
**Promoting Father Involvement in At-Risk Families with Young Children:
A Pilot Project**

**Interim Report
Oscar G. and Elsa S. Mayer Family Foundation**

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I. Project Summary and Review

Our two-year project received support from the Oscar G. and Elsa S. Mayer Family Foundation beginning June 1, 2009, and this report represents an interim summary of progress on the project objectives through the end of July 2010, or fourteen months of project activity. Funding was provided to initiate the design and pilot testing of an evidence-based early intervention promoting positive father involvement in at-risk families with young children. Given the paucity of information on available effective strategies that promote fathers' positive involvement in families, we set out to employ a systematic series of steps drawn from prevention science and intervention research methods to design and develop an evidence-based preventive innovation that will most likely demonstrate positive impact when studied under randomized clinical trial study.

The proposed initial steps supported in the pilot phase included: 1) *conceptualization and problem analysis with regard to fathers' involvement in at-risk families in early childhood*; 2) *design of a prototype father involvement intervention*, and 3) *pilot testing in the field and development of the intervention*.

II. Project Progress Summary

We are pleased to report we remain on schedule and have completed the first two of three major phases, and are presently entering the third and final phase on schedule, pilot testing in the field and development of the intervention. As previously reported, ahead of schedule, we proposed and received additional support from the Pew Charitable Trusts in the amount of \$120,000 which allows for a scientifically superior and somewhat lengthier pilot study phase as well as expands our research capacity to execute such. We detail progress on study objectives since the last project report, as follows:

Augmenting the Research Team

To date we have assembled a skilled and engaged team to advance this pilot study, much augmented from the originally planned hiring and training of a research assistant (*Milestone 1*). As noted in our Year 1 Report of March 31, 2010, the additional support from the Pew Charitable Trusts enabled us to add Dr. Jennifer Bellamy to the team, a recognized expert on father involvement in high-risk families. As well Mr. Aaron Banman, the project's research assistant (and Ph.D. student working with Dr. Guterman) has advanced to the role of project coordinator. Additionally, we have also recently hired a data collector for the pilot testing phase, Ms. Stephanie Mistretta. Ms. Mistretta is a masters student at the University of Chicago School of Social Service Administration with experience in data collection in several studies within the university, and is enrolled in the Violence Prevention program at the School, under Dr. Guterman's direction. Ms. Mistretta will conduct the pre- and post- data collection interviews with families enrolled in the study. Dr. Bellamy is filling several roles including general consultation on the specific project methods and activities, and developing the pilot intervention manual, and staff training package alongside Dr. Guterman. Mr. Banman, the project coordinator, is presently finalizing the pre- and post- measure for the pilot testing, assisting with the intervention blueprint, will coordinate subject referral and flow through the study, and will supervise Ms. Mistretta in the field.

Institutional Review Board (Human Subjects Review) Approval

We are happy to report that the University's Institutional Review Board, which oversees the safety, ethics, and legality of all study procedures for the pilot testing in the field approved this

phase of the study on July 25th, 2010. This approval was required to begin recruiting, enrolling, collection data from families, and implementing the ‘promoting father involvement’ enhancement at the study sites during the forthcoming pilot phase.

Blueprinting “Promoting Father Involvement” Intervention

Since the Year 1 Report, we have continued to flesh out the intervention blueprint draft (*Milestone 4*). The team is utilizing data that was collected from the focus groups and individual interviews of current home visiting participants including fathers and home visiting staff, along with data from the scientific literature reviewed on existing approaches (*Milestone 3*). We are presently converting the five interrelated intervention “modules” that we schematically derived from these data sources into prescribed intervention activities that will guide home visitors, and that is maximally flexible, adaptable for delivery across a variety of potential father roles, ethnicities, and mother-father dyadic relationships. For additional guidance, Dr. Guterman has augmented in-house expertise and focus group data with input from national experts and scholars on father involvement, and will continue to do so as the intervention takes further shape to refine and improve on its design.

Site Engagement

As mentioned above, we continue to have two participating agency study sites; however we have strategically opted to replace the Howard Area Community Center (HACC) home visiting program with the Childcare Network of Evanston (CNE) home visiting program. We continue to work with the Infant Welfare Society of Evanston (IWSE). The director of the HACC program, a working partner with our team in the past, moved over to take over the directorship the CNE program in the past two months. In addition, approximately 75% of HACC families were Spanish-speaking only families, and this would have necessitated translation, and staff capacity that we do not presently have. Additionally CNE and IWSE are partner home visiting programs with one another in Evanston, and thus coordination across study sites will be more efficient (e. g. with regard to staff meetings, managing staff policies). Across these two home visitation programs that will serve as study sites for the proposed study, we expect a total of approximately 30-40 new cases per year where the putative biological father is geographically accessible.

Site Staff Orientation and Training

On August 2nd, we are holding our first agency staff ‘kickoff’ meeting to initiate implementation of the pilot phase, whereby we will enroll families, collect data pre- and post-test to examine for changes as a result of the “promoting father involvement” enhancement. As reported in our first year Final Report, given the augmented funding from Pew Charitable Trusts, we are now able to enroll a comparison group of families that receive standard home visiting services, so that we can compare outcomes of families receiving the enhancement against those that do not. This scientifically superior study design necessitates that we spend the first approximately six to eight months enrolling families who do not receive the enhancement. After this period, and once we finalize a draft of the intervention manual, we will then train staff to implement the enhancement, and then enroll a second cohort of families who receive the enhanced services for an additional six to eight months, in order to compare against the first receiving standard services.

Unanticipated Developments or Challenges

Since our last report, we have encountered no significant unanticipated challenges that have affected the progress of this project.