

# Fathering: The Man and the Family

## The Department of Health and Human Services' Response to President Clinton's June 16, 1995 Memorandum to Strengthen the Role of Fathers in Families.

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### I. INTRODUCTION

The well-being of children is enhanced when they have social, emotional and financial support from both their fathers and mothers. The Department of Health and Human Services (DHHS) enthusiastically welcomes the invitation of President Clinton to participate in a government-wide initiative to strengthen the roles of fathers in families.

Over the past several years, under the leadership of Secretary Donna Shalala and Deputy Secretary Walter Broadnax, various agencies in the Department have taken actions that recognize and support the roles of fathers in families. These current activities form the underpinnings of the Department's future efforts to ensure that all of its programs and policies support the President's goals. The Department's response also builds on the President's legislative proposals, especially provisions in the Work and Responsibility Act of 1994, that reinforce fathers' responsibilities to their children and provide opportunities and support so that fathers can fulfill their responsibilities. We recognize that even more can be done to make sure that no program ignores the many strengths that fathers can bring to their families and their children.

Families come in many shapes and sizes. There are families with grandparents, families with cousins, families with a few children, and families with many children. There are birth children, adopted children, foster children, and stepchildren. There are biological parents, adoptive parents, stepparents, foster parents, parents who live together and parents who live apart, and there are parents who work outside the home and parents who work at home. There are also neighbors, friends, uncles and aunts, grandparents, and siblings who play key roles in children's lives.

Because families are diverse, so too are the roles of fathers and mothers. While the importance of the role of the mother and mothering in the family has received a great deal of study and attention, this is less true of the role of the father and fathering within the family. It is clear that the role of the father is not limited to that of an economic provider, although that is certainly an important part of all parents' responsibilities to their children and society. Because the roles of fathers are so diverse, the Department's current initiative does not attempt to define a role or even to identify specific roles that would apply to all fathers or all children or all families. Rather, we want to encourage and support the many roles that men can and do play in the lives of their own children and other children that they care for.

The guiding principles for the Department of Health and Human Services' (DHHS) response to the President's initiative are

- All fathers can be important contributors to the well-being of their children
- Parents are partners in raising their children, even when they do not live in the same household
- The roles fathers play in families are diverse and related to cultural and community norms
- Men should receive the education and support necessary to prepare them for the responsibility of parenthood
- Government can encourage and promote father involvement through its programs and through its own workforce policies

These principles are demonstrated in current activities of the Department and in its continued plans to strengthen the roles of fathers in families. The Department's activities also take into account that there are some circumstances where increased involvement by a father or a mother may not be in the best interest of the child. However, this would be true only for a small number of children. The Department continues to strongly support family preservation and reunification efforts when they do not risk the safety of the child.

The remainder of the report is organized into four sections:

**The Current DHHS Strategy** sets forth how the Department is currently promoting father involvement in the lives of their children through activities undertaken in fiscal year 1995,

**The Review Process and its Results** outlines the process by which the Department conducted the review outlined in President Clinton's June 16th Memorandum and the additional programs and activities that were identified through the review,

**Next Steps: The Department-wide Strategy to Implement the President's Initiative** identifies the Department's goals in the areas of program, research, communication and the DHHS workforce and the strategies that the Department will employ to ensure that efforts supporting fathers become part of the Department's programs and policies, and

**Leadership, Coordination, and Program Integration** contains suggestions of government-wide leadership and coordination activities that would help broaden and make more effective efforts to support the role of fathers in families.

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## II. THE CURRENT DHHS STRATEGY

The DHHS strategy to strengthen the roles of fathers in families has already begun. The development of the President's welfare reform agenda, the leadership of the Vice-President in articulating concern about the need to promote fathers' involvement with their children, and the commitment of the Secretary and Deputy Secretary to improve the life-chances for all children have given the Department a head start in our efforts.

In the development of the President's welfare reform proposal, the Work and Responsibility Act of 1994, the Working Group on Welfare Reform, Family Support and Independence considered many proposals that were designed to help reinforce parental responsibility and to provide opportunities to fathers so they could better fulfill their responsibilities and thereby improve the well-being of their children.

In addition to a broad array of child support reforms promoting parental responsibility, the President's proposal provided grants for state access and visitation programs, permitted states to run job training and work programs for fathers whose children were receiving Aid to Families with Dependent Children (AFDC), gave states options to make changes or eliminate the 100 hour rule, the 30-day unemployment requirement, and work history test, and increased state flexibility with regard to rules counting stepparent income. Many of these proposals have been included in the welfare reform legislation now being considered by the Congress. Additionally, the Department has moved forward using waiver authority in the Social Security Act to increase state flexibility in operating AFDC and the Child Support Enforcement Programs.

Like Vice-President Gore, Secretary Shalala and Deputy Secretary Broadnax have reinforced the Department's commitment to fathers by publicly identifying the need for parents to behave responsibly toward their children and by identifying father absence as one of the significant social tragedies of the day. The Secretary and the Deputy Secretary have given speeches, written articles and met with a wide range of citizens to show their support for fatherhood and responsible fathering.

In fiscal year 1995, the Department implemented a series of projects that substantially increased its efforts to strengthen father involvement in children's lives. Each of these activities provides insights into how the Department can build a comprehensive strategy within DHHS that acknowledges fathers as critical partners in increasing child well-being and provides support to fathers to achieve that goal.

#### **Promoting Child Health Through Father Involvement:**

##### **Prevention Strategies for Fathers**

###### *The National Immunization Program*

In the past, public health education efforts having to do with early childhood issues have been targeted primarily to mothers. However, the Department has broken new ground by explicitly targeting messages about child immunization needs directly to fathers. The Centers for Disease Control and Prevention initiated a project that educates fathers of children ages zero to two years about the need to improve infant immunization coverage levels in the United States. Using written materials and visual images, this program seeks to educate fathers about how to protect their children's health. The program begins in October 1995, and targets at least 4 million fathers and mothers with young children.

###### *Community-Based Strategies for Violence Prevention*

The National Center for Injury Prevention and Control at the Centers for Disease Control and Prevention supports programs designed to develop effective methods of preventing injuries and deaths due to interpersonal and suicidal violence. Through community demonstration programs, CDC is working to (a) identify successful methods for delivering violence interventions at the community level, (b) determine if multifaceted community programs can reduce rates of violent behavior, injury and death associated with violence, and (c) build the capacity or ability of state and local community agencies and organizations to successfully deliver violence interventions. CDC's activities in violence prevention support the role of fathers by 1) helping young boys and adolescent males (potential fathers) acquire prosocial (non-violent) behavior patterns, 2) developing effective interventions which reduce levels of violence in families and communities, thereby decreasing childhood exposure to violence and victimization (a major risk factor for later violent behavior), and 3) seeking ways to reduce the number of violence-related injuries and deaths, in order to maximize potential economic productivity among young males.

**Promoting Father Involvement in Care of Children:****Including Fathers in Early Education and Child Care***Conference Sessions on Father Involvement*

The Child Care Bureau within the Administration for Children and Families convened a session on father involvement at the 1995 Infant Toddler Child Care Institute for State Administrators. In addition, sessions on promoting father involvement in child care are planned for the 1996 Leadership Forum on Parent Involvement and Family Support in Child Care. These sessions will be offered to increase the degree and quality of fathers' involvement in their children's early education and care activities. Children benefit from interactions with their fathers from very young ages. These conference sessions provide valuable information for state child care administrators about how to encourage such involvement.

Linkages between child care and child support were addressed at the "Child Care for the 21st Century: A Planning Conference for State Administrators" in September 1995. The Child Care Bureau staff and the Office for Child Support Enforcement staff made presentations to state child care administrators about the challenges of collaboration.

*Article on Father Involvement in the July/August 1995 Child Care Bulletin*

The purpose of this article, entitled "Fatherhood Project," was to increase the quality of fathers' involvement in their children's early education and care activities. The article helped to publicize the general notion of the importance of father involvement in early childhood development as well as provide authoritative information on this subject to the general public.

**Promoting Intensive Interventions for the Most Vulnerable Fathers:****Responsible Fatherhood Models, Demonstrations, and Evaluation**

Some fathers have no role models for fathering, lack adequate economic resources, and have few community and social supports for taking on the responsibilities of parenthood. In FY 1995, the Department has continued to identify innovative ways to promote responsible parenting among fathers who are themselves in need of intensive services and support.

*The Responsible Fatherhood Demonstrations*

The Administration for Children and Families has provided grants to five communities for projects designed to strengthen the role and parenting abilities of fathers. The demonstration projects will help fathers define their roles within their families, teach them how to understand their children's development and needs, and how to positively affect their children's behavior. The five selected projects are the Addison County Parent Child Center (Vermont), Wishard Memorial Hospital (Indiana), St. Bernardine's Head Start (Maryland), and Responsible Fatherhood Replication Projects in Washington, D.C. and San Diego, California.

*Opportunities for Intervention*

The Department has supported development of a set of working papers on responsible fatherhood. These papers will identify opportunities, develop sound theories, and provide guidance on ways to focus

program resources on this issue. The papers will identify appropriate ways of increasing paternal involvement that promote the well-being of children and are consistent with the mission of each program or service. This project is a collaboration between the Administration for Children and Families and the Office of the Assistant Secretary for Planning and Evaluation.

### *The Responsible Fatherhood Evaluation Design Project*

The Office of the Assistant Secretary for Planning and Evaluation, in conjunction with the Administration for Children and Families and the Ford Foundation, has funded an evaluation design project to determine how intensive intervention projects for vulnerable fathers can be evaluated. Using existing programs and programs funded by the Administration for Children and Families and the Ford Foundation, the evaluation design will identify appropriate outcome measures and data collection strategies for these community-based projects.

### **Promoting Responsible Parenting when Parents Live Apart:**

#### **Working with Non-custodial Parents**

##### *Work and Training Programs for Non-custodial Parents*

**Section 1115 Waivers.** Through the welfare reform demonstration process, the Department may allow state welfare agencies to serve unemployed non-custodial parents of AFDC children (overwhelmingly fathers) in their Job Opportunities and Basic Skills (JOBS) training programs. In FY 1995, the following states requested and received demonstration waivers under section 1115 of the Social Security Act to provide JOBS services to non-custodial fathers of AFDC children: Delaware, Maryland, Mississippi, New York and South Carolina. Prior to FY 1995, eight additional states received approval for demonstrations to test the effectiveness of employment services for AFDC fathers: Florida, Illinois, Missouri, Michigan, Minnesota, Utah, Wisconsin, and Wyoming. Recently the Department published guidance, in response to the President's directive, announcing that it would approve such demonstrations within 30 days of application.

**Government Performance and Results Act Demonstration Projects:** The Office of Child Support Enforcement approved projects in Arkansas and Illinois to provide employment counseling and services to unemployed non-custodial parents. These projects differ from the section 1115 waiver projects in that the state child support agency acts as the direct referral agent for the fathers and services are not limited to fathers of AFDC children.

**Evaluation of the Parents Fair Share Demonstration:** The Parents Fair Share Demonstration (PFS) is a test of employment and training services, peer support, enhanced child support enforcement and mediation services for unemployed noncustodial parents whose children receive AFDC. The Department has continued its ongoing commitment to evaluate PFS and to provide technical assistance to the program sites. Currently, the seven selected sites, located in Michigan, Ohio, New Jersey, Tennessee, Massachusetts, Florida and California, are randomly assigning new enrollees into treatment groups and control groups. This evaluation design will produce credible results about the impact of these programs on fathers and their children. The PFS demonstration and evaluation is a result of collaboration among three federal departments (DHHS, Department of Labor, and United States Department of Agriculture) and between a DHHS operating division (Administration for Children and Families) and a staff division (Office of the Assistant Secretary for Planning and Evaluation), all working in partnership with a private research firm and several philanthropic foundations. DHHS is the lead federal agency in the PFS collaboration.

### *Customer Service*

**Establishment of a Division of Consumer Services:** The Office of Child Support Enforcement (OCSE) has established a new division responsible for consumer affairs in support of the nationwide Child Support Enforcement Program. Under the mandate of this office, both fathers and mothers are considered consumers of child support enforcement services. Fathers' focus groups and fathers' advocates are now included in the groups with whom OCSE is consulting to further develop its program and policies. In addition to this new division, fathers' groups have a focal point in a special assistant to the deputy director of OCSE. The June 1995 Child Support Report, published by the Division of Consumer Services, was devoted entirely to articles about fathers.

**Developing Strategies with States:** OCSE, through its Customer Service Division, is working with state child support directors on two joint ventures. A Customer Satisfaction Survey workgroup is identifying clusters of questions regarding custodial and non-custodial parents' interaction with the child support system. A Coalition Building Campaign workgroup has been formed to improve relationships with external organizations, including men's groups, in an effort to educate individuals about child support and parental responsibility.

**Ad Council Campaign:** OCSE is working with the Ad Council to develop a campaign to increase child support compliance. The campaign is intended to reinforce the important emotional and financial role that non-custodial parents play in their children's lives. Focus groups are being used to help develop the appropriate message.

**Minnesota GPRA Grant:** The State of Minnesota has been awarded a Government Performance and Results Act grant from the Office of Child Support Enforcement to study fathers that are behind in paying their child support. For the first time, fathers will be asked to identify the reasons that they are not paying child support as ordered by the courts or through an administrative process. Most of what we now know about non-payment of support comes from analysis of parent characteristics from large scale surveys and/or reports by mothers about fathers' behaviors.

### *Survey Data on Custodial Fathers*

The Current Population Survey Child Support Supplement is the major survey data source for information about children who do not live with both of their parents. The survey was recently expanded to include information on the 1.5 million fathers that have custody of their children. The survey also includes new information on the custody and visitation patterns of parents who do not live with their children. Previously, custody and visitation information was only available for families with child support awards. The Bureau of the Census conducts the survey and publishes the report. The survey is paid for by the Office of Child Support Enforcement/ Administration for Children and Families. The report based on this new information was issued in August 1995.

### *Effects on Child Well-Being*

The Office of the Assistant Secretary for Planning and Evaluation has funded a research project to analyze data from the Survey of Income and Program Participation to determine how continued involvement by non-residential fathers in the lives of their children affects child well-being. The project also will produce a literature review on father involvement and child well-being.

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### **III. THE DHHS REVIEW PROCESS AND ITS RESULTS**

In August 1995, the Secretary established a working group comprised of senior officials from all DHHS operating and staff divisions to undertake a thorough inventory of all Department programs and policies that affect fathers. Representatives from the following offices participated: Assistant Secretary for Planning and Evaluation, Assistant Secretary for Management and Budget, Executive Secretariat, Assistant Secretary for Personnel Administration, Assistant Secretary for Public Affairs, Office of the General Counsel, Office of Inspector General, Office for Civil Rights, Administration on Aging, Administration for Children and Families, Health Care Financing Administration as well as the various divisions in the Public Health Service, including Office of Population Affairs, Health Resources and Services Administration, Indian Health Service, Office of Minority Health, Centers for Disease Control and Prevention, National Institutes of Health, Food and Drug Administration, and Substance Abuse and Mental Health Services Administration.

The purpose of the Department Working Group was to gain an overview of what DHHS is already doing to support fathers, to build a knowledge base about the kinds of efforts that help fathers and families, to seek to expand and enhance current HHS activities, and to develop new efforts and initiatives that address the identified gaps.

The principal vehicle for conducting the review was a questionnaire designed to collect information about programs and projects that currently provide services to fathers and/or could be used to promote more effective fathering. The questionnaire also asked respondents to indicate barriers to serving fathers and assistance that the Department or Administration could provide. A copy of the review questionnaire can be found at Appendix A.

The Department Working Group met weekly to assess the progress of the review and to make recommendations. Agency work groups also met to discuss the review process and to identify future actions and approaches for the consideration of the Department Working Group. Four broad functional areas were identified to help structure the review and report development process. These functional areas were Program, Research, Communications, and the DHHS Workforce. The working group developed strategies for promoting the needs and interests of fathers in each of these areas.

The review process resulted in the identification of more than 60 specific programs or activities that currently serve fathers or could be used to assist fathers in strengthening their roles in families. This compendium was distributed to all working group members and formed the basis for much of the discussion at the weekly working group meetings. This compendium also forms the basis for much of the Department's plans for future collaborations. Appendix B contains the table of contents from the DHHS compendium.

The remainder of this section of the report highlights some of the many ongoing projects for and about fathers identified in the review.

#### **Program Activities**

##### **Adolescent Family Life Program**

The Office of Population Affairs conducts the Adolescent Family Life Program (AFL) to develop and implement new approaches in the delivery of medical, social and educational services to pregnant adolescents, adolescent mothers and fathers, their infants, and families. Some programs provide services specifically to young fathers, such as job skills training, parenting skills and personal counseling. The program also supports the development of curricula and educational strategies to prevent early sexual involvement and pregnancy. The Adolescent Family Life program, Title XX of the Public Health Service Act, was enacted in 1981, the first demonstration projects began in FY 1982. The Adolescent Family Life program was funded at \$67 million in FY 1995.

#### **Title X - Family Planning Program**

The Title X Family Planning program, operated by the Office of Population Affairs, supports the provision of reproductive health, family planning, information, and education services. It has also undertaken a variety of joint programs with organizations offering non-health related services to young men. One example is a joint venture between the Title X program and the Texas Education Foundation, a Job Corps Center. The goal of this and other programs is to develop a coordinated approach for providing work and training services, education, and information on responsible fatherhood, including the importance of postponing sexual activity and fatherhood until men are ready for the responsibility of parenthood.

#### **Community Health Centers**

The Bureau of Primary Health Care within the Health Resources and Services Administration (HRSA) administers the Community Health Center program and awards grants to provide basic primary health care services to medically underserved, disadvantaged populations. In FY 1995, there were 7.5 million males between the ages of 15 and 45 enrolled in community health center primary care programs. The FY 1995 appropriation was \$700 million.

#### **Healthy Start**

The Health Resources and Services Administration (HRSA) funds Healthy Start projects to support family-centered, community-based approaches to service delivery. Fifteen Healthy Start projects conducted comprehensive planning activities in FY 1992. Program implementation of services began in FY 1993. Seven additional special projects were funded in October of 1994. All twenty-two projects have programs that support fathers. The inclusion of fathers is encouraged and promoted in all project activities ranging from prenatal care to parenting. Specialized projects such as male support groups and male-only clinics are offered by some sites and they have significantly increased father involvement in perinatal care. For example, the Middle East Baltimore Healthy Start features a men's services program to help expectant fathers learn to be role models for their children and to contribute to their community. The program provides fathers with mentors, job and parenting training, housing, and substance abuse treatment and referral. In FY 1995, the Healthy Start program was funded at \$105 million.

#### **Special Projects of Regional and National Significance**

The Maternal and Child Health Bureau within HRSA administers a program of discretionary grants for Special Projects of Regional and National Significance (SPRANS). Among the activities funded by SPRANS are grants for technical assistance to regional coordinators to assist communities in forming father support groups. These groups in turn comprise a national network of fathers, some of whom have participated at the local, state and national level. Networking is maintained through a national newsletter. Two publications and articles on father support groups were produced. More recent efforts have centered

on African American fathers, and fathers of children with HIV or AIDS. A video on the feelings of African American fathers about the public health system was jointly produced through subcontracts with another grantee.

#### **Cooperative Agreement for Family and Community Violence**

This effort is funded through a multi-year cooperative agreement with a consortium of Historically Black Colleges and Universities. The Office of Minority Health is the lead agency coordinating this program. The cooperative agreement is based on the establishment of Family Life Centers on the campuses of these institutions to design, implement and test a series of comprehensive community-based models to decrease domestic violence by strengthening families. In addition, research activities will be expanded and an information clearinghouse will be established. The program, which began in 1994, is currently giving support to fathers through intervention techniques and research on the breakdown in family structures, alcoholism and drug abuse, educational deficiencies, poverty, crime and violence. The total cost for the program in FY 1995 was \$5.9 million.

#### **Mental Health and Substance Abuse Demonstrations**

The Substance Abuse and Mental Health Services Administration (SAMHSA), through its three Centers (Center for Mental Health Services, Center for Substance Abuse Prevention, Center for Substance Abuse Treatment), places high priority on the entire family, including non-custodial parents and other caregivers whenever feasible, in its programs serving children and adolescents. The Center for Mental Health Services carries out this policy through the demonstration and services programs of its Child, Adolescent and Family Branch by promoting and supporting family-centered systems of care.

#### **Discretionary Grants for Intergenerational Activities**

The Administration on Aging funded demonstration projects to encourage national organizations to develop and implement intergenerational and multigenerational programs to assist at-risk families. Although none of the projects focused specifically on fathers, in several of the projects fathers and grandfathers caring for children benefitted from efforts to empower families and connect them with resources.

#### **Head Start Male Involvement Demonstration**

In FY 1991, the Administration on Children, Youth and Families in ACF funded six Male Involvement Demonstration projects to increase the involvement of men - fathers, grandfathers, uncles, friends, and significant others - in the lives of Head Start children. These projects provided information on the incidence of male participation, successful strategies, approaches for maintaining interest in the program, and indications of the impact this involvement had on children and other family members.

#### **Male Responsibility: Lifepower Program**

The Substance Abuse and Mental Health Services Administration provides through the Center for Substance Abuse Prevention a grant to the Detroit Urban League to conduct the Male Responsibility Lifepower Program (MRP). MRP uses the rites of passage model to increase the sense of social responsibility of African American males aged 9 to 18. In addition to counseling, training, and educational components, the program offers the male responsibility curriculum which examines negative behaviors in the context of African American values, history, and traditions. The youth participate in community service projects, support groups and operate a telephone "male line." The program's success is attributed

to, among other things, the regular use of successful African American men as positive role models. The FY 1995 grant amount was \$401,681.

## Research and Demonstration Activities

### Demographic and Behavioral Research

The National Institutes of Health (NIH) collect demographic and behavioral data from fathers that increase our understanding of family dynamics and inform decisions by policy makers and service providers on how to support fathers and strengthen families. The primary institutes involved in father-specific research within NIH are the National Institute of Child Health and Human Development (NICHD), the National Institute on Drug Abuse (NIDA), the National Institute of Mental Health (NIMH), and the National Institute on Alcohol Abuse and Alcoholism (NIAAA).

**The National Survey on Males:** NICHD has supported the development of The National Survey on Males which will provide groundbreaking information on the sexual and contraceptive behaviors of young men. This survey extends prior research with the National Survey of Adolescent Males (NASM) project which surveyed a nationally representative household sample of never-married adolescent males ages 15 - 19. Analyses of these data have examined how behaviors that lead to early parenthood vary in relation to the types of relationships (casual vs. committed) that young men form as teenagers.

**Chinese American Fathers With Children With Mental Retardation (MR) or other Developmental Disabilities (DD):** This study, also conducted by NICHD, focuses on the beliefs, values and attitudes of Chinese Americans, one of the most rapidly growing segments of the US population. The study compares childrearing attitudes and practices of Chinese American fathers with or without a child with a disability. These data will be compared with data on the traditional values of mainland Chinese fathers. Chinese American fathers were included in focus groups that determined the design and selection of culturally selected instruments.

Additional research efforts at NICHD include topics such as the effects of the economic, social and physical environment on the psychological development of infants and toddlers from a variety of family backgrounds, the effects of domestic violence on children, fathers' roles in child support, the behavior of fathers related to family demography, determinants of marriage and the growth of non-marital cohabitation, and determinants of early and non-marital fatherhood. Approximately \$10.7 million is spent on studies that directly target fathers and fatherhood.

**Paternal Drug Abuse:** NIDA supports research efforts that examine the role of men as fathers within the family unit and the effects of paternal drug use on their children's drug use. In addition, research efforts focus on the development and evaluation of comprehensive drug abuse treatment programs that are family focused and that benefit the children as well as their fathers and their mothers.

**Fatherhood and Paternal Behavior in Humans:** NIMH conducts basic behavioral research that focuses on the contributions of family life to mental health and well-being and frequently includes assessments of these paternal roles in order to determine how variations in paternal functioning affect adjustment of family members, including the father. In addition, other grants explored the more general effects of paternal interactions (either father, mother, or both) on family members and family function.

**Paternal Alcohol Abuse:** NIAAA conducts research on family interactions and parenting behaviors that may affect children's drinking and other high-risk behaviors that may place the children at risk for abusing

alcohol Studies are also conducted on the etiology of alcohol use in the family, patterns of inheritance, and the psychosocial influences of parental behaviors on their children

### **Office of Child Support Enforcement Paternity Establishment Projects**

The Office of Child Support Enforcement has approved projects in several states to test methods for improving paternity establishment rates. In **Colorado**, the Denver County demonstration tested two service delivery innovations. The Paternity Innovation project designed and established a paternity outreach program allowing voluntary acknowledgments of paternity in various Denver hospitals serving unmarried pregnant and newly delivered girls and women. The Night Unit Innovation project created a night services unit to provide paternity establishment and enforcement services after regular working hours in Denver city and county. A second Colorado project is building on the pilot to develop training programs for hospitals and to conduct outreach to the never-married population. In **Missouri**, the state is working with other government agencies, the schools, churches, and community organizations to reinforce the message that fathers should establish paternity and take responsibility for their children. **New Jersey** is developing an electronic model of paternity affidavits and is increasing its provision of information about paternity establishment. The **District of Columbia** is mounting a city-wide campaign to educate government agencies, health care providers and the media about the importance of paternity establishment.

### **Section 1115 Welfare Reform Waivers**

**Demonstrations Expanding Aid to Families With Dependent Children - Unemployed Parent Program Eligibility** Currently over half of the states have approved welfare reform waiver demonstrations to test the effectiveness of allowing more low-income, unemployed two-parent families to receive assistance until they are able to sustain themselves. The purpose of this activity is to allow state welfare agencies to expand eligibility for AFDC-UP benefits (i.e., cash welfare payments for two-parent families) by (1) not applying the regular definition of an unemployed parent or of a principal wage earner, (2) not requiring the applicant to be unemployed for 30 days prior to the receipt of aid, and/or (3) not applying the usual work quarters or unemployment compensation requirements. These demonstrations are designed to strengthen low-income two-parent families and reduce incentives for fathers to leave the family.

The twenty-six states with waivers under section 1115 of the Social Security Act to expand AFDC-UP eligibility are: Alabama, Arizona, California, Connecticut, Delaware, Florida, Iowa, Illinois, Indiana, Maryland, Mississippi, Missouri, Michigan, Montana, Nebraska, New York, North Dakota, Ohio, Oregon, Oklahoma, Pennsylvania, South Carolina, Utah, Vermont, Washington, and Wisconsin.

**Waiver Approval to Provide Funding for Access and Visitation Services** Michigan has received a waiver under section 1115 of the Social Security Act that allows the state to claim federal Child Support Enforcement matching funds for custody and visitation services provided through the Michigan Friend of the Court system. The Friend of the Court system operates the state child support system and historically has provided child support and custody and visitation services within the state court system.

**Medicaid Waiver Demonstrations:** Under section 1115 waiver authority, the Secretary can give States substantial flexibility to cover new populations under Medicaid, experiment in innovative delivery mechanisms, and implement managed care without some of the requirements of the traditional Medicaid managed care program. Until 1993 Arizona was the only state with a comprehensive demonstration project (operational since 1982). Since 1993, thirteen States have received section 1115 waivers to change the way their Medicaid programs are structured. Eleven of the thirteen states have used the

waiver program to expand eligibility for families

## **DHHS Work Force Activities**

### **Definition of Family Members**

DHHS employs one of the broadest definitions of family of all of the federal departments. The definition of family member for purposes of leave administration (including leave transfer and leave under the provisions of the Family and Medical Leave Act) and for Employee Assistance Program services is as follows:

Family member means the following relatives of the employee: (a) spouse, and the parents thereof, (b) children, including adopted children and spouses thereof, (c) parents, (d) brothers and sisters, and spouses thereof, and (e) any individual related by blood or affinity whose close association with the employee is the equivalent of a family relationship.

### **Employee Assistance Program**

The Department's Employee Assistance Program (EAP) was established in 1979. Services are available to all HHS employees and include short-term problem-solving, assessment, referral to community treatment sources (if needed), and follow-up. Utilization rates have ranged from just under 4% to around 5% over the life of the program, rates that are well within the industry standard.

While some EAPs limit their services to the provision of assessment and referral for treatment of alcohol or drug-related cases, the Department's EAP has from the beginning assisted employees with any kind of personal problem. In FY 1994, the primary problem presented in 26% of the cases was classified as "family/marital," but it is safe to assume that family issues are involved in many of the cases classified in other categories (e.g., mental health, drugs, alcohol) as well.

Brown bag lunches and other educational forums are sponsored by the EAP on a variety of topics, many of which directly relate to strengthening family life. In the past, these have included seminars on parenting, formation of support groups for single parents, and eldercare fairs.

### **Family-Friendly Workplace Initiative**

Over the past ten years, DHHS has implemented various family-friendly initiatives. The purpose of this effort is to assist employees in achieving a healthy balance between work and family life. Initiatives that support fathers (as well as other employees with dependents) include the use of flexible work schedules and sites, leave programs (leave sharing, leave banks, leave for medical conditions and family responsibilities, and using sick leave to care for a sick family member), and job sharing.

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## **IV. NEXT STEPS: THE DHHS RESPONSE TO THE PRESIDENT'S INITIATIVE TO STRENGTHEN THE ROLES OF FATHERS IN FAMILIES**

### **Establishment of the Departmental Work Group**

Secretary Donna E. Shalala has established, as a formal DHHS entity, a Work Group to oversee, implement, and make additional recommendations regarding the Department's response to President Clinton's fatherhood initiative. This body, which will have representatives from all operating and staff divisions, will be chaired by Deputy Secretary Walter Broadnax. The Work Group will continue the activities established to facilitate the review of Departmental programs under the President's initiative.

The Work Group will strive to make the issue of supporting fathers a pervasive part of the entire DHHS planning and evaluation process. As demonstrated in the previous sections, the Department already has a successful strategy underway that will be expanded to encompass all Departmental programs and activities. The initial review identified the need to build bridges among programs and activities that help strengthen fatherhood and foster father involvement. The establishment of a formal Work Group is critical in continuing the momentum and implementing ideas that were generated over the past two months. The Work Group has four goals.

### **Goal #1**

*DHHS will coordinate a comprehensive program strategy to strengthen health promotion, disease prevention and treatment, human development and welfare services for fathers and children through. (1) increased collaboration across agencies to focus resources and target specific fathering opportunities, (2) development of program improvements that enhance fathers' involvement in DHHS programs; (3) improved customer service, (4) greater visibility of father issues at national conferences and training events; (5) an extended review that goes beyond the initial review of the department's programs to examine DHHS statutory provisions, regulations, and administrative requests, and (6) the development and incorporation of agency-specific father involvement performance measures.*

### **Goal #2**

*DHHS will implement a research strategy that ensures that its research efforts appropriately investigate the roles of fathers in families and the effects of fathering on child well-being. The Department will also help inform broader government research collaborations on the importance of including research on fathers and fathering.*

### **Goal #3**

*DHHS will use positive, supportive messages and language regarding fathers and fatherhood in all relevant publications and announcements.*

### **Goal #4**

*DHHS will ensure that the workplace is supportive and responsive to the needs of all employees, including fathers, raising children.*

## **Next Steps: The Program Strategy**

*DHHS will coordinate a comprehensive program strategy to strengthen health promotion, disease prevention and treatment, human development and welfare services for fathers and children.*

### **Strengthen Agency Collaborations**

The Work Group will provide ongoing leadership on fatherhood issues by reviewing and supporting inter-agency collaborative efforts. These collaborations will include, but not be limited to, the following agencies -- the Administration for Children and Families, Office of Population Affairs, Indian Health Service, Health Resources and Services Administration, Substance Abuse and Mental Health Services Administration, Centers for Disease Control and Prevention, Administration on Aging National Institutes of Health, Office of Minority Health, and the Health Care Financing Administration. The Work Group will also work with cross-program initiatives, such as the Secretary's Governing Council on Children and Youth and the Violence Against Women Steering Committee. The Work Group will meet on a regular basis to ensure that agencies are aware of fatherhood projects throughout the Department and to provide guidance to agencies for pooling resources to develop innovative approaches to serve fathers.

### **Establish Discussion Forums**

The Work Group will organize discussion forums on fatherhood to stimulate and share ideas on how DHHS can better serve fathers. The initial series of discussion forums will focus on strengthening fathering for certain groups of children: infants and toddlers, preschool and early elementary, middle school and adolescents, and children with special needs. Other discussion forums will examine the needs of special groups of fathers: young fathers, low-income fathers, non-custodial fathers, never-married fathers, divorced fathers, minority fathers, and aging fathers. The forums will include distribution of program descriptions, presentations by DHHS program staff and program providers, and discussion about joint strategies that could be developed by programs to strengthen father involvement.

### **Initiate Program Improvements**

DHHS believes that all of our programs and policies should be sensitive to and supportive of children's need to have their father involved in their lives and activities. DHHS will strive to ensure that programs serving families welcome and expect father participation. Examples of the types of program improvements DHHS will implement to improve fathers' access to programs include the following:

**Distribute Handbook on Parent Involvement** DHHS will widely distribute the "Head Start Handbook of the Parent Involvement Vision and Strategies: Valuing the Involvement of Parents." The handbook includes specific strategies for local Head Start programs to meaningfully involve fathers and is a response to the recommendations of the Advisory Committee on Head Start Quality and Expansion to "encourage male involvement in Head Start programs."

**Enhance Services for Never-Married Fathers** The Administration for Children and Families will take the lead in testing and recommending policies to improve contact between never-married fathers and their children. The Parents Fair Share demonstration includes a test of peer support services which aim to teach fathers the importance of being involved with their children and to help them develop the skills to support their children emotionally. The Office of Child Support Enforcement is currently funding a demonstration in Arkansas in which fathers that acknowledge paternity receive services, such as job training, mediation, and substance abuse treatment. An Illinois demonstration is evaluating different methods for increasing the employment of non-custodial, unemployed fathers. The Administration for Children and Families' Responsible Fatherhood projects will help increase the Department's understanding of the various types of services that can improve fathers' interactions with their children, especially when fathers and children do not live in the same household. The Administration for Children and Families will work closely with the Work Group to build on the results from these and other current ACF demonstrations to determine the most effective methods for promoting positive and healthy relationships.

between never-married fathers and their children

**Enhance Child Access and Visitation for Non-Residential Fathers** The Office of Child Support Enforcement will take the lead in assisting states and providing technical assistance to improve child access services and father-child relations. Planning is already underway to develop the implementation plan for the visitation and access state grant program included in the congressional welfare reform proposals. These grants provide significant flexibility for states to consider what types of services could best enhance the development of a strong parent-child relationship and facilitate the team approach to parenting, even by parents who live apart. Additionally, the final report of the U.S. Commission on Child and Family Welfare will be released in FY 1996. The Work Group, in concert with OCSE, will review the final recommendations of the Commission to determine if there are recommendations to improve and strengthen father involvement that the Department can help implement. Lastly, the Work Group is interested in identifying and removing barriers that prevent non-residential fathers (and mothers) from participating fully in the lives of their children. For example, access to medical records and information from children's doctors is often denied to parents unless there is joint legal custody. Discussions with the legal and medical communities will be pursued to determine if there are ways of facilitating a freer flow of information between the non-custodial parent and service providers.

**Promote Economic/Job Support for Fathers** The Office of the Assistant Secretary for Planning and Evaluation and the Administration for Children and Families will monitor and disseminate the results from states' welfare reform efforts to develop innovative work and training programs for low-income fathers as well as continue to support the Parents Fair Share evaluation. In addition, the Work Group will examine and promote methods to support the ability of low-income fathers to provide economically for their children in ways that do not undermine family stability.

**Expand Health Prevention Programs and Health Services:** The Work Group will work with Public Health Service agencies to expand father involvement in health promotion, disease prevention, and treatment programs, such as family planning, fetal alcohol syndrome prevention, birth defect prevention, substance abuse prevention and treatment and children's mental health. The Work Group will identify ways to make health clinics and social service offices more inviting, accessible and comfortable for male clients.

The Substance Abuse and Mental Health Services Administration, through its three Centers (Center for Mental Health Services, Center for Substance Abuse Prevention, Center for Substance Abuse Treatment), will undertake to further enhance the role of fathers and other male caregivers in planning for and carrying out its projects. For example, the Center for Mental Health Services' Child, Adolescent and Family Branch will target outreach to fathers and other male caregivers.

**Promote Intergenerational Services:** The Work Group and the Administration on Aging will communicate with DHHS agencies and other departments about the need for an intergenerational focus in programs serving families. There are a growing number of families where grandparents have the primary childrearing responsibility for their grandchildren. The Administration on Aging will publicize the grandparenting resolution from the 1995 White House Conference on Aging which encourages support services for grandparents who are raising children.

## **Improve Customer Service**

**Fathers as Customers:** The Work Group will explore and make recommendations on improving customer service for fathers in DHHS' programs. The Office of Child Support Enforcement's Customer

Service Division will develop a customer satisfaction survey of custodial and non-custodial parents and will seek input from fathers' groups in the design and implementation of proposed changes to the child support enforcement system, including the national guidelines commission, increased enforcement efforts, the child access and visitation grants, and proposed changes to the review and modification of child support orders. The Health Care Financing Administration will conduct a Medicaid Customer Focus Group to provide more input from beneficiaries, including fathers, into the development of Medicaid policies. The Work Group will provide assistance to these and other agencies using customer satisfaction focus groups, surveys, and other mechanisms to ensure that fathers' issues and input are included in policy formulation.

**Helping Mothers to Support Fathers:** Some program reviews and research studies have indicated that impediments to involving fathers include the attitude and resistance of mothers. The Work Group will develop strategies for informing mothers as well as fathers about the importance of working together as parents for the well-being of their children and to help mothers understand the positive effect that paternal involvement has on children's growth and development.

### **Promote Fatherhood at National Conferences and Staff Training**

DHHS will promote the importance of including father issues and concerns in the agendas of national conferences and government training events. Currently, the Child and Family Well-being Research Network is planning a research and policy conference on fathers for the fall of 1996 with funding support from the National Institute for Child Health and Human Development. Other conference opportunities will be identified and developed. The Office of the Assistant Secretary for Planning and Evaluation will take the lead in maintaining and sharing information on various fathers' groups, researchers, and advocates. In addition, DHHS will examine whether specific staff training is needed for various DHHS programs to support and expand father involvement.

### **Extend Review of DHHS Policies and Programs**

The Work Group will coordinate an extended review of all HHS statutory provisions, regulations, administration requests, directives, special initiatives and demonstrations to examine policies and language used to support or impede fatherhood. The initial in-depth review of DHHS programs effectively identified current activities supporting father involvement and highlighted the need for additional activities. DHHS found that more targeted reviews are necessary to ensure that the fatherhood principles underlying this initiative are consistent in the Department's activities. For example, based on results of the initial review, the Office for Civil Rights will update the list of statutes prohibiting discrimination on the basis of sex (see Appendix C). In addition, statutes prohibiting discrimination on the basis of sex will be reviewed to ascertain the degree to which these statutes apply to discrimination against males in general and fathers in particular.

### **Performance Outcomes**

DHHS will assist agencies in developing father involvement performance measures in the areas of program, research, and communications. Because of the diversity of DHHS programs and the populations served by these programs, DHHS will not attempt to develop a Department-wide standard for father involvement. Rather, the Work Group will work with individual agencies to incorporate father-related performance measures that are appropriate to the mission of respective programs.

### **Next Steps: The Research Strategy**

*DHHS will ensure that its research efforts appropriately investigate the roles of fathers in families and the effects of fathering on child well-being and help inform broader government research collaborations on fathers and fathering.*

### **Establish Inter-Agency Research Committee**

DHHS believes that data about fathers can greatly increase our understanding of family dynamics and inform decisions by policy makers and service providers about how we can support fathers and strengthen families. While the Department has several research efforts targeted toward fathers, the review process identified the need for the various research agencies to communicate and collaborate on a regular basis. The Inter-Agency Research Committee, through the Work Group, will be that vehicle. The committee will work on the following two objectives: Improving Research Tools and Expanding the Research Agenda.

### **Improve Research Tools**

Improving basic research tools will promote a better understanding of the roles of fathers and the effects that fathering behaviors have on children, families, and the personal development of fathers. In order to improve research tools utilized throughout the Department, DHHS will undertake three main activities: identify current barriers, examine existing research efforts, and integrate data. Findings and recommendations based on these activities will be made to the Work Group and to the Federal Forum on Children and Family Statistics.

**Identify the Barriers:** The committee will identify the barriers to obtaining information from and about fathers in current research efforts. Both cultural barriers and barriers that stem from current research design issues will be examined.

**Examine existing research efforts:** The committee will examine existing survey research and intensive behavioral studies. This review will identify gaps and best practices in the research questions asked, the methodologies used for collecting information on fathers and fathering, and the evaluations of intervention effectiveness. To avoid duplication, the committee will better disseminate research findings on fathers between DHHS agencies.

**Integrate Data:** The committee will make recommendations on how ethnographic research can be better used and targeted to inform survey and other research results, improve survey research methodology and complement rigorous program evaluations.

### **Expand the Research Agenda**

The research subcommittee will help develop father and fathering research agendas for areas that are of special concern to DHHS programs. These research agendas will be developed and shared with other departments, academia, and foundations. Initial areas of interest include:

- Fathers in the Low-Wage Labor Market:** The effects of unemployment, low skills and weak labor force attachment on fathering behavior (Administration for Children and Families)
- Fathering Special Needs Children:** Supporting fathers and families (National Institutes of Health, Substance Abuse and Mental Health Services Administration)
- Fathers and Children's Health Needs:** Can fathers help children stay healthy? (National Institutes of Health)

- Health/Health Resources and Services Administration/Centers for Disease Control and Prevention)
- Parenting Apart Supporting non-residential fathers (Administration for Children and Families)
- Fathers and the Criminal Justice System Can fathers parent from prison? (Office of the Assistant Secretary for Planning and Evaluation with the Department of Justice)

## **Next Steps: the Communications Strategy**

*DHHS will use positive, supportive messages and language regarding fathers and fatherhood in all publications and announcements.*

**Conduct a Literature Review:** DHHS will conduct a review of various publications by the Department and make recommendations for revision that would strengthen and support good fathering behavior. The review will provide information about the messages that the Department sends out to the public and identify the populations and fathering issues that DHHS does not currently address

**Get the Message Out:** DHHS will continue to promote fatherhood through various public communications mediums DHHS will examine the feasibility of using images of fathers where, traditionally, images of mothers have been used Toward this end, DHHS will work across agencies to supplement existing publications and create new documents that support fathers DHHS will use current programs such as the National Immunization Program to learn how fathers can be used as the target audience for child development campaigns

**Continue Dialogue With Fathers' Groups:** DHHS will continue efforts made through Vice President Gore's office to work in partnership and maintain relationships with groups around the country that are dealing with fatherhood issues The initial meeting for this initiative included representatives from the Families & Work Institute, the Annie E Casey Foundation, the Fatherhood Project, the Father Policy Institute and the Ford Foundation's Urban Poverty Program DHHS will continue this dialogue and acquire input from these and other groups regarding their achievements as well as their barriers to success

**Use Clearinghouses to Coordinate Information Dissemination:** Many programs throughout the department have clearinghouses that act as repositories of information about specific health and social welfare issues, DHHS activities, and targeted clientele These clearinghouses could be important vehicles for disseminating information on fathers and fathering activities that would be useful to program planners and advocates at the local level

**Work with Regional Offices:** DHHS will work with regional offices to encourage partnerships with businesses, religious institutions, and state and local governments to support fathers on the community level While there are a number of programs for fathers on the local level, they are scattered DHHS will take a leadership role to ensure that information and programs that support fathers are coordinated with existing resources

**Utilize the Internet:** DHHS will investigate the feasibility of disseminating information on fathers on the DHHS Home Page and will coordinate the development of DHHS Internet activity relating to fathers The Internet will enable broad dissemination of information relevant to men's issues and provide an opportunity for communication among fathers as well as fathers' groups The Work Group will work with the Child Care Bureau (CCB), which has already begun to identify and post Fatherhood and Men's sites on the World Wide Web CCB is examining the feasibility of adding onto the CCB home page site at the National Child Care Information Home Page site on the web The Office of Child Support Enforcement

and the Office of the Assistant Secretary for Planning and Evaluation have also been using Internet links to provide information to fathers about DHHS activities of interest for fathers

## **Next Steps: The DHHS Workforce Strategy**

*DHHS will ensure that the workplace is supportive and responsive to the needs of employees raising children.*

### **Identify Needs of Employees**

DHHS will identify any workforce issues or needs that may still be unaddressed under current family-friendly workplace policies. An employee survey and focus groups will be conducted to ascertain if differences in workplace needs exist between mothers and fathers and will seek to gain employee suggestions for policy changes. The Office of the Deputy Assistant Secretary for Human Resources (Office of the Assistant Secretary for Management and Budget) has been identified as the lead agency on this project. Examples of the types of issues that will be explored include the following:

- The workforce needs of DHHS parents,
- Participation differences between mothers and fathers in DHHS family policies/ programs. Are men participating in paternity leave and other programs, or does the DHHS culture discourage father participation?
- Differences in manager attitudes regarding mothers and fathers who utilize family-friendly policies,
- Manager and employee attitudes toward the implementation of family-friendly policies and whether specific training could assist staff in adjusting to family-friendly policies

Based on the survey results, DHHS will implement responsible program and policy changes to make the DHHS workforce more responsive to parents' needs. For example, the Department may develop outreach efforts to respond to employee concerns through seminars, written materials, and modify family-friendly policies to better serve fathers and mothers.

### **Expand Volunteer Efforts**

The Office of Minority Health will develop and implement a strategy to encourage more DHHS employees who are fathers to volunteer to assist in programs that directly or indirectly support fathers. One such program is the joint effort between the Washington, D.C. public schools and DHHS to establish the Academy of Health and Human Services program at Eastern High School where volunteers are needed to tutor, serve as role models, and arrange shadow assignments.

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## **V. LEADERSHIP, COORDINATION, AND PROGRAM INTEGRATION**

During the DHHS review process the Working Group identified three essential strategies that require government-wide leadership and coordination. DHHS provides the following suggestions for improving the federal government's efforts to help support men in their roles as fathers:

- An inter-departmental fatherhood committee should be established to coordinate and implement strategies identified in the President's Fatherhood Initiative to ensure that certain issues of importance to fathers that exist across the jurisdictions of individual departments are addressed successfully
- The federal government should make a concerted effort to incorporate more positive messages about fathering into all communications, public relations, and correspondence dealing with family policy matters
- The federal government could help support a national media campaign on positive fathering and the importance of fathers in the lives of their children. This campaign would need to be coordinated with a variety of other national and regional groups promoting increased father involvement in the lives of their children

The DHHS Working Group believes that strong leadership in these areas will help to enhance a culture in the federal government that views fathers as vital contributors to the well-being of their children and that promotes father involvement in government programs and policies

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## Appendix A: Review Questionnaire

### Supporting the Role of Fathers in Families

Agency.

Agency Contact:

Phone/E-mail:

Fax Number:

Program Name:

Catalog of Federal Assistance #:

**Program Type:**(please circle all that apply) special initiative, research project, ongoing (ie.AFDC), grantee's project, government office project, other\_\_\_\_\_

- 1 What is the purpose of the program/activity?
- 2 How does this program/activity support the role of fathers?
- 3 Please indicate the cost of the program and number of fathers served?
- 4 When did you start this program/ activity that supports fathers?
- 5 How does this program/activity differ from your other ongoing departmental programs?
- 6 What are the barriers to providing more support to fathers? For example, is it difficult to engage fathers in your program?
- 7 What additional actions could be taken to support the role of fathers?

8 What possible inter- or intra- agency collaborations might further your program's effort to support fathers?

9 If your agency has targeted fathers in the past, please indicate any lessons learned from those experiences

10 How can the Department or the White House help you in your efforts?

*Please attach additional information (ie. brochures, research/statistical reports) that further describe your program/activity.*

## **Appendix B: Table of Contents/DHHS Review Compendium**

### **1 Assistant Secretary for Planning and Evaluation (ASPE)**

National Evaluation of Preservation Services

National Survey Of Homeless Assistance Providers and Clients

Evaluability Assessment of Responsible Fatherhood Projects

Non-Custodial Parents Participation In Their Children's Lives Evidence From the Survey of Income Program Participation

### **2 Assistant Secretary for Personnel Administration (ASPER)**

Employee Assistance Program

Family-Friendly Workplace Program

Academy Of Health and Human Services (in Partnership with Eastern Senior High School)

Employee Survey

### **3. Office for Civil Rights (OCR)**

Enforcement of Statutes

### **4. Administration on Aging (AoA)**

Discretionary Grants for Intergenerational Activities

Older Americans Act Programs

Family Friends

White House Conference on Aging

### **5. Administration for Children and Families (ACF)**

Parents' Fair Share Demonstration

Responsible Fatherhood projects - program announcement

Responsible Fatherhood Theoretical and Empirical Foundation for Policy and Program Development

Section 1115 welfare reform demonstration waivers

- employment and training for non-custodial fathers of AFDC children
- 30-day waiver approval process for non-custodial parent demonstration proposals
- expanding AFDC - Unemployed Parent program eligibility
- "To Strengthen Michigan Families" project
- Missouri Families-Mutual Responsibility Plan

Conference Session on Father Involvement in Early Child Care

Article on Father Involvement in Child Care Bulletin

Planned Session on Father Involvement in Child Care - 1996

DEAD BEAT DADS into HEART BEAT DADS

Child Care Bureau/Office of Child Support Enforcement Coordination

Planned Activities for Fatherhood initiatives for the Child Care Bureau

Review OCSE policy and programs to support fathers

Modify OCSE to include fathers

OCS/Demonstration Project

Use father involvement in performance and outcome measurement

Head Start Male Involvement demonstrations

ACF region IV - Minority Males Initiative in Head Start

U S Commission on Child and Family Welfare

Family Violence Prevention and Service Grants

## **6. Office of Population Affairs (OPA)**

Adolescent Family Life Program

Title X National Family Planning Program

## **7. National Institutes of Health (NIH)**

National Institute of Child Health and Human Development Research

National Institute of Mental Health Research

National Institute on Drug Abuse Research

National Institute of Alcohol Abuse and Alcoholism Research

## **8. Office of Minority Health**

Minority Male Grant Program

Cooperative Agreement for Family and Community Violence Prevention

## **9. Substance Abuse and Mental Health Services Administration**

Mental Health Planning and Demonstration Projects

Comprehensive Asian Youth Substance Abuse Prevention Project

Dare to be You Community Prevention Program

NTU Project, Progressive Life Center

Hispanic Family Development Project

Shenandoah in Action A Barrio for Drug Free Children

Pregnant and Postpartum Women and Their Infants

Creating Lasting Connections, Council on Prevention and Education

Empowering Families Schools and Communities

Male Responsibility Lifepower Program

Substance Abuse Prevention for High Risk Male Teens

Prevention Through Intervention

Youth Health Services

Families and Schools Together

## **10. Centers for Disease Control and Prevention (CDC)**

National Center for Chronic Disease Prevention

-Nutrition and Physical Activity Communications

National Center for Environmental Health

- Disabilities Prevention Program
- Project BEGIN
- Folic Acid for Prevention of Spina Bifida and Anencephaly
- Prevention of Fetal Alcohol Syndrome
- State and Community-Based Childhood Lead Poisoning Prevention Program
- Healthy Communities, Healthy Homes, Healthy People

National Immunization Program

National Center for Injury Prevention and Control

-Division of Violence Prevention

## **11. Health Care Financing Administration (HCFA)**

Medicaid Bureau Customer Focus Group

Medicaid Section 1115 Waivers

## **12. Health Resources and Services Administration (HRSA)**

Hill-Burton Program

Organ Transplantation Program

Titles I and II of the Ryan White CARE Act

Special Projects of National and Regional Significance

Children with Special Health Care Needs

Community Integrated Service Systems

Emergency Medical Services for Children

Healthy Start

National Family and Domestic Violence Prevention Meeting

## **13. Indian Health Service**

Comprehensive Health Delivery System

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## **Appendix C: Office For Civil Rights**

The statutes which the Office for Civil Rights of the Department of Health and Human Services enforces

which clearly prohibit sex as a basis for discrimination

- Title IX of the Education Amendments of 1972, 20 U S C 1681, 45 C F R Part 86,
- Sections 794 and 855 of the Public Health Service Act, 42 U S C 295m and 298b-2, 45 C F R Part 83,
- Section 508 of the Social Security Act (Maternal and Child Health Services Block Grant), 42 U S C 708;
- Section 533 of the Public Health Service Act (Projects for Assistance in Transition from Homelessness), 42 U S C 290cc-33,
- Section 1908 of the Public Health Service Act (Preventive Health and Health Services Block Grant), 42 U S C 300w-7,
- Section 1947 of the Public Health Service Act (Community Mental Health Services and Substance Abuse Prevention and Treatment Block Grant) 42 U S C 300x-57,
- Low-Income Home Energy Assistance Act of 1981, 42 U S C. 8625,
- Community Services Block Grant Act, 42 U S C. 9906,
- Family Violence Prevention and Services Act, 42 U S C 10406, and
- Equal Employment Opportunity Provisions of the Communications Act of 1934, as amended by the Public Telecommunications Financing Act of 1978, 47 U S C 398
- OCR also enforces Titles VI and XVI of the Public Health Services Act, 42 U S C 291 et seq , 42 C F R Part 124, Subpart G, (Community Service obligations of Hill-Burton facilities) This statute requires a facility to make services available to all persons living or employed in its service area without discrimination on the ground of race, color, national origin, creed, or any other ground unrelated to an individual's need for the service or the availability of the needed service in the facility The language, " or any other ground ", could certainly include sex

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For additional information about the Department of Health and Human Services' Fatherhood Initiative, contact at [Anne Benson](#) (202)690-6805

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