

Topical Area: Physical, Mental and Behavioral Health



Physical, Mental and Behavioral Health

Current State

Community-level Insights from Fathers Matter Cafés



What works for fathers:

- Dad doulas are just getting started in WA and they help dads feel connect and valued.
- Sometime Oxford houses are great but other times the make up of the dads make it not place I want to bring my kid.
- Younger generations of fathers are getting more open to ask for help.

What doesn't work for fathers:

- It's hard to ask for help because stigmas still exist, there can be legal consequences with family and dependency courts when fathers admit they need help.
- Men want to talk to other men and especially those that know what I am going through, there are way fewer men counselors.
- During pregnancy and birth I am an afterthought, nobody really pays attention to dad.
- Doctor's office visits are all focused on moms, when I show up with children they ask for mom.
- There are no treatment places for dads where I can bring my kid.
- Employers don't provide insurance and leave for Dads to take care of themselves and their families.
- No post partum screening and support for fathers.

What needs to change:

- More treatment facilities that take dads with their kids.
- More medical providers helping Moms and Dads understand the important role of Dads in early childhood development.
- More skin to skin contact at birth.
- Dads need access to sick leave, paid family leave, and medical insurance.
- More peer to peer supports for Dads

"The only time the medical team talked to me in my wife's long labor what to ask me to sign the form giving permission for her C-Section.

Community Café Father

"It's really hard for men to admit they're struggling with their mental health

- Steven Thibert, Council Father





Agency Overview

State Level Snapshot

The Office of Nutrition Services (ONS) includes:

- WIC
- Breastfeeding Peer Counseling (BFPC)
- Farmer's Market Nutrition Program (FMNP) both WIC & Seniors
- SNAP-ed
- The acronym "WIC" refers to the "Special Supplemental Nutrition Program for **Women**, **Infants**, **and Children**" which contributes to a common misperception that WIC is not available to fathers. This misperception persists despite outreach that states "Dad, grandparents, and other caregivers of children under the age of five may also sign kids up for WIC." ¹
- Mission "To safeguard the health of low-income women, infants, and children up to age 5 who are at nutrition risk by providing nutritious foods to supplement diets, information on healthy eating, and referrals to health care."² the program was designed to target mothers and young children. This focus led to policies and systems that unintentionally leave out fathers, especially those that do not live with the mother. For example:
 - Only one EBT card to access WIC food benefits is issued per family and given to whomever applies for WIC first. This is often the mother during pregnancy
 - WIC outreach and services are often focused on and tailored to the primary audience of the mother/child dyad

Bright Spots

Washington State Department of HEALTH

Key Metrics & Data Points

- WIC does not have data around the gender of primary or second caregivers of children participating in the program.
- WIC serves nearly 50% of all infants, 1/3 of pregnant women, and 1/4 of children under 5 in WA State.³



- WIC has an Outreach Coordinator to build community partnerships & further WIC's reach, including targeted outreach to non-cohabiting families and fathers.
- WIC has an Equity & Partnerships Coordinator to find pathways for more community member participation, inclusive of non-cohabiting families and fathers.
- WIC staff serve on the Washington Fatherhood Council to find pathways for more equitable access for non-cohabiting families and fathers.
- WIC develops and provides education materials, best practices, father-inclusive images and content.

"WIC has taught me how to bond with both of my girls. The WIC program encourages healthier eating options and things to do to keep adults and children active" – WIC Dad



^{1.} Source: https://doh.wa.gov/you-and-your-family/wic/wic-eligibility

^{2.} Source: About WIC: WIC's Mission | Food and Nutrition Service (usda.gov)

^{3.} Source: DOH: About WIC

Source: engaging-wic-dads-one-pager.pdf (nwica.org)

Agency Commitments



 Appoint subject matter expert(s) including families at Office of Nutritional Services (ONS), to provide policy input. Historically WIC targeted efforts at the mother/child dyad. Currently there is a focus on serving the needs of non-cohabiting families at WIC meets the Code of Federal Regulations (CFR) and other required policy updates and regulations (CFR) and other required policy and rese is flexibility in the funding. As long as WA WIC meets the Code of Federal Regulations (CFR) and other required policy updates and regulations (CFR) and other required policy and tere is flexibility in the funding. As this effort can be embedded into existing WIC, BFPC, FMNP, and SNAP-ed programing, extra funding would be minimal. Evaluate and update public facing materials, such as the WA WIC website. Utilize National WIC Association's toolkit "Engaging Men and Dads at WIC Toolkit" to encourage local partners to engage more fathers Engage ONS Outreach Coordinator and Equity & Partnerships Coordinator to expand outreach efforts at ongage more fathers Bring in SNAP-ed subject matter experts within ONS to see how that program could better include and Bring in SNAP-ed subject matter experts within ONS to see how that program could better include and Bring in SNAP-ed subject matter experts within ONS to see how that program could better include and 		Commitments by the (6) Dimensions	
 inclusive to non-cohabiting families. Appoint subject matter expert(s) including fathers & non-cohabiting families at Office of Nutritional Services (ONS), to provide policy input. Historically WIC targeted efforts at the mother/child dyad. Currently there is a focus on serving the needs of non-cohabiting fathers and other non traditional caregivers. These efforts are dependent on staff leadership and need to be institutionalized. Evaluate and update public facing materials, such as the WA WIC website. Evaluate and update public facing materials, such as the WA WIC website. Investigate data sharing agregate WA WIC data available to partners to engage more fathers Investigate data sharing agregate WA WIC data available to partners to engage more fathers Urge the National WIC Association to look at men, dads, and other non-cohabiting families when creating their annual "State of WIC report". With many at Department of Health, including but not limited to: PCH Equity and Social Justice (ESJ) Team Washington State Department of Agriculture (WSDA) Office of Family & Community Health Improvement (OFCHI) Office of Health And Safe Communities (OHSC) Health Systems and Quality Assurance (HSQA) Historically WIC targeted efforts at WIC rookkit" to encourage local partners to engage more fathers Investigate data sharing agregements to make de-identified, aggregate WA WIC data available to partners. Urge the National WIC Association to look at men, dads, and other non-cohabiting families when creating their annual "State of WIC report". Embed these efforts into existing efforts to involve community organizations engaging with fathers. Embed these efforts into existing efforts to involve community organizations engaging with fathers. 	Policies	Funding and Resources	Cross-Agency Partnerships
 Services and Programs Evaluate and update public facing materials, such as the WA WIC website. Utilize National WIC Association's toolkit "Engaging Men and Dads at WIC Toolkit"¹ to encourage local partners to engage more fathers Engage ONS Outreach Coordinator and Equity & Partnerships Coordinator to expand outreach efforts. Bring in SNAP-ed subject matter experts within ONS to see how that program could better include and The structure of the program could better include and funding would be minimal. Data and Monitoring Investigate data sharing agreements to make de-identified, aggregate WA WIC data available to partners. Urge the National WIC Association to look at men, dads, and other non-cohabiting families when creating their annual "State of WIC report". Embed these efforts into existing efforts to involve community participants more in decision making Embed these efforts into existing efforts to involve community participants more in decision making 	 inclusive to non-cohabiting families. Appoint subject matter expert(s) including fathers & non-cohabiting families at Office of Nutritional Services (ONS), to provide policy input. Historically WIC targeted efforts at the mother/child dyad. Currently there is a focus on serving the needs of non-cohabiting fathers and other non traditional caregivers. These efforts are dependent on staff leadership and 	 prioritize and fund larger projects for engaging non- cohabiting families in WIC and SNAP-ed. Specifically examining how to best include supporters of lactating people in the WIC program. Engaging fathers at WIC is a priority of the National WIC Association. As long as WA WIC meets the Code of Federal Regulations (CFR) and other required policy updates and regulations USDA has for the program there is flexibility in the funding. As this effort can be embedded into existing WIC, 	 with many at Department of Health, including but not limited to: PCH Equity and Social Justice (ESJ) Team Washington State Department of Agriculture (WSDA) Office of Family & Community Health Improvement (OFCHI) Office of Health And Safe Communities (OHSC)
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would like to see	 as the WA WIC website. Utilize National WIC Association's toolkit "Engaging Men and Dads at WIC Toolkit"¹ to encourage local partners to engage more fathers Engage ONS Outreach Coordinator and Equity & Partnerships Coordinator to expand outreach efforts Bring in SNAP-ed subject matter experts within ONS 	 Investigate data sharing agreements to make de-identified, aggregate WA WIC data available to partners. Urge the National WIC Association to look at men, dads, and other non-cohabiting families when creating their annual "State of WIC 	 fathers including referring partners to support for the prenatal/postpartum/lactation experience. Embed these efforts into existing outreach efforts at ONS, including connection to peer support groups and community organizations engaging with fathers. Embed these efforts into existing efforts to involve community participants more in decision making and discussions about the programs they utilize or



Aspirational

Possible commitment

Levels of Maturity



- Pre-Awareness
- Awareness
- Demonstrated Action
- □ Integration

Department of Health, Office of Nutrition Services (DOH ONS): Awareness

Strong awareness, with pockets of demonstration action. Examples of action underway:

- Facing historical and current lack of disaggregated data by gender and family composition, ONS is currently in conversation getting commitment from WIC's data and technology staff to find data on fathers, in-kin caretakers, foster parents, and same sex couples using/applying for WIC
- Development and dissemination of father-inclusive materials and education
- Dedicated engagement in Fatherhood Council has promoted statewide workforce development, and community awareness (e.g. Provider Learning Series, State WIC Conference)
- WIC is working on more inclusive breastfeeding awareness, knowledge, and education for early infancy. WIC was planning on piloting dads-only breastfeeding classes prior to the onset of COVID disruptions



Agency Overview

fathers

HOPE framework in its policies, and promotes outreach and engagement of



Office of Family & Community Health Improvement (OFCHI)

	State Level Snapshot		Key Metrics & Data Points
•	The Office of Family and Community Health Improvement (OFCHI) works to promote health and well-being of individuals, families maternal and infant health.	•	8 local health jurisdictions (~30%) have MCHBG funded home visiting programs that are inclusive of fathers however the numbers reported by DCYF are low.
•	OH has invested in local and statewide fatherhood initiatives through e Maternal Child Health Block Grant (MCHBG), mainly direct services targeted	•	3 local health jurisdictions have included fatherhood inclusion strategies in their 2023-2024 MCHBG workplans.
	for mother and child.		The Children and Youth with Special Health Care Needs (CYSHCN) and Child Health units utilize part of their MCHBG allocations to support fatherhood initiatives.
			 \$49,848 of the CYSHCN annual allocation supports the Washington State Fathers Network.
	Community Snapshot		Community Bright Spots
•	Community Snapshot As of the time of this study, there were not any significant father-specific or father-inclusive programs funded directly by DOH OFCHI at the local community level.	•	Community Bright Spots <u>WA State Fathers Network</u> : DOH provides funding for the WA State Fathers Network, a network that provides a platform and connects fathers and families of children with a disability or special health care need with each
•	As of the time of this study, there were not any significant father-specific or father-inclusive programs funded directly by DOH OFCHI at the local	•	Community Bright Spots <u>WA State Fathers Network</u> : DOH provides funding for the WA State Fathers Network, a network that provides a platform and connects fathers

Agency Commitments



Office of Family & Community Health Improvement (OFCHI)

Commitments by the (6) Dimensions						
Policies	Funding and Resources	Cross-Agency Partnerships				
 Assess existing OFCHI processes and procedures to determine how to recognize, support, and engage fathers. Coordinate with partners to increase access to mental health/substance use disorder prevention and treatment for pregnant and parenting people. The Washington State Maternal Mortality Review Panel¹ recommends to "Expand definitions for who qualifies for the program (e.g., including fathers, partners, families, more than one child)". 	 Continue to provide catalytic funding support to the Washington Fatherhood Council and Washington State Fathers Network that enables Dad Allies Learning Series, Fathers Matter Cafes, and many other local / community efforts 	 Continue to collaborate with DSHS to advance the work of the Washington Fatherhood Council including DOH representation on the Council. Continue to convene cross-sector partnerships to promote family well-being that is inclusive of fathers (e.g., Essentials for Childhood). 				
Services and Programs	Data and Monitoring	Community-Engagement				
 Assess existing OFCHI programs, practices, and services to determine how effectively they recognize, support, and engage fathers. Coordinate with federal and state partners to promote father-inclusive language and practices. 	 Ensure father-specific questions are included in MCHBG needs assessment. Continue partnership with DCYF to support home visiting data collection and evaluation activities. Continue to explore the feasibility of implementing the Pregnancy Risk Assessment Monitoring System (PRAMS) for Dads national co-hort. 	 Identify opportunities to strengthen outreach and education for fathers during the perinatal period. 				
1. Washington State Maternal Mortality Review Panel: Maternal Deaths	2017-2020	Legend Aspirational Possible commitment Washington fatherhood Council				

Levels of Maturity



□ <u>Pre-Awareness</u>

Awareness

- Demonstrated Action
- □ <u>Integration</u>

Department of Health, Offices of Family and Community Health Improvement (DOH OFCHI): Awareness

While various programs and services with OFCHI range between maturity levels of Pre-awareness, Awareness, and Demonstrated Action, overall, the office's level of father-inclusion lands in the awareness level, with several indications of action being taken (e.g., WA State Father's network, and funding for Fatherhood Council). While some LHJ's include fathers in their MCHBG workplans, currently many direct services funded at the state level are targeted for mother and child. Notably, there is a lack of father-specific data to support further action. To further OFCHI's father-inclusivity, there is a need for more robust and comprehensive data collection on fathers and father-specific needs and services to achieve father-supportive strategic outcomes and outputs.

