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ABSTRACT

Latino children are disproportionately affected by childhood obesity. Prior research has encouraged father engagement to bolster prevention efforts and outlined general strategies for father recruitment, engagement, and retention. However, behavioral nutrition or education programs with a focus on Latino fathers are lacking, which means there is little guidance for working with Latino fathers in motivation and maintenance. This perspective highlights strategies for supporting dietary and activity behaviors with Latino fathers. Researchers can apply strategies to observational studies or program development and implementation, and practitioners can use strategies to tailor education and counseling with Latino fathers as part of obesity prevention.

Key Words: fathers, male caregivers, Latino populations, childhood obesity, interventions (J Nutr Educ Behav. 2021;53:540–545.)

Accepted January 14, 2021. Published online March 3, 2021.

INTRODUCTION

Fathers are important for obesity prevention within families because of their influence on their families’ food choices, physical activity, and weight status. Over time, fathers have also become much more involved in family responsibilities related to child care. Parker and Wang analyzed national data from the American Time Use Survey (1965–2011) and found that fathers have dramatically increased the time spent with their children from an average of 2.5 hours in 1965 to 7.3 hours in 2011. However, obesity-related studies and programs have focused on mothers and largely overlooked fathers.

Previous review papers have been published on father engagement in programs or interventions related to childhood obesity, and in observational studies related to food choices, eating behaviors, and weight status within family contexts. This literature has outlined recommended strategies to address barriers in recruitment, engagement, and retention of fathers in childhood obesity prevention. Recommended strategies for father engagement have been based on studies with predominately White fathers or middle-class fathers, which is an important limitation. Some reviews have acknowledged the overrepresentation of White and middle-class fathers and the underrepresentation of minority fathers and fathers with lower levels of education and income in research. As a field, very little is known about how best to engage diverse fathers, including Latino fathers, in family-based obesity prevention. In this perspective, the term diverse refers to individuals from varied backgrounds, specifically people who have been historically or currently oppressed or marginalized, on the basis of factors, including but not limited to race, ethnicity, gender, or socioeconomic status. Latino individuals represented 20% of the US population based on 2019 Census data. A Pew Research report has predicted the growth of the Latino population. Latino adults and children are more likely to experience negative diet-related health outcomes, including increased obesity, which have been attributed to structural and social factors (eg, poverty, discrimination, and racism).

Within Latino families, familism (a core value related to the significance of family) and gender roles can impact health behaviors in different ways. National data have shown that Latino fathers were more responsible for child caregiving than White fathers, and findings provided evidence for leveraging the “potential strength of minority families regarding fathering” (p. 212). In addition, a qualitative study reported that Latino fathers recognized themselves as role models for their children and already were engaged in food and activity parenting practices. However, there has been limited obesity-related research centered around Latino fathers.

In 2018, O’Connor et al reviewed studies to understand the role of Latino fathers in children’s obesity-related behaviors with an emphasis on physical activity. They identified 14...
eligible observational studies, but because there were no experimental studies (eg, behavioral interventions or programs), they did not put forth strategies for how to support motivation or maintenance (as part of programs) with Latino fathers. In 2019, Vollmer and colleagues published a perspective article on father engagement in nutrition education and obesity research and described strategies related to recruitment, engagement, and retention. Although the Perspective by Vollmer et al summarized father engagement generally, there was little focus on strategies related to behavior change, including strategies specific to Latino fathers. Thus, there is a gap in the literature regarding strategies to support Latino fathers in obesity prevention, especially strategies for initiating and sustaining behavior change in programs.

Given the importance of supporting obesity prevention within Latino families and unrealized opportunities to engage Latino fathers as coparticipants, this article aims to provide perspective on supporting Latino fathers in nutrition and obesity-related programs and extends what is known by documenting strategies throughout a program (eg, from recruitment, engagement, retention through motivation and maintenance). The Table outlines strategies related to recruitment, engagement, retention, motivation, and maintenance. In the following sections, strategies are discussed for supporting health-promoting dietary and activity behaviors with Latino fathers as part of childhood obesity prevention, which is based on previous observational studies with Latino fathers. Father-focused studies and reviews, and a review on recruitment and retention of minority participants.

Recruitment

Building trust with the community is essential for research with participants from minority groups, including Latinos, and positively influences recruitment and retention. Prior work has emphasized more personalized and community-based recruitment approaches for minority participants, including Latino participants, such as using lay health advisors, peer health educators, or community health workers, personal contact from community organizations, and referrals from family or friends. Concordance in the racial and ethnic background between project staff and participants can also support recruitment. Within Latino communities, promotores (Latino/a community health workers who share racial/ethnic backgrounds, language, and culture) can be valuable collaborators. Previous research with Latino families in Texas has discussed engaging promotores (Latina community health workers) as research partners. However, it is unknown to what extent promotores have been involved in the recruitment of Latino fathers.

In community-based studies with Latino fathers, previous studies have recruited through local events, agencies or organizations including centers, schools, and Special Supplemental Nutrition Program for Women, Infants, and Children offices, or through health providers, which are typical recruitment sites. Prior studies have outlined father-specific recruitment sites such as the internet, worksites, gym, and barbershops, and community venues such as public transit, sports events, school events, and schools. However, among a subsample of minority and nonresident fathers, fewer fathers recommended doctors’ offices and worksites as recruitment sites. A group of Latino fathers suggested the following locations for recruitment: family parks or community centers like the YMCA, churches, flea markets, and sports events. Previous studies also have emphasized targeting recruitment materials explicitly to fathers and communicating the benefits for the father-child relationship and family. Given the value of using more personalized and community-based recruitment methods, researchers may benefit from first contacting a family member or community partner before connecting directly with Latino fathers. For example, O’Connor et al found that Latino fathers desired consent and opinions from their families regarding participation in research. However, others have argued that successful recruitment of fathers requires direct father recruitment or a male staff member to facilitate recruitment.

Engagement and Retention

In addition to appealing to fathers through recruitment, the literature supports emphasizing convenience (for the father participants), communicating the perceived benefits at the individual and family levels, creating more inclusive spaces for fathers (eg, scheduling father-only activities, having male research staff, designing interactive activities on the basis of father-specific preferences), incorporating opportunities for fathers to spend quality time with their children, and using incentives to recognize the value of fathers time and effort. Prevalently, research studies with Latino fathers have used incentives (eg, gift card or cash $20 –$75), although the use of incentives alone is likely insufficient to bolster engagement.

In addition, when working with minority fathers, researchers and practitioners must consider sociocultural factors. Previous studies with Latino fathers have addressed linguistic aspects of culture by using bilingual staff to translate written materials into Spanish and offering activities in Spanish and English; one study employed trained Latino male moderators to lead focus groups with Latino fathers. Scholars have emphasized the importance of considering sociocultural values, such as familism, to better engage Latino individuals in research. For example, O’Connor et al published a review paper on the engagement of Latino fathers in obesity-related studies, and they recommended strategies on the basis of sociocultural values, including collectivism, familism, gender roles, respect, and simpatia (which they defined as geniality). Thus, strategies for engaging Latino fathers include applying a family-focused approach that engages both parents (considering their distinct gender roles) and the children and focuses on fun activities that can be enjoyed by the entire family.

Regarding retention, there is limited information available on how to retain Latino fathers specifically. However, Yancey et al discussed the importance
of community involvement to support retention of minority participants, including Latinos, specifically the use of community health workers and more intensive and frequent participant contacts; they also acknowledged that cultural adaptations might affect retention, such as matching racial/ethnic background of project staff and participants. The father engagement literature suggests that the use of male or father research staff can bolster retention,2,19 However, it is important to note discordant findings related to the concordance of gender and cultural factors.
and race/ethnicity between fathers and research personnel. For example, Davison et al. reported that 73% of fathers said gender (of research personnel) did not matter and concordance in racial/ethnic background was not important to 85% of surveyed fathers. O’Connor et al. mentioned the importance of sympathy of research staff in retention or an empathetic approach in communications.

Overall, there are 3 recommendations for recruitment, engagement, and retention with Latino fathers. First, studies and programs can benefit from applying a family-focused approach to recruitment, engagement, and retention, such as focusing on the benefits for the entire family and engaging the mothers as co-parents. Second, collaboration with promotores (Latino/a community health workers) and formative research can be valuable in the development and implementation of specific strategies. Third, it is important to consider Latino fathers’ unique sociocultural values throughout the study or program (eg, familism, etc), how fathers value their time, and their preferences for learning, activities, and foods. For example, employment demands (eg, schedules, commutes, labor requirements) affect the time and energy that Latino fathers have for nonwork activities like participation in a study or program.

Using data from 2014 national survey, Latino men made up more of the Latino workforce than women (56.7% vs 43.3%) and typically were employed in occupations with higher wages than women (eg, construction vs maids and housekeeping cleaners); however, the wages and benefits of Latino/a workers were below all other racial/ethnic groups (White, Asian, and Black). Latino fathers tend to provide the main source of household income, and there are trade-offs between time spent working and time spent in study or program activities. Because Latino fathers generally have positive attitudes toward their families, fathers may be more likely to participate when they have opportunities to spend quality time with family members and strengthen bonds.

Prior research also has emphasized fathers’ preferences for hands-on and interactive learning activities and fun, active, and competitive games. Specifically, for Latino fathers, others have documented their preferences for more traditional and foods and preparations and their desires to continue food traditions with their families.

**Motivation and Maintenance**

There is little guidance on how to motivate Latino fathers toward behavior change or help them maintain behavior changes because there is a dearth of published papers on obesity-related programs with Latino fathers. Overall, the literature on father engagement supports applying a family-focused or family-centered approach in program design and delivery. Findings from qualitative research with Latino fathers provide additional support for programs that target behavior change at the individual (father) and family levels and support fathers as co-parents. In addition, Morgan et al. recommended that researchers consider a strengths-based approach in all aspects of program delivery, opportunities for reciprocal reinforcement between fathers and children, and a focus on practical, evidence-based tips to encourage and sustain behavior change with fathers in childhood obesity programs. Strengths-based programs with Latino fathers can be based on formative research and developed in collaboration with promotores or other lay health leaders (eg, peer educators). Working with the community allows programs to consider context and sociocultural considerations relevant to Latino fathers and their families.

Currently, O’Connor and colleagues are leading a translation of the Healthy Dads, Healthy Kids (HDHK) program for Latino fathers and their children in Houston, Texas. Morgan et al. originally developed HDHK as an obesity treatment program for predominantly White fathers and their children in Australia and demonstrated success in efficacy and effectiveness trials. Although adapting a program can be difficult, their HDHK translation will generate valuable insights for supporting and sustaining behavior change with Latino fathers.

**DISCUSSION**

As Morgan et al. described, fathers have critical and independent roles that influence dietary and physical activity behaviors within their families. Although they have the potential to be powerful agents of behavior change, fathers, especially Latino fathers, have been overlooked in studies and programs related to childhood obesity. Indeed, reviews of such works have not culminated with recommended strategies specific to engaging Latino fathers because (1) racial and ethnic minorities, including Latinos, have been historically excluded from research and (2) researchers have inconsistently reported race and ethnicity for parents and caregivers. The review by O’Connor et al. is an exception. From the authors’ perspective, silence or omission around race and ethnicity has hindered understanding how to support Latino fathers in childhood obesity prevention.

Given the demographic trends and critical need to support health for Latino populations, there are unrealized opportunities for researchers and practitioners to engage Latino fathers in childhood obesity prevention programs, and specifically in family-centered programs. The strategies described herein are generally supported by O’Connor et al. Latino individuals, particularly fathers, continue to be underrepresented in childhood obesity prevention research. Moving forward, nutrition researchers and professionals may approach this gap by engaging in self-reflection and embracing opportunities for professional development. For example, nutrition researchers and professionals could participate in training related to the cultural relevance of approaches, minority health, and health disparities and deliberately engage with minoritized populations through community-centered research and outreach. Professionals with increased awareness, skills, and experience might be more likely to initiate research with Latino populations.
Given that the nutrition workforce is primarily female and non-Hispanic White, it will likely require additional work for existing nutrition professionals to shift perspectives toward mindful inclusion of Latino fathers. As a field, growth is needed. Specifically, the nutrition workforce needs more Latino/a professionals to help reflect the racial/ethnic composition of the population, consider sociocultural aspects of nutrition, and better serve communities and clients. Although changes take time, individuals can begin by focusing on health equity, seeking guidance from policies documented in the updated 10 Essential Public Health Services, Healthy People 2030, and the Academy of Nutrition and Dietetics’ Code of Ethics.

**IMPLICATIONS FOR RESEARCH AND PRACTICE**

In future work with parents or caregivers, it is recommended to (1) carefully assess and report on gender, race, ethnicity, and other characteristics, such as family structure or household composition, that describe participating individuals, and (2) separate results by gender for gender-inclusive studies or programs. As Davison et al outlined:

> Greater transparency in reporting is needed and the tendency to generalize the results of mother-only studies to “parents” should be avoided. Likewise, studies should measure and report information on household composition, father residential status and father relationship with the target child (i.e., biological father, step father, grandfather) given their implications for fathers’ involvement in weight-related parenting and participation in obesity interventions. (p. 175)

Caregivers are unique individuals; well-designed studies founded on this premise will likely foster an understanding of how all individuals, including fathers and other male caregivers, influence health in their families. Future research will be strengthened by incorporating an inclusive approach to the design of studies and programs. In addition, practitioners might consider these strategies when tailoring education and counseling with Latino caregivers, including fathers. Community engagement is an important part of developing culturally relevant studies and programs. Collaboration with promotores (Latino/a community health workers) aligns with recommendations and may enhance nutrition education or behavioral programs with Latino fathers. Finally, there are opportunities to not only engage more Latino fathers as participants and clients but also to hire, train, and mentor Latino fathers as promotores and peer educators in research and programs. For example, nutrition programs, like the Expanded Food and Nutrition Education Program and Supplemental Nutrition Assistance Program Education, may benefit by including diverse male staff members as peer educators. Potential benefits include the ability of Latino fathers to relate to individual clients and their families, helping to enhance client experiences. Without actions to address the pipeline, it is not possible to engage more Latino fathers in nutrition research, education, and outreach.

Of note, given that the nutrition workforce is primarily female and non-Hispanic White, there is a critical need to diversify the nutrition workforce so that it includes people of different races, ethnicities, and genders. It is encouraging that the Society of Nutrition Education and Behavior and the Academy of Nutrition and Dietetics have centered inclusion, and equity. There are additional opportunities to engage younger individuals in nutrition-related initiatives. For example, nutrition-focused youth development programs like 4-H may engage adolescents and emergent adults who represent different communities, households, and families. Youth development programs can ignite and develop young people’s interests in nutrition, increase their knowledge and skills, and enhance their experiences in nutrition undergraduate and graduate programs. In addition, academia, nutrition professionals can mentor students, especially students of different races, ethnicities, and genders, and first-generation students, through service-learning opportunities, which may facilitate their transition into nutrition-related professions. Efforts to augment the nutrition workforce will promote diversity and inclusion in research and practice and support culturally relevant research and programs going forward.

**ACKNOWLEDGMENTS**

This work is supported by Agriculture and Food Research Initiative Competitive Grant no. 2015-68001-23234 (ascension no. 1005563) from the US Department of Agriculture National Institute of Food and Agriculture.

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