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Meghan L. Cavanaugh
Primary Caregiving Fathers: I was an
Interloper in a Woman's World: A
Qualitative Study

ABSTRACT

This study sought to ascertain how fathers who are primary caregivers understand their roles as fathers and caregivers. This qualitative, exploratory study aimed to expand the body of knowledge on primary caregiving fathers, which has, to date, largely focused on outcomes-based research.

Heterosexual, married men with children under five years of age, who had been primary caregivers for at least six months, were recruited from Rhode Island, Massachusetts and New York. Twelve primary caregiving fathers participated in this study. Questions focused on such topics as: 1) the decision-making process; 2) what the participants understood their roles as fathers and primary caregivers to be; 3) if being a primary caregiver was consistent with their sense of masculinity; and 4) societal and familial responses to the participants as primary caregiving fathers.

Fathers understood their role to be multifaceted, including such roles as role model, teacher, disciplinarian and nurturer. Participants mostly reported that being a primary caregiver fit with their sense of masculinity. Participants noted responses of surprise and support from society and family. Suggestions for further research were made to broaden and expand the literature on families who choose the father to be the primary caregiver.

PRIMARY CAREGIVING FATHERS:
I WAS AN INTERLOPER IN A WOMAN'S WORLD

A project based upon an independent investigation,
submitted in partial fulfillment of the requirements
for the degree of Master of Social Work.

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2007

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CHAPTER I

INTRODUCTION

Psychodynamic and developmental theories have long assumed that the domain of childrearing belongs to women. In the framework of any major theory of human psychological development, mothers are designated primary caregivers, providing children with the warmth, nurturance, compassion and support necessary for proper growth and development. The contribution of the father to a child's development and well-being has historically been understudied; however, the message that experts and theorists give is clear: Fathers are not primary caregivers. Nonetheless, as the "traditional" heterosexual nuclear family, characterized by a working father and stay-at-home mother, is increasingly replaced by dual-income families, and as daycare costs continue to increase, many modern fathers are becoming primary caregivers of their children. The act of primary caregiving by fathers is still considered nontraditional in United States society, which socializes men to acquire complementary parenting skills to women, such as being the authority figure in the house (Lamb, 1999). Whereas women across cultures and socioeconomic classes are socialized to incorporate some characteristics of nurturance and caring for others into their feminine identity, men are raised with differing ideas of what it means to be "masculine". The masculine identity may or may not include aspects of childcare, but it necessarily has implications for a man's perceived role as a father.

Current research on fathers is largely outcomes based. Studies focus on concrete factors such as: the effects of absent fathers on children; how many hours per week fathers spend in childcare activities; and, factors that contribute to fathers becoming primary caregivers. Absent from current literature are research studies that explore how full-time fathers feel about being fathers, and what they understand their role as caregivers to be. This study was an attempt to ascertain how fathers who are primary caregivers understand their role as caregiver. For the purposes of this study, *primary caregiver* will be defined as the parent who assumes responsibility for the majority of child care, both the functional aspects, such as feeding, bathing and playing, and the emotional aspects, such as soothing or disciplining.

Prominent object relations theorist D.W. Winnicott was lauded for his concept of the “good-enough mother” (Goldstein, 2001, p.36). Winnicott believed that a woman does not need to be a perfect mother to raise physically and psychologically healthy children, but that she simply needs to be good enough. The *good-enough mother* is defined as a mother is who is “exquisitely attuned to and at the disposal of her child’s needs” (Goldstein, 2001, p.36). Attending to the physical and emotional needs of children is the job of the good-enough caretaker, who is assumed to be the primary caregiver. One hypothesis of this study was that the concept of the good-enough mother should be applicable to fathers, as well. Do fathers seek to be “good-enough” caretakers? This research study explored the ways in which primary caregiving fathers think about their roles as caregivers and parents.

The sample for this exploratory, flexible methods study was men who are currently primary caregivers for their children or who have been the primary caregiver

within the past two years. Twelve heterosexual men in committed relationships were interviewed, with questions focusing on topics such as: the father's understanding of his role as caregiver; how the role of father is integrated into the man's sense of masculinity; societal reactions to the father; expectations of fatherhood; and, how the father's understanding of a father's role changed after becoming a father.

There were two primary audiences for this study. First, the results of this study will be relevant to clinicians who work with couples and families. Clinicians often invite mothers to share in therapy sessions with children, but much less often invite fathers to participate. The assumption in this practice is that the mother is the primary caregiver of the children and that the father plays a peripheral role in the children's lives. In order to understand and support couples who choose the father as the primary caregiver, it is first necessary to understand how fathers perceive their role as caregivers.

The findings of this study will also be pertinent for programming and policymaking purposes. The results may have significance for those who wish to promote social change by supporting flexible gender roles with regard to childcare and equal opportunity employment.

CHAPTER II

LITERATURE REVIEW

Women's role as primary caregivers for children has remained unchanged over time in the United States, despite constant political, social, economic and cultural shifts. It has historically been the father's role that has evolved to include contributions such as disciplinarian, breadwinner, gender-role model for male children and most recently, nurturer (Coontz, 1992). Psychodynamic theories of development have also placed primary importance on the mother-child dyad. Donald Winnicott, an object relations theorist, believed that optimal child growth and development occur as a result of attuned mothering that meets the varying needs of children (Goldstein, 2001). The role of the father in psychodynamic theory has been principally related to Freud's Oedipal stage of development, in which children crave affection from the same-sex parent and become rivals with the opposite-sex parent. The resolution of the Oedipal crisis results in children becoming gendered beings and developing a conscience (Minsky, 1996). For the purposes of this study, only male gender identity development will be studied. Later theories of gender development critique the long-held belief that boys become masculine by disavowing that which is feminine, and posit instead that boys internalize aspects of both parents in order to develop a fluid, evolving sense of masculinity (Diamond, 2004). This study assumes that a man's understanding of what it means to be masculine can

change over time, and that being a primary caretaker may be affected by and may affect a man's sense of masculinity.

This chapter will first trace the changing roles of fathers in the United States, from Colonial America to the present, as an historical perspective of the shifting roles of fathers is elemental to understanding theories of development that are widely used in the U.S. Next, this chapter will address four theories that are central to identity and gender development: object relations theory; Sigmund Freud's Oedipal stage of development; Michael Diamond's (2004) theory of male gender development; and Nancy Chodorow's (1978) theory of gender development. Freud's Oedipal crisis is the first gender theory, which puts forth that in order to become male beings, boys turn away from their primary attachments with their mothers to identify with their fathers, thus rejecting femininity for masculinity. Diamond's (2004) theory of male gender development posits that men do not disavow that which is feminine, but rather internalize feminine characteristics that become part of their core personalities. Nancy Chodorow's gender theory posits that boys repudiate that which is feminine in order to become masculine. Caretaking is assumed to be a feminine characteristic because mothers are assumed to be primary caretakers; thus, when boys turn away from feminine traits, they necessarily renounce caretaking. The final section will address past and current research on fathers as caregivers. The studies examine different facets of fatherhood, such as factors that are associated with paternal caregiving activities or paternal sensitivity to children or factors that contribute to fathers becoming primary caregivers. Underlying all of these studies is an assumption that a married primary caregiving father is an anomaly, and that it is necessary to dissect and understand a father's desire to be the primary caretaker for his children when there is a

wife and mother who could care for the children. This study assumes that some fathers want to primary caregivers of their children. Thus it is not necessary to question a father's desire to be a primary caregiver, but rather explore his understanding of his role as a father.

An Historical Context

The Role of Men in Families and Society

In the United States, women's role as primary caretakers has remained consistent over time. Men's roles as fathers, however, have evolved as a result of political, social, economic and familial factors. Fathers have been disciplinarians, gender role models, breadwinners, and more currently, active participants in childcare activities. It is important to explore the historical context of fathering and mothering in order to understand how imbedded in American society the notion of women as primary caregivers has become. The assumption that women are primary caregivers also spills over into psychodynamic theories that are used to inform an understanding of how people develop psychologically.

In Colonial America, the concepts of work and production were integrated into family life. Husbands, wives and children worked as a unit to produce what they needed to survive. Children contributed to the family unit from a young age, learning gender-appropriate tasks and foregoing such modern childhood activities as school and play (Chodorow, 1978). Fathers took responsibility for training their sons, while "women's child-care and productive responsibilities included extensive training of girls – daughters, servants, apprentices – for work" (Chodorow, 1978, p.4). Thus women's childcare tasks

were accomplished in addition to their varied productive tasks, such as weaving cloth, cooking, and making clothes that contributed to family survival. A woman's main task in the Colonial era was not simply childrearing, nor were women expected to be sole caregivers. Men took responsibility for training their sons in gender-appropriate jobs, and were the authoritarian figure in the home for both women and children (Chodorow, 1978).

The 1830s and 1840s marked a shift in economics in the U.S., which sparked subsequent familial changes. During this time period, and continuing beyond the Industrial Revolution, household productivity "gave way to wage work and professional occupations outside the home" (Coontz, 1992, p.10). As work came to be defined as outside of the home, gender and age divisions cleaved middle-class families. Work was defined as occurring outside of the home, rather than inside it, and home came to be understood as a place of nurture. Men left the home to earn money and "were labeled 'breadwinners' (a masculine identity unheard of in the colonial days), children were said to need time to play, and gentle maternal guidance supplanted the patriarchal authoritarianism of the past" (Coontz, 1992, p.10-11). The rise of the textile industry in this period lifted the time-intensive chore of making cloth off of women's shoulders and left them more time for childcare tasks. It was during this period of early capitalism that the sphere of domesticity came to belong to women alone. Women were expected to care for and nurture not only their children, but also their husbands, who spent their days outside the home. No longer was the family a unit of production, but rather it "became a quintessentially relational and personal institution, *the personal sphere of society*" (Chodorow, 1978, p.4-5).

As “capitalist industrialization removed grown children, grandparents, and nonfamily members from the household and sharply curtailed men’s participation in family life” (Chodorow, 1978, p.5), mothering became an isolated task. Women were left alone in the home with young children all day, and had the exclusive responsibility for childcare. The tasks of discipline and moral guidance were transferred from men to women. Thus it was during the nineteenth century in the U.S. that the mother-child dyad was born. Fathers were expected to hold a job outside of the home and provide financially to the family, but were exonerated from the task of raising children. Indeed, they themselves received nurture and support from their wives when they returned home “from the immoral, competitive sphere of work” (Chodorow, 1978, p.5).

It is important to note that the separation of work and home was a middle class phenomenon. Lower class women and children worked in the mills, were domestic servants, or worked from home in order to contribute financially to the family. Families in the lower socioeconomic classes could not survive financially on one salary, and thus women and children were not afforded the protection of home that middle and upper class women and children enjoyed. For some lower class families, women and children stayed together in the home to work, while for others, children left the home at the ages of eleven or twelve to work in factories or as servants, depending on their gender (Coontz, 1992).

The divide between the outside world of work and the domestic sphere was heightened around the turn of the century, when middle class Reformists noted with horror the conditions of mills and factories where shocking numbers of lower class children worked. A renewed interest in protecting children and keeping them under the

sheltered arm of home was sparked. This protective stance served to emphasize the division between home and the outside world. The sphere of work was meant for men, while home was the domain of women and children (Coontz, 1992).

After the economic hardship endured by American families during the Depression and World War II years, the booming post-war economy represented an unprecedented amount of freedom. Women had joined the workforce during the war years in record numbers, but were displaced or fired at the end of the war as the men returned and needed jobs. Women were pushed back into the home during the later 1940s and through the 1950s. The economic prosperity of the middle class, and the growth of the middle class in America, led to the nuclear family being the idealized center of family life. Suburban life was developed and many families left the crowded cities for more spacious homes. Newlyweds were often able to afford single-family homes and many families were able to afford new luxuries such as televisions and cars (Coontz, 1992). “For most Americans, the most salient symbol and immediate beneficiary of their newfound prosperity was the nuclear family” (Coontz, 1992, p.25). Thus the nuclear family became the center of social life and entertainment in a way that had no historical precedent.

The emphasis on the nuclear family created interesting family dynamics. Middle class women were pressured to become housewives because it was possible for husbands to support the family on one salary. Men still worked outside the home, but “for the first time, men as well as women were encouraged to root their identity and self-image in familial and parental roles” (Coontz, 1992, p.27). Women still had primary responsibility for childcare tasks, and assumed full responsibility for domestic tasks, as well. During the 1950s, a wife was “expected to subordinate her own needs and aspirations to those of

both her husband and her children” (Coontz, 1992, p.36). Thus fatherhood in the 1950s was defined in terms of making money for the family, acting as a gender role model for male children, and supporting the wife in her role as primary caregiver.

It should be noted, as well, that the rise of psychoanalysis, beginning with Freud around the turn of the century and continuing through the 1950s, placed new significance on the mother-child dyad. Not only was the social and economic climate in the U.S. such that women bore primary responsibility for childrearing, but the relatively new field of psychoanalysis also idealized and reified the mother-child dyad and placed sole responsibility on women to raise psychologically and emotionally healthy children. Fathers were ignored or deemed peripherally important in the development of their children.

The rise of the Women’s Movement in the 1960s and 1970s shifted the role of mothers and fathers yet again. During the 1950s, it became apparent that many American middle class women were desperately unhappy in their roles as housewives and mothers (Coontz, 1992). “In the 1960s and 1970s, a variety of new circumstances and motives impelled even more married women, and unprecedented numbers of mothers, to enter the labor force” (Coontz, 1992, p.162). The Women’s Movement, fighting alongside the Civil Rights Movement, called for equal rights for both genders and a revision of the roles of mothers and fathers. While the Women’s Movement was successful on the former goal insofar as gender discrimination was rendered illegal, the success of the latter goal is less clear. Certainly many men “are examining the nature of masculinity – and finding society’s image of the ‘real’ man to be wanting” (Fein in Pleck & Sawyer, Eds.,

1974, p.56). But is this introspection and examination of masculinity translating into a change in how fathers view their roles as caregivers?

The remainder of this chapter addresses key developmental theories that provide a theoretical framework for understanding primary caregiver fathers. These are object relations theory, beginning with the legacy of Sigmund Freud; and gender theories, first in relation to Freud, and then in relation to two recent gender theorists – Diamond’s rejection of Freudian gender theory, and then Chodorow’s “reproduction of mothering” theory. The chapter concludes with a summary of key recent research on caregiver fathers.

An Object Relations Approach

The Influence of Sigmund Freud

Object relations theory grew out of Sigmund Freud’s Drive and Structural theories. There is no one major theory of object relations; rather, many psychoanalysts after Freud spent their careers building on Freud’s work and searching to understand the motivation for human behavior. Two distinct schools of object relations formed – the American school, whose leaders included Margaret Mahler, Edith Jacobson and Otto Kernberg; and the British school, led primarily by Melanie Klein, Donald Winnicott and W.R.D. Fairbairn. The American object relations theorists integrated Freud’s concept of biological drives into their view of object relations. The British object relations theorists, however, rejected Freud’s notion of instincts and believed instead that human behavior is motivated by an intense desire to form attachments and relationships with others (Goldstein, 2001).

Freud is credited with founding psychoanalytic theory. His Drive theory puts forth that all human behavior is motivated by two instinctual, biological drives – aggressive and libidinal. Freud believed that humans are pleasure-seeking animals who are driven by constant aggressive and libidinal urges that seek “immediate discharge” (Berzoff, Flanagan & Hertz, 2002, p.16). Behaviors then can be understood as a response to or as a means of achieving gratification of an aggressive or sexual instinct.

Later in his career, Freud developed his Structural theory, which divided the mind into three distinct, intrapsychic structures. The id is the unconscious part of the mind where all pleasure-seeking desires and urges originate. These urges seek constant gratification, regardless of personal, social, or cultural norms or rules. The superego, or conscience, is the part of the mind that stands in opposition to the urges of the id. It can be as unrelenting in its prohibitions as the id is in its desire for pleasure (Berzoff et al., 2002). The superego represents morality or values, and forms during the Oedipal crisis. Thus the superego at its inception is based on values that the child has internalized from adults. As the child matures into an adult, so too can the superego change and evolve. The third intrapsychic structure is the ego, which is responsible for mediating between the id and the superego. The ego is akin to the executive branch of the mind – it is responsible for maintaining “psychological cohesion and stability in the face of the powerful, conflictual forces that arise when id, superego, and/or reality clash, that is, when people experience a combination of wishes, moral demands, social expectations, and fears that are inherently incompatible” (Berzoff et al, 2002, p.59). The ego is also the part of the mind that is responsible for such functions as memory, judgment, self-esteem

and affect regulation. It is noteworthy that Freud considered object relations a responsibility of the ego.

The Legacy of Freud in Object Relations Theory

Freud's contemporaries were also interested in understanding motivations for human behavior. Object relations theories grew out of or in response to Freudian theories of human behavior. Before discussing the various schools of object relations, it is important to note that there are several common themes that span all object relations theories. First, object relations is concerned with the relationship between self and other, and "the process whereby people come to experience themselves as separate and independent from others, while at the same time needing profound attachment to others" (Berzoff et al., 2002, p.127). Object relations theories thus center on "the interactions individuals have with other people, on the processes through which individuals internalize those interactions, and on the enormous role these internalized object relations play in psychological development" (Berzoff et al., 2002, p.128). Thus there are two sides to human relationships – the first is the actual, 'real' relationship between two people, and the second is the internal world of internalizations and mental representations of self and others that can be just as significant as a 'real' relationship (Berzoff et al., 2002). Internalized representations of others do not always match the 'real' person, which can be seen by a person's fears or anxieties or expectations when interacting with that person.

A second common denominator for all object relations theories is that they are developmental in nature. It is assumed that early childhood experiences directly affect and mold a child's personality. This is achieved through a process called internalization,

in which a small child takes in parts of those around him/her and takes them on as part of his or her own personality. Thus “early infant-caretaker interactions lead to the person internalizing basic attitudes toward the self and others, characteristic relational patterns, and a repertoire of defenses and internal capacities” (Goldstein, 2001, p.8). These internalizations of others affect how a child, and later, an adult, views others and him- or herself. Thus a small child who internalizes his caregiver as punitive and withholding may even as an adult expect that caregiver – or any authority figure – to punish. Likewise, a child who internalizes a primary caregiver as loving and nurturing may, as an adult, expect that primary caregivers are caring and warm and may become such a caregiver.

Lastly, object relations theories assume that the problems that arise from early object relations deficits affect the personality or character of a person. Such problems include “maladaptive attachment styles, separation-individuation subphase difficulties, borderline, narcissistic, paranoid, and schizoid disorders, severe and chronic depressive reactions, and false self disturbances” (Goldstein, 2001, p.8). Thus problems with early object relations have a lasting effect on children and can alter the development of their personality. Early object relations problems can lead to persecutory, harsh, or punitive internalizations of self and others. These processes begin in infancy, with the baby’s primary caregiver-assumed by object relations theorists to be the infant’s mother. Thus undue pressure and blame could be placed on the mother whose child failed to develop in a healthy manner. A father’s role in a child’s development is largely ignored or overlooked because he is assumed not to be the primary caregiver.

Despite these three commonalities in object relations theories, the field of object relations is diverse. Though it is possible to categorize object relations theories in multiple variations, for the purposes of this paper, theorists will be divided into two schools – the American school and the British school.

The American School

The American school of object relations grew out of Freud's work in that it accepted both Drive and Structural theories as true. Thus the American object relations theorists believed that human behavior was motivated by aggressive and libidinal urges. The focus of American object relations theories was "how the developing infant builds up internalized representations of self and others that form the core of one's identity, view of the world, relationships with others, and personality traits and characteristics" (Goldstein, 2001, p.22). The most prominent American theorists were Margaret Mahler and Edith Jacobson, who were both developmentalists and psychoanalysts, and Otto Kernberg, who was a psychoanalyst who attempted to synthesize Freud's work with that of Melanie Klein, who was a British object relations theorist. These theorists assumed that a child's primary caregiver was the mother. Thus they focused on a child's internalization process based on a primary relationship with his or her mother, not father. It may be that men who are primary caregivers for their children internalized a caring and nurturing parent into their core identity, thus contributing to the men's desire to care for their children.

The British School

The British school of object relations developed concomitantly with the American school. Whereas the American school accepted Freud's dual instinct theory, the British

school of object relations rejected it as false. The British object relations theorists maintained that the motivation behind human behavior was the need to connect and relate to others. One of the most prominent theorists of the British school was Melanie Klein. Originally a follower of Freud, Klein did in fact agree with the notion of drives, but placed primary significance on the aggressive drive. She believed that an infant's inner life is marked by "envy, greed, and destructive impulses" (Goldstein, 2001, p.32). Klein's view of infant development focused on the child's need to connect with external objects, such as caregivers, but also on a child's rich inner life of fantasies. Klein "gave a more significant role to the impact of fantasies rather than actual relationships in the development of internalized object relations" (Goldstein, 2001, p.31). Klein's focus on negative and at times pathological fantasies and urges in children caused her work to become quite controversial. Nevertheless, she was one of the leaders of the British school of object relations. Other important British object relations theorists include W.R.D. Fairbairn, Harry Guntrip, and D.W. Winnicott, whose contribution to the field of object relations will now be discussed.

Donald Winnicott's "Good-Enough" Mother and "Holding Environment"

Donald Winnicott began his career as a student of Melanie Klein, but his writings and ideas reflect none of the negativity or pathology found in Klein's work. He felt that mother-child dyad was instrumental to healthy growth in children, and that attuned mothering was directly responsible for the development of positive character traits in children. Winnicott recognized the responsibility women carried for childrearing. He claimed that mothers do not need to be perfect, but simply "good-enough". The good-enough mother is attuned to her child and able to recognize and respond to her child's

needs consistently. Winnicott did not believe that psychopathology developed as a result of a mother occasionally misunderstanding the needs of her child, but rather believed that positive personality traits are developed through sensitive mothering (Berzoff et al, 2002).

Unlike other object relations theorists, who believed that development occurs internally, through the process of internalization, Winnicott also placed importance on the external environment in which children grow up. He put forth the concept of the *holding environment*, defined here as “the external environment [that] is essential to human growth and [that] must adapt to and respond to a child’s needs in personal and unique ways” (Goldstein, 2001, p.75). The onus is on the environment to meet the needs of the child in order for growth to occur. The child’s ability to develop, both physically and emotionally, is inextricably linked to the environment in which he is living. Good-enough caretaking takes place in the holding environment that the mother creates for the child, which can include all members of the family. When most of the child’s needs are met, and the holding environment is flexible enough to meet the needs of the child, the child’s “true self” (Berzoff et al., 2002, p.140) is nurtured. Winnicott described the true self as the creative, spontaneous, uninhibited side of the child, and believed that the true self can only be fostered by a holding environment that supports and nurtures the individuality of the child (Berzoff et al., 2002).

At the time of Winnicott’s writings, in the post-World War II era, many middle class American women were housewives and mothers. Childrearing was almost exclusively the domain of women during the 1950s, and the sociopolitical climate in the U.S. pressured women to meet the needs both of their husbands and of their children

(Coontz, 1992). Though Winnicott's concept of the good-enough mother may have relieved some of the pressure society placed on women to raise psychologically healthy children, it reinforced the significance of the mother-child dyad and ignored the role of fathers in a child's development. The good-enough mother was sensitive to her child's needs, prompt to respond to her child, and willing to create a "maternal holding environment" (Goldstein, 2001, p. 36) that kept the infant cocooned in a safe, symbiotic relationship with its mother, thus not only exonerating fathers from performing childcare activities, but leaving them out of the dyad altogether.

The emphasis of the holding environment traditionally has been on the mother-child dyad, but it is important to note that it need not exclude fathers. Winnicott wrote during a period of U.S. history in which middle class women had more time to dedicate to childrearing tasks than ever before, due to new, modern conveniences that reduced time spent on cleaning and food preparation (Coontz, 1992). Thus childrearing tasks were, as never before, left primarily on the shoulders of mothers. Winnicott's writings, understood in their historical context, assume that a child's primary caregiver is his or her mother, but do not suggest that a child's primary caretaker must be a woman in order for a child to receive good-enough care.

The concepts of the good-enough mother and the holding environment can be applied to fathers, as well. Chodorow (1978, p. 87-88) argues that "anyone – boy or girl – who has participated in a "good-enough" mother-infant relationship has the relational basis of the capacity for parenting". In other words, any child who has received good-enough mothering has learned through the actions of his or her caretaker how to be a good-enough parent. Thus any adult male who received good-enough mothering has been

given the foundation to become a good-enough “mother” or caretaker. This study is an attempt to understand how fathers understand their role and duties as primary caregivers. Do primary caregiving fathers keep in mind the image of the good-enough mother as the ideal to which they aspire?

In order to understand how fathers view their role as caregivers, it is first necessary to explore the influence of gender identity. The next section of this paper will review different theories of gender development and its relevance to male primary caregivers.

Gender Development

The Oedipal Crisis

Sigmund Freud set forth the first theory of gender development, which was incorporated into the Oedipal stage of development. “The Oedipal crisis for Freud is the defining moment when each child takes on its future gender identity within culture and becomes a fully fledged human subject” (Minsky, 1996, p.41). Prior to the Oedipal crisis, which occurs between the ages of three and five, a young boy is happily in his mother’s care. Once the crisis commences, it can only be resolved by the boy turning from his mother to identify with the father, thus creating a male gender identity and in the process, forming a conscience. The significance of the Oedipal stage for the small boy is the acquiring of a male gender identity (Chodorow, 1978).

For a boy, the Oedipal crisis is marked by fantasies of a passionate love affair with his mother. His father is now viewed as an intruder in the boy’s relationship with his mother, and a rival to be beaten in order to maintain the exclusive relationship the boy

imagines he has with his mother. The small boy feels aggression towards his father, which only strengthens as the boy realizes that his mother seems to prefer his father to him (Minsky, 1996).

The young boy becomes aware of sexual differences between himself and his mother, and believes his mother to be castrated. He fears that his father, whom he now recognizes as powerful and potentially destructive, will castrate him in order to win the mother and in order to punish the boy for his aggressive feelings for the father. Castration anxiety is the impetus necessary to resolve the Oedipal crisis. In order to protect himself, the boy must give up his fantasies about his mother and his competition with his father and “to acknowledge the idea of *symbolic castration* by his father. This takes the form of submitting to the painful and humiliating reality that he must lose the mother to his more powerful father” (Minsky, 1996, p.42). The boy accepts the symbolic castration as more acceptable than physically castration, and turns away from his primary identification with his mother as proof that he has given up his fantasies. The boy realizes that “if he allies himself with his father and becomes, like him, a ‘man’, he will eventually be able to have a substitute for his mother—a woman of his own” (Minsky, 1996, p.43). As the alliance between boy and father forms, the boy feels guilt for his previous aggressive desires to hurt his father, and this guilt forms the basis of his conscience, or superego.

The Oedipal crisis can only be resolved for a boy by turning away from his mother, and renouncing the fledgling “feminine” characteristics he had enjoyed in her care. Thus for Freud the development of a “masculine” identity requires a complete severing of all femininity (Minsky, 1996). This theory of gender development “defines masculinity negatively as that which is not feminine and/or connected to women, rather

than positively” (Chodorow, 1978, p. 174). Instead of defining masculinity in terms of what it is, the Oedipal theory forces boys to define masculinity in terms of what it is *not*, by contrasting it with femininity. The Oedipal crisis is a rigid theory of gender development that does not allow men to incorporate such traditionally “feminine” characteristics such as caretaking and nurturance into a masculine identity. Thus a man who has successfully navigated the Oedipal crisis by disavowing feminine traits may not be able to integrate the role of a primary caregiver into his masculine identity.

Freud’s theory assumes that the child is raised primarily by his mother. If a male child is cared for by his father during the pre-Oedipal and Oedipal years, and thus does not view caregiving actions as feminine, perhaps it would be acceptable to the child to be a primary caregiver as an adult. Thus there may be a link between how much a male child views childcare activities as feminine, and how the child is able to integrate caregiving into his adult sense of masculinity. It is possible that men who are primary caregivers as adults had fathers who were active participants in childcare activities. It is also likely that fathers who are primary caregivers did not internalize caregiving activities as feminine.

Reshaping of Men’s Identities

Michael Diamond’s (2004) theory of gender identity rejects Freud’s notion that boys must disavow femininity in order to be masculine. Diamond believes that boys must integrate and internalize aspects of both mother and father in order to develop a sense of masculinity. The quality of attachment to the mother affects the boy’s ability to internalize feminine aspects, as does the quality of the boy’s relationship to his father in the pre-Oedipal years. When a boy has successfully internalized aspects of both parents, his gender identity is fluid and is able to evolve over the lifespan.

Traditional gender theories posit that boys must turn away from their mothers toward their fathers at a young age in order for a healthy masculine identity to be formed (e.g. Minsky, 1996). The shift from a dyadic relationship between mother and son to a triadic relationship that includes the father requires the boy to separate from his mother to align with the father. During the shift the boy must give up his primary identification with his mother and “disidentify” (Diamond, 2004, p.359) with all that is feminine in order to identify with the masculine imago offered by the father.

Diamond views the above-mentioned trajectory as a failure of healthy gender development because its absolute repudiation of femininity denies a man’s capacity for caretaking and nurturance. Diamond believes that that disidentification and disavowal of the feminine is, in fact, a defensive stance that serves to protect the boy from the feelings of loss associated with separation from his mother. Diamond states, “when this defensively based dis-identification (and counteridentification [with the father]) occurs, pathological rigidity commonly results. It is evident in the severity of the superego and in the lessened cohesiveness and fluidity of the boy’s sense of maleness” (Diamond, 2004, p.362). Hence a boy who disidentifies with his mother in order to become masculine does not develop a flexible gender identity, and must deny nurturing or caretaking aspects of himself.

Diamond theorizes that male gender identity development begins with the internalization of characteristics of the primary caregiver, whom he assumes to be female. Through the internalization process, characteristics of people “become internal objects and, in fact, an internal relationship is substituted for an external one” (Diamond, 2004, p.366). Thus characteristics of others are taken in and woven into one’s personality. The

most complex and mature level of internalization is identification, a process by which the internalized characteristics of others become integrated into one's core identity.

Diamond believes that in the pre-Oedipal years, a boy internalizes and identifies with aspects of both father and mother, but primarily of the mother, who is the primary caregiver. Thus by the time the boy moves from his dyadic relationship to a complex triadic relationship, he has already integrated feminine aspects into his personality. In fact, the boy is able to separate from his mother enough to include his father only because he has internalized aspects of his mother-thus the separation is not equated with loss. Diamond (2004) argues that the internalized aspects of the mother remain with the boy throughout his life span, thus allowing him to recognize as part of himself caregiving tendencies.

While the boy internalizes nurturing aspects of his mother, he also internalizes "a core, enduring sense of his mother's relating to him as a male person of the opposite sex" (Diamond, 2004, p.365). That is, the mother must acknowledge her son's gender and relate to him as a male child. Diamond states that "a small boy's internalization of a secure masculine gender identity is strongly impacted by his mother's ability to perceive and endorse him as a male person, both objectively and subjectively" (2004, p.367). The mother's ability to support the boy's gender is based on her own beliefs and internalizations about men and masculinity, as well as her relationship with the boy's father. A mother's ability to support her son's maleness facilitates the boy's ability to internalize a triadic relationship and to incorporate both masculine and feminine aspects into his gender identity.

Diamond criticizes the notion that boys must repudiate feminine traits in order to be male – such a rejection of femininity leads to the development of a rigid, lopsided gender identity that cannot integrate traits associated with caregiving. While Diamond acknowledges that boys do tend to turn from their mothers in favor of their fathers, he believes that boys are not separating from their mothers as a way of rejecting femininity, but rather learning to negotiate triadic relationships. Diamond believes that by the time a boy starts to align with his father, he has identified with maternal traits that have become part of his core identity. Thus the boy accepts nurturance and caregiving as part of his personality. The participants in this study may have gender identities that allow for and accept as masculine the caring for small children.

Nancy Chodorow's Theory of the Reproduction of Mothering

Though Diamond's theory of gender development is much more flexible than Freud's and allows for the integration of caregiving characteristics in a boy's sense of masculinity, it still assumes that boys are being raised by their mothers. Nancy Chodorow (1978) believed that there are inherent asymmetries in the way that women raise girls and boys, which contributes to what she called "the reproduction of mothering" (p.7). Women raise daughters to become mothers – and thus primary caregivers – while they raise sons to be on the edges of childcare. Chodorow posited that the pattern of girls as caregivers and boys as non-caregivers is solidified by the time that children resolve the Oedipal crisis.

Chodorow (1978) argued that "the contemporary reproduction of mothering occurs through social structurally induced psychological processes. It is neither a product of biology nor of intentional role-training" (p.7). That is, women do not mother simply

because they have the ability to carry and nurse infants, or because they were told from a young age that a woman's job is to mother. Rather, women mother because of the nature of their pre-Oedipal and Oedipal relationship with their own mothers.

Chodorow (1978) did not dismiss the Oedipal crisis as false, but saw inherent gender differences in the theory that Freud ignored. Chodorow argued that the primary importance of the Oedipal stage is "in the constitution of different forms of 'relational potential' in people of different genders" (1978, p.166). That is, girls and boys come out of the Oedipal stage with different ways of relating to others based on their experience in the Oedipal stage. Girls emerge from the Oedipal stage with an ability to navigate triangular relations and "with a basis for 'empathy' built into their primary definition of self in a way that boys do not" (Chodorow, 1978, p.167). Boys resolve the Oedipal crisis by turning away from their mothers, repressing the love they felt for her, and by acquiring a masculine gender identity that disavows that which is associated with femininity.

Freud himself noted that girls enter the Oedipal crisis later than boys, which Chodorow believes stems from basic parenting asymmetries. Women are likely to view their daughters as similar to themselves, thus prolonging the period of primary identification between the mother and daughter. "Because they are the same gender as their daughters and have been girls, mothers of daughters tend not to experience these infant daughters as separate from them in the same way as do mothers of infant sons" (Chodorow, 1978, p.109). Thus girls raised by mothers are likely to experience a long pre-Oedipal period in which they identify primarily with their mothers because the pre-Oedipal period gets perpetuated by their mothers' identification with the daughters. When

a girl does enter the Oedipal crisis, she does not need to give up her primary identification with her mother to resolve it. She needs only to recognize her own heterosexuality to navigate the Oedipal stage, and can maintain her identification with her mother, who is her gender role model. Thus girls come out of the Oedipal crisis “more open to and preoccupied with those very relational issues that go into mothering—feelings of primary identification, lack of separateness or differentiation, ego and body-ego boundary issues and primary love not under the sway of the reality principle” (Chodorow, 1978, p.110). Girls are not pushed away from their mothers or required to align with their fathers and thus can remain close to their mothers after the Oedipal crisis, which prolongs the period of closeness between mother and daughter and contributes to the reproduction of mothering. Thus the daughter’s internalizations of her mother and mothering in general remain constant because she is not required to renounce them.

For boys, however, the pre-Oedipal and Oedipal stages look different. Just as Diamond (2004) believed that it is necessary for a mother to relate to her son as a gendered opposite being, so too does Chodorow (1978) stress the significance of the gender difference between mother and son. Mothers raising sons do not view their sons as similar to themselves, and thus do not prolong the pre-Oedipal period. Rather, mothers relate differently to their sons than they do to daughters. “Sons tend to be experienced as differentiated from their mothers, and mothers push this differentiation” (Chodorow, 1978, p.110). Thus the mother’s recognition of the son as an “other” contributes to the early onset of the Oedipal stage.

While Chodorow agrees with Freud that a boy in the Oedipal crisis turns away from his mother to identify with his father, she posits that it is that very resolution that

contributes to the reproduction of mothering. While Freud believed that the primary purpose of the Oedipal stage for the boy is the development of a male gender identity, the identity he forms is rigid and defined in terms of not-feminine. A boy who resolves the Oedipal crisis by disavowing his mother and femininity in general must repress his love for his mother and give up his primary identification with her. Chodorow (1978) claimed that boys, because they are pushed into the Oedipal crisis by their mothers and then must resolve the crisis by turning away from their mothers, are able to differentiate themselves more completely than girls. "Boys come to define themselves as more separate and distinct, with a greater sense of rigid ego boundaries and differentiation. The basic feminine sense of self is connected to the world, the basic masculine sense of self is separate" (Chodorow, 1978, p.169). Thus the masculine identity of which Freud wrote, and which Chodorow concluded arose from sons who were raised by mothers is one in which connectedness and affect is defensively repressed or denied (Chodorow, 1978).

Chodorow's theory of gender development does not allow for the development of a male gender identity that includes traits associated with caregiving, such as connectedness. Thus for men who do engage in primary caretaking, it may be that they did not separate or differentiate completely, or did not deny or repress their ability to connect to others.

The next section of this chapter addresses research on fatherhood in the U.S., beginning with areas that were first of interest to researchers, and following with current research on fathers who are primary caregivers.

Research on Fatherhood

An Historical Context

Some of the first research studies on fathers as caregivers were conducted approximately thirty years ago, when the role of fathers began to shift from supportive to active. Current research on fathers is mostly limited to outcome-based studies that examine such topics as: fathers' participation in childcare activities in the home to determine what type of caregiving activities fathers are most apt to do (Atkinson, 1987); factors that contribute to fathers assuming primary caregiving status (National Institute of Child Health and Human Development, 2000; Russell in Lamb, 1999); factors that are associated with paternal sensitivity to children (NICHD); and effects on children of highly participant fathers (Russell in Lamb, 1999). Absent from the literature are studies that explore how primary caregiving fathers view their role as father, and how their gender identities have either evolved or remained constant to integrate the role of primary caregiver into their sense of masculinity.

The 1970s and 1980s saw a substantial body of research on fathers. As middle-class women forewent domesticity and housewifery for careers, men's role as fathers came under scrutiny. Atkinson (1987) conducted a study to research fathers' participation in family day care. Questionnaires were given to 39 mothers and 24 fathers from 40 different families to explore childcare activities performed by both parents. Participants rated 13 items related to childcare activities and 13 items related to parental needs on a scale of 1 to 6, with 1 representing that no needs had been met and 6 representing all needs being met. Atkinson found that childcare activities were generally split down traditional gender lines, with mothers providing physical care and religious training,

while father provided discipline and financial support. Fathers reported high levels of participation in their children's lives and a wish for increased participation. They also reported that childcare activities in their families were performed equally between partners. Mothers, however, reported that they had primary caretaking responsibilities and indeed no evidence was found that fathers in this study provided primary caretaking responsibilities.

Differences in judgments and beliefs about caretaking roles perhaps account for the discrepancy in reports from fathers and mothers. Fathers perhaps judged their involvement based on traditional views of childcare or based on a low level of father involvement, while mothers may have judged paternal involvement in comparison with their own level of participation in childcare activities (Atkinson, 1987). However, the willingness of fathers to participate and their expressed desire for increased participation suggests that the participants have male gender identities that accept and embrace childcare tasks. Interestingly, the male participants performed traditionally male duties, such as disciplining the children.

Current Research on Fathers as Caregivers

Much of the current research on fathers who are active caregivers also focuses on outcome-based studies. The National Institute of Child Health and Human Development (2000) conducted a study that examined both factors that contribute to fathers engaging in childcare activities and factors that contribute to paternal sensitivity to children. Justification for the study was that "scholarship on fathering has coalesced around the idea that fathering is multifaceted and multidetermined, that fathering tends to be more sensitive to contextual factors than mothering" (NICHD, 2000, p.200-201). An

assumption of this study is that fatherhood is still an option for men, and that men choose the level of involvement that they have with their children. This study thus also assumes that mothers are the primary caregivers, despite the fathers' participation in childcare activities.

The study sought to ascertain whether characteristics of the children (such as age, gender, birth order, temperament), sociodemographic factors (such as employment hours and income of father, father's ethnicity) and characteristics of the fathers (such as attitudes about child-rearing and marriage, general adjustment and satisfaction with life) predicted paternal involvement in childcare activities and paternal sensitivity to children. Likewise, it studied whether characteristics of the mother affected paternal involvement and sensitivity. Finally, the study examined whether associations between the predictor variables (i.e., characteristics of the children, sociodemographic factors and characteristics of the father) and the fathers' involvement were affected by maternal employment levels.

Several hypotheses were made: Fathers would be more involved with sons than daughters; fathers who are happier and better adjusted would be more involved and more sensitive to their children than unhappier or less adjusted fathers; fathers who hold traditional beliefs about the division of labor and child-rearing would be less involved and less sensitive to their children than fathers who have nontraditional beliefs; fathers who are employed for less hours would be more involved than fathers who were employed for more hours; positive perceptions of the partners' relationship would result in more involvement and more sensitivity to children; and, fathers who had a positive

view of maternal employment and who had partners who worked more hours would be more involved than fathers who held negative views of maternal employment.

The study examined two aspects of fathering separately – the level of engagement in childcare activities, and the quality, or sensitivity fathers showed their children. All fathers who participated worked at least part-time, while 53% of the mothers worked full-time, 23% worked part-time and 24% did not work. In order to measure the fathers' childcare responsibilities, fathers were contacted four times – when their children were six months, fifteen months, twenty four months and thirty six months old. At these times, fathers filled out questionnaires that inquired about the fathers' own “personality, attitudes, beliefs, relationship with their partner, and involvement in caregiving activities” (NICHD, 2000, p.205). Mothers were also given questionnaires to complete, which concerned their “personality, attitudes, beliefs, family demographics, financial resources, child temperament, and their relationship with their partner” (NICHD, 2000, p.205). The mothers were also contacted every three months to answer questions about their partner's and their own employment hours. In order to measure paternal sensitivity to children, a small subset of fathers was videotaped playing with their children at ages six months and thirty six months. Sensitivity was measured by how attuned and responsive to the needs of the child the father was able to be, and how often the father impinged on the child by controlling or directing the child's activities.

The most noteworthy result of the study is that there was no single predictor variable of either paternal involvement or paternal sensitivity to children. Paternal involvement with childcare and paternal sensitivity were predicted by different factors for different families. Some general findings included fathers being more involved in

caretaking when they worked fewer hours and their partners worked more hours; when fathers and mothers were younger; when the fathers had positive personalities; when the child was a boy; and, when mothers reported high levels of marital intimacy. In general, fathers were more sensitive to their children when fathers had less traditional beliefs about child-rearing; when fathers were older; and, when fathers reported more marital intimacy. Mothers' employment did not affect paternal involvement in childcare activities.

The NICHD study attempted to explain factors that predicted paternal involvement in childcare. The hypotheses that the researchers made in their study include many stereotypes about fatherhood (i.e., that fathers would be more involved with sons than daughters), and also suggest that the researchers assumed that the commitment that men have to the daily care of their children is less than that of their wives. The researchers assumed that fatherhood is conditional or circumstantial – a father may be a caregiver if the child is of a certain age or gender, or if the father himself is of a certain age or ethnicity. Another assumption is that the factors that contribute to primary-caregiving fathers are mainly environmental or external factors. The researchers assumed that men do not want to be primary caregivers for their children. Though the questionnaires that the couples filled out included questions about personal beliefs, little was reported in the findings about the weight of those values of the participants. Nothing was reported in the findings about how the fathers' beliefs about childrearing shaped their views of their role as fathers.

Russell (1999) reviewed research studies conducted in the 1980s and 1990s on primary caregiving fathers and found eight possible antecedents to fathers becoming the

primary caregivers: 1) explanations of parents; 2) characteristics of both children and families; 3) views on childcare responsibilities; 4) early childhood experience of fathers; 5) fathers' personality traits; 6) perceptions about competence; 7) parental potential for employment; and 8) the marital relationship.

Russell (1999) found four principal explanations that families gave for choosing a primary caregiving father: the father was unemployed; the mother had a greater earning capacity than the father and thus having the father stay at home resulted in the greatest economic benefit to the family; career factors for both parents, such as the mother being highly invested in her career and the father having little interest in a career or job; and, egalitarian views on childcare responsibilities and division of labor in the home.

Russell's (1999) review showed only that the gender of the child(ren) was not a factor in fathers becoming primary caregivers. There were no other conclusive characteristics of either the family or the children that were antecedents to fathers becoming primary caregivers.

With regard to childcare beliefs, most families valued parental care of children over daycare centers. Families in which the father was the primary caregiver believed that childcare is the responsibility of the parents. Parents rejected the stereotypes that fathers are incompetent caregivers.

The development histories of the fathers were studied with differing results. There is support for hypotheses that stay-at-home fathers were raised by highly participatory fathers themselves, or conversely, that stay-at-home fathers were raised by fathers who had little involvement in childcare activities.

Characteristics of the fathers were studied, but Russell (1999) reported that few conclusive results were reported. It is possible that primary caregiving fathers have high self-esteem and value independence. Study of gender role identities revealed that there was no clear cause and effect pattern between primary caregiving fathers' gender identities and their decision to be stay-at-home parents. Russell (1999, p.66-67) stated, "primary caregiving fathers are less career oriented, and therefore are less likely to be constrained by cultural views about breadwinning responsibilities. Again, however, it is not clear whether this belief is an antecedent to or a consequence of" choosing a nontraditional family constellation.

Findings regarding employment were consistent with regard to mothers. The mothers consistently had higher earning capacities and reported more enjoyment of their jobs than their husbands. The findings with regard to fathers are less clear, although there is an indication that flexible work opportunities and a decreased interest or investment in careers contribute to fathers choosing to become primary caregivers.

Lastly, the couples' relationships were a possible antecedent, "both in terms of the level of support they give to each other to adopt a nontraditional family pattern and the quality of the couple relationship" (Russell, 1999, p.68). Mothers could provide support to fathers in their role as primary caregivers, and fathers could support mothers in their role as breadwinners. However, there was no clear cause and effect pattern regarding the quality of the marriage and the decision to have the father stay home.

Russell's review of research studies, while fairly comprehensive, also illuminates the gap in research. Studies do not seek to understand how primary caregiving fathers understand their role as fathers and caregivers, and how fathers feel about being primary

caregivers of their children. The studies researched antecedents but largely ignored the experience of the fathers.

Summary

The first section of this chapter traced the socio-historical shifts in the roles of fathers in the United States. The second section of this chapter reviewed object relations theories, specifically Donald Winnicott's concepts of the "good-enough" mother and the holding environment. The third section of this chapter reviewed various theories of gender development, including Sigmund Freud's Oedipal crisis, Michael Diamond's (2004) theory, and Nancy Chodorow's (1978) theory. Each theory was explored with regard to male gender identity development. Lastly, this chapter addressed past and current research on fathers' participation in childcare activities.

CHAPTER III

METHODOLOGY

This study was an attempt to answer the following question: How do primary caregiving fathers understand their role as father? This study used a qualitative, exploratory design. Flexible methods were used in order to explore fathers' understanding of their role as a primary caregiver. An exploratory study was an appropriate method to use in order to understand a phenomenon from the participants' points of view. A qualitative design was appropriate because of the small number of participants in the study, and because the data-gathering method was relatively unstructured (Anastas, 1999). Semi-structured interviews were used to collect data from twelve primary caregiving fathers. Data were then analyzed thematically.

Sample

Because this study used flexible methods, the sample for this study was a non-probability sample of convenience (Anastas, 1999). Inclusion criteria for participants were: 1) heterosexual men who are in a committed relationship; 2) fathers who are primary caregivers of one or more child(ren); 3) fathers who have been with the mother of the child(ren) since before the birth of the child(ren) for whom they are caring, if the father is the biological father, and with the mother of the child(ren) for at least a year if the father is a step-father or adoptive father; 4) fathers who have been the primary caregiver of one or more children for more than six months; 5) fathers who have been the

primary caregiver of a child between the ages of birth and 5 years (i.e., the child's 5th birthday); 6) fathers who are either currently primary caregivers or whose experience as a primary caregiver took place no more than two years ago; and 7) fathers are to be either stay-at-home dads or may work outside of the home no more than 16 hours per week. For the purposes of this study, "primary caregiver" was defined as the parent who assumes responsibility for the majority of child care, both the functional aspects, such as feeding, bathing and playing, and the emotional aspects, such as soothing or, disciplining.

Recruitment procedures included the snowball method and word of mouth. Colleagues and acquaintances were approached and given the inclusion criteria for this study. Potential research participants were screened by phone or by email to ensure that they met this study's inclusion criteria. Potential participants were asked at that time if they knew any other primary caregiving fathers who met the study's inclusion criteria. It was planned to distribute recruitment fliers at elementary schools in Rhode Island; however, the snowball method was so effective that the fliers were unnecessary. The sample size for this study was twelve primary caregiving fathers.

Participants

Twelve men participated in this study. All men identified as Caucasian. One man lived in Rhode Island; four men lived in Massachusetts and seven men lived in New York. The participants' ages when they first became primary caretakers were between 26 and 47 years old, with a median age of 34. The fathers took care of their children for a period of time ranging between eight months to five and a half years, with a median time period of two years. Fathers' ages at the time of the interviews ranged from 32 to 49, with

a median age of 37. Eleven of the fathers stayed home full-time and did not work at all outside the home; one father worked one day per week outside the home.

Data Collection

The design for this study was approved by the Smith College School for Social Work Human Subjects Review Committee (see Appendix A). Informed consent forms (see Appendix B) were given to the participants at the time of the interviews. The informed consent form outlined the risks and benefits of participation in this study, as well as the purpose of the study and its inclusion criteria.

Data collection was accomplished through the use of in-person, semi-structured interviews of approximately 45 to 70 minutes in length with twelve men who met selection criteria for this study and who signed the informed consent form prior to the interview. Semi-structured interviews were an appropriate data collection method for an exploratory study because they allow for the collection of rich, narrative data that contributes to a greater understanding of a relatively unknown phenomenon (Anastas, 1999). For the purposes of this study, the unexplored phenomenon was how fathers who are primary caregivers understand their role as fathers. Participants in the study were interviewed in-person, in order to allow for a personalized experience in which participants felt comfortable talking freely about their experiences as primary caregiving fathers.

The interview guide for this study (see Appendix C) began with demographic questions, including: age; race; and town and state of residence. The following themes were addressed in the interview: 1) how the decision was made for the father to become

the primary caregiver; 2) expectations of fatherhood before becoming the primary caregiver; 3) whether the reality of being a primary caregiver matched expectations; 4) how a father's understanding of the role of primary caregiver changed or remained constant over time; and 5) how a father's sense of masculinity either changed or remained constant after becoming a primary caregiver. Follow-up and probing questions were used to identify or clarify emerging themes and patterns during interviews. Thus the data gathered from each interview was unique to the father's experience. Additionally, the data gathered in the first interview were used to modify the interview guide for subsequent interviews.

The interview guide was piloted on one subject prior to use with the participants in the study in order to promote reliability. Narrative data from interviews were tape-recorded during the interview session. Narrative data were transcribed to preserve the integrity of the data and to facilitate the proper use of quotations in written summary. All identifying information was omitted from the transcription summaries. Field notes were taken during and after each interview to organize data thematically.

Data Analysis

Data coding was applied thematically in order to make meaning of the participants' experiences. Transcripts were first analyzed to find data specific to each question from the interview guide. Transcripts were reread to organize data into categories based on themes and patterns that appeared.

This study has several limitations. Transferability or generalization of data may be limited by the small sample size and the constricted geographic area of the participants in

this study. The data gleaned from this study reflects the in-depth experience of twelve men who are primary caregiving fathers. Additionally, the small sample size did not allow for racial diversity.

CHAPTER IV

FINDINGS

This study was an attempt to answer the following question: How do primary caregiving fathers understand their role as fathers and caregivers? This chapter will present the data collected from interviews with twelve men who are primary caregivers of their children. The interview contained fifteen questions organized around the following major themes: how the decision was made for the fathers to stay at home with their children; how the fathers understand their role as fathers and caregivers; if the fathers' understanding of their roles as fathers and caregivers has changed over time; and, if the fathers' sense of gender identity has evolved as a result of being a primary caregiver. The twelve interviews were transcribed and concepts from all the responses were coded into twelve themes. Some of these themes flowed directly from the themes present in the interview questions, and others were new themes that arose in the process of coding. Basic demographic information was also collected from each participant, including age, race/ethnicity, place of residence and number of children.

Eleven major findings emerged from the interview questions. Additionally, during the process of data analysis, one finding emerged that was not a part of the interview guide. The findings will be presented as follows: 1) demographic data; 2) how the decision was made for the father to stay home; 3) expectations of fatherhood; 4) the reality of caretaking, including subsections on if expectations matched reality, daily

routines of the families and the division of labor in the partnership; 5) who the participants looked to as role models or guidance; 6) how the participants understand their roles as primary caregivers; 7) how the participants understand their role as fathers; 8) the participants' image of a good parent; 9) whether the fathers believe that they are as adept at caregiving as their partners; 10) gender issues, including subsections on whether the role of father has always been a part of the participant's identity, how the participants feel about the stereotypical roles of mothers and fathers, if being a primary caregiver is congruent with the participant's sense of masculinity and if the participant's sense of masculinity has evolved over time; 11) societal and familial reactions the fathers received; and 12) the marital relationship.

Demographic Data

Participant Demographics

The sample size for this study was twelve. All twelve men identified as Caucasian. One participant lived in Rhode Island, four participants lived in Massachusetts and seven participants lived in New York. The participants' ages when they first became primary caretakers were between 26 and 47 years old, with a median age of 34. The fathers took care of their children for a period of time ranging between eight months to five and a half years, with a median time period of two years. Fathers' ages at the time of the interviews ranged from 32 to 49, with a median age of 37. Eleven of the fathers stayed home full-time and did not work at all outside the home; one father worked one day outside the home. All twelve men were married to the mother of the child(ren) for whom they cared. Seven participants cared for one child; three participants

cared for two children, of whom one cared for twins; and, one participant cared for three children.

Child Demographics

At the time when the participants became the primary caregiver, the children of the participants ranged in age from birth to 3 years, with a median age of two and a half months. A total of 17 children were cared for by twelve fathers. Seven of the children cared for by fathers were girls, and ten of the children were boys. There was one set of twins.

The Decision to Stay Home

The decision for each participant to be a stay-at-home parent varied according to family, but all twelve participants reported that finances were a major factor. Specifically, all twelve men reported that their spouses earned more money than they, and could support the family, at least temporarily, on one salary.

Work Schedules and Career Transitions

One participant in this study worked from home four days a week while his children were in preschool and kindergarten. Two participants were in a career transition before becoming the primary caregiver and were going through school at night while caretaking during the day. Two participants were laid off from their jobs prior to becoming the primary caregiver. Five fathers gave up their careers to stay home with their children. One participant worked for himself leading up to the time when he became the primary caregiver, and was able to work at night when his wife was home. One participant had seasonal employment that allowed him not to work in the off-season, and

also had a small business on the side that he ran in the evenings when his wife was home. All of the participants reported that their spouses made enough money to support the family.

“We Believe That We Want One of Us to Raise Our Kids and Not Some Daycare”

Five participants also reported that both they and their wives felt that one parent should stay at home to raise the children. One participant stated, “we realized that with [my wife’s] earnings potential, we could make it as a one-income family, which was very important to us, because both of us were raised by a stay-at-home parent...it’s a very important value that we felt we couldn’t do without.” Of the five participants who shared this belief, two were unable to pursue their careers in their towns, one gave up his career to stay at home, one went to school for his Masters degree at night while caretaking during the day, and one was laid off from his job around the time that his first child was born.

Expectations of Fatherhood- “I Think You go Into it Blind”

Four of the participants in this study reported that they had no expectations of fatherhood because they had had no prior experience with babies. Two of the participants reported that they had no expectations of infancy, but imagined activities when the child was older. One father stated, “I think most of my expectations involved him being older, things that we would do – all the father-son things – throwing the Frisbee around and that sort of thing. So I was thinking a few years out more to the childhood thing rather than the infancy part of it.” Four fathers reported expecting a change in lifestyle, based on what they saw from parents they knew. One stated:

I expected to be changing diapers and that there would be a lot of rocking and cooing and then there would be playing with him...just the basic outline. It was pretty much just what you see other parents doing when you see them with their children- the kids are sleeping in their carrier or you see them playing with their parents.

Two fathers reported expecting “traditional” families, in which the father worked and the mother took care of the children. One father stated:

You’re not very realistic. Everybody’s brought up with the idea that life is like the 50s. You’re not going to lose your freedom, your wife is going to take care of this. It’s just not like that. I thought I was going to be more traditional – I would work, my wife would work, and everybody would be happy. I didn’t think about who would bring the kids to school, who would make the lunches.

There appeared to be a correlation between how much prior experience the fathers had with children and their expectations of fatherhood. Fathers who reported no experience with children (n=8) reported no expectations or unrealistic expectations. Fathers who reported prior experience with children (n=4), either through babysitting or through friends and family who had small children, reported expectations of fatherhood.

Reality of Fatherhood

The findings for this section will be organized into the following three subsections: the participants’ experiences of fatherhood; the daily routines of the families; and, the division of labor in the families.

“You Have to Give Yourself up And Give it to Them”

Three major themes emerged from the participants regarding the reality of primary caregiving: being a stay-at-home parent was much harder and much more work than expected; fatherhood was more rewarding than anticipated; and, being the primary caregiver required lifestyle changes. There was substantial overlap in responses. Three

participants reported that fatherhood was much more difficult than anticipated. One father stated, “I had no idea how much work it would be, how wearying it would be.” Another stated:

It was just so much harder than I ever could have imagined. Everything was harder. My version of putting a baby to sleep was often different from the reality. It’s coercing them, wrestling them, putting on the soft music, rocking them, walking them around – and you’re so desperately wanting to go to sleep yourself...and sometimes they just don’t go to sleep and you’re devastated because you were so counting on having that nap or you wanted to do something during the nap.

Three participants reported that fatherhood was more challenging than expected, but also more rewarding than anticipated. One father stated, “everyone told me how much hard work it was, but no one told me how much fun it was, how much you’d laugh every day.” Another stated:

It’s been brutal. You’re isolated. You feel like there’s no one there for you. You’re just with them, day after day...so the reality is that it’s very demanding, and you can feel pretty sad about it sometimes. But then when you see your kids do something great, or you have a great moment, it’s all worth it.

Four participants reported that the reality of fatherhood has translated into lifestyle changes. One stated, “the biggest thing was slowing down and really seeing what was important, not being as self-concerned.” Another participant stated that fatherhood “was definitely a shift in my priorities. My kids are just unbelievably important. My career is important, but it’s not as important. I’d give up my career in a second for my kids – and in a lot of ways, I have.”

One participant reported that being a father has triggered lifestyle changes, and also that fatherhood has been rewarding. He stated, “my whole entire life is set up around [my daughter] and I’m completely fine with that for right now. I can’t imagine wanting to

do anything else.” One participant reported that fatherhood was rewarding, challenging, and also prompted lifestyle changes. He stated:

my life is really different now and I’ve had to make some changes...it feels like a chore or a burden if you haven’t slept or if there are all these things going on, but mostly it’s a wonderful life, an enriching experience to be a parent and to be involved...I don’t want to say it was easy, because it wasn’t that, but it was natural.

There was substantial overlap in the participants’ responses to what the reality of being a primary caregiving parent has been like.

Daily Routines – “It’s Eat, Sleep, Poop, Repeat”

All twelve fathers reported having a daily routine. Participants who took care of infants and toddlers (n=7) reported similar routines that included feeding, diapering, play time and naptime during the day. The evening routine included their spouses, who often assumed caretaking responsibilities upon arrival home. One father stated:

Starting when we were all awake, nursing, pumping, [my wife] off to work. Then usually play time for us – with my son we were very scheduled...10:30 was naptime, before naptime was a bottle – he usually fell asleep on the bottle, then he’d nap for an hour and a half, wake up, we did backpack time between naps. So we’d backpack around town, or we’d backpack with skis, or we’d backpack in the woods, then naptime again around 1:30 or 2:00, wake up, play time in the house until mama comes home, and then nursing and mama time, bath time, bedtime. It was pretty simple.

Additionally, all seven fathers reported scheduled activities out of the house, such as play groups, backpacking, going to the beach, bird-watching or hiking.

Participants who took care of pre-school or kindergarten-aged children (n=3) also reported daily routines. The routines included breakfast, getting ready for school, dropping the child(ren) off at school, and after-school activities until suppertime. One father’s experience was thus stated:

Now they go to [kindergarten], so they get on the bus at 8:30. A couple of days when they're in school I'll volunteer, so I'll spend some time there...then I pick them up or they come home...so then I'm on duty. So then we just do whatever...and every day is different. So if they come home and stay home, we'll do stuff around here. Other days they do stuff after school. They're going to the library on Tuesdays now, Brownies every other Friday and we started roller skating on Thursdays.

Three fathers cared for both toddlers and school-aged children. The daily routine for these families included getting the oldest child(ren) to school, as well as scheduled feeding and naps for the infants and toddlers. One father stated:

Everyone lounges out, plays, watches TV. Then we start to get ready for school for the 6-year old. He's in first grade. The 4-year old goes to pre-school...get the boys to school, go home, at 10:00 my daughter goes for a nap, so I get almost two hours to do laundry, clean up. Lately I try to exercise a bit – anything I can cram into two hours. At noon I pick up [my son] from pre-school, we come home and have lunch, clean up from that, other general cleaning up. There's always something to do...and then through the afternoon my kids like to snack. And then there's more laundry to do – there's always laundry. Then we start to get ready for dinner.

The routines of the participants varied according to the ages of the children. All twelve fathers reported that their children took part in age-appropriate activities outside the home.

Division of Labor – “There was a Lot of Just Homemaking Going on”

The responsibility for household maintenance and chores varied from family to family. Three themes emerged in the data on the division of labor in the participants' marriages: 1) the participants assumed the majority of household chores; 2) participants and their spouses shared housework and chores; and 3) the participants' wives assumed the majority of household chores. Four participants reported that they assumed responsibility for the majority of the household chores. One father stated, “I did most of it, just because I was here. Sort of the usual – the dishes, the laundry, the vacuuming, the

daily maintenance sort of things...I still do a lot of the cooking, a lot of the dinners.” Six participants reported that the household maintenance was a shared effort with their spouses. One participant stated:

We’ve had a little bit of contention about that lately, because I’m still not a cooker. I’ve got my sister and one of my best friends saying, ‘man, you’ve got to learn how to cook, because if she’s going to be at work all day, you’re the one who’s going to have to do the cooking’. Although that hasn’t totally happened yet...but I will normally unload the dishwasher, do all the dishes, do the cleaning up in the kitchen after mealtime...so cleaning the house, we usually do together. She’s more the shopper. I’ll usually go along and ‘what do you need me to pick up?’ - that kind of thing.

Two participants in this study reported that their spouses were primarily responsible for household tasks and chores. One participant stated:

I should have [done more of the chores]. I should have picked up...it would have been good if I had dinner happening when she came home, but most days, I didn’t...really, [my wife] is the more responsible one when it comes to doing that stuff, and she did, I imagine, the better share of it all the way through, to be honest about it.

There was no singular pattern regarding the division of labor in the participants’ families; rather, the responsibility for household chores varied from family to family.

Role Models

Eleven of the twelve participants reported having either role models or some guidance to help them figure out how to parent. One participant reported having no guidance or role model. Two themes emerged with regard to role models for fatherhood. Participants reported a range of role models that included family and friends, or receiving guidance from parenting books. Alternatively, participants reported a relative lack of role models, and reported figuring out for themselves how to parent. There was substantial

overlap in these two themes. The most common response (n=8) was that the participant had a role model, but primarily learned how to become a father on his own.

“My Main Influence Was my Wife”

Nine participants reported having role models for parenting. Eight of the participants looked to family members or close friends for models. Participants named wives, their own parents, grandparents, and cousins as role models. One participant received modeling from midwives following his son’s birth. Four of the participants reported only female role models, such as wives, mothers and grandmothers, while five named both male and female role models. One participant stated that his role models were “my mom – my grandmother, too. Some days after school, we’d go to my other grandmother’s house. So I guess those three women.” Another participant reported that his father was a role model:

I guess it’s natural to automatically say my own dad. There are parts of the way his relationship is with me, and also with my sister, his daughter, that I want to be similar, but other points that I don’t. So I can use that as a resource for what I want to do and what I don’t want to do...I do have close friends who have children, and I do look at them.

In addition or as an alternative to role models, some participants (n=5) reported receiving guidance from books. Three participants who received guidance from books also had role models, while two participants did not report role models. All five participants reported that their spouses read books and relayed the knowledge to the participants. One participant stated, “my wife is a big reader. With number one, she read every what to expect when you’re expecting kind of book that is out there. I’m not a big reader, but she would relay all the important information to me, so we sucked it up that way.”

Eleven out of the twelve fathers who participated in this study reported having either role models or guidance in the form of books.

“We Really Did Just Fly by The Seat of Our Pants”

Though nine participants reported having role models, it is important to note that eight of the nine participants also reported figuring out parenthood on their own. The role models were reported to be guidance or inspiration in the beginning, but eight of the fathers reported learning how to parent primarily through experience.

A total of nine participants in this study reported learning to parent primarily through experience. Eight of the participants reported that the learning process was done in tandem with their spouse, while one reported figuring out parenthood alone. One father stated:

I think we did what everyone must do – we rejected to some degree our parents’ way of doing things. In a way, I think everyone must figure it out on their own to some degree. You want to feel like you’re doing it yourself. You don’t want to feel like everything is prescribed for you. You want to feel like you know something – like ‘of course, this is the best way to do it’.

Another father stated, “I think it was instinct. I remember we used to say that. I mean, we had no idea...but pretty much we just did it. And we did it together. You’re asking me as a dad, but my wife and I are very close and we worked very closely together at it.” Another participant stated, “My wife was there every evening, so I always felt like we were working on it together, but I was doing a lot of the work at home, by myself. But still, she was there... I just kind of had to feel my way through it, and kind of learn.”

One father reported having no guidance or role models:

I don’t know if there are inspirations. There are life events that go one way and you think, ‘I’m going to do it this way because this happened’. I learned from my

experiences growing up. I think there are three kinds of experience. There's your experience growing up, there's watching other people with their kids, and there's going through it yourself. You have this baby and he's crying. You just try something.

A subsection of fathers (n=4) reported having a supportive network of family and friends. One father stated:

My main influence was my wife, the way [she] and I could sort of rely on each other. We really do support each other, and so [my wife] I would say, is number one...I've mentioned my mom was a big influence. And also, a few friends who have also been going through this at the same time. So again you have this sort of support network. That whole, 'it takes a village' kind of attitude, where you can pick up the phone and commiserate with a friend who is going through something similar...and that's been very helpful. It's been nice to be able to rely on that.

Another father stated, "grandparents are two doors over, which is really nice, so we spend a lot of time over there. That was helpful, too, because we could sometimes just drop him off. If I was planning on doing something, I could drop [my son] over there for an hour or so. We still do that." One father reported having a friend who was also a stay-at-home father. He stated, "[He] and I would talk, we would bounce ideas off of each other. We'd just laugh, be boys, giggling about this, that and the other. I think in a way, when we were both doing the stay-at-home Dad thing, that we looked to each other for support." The four participants reported having a network of friends and family to help with childcare or to provide emotional support.

The Role of a Primary Caregiver

Though the responses of the participants to the question of how they understood their role as a primary caregiver varied widely, three patterns emerged: 1) fathers thought of themselves as stay-at-home parents; 2) fathers viewed their role as primary caregiver

as one of responsibility; and 3) fathers viewed parenting as an activity to be shared among both partners. Eight participants' responses fit into one of the three patterns. Four participants reported divergent ideas of what the role of primary caregiver entails.

"I Was a Stay-at-Home Dad"

Three fathers reported that they understood their role as being a stay-at-home parent. One stated, "I don't think of myself as a primary caretaker. That's a very clinical-sounding word. I stay at home with [my daughter]. During the day, I'm the one she looks to for protection and teaching." Another father stated, "I felt very strongly that they should have a parent with them growing up, when they're infants, like from birth. I think it's really important to their welfare...basically I felt that someone had to do it, and I was the one who was available." These fathers defined their role as primary caregiver by distinguishing themselves as the parent who stays home.

"I'm the Guy Who Takes Care of Things"

Three fathers reported that the role of primary caregiver principally involves responsibility. One father stated:

It's a huge responsibility. Being the primary caregiver at that age, zero [months] to two years, I find that you're just supplying the basic needs. That's really the bottom line...holding, yes, you give them love and you give them attention, but once they get to one to two [years], that's when you're starting to be a role model, where they're obviously learning from you.

Another father stated, "I understand it as my obligation. I'm a special instance because I didn't have a full-time job and a whole lot of responsibility when we started. I didn't have that daily thing. So in certain respects, it's the one obligation I have in my life." Three participants reported that the role of primary caregiver is equated with responsibility to the child(ren).

“We Did it Together”

Two fathers reported that parenting is a shared responsibility between partners.

One stated:

My responsibility as a parent is to make sure they're safe and learning the right things to do, which is a major challenge. There's no handbook...I don't think it's just for the primary caregiver. I think both parents should play a major role. One of you has to work to provide – that's just the way it is. But that shouldn't mean that they shouldn't be very involved with the kids, too.

Another stated:

There are so many caregivers in a child's life – schools and teachers and relatives and friends and friends' families. Caregiving and nurturing is really a shared responsibility, in my mind. But it's really the person who – I won't say who makes the decisions – but who has the responsibility probably more than half the time. My wife and I certainly share parenting.

Two fathers reported that parenting is a shared task, and that the roles of the caregivers in a child's life are not necessarily defined as primary and secondary.

Four fathers' understanding of the role of primary caregiver did not fall into one of the above-mentioned categories. One stated that his understanding of a primary caregiver was “loving, nurturing, teaching, taking care of not just the child, but the spouse. It's pretty simple.” Another stated:

You feel two different ways about it. One way is that it's so hard. It's the hardest thing. You constantly have to be on. There's no break. I'm the kind of person who likes to be mentally stimulated. I like my job because I can think about things. So from that perspective, it was hard a lot of the times going through not even a whole day, but even a half day – I was counting down the moments until [my wife] came home. I was like, ‘alright, she's going to be here, I'm ready to go and do something else’...but on the flip side, I really enjoyed it, and it was awesome to feel like I could do it...so it was both sides of that – the greatness and amazingness of it, and the non-stopness of it.

Another father stated that being a primary caregiver “centers around raising the child, basically, so it means giving the attention to the children when they need it most.”

The participants were also asked if their understanding of the role of primary caregiver changed over time. Nine participants reported that their ideas about being a primary caregiver did not change over time, while three reported a change. One father stated:

My concept has always been that it's a really hard job. I've always thought that parents should be sainted. It's really that difficult...so my concept didn't change. It was a little bit strange being the primary caregiver and not working as much...I think it was more personal. I was a little bit changed, to be in that role.

This father reported that his concept of what it means to be a primary caregiver did not change, but he himself changed to fit the role. Another participant stated, "No, I'd say [my idea] stayed the same. It was really about what I expected. I had, as a seventeen through twenty-one year old, been around young children...so I think I knew what it was all about – sort of...so I think I was pretty well mentally prepared for it."

Three fathers reported that their understanding of the role of a primary caregiver did change. One stated, "I was completely in the dark when I started, so it has been an on-going learning experience for me, as well. I'm changing and developing as much as they are." Another father stated, "There's no way to understand before you have a kid what it's going to be like. There's no way to get an idea about it until you do it." Another father stated:

I didn't know anything about it! All I knew was I thought it was helpful for the kids. Now I know what it's like. I didn't know how brutal it was going to be, really, to be honest. Well, I had no idea what it was going to be like, but that was really good, because I had a lot of enthusiasm. And the first phase I think is really the hardest. I mean, it's really tough...I think it's just a lot more demanding than you had any idea of until you're in it. There's no way to explain it, it's something you just have to experience to know. You get a fair amount of bitterness. You can, I mean, really. You get a lot of joy – it's a wonderful experience, but you're sort of left on your own, as a man, doing this. So you have to weather that, endure it. That's something that I think I've learned about it.

Three fathers reported that their concept of the role of a primary caregiver changed after becoming one, while nine reported that their understanding remained unchanged.

The Role of a Father

The participants understood their roles as fathers to be multifaceted. However, two themes emerged when fathers discussed what their understanding was of their role as a father: 1) fatherhood involves being a role model; and 2) participants identified as parents rather than fathers, and thus saw their role as similar to that of their spouse. Five fathers reported that their role entailed being a role model and teacher. Three fathers reported that they identified more as a parent than as a father, and that their role as a parent did not differ grossly from that of their spouse. Four fathers' responses differed from the above themes.

“You Want to be as Good a Role Model as You Can be”

Five participants reported that teaching and role modeling constituted a large part of what it means to be a father. One participant stated on fatherhood:

Role model, mentor, friend, disciplinarian, husband – it's all those things. It's a lot of roles, and when you're doing it, when you're the main one at home, I think you appreciate a lot of those roles. I have a lot of friends and I hear about what their husbands are like, and they come home and they want to play with the kids, but they don't really want to get in there and do the work that needs to get done. I never saw it that way. I think I'm more tuned in to that now, because I've been doing it.

Another father stated that fatherhood “means responsibility, it means role-modeling. It means choosing the right words, I guess, being compassionate, slowing

down...understanding, patience – that’s huge.” One father stated that his role as a father is:

[To be] a role model, obviously, to be a positive influence on my kids’ lives as they grow...it is about making sure that I’m helping them to be great and wonderful people as they grow up. That’s a lot of pressure, because at the same time, I want to make sure they have a lot of freedom to grow up to be who they want to be. I hope that I will be able to teach them to make the right decision. It’s a treacherous world we live in, so that’s what it really means to me to be a father. I want to make sure that I just give them the right kind of tools as they grow, to be the right kind of person, I guess.

One father stated described fatherhood thus:

On the emotional end, I treasure it. The aspect of how incredible it is to have a child and to watch him grow just blows me away. From the aspect of how much we’ve had to invest, time-wise and emotionally, and the fact that we could do it...that gave us a real sense of accomplishment...so those are big things. In terms of being a father, of what’s important in being a father, I think it’s important to be there, to be around and to be involved. So much he just wants you to be around, and just doing stuff with him...it’s nice to be around and just be in the house, but also to be with him and to engage with him has been so important...showing love, being a good example.

For all five fathers, being a positive role model was an intrinsic part of fatherhood, though not the only part.

“I Don’t Know if I Can Define my Role as a Father Any Differently From my Role as a Parent”

Three participants in this study reported that they identify as a parent, as opposed to a father. One father stated, “I don’t think there’s a whole lot of separation between what I do and what my wife does. It’s not like, this is what Dad does and this is what Mom does. There’s just not a whole lot of distinction.” Another father stated:

I just don’t look at it that way. To me, I’m just not that role invested. To me, it’s really just being a parent. There certainly are differences between being a father and being a mother, but to me, they’re just defined by the family. To me, it’s just

so important – when do they need me? How much do they need me? How can I help them? How can I help them be independent?

Three participants identified as parents, rather than fathers. They reported that parenting was not divided into the roles of mother and father.

Other Roles of Fathers

Eight fathers' understanding of the role of a father fell into the above themes, while four participants' responses did not. One father stated that “to be a father is to support, to guide.” Another stated that:

a father to me is someone who is there for their child or children on all levels - emotionally, and I do think, financially. [It is] someone they can turn to, or just know that they are there. And also, someone who provides structure. I don't think a father's and mother's role necessarily have to be that different from how they have been in the past, traditionally.

One father stated, “It's a big responsibility. You're shaping someone's personality. It's very scary to be imprinting that on somebody.” Another father stated, “it means I can't do my own thing anymore.” Four participants had divergent ideas about the meaning of fatherhood.

Participants were also asked if their understanding of the role of father changed at all over time. Six participants reported no big changes in their concept of fatherhood, although they reported changes in details; five reported changes; and one reported that he never considered the meaning of fatherhood before becoming a father.

Six fathers reported that their concept about what it means to be a father did not change over time. One stated “the basics were the same, I don't think anything big changed, but the details were different...it was just fleshed out, parenting, seeing all the details of how it works.” Another stated, “in our relationship, we've always shared the

duties. We've always been, at least I think, equal partners...we both shared in the childcare as much as we could...so I don't think it really changed a lot, except I just did it more." One father stated:

I don't think the ideas have changed, but the realization of what we gave up is concrete. When I was single, I would go to my married friends and say, 'let's go out. Call your wife and tell her you'll be home late'. I didn't have a true understanding of what it meant to have that commitment to your family.

Five fathers reported that their understanding of fatherhood did change over time.

One father stated, "The thing that's really changed for me is the level of stress. I've always believed it's stressful, but experiencing it is a little different. So that has changed. The other thing is just the fear – fear that something might go wrong." Another father stated:

I think it must have [changed], because of the way my perceptions of my own father have changed. I always thought, 'he's my dad and he's great and we have fun together', but then when I was thinking about it in terms of the fatherhood experience I'm having, and what that means and what you have to invest, that was a huge thing that he wasn't doing.

Another father who reported change stated, "probably a little bit [changed], only because the last year has been a weird year for us, not only because of the presence of [my daughter], but a lot of change has happened in the past year for us...and as a result, I would say that part of fatherhood for me is stability, providing stability." The five fathers all reported that their idea of what fatherhood means has changed since becoming a father, although the changes they reported varied.

One father reported that he had never thought about fatherhood before becoming a father and thus could not say if his concept had changed. He stated, "I don't think I had any thoughts because I was so self-indulged in my twenties. Seriously, I don't think we

sit down and think about it in our twenties, what we're going to be like as parents. At least I certainly didn't."

Half of the fathers in this study reported that their concept of fatherhood did not change over time, but some daily details changed; five men reported changes in their understanding of the role of father; and, one father did not think about fatherhood before becoming a parent.

The Good-Enough Parent

Eleven participants were asked if they had an image or an ideal in their minds of characteristics that constitute a good parent. All eleven participants described their image of a good parent. There were few overlapping characteristics that emerged from participants' responses; rather, participants' responses were individualized and linked to their own experience. Four fathers reported that they try to parent in accordance with their image of a good parent.

One father stated, "I had more pictures in my head of what a bad parent looked like. I certainly wanted to avoid the big mistakes. I wanted...a cooperative approach, a non-combative approach." One father stated that characteristics inherent to a good parent are, "patience, good listener, simple words, good role model. I think those are the most important ones that we often try to remind ourselves of". Another father stated that a good parent is "a parent who is very attentive to their child, who deals with problems that come their way." Another participant stated, "I think parents who support their kids. Ask enough of them, but not too much, get involved with them, go to their stuff, cheer them on. Pick them up when they fall, but not too quickly."

One father differentiated between the ideal parent and a good parent. He stated:

[The ideal parent is] probably one that does lots of crafts with their kids, reads to them all the time, is totally on top of things, probably does all the housework after they go to sleep. I don't know if that's realistic at all. A good parent has to be a healthy parent in their own mind, in their own person...definitely to teach your kids to do the right thing, watch what they're doing, know what they're learning. I think we can be their teachers, first and foremost.

Another participant's image of a good parent was:

Somebody who is very grounded in what their belief structure is, in what their idea of what life's about. But yet also an ideal would be open-minded to ideas other than your own, not closed to other ideas. But you are – I mentioned the word stability before – stable, both emotionally and financially, so that you can provide an even plate for your kid. Someone who can expose their children to a variety of things, not just what they, the parent, know.

Four fathers talked specifically about how they try to match their own experience to their image of a good parent. One father stated:

I think of myself and I envision a good parent being someone who can walk the line between telling them what to do and letting them experience and learn from their mistakes. I like to walk the line and push them a little bit, but let them experience as well. Patient, listen to what they have to say...caring. I think listening is a big one...I try to pay attention to who they are becoming and try to work with their needs. [My son] and [my daughter] are two different beasts and they need different things, they need different approaches. Just trying to always self-evaluate. At the end of the day you ask yourself – and I think this is an important thing to do – you ask yourself, 'is what I did today the best thing for that child?'

Another father who reported that he tries to live up to his image of a good parent stated:

Yeah, I strive to live up to that image, but I don't usually get there. You need to have a lot of understanding. Don't get too angry, because it's really easy to get angry. On the other hand, don't be too lenient. And the requirements change as your child grows, so...you have to adapt as circumstances are evolving.

A third father stated:

I think fun and upbeat, creative and loving and calm. And I also think that a big challenge is discipline, and so in addition to being that fun person and friend, you also have to lay down the law, in a way. It's the hardest thing to do, because you love that person so much...so that's part of the ideal- being able to do discipline and be consistent with the discipline...so discipline them, but do it in a loving way.

The fourth participant who discussed his effort to match his parenting style to his ideal stated:

A good parent can figure out why their kid is doing what he's doing and come up with new and creative ways to lead him in the right direction. Parenting is about instilling true values on situations, social and otherwise, and how to deal with them. When your toy breaks, how do you fix it? When somebody pushes you, what do you do? I tend to lean towards social aspects, how to deal with people, because that's where I was lacking.

One father reported that his image of a good parent applied broadly to parents and was not specific to him. He stated:

I would certainly have a couple of things that I think every parent needs to be successful and one of those things is to be attentive, to be able to notice something. I almost want to call it a sixth sense...consistency is another one to being a good parent.

There was no single image that constituted a good parent. The following characteristics represent a sample of attributes that the participants viewed as ideal: calm, attentive, creative, consistent, patient, self-evaluative, understanding, supportive and stable. The variety of answers reflects the individual experiences of the participants in this study.

Are You as Good a Caregiver as Your Partner?

All twelve participants were asked if they perceived themselves to be as competent at caregiving as their spouses. Six fathers reported that they are as good at parenting as their spouse; three fathers reported that they believe they are not as competent as their partners; two fathers reported that they and their spouses parent differently; and one father reported that he has never thought about what his wife is like as a caregiver.

“I Think I’m as Good a Caretaker”

Five fathers reported that they are as competent at caregiving as their spouses. One father stated, “in some ways, I’m more practiced...yeah, I think I’m as good...again, I don’t know if my wife would be the perfect person to stay at home with him...I think I do a good job of getting that done and I think I’ve got the right stuff to be able to deal.” Another father stated, “oh, [I’m] better! I had more time to learn. Definitely as good, yeah. I think I did a good job with them.” Another father who reported feeling as competent as his spouse stated, “I do feel really confident.” One father stated, “I think I am; I don’t think she thinks I am.” Five fathers in this study reported that their caregiving skills are equal to that of their partners.

“I Don’t Think You Can Ever Replace Mom”

Three fathers reported that they believe their spouses are better caretakers. One father stated, “Overall, I think she’s better at it. I think she’s more patient. She’ll sit and rock him until he works through it; I have a harder time with that. I learn a lot from her – she makes it look easy.” Another father reported, “of the two of us, she can sit down and talk and understand the kids better.” A third father stated, “No, no I’m not as good as she

is. It's hard to say...I look at my wife and see how she does things. She makes it look easy. I don't know if that's real or if that's a perception." Three of the fathers reported that they are not as skilled at caregiving as their spouses.

"I'd Say we Parent Differently"

Two fathers reported that they parent differently from their spouse, and one father reported that he and his wife are equally skilled despite differences in parenting styles.

One father stated:

I'd say we're different caregivers. We both have strengths and weaknesses. I don't think you could say better or worse. If you asked the kids, they'd say their mom is better...we're just different. We parent the same and we have the same expectations, and we communicate well about our parenting, but you just do things slightly differently.

Another father stated, "We parent differently. I think we're on the same page with a lot of things, but we're different people, and while on some fronts we parent the same, on other fronts we parent differently. I think we both do the best that we can. I think we're really good parents."

One father in this study reported that he has not thought about his spouse's skills as a caregiver. He stated, "I haven't stopped to think about what she'd be like. Her career is very much a part of who she is. I'm not sure how she'd adapt to being at home. When she's there, she's a terrific parent."

Gender Issues

This section of the chapter will be divided into four subsections. The first subsection will address how long the role of father has appealed to the participants. The second subsection will address the participants' views of the American stereotype that

primary caregiving is associated with femininity, rather than masculinity. The third subsection will address the participants' views on how being a primary caregiver has fit or not fit into their gender identity. The fourth subsection will address whether the fathers' sense of masculinity has changed since becoming a primary caregiver.

"I've Always Known I Wanted to be a Father"

Four participants in this study reported that the role of father has always appealed to them. Three participants reported that the role of father appealed to them, but they waited until they met the right partner or until the timing felt right. One participant reported that he did not want to be a father until he met his partner. One father reported that being a parent did not appeal to him at all. Two participants reported that they had not thought about fatherhood before becoming parents.

Four fathers reported without qualification that the role of father was always a part of their identity. One stated, "Yeah, I always thought I wanted to be a dad." Another stated, "I think I always knew I'd be a dad."

Three fathers reported that the role of father appealed to them once they met the right person or when they felt ready to become a parent. One father stated:

Yes, yes, it's always appealed to me. But when I was in my 20s, I would say it appealed to me, but I knew that I wasn't going to do it for awhile. I had no desire to do it at that time. But I knew I would later on. I didn't know when that later on was going to be, but I knew it wasn't then. Let's say that I was single and not dating anybody. I wasn't saying, "gosh, I have to be a dad right now". There were a couple of times when I was in a relationship where I thought, "am I ready to take this plunge and get married and have kids?" And ultimately the answer was no, I wasn't ready personally, and not with this person. So you have to really meet the person you want to spend the rest of your life with before you're ready to be a parent. I didn't want to be a parent without that person.

Although the role of father had always been appealing, timing and meeting the right partner influenced when three fathers felt ready to become parents. One father reported that he never wanted to be a parent until he met his partner. He stated:

For the longest time, I was sort of carefree. I wasn't interested in commitment, relationships, marriage and all that stuff. I was just enjoying being a guy, doing whatever, whenever. When [my wife] and I first met, for the first few years, we could just easily pick up and go somewhere. So the idea of having kids and starting a family at that time was not altogether something I wanted to do. But one of the things that I realized – and it's been very lucky for me – I realized that I found the right person to be with...we seemed to be able to mesh so well together that almost any possibility was open and would work. Then I started to realize that if I was going to be a father, then I would be a husband and a father with her...and until I met that right person, it never dawned on me that I'd want to be a father.

One father reported that he did not want to be a father, even after he was married.

He stated:

I always thought, "well, maybe I would make a good father", but it wasn't something that I wanted to do. I was so happy to get done with college because I felt that all the way through school, it was just such a prescribed life, and it was hard work all the time, and it wasn't what I wanted to be doing, and I was so looking forward to getting through that, and I felt like when I was done with that, I was free. And I felt like I could do whatever I wanted, and I'd go rock-climbing all the time, and skiing, and I'd just have the greatest time, which I did for awhile...I always saw [fatherhood] as the end of fun, in a way. So it took a lot of work on [my wife's] part to bring me around. I wasn't really into the idea.

Two participants in this study reported that they had not thought about fatherhood before becoming parents. One stated, "I didn't really think about it...I wasn't one of those kids that was like, 'I can't wait until I have my own children'. When it happens it happens." The other father stated, "I don't think I thought about it. It's something that just happened."

“We’ve Come a Long Way Since Ozzie and Harriet”

Traditional gender roles in American society were presented to eleven of the twelve participants. It was explained that research on the subject of parenting still generally assumed that primary caregiving was associated with femininity, whilst secondary caregiving was associated with masculinity. Participants were told that many research studies labeled fathers as active participants or highly participatory based on the level of caregiving that fathers engaged in, but that no labels were created for mothers. It was explained that there seemed to be a message in the research that fathers who engage in caregiving activities are worthy of study because mothers are assumed to be the primary caregivers for children. It was also explained that an assumption is made that girls are raised to be caregivers, but boys may not be. Participants were asked for their opinions about these stereotypes. Five fathers reported that they believe that there are innate differences between girls and boys, but that the gender differences do not mean that men cannot be natural caregivers. Four fathers reported that they disagree with society’s stereotypes, and that the stereotypes, while influential, are beginning to change. Three fathers reported that they believe that women are natural caregivers.

Five fathers reported that they believe that there are inherent differences between boys and girls, and thus there are differences in the way that parents raise boys and girls.

One father stated:

I think it’s absolutely true. Little girls from the time they’re infants, I see people giving them babies to play with, and they grow up and they play with babies. And you look around here and you see trucks and planes and trains all over this house. A lot of it’s really their choice. We tried to get him to play with dolls and things, just to teach him to how to be a parent, and he just wasn’t interested. He wanted to play with his trucks. I wonder how much is nature and how much is nurture. I think there’s a large and probably misunderstood role of both. And it’s not to say

that nature is entirely proscriptive, that things can't change. I think men can be caretakers, no question. And women can be aggressive. But society plays out its roles very, very effectively. And that's something that's in my mind, too. I want to change that. I want to raise gentle, compassionate boys. I want to raise boys who will someday be good husbands, be good fathers.

Another father who believed that there are innate differences between boys and girls stated:

What I find interesting is that I've seen this behavior in [my daughters], that even though I was the parent that was most there, on a daily basis, I still found that they seemed to gravitate to [my wife] differently than they do to me. There is a mother-child bond that is very different from a father-child bond. I have seen it and I can't deny it...you would think that since our roles are supposedly reversed, you wouldn't see as much of that, but you still see it. Why is that? I think that on a physical, base level, a genetic level, there is a difference between men and women as far as how their children act with them...I think the father is just as capable as the mother to do anything the mother can do, but I think from a bond issue between child and parent, I think there is a genetic or physical, evolutionary, if you will, dynamic there.

The fathers believed that there are natural differences between boys and girls, but that the differences did not necessitate women being primary caregivers. The fathers reported that despite gender differences, men can still be competent caregivers.

Four fathers reported that they disagree with society's stereotypes. One stated:

Well, I don't agree with that [idea that primary caregiving is associated with femininity]. But I agree with the societal influence on everybody. You have to confront that with people who say things like, "Oh, you're Mr. Mom". And that sort of encapsulates that attitude. I think it's not femininity to stay home with your kids – it's just that you're their parent. I guess that's just the traditional role that mothers are the ones who stay home, generally. Stay-at-home fathers are classified as a small segment of parents, or stay-at-home parents, or caregivers. I don't think it's your femininity, your softer side – but in a way, there's a kernel to that because you have to keep your compassionate and caring side more on the forefront, rather than your "I've got to get out there and work and confront the world" side...but I don't know if it's male or female, necessarily. Everybody's got those forces in them.

In addition to disagreeing with society's stereotypes, the fathers believed that the stereotypes are now dissolving. One father stated:

I see that there is a shaking and a changing of society...I meet dads who are primary caregivers, who are doing laundry and doing shopping. They go to the grocery store. When I was a kid, you never saw dads in grocery stores...I definitely think that maybe the roles have looped around toward the middle.

Three fathers believed that in general, women are natural caregivers. They also reported that though women are natural caregivers, they need not necessarily be the primary caretaker. One stated:

If and only if I didn't need to [work], I would probably feel that much more comfortable and embrace [being a stay-at-home father] that much more. But I still do view raising children as naturally more the mother's role. I think just by nature it is...by and large, I personally believe that as people, we are just another animal on this planet, so therefore, it's not surprising that the woman is the caregiver. I don't think it has to be, but I think it's natural the way it is.

Another father stated:

I think in general, women are natural caregivers to children. I don't know if that's true for my wife, and in our circumstances, in some respects, I think it's good that I'm the caretaker. I might have a little more patience than my wife in certain things. In general, women have that extra ability, my wife included, to stay up until 2 o'clock in the morning and not get much sleep and then wake up and do it again. Certain things I think are innate in women to be parents. I think it takes a special man or a different type of man to be a parent...I think that a main issue for most stay-at-home dads is that masculine thing, because your identity is really wrapped up in what you do.

Five participants reported that there are inherent differences between girls and boys that contribute to society's stereotypical roles. Four fathers reported that they do not agree with the stereotypes, and that they further believe that the stereotypes are beginning to change. Three fathers reported that they believe that women are, in general, natural caretakers of children, though they need not be the primary caregiver.

“It’s a Different Way of Seeing Yourself, But it Works Pretty Well”

Eleven of the twelve participants reported that being a primary caregiver is in accord with their sense of masculinity. One participant reported that being a financial provider to his family is very important to him, and that being the primary caregiver of his child does not fit with his concept of masculinity.

One father stated, “I don’t see anything that’s un-masculine about it.” Another stated:

Oh yeah, yeah, definitely it does [fit]. I don’t know if I was particularly raised that way – my dad was a very nice, caring man, but always worked full-time...I don’t know that that wasn’t a part – a man being compassionate and loving and nurturing and also being strong. It didn’t seem like a conflict. That seemed normal to me.

Another participant stated, “I was open to the idea. I was comfortable with it. I was okay with it. I feel like I did it well. But I think another part of it is our values. We believe that we want to raise our kids and not some daycare.” Another father stated:

Yeah, I think it does, but I don’t think society does yet. A real man should be able to rise to any challenge and take it on. If you want to think in those terms of a real man rising to any challenge then this should certainly be one of them. And it’s definitely the hardest job I’ve ever done...it’s really taxing.

One participant stated, “Yeah, absolutely. My definition [of masculinity] doesn’t change. My definitions of masculinity and femininity aren’t very mainstream.” Another father stated:

I think so, to a degree. I so much enjoy being active and getting out. And to me, it’s difficult to a degree, and so part of me is like, “oh, those things that I used to do that were manly things, it’s so hard to get out and do them”...so there is that, and I don’t know if I equate that with manliness, but the freedom to do whatever. But there’s so much about [fatherhood] that’s so intense, and I feel like when I’m with [my son] I’m like, ‘check me out, I’m a dad and this is my kid!’ So that’s a cool feeling and I think manly might be what that is, what gives me that feeling.

One father in this study reported that his role as a primary caregiver did not fit into his concept of masculinity. He stated:

Because I have such an attachment to the financial providing element, I would say it has made me feel less powerful. What's the word? Emasculated. I could also say I'm a stronger person for taking the role on, in my eyes, or in others' eyes, perhaps. But there is a certain conversation that goes on in my head about that.

Eleven of the twelve participants in this study reported that the role of primary caretaker fit into their definition of masculinity.

"I've Never Been Much of a Masculine Guy"

Nine of the participants reported that their sense of masculinity did not change since becoming a primary caregiver. Two of the fathers reported that their gender identity did change as a result of being a primary caregiving father. One father reported that he did not know if his sense of masculinity changed.

Nine fathers reported that their gender identity remained mostly unchanged after becoming a parent. One father stated, "I wasn't a super-macho type to begin with. It wasn't a gender thing – it was a self-image thing. I went from being a working professional to being at home." Another father stated:

I don't know if I ever knew what it was to be masculine. I'm certainly very heterosexual, but I grew up with three sisters and no brothers, and I've been told that I'm more – not that I'm less masculine, but that I have feminine qualities and masculine qualities. I don't think I ever had a real thing about masculinity.

Two fathers in this study reported that their sense of what it means to be a man has changed since becoming a father. One stated:

I think I've just become more comfortable with those different facets of masculinity and those different roles. Realizing that doing laundry doesn't make you weaker in any other area. It's made me actually really frustrated with a lot of

other men. Like I said before, I was the interloper. So I'd be at the play groups and I was the only man there and I realized that the play group was a lifeline for those women. They could actually interact with other moms. I'd hear them say, "well, my husband hasn't been to a grocery store in years" and all the other moms would say, "oh yeah, that's awful" or "oh yeah, yeah, I know what that's like" and I would chime in and say, "what the hell is wrong with your husband? What's he doing? He brings home a check, good for him". I was more surprised to find out that what I did wasn't part of the norm.

The other father stated, "I think my gender identity has been evolving, even long before I had kids. I think that's been changing throughout my life. I think that having kids is just another step in realizing what it is to be a man in this particular society."

One father reported that he was not sure if his sense of masculinity had been affected by being a primary caregiver. He stated:

I don't know if it's masculinity. I feel like I look differently at the people that there are people that I played Ultimate Frisbee with twice a week. And then we got pregnant and had [my son] and I looked at them differently because they are still like, "I went to this tournament and I was playing with this team and we almost went to nationals" and blah blah blah. And that's so what they want to be doing and for some of them that might be why they aren't becoming parents, so that they can do that stuff, and a part of me is like, "wow, I wish I could be doing that", but a part of me is like, "wow, that's just so unimportant". And I feel like they're missing out on something huge. I don't know if masculinity comes into that at all.

The majority of the participants in this study reported that their masculinity remained unchanged after becoming a primary caregiver. Three out of the nine participants who reported that their sense of gender identity did not change also reported engaging in activities or hobbies that they considered masculine. One stated, "there are other things that I do [in addition to caregiving]. I make beer at home now – it's kind of like a science experiment. I test out each batch. And I still teach on weekends...it helps me exercise that part of my identity – my mind." Another father stated:

It's not like I'm in touch with my feminine side or any of that silliness...but every now and then I do need to get in touch with my masculine side. I play hockey once a week. But it plays on the humorous side – it's never a serious or real, “am I man enough?” kind of thing.

Another father reported that since becoming a primary caregiver, he has begun to landscape his yard. He stated, “I started doing a lot of work outside. I got a chain saw and a backhoe and a little dump truck, and whenever I had the chance, I would go outside and blast at something out there. I wasn't exercising that [masculine] side, as a child caregiver.”

Reactions to the Participants as Primary Caregiving Fathers

All twelve participants were asked to describe any reactions they received from society, family and friends regarding their role as primary caregivers. This section will be divided into three subsections and presented in the following order: the societal responses; the reactions of friends and family; and, the differences between the reactions from strangers and family.

“I Was a Novelty”

Ten out of the twelve participants reported receiving reactions from strangers when out in public with their children. The participants reported a range of responses from others – the most common response was surprise, followed by support. Though the participants were not asked if they received responses in specific places or during specific activities or outings, fathers repeatedly reported reactions from mothers at play groups. Seven of the fathers in this study reported a societal response from a play group.

Reactions from strangers varied. Four fathers reported thinking that the reactions they received from strangers were based on the geographic area in which they lived. Three of those fathers reported living in areas where it is fairly common for fathers to stay home; one reported that he lives in an area where it is unusual for fathers to stay home with their children. Other fathers reported a range of reactions. One father stated, “some people treated me like a novelty – “this is ***, he’s a stay-at-home dad.”” Another father stated, “I got the impression that they had never encountered that before. The first thing out of their mouths was, ‘Oh, really?’ ...they were surprised. I was a novelty, I was a circus act.” Another father stated, “Some people loved it. I was the dad at the beach, I was the dad at play group.” Three fathers reported being referred to as “Mr. Mom” often. One father stated, “I’d hear people say, ‘Oh, that must be so lonely’. No. I’m home with two wonderful children who are growing up, there’s nothing lonely about it. It was a blast.” Other fathers reported receiving rather critical reactions. One reported receiving responses from strangers when his son was an infant. He stated:

When he was a crying baby, you’d see a little more response. I think you see dads with older kids more. [My wife] was in a wedding party once and [my son] was really upset, but she was right in the middle of introducing the wedding party and everything and he was upset and tired. He must have been two months old...and I was walking and rocking and swaddling and taking care and he was just upset and probably wanted to nurse and probably wanted mama and to fall asleep. And I was walking and trying and working and it wasn’t working, and in this 20-minute period, I had three moms come by...they were all older women, probably grandmas-and one said, “oh, where’s that baby’s mama?”...and another one said, “you’re not holding that baby right”...and after a full twenty minutes of walking, I had to sit down, and just as I sat down, a third grandma came by and said, “you’ve got to get up and walk with that baby – walk around, and best of all, go find that baby’s mother” or something.

Seven of the twelve fathers reported that they participated in play groups with their children. All seven reported responses from the mothers at the play groups. One father described his experience at play group:

I'm the only dad with the two girls and I'm the only adult male in the room – plenty of boys, but I'm the only adult male in the room. It was very strange sometimes, it was very interesting. That was always quite the experience, to feel like a novelty. Look, there's an elephant in the room. Does anyone want to talk about the elephant in the room? No, we won't talk about the elephant in the room. That was for the first few weeks, but after a couple of weeks, you obviously have so many things in common with the other parents in the room, it not longer becomes, "oh, there's only one dad with all these mommies". You're talking about the same thing, because everyone's got the same subject to talk about...after awhile you realize you have commonality there, but it was so awkward at first.

Another father who attended a play group stated:

I'd bring him to play group and generally I was the only father. My experience was that some of [the mothers] were great, others wouldn't talk to me...one of the dads came, and the mom was joking that he came because he just wanted to be sure that I was a safe guy for his wife to be around...I don't think it's a trust thing, I think it's just, "well, why would a guy be here? Is he trolling for women?"

One father received positive responses from the mothers at play groups. He stated, "I was still the only guy at a lot of the playgroups. And I had a lot of moms say, 'Oh, my husband would never do this', stuff like that. Like, 'It's so great that you'd come here, my husband wouldn't come here.'"

Participants reported reactions other than at play group. Two fathers reported that they often received comments from cashiers at stores. One stated, "I'd go to the grocery store and the cashiers would say things like, 'Oh, it must be your day' and I'd say, 'Well, actually, every day is my day' and they wouldn't know what to do with that...it definitely was unusual, and still is unusual for [this area]." One father reported reactions at the

playground from other parents, usually mothers. One father stated, “In the beginning, I had a very hard time going out with him, and I did feel a constant societal thing about whether I should be with a baby or not, being a man – especially during daylight hours, when most men are at work.” One father stated:

I get a kick out of telling people if they ask, although I guess it kind of depends on...who you talk to...if a woman asks, there’s a much stronger comfort zone there, but if a guy asks, “hey, what are you doing?”, and I say, “oh, I’m staying home with the kid,” then there’s a sense inside of a little more reservation on my part. Like, “hey, are you doing to judge that in some way?”

Societal reactions to the participants ranged from support to criticism. Three participants reported speaking to fathers who do not stay home about being a primary caregiver. One father stated, “There was an amount of jealousy from men. They wished they could have that kind of time with their kids.” The other participants reported that the working fathers reported that they would not know how to be the primary caregiver. One stated:

I met dads who said, “oh, I couldn’t do that”...last summer, I went to a party, and [my wife] was out of town for work, and I took both the kids and one of the dads there said, “where’s your wife?” I was like, “she’s [out of town]”, and he was like, “well, who’s here with you?” and I was like, “the kids”, and he was like, “well, who’s helping you take care of the kids?” and I was like, “nobody”...and he was awestruck. He just couldn’t understand how I could be doing this by myself. And I was like, “you wouldn’t do this?” and he was like, “no way-I could never”...and he was like, “do they listen to you?” and I was like, “well, yeah, they listen to me-don’t your girls listen to you?” And he was like, “oh no, they listen to their mother”, and I was like, “oh, that’s a bummer” and he was like, “yeah, kind of”, and he paused and stared off into space.

“I Think They Felt There Was Nothing Abnormal About It”

The participants were also asked what the reactions of friends and family were to the decision of the participants to be stay-at-home parents. Nine participants reported support and positive reactions from both their families and their partners’ families. One

stated, “My family and [my wife’s] family thought it was great. They were very supportive of it. I never felt like there was any stigma attached to it, that they were going to think any less of me.” Two participants reported that although their families were supportive, their spouses’ families were not. One stated, “[my wife’s] mother never really accepted the normalcy of the situation. Apparently she mentioned to [my wife] a number of times that she thought [my wife] should be the one staying home.” One participant reported no reaction from friends and family. Four participants also reported that friends and family members were both surprised and supportive.

“I Never Noticed Any Difference”

Nine out of the twelve participants talked about the differences between the reactions of strangers and the reactions of friends and family. Seven out of the nine reported that there were no real differences in reactions. One stated, “I think it would be hard for people who didn’t know me to know that I was the one staying home.” Another stated, “I don’t think anything was different. I think a lot of people were like, ‘Oh, that’s neat, you get to spend time with him.’” Two participants reported that they did notice a difference in the reactions of family and strangers. One stated:

People who didn’t know me well would come up and say something like, “oh, you’re Mr. Mom”, say something slightly offensive. Or they say, “oh, you’re just a stay-at-home dad, you don’t do anything”. But people who know me knew how much work it was, and what I was going through. They realized this is a lot of work. And plus, they knew I had twins, and that sort of doubled the work. So I think if people are close to you, they will have a better understanding of what it’s all about.

Most of the fathers did not notice a difference in the responses of family and strangers.

The above findings emerged directly from the questions on the interview guide. The next section of this chapter will address one finding that emerged in addition to the questions on the interview guide – the participants’ relationships with their spouses.

Marital Relationship

All twelve participants referenced their partnership with their wives during the course of the interviews. Six participants reported that they have equal partnerships with their spouses, with consistency in parenting styles and a fairly equal distribution of labor. Four men reported stress in their marriage or feelings of jealousy or resentment towards their partners. Two men reported that they have different parenting styles from their wives.

“There’s a Real Partnership There”

Six participants reported that their marriage is a partnership. One stated, “In our relationship, we’ve always shared the duties. We’ve always been, at least I think, basically equal partners...we went shopping together, we cooked together, we cleaned together. So I don’t think [parenting] was a real radical departure from what we’d done before.” Another stated:

It’s always a partnership for us. We have strategy sessions. After the kids go to bed, whatever happened during the day, we’ll talk about it. It just becomes part of the conversations for us...if it’s a discipline thing, we strategize. We talk about what the issue was or is and what we can do to fix it...we’re almost always on the same page. The girls almost never see us disagree in front of them about them. If there’s something that we’re doing differently, we tell each other. We’re always very consistent.

The fathers reported that they worked together with their wives to raise the children and to accomplish housework. There was no clear division of roles or duties.

“The Whole Thing About Marriage is That It’s Hard Work”

Two men reported that their relationship with their partners has been strained since becoming parents. One stated:

I’d say my wife’s and my relationship has altered. Primarily I’d say there’s been more stress and strain than I wanted. I think I expected that there would be, so it hasn’t been that much of a shock, but we have had some more tense moments and arguments and differences.

Another stated:

My wife is a social worker, not by choice. She was steered into it, and she went along with it. She would be happy not to have that obligation, and maybe she would be happier being a stay-at-home parent if she had the choice. So there is a little bit of a point of contention in our marriage about all that.

One father reported occasional feelings of jealousy of his spouse. He stated:

I’m really jealous of my wife sometimes, because yes, she works hard in her job, too, but if she works two days in a row, she works twelve hours, she gets almost an hour to drive home, she gets that time to herself to slow down and relax. She comes home and goes to sleep. She wakes up seven and a half hours later and she gets ready and goes back again. She has another drive to work, she has that time. Meanwhile in those forty-eight hours, I’m with the kids the whole time.

One participant reported thinking that his wife because did not understand how much work it was to stay home with the kids. He stated:

I think it can be really difficult on your relationship...I don’t think my wife understood how hard it was, to be honest, because she was at work. And I always noticed, whenever I had a break, I would go off and I’d forget about it. I’d forget about how much intense work it is when you’re not doing it.

The stressors in the marital relationships were different for the four men.

“Our Styles Are Pretty Different”

Two men reported that their parenting styles or philosophies differ from that of their wives. One stated:

We have different philosophies. When I’m home with the kids, they are out and busy, and my wife has a different approach...we have both learned to just kind of let go of that...I definitely think I’m the mom in the family. My wife is nurturing, but her emotional tolerance is a lot lower than mine...I’m definitely more easy-going.

Another father stated:

I think I’m more straight-forward and direct with what I want, and what I want them to do, but when it comes to nurturing and giving love and tenderness, she’s better than me in that way. I think I let them involve themselves more, and she gets more involved...I picture them working her over a little more, you know, working hard to get what they want from her, and not working me as hard to get what they want.

The men reported that they are able to negotiate differences in styles with their partners when they have divergent parenting ideas.

The findings of this study were organized into twelve categories and presented above. The next chapter of this study will discuss the relevance of the findings to the literature previously reviewed. Additionally, the next chapter will discuss the relevance of this study’s findings to social work practice, theory and social work policy.

CHAPTER V

DISCUSSION

This study sought to answer the following question: How do primary caregiving fathers understand their roles as fathers and caregivers? Some of the findings of this study included: 1) the decision-making process; 2) gender issues; 3) the fathers' views on characteristics that constitute a good parent; 4) role models; 5) societal response; and 6) the fathers' understanding of the role of a primary caregiver and father.

This chapter will relate key findings of the study to prior studies and theoretical frameworks presented in the literature review. Some of these key findings supported the previous literature; others did not.

Decision-Making Process

Russell (1999) outlined eight possible antecedents to fathers becoming primary caregivers. The results of this study, for the most part, did not support Russell's work. Russell stressed that parental explanations for the adoption of an alternative family constellation were the most significant antecedent. Russell listed four main explanations: that fathers were unemployed; that family income was greatest with fathers being primary caregivers; that mothers were more invested in their careers than the fathers; and, that couples not only valued parental childcare over daycare, but also believed childcare to be the responsibility of both parents.

The findings of this study supported only one of the above explanations – all twelve reported that their wives had greater earnings potentials than they and that the family achieved the greatest level of financial security by having the wife work. However, only two of the fathers were unemployed before becoming primary caregivers. Less than half of the participants (n=5) reported that their wives were more invested in a career than they. Less than half of the participants (n=5) reported valuing parental childcare over daycare. Indeed, three families reported either having looked into daycare in the past or future plans to rely on daycare centers.

Russell found that primary caregiving fathers commonly cared for one child, and that the child was likely to be between six months old and preschool-aged. This study found that five fathers cared for multiple children and eight fathers cared for children less than six months old.

The findings of this study generally did not support Russell's work. It is possible that the findings did not match because the research used by Russell was done ten to twenty years ago, and that changing economic and social norms affected a couple's decision-making process differently now from in the past. It is also probable that the men in this study were younger than the fathers in the past research, and thus it is possible that they themselves were raised in a social climate that was more amenable to stay-at-home fathers than in the past.

Gender Issues

The majority of men in this study (n=11) reported that being a primary caregiver fit with their concept of masculinity. They did not identify strongly with the traditional role of breadwinner. Six of those men reported engaging in stereotypically masculine

hobbies such as beer-making, playing hockey, building or remodeling houses and landscaping with heavy machinery to exercise their masculine side after becoming primary caregivers.

Many of the participants viewed aspects of caregiving – such as emotional nurturance and compassion – as “feminine” traits. Despite this association, being a primary caregiver did not threaten the participants’ sense of masculinity. This finding suggests that Freud’s Oedipal theory of development, which demands a severing of femininity in order to adopt masculinity, does not adequately explain the gender development of the participants. This finding was consistent with Michael Diamond’s (2004) theory on gender development. All twelve men reported being raised by a maternal figure, such as a mother, grandmother or stepmother. Though all twelve men also reported having a paternal figure in their life for at least part of childhood, none reported being raised primarily by a father. Thus the participants were raised in rather “traditional” families. Diamond posited that boys internalize both “masculine” and “feminine” traits into their personalities. If a boy raised by a maternal figure had a strong attachment to his mother, then he would internalize “feminine” characteristics such as nurturance and compassion. These traits would become integrated into his core identity. As the participants in this study were able to take on the role of nurturer and report that it was compatible with their sense of masculinity, it is possible that they were able to internalize and integrate “feminine” qualities. Indeed, two participants reported being the “mom” in their family, and two participants reported that their spouses might not be the best parent to stay home.

This finding did not support Nancy Chodorow's (1978) theory, which states that during the Oedipal stage, boys lose their primary attachment to their mother and form their male gender identity based on their father. Chodorow (1978) further posited that post-Oedipal boys relate to the world from a male stance of independence or separateness, whereas girls relate to the world from a position of connectedness. Participants in this study, however, talked about their strong bond with their children, of the intenseness of the father-child bond. One father stated:

I felt like I had a real bond with my kids, even when they were really little, like just newborns. And I think that a lot of the men I talked to didn't feel that much of a connection to them in that early phase...in my experience, it's been a really intense bond, a strong bond.

The ability to form a strong bond with children was perhaps an example of the relatedness that the men learned and internalized from female caregivers, and suggested that the participants did not learn to relate to the world as independently as Chodorow theorized.

The Good-Enough Parent

The findings from this study supported Winnicott's concepts of the good-enough mother and the holding environment. The good-enough mother was a parent who was sensitive and attentive to her child, and consistently met her child's needs. The fathers in this study described a good parent thus: "attentive"; "consistent"; "calm"; "creative"; "understanding"; "good listener"; "stable"; "cooperative"; "supportive"; "loving"; "good role model"; and, "you have to give yourself up and give it to them." These characteristics match Winnicott's description of a good-enough mother perfectly. Thus, the fathers in this study possessed the necessary traits to be good caregivers. Also, the

findings illustrated that the participants were able to create healthy holding environments for their children-an environment that nurtures the child and is flexible enough to meet the child's needs. One father stated, "everything is for the kid. Everything is structured around that accordingly...my whole entire life is set up around her". Another stated, "the requirements [of fatherhood] change as your child grows...and you have to adapt as circumstances are evolving".

Participants were asked if they perceived themselves to be as competent at caregiving as their spouses. Six participants reported that they were as competent as their wives. Fathers reported that it was difficult to compare themselves to their wives, because their partners made parenting look easy. Some fathers, including some who expressed confidence in their caregiving skills, felt that their wives were the most nurturing and compassionate parent. This finding was interesting because the characteristics of a good parent that the fathers expressed grew out of their experience as fathers. It was interesting that the fathers were able to name positive parenting skills that they possess, yet five reported not feeling as competent at caregiving as their wives.

Role Models

Chodorow (1978) posited that anyone – man or woman – who has received good-enough parenting has the ability to be a good-enough parent. It seemed likely that the participants in this study received good-enough parenting, as they frequently named their own caregivers as role models. One participant stated, "[I had] my mom and dad for inspiration and guidance. They were great parents. And great parents make great parents."

Russell (1999) noted that fathers become primary caregivers in response to having had uninvolved or highly involved fathers themselves. This study found that only half of the participants met those criteria – one participant reported having an uninvolved father, and five included their own paternal figure as a role model. The men generally had female role models, such as wives, mothers, grandmothers and sisters. Despite naming role models, most of the fathers (n=8) reported that they learned by trial and error how to be a parent. The fathers reported a dearth of male role models.

Societal Responses

The participants reported a range of societal responses. One interesting finding was that there were geographic differences in some of the reactions fathers received. Fathers in New York (n=7) reported living in “open-minded” or “liberal” areas, where it was not uncommon for fathers to be primary caretakers. Fathers in Massachusetts and Rhode Island reported not knowing any other primary caregiving fathers. One father in Massachusetts reported that stay-at-home dads were “unusual” in his area. All seven fathers from New York knew of other primary caregiving fathers. This did not always translate into a social network or a support system between the fathers; indeed, three of the fathers reported feeling isolated and alone as a stay-at-home parent. One stated, “women seem to form support groups and they can talk to one another about things, and I didn’t really have anyone to talk to about what was going on, that was in my situation. That was something that I didn’t have that was hard”.

The five fathers from Massachusetts and Rhode Island did not report a support network or social network of local fathers. They also reported mainly reactions of surprise from strangers, but also reported feeling misunderstood. One father stated, “I got

comments like, 'it must be your day' from the cashiers in the grocery store. People make a lot of assumptions and say things without thinking." Another father stated:

I remember going into the grocery store, you go into the checkout line and the cashier says, "oh, mommy's away today?" Most of the time, I would just nod and I wouldn't even acknowledge it. What's the point of even saying, "actually, mommy's away most days because mommy works and daddy's at home". What would be the benefit of educating the cashier behind the counter at the grocery store by saying, "actually, I'm a stay-at-home dad and you're ignorant for not knowing it."

Another father told the following story:

One afternoon, [my wife's brother] came out and we took [my daughter] out for lunch. And a woman comes across the restaurant and said, "I just want you to know that I think it's great that she has two men taking care of her as well as she does" or something to that effect. And we were like, "oh, great...uh, thank you?" I think what she was implying was that we were together. It was so funny, we both laughed...I don't know if that's what she was inferring, but I think that's what she was inferring. I guess gay marriage is legal in Massachusetts, right? So why wouldn't she make that assumption, right?

In Massachusetts and Rhode Island, the places where fathers reported that it is fairly unusual for dads to stay at home, the fathers received "ignorant" reactions, or had people make assumptions about their family. It was particularly interesting that in Massachusetts, a woman assumed that two men out alone with a baby indicated that they were a gay couple, rather than two heterosexual men out with a baby. Perhaps that assumption was made because gay marriage is legal in Massachusetts or perhaps the woman assumed that heterosexual men do not take children out in public without a mother. With such a small sample, it was not possible to conclude that this geographic correlation in attitudes about stay-at-home fathers would be borne out in a larger scale study, but the trend was interesting.

The Role of a Father and Primary Caregiver

The study done by the National Institute of Child Health and Human Development (2004) was instigated to explore the contexts or situations that prompt heterosexual married fathers to engage in caretaking activities, and to measure the fathers' sensitivity to their children. The study stated that research on fatherhood agrees that fatherhood is contextual and negotiated by external factors, such as finances and jobs.

The findings of this study did not support the results of the NICHD study. The participants in this study expressed a strong commitment and sense of responsibility to their children: "you made these kids and they're your responsibility"; "it takes a lot of commitment"; "it's a huge responsibility"; and, "it's the one obligation I have in my life." By staying home with their children, the fathers in this study showed a level of commitment and dedication to their children that was not found in the fathers in the NICHD study. Though the fathers' views differed on what the roles of father and primary caregiver entail, the following list of ideas will illustrate the steady commitment the fathers had to their children and wives: "make sure he gets his needs filled"; "role model, mentor, friend, disciplinarian, husband"; "someone who is there for his children on all levels"; "giving the attention to the children when they need it most"; "showing love, being a good example"; and "loving, nurturing, teaching."

Several fathers also expressed that along with the commitment of fatherhood came a certain loss of freedom. One father stated that becoming the primary caregiver meant, "I can't do my own thing anymore." Two other fathers spoke about having the

freedom to do what they wanted to do before becoming fathers, but giving up that freedom in order to meet the responsibilities of having a family.

This study had several limitations. The small sample size and geographic area in which participants resided did not allow for transferability or generalizability of the findings. As noted above, even where there appeared to be geographic differences among respondents, it was not possible to state this confidently. Additionally, the participants in this study were racially homogenous, which suggested that the responses of the participants may have been biased toward the experience of Caucasian fathers.

Attention was given to the issues of reliability and validity. The audiotapes of interviews were transcribed verbatim and the transcripts compared to the original tapes to ensure accuracy. During the process of data analysis, peer consultation was used to achieve accurate codes for data. Field notes recorded nonverbal information, such as facial expressions, tone of voice and body language in an attempt to capture a holistic experience during the interview. Coding the data involved a reliance on the participants' own words and ideas. Threats to trustworthiness included researcher bias and respondent bias. Researcher bias included interpreting data based on theories or concepts presented in the review of literature. Respondent bias may have included age and gender differences between the researcher and the participants, and also the knowledge that the researcher had not had the experience of being a stay-at-home father.

The findings in this study will have implications for social work practice. It is common for clinicians who work with children and families to include mothers in the treatment. It is less common for clinicians to involve fathers than mothers in the treatment of a child or a family. The findings of this study will help clinicians respect and

anticipate family constellations that include a primary caregiving father. Additionally, therapists who work with couples may benefit from learning about and becoming sensitive to some of the feelings, challenges and issues that primary caregiving fathers experience. The findings of this study will also be relevant to clinicians who work with children, adolescents or adults who are being or have been raised by a primary caregiving father. Psychodynamic theories assume that mothers are primary caregivers of children. The traditional theories may need to be modified in order to reflect the early experiences of clients who were raised primarily by fathers.

The findings of this study will also have broad societal implications. Many fathers in this study reported feeling isolated because they did not have a network of other stay-at-home fathers. The social networks that support women who stay at home – such as play groups, lactation groups or Mommy and Me groups – are designed to support mothers, not fathers. Fathers reported feeling awkward or experiencing rejection from play groups that consisted solely of mothers. In order to encourage and support fathers who stay at home, it is necessary to develop groups and programs designed for fathers and children. One father reported the following anecdote:

We were just at Babies R Us before I came here today. And they have a Mothers' Room there. It says, "Mothers' Room". And my first reaction was, "isn't this the modern year 2007? Shouldn't it say 'Parents' Room' or 'Dads' Room'? I didn't understand, but what's in that room? Let's go in! I wanted to know!...It was feeding time, so I was going to go get warm water, because [my daughter] doesn't like to drink cold water, and they have a bottle warmer in the Mothers' Room...so I'm in there, preparing this bottle, and a mother walks in, and then it becomes apparent to me what that room was. It was a feeding room. So she saw me and paused, because now she's like, 'I need to naturally feed, breastfeed, this kid, and here's this father. And it says Mothers' Room. I don't expect to see a father, I expect to see all moms in here'. But there I was with my baby. I immediately got a little uncomfortable, so I focused on my baby and the corner, so I could let her have her privacy.

This example reflected existent stereotypes in American society that do a disservice to both fathers and mothers. The participant was at a store that caters to parents and babies, but by labeling the feeding room a “mothers’ room”, the store not only assumed that mothers are primary caregivers of children, but forced them into that role, and simultaneously did not allow for participation by fathers. It seems that when it is assumed that women are primary caregivers of children, two additional assumptions are made: that women want to be primary caregivers and that men do not want to be primary caregivers. The findings of this study showed just the opposite with regard to the fathers – men reported feeling “proud” to be primary caretakers. One stated, “I’m real proud of it – I get a real kick out of it.” All twelve men reported enjoying their experience as primary caregivers. One father stated that the onus for change is on both genders. He stated:

I think lots of moms assume that role [of primary caregiver], and the longer that role is assumed, the bigger it gets, and the harder it is for the dad to break into sharing those responsibilities. And then when he does, he kind of bumbles around, and the mom goes, “you don’t know what you’re doing, get out of here”.

Areas of future research emerged from the findings of this study. First, in order to ascertain how best to support stay-at-home fathers, studies should be conducted to determine the particular challenges that stay-at-home dads face. As previously noted, it is also crucial to expand similar studies to include a broad mix of cultures and races. An essential follow-up study would explore perceptions of fathers from diverse ethnic and racial backgrounds. Also, the effects on the marital relationship of fathers who stay home with their children were beyond the scope of this project. Studies should be done that focus on the marital relationship of couples who choose to have the father stay home to determine stressors, challenges and supports in the relationship.

Studies should be done to gain knowledge of the mothers' perspective of having the father stay home. Studies should also be done to determine mothers' perspectives on having a traditionally male role in the family. If it is acceptable to ask if a father is a good-enough mother, then perhaps it should also be asked if a mother is a good-enough father.

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Appendix A

Human Subjects Review Committee Approval Letter

December 22, 2006

Meghan Cavanaugh
256 Sleepy Hollow Farm Road
Warwick, RI 02886

Dear Meghan,

Your revised materials have been reviewed and all is now in order. We are happy to give final approval to this most interesting study. It will be useful to find out how these dads are experiencing this. A friend of mine shared parenting with his wife on a 50/50 basis (this was over 20 years ago) and he had an awful time with the social response. He would go to story hour and be the only dad and feel very foolish. Doing the grocery shopping with the kids, he felt critical eyes upon him (whether they were or not, who knows?) and people assumed he was unemployed, which really bothered him with his strong commitment to being “provider”. I imagine and hope that things have changed.

Please note the following requirements:

Consent Forms: All subjects should be given a copy of the consent form.

Maintaining Data: You must retain signed consent documents for at least three (3) years past completion of the research activity.

In addition, these requirements may also be applicable:

Amendments: If you wish to change any aspect of the study (such as design, procedures, consent forms or subject population), please submit these changes to the Committee.

Renewal: You are required to apply for renewal of approval every year for as long as the study is active.

Completion: You are required to notify the Chair of the Human Subjects Review Committee when your study is completed (data collection finished). This requirement is met by completion of the thesis project during the Third Summer.

Good luck with your project. I hope you get lots of dads who want to talk about it!

Sincerely,

Ann Hartman, D.S.W.
Chair, Human Subjects Review Committee

CC: Faith Little, Research Advisor

Appendix B

Informed Consent

Dear Potential Research Participant,

My name is Meghan Cavanaugh, and I am conducting a study of full-time fathers to learn more about how primary caregiving fathers understand their role as fathers and caregivers. The study is being conducted in partial fulfillment of the requirements for the Master of Social Work degree at Smith College School for Social Work. The data collected may possibly be used for future presentations and publications.

You are being asked to participate in this study if (a) you are a heterosexual man in a committed relationship; (b) you are the primary caregiver of one or more child(ren), that is, you assume the daily responsibilities of caring for the child(ren)'s physical and emotional needs, such as feeding, bathing, soothing, disciplining and playing; (c) you have been in a relationship with the child's mother since before becoming the primary caretaker; (d) the child(ren) for whom you care are between the ages of birth and 5; (e) you are currently working but were a primary caretaker within the last 2 years; and (f) you have been/were the primary caregiver for at least 6 months. As a subject in this study you will be asked to be interviewed in-person. The interview will last approximately 45 to 60 minutes. The interview will be audio recorded if you agree, and I will transcribe it in order to ensure accuracy of your statements. The interview will not be audio recorded if you do not wish it to be. You will be asked questions regarding your decision to become the primary caregiver of your child(ren), your expectations of fatherhood, whether those expectations matched reality, the nature of your relationship with your own fathers, and who your role-model was when you became a caregiver. Demographic data will also be collected.

The potential risks of participating in this study are the possibility that you might feel strong or uncomfortable emotions while participating in a survey about your experience as a primary caregiving father. In case you feel the need for additional support after participating in this study, you will be given a list of resources for mental health services in your area.

You will receive no financial benefit for your participation in this study. However, you may benefit from knowing that you have contributed to the knowledge of how fathers who are primary caregivers understand their role as a parent. It is my hope that this study will help social workers have a better understanding of how to work with families in which the main caregiver is the father. You may also benefit from being able to tell your story and having your perspective heard.

Strict confidentiality will be maintained, as consistent with Federal regulations and the mandates of the social work profession. Confidentiality will be protected by coding the

information and storing the data in a locked file for a minimum of 3 years. Your identity will be protected, as names will be changed in the analysis of the data. Your name will never be associated with the information you provide in the questionnaire or the interview. The data may be used in other education activities as well as in the preparation for my Master's thesis. My thesis advisor may read some portions of the transcribed interviews, but identifying information will be omitted.

This study is completely voluntary. You are free to refuse to answer specific questions and to withdraw from the study at any time. If you decide to withdraw, all data describing you will be immediately destroyed. You have until March 31, 2007 to withdraw from this study; after that time, the information from the interviews will be integrated into the thesis.

YOUR SIGNATURE INDICATES THAT YOU HAVE READ AND UNDERSTAND THE ABOVE INFORMATION AND THAT YOU HAVE HAD THE OPPORTUNITY TO ASK QUESTIONS ABOUT THE STUDY, YOUR PARTICIPATION, AND YOUR RIGHTS AND THAT YOU AGREE TO PARTICIPATE IN THE STUDY.

SIGNATURE OF PARTICIPANT

SIGNATURE OF RESEARCHER

DATE

DATE

If you have any questions or wish to withdraw your consent, please contact:
Meghan Cavanaugh (617) 755-4744

Appendix C

Interview Guide

Code #:

1. Demographic Information:

- Age:
- Race/ethnicity
- Town and state of residence

2. How many children do you have? How old is s/he or they?
3. For how long have you been the full-time dad/caretaker?
4. Could you walk me through a typical day for you? (teaching of values, types of play)
5. Could you describe the division of labor in your house?
6. Please tell me how the decision was made for you to be the primary caregiver/stay at home parent.
7. Which parent was your primary caretaker?
If mother: What was your relationship like with your father?
If father: Did being raised by your father affect your decision to be the primary caretaker for your children?
8. What does a “primary caretaker” mean to you? Has this changed or stayed the same since becoming a primary caretaker?
9. What does being a father mean to you? Has this changed or stayed the same since becoming a primary caretaker?
10. Before you became a father/primary caregiver, what were your expectations of fatherhood?
11. What has the reality of fatherhood been?
12. What or who was your inspiration or the guidance that helped you learn in the beginning to be a primary caretaker? Who or what was your source of information regarding taking care of kids?
13. Do you have an image or an ideal of what a “good” parent or caretaker looks like?

14. Has the role of father or caretaker always appealed to you? For example, for how long have you felt that being a father or a caretaker was a role you wanted to play in life?
15. In my research on this project, I've found that our society tends to equate the role of mother with the role of the full-time or primary parent. I've seen the terms "active father" or "participant father" used to describe dads. The message seems to be that moms are the primary caregivers, and that dads play a supporting role. They can come close to being primary caregivers, but can't achieve it. Research says that this has to do with our society's ideas of masculinity and femininity, that full-time caretaking is associated with femininity, and that masculinity is associated with a more supporting or secondary role. What do you think about that?
16. Does being a full-time father/primary caretaker fit with your idea of what it means to be masculine?
If yes: Please explain.
If no: How have you dealt with your role as full-time father/primary caretaker if it does not match with your idea of being masculine? (compensatory actions?)
17. Has your idea of masculinity changed at all since becoming a primary caregiver?
18. What, if any, has been the societal response to you as a caregiver? Have you noticed any response in public to you being the primary caregiver?
19. What were the reactions of family/friends when you told them you'd be the one to take care of the kids?
20. Have you noticed any different reactions regarding your decision from those who know you well vs. those who don't?
21. Do you think that you'll keep this arrangement in the future, or do you anticipate changing your role? (Or, for those who have switched: could you tell me how the decision was made for you to go back to work?)
22. Do you think that you are as good a caregiver as your partner?