind of thing. Erm, if she's crying her eyes out at ten o'clock at night and I'm up at 4 I'm like will you see you the baby and you can see in her eyes she's like kind of what? And you feel so guilty but what can you do, you know what I mean you're not given much choice but to live that kind of life, William, p25

No it's been a very stressful from start to finish really, I'm not going to lie, erm stressful time but at the same time rewarding, it's a strange situation you find yourself in. But yeah, very stressful. That feeling you can't help somebody even though its part of your job as well but you just can't help. William, p26

I think it might be empathy towards other parents yeah, um I do feel that. Like I understand parenting a lot more because I know what it's like to have a baby that won't stop crying, no matter what you do so I do I think it's changed my attitude 100% William, p27

I think probably work will have noticed but they won't have commented on it so not to give me a big head but I think, cos I'm not as aggressive William, p27

I feel like if I did act stupid and got sacked or quit then that's having an effect on the baby because she's not going to be able to have the things she wants and that's not a good role model William, p28

like just the other day one of the higher ups, said oh we must meet and chat about this thing, can I meet you at 5 and I literally just laughed in his face and went no! You can meet me in working hours and yeah and that simply wouldn't have happened before. There's not a chance I'd have done anything other than called to tell Louise I'd be home later or cancelled whatever plans I'd had Rob, p43

I'm just not going to do that because my non work hours are quite important now and there full of really important things um and I guess I've become a bit more mercenary about work and because of that, because there's something a lot more important now and my career is fine, but the point of my career is much more about supporting Amelia than it is about getting me another bit of wall bling, like I could care Rob, p44