“Because they really want to be good fathers”: A formative qualitative study of gendered challenges and opportunities for engaging male caregivers in a parenting programme with and for parents in street situations in Kenya

Kathleen Murphy
kathleen.murphy@spi.ox.ac.uk
University of Oxford
Frances Gardner
University of Oxford
Sheila Kirwa
AMPATH
Reuben Kiptui
AMPATH
Laetitia Christine
INNODEMS Kenya
Eve S Puffer
Duke University
Erica Di Ruggiero
University of Toronto
Samwel Kimani
Tumaini Innovation Centre
Rebecca Ogara
AMPATH
Evans Odep Okal
Inuka Pamoja Initiative
Evans Chege
Inuka Pamoja Initiative
Mark Obuya
Inuka Pamoja Initiative
Duncan Ronga
AMPATH

Jamie M Lachman
University of Oxford

Research Article

Keywords: male engagement in parenting programmes, families in street situations, gender and masculinities, health and gender equity, Kenya

Posted Date: June 1st, 2026

DOI: https://doi.org/10.21203/rs.3.rs-9500444/v1

Additional Declarations: No competing interests reported.

Title: "Because they really want to be good fathers": A formative qualitative study of gendered challenges and opportunities for engaging male caregivers in a parenting programme with and for parents in street situations in Kenya

Authors: Kathleen Murphy[1,5], Frances Gardner[1], Sheila Kirwa[2], Reuben Kiptui[2], Laetitia Christine[3], Eve S. Puffer[4], Erica Di Ruggiero[5], Samwel Kimani[6], Rebecca Ogara[2], Evans Odep Okal[7], Evans Chege[7], Mark Obuya[7], Duncan Ronga[2], Jamie M. Lachman[1,8]

[1] Department of Social Policy and Intervention, University of Oxford, Oxford, UK

[2] Academic Model Providing Access to Healthcare Kenya, Eldoret, Kenya

[3] INNODEMS Kenya, Kakamega, Kenya

[4] Duke Global Health Institute, Duke University, Durham, USA

[5] Dalla Lana School of Public Health, University of Toronto, Toronto, Canada

[6] Tumaini Innovation Centre, Eldoret, Kenya

[7] Inuka Pamoja Initiative, Eldoret, Kenya

[8] Centre for Social Science Research, University of Cape Town, Cape Town, South Africa

Corresponding author: Kathleen Murphy **(kathleen.murphy@spi.ox.ac.uk)**

Abstract

Background: A large and growing global evidence base suggests that parenting programmes that engage men can positively impact the health and wellbeing of children, parents, and families. However, rates of male engagement in parenting programmes globally have remained markedly low, particularly among structurally marginalized men. Limited research has examined the gendered nuances shaping men's participation in parenting programmes amidst structural oppression. To better understand the gendered complexities of marginalized men's engagement in parenting programmes, this participatory formative research explored prospective gendered challenges and opportunities for engaging fathers in street situations in Kenya in a community co-created parenting programme. **Methods**: Three phases of participatory data collection were undertaken: (1) in-depth interviews and demographic surveys with 40 parents in street situations (20 fathers, 20 mothers), (2) in-depth interviews with 12 community service providers who support the street community in Eldoret, and (3) demographic surveys and nine focus group discussions with 29 parents in street situations (four with fathers, five with mothers). Data were analysed using reflexive thematic analysis alongside a participatory co-analysis with a Parent Advisory Group of 10 parents in street situations (5 fathers, 5 mothers) and other community stakeholders in Eldoret (n=37). **Results**: Participant narratives suggested that father engagement will be impacted by (a) the dynamic interplay of masculine expectations to provide financially for their families (including by prioritizing income generating opportunities and deprioritizing initiatives perceived to threaten their masculinity), (b) fatherhood aspirations to be involved in their children's upbringing and inherent motivations to engage in parenting support (including by celebrating their talents and strengths), and (c) structural oppression (e.g., lack of housing, extreme poverty, police violence) which complicates their ability to do either. **Conclusions**:

Parenting programmes targeting families in street situations that seek to successfully engage fathers should accommodate their expectations as providers (e.g., via financial support or economic strengthening), create space for them to explore and expand their masculinity in ways aligned with their aspirations to be involved fathers whilst promoting gender equity, and engage with a wider system of support to protect their human rights. Further research is needed to test these strategies in real-world implementation contexts.

Keywords: male engagement in parenting programmes, families in street situations, gender and masculinities, health and gender equity, Kenya

Background

A large and growing global evidence base suggests that parenting programmes have immediate and long-term positive effects on children, parents, and families. Group-based parenting programmes have improved positive parenting practices, parent-child interactions, parent mental health and psychosocial outcomes, and reduced harsh and violent discipline (1,2); as well as enhancing childrens' healthy behavioural, socio-emotional, and cognitive development (2,3). Research is also increasingly demonstrating how male engagement in such programmes can enhance these positive effects. Parenting interventions that have included male caregivers, for instance, have sustained positive parenting improvements and reductions in harsh parenting by both parenting partners, strengthened co-parental and romantic relationships, improved gender-equitable attitudes, and reduced intimate partner violence (4,5). Despite these demonstrated benefits, however, rates of male engagement in parenting programmes globally have remained markedly low (6). Efforts to increase male engagement in parenting programmes

are proliferating amidst increasing calls to enhance men's role in caregiving (7), however there remains a paucity of literature on the engagement of low-income fathers[1] (9), fathers in majority world countries[2](11), and notably, fathers in street situations. Yet reviews show that parenting programmes for marginalised groups can improve parenting and child outcomes in similar ways to less vulnerable families (12), highlighting the importance of supporting families, and fathers, in street situations.

Reflective of this potential are results from our pilot of the *Malezi Bora na Maisha Mazuri* programme (meaning *Good Parenting for a Good Life* in Kiswahili) which was adapted from the Parenting for Lifelong Health for Young Children programme with and for 30 mothers in Eldoret, Kenya. Pre-post evaluation results showed beneficial effects on positive parenting and reductions in child maltreatment, however post-programme qualitative data suggested the programme could be improved by including fathers (13). Prior to doing so, implementation science scholars have encouraged formative research to identify *a priori* potential barriers and facilitators to men's engagement in parenting programmes, in efforts to strengthen programme delivery and maximise impacts (14). Thus, guided by a critical participatory research approach and gender-based analysis inspired by hegemonic masculinity theory (15), this paper aims to explore prospective challenges and opportunities for engaging fathers in a parenting programme co-adapted with and for parents in street situations in Kenya, from the perspective of parents in street situations and service providers who support them. In so doing, this research advances our broader knowledge of marginalized men's engagement in group-based parenting programmes,

[1] Consistent with other research on father involvement (8), we are defining 'father' as either a biological father or non-biological father figure, including resident and non-resident fathers. We use male caregivers and fathers interchangeably throughout this document.

[2] Otherwise referred to as low- and middle-income countries (LMICs) or the 'Global South'. Our use of majority world countries is in recognition that the majority of human activity is situated outside of the Western world, and to challenge the privileging of 'northern' or 'Western' nations within global power relations (10).

while also contributing to the scarce literature on fathers' lived experiences of parenting in street situations.

Factors influencing men's engagement in parenting programmes

Systematic reviews have highlighted key factors influencing male engagement in parenting programmes spanning high-, low-, and middle-income country contexts. These include awareness of available interventions, competing work demands, the logistics of travel and session timing, content appropriateness and father-friendly delivery approaches, facilitator characteristics, and the presence of incentives (6,11,16). Another well-documented influence is gendered perceptions of fatherhood and masculinity, particularly regarding perceived programme relevance (17) and participation in programme activities when they challenge entrenched masculine norms (18,19). Importantly, such gendered barriers may be further complicated by social and economic disenfranchisement experienced by fathers in street situations, defined by the United Nations as those for whom the streets play a central role in their everyday lives and social identities (20). Individuals living and working in the streets in Kenya, for instance, face unstable housing; precarious, dangerous, and/or illegal work; challenges with mental and physical health and addictions; persecution, incarceration, and police violence; violence, stigma, and fear from the wider community, and many other challenges (21–23). As seen in other contexts with disadvantaged fathers (9), this daily struggle to survive may influence fathers' masculine self-concepts in ways that augment their perceptions of and aspirations for fatherhood, and consequently, their perceived need for and interest in parenting support.

Fatherhood, masculinities, and applying a gender lens

Constructions of fatherhood and masculinities are deeply intertwined, and as such, "to study fathers is to study masculinity" (Hunter et al., 2017, p. 2). Connell and Messerschmidt (24) contend that masculinities are multiple, relational, and dynamic, and negotiated within a culturally and contextually constituted hierarchical gendered order. Within this gendered order are hegemonic masculinities; those which are most honoured within a particular context and which serve as a normative threshold for gaining legitimacy as men (24). Hegemonic masculinities in Africa are frequently anchored in fatherhood (25), and characterised by the expectation that men serve as the patriarch and breadwinner within the family unit (26,27). However, men who have been disadvantaged or oppressed along intersecting axes of class, race, and ethnicity, may exercise alternative masculinities to seek credibility where they have otherwise been denied access to hegemonic models, often labelled 'protest' or 'street' masculinities (24,28).

In prior qualitative research with men in Nairobi slums, such masculinities have been characterised by the effort and *struggle* to survive amidst adversity for the sake of their families (29). However, provisional masculine expectations among men in Kenyan slums have also included fatherhood *aspirations* to be more loving, caring, and emotionally involved fathers (30), revealing a tension between dominant and idealised masculinities. Narratives such as these signal both a need and opportunity for parenting programmes to navigate the synergies and divergences between masculinities and fatherhood in contexts of extreme poverty, and to integrate gender as a key analytic domain when engaging men in parenting programmes to support their existing realities and masculine expectations, along with their masculine and fathering aspirations (17,31).

Methods

This research is guided by a critical transformative paradigm; an emancipatory and participatory approach intended to address inequality and injustice (32). To achieve this aim, we combined community-based participatory research (CBPR) with a *post hoc* gender analysis that – where applicable – draws insights from hegemonic masculinity theory (24) to help contextualize community-driven findings. CBPR is not a practice of knowledge generation for knowledge's sake, but rather a platform from which to produce "knowledge-for-action and knowledge-through-action, in service of goals of specific communities" (33). It centres community voices in inquiry, meaning-making, and action through the re-distribution of power and the celebration of community-driven knowledges and ways of knowing (34). This research is the product of a long-term relationship with the street community in Eldoret and organisations that support them, and the community's request for the *Malezi Bora* programme to continue with the inclusion of fathers. The street community was also engaged in co-creating the project's goals and objectives, creating data collection tools, and collecting, analysing, and disseminating data; activities described in more detail below. With their active, meaningful, and ongoing participation and partnership, we have privileged community voices in the meaning-making process described below, while also situating community-driven findings within a gendered understanding of the intersection of fatherhood, masculinities, and structural oppression.

Research team and reflexivity

Team members engaged in this research include the lead author (PhD student and Project Manager), and a data collection team of 12 trained data collectors in Eldoret. Six data collectors were involved in the initial *Malezi Bora* pilot programme as researchers, facilitators, and/or participants; and all were drawn from AMPATH Kenya (a hospital-university consortium), Beruham and INUKA (both community-based organisations (CBOs), and six were Peer Researchers with lived experience in the streets. The team was also comprised of a Parent Advisory Group of 10 parents in street situations in Eldoret (five mothers, five fathers), two of whom were past *Malezi Bora* participants; the leadership team, with representation across academia (Moi, Oxford, and Duke universities) and the Consortium for Street Children; the Steering Committee, comprised of CBOs, international non-governmental organisations, and academia; and project partners, including INNODEMS Kenya. All were involved in various capacities and stages across the conceptualisation, data collection, and co-construction of knowledge, bringing a diversity of geographical (Kenya, Canada, UK, USA), personal (e.g., having lived experience on the streets vs relative privilege), professional (academic researchers, CBOs, practitioners, unemployed, etc.), ethnic (e.g., Luhya, Luo, Kalenjin tribes, etc.), racial, and gendered lenses. Notably, the lead analyst was white, Canadian, and female; characteristics which required thoughtful de-centring throughout the research to privilege community voices in knowledge co-creation, including by actively engaging the street community in data analysis to ensure results were grounded in their knowledges and ways of knowing.

To scrutinise our positionalities and their imprint on the research lifecycle, as a team of data collectors and analysts, we practiced collective reflexivity (35). We held structured team discussions during data collection (via daily team debriefs and strategic team meetings) and

182 analysis (via weekly meetings and ongoing individual and collective reflexive journalling) in
183 efforts to disentangle, dismantle, and sometimes leverage our own diverse assumptions and
184 subjective understandings of parenting, fatherhood, masculinities, and street life. In this way, we
185 attempted to simultaneously problematise and capitalise on these worldviews, positioning both
186 the researche*d* and the researche*rs* as foci for investigation, and viewing subjectivity as integral
187 part of the collaborative and community-centred meaning-making process (36).
188

189 **Ethical approval**

190 Oxford [R83604/RE001] and Moi Universities [0004309] granted ethical approval.
191 Guidance on ethical research with this population was also provided by partner CBOs, Peer
192 Researchers, and the Parent Advisory Group.
193

194 **Study Setting**

195 Data were collected in Eldoret, a city of approximately 470,000 residents in western
196 Kenya (UN Data, 2022). Abject poverty, post-election violence, HIV, and family violence and
197 abandonment have contributed to high numbers of young people in street situations in Eldoret
198 and elsewhere in Kenya (Goodman et al., 2016; Save the Children, 2012). A 2018 point-in-time
199 count found 1,419 young people (ages of 0-29) living on the streets in Eldoret (73.9% male)
200 (Braitstein et al., 2019), and these numbers are predicted to fluctuate up to 3,000 due to this
201 population's transience (Embleton et al., 2018). These individuals either sleep on the streets (on
202 verandas or in wastelands), or in informal settlements on the city's outskirts (Braitstein et al.,
203 2019). These living conditions present unique challenges to parenting and programme
204 engagement, central to this study's focus.

205

206 **Data collection**

207 Prior to data collection, project goals and objectives were developed in consultation with
208 the Parent Advisory Group. Data collection then occurred in three distinct yet overlapping phases
209 between January – June 2023, each of which informed the succeeding phase(s). Phase 1: semi-
210 structured in-depth interviews (IDIs) and demographic surveys lasting 1-2.5 hours were
211 conducted with 40 parents in street situations (20 mothers, 20 fathers), by two teams of data
212 collectors (one male, one female) made of up one experienced qualitative researcher from
213 AMPATH, and one Peer- or CBO Researcher. Phase 2: IDIs lasting 1-2 hours were conducted in
214 English by the Project Manager (lead author) with 12 community service providers, either at
215 participants' respective organisation or Moi Teaching and Referral Hospital (MTRH). Phase 3:
216 eight focus group discussions (FGDs) were undertaken with the same 19 parents in street
217 situations; four sequential FGDs with mothers (n=10) and four sequential FGDs with fathers
218 (n=9). Demographic surveys were conducted with parents immediately prior to the first FGDs.
219 There was no participant attrition across consecutive FGDs. One additional FGD was held with
220 parent participants from the initial *Malezi Bora* pilot programme (n=10), due to their deeper
221 familiarity with programme content. All data collection tools for each phase can be found in
222 English in Supplementary File A. FGDs were facilitated by two Peer- and two CBO Researchers
223 on the data collection team, with support from the Project Manager. Upon advice from the Parent
224 Advisory Group for protecting participants' physical and psychological safety as well as
225 facilitating language comfortability, all data collection with parents (Phase 1 and 3) was
226 conducted at MTRH in Kiswahili and Sheng, a slang common in the streets. Interview-, survey-,
227 and FGD guides with parents were co-developed, reviewed, and refined by the data collection

team for appropriateness, comprehension, and clarity, and were piloted with the Parent Advisory Group prior to data collection. These tools were initially drafted in English, then translated to Kiswahili prior to piloting, adapted further to Sheng, and following the piloting process they were back-translated into English. All interviews and FGDs with parents were audio-recorded and were transcribed, translated, and de-identified by qualitative researchers at AMPATH. Final de-identified transcripts were checked for completeness by the Project Manager, and for translation accuracy by a senior AMPATH researcher fluent in Kiswahili and English. Interviews conducted in English were transcribed and de-identified by the Project Manager. Anonymized fieldnotes were also recorded in all phases by the data collection team.

Participant selection

Parents in street situations were recruited via purposeful sampling through referrals by partner CBOs (Beruham and Inuka) and Peer Researchers, to select information-rich cases (37) across gender, community, and age. Parents were eligible to participate in interviews (Phase 1) and FGDs (Phase 3) if they (1) were ages 16 and above, (2) self-identified as being currently connected to the streets, and (3) served as a parent to at least one child under 17 years of age, with whom they lived. For the interviews (Phase 1), parents were excluded if they had participated in the 2018 *Malezi Bora* pilot programme, to mitigate potential response bias. Past *Malezi Bora* participants were also excluded from consecutive FGDs (Phase 3) upon the data collection team's recommendation, to prevent them influencing other participants' responses. Participants in the interviews were excluded from participating in the FGDs, given the overlap in questions and to enlarge the sample. Community Service Providers (Phase 2) were recruited purposefully via referrals from the data collection team and via snowball sampling to gain

insights from a diversity of sectors, organisations, positions, and genders. Service providers were eligible if they have worked or still work with young people in street situations in any capacity, and if they were aged 18 or above. Compensation for participants in each phase was determined with the advice of the data collection team (Table 1).

Data collected

Demographic surveys for Phases 1 and 3 explored participant age, gender, housing– and relationship status, income (in)security, the number of biological and other children under their care, and other such descriptive information to contextualise the qualitative data. Data collection processes for each research phase, including corresponding example questions related to father engagement, can be found in Table 1. Phase 1: Interview questions and corresponding probes explored participants' experiences as parents in the streets, as well as perceptions of including both fathers and mothers in a parenting programme. Phase 3: The first FGDs focused on thematic parenting content included in the existing *Malezi Bora* programme. Questions explored (a) relevance and acceptability of content and (b) challenges and opportunities for engaging fathers and mothers in the programme. The second FGDs workshopped activities aligned with feedback from prior FGDs (Phase 3) and interviews (Phase 1), drawn from the *Malezi Bora* programme and other male engagement programmes in sub-Saharan Africa (e.g., *Bandebereho* and *Parenting for Respectability*). Activities included illustrated stories, discussions, role plays, and brainstorms on child-led play, resolving partner conflicts, and understanding harmful impacts of gender norms. Following each activity, participants were asked questions that explored (a) its relevance and acceptability, and (b) challenges and opportunities for engaging male caregivers. The third FGDs focused on delivery and logistic considerations, and the fourth FGD involved a

simulated practice session with mothers and fathers combined, followed immediately by gender-separated FGDs (suggested by data collection team to enhance participant comfortability and safety) which covered (a) session acceptability, (b) father engagement, (c) group composition, and (d) desired changes in their family lives. The FGD with past *Malezi Bora* participants amalgamated relevant questions from the preceding Phase 3 FGDs. Phase 2: Finally, interviews with community service providers explored potential barriers and facilitators for engaging fathers in a parenting programme with this population.

Table 1.

Research procedures for the three phases of data collection

	Phase 1	**Phase 2**	**Phase 3**
Participant group	• Mothers and fathers in street situations	• Community service providers	• Mothers and fathers in street situations
Data collected	• IDIs • Demographic surveys	• IDIs	• Consecutive FGDs with the same parents (4 with mothers, 4 with fathers) • FGD with past participants of *Malezi Bora* pilot programme • Demographic surveys
# of participants	• 40 (20 mothers, 20 fathers)	• 12 (2 faith leaders, 5 social workers, 3 CBO directors, 2 government child protection specialists)	• 8 consecutive FGDs: 19 parents (10 mothers, 9 fathers) • 1 FGD with past *Malezi Bora* participants: 10 mothers
Inclusion criteria	• Age 16 and above • Self-identified as being currently connected to the streets • Served as a caregiver to at least one child under 17 years of age, with whom they lived	• Currently work, or have previously worked to support young people in street situations • Age 18 and above	• Age 16 and above • Self-identified as being currently connected to the streets • Served as a caregiver to at least one child under 17 years of age, with whom they lived

Exclusion criteria	• Participated in the 2018 *Malezi Bora* pilot programme	• N/A	• Parent participants from the IDIs (Phase 1) • Consecutive FGDs with the same parents: Participated in the 2018 *Malezi Bora* pilot programme
Interviewees and facilitators	• 1 experienced AMPATH researcher and 1 Peer– or CBO Researcher working in gendered teams	• Project Manager	• 2 Peer- or CBO Facilitators • 2 Peer- or CBO mobilisers • Support from Project Manager
Location of data collection	• Moi Teaching and Referral Hospital	• Moi Teaching and Referral Hospital or participants' workplace	• Moi Teaching and Referral Hospital
Language used	• Kiswahili and sheng	• English	• Kiswahili and sheng
Sampling method	• Purposeful (referrals from CBOs)	• Purposeful (referrals from CBOs) and snowball sampling	• Purposeful (referrals from CBOs)
Compensation offered	• 500 Ksh honorarium • 120 Ksh transport fare • 500 mL milk for parents and accompanying children • Diapers for young children	• 1000 Ksh honorarium	• 500 Ksh honorarium • 120 Ksh transport fare • 500 mL milk for parents and accompanying children • Diapers for young children • Tea and snacks (chapati, mandazi, samosas)
Example questions related to male engagement	• "What do you think about including mothers and fathers together in a parenting programme? What would be the benefits? Challenges?" • "What could help fathers join and stay in the programme?" • "What challenges might exist for engaging fathers?" • "How can we design the programme so that it is safe for all participants involved? (e.g., via single sex or	• "What barriers/facilitators might exist in getting fathers to enrol in a parenting programme?" • "What factors may facilitate/hinder fathers' continuous attendance in a parenting programme?" • "What factors may support/hinder male caregivers' active participation in programme sessions (e.g., group discussions, role	• "Did you enjoy the session? Why/why not?" • "Which topics did you enjoy the most and why? The least?" • "What activities (e.g. role plays, stories, etc.) did you enjoy the most and why? The least?") • "Do you think fathers would want to participate in this programme? Please explain" • "How do you think this session can be improved to engage fathers?" • "How did you feel about working together as men and women in the session?"

	mixed-sex sessions etc.)"	plays, at-home practice, etc.)?"	• "What would make you feel safe and comfortable in a programme that engages both mothers and fathers?"

285

286 **Data analysis procedures**

287 Survey data was analysed descriptively in Excel software (v. 16.92). Inductive analysis
288 followed the six phases of Braun and Clarke's reflexive thematic analysis (38) alongside a
289 participatory co-analysis with the Parent Advisory Group, the data collection team, INNODEMS
290 Kenya, and community stakeholders in Eldoret. These two analysis processes were synergistic
291 and recursive. (1) *Data familiarisation* occurred while data collection was ongoing to identify
292 emerging patterns, tensions, points for further inquiry via daily debriefs and a full-day team
293 meeting with the data collection team, and a rapid reading and re-reading of the available de-
294 identified data by the Project Manager (KM) and INNODEMS partner (LC). Three members of
295 the research team (KM, RK, SK) continued data familiarisation once all transcriptions were
296 complete, including via the use of reflexive notes and analytic memos.

297 (2) *Coding for analytically meaningful segments of data* was first undertaken by the lead
298 author and Project Manager (KM) and INNODEMS partner (LC) with the Parent Advisory
299 Group. De-identified participant quotes were shared with them during two co-analysis
300 workshops for their reflection and discussion from which words and phrases (i.e., codes) were
301 'harvested' (39) by a notetaker with lived experience on the streets, and placed on sticky notes.
302 The Parent Advisory Group refined the codes and mapped them on chart paper to reflect the
303 pathway of father engagement in a group-based parenting programme (workshop 1; Figure 1),
304 while considering their implications in an emerging programme Theory of Change (workshop 2).
305 These codes served as the foundation for the remaining coding process, where three research

team members (KM, RK, SK) collaboratively coded 15% of the transcripts, adding depth to shared meaning-making via weekly coding meetings and reflexive notetaking. KM then reflexively coded the remaining transcripts using *NVivo v14* software.

(3) *Generating initial themes* was initiated immediately following data collection during a knowledge sharing and co-analysis workshop with 37 stakeholders in Eldoret (Figure 2), representing the street community (n=9), government (n=5), CBOs (n=18), faith-based organisations (n=1), and academia (n=4). Using codes constructed by the Parent Advisory Group, participants thematically organised codes around key challenges and opportunities for engaging male caregivers in a parenting programme. These themes were further refined through reflexive coding by KM, RK, and SK. (4) *Developing and reviewing themes to reflect data as a whole,* (5) *refining, defining, and naming themes,* and (6) *writing up* was led by KM. Final themes and manuscript drafts were shared with the full data collection team, project leadership, and Steering Committee for reflection and feedback, and to ensure alignment with lived experience in the streets.

Figure 1.

Co-analysis workshop with the Parent Advisory Group, where they mapped early codes along a pathway of fathers' engagement in a parenting programme.

Note: This and the following figure are shared with the written consent of the individuals in each photo.

Figure 2.

Knowledge sharing and co-analysis workshop with community stakeholders in Eldoret.

Results

Parents across Phases 1 (interviews with 20 mothers, 20 fathers) and 3 (FGDs with 20 mothers, nine fathers) were between 18-43 years of age. Mothers were an average of 24.8 years old (SD: 5.2), and fathers 27.2 years (SD: 6.8). Fifty-six (81.2%) parents were in a current relationship (29 fathers, 100%; 27 mothers, 67.5%). Both fathers and mothers were caregivers of a median of 2 children under the age of 17 (IQR: 2). Fathers had a median of 1 biological child (IQR: 1), and mothers 2 biological children (IQR: 2). Sixty-six parents (95.7%; 28 fathers, 96.6%; 38 mothers, 95%) reported having ever run out of money for food while on the streets, and 15 parents currently had no access to shelter (21.7%; 3 fathers, 10.3%; 12 mothers, 30%). Phase 2: Of service providers interviewed (n=12), five were female and seven male. Eight were employees of CBOs in Eldoret, including social workers (n=3), faith leaders (n=2), and directors (n=3); and four worked for government agencies as social workers (n=2) and child protection specialists (n=2).

Qualitative results pertaining to the challenges and opportunities for engaging fathers in a group-based parenting programme are constructed around three overarching themes and associated subthemes, presented below: (1) structural oppression, (2) gendered expectations of fathering and masculinities, and (3) fatherhood and programme aspirations. These represent inductive, community-driven results; results which are further contextualized in the discussion including by drawing upon hegemonic masculinity theory (15).

Structural oppression

Homeless and harassed

Street life was characterised by offences to fathers' dignity and human rights which participants stressed would reduce their ability to participate in a parenting programme. Respondents highlighted that the reality that prospective participants will be unhoused or precariously housed may, among other challenges, hinder their ability to consistently attend because of the health consequences of homelessness, affecting both fathers and their families: "Sometimes my wife and my child get sick because we sleep outside, so that may hinder me from attending" (FGD #1, with fathers). Precarious housing was also perceived to impede their ability to apply what they learn outside the programme. A CBO Director, for example stressed that, "…if they come from the programme, and they don't have a place to stay…they go right away to the streets, then where would they practice the take-away [activities]?" (053, female).

Fear of persecution by authorities was also reported as a potential barrier to attendance and active participation by nearly all participants. Providing important context, one service provider discussed the hostility of law enforcement towards the street community:

> "They [the street community] will of course tell you that, 'Our rights are violated when we're on the streets. Because the law enforcement, they beat us, they abuse us physically, they chase us, some even have died on the street…whenever we come on the streets to earn a living…we are chased by the government.'" (054, female, government child protection officer)

In response to these fears, fathers are frequently on the move, remaining in the shadows "Because they don't want to be known" (056, female, social worker at a CBO). Situating the challenge of law enforcement within the context of programme attendance, a CBO social worker

voiced how sometimes fathers will "leave for a safer town, compared to Eldoret" which "might contribute now to not coming [to the programme]" (049, male). Amidst these hostile practices, a government child protection specialist reflected on the contradiction of asking parents in a programme to engage in positive parenting whilst obstructing their ability to do so with punitive policies and violent enforcement:

> "…you need also to change the mindset of the law enforcement officers on the street. Because…if I go there and tell them [parents], 'Kindly let's raise our children positively, let's not violate their rights', and yet the government officers, or the law enforcement officers, are using excessive force…so what message are you passing? It is the opposite of what we are doing, isn't it?" (054)

In addition to violence from authorities, parents also discussed perceived stigma from the community more broadly, making it difficult to commute to and from a programme and underpinning the need to house sessions in a physically and psychologically safe space:

> "The problem arises when we are walking back home. Apart from the county police, the ordinary people also fear seeing us walking in a group and they avoid us thinking we will harm them. We should have these classes in areas where we live, and people are used to us." (FGD #3, with fathers)

These reflections were accompanied by comments from parents that, in the absence of a place to shower and change their clothes, parents in the streets are easily identified by their 'dirty' appearance, making them an easy target for onlookers and contributing to their own insecurities about programme attendance.

Trust is a currency on the streets

Against the backdrop of adversity, participants discussed how the street community has been given little reason to trust initiatives, and people, intending to support them. This mistrust was voiced as a potential challenge to men's enrolment in a parenting programme, based on their experiences with past initiatives and not feeling they have been adequately supported, often because prior programmes have not been sustained:

> "Now you know they [men] say that, many times I have been going to programmes and I am not helped...A person calls others at a place [a programme], you see that you will get help, then it bounces. So, you tell yourself that you will not return there again." (016, interview with a mother, age 30).

Relatedly, mistrust was born of encounters with and/or perceptions of corruption by programme implementers:

> "Okay, you will most often hear that people eat our money. People eat our money, and they use us. And then they go, and they never come back." (048, male social worker at a CBO)

To counter this challenge, several participants stressed the importance of collaborating with individuals and organisations during recruitment with whom fathers trust, including peer role models, their female partners, and CBOs, all of whom have a deep understanding of men's stories and circumstances, and have earned their trust:

> "…partnering with organisations already working with them. Trust is a currency on the streets. Trust is very important. And maybe it's because most of the time that trust has been broken by people, telling them we won't do this, promising things, but failing to deliver on their end….There are different organisations that have already built that

rapport with the street families, so when they call for something, you are sure that they are going to attend." (052, female, Director of a CBO)

This was true also for the facilitation of programme sessions, with all participant groups asserting the importance of employing facilitators with experience working with the street community, who are "genuine, legitimate, and as honest as possible with them" and who are "driven by passion…to make a difference in the lives of these people" (050, male, CBO Director). Such facilitators were perceived as able to manage complex group dynamics, 'speak their language', and most importantly, would be trusted and respected by fathers and who in turn will exercise respect towards participants:

"You must get the right people to give this…to have people who know how to speak to these fathers. It's not just anybody who can speak, or who can teach, who can bond, who can understand the dynamics…an appropriate facilitator is somebody who has experience…who has interacted with these people. They know how they behave, they know a lot of things about them. Because such people also, they get their acceptance." (051, male, CBO social worker)

Also stressed among service providers and the Parent Advisory Group was the importance of communicating programme objectives with fathers well in advance, and being realistic about its potential benefits so as not 'over promise' and consequently compromise their trust:

"…Never promise a street kid [referring to fathers] anything that you know you will not provide, never. If you do that, ah! Big blunder. So, become very honest with them. Tell, this is our objective, this is what we want to do, this is what we want to achieve at the end of the day." (050, male Director of a CBO)

Coping with mental health and addictions

Substance use was a frequently noted barrier to men's engagement, both regarding their commitment to attending consecutive sessions and their active engagement within them. Drug and alcohol consumption is common within the streets, largely as a coping mechanism and a response to mental health challenges and complex trauma (Embleton et al., 2013). It was also noted by participants to be a way to engage recreationally with peers by "using some things [drugs]" to "become happy" (028, interview with a father, age 25). Participants shared how drug use may hinder men's attendance because drugs "make you fail to think right…It is called 'musii' [glue] and that thing won't allow you to attend. You can't." (025, IDI with a father, age 42). Concentrating whilst in programme sessions was also a cited challenge when effected by substance use making it difficult to actively engage, a sentiment shared by fathers and further substantiated by several service providers in such comments as:

> "…When this person is still using drugs, he cannot participate in these things. Sometimes he will come to the programme and he has taken the drugs. You see, this one could be a barrier, he won't participate in the programme" (046, male, faith leader at a CBO).

Recognising how substance use can impede men's concentration, most service providers and the Parent Advisory Group expressed the importance of short and interesting sessions that maintain fathers' attention, over and above the benefit of this approach in the absence of substance use.

With substance use compounding the existing unpredictability and uncertainty defining fathers' days (and with few having access to working phones), all participant groups discussed the importance of visiting fathers where they live to remind them of forthcoming programme

sessions throughout delivery (or having them visit each *other* by electing peer leaders to routinely mobilise fathers) – a sentiment confirmed by the Parent Advisory Group:

> "…even other programmes that we have had, you could tell a person [in the streets] that there is a programme but then they get to the baze [streets] and take some drugs and forget. They will not show up the following days. Or they might forget and blame you for not reminding them…There has to be a reminder…" (Parent Advisory Group meeting, with fathers)

> "If tomorrow is the lesson, it's like today you alert him, so that tomorrow he comes to the lesson…" (015, a mother, age 27)

A further suggestion by service providers to support their complex needs, including mental health and addictions, was to work closely with other organisations providing health and social services (government, CBOs, etc.) to link participants to the supports they need.

Gendered expectations of fathering and masculinities

Not for men

A notable factor influencing fathers' enrolment in a parenting programme were societal and sociocultural ideologies of masculinities and fatherhood, positioning men as providers rather than carers of children. The internalisation of these prescribed gender norms was reported as a potential barrier to men's enrolment and active engagement, for they may assume that parenting "is none of their business, that they [men] were created to look for money and not for taking care of children" (FGD #2, with mothers).

> "You find that the culture aspect also will be kind of a barrier…because women are seen as the only one who are supposed to do the parenting. Men are supposed to just go to

fetch what the family will feed on and how it's going to survive." (045, male government child protection officer)

Such reflections were also shared in relation to men's engagement with programme activities, particularly if activities conflicted with their gendered perceptions of themselves as men, and social and cultural gendered scripts that shape those perceptions. For instance, respondents mentioned that parent-child play would not be perceived positively by fathers, as they may feel judged by others for performing what they believe to be a woman's role. As one service provider – a former facilitator of the *Malezi Bora* programme – stated, "There are things we did with the mothers that they [fathers] cannot be taught. They will say, "This is stupid! This is for mothers! We are not a child!" (053, female, Director of a CBO). Similarly, a female CBO social worker (051), stated:

> "So that could be a huge, huge barrier. The culture, experience, perception about playing with the children. The larger perception of playing with children in this context is just like, you are such a child. People perceive…what will people think? Who am I? Someone's playing with a child, "Is he mad?".

Notably, comments suggesting that parenting – and programme engagement – may challenge men's masculine expectations and expressions, were most frequently cited by service providers and female caretivers rather than fathers themselves.

He should look for money

The expectation of fathers to provide for their families combined with the scarcity and unpredictability of jobs meant that men needed to look for and accept potential employment opportunities: "Because many are jobless, when they get a job in the morning, they cannot be in

546 a position to come to Malezi Bora" (FGD #3, with fathers); "You might be needed to report for
547 the [programme] session at a specific time but then you are supposed to go to your job, because
548 your family is depending on you" (FGD #1, with fathers). Mothers similarly acknowledged this
549 challenge: "It can be hard coming every day. He should look for money for us to eat" (004, a
550 mother, age 18). Such expectations amidst extreme scarcity bred a sense of immediacy, where
551 men's primary concern was how to survive until tomorrow. As stated by a CBO social worker:
552 "…we say on the street, the attitude is fatalistic. So sometimes you don't think about the future.
553 You think about today, what we can get today, tomorrow will take care of itself" (048, male).
554 Service providers elaborated on how this challenge pertains to programme engagement,
555 indicating how the search for work can also lead men to other towns, and that the type of work
556 they do have access to puts them at risk of persecution (e.g., selling drugs, theft, etc.), both of
557 which could disrupt their ability to engage routinely in a parenting programme. As one service
558 provider noted:
559 "…we have those who steal to earn a living, so maybe we had planned to meet tomorrow,
560 and he steals. Maybe he's arrested and taken to jail…So you find that the continuity will
561 be interrupted because of what they go through." (055, female, social worker at a CBO)
562 Recognising the magnitude and imminence of men's responsibility to provide for their families
563 amidst structural constraints (e.g., housing and income insecurity), and the potential
564 consequences of them returning home empty-handed with no alternative for paying rent, buying
565 food, and securing the needs of their children, nearly all participants stressed that programme
566 implementers should offer material support by way of stipends, transportation fare, food, and
567 clothing, alongside economic strengthening (e.g., cash transfers, skills strengthening, savings) to
568 complement parenting knowledge and skills:

569 "Providing something like maybe food, maybe clothes, maybe some finances…anything
570 that can be of help in the family. You see…somebody can say that, today I wanted to go
571 seek a job somewhere, but that day is the day of the programme. So, if…I go to the
572 programme and I don't get something from the programme, it can be hard for me" (046,
573 male faith leader at a CBO).
574
575 ***Power, vulnerability, and the space between***
576 Life in the streets prompted men's efforts to seek power within their environments,
577 including through the attainment of multiple sexual partners: "…for you to be powerful in the
578 streets [as a man], you need to have multiple babies with different people..." (052, CBO Director,
579 female). Nearly all participants stressed this as a complication for engaging men and women
580 together in programme sessions due to challenging relationship dynamics. For example, if a
581 current spouse and other sexual partner were present in the same session, it may inhibit fathers'
582 engagement by unearthing feelings of shame and embarrassment: "Maybe when both the
583 mistress and the wife are in the same session, it would be embarrassing for him to engage" (FGD
584 #2, with mothers). Such dynamics were also perceived to potentially make both men and women
585 feel less inclined to share during discussions, for fear of exposing their 'secrets' to one another
586 (e.g., sexual partners, HIV status, use of family planning, etc.): "You know that if a person hears
587 another one's secrets when they get there [the programme], there will be defiance among
588 them…" (016, a mother, age 30).
589 Relatedly, participants stated that there may be reluctance among men to expose their
590 vulnerabilities, mistakes, and perceived weaknesses in front of women. Several service providers
591 noted that men may 'feel guilt', in cases where they have perpetrated violence against women

592 who are in the session, or where they feel a sense of failure for not fulfilling their gendered
593 expectation as provider. These feelings, which mothers in the FGDs suggested were a product of
594 men knowing their relationship wrong-doings but wishing for them to remain concealed, were
595 noted to potentially prompt family violence outside the programme: "They [men] might get
596 angered and when you go back home they beat you up" (FGD #1, with mothers); "Most men
597 understand their mistakes, and they think you are exposing their mistakes out there and this only
598 escalates issues" (FGD #2, with mothers).
599

600 **Fatherhood and programme aspirations**

601 ***Motivation to be good fathers, and belief that a programme can help***
602
603 Participants spoke frequently and evocatively about their motivation to change from the
604 life they are leading, and to care for their children "Because they really want to be good fathers"
605 (053, female CBO Director) and they "would appreciate learning how to raise their kids, so as to
606 nurture them into better adults" (FGD #3, with mothers). Their desire to be 'good' fathers was
607 often in relation to fathers wanting a positive change in their family's lives in efforts to not be
608 'consumed' by the streets. As a government child protection officer stated, many fathers in street
609 situations "want the best for their children…as much as they themselves live on the streets, they
610 don't want their children to live on the streets" (054, female). As such, participants stated that if
611 fathers viewed a parenting programme as an opportunity to make a positive change for the sake
612 of their children, they will engage: "If they [fathers] see that this [programme] is the right thing,
613 they also want to do that right thing…because it [the streets] is like a pit and you might fall in"
614 (040, a father, age 19).

Other fathers similarly expressed their motivation to learn how to care for their children: "I can come [to the programme] because for now I am still new in these things [parenting] and the more I come the more I get experience so you see to me, I cannot miss coming…" (029, IDI with a father, age 23). One service provider suggested that men want to be engaged in raising their children, it is only that they have been excluded from existing services:

> "…to bring fathers on board, is to change the perception that programmes are only meant for women and children. When you communicate the same that fathers also play a very big role in parenting, or raising children, I want to believe they will adopt. Because all along, they've been excluded. And I think they would be happy to see people embracing them as members of a family, and also playing a very important role in upbringing children" (054, female, government child protection officer)

Fathers' interests in being more actively engaged in their children's upbringing sometimes extended to engaging in parenting practices that ran counter to masculine expectations in the streets. A CBO Director, for instance, acknowledged a common disconnect between what men *wish* to do and what they perceive is culturally acceptable. They stated that although the perceived views of others, "the community branding, the society branding" of men and fatherhood consigns men to the role of provider, many men nonetheless find playing with their children entertaining and enjoyable; something they wish to do to "bond" with their children and "feel part of the family" (051). Recognising that many fathers in street situations share in this desire, participants stressed that the programme should seek to engage those fathers who are personally motivated to be engaged fathers, and who *want* to be there.

Building and respecting 'the man'

A subtle yet powerful undercurrent throughout many participants' comments was the importance of catering to men's masculine role constructions and aspirations of being leaders in their families and in their own lives, for "after you've developed that man now you can even become a better parent." (052, female CBO Director):

> "So, if they see that, okay, we are men. They [programme facilitators] acknowledge our position as men. Now we are talking men. If they realise that their position is lifted, they will participate effectively. Very effectively." (053, female).

One suggestion for building father's gendered aspirations to be leaders was to have them at the helm of programme planning and delivery (e.g., as facilitators, mobilisers, peer mentors, timekeepers, etc.). Participants discussed how such a participatory approach will not only strengthen their aspirational masculine self-concepts as leaders, but will also captivate their interest and promote their ownership over the programme and commitment to its success: "…for them to continue coming to the programme and as the programme rolls out…let them now be part of planning on how these sessions are going to be carried out…And to maybe be co-facilitators…" (045, male government child protection officer). Another service provider echoed this:

> "…number one, you make sure that you involve them from the word 'go', so that they become part and parcel of the journey. So that they have what we call ownership…They will not want somebody to come and ruin it". (050, male, Director of a CBO)

Sharing anecdotes from their own lives, fathers in the Parent Advisory Group also stressed how entrusting parents with programme responsibilities can be a transformative opportunity for building their skills, confidence, and strengths as men.

Participants also suggested including activities that offer space for men to showcase their talents and strengths in ways they enjoy yet seldom have the opportunity in a context of survival. Reflecting on men's enjoyment of parenting role plays, one service provider stated: "…they're able to be dramatic, and it's allowed!". Fathers elaborated on this to suggest that by incorporating activities that align with men's gendered interests and goals, they will be gaining more than new knowledge and skills: "Some of us have talents. I can dance and play football. These can be added so that I will be knowing that apart from classes, there is something else I am gaining here" (FGD #3, with fathers).

In addition to fostering men's masculine self-concept by creating leadership opportunities, respecting existing leadership was reported as important for encouraging men's enrolment; specifically, leveraging peer leaders who elicit influence within the streets and who can equally hinder men's engagement if not appropriately engaged. "Being motivated by people who they have respect for will persuade them" (006, IDI with a mother, age 18), while also signalling that "they [programme staff] are respecting us" (043, IDI with a father, age 24). Participants stressed that if men can see *changes* in male peers who took part in a programme, they may be more inclined to join:

> "The people around us, when they see that we were taught and there are visible changes in us, they will have the desire to come and get taught…When they see that we no longer have fights in our homes because of the programme, they will surely want to come…so that they can be like us." (041, IDI with a father, age 23)

Discussion

Our participatory co-analysis revealed potential challenges and opportunities for engaging fathers in street situations in a group-based parenting programme amidst a nuanced entanglement of masculine expectations, fatherhood aspirations, and structural oppression. Latent participant narratives suggest that navigating this complex interplay requires both respecting dominant models of masculinity and the environment underpinning them (e.g., prioritising survival amidst social and economic marginalisation), whilst also resisting them by advancing men's aspirations and motivations to be 'good', engaged fathers. To do so, participants stressed the importance of a participatory and collaborative approach which positions fathers as leaders while fostering a larger system that promotes, rather than threatens men's engagement (and the achievement of their fatherhood goals), such as human rights protections, and linkages to supports and services.

A notable gendered barrier to father engagement was that parenting is principally considered a mother's responsibility, and provision that of a father. Participants cautioned that spending time with children was considered antithetical to manhood; that programme activities could be perceived as childish and 'unmanly', threatening their pursuit of the hegemonic masculine ideal within Kenya (29). Importantly, however, these narratives were largely expressed by service providers and female caregivers rather than fathers themselves, suggesting that this cultural expectation is not always internalised, and may be in tension with their own personal desires. Nonetheless, this imposition of socially defined masculinities – one reinforced by both men and women – has been widely recognised as a key barrier to men's engagement in parenting programmes globally (40), one which may serve especially poignant in the context of structural and material disadvantage where the need to exercise contextually dominant masculinities as a means of physical and social survival is both pertinent and urgent (9). The

influence of gendered role prescriptions has also been discussed in the literature with regard to maternal 'gatekeeping' of men's engagement in parenting (and likely by extension, parenting programmes), in their efforts to protect their children, themselves, or to validate their maternal identity (41,42). However, our findings uncovered no such sentiment by participants, either explicit or implicit.

Fear of unearthing feelings of failure, embarrassment, or shame for not meeting the hegemonic masculine 'ideal', was also widely expressed across participant groups (particularly women and service providers) as a barrier to men's engagement, as was the possibility of exposing 'secrets' by both men and women, such as extramarital sexual relations. Importantly, these concerns were perceived as catalysts for intimate partner violence against women, signalling potential unintended consequences of including both fathers and mothers in a parenting programme. While a WHO review of the global evidence on parenting programmes yielded little information on their iatrogenic effects, authors attributed this in part to measurement and reporting gaps (1), indicating the need to carefully explore possible adverse effects resulting from men's programme engagement. For example, an adaptation of *Indashyakirwa* in Rwanda observed an increase of intimate partner violence post-programme, one of the postulations for which included backlash against gender equity messaging (43). Such a finding aligns with theorising that men may seek to reclaim power via violence when they otherwise perceive it as threatened (44). In efforts to mitigate these potential challenges, it may be important to incorporate single-sex programme sessions, an approach taken in other father-inclusive parenting programmes such as *Parenting for Respectability* in Uganda (19) and *Bandebereho* in Rwanda (45). These male-only parenting spaces can facilitate men's free expression without fear of vulnerability in the presence of women (19,45), help them maintain a

730 feeling of masculinity within what they may otherwise perceive as a feminine endeavour (46),
731 and importantly, mitigate potential harm to women.

732 Aligned with gendered notions of parenting, men's gendered script of 'provider' was
733 predicted to disrupt their programme attendance, as fathers were expected to prioritise income
734 generation over session attendance; a need that scheduling alone – despite recommendations
735 (47,48) – is unable to combat when access to work is highly precarious and secured on a day-to-
736 day basis. A unanimous suggestion across participant groups for overcoming this challenge was
737 by offering financial support, by way of stipends, food, transport fare, or by introducing an
738 economic strengthening component to the programme itself. Such financial support – though
739 more costly from a delivery perspective – may alleviate men's fear of returning to their families
740 empty-handed and its associated consequences: children sleeping hungry, fathers and mothers
741 engaging in unsafe or illicit activities to secure basic needs, and intimate partner violence (49).
742 Thus, it may facilitate men's participation while mitigating programmatic and structural harm.

743 Men's intrinsic motivation to be 'good' fathers and provide a 'better life' for their
744 children was also a critical conduit of father's participation in a parenting programme, consistent
745 with myriad behaviour change theories (50) and literature on men's engagement in family-based
746 interventions (16). However, given that father– and masculine role construction are deeply
747 entangled with provision in Kenya and other sub-Saharan countries (14,51,52), a 'good' father
748 may not equate to an engaged father, potentially threatening perceived programme relevance.
749 Fatherhood scholarship has elucidated the complexities of these identities and practices. Dolan
750 (46), for example, suggests that men's personal values and motivations to be 'good', engaged,
751 and caring fathers may be circumscribed by normative ideals of manhood in the public sphere
752 (e.g., breadwinner). Other authors, such as Hunter et al. (53), suggest that provision can itself be

753 a form of caring, and caring can encompass hegemonic ideals. Recognising this complex
754 relationship, studies with marginalised men have also suggested that while fatherhood role
755 construction can mediate engagement in early childhood programmes, reciprocally, their
756 engagement can prompt the construction of new and nuanced masculinities (28,31,54). Giusto et
757 al. (55), for instance, piloted the inclusion of masculine discussion strategies (MDS) in a task-
758 shifting intervention in Kenya to reduce men's alcohol use, depressive symptoms, and co-
759 occuring family problems; strategies which sought to expand notions of hegemonic masculinity
760 to include caring masculinities. While there was limited data on the acceptability and feasibility
761 of MDS specifically, the intervention at large proved acceptable to father participants (55),
762 reinforcing the importance of understanding how to support men's motivations in a way that
763 carefully navigates the convergence of masculine expectations (e.g., provider) and fatherhood
764 aspirations (e.g., involved father).

765 Gendered notions of masculinity and fatherhood were also influenced by structural
766 oppression among families in the streets. Reflective of street environments across Africa (56–
767 58), participants spoke of housing insecurity and extreme poverty, persistent police violence, and
768 stigma and social exclusion by the wider community. Such societal subjugation was suggested to
769 inhibit men's ability to attend programme sessions, in parallel with health and violence
770 prevention programming in other violent communities where fear of experiencing daily violence
771 has impeded participation (59,60). This level of oppression was also expected to subvert men's
772 parenting practices with the recognised irony that the very values they are being asked to enact
773 have been overtly denied to them. Consistent with recommendations from other family
774 interventions in majority world countries (61), key suggestions for addressing these tensions
775 included (a) ensuring the programme is delivered in a physically and psychologically safe and

accessible location, and (b) taking a coordinated response that engages police, government, and CBOs to create a more facilitative and holistic environment for men's engagement, protection, and complex needs (e.g., mental health and addictions, unstable housing and employment, etc.), including via service linkage. The engagement of CBOs was important also for establishing trust with the street community, given their intimate understanding of the realities of street life.

Against the intersection of masculine expectations, fatherhood aspirations, and structural oppression, participants overwhelmingly stressed the importance of taking a participatory and strengths-based approach to programme development and delivery; a practice highly encouraged when working with fathers (62), individuals in street situations (63), and the street community in Eldoret (64). Not only was a participatory approach encouraged for strengthening men's trust in a programme (64), but positioning fathers as leaders celebrates their talents, strengths, and humanity, in opposition to prevailing societal perceptions that they are dangerous, delinquent, and subhuman (23). Indeed, it may create space for men to resist and reconstruct street masculinities born from social exclusion, by helping them exercise self-mastery, responsibility, and agency, working to strengthen, rather than threaten their masculine self-concept amidst adversity. Doing so, however, must be approached delicately, and with shared leadership of mothers so as not to reinforce men's patriarchal power over women.

Critically, this entanglement of structural oppression and its gendered implications highlight the importance of (a) engaging men in parenting programmes that (b) support parents in extreme poverty; both of which remain programming gaps identified by a WHO evidence review (65). Doing so, however, carries specific challenges, and likely requires efforts to *reduce* poverty given its direct impact on parenting (66), masculinities (15,28), and, as our findings indicate, engagement. Towards this end, programmes that combine parenting and economic

799 strengthening are proliferating amidst a bourgeoning evidence base for their effectiveness in
800 reducing family violence (67,68), and have seen success in Tanzania (69) and South Africa (70),
801 among other contexts; though not specifically with populations in street situations. However,
802 while these programmes have reduced violence against children and women, there remains little
803 evidence on their household poverty reduction outcomes (e.g., 69). Accompanying this critical
804 gap is a larger question of whether parenting support is sufficient in a context of not only
805 poverty, but systemic oppression, when such initiatives place the burden of responsibility for
806 behaviour change on individual families rather than the State (71); often the very sources of their
807 disenfranchisement. Thus, with structural oppression both undermining and defining men's
808 masculine self-concepts and fatherhood aspirations in ways that impact their engagement in a
809 parenting programme, it is critical that forthcoming programmes for parents in street situations
810 seek not only to support families experiencing extreme poverty, but also to address poverty itself,
811 while engaging larger systems of legal and policy supports that protect and promote parents'
812 rights.

813 This research has several limitations. First, while participants were selected purposefully
814 to obtain information-rich cases (37), they had to self-select into the study to promote full and
815 informed consent, which may have resulted in fathers who are more actively engaged in- and/or
816 motivated to support their children's upbringing than others in the street community. Second,
817 Peer Researchers were involved in all data collection with parents in street situations, in efforts
818 to enhance feelings of comfort and trust among participants, reduce language barriers, and to
819 serve as a capacity-building opportunity for Peer Researchers who were given the opportunity to
820 mobilise participants, conduct interviews, take notes, and analyse and disseminate data.
821 However, their knowledge of individuals in the street community may have also influenced what

information was shared by participants (72), and their own lived experiences, including those of the Parent Advisory Group, may have unconsciously superseded participant narratives during co-analysis. Finally, co-analysis with the Parent Advisory Group and Eldoret stakeholders was limited to the transcriptions and fieldnotes (27 of 61 transcripts; all fieldnotes) at the time of the workshops in May 2023 and did not represent the entirety of the dataset.

Conclusion

This participatory research advances our practical and theoretical understandings of male engagement in group-based parenting programmes within the context of marked social and economic disadvantage. Namely, it reveals the transcending and dynamic intersection of hegemonic masculine expectations (to provide), fatherhood aspirations (to be 'good', involved fathers), and structural oppression, which produces and maintains 'street' masculinities; a complex interplay which may equally help and/or hinder programme engagement. Recognising this relationship, we suggest that the *Malezi Bora*- and other programmes for parents in street situations strike a delicate balance between respecting and resisting street- and/or hegemonic models of masculinity, whilst seeking to address the poverty that creates and maintains these masculinities. For example, programmes can *support* men's provisional expectations and concurrently their family's material needs (e.g., via financial support and economic strengthening), while also *challenging* perceptions that parenting is not for men by creating space for them to explore and expand their masculinity in ways aligned with their aspirations to be involved fathers, including by positioning them as leaders throughout programme planning and delivery. To support these efforts, further research is needed to understand (a) the type and effectiveness of accompanying economic strengthening activities, and (b) the acceptability and

feasibility of male engagement strategies with families in street situations in real-world implementation contexts to explore the appropriate gender composition of sessions, program content, and potential unintended consequences of men's engagement, prior to effectiveness testing. Importantly, programmatic efforts must also be accompanied by a larger ecosystem of services to support the complex needs of fathers and families in street situations in a holistic and sustainable way, by collaborating with parents in street situations, government agencies, police, and CBOs in planning and implementation, offering linkages to necessary services (housing, job opportunities, healthcare, education, legal support, etc.), and by protecting and promoting their human rights.

List of Abbreviations

ABBREVIATION	DEFINITION
AMPATH	Academic Model Providing Access to Healthcare
CBO	Community-based organisation
CBPR	Community-based participatory research
FGD	Focus group discussion
IDI	In-depth interview
MTRH	Moi Teaching and Referral Hospital
PAG	Parent Advisory Group
WHO	World Health Organization

Declarations

Ethics approval and consent to participate: Ethical approval was obtained from the University of Oxford's Social Sciences and Humanitites Interdivisional Research Ethics Committee [R83604/RE001] and Moi University's College of Health Sciences Inttitutional Research and Ethics Committt [0004309]. All data was collected in accordance with the International Ethical Guidelines for Health-Related Research Involving Humans (73), and only after obtaining the informed and written consent of study participants.

Consent for publication: Not applicable

Availability of data and materials: The datasets used and/or analysed during the current study are available from the corresponding author on reasonable request.

Competing interests: The authors declare they have no competing interests

Funding: This research was funded by the University of Oxford's John Fell OUP Research Fund [0011819] and a Global Parenting Initiative Emerging Trends Fund, via LEGO Foundation.

Authors' contributions: KM conceptualized- and managed all aspects of the study from design, implementation, and analysis, and was the lead analyst and author. JL and FG supported all aspects of study design, implementation, analysis, and writing as KM's doctoral supervisors. SK, RK, LC, RO, EO, EC, MO, and DR contributed to the study design, and supported data collection, analysis, and manuscript drafting. EP offered guidance around study design, analysis,

and writing; and SK, and ED offered strategic guidance throughout study design and implementation, and contributed to manuscript drafting. All authors reviewed, edited, and approved the final manuscript.

Acknowledgements: The authors would like to sincerely thank the street community in Eldoret for their continued commitment to this project. Namely, the participants of this research who shared their stories, their challenges, and their strengths; the Parent Advisory Group who carried this project from beginning to end; and the data collection team whose dedication to this work is invaluable. Thanks also to our many project advisors who offered thoughtful and strategic guidance, including Silas Koech, Justus Elung'at, Dr. Laura Ruhl, Dr. Lonnie Embleton, Dr. Lina Digolo, Bernadette Mecha, and Jessica Clark; to project parters at AMPATH Kenya and Moi Teaching and Referral Hospital, including the AMPATH Qualitative Research Core team (including Mercy Ndung'u and Alfred Kirui), INNODEMS Kenya, IDEMS, Beruham Organization, and INUKA Pamoja Initiaitve. Finally, to our valued team members who are no longer with us, Professor David Ayuku and Professor Paula Braitstein.

References

1. Gardner F, Shenderovich Y, McCoy A, Schafer M, Martin M, Janowski R, et al. World Health Organization Guideline on Parenting to Prevent Child Maltreatment and Promote Positive Development in Children aged 0-17 Years – Report of the reviews for the INTEGRATE framework [Internet]. 2023. Available from:

https://cdn.who.int/media/docs/default-source/documents/violence-prevention/who-integrate-reviews-for-who-parenting-guideline-jan-27th-2023.pdf?sfvrsn=7f96ae56_3

2. Jeong J, Franchett EE, Ramos de Oliveira CV, Rehmani K, Yousafzai AK. Parenting interventions to promote early child development in the first three years of life: A global systematic review and meta-analysis. Persson LÅ, editor. PLOS Med. 2021 May 10;18(5):e1003602. doi:10.1371/journal.pmed.1003602

3. Leijten P, Gardner F, Melendez-Torres GJ, van Aar J, Hutchings J, Schulz S, et al. Meta-Analyses: Key Parenting Program Components for Disruptive Child Behavior. J Am Acad Child Adolesc Psychiatry. 2019 Feb;58(2):180–90. doi:10.1016/j.jaac.2018.07.900

4. Eira Nunes C, De Roten Y, El Ghaziri N, Favez N, Darwiche J. Co-Parenting Programs: A Systematic Review and Meta-Analysis. Fam Relat. 2021;70(3):759–76. doi:10.1111/fare.12438

5. Jeong J, Sullivan EF, McCann JK. Effectiveness of father-inclusive interventions on maternal, paternal, couples, and early child outcomes in low- and middle-income countries: A systematic review. Soc Sci Med. 2023 Jul;328:115971. doi:10.1016/j.socscimed.2023.115971

6. Gonzalez JC, Klein CC, Barnett ML, Schatz NK, Garoosi T, Chacko A, et al. Intervention and Implementation Characteristics to Enhance Father Engagement: A Systematic Review of Parenting Interventions. Clin Child Fam Psychol Rev. 2023 Jun;26(2):445–58. doi:10.1007/s10567-023-00430-x

7. World Health Organisation. WHO guidelines on parenting interventions to prevent maltreatment and enhance parent-child relationships with children aged 0-17 years. Geneva, Switzerland: World Health Organization; 2022. p. 1–54.

8. Sarkadi A, Kristiansson R, Oberklaid F, Bremberg S. Fathers' involvement and children's developmental outcomes: a systematic review of longitudinal studies. Acta Paediatr. 2008 Feb;97(2):153–8. doi:10.1111/j.1651-2227.2007.00572.x
9. Maxwell KJ. Fatherhood in the context of social disadvantage: Constructions of fatherhood and attitudes towards parenting interventions of disadvantaged men in Scotland [Internet]. 2018. Available from: https://theses.gla.ac.uk/9101/
10. Punch S. Cross-world and cross-disciplinary dialogue: A more integrated, global approach to childhood studies. Glob Stud Child. 2016 Sep;6(3):352–64. doi:10.1177/2043610616665033
11. Jeong J, Sullivan EF, McCann JK, McCoy DC, Yousafzai AK. Implementation characteristics of father-inclusive interventions in low- and middle-income countries: A systematic review. Ann N Y Acad Sci. 2023 Feb;1520(1):34–52. doi:10.1111/nyas.14941
12. Backhaus S, Gardner F, Schafer M, Melendez-Torres GJ, Knerr W, Lachman JM. WHO Guidelines on Parenting Interventions to Prevent Maltreatment and Enhance Parent–Child Relationships with Children aged 0-17 Years: Report of the Systematic Reviews of Evidence [Internet]. 2023. p. 1–267. Available from: https://cdn.who.int/media/docs/default-source/documents/violence-prevention/systematic_reviews-for-the-who-parenting-guideline-jan-27th-2023.pdf?sfvrsn=158fd424_3
13. Murphy K, Embleton L, Lachman JM, Owino E, Kirwa S, Makori D, et al. "From analog to digital": The feasibility, acceptability, and preliminary outcomes of a positive parenting program for street-connected mothers in Kenya. Child Youth Serv Rev. 2021 Aug;127:1–10. doi:10.1016/j.childyouth.2021.106077
14. Jeong J, McCann JK, Bhojani A, Maguet Z, Uyehara M, Ochieng M. Fathers' engagement in a parenting program primarily intended for female caregivers: An early qualitative process

evaluation in Western Kenya. Nalecz H, editor. PLOS Glob Public Health. 2024 Oct 11;4(10):e0003520. doi:10.1371/journal.pgph.0003520

15. Connell RW, Messerschmidt JW. Hegemonic Masculinity: Rethinking the Concept. Gend Soc. 2005 Dec;19(6):829–59. doi:10.1177/0891243205278639

16. Jukes LM, Di Folco S, Kearney L, Sawrikar V. Barriers and Facilitators to Engaging Mothers and Fathers in Family-Based Interventions: A Qualitative Systematic Review. Child Psychiatry Hum Dev. 2024 Feb;55(1):137–51. doi:10.1007/s10578-022-01389-6

17. Pfitzner N, Humphreys C, Hegarty K. Engaging Men as Fathers: How Gender Influences Men's Involvement in Australian Family Health Services. J Fam Issues. 2018 Nov 1;39(16):3956–85. doi:10.1177/0192513X18802329

18. Shorey S, Chee C, Sambhi SK, Chong SC, Choolani M. Fathers' experiences with supportive parenting interventions: A qualitative systematic review. Fam Process. 2024 Dec;63(4):2037–57. doi:10.1111/famp.13037

19. Siu GE, Wight D, Seeley J, Namutebi C, Sekiwunga R, Zalwango F, et al. Men's Involvement in a Parenting Programme to Reduce Child Maltreatment and Gender-Based Violence: Formative Evaluation in Uganda. Eur J Dev Res. 2017 Nov;29(5):1017–37. doi:10.1057/s41287-017-0103-6

20. UNCRC. General comment No. 21 (2017) on children in street situations [Internet]. United Nations; 2017. p. 1–21. (Convention on the Rights of the Child). Available from: https://www.streetchildren.org/wp-content/uploads/gravity_forms/1-07fc61ac163e50acc82d83eee9ebb5c2/2017/07/General-Comment-No.-21-2017-on-children-in-street-situations.pdf

21. Embleton L, Atwoli L, Ayuku D, Braitstein P. The Journey of Addiction: Barriers to and Facilitators of Drug Use Cessation among Street Children and Youths in Western Kenya. Vermund SH, editor. PLoS ONE. 2013 Jan 9;8(1):e53435. doi:10.1371/journal.pone.0053435
22. Embleton L, Wachira J, Kiplagat J, Shah P, Blackwell-Haride V, Gayapersad A, et al. An intersectional analysis of socio-cultural identities and gender and health inequities among children and youth in street situations in western Kenya. Int J Homelessness. 2022 Mar 31;1–19. doi:10.5206/ijoh.2022.1.13716
23. Gayapersad A, Embleton L, Shah P, Kiptui R, Ayuku D, Braitstein P. Using a sociological conceptualization of stigma to explore the social processes of stigma and discrimination of children in street situations in western Kenya. Child Abuse Negl. 2020 Nov;104803. doi:10.1016/j.chiabu.2020.104803
24. Connell RW, Messerschmidt JW. Hegemonic Masculinity: Rethinking the Concept. Gend Soc. 2005 Dec;19(6):829–59. doi:10.1177/0891243205278639
25. Ammann C, Staudacher S. Masculinities in Africa beyond crisis: complexity, fluidity, and intersectionality. Gend Place Cult. 2021 Jun 3;28(6):759–68. doi:10.1080/0966369X.2020.1846019
26. Granderson RM, Harper GW, Wade R, Odero W, Onyango Olwango DP, Fields EL. Gender role strain and the precarious manhood of sexual minority Kenyan men. Psychol Sex Orientat Gend Divers. 2019 Dec;6(4):420–32. doi:10.1037/sgd0000340
27. Okelo K, Onyango S, Murdock D, Cordingley K, Munsongo K, Nyamor G, et al. Parents' Attitudes About Gender Roles In Caregiving And Practices: Perspectives From A Community-Led Parenting Empowerment Program In Rural Kenya And Zambia [Internet].

2021 [cited 2024 Sep 10]. Available from: https://www.researchsquare.com/article/rs-993436/v1 doi:10.21203/rs.3.rs-993436/v1

28. Roy KM, Dyson O. Making Daddies into Fathers: Community-based Fatherhood Programs and the Construction of Masculinities for Low-income African American Men. Am J Community Psychol. 2010;45(1–2):139–54. doi:10.1007/s10464-009-9282-4
29. van Stapele N. Providing to belong: masculinities, hustling and economic uncertainty in Nairobi 'ghettos.' Africa. 2021 Jan;91(1):57–76. doi:10.1017/S0001972020000844
30. Izugbara CO, Egesa CP. Young men, poverty and aspirational masculinities in contemporary Nairobi, Kenya. Gend Place Cult. 2020 Dec 1;27(12):1682–702. doi:10.1080/0966369X.2019.1693347
31. Anderson S, Aller TB, Piercy KW, Roggman LA. 'Helping us find our own selves': exploring father-role construction and early childhood programme engagement. Early Child Dev Care. 2015 Mar 4;185(3):360–76. doi:10.1080/03004430.2014.924112
32. Romm NRA. Reviewing the Transformative Paradigm: A Critical Systemic and Relational (Indigenous) Lens. Syst Pract Action Res. 2015 Oct;28(5):411–27. doi:10.1007/s11213-015-9344-5
33. Cornish F, Breton N, Moreno-Tabarez U, Delgado J, Rua M, de-Graft Aikins A, et al. Participatory action research. Nat Rev Methods Primer. 2023 Apr 27;3(1):1–14. doi:10.1038/s43586-023-00214-1
34. Braye S, McDonnell L. Balancing powers: university researchers thinking critically about participatory research with young fathers. Qual Res. 2013 Jun;13(3):265–84. doi:10.1177/1468794112451012

35. Olmos-Vega FM, Stalmeijer RE, Varpio L, Kahlke R. A practical guide to reflexivity in qualitative research: AMEE Guide No. 149. Med Teach. 2023 Mar 4;45(3):241–51. doi:10.1080/0142159X.2022.2057287
36. Linabary JR, Corple DJ, Cooky C. Of wine and whiteboards: Enacting feminist reflexivity in collaborative research. Qual Res. 2021 Oct;21(5):719–35. doi:10.1177/1468794120946988
37. Patton MQ. Qualitative research and evaluation methods. 3rd ed. Thousand Oaks, California: Sage Publications; 2002.
38. Braun V, Clarke V. Toward good practice in thematic analysis: Avoiding common problems and be(com)ing a knowing researcher. Int J Transgender Health. 2023 Jan 25;24(1):1–6. doi:10.1080/26895269.2022.2129597
39. Liebenberg L, Jamal A, Ikeda J. Extending Youth Voices in a Participatory Thematic Analysis Approach. Int J Qual Methods. 2020 Jan 1;19:1–13. doi:10.1177/1609406920934614
40. Alemann C, Garg A, Vlahovicova K. The role of fathers in Parenting for gender equality [Internet]. 2020;1–14. Available from: https://www.un.org/development/desa/family/wp-content/uploads/sites/23/2020/06/Parenting-Education_-the-role-of-fathers_-paper_CA.pdf
41. Makusha T, Richter L. Gatekeeping and its impact on father involvement among Black South Africans in rural KwaZulu-Natal. Cult Health Sex. 2016 Mar 3;18(3):308–20. doi:10.1080/13691058.2015.1083122
42. Fagan J, Barnett M. The Relationship between Maternal Gatekeeping, Paternal Competence, Mothers' Attitudes about the Father Role, and Father Involvement. J Fam Issues. 2003 Nov 1;24(8):1020–43. doi:10.1177/0192513X03256397

43. Prevention Collaborative. Prevention triad case study: Interpreting conflicting results of the Indashyikirwa programme and its adaptation in Rwanda [Internet]. 2023 [cited 2025 Jun 13]. p. 1–11. Available from: https://prevention-collaborative.org/wp-content/uploads/2023/08/Indashyikirwa-Prevention-Triad-CS-FINAL.pdf
44. Hunnicutt G. Varieties of Patriarchy and Violence Against Women: Resurrecting "Patriarchy" as a Theoretical Tool. Violence Women. 2009 May;15(5):553–73. doi:10.1177/1077801208331246
45. Doyle K, Levtov RG, Barker G, Bastian GG, Bingenheimer JB, Kazimbaya S, et al. Gender-transformative Bandebereho couples' intervention to promote male engagement in reproductive and maternal health and violence prevention in Rwanda: Findings from a randomized controlled trial. van Wouwe JP, editor. PLOS ONE. 2018 Apr 4;13(4):e0192756. doi:10.1371/journal.pone.0192756
46. Dolan A. 'I've Learnt What a Dad Should Do': The Interaction of Masculine and Fathering Identities among Men Who Attended a 'Dads Only' Parenting Programme. Sociology. 2014 Aug 1;48(4):812–28. doi:10.1177/0038038513511872
47. Klein CC, Gonzalez JC, Tremblay M, Barnett ML. Father Participation in Parent-Child Interaction Therapy: Predictors and Therapist Perspectives. Evid-Based Pract Child Adolesc Ment Health. 2023 Jul 3;8(3):393–407. doi:10.1080/23794925.2022.2051213
48. Pfitzner N, Humphreys C, Hegarty K. Research Review: Engaging men: a multi-level model to support father engagement: A multi-level model of father engagement. Child Fam Soc Work. 2017 Feb;22(1):537–47. doi:10.1111/cfs.12250

49. Murphy K, Gardner F, Puffer E, Kirwa S, Kiptui R, Laetitia C, et al. In the streets "you must be hardened": Gendered and structural drivers of violence against women and children among families in streets situations in Kenya. Soc Sci Med. In Review.
50. Davis R, Campbell R, Hildon Z, Hobbs L, Michie S. Theories of behaviour and behaviour change across the social and behavioural sciences: a scoping review. Health Psychol Rev. 2015 Aug 7;9(3):323–44. doi:10.1080/17437199.2014.941722
51. Alsager A, McCann JK, Bhojani A, Joachim D, Joseph J, Gibbs A, et al. "Good fathers": Community perceptions of idealized fatherhood and reported fathering behaviors in Mwanza, Tanzania. Robinson J, editor. PLOS Glob Public Health. 2024 Jul 11;4(7):e0002587. doi:10.1371/journal.pgph.0002587
52. Lasser J, Fite K, Wadende AP. Fatherhood in Kenyan ethnic communities: Implication for child development. Vol. 32. 2011;32(2):49–57. doi:0.1177/0143034310396613
53. Hunter SC, Riggs DW, Augoustinos M. Hegemonic masculinity versus a caring masculinity: Implications for understanding primary caregiving fathers. Soc Personal Psychol Compass. 2017 Mar;11(3):e12307. doi:10.1111/spc3.12307
54. Lucas SE, Mirza N, Westwood J. 'Any d*** can make a baby, but it takes a real man to be a dad': Group work for fathers. Qual Soc Work. 2021 May 1;20(3):718–37. doi:10.1177/1473325020909431
55. Giusto AM, Ayuku D, Puffer ES. Learn, Engage, Act, Dedicate (LEAD): development and feasibility testing of a task-shifted intervention to improve alcohol use, depression and family engagement for fathers. Int J Ment Health Syst. 2022 Dec;16(1):16. doi:10.1186/s13033-022-00522-1

56. Human Rights Watch. “Where do you want us to go?”: Abuses against Street Children in Uganda [Internet]. 2014 [cited 2022 Oct 10]. p. 1–75. Available from: https://www.hrw.org/sites/default/files/reports/uganda0714_forinsert_ForUpload.pdf
57. Kudrati M, Plummer ML, Yousif NDEH. Children of the sug: A study of the daily lives of street children in Khartoum, Sudan, with intervention recommendations. Child Abuse Negl. 2008 Apr;32(4):439–48. doi:10.1016/j.chiabu.2007.07.009
58. Nada KH, Suliman EDA. Violence, abuse, alcohol and drug use, and sexual behaviors in street children of Greater Cairo and Alexandria, Egypt. AIDS. 2010 Jul;24(Suppl 2):S39–44. doi:10.1097/01.aids.0000386732.02425.d1
59. Mmari K, Marshall B, Hsu T, Shon JW, Eguavoen A. A mixed methods study to examine the influence of the neighborhood social context on adolescent health service utilization. BMC Health Serv Res. 2016 Dec;16(1):433. doi:10.1186/s12913-016-1597-x
60. Atienzo EE, Kaltenthaler E, Baxter SK. Barriers and Facilitators to the Implementation of Interventions to Prevent Youth Violence in Latin America: A Systematic Review and Qualitative Evidence Synthesis. Trauma Violence Abuse. 2018 Oct;19(4):420–30. doi:10.1177/1524838016664044
61. Bosqui T, Mayya A, Farah S, Shaito Z, Jordans MJD, Pedersen G, et al. Parenting and family interventions in lower and middle-income countries for child and adolescent mental health: A systematic review. Compr Psychiatry. 2024 Jul;132:152483. doi:10.1016/j.comppsych.2024.152483
62. Promundo, Plan International. Promoting men’s engagement in early childhood development: A programming and influencing package [Internet]. 2021. p. 1–131. Available

from: https://promundoglobal.org/wp-content/uploads/2021/09/GLO-Mens_engagement_ECD-IO-Final-Eng-May21.pdf

63. Thomas de Benítez S. State of the world's street children: Research [Internet]. London, UK: Consortium for Street Children; 2011. p. 1–87. Available from: https://www.eenet.org.uk/resources/docs_nondb/State_of_the_Worlds_Street_Children_Research_final_PDF_online.pdf

64. Embleton L, Murphy K, Kirwa S, Okal EO, Makori D, Logie CH, et al. Factors Influencing the Implementation of Evidence-Based Interventions with Street-Connected Children and Youth: Two Case Studies from Eldoret, Kenya. Glob Implement Res Appl. 2023 May 10;3:195–211. doi:10.1007/s43477-023-00083-6

65. World Health Organization. WHO Guidelines on Parenting Interventions to Prevent Maltreatment and Enhance Parent-Child Relationships with Children Aged 0-17 Years [Internet]. Geneva: World Health Organization; 2022. p. 1–54. Available from: https://www.ncbi.nlm.nih.gov/books/NBK589381/pdf/Bookshelf_NBK589381.pdf

66. Van IJzendoorn MH, Bakermans-Kranenburg MJ, Coughlan B, Reijman S. Annual Research Review: Umbrella synthesis of meta-analyses on child maltreatment antecedents and interventions: differential susceptibility perspective on risk and resilience. J Child Psychol Psychiatry. 2020 Mar;61(3):272–90. doi:10.1111/jcpp.13147

67. Bacchus LJ, Colombini M, Pearson I, Gevers A, Stöckl H, Guedes AC. Interventions that prevent or respond to intimate partner violence against women and violence against children: a systematic review. Lancet Public Health. 2024 May;9(5):e326–38. doi:10.1016/S2468-2667(24)00048-3

68. Little M, Butchart A, Massetti GM, Hermosilla S, Wittesaele C, Pearson I, et al. Interventions to prevent, reduce, and respond to violence against children and adolescents: A systematic review of systematic reviews to update the INSPIRE Framework. In-press.
69. Lachman J, Wamoyi J, Spreckelsen T, Wight D, Maganga J, Gardner F. Combining parenting and economic strengthening programmes to reduce violence against children: a cluster randomised controlled trial with predominantly male caregivers in rural Tanzania. BMJ Glob Health. 2020 Jul;5(7):e002349. doi:10.1136/bmjgh-2020-002349
70. Cluver L, Shenderovich Y, Meinck F, Berezin MN, Doubt J, Ward CL, et al. Parenting, mental health and economic pathways to prevention of violence against children in South Africa. Soc Sci Med. 2020 Oct;262:113194. doi:10.1016/j.socscimed.2020.113194
71. Gentles AS. "The Messy Work": Parenting, Social Reproduction, and Neoliberal Restructuring in Jamaica [Internet]. [Kingston, Ontario]: Queen's University; 2014 [cited 2025 Apr 1]. Available from: https://central.bac-lac.gc.ca/.item?id=TC-OKQ-12268&op=pdf&app=Library&oclc_number=1032921724
72. Bergen N, Labonté R. "Everything Is Perfect, and We Have No Problems": Detecting and Limiting Social Desirability Bias in Qualitative Research. Qual Health Res. 2020 Apr;30(5):783–92. doi:10.1177/1049732319889354
73. Council for International Organizations of Medical Sciences, World Health Organization. International Ethical Guidelines for Health-related Research involving Humans [Internet]. Council for International Organizations of Medical Sciences (CIOMS); 2016 [cited 2026 Apr 29]. p. 1–123. Available from: https://cioms.ch/publications/product/international-ethical-guidelines-for-health-related-research-involving-humans/ doi:10.56759/rgxl7405

Supplementary Files

This is a list of supplementary files associated with this preprint. Click to download.

- SupplementaryFileADataCollectionTools.docx