

Single fathers: neglected, growing, and important



Families are changing worldwide. Of the world's 2.3 billion children, 320 million (14%) are living in a single-parent household—18% in France, 20% in Canada, 24% in the UK, 27% in the USA, and 43% in South Africa. Single-parent families are becoming increasingly common in many countries, mainly due to rising rates of divorce and couples having children outside of marriage. These trends are set to increase. The OECD report, *Doing better for families*, projects that by 2025–30 the proportion of sole-parent families is expected to rise in all OECD countries (except Germany), from 8% for Switzerland and the USA to 29% for New Zealand. Most commonly, these sole-parent families are headed by single mothers. But single fathers represent a sizeable proportion: about 2.6 million families in the USA, 330 000 in Canada, and 300 000 families in the UK are headed by single fathers. What do we know about these fathers, and their health and wellbeing? Alarming, the answer is: not very much.

Research on single parenthood is mostly focused on single mothers. They have a greater risk of mortality than partnered mothers, poorer self-rated health and mental health, higher levels of psychological distress, and generally a lower socio-economic status. However, data on the health and mortality risk of single fathers are crucially missing. Single fathers are a growing population, largely understudied.

In this issue of *The Lancet Public Health*, Maria Chiu and colleagues examine the mortality of single fathers compared with single mothers and partnered fathers and mothers. Their population-based cohort study comprised 40 000 people who took part in the Canadian Community Health Survey: 871 were single fathers, 4590 single mothers, 16341 partnered fathers, and 18688 partnered mothers. Single parents were defined as people who were living with one or more biological or adopted children, and who were divorced, separated, widowed, single, never married, and not living with a partner. Individuals completed questionnaires detailing their lifestyle, including diet, physical activity, drinking habits, and sociodemographic status. These data were linked to their administrative health records to identify medical conditions, health services use, death, and cause of death. After a median follow-up of 11 years, single fathers were more likely to die than partnered

fathers and single mothers; partnered mothers were least likely to die. After adjusting for differences in age, lifestyle, health, and sociodemographic characteristics, single fathers' mortality risk was more than two times higher than other parents'. Single fathers were more likely to lead unhealthy lifestyles—they ate fewer fruit and vegetables and were more likely to binge drink than other parents.

While Chiu and colleagues' study clearly shows that single fathers have a higher risk of mortality, it also highlights the gaps in our knowledge. The leading cause of death could not be determined in their study, and this should be an area for future research. Moreover, there are differences in the pathways leading to single parenthood that can affect health and wellbeing. Indeed, single fathers were more likely to be separated or divorced than single mothers. Given that children typically reside with their mothers after separation, paternal custody might well reflect mothers' issues and possibly conflicts and exposure to stress. Single fathers were also more likely to be widowed than single mothers, again pointing towards stress exposure and grief. The role of such differences in the increased risks observed clearly deserves attention. There is also a growing body of evidence on the association between social isolation and health and premature death. Given that there are more single mothers than single fathers, social support is more commonly available for single mothers. Finally, and importantly, barriers such as gender stereotypes and stigma will be key to address.

We need to take single fatherhood much more seriously as a public health issue. Understanding the way families have evolved and are likely to evolve is crucial to meet their needs and for policy planning. Families do not exist in a vacuum. They depend on the social and economic environments around them. Issues of isolation (real or perceived) and grief may be as important for health as traditional risk factors. We need to ensure that there is better community and social support for single fathers. Social and life circumstances of single parents are crucial to getting the fuller picture of their health. ■ *The Lancet Public Health*

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For the OECD report on families see <https://www.oecd.org/els/soc/47701118.pdf>
See **Articles** page e115
See **Articles** *Lancet Public Health* 2017; 2: e260–66