2009

Supporting Father Involvement Project : from research to action : a project based upon an investigation at University of California, Berkeley, Yale University Child Study Center and Smith College School for Social Work

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 Project: From Research to
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ABSTRACT

This study was undertaken to determine the most effective dissemination strategies used by the Supporting Father Involvement's (SFI) Project Directors to encourage Partner Agencies to adopt father friendliness and the SFI curriculum into their family resource centers (FRC) in five pilot California counties. This qualitative study aims to inform SFI's investigators about what works in dissemination approaches for a social service intervention, and what hinders those efforts.

Sponsored by the California Office for Child Abuse Prevention (OCAP), the Supporting Father Involvement Project (SFI) is the first randomized clinical trial demonstrating that strengthening the couple as parents and partners benefits the children as well. The SFI study has been underway for five years in five counties, and plans are in place to disseminate the program throughout the state of California.

Five Project Directors have implemented SFI into their FRCs and were asked to identify and disseminate the program to one or two additional FRCs in their counties. While participants were candid in their responses to these interviews, the primary finding of this study is that while Project Directors were able to successfully infuse Partner Agencies with father friendliness, they were not successful at installing the SFI curriculum into the Partners' FRCs. Suggestions for alternate ways to consider dissemination of SFI are offered here that may assist investigators in their future efforts to disseminate this important program.

SUPPORTING FATHER INVOLVEMENT PROJECT:

FROM RESEARCH TO ACTION

A project based upon an investigation at University of California,
Berkeley, Yale University Child Study Center, and Smith College
School for Social Work, submitted in partial fulfillment of the
requirements for the degree of Master of Social Work.

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2009

ACKNOWLEDGEMENTS

TABLE OF CONTENTS

CHAPTER I

Supporting Father Involvement Project: From Research to Action

Many fathers maintain an unfortunate distance from their children—emotionally

and physically, but it is often not a deliberate choice on men's part. Society has long

enabled this phenomenon to persist, due primarily to the myth that mothers are "the only

key to child development and well-being" (Strategies, 2008). Across sociocultural

groups, however, this belief is becoming outmoded, and more fathers are practicing

fatherhood "across households and across bloodlines" (Eggebeen & Knoester, 2001, p.

381). The social service arena has not kept up with these role changes, and some men are

not seeking or receiving meaningful help in the face of emotional strain and economic

hardship resulting from shifts in family roles or separation (Strug & Wilmore-Schaeffer,

2003). The mother is consistently targeted as the primary point of contact, or

"gatekeeper" (Pruett, Cowan, Cowan, & Pruett, 2009; Fagan, Newash & Schloesser,

2000; Levine, 1993) for the family (McAllister et al., 2004), insofar as her children are

concerned; this engagement with the mother occurs usually to the omission—if not the

exclusion—of fathers (Pruett, et al., 2009). In these situations, mothers inadvertently

stand not only between fathers and children but between fathers and programs (Pruett et

al., 2009).

Lower-income families suffer considerable levels of marital distress, family

violence, and divorce (Cowan, Cowan, Pruett, & Pruett, 2006). This distress is

compounded with pervasive, negative, media-driven stereotypes about fathers as

irresponsible and drug addicted "deadbeat dads," encouraging agency bias toward

working with mothers. The majority of social service agency employees, moreover, are

1

women, and women tend to reach out to other women out of habit (McAllister, 2004). Expanding poverty and shrinking resources weigh heavily on these fragile families sometimes to the point of dysfunction or ultimately breaking apart, and the mother in most cases assumes custody of the children.

The research shows that regardless of socio-economic status, children have a better chance at healthy development and overall success in life if two parent figures are present (Fagan & Iglesias, 1999; Levine, 1993; Fagan, 1999; Cabrera & Peters, 2000). This seems like an obvious finding, yet few social service agencies reach out to both parents—fathers in particular. In recognition of the gap in fatherhood initiatives, George W. Bush's administration allocated up to 50 million federal dollars for father involvement programs (Rosenberg & Wilcox, 2006), yet the destination for those dollars was not specified, and there have been little to no data about how to design, implement, and evaluate father friendly programs on which to structure successful interventions. Given the paucity of empirical research on father-involvement programs, it is difficult to turn a somewhat vague "national priority" into an evidence-based intervention to get fathers more involved with their children. One such intervention, however, fulfills this national priority and has been proven to be successful at getting fathers involved.

Background—Supporting Father Involvement Study (SFI)

The Supporting Father Involvement (SFI) Project is the first father intervention study using a randomized clinical trial "to measure the effectiveness of an intervention to facilitate … positive involvement … of fathers with their children … by strengthening men's relationships with their children's mothers" (Cowan et al., 2006, p. 109). The study is a collaborative effort among University of California Berkeley, Yale Child Study

2

Center, and Smith College School for Social Work and is funded by the California Department of Social Services, Office of Child Abuse Prevention (OCAP). Embedded within Family Resource Centers in five pilot counties in California (Yuba, Contra Costa, Tulare, Santa Cruz, and San Luis Obispo), the SFI Study has been underway for nearly six years as of this writing, and considerable success has been achieved in strengthening relationships between fathers and mothers, and fathers and their children through this intervention.

To answer the call for good father involvement programs, SFI was designed from knowledge gleaned from previous studies of married and divorced two-parent families (Belsky, 1984; C. P. Cowan & Cowan, 2000; Heinicke, 2002; Pruett, Insabella, & Gustafson, 2005) "in which children's development and adaptation are predicted by risks and buffers in five interconnected family domains: (1) the psychological adjustment of individual family members; (2) the quality of each parent's relationship with the child; (3) the quality of the parents' relationship as a couple; (4) the transmission of relationship patterns across three-generations; and (5) the balance of life stressors and supports outside the family" (Cowan, Cowan, & Heming, 2005, p. 6).

Developing an effective program and developing a plan for dissemination are two very separate processes. Indeed, many "good" programs have ended after the study is completed, due in part to the lack of a clear plan for dissemination. Moreover, after that program ends, subsequent programs duplicate that program's life cycle—design, implementation, termination—in a futile reinvention of the wheel. Constant evaluation is the key to program integrity, sustainability, and successful dissemination. The next section of this thesis will examine ways in which social service programs are

conceptualized, developed, tested, implemented, evaluated, and finally disseminated. Following, the Supporting Father Involvement Study (SFI) will be used as an example of an effective program that improves lives for many families, inclusive of a solid design, continuous evaluation, and flexible dissemination strategies. Based on the strength of those qualities, SFI has the potential to become a widely replicated father involvement program having a multiplicity of familial and societal benefits.

CHAPTER II

LITERATURE REVIEW

We in the field of social sciences are taught, often by trial and error, that social prevention programs either work or do not work. But what does "work" mean? Or for whom does it work and why? Was the goal of the short-term, empirically proven intervention to alleviate a specific type of suffering for a target population? Or was the program created as an amalgam of previous research findings, addressing a wider spectrum of socioeconomic and mental health problems to improve overall well-being? With social programs that fail, it is easy place blame on their design, implementation, and/or dissemination. In such cases of failure, the program is left to either fizzle out or chug along in a sense of dispirited obligation until its grant expires. Although often thought of as a linear process, from design to dissemination, those elements are joined by a third component—systematic program evaluation, which holds the other two elements, design and implementation, in a dynamic tension. Systematic evaluation documents each step of the program's design and implementation processes and aids organizations in its successful replication by avoiding the same mistakes incurred in the creation of the program (Small, Cooney, and O'Connor, 2009). Flexible programs are designed, implemented, evaluated, then revised to address gaps in the original design. In a similar fashion, as a program is being disseminated, constant evaluation must continue so that adjustments can be made to its design for a particular population or agency before it is disseminated to a wider audience. If, however, a program is designed and disseminated without a built-in plan for evaluation, there are no allowances for adjustment, refinement, or revision, and the program becomes stagnant. One element that often emerges during

5

evaluation and revision is culture—both societal and agency. By always recognizing the cultural fit, researchers are able to produce more effective programs for more clients. This literature review compares the different ways in which social programs evolve from idea to practice, and the pros and cons therein. Finally, it explores the evaluation and dissemination stages of program design that reinforce program sustainability.

Three Methods of Program Design

"Program design" is an organic process that begins with an idea, a design is created, and if the program is implemented in a research setting, its implementation is evaluated, necessary revisions are made to the design, and eventually the program may be disseminated to the greater target population. Three styles of program design emerge in the literature as primary approaches toward social policy: the scientific evidence-based model; the culture-centric approach; and comprehensive design. To elucidate the three approaches, I begin with the fundamental question that each model poses: The evidence-based practice model (EBP) attempts to answer the question, "Given the data collected through empirical methods, how do we apply our findings to a community?" The culture-centric model attempts to answer, "How can we help ourselves within our framework of values, beliefs, and worldview and build upon our anecdotal successes?" Comprehensive design examines quite simply, "What works?" No single mode of program design summarily denies the attributes of the other two, but each one maintains a primary focus.

Evidence-based Practice (EBP)

The first model—scientific, evidence-based implementation—is currently in favor in the Unites States, as insurance companies and the government economize, shying away from, respectively, paying for and investing in programs that yield less measurable

results. The American Psychological Association describes evidence-based practice as

the "integration of the best available research evidence with clinical expertise and client

values" (2001, ¶ 2). Gilgun (2005) describes EBP in social work in the following manner:

> From my analysis and reflections on the nature of social work practice, I
> conclude that Evidence-Based Practice (EBP) in social work rests on four
> cornerstones (1) research and theory; (2) practice and wisdom, or what we
> and other professionals have learned from our clients, which also includes
> professional values; (3) the person of the practitioner, or our personal
> assumptions, values, biases, and world views; and (4) what clients bring to
> practice situations (p. 52).

Dr. Gilgun also makes the point that practice methods are fluid and open to modification

"as new evidence unfolds" (Popper, 1969; Shaw & Shaw, 1997). As defined by the

Evidence-Based Medicine Working Group, on which Gilgun's concept of EPB is

designed:

> EBM involves the conscientious, explicitly, and judicious application of
> best research evidence to a range of domains; clinical examinations,
> diagnostic tests, prognostic markers, and the safety and efficacy of
> interventions whose purposes may be therapeutic, rehabilitative, or
> preventative, with therapeutic interventions understandably getting most
> of the attention (Gilgun, 2005, p. 53).

Alternatively, Small, Cooney, & O'Connor (2009) state that "many family

programs are generally not guided by an empirically supported theory, and…even fewer

have a clearly articulated program theory of logic model to guide the program's

implementation" (p. 4). Despite the successes achieved in creating EBPs, surprisingly

few, only 10%, of prevention practitioners actually use them in their practice (Kumpfer &

Alvarado, 2003). This statistic introduces a conundrum around identifying the barriers to

the adoption of EBPs into the social service agencies and certainly warrants further

research, not to be expounded upon here. It does, however, point to a failure in

dissemination efforts, as dissemination is meant to distribute programs from their original

research sites to relevant agencies and organizations throughout larger regions. Quickly changing priorities in prevention work may outpace the generation of new programs, since rigorous research takes several years to complete (Small et al., 2009). It also is assumed that prevention programs often have been at the end of the proverbial "food chain," as EBPs are queued up, waiting for governmental or private funding, which often does not arrive. One can make the next assumption that programs for the poor are not readily funded because they have not been a national priority, thus marginalizing the population they are meant to serve. This lag time between program development and funding can affect the rate at which new programs are adopted into practice, if they are adopted at all. Demand for new programs tends to exceed the supply (Wandersman & Florin, 2003), yet the barriers mentioned above stand between prevention departments and the adoption of EBP programs.

Once relegated to "hodgepodge implementation" (Small et al., p. 4), programs for the stigmatized—substance abusers, smokers, those affected with HIV/AIDS, the poor and disenfranchised—are now including the use of EBP methods obtained through scientific study. Researchers have answered the call for empirical information on these populations by developing treatment programs that rely heavily on the evidence-based model. The successes of these programs are largely dependent on how the practitioners implementing them address the other nuances of a person's life—family well-being, employment, cultural norms, socio-economics. Moreover, according to Chinman et al. (2005), "it is perhaps because the exclusive focus on testing and disseminating of these programs [that programmers miss] the important role of the community and its capacity

to deliver them" (as cited in Wandersman & Florin, 2003, p. 143). Schorr and

Yankelovich (2000) echo that sentiment:

> "…unfortunately, evaluating complex social programs is not like testing a new drug. The interventions needed to rescue inner-city schools, strengthen families and rebuild neighborhoods are not stable chemicals manufactured and administered in standardized doses" ("What Works Can't Be Measured," February16, 2000, ¶ 8).

Dovetailing Schorr and Yankelovich's view, Miller, Sorensen, and Selzer (2006)

suggest that:

> "Logically, dissemination should be the last step in a careful sequence of treatment development. First, a new treatment method evolves, ideally with a specifiable theory of how and why it works. After initial experience to define procedures, the treatment next undergoes a series of tests to determine its efficacy. If (and only if) it works under controlled conditions, then the treatment is ready for dissemination into community practice" (p. 30).

Critics of evidence-based social work practice have argued that this latter

approach does not address "the whole problem." Experimental design can be useful in

defining isolated factors and outcomes, whereas other issues for the client are ignored

(Epstein, 1996). Schorr and Yankelovich (2000) concur that the scientific, evidence-

based model has been promoted as the "gold standard" for what works, however,

conclusions are drawn from randomized field trials in much the same fashion as the Food

and Drug Administration tests new drugs. This leaves the resulting interventions rather

inapplicable "to social problems having complex dimensions," and they "don't match the

messy needs of real children and families" (Schorr, 2006, p. 4). Shaw (1999) agrees that

although the results from randomized control trials have produced useful and useable

results, program designers need to "trade-off certainty of outcomes for relevance of the

research for social work practice" (as cited in Plath, 2006, p. 62). He states that it would

be better "to have less dependable answers about a broader range of questions" (p. 62). Another critic of experimental design, Holloway (2001), claims that the approach treats people outside of their contexts and ignores the narrative, which is where the content of social work lies.

While the critics of evidence-based program design have valid points of view, what is missing in their critiques is the recognition that EBP research is subjected to a rigorous array of trials and revisions, many of which are influenced by context, culture, and the "messy needs of real children and families" (Schorr, 2006, p. 4). Perhaps it is these trials and revisions that cause them to arrive late at the door of social service agencies, for better or for worse. If empirical knowledge is the goal of EPB research, however, there runs a risk of cherry-picking data, omitting in the process culturally-specific data that could hold the key to fine-tuning a program to a particular community.

Culture-centric Program Design

While attaining evidence is the focus of EBP program design, the second category of program design that emerges from the literature places culture at the forefront, and it remains the motivating force at every stage of design, from inception through a program's dissemination. Literature supporting EBP rarely mentions the cultural base being targeted, such that EBP can create a collision between well-intentioned, well-funded researchers and the communities they are meant to serve. Although several articles suggest that EBP be used in conjunction with "clients' values and preferences, as well as clinical state and circumstances… [and] organizational mission, mandate, and context" (Regehr, Stern, & Schlonsky, 2007, p. 410), it is precisely that kind of thinking that renders the evidence-based model problematic. Culture always must be considered in

the search for evidence; it ought not to be an afterthought around which a generic intervention is molded. Practice created and undertaken without cultural considerations is unreliable, as it is developed generally around one particular community, in a particular geographical region, holding particular values, not across diverse populations (Guerra & Knox, 2008). Kumpfer, Alvarado, Smith, & Bellany (2002) expand upon that argument by claiming that culture must absolutely be addressed in program design, implementation, and dissemination in order for the program to be effective and self-sustaining:

> "When programs reflect their target audiences' cultural experiences—which are determined by factors including racial and ethnic background, length of residency in the United States, socioeconomic status, geographic setting (e.g. rural vs. urban), religious traditions and beliefs, and educational level—they experience better recruitment and retention" (as cited in Small et al., 2009, p. 10).

A 2008 case study measuring the impact that culture has on dissemination and implementation of evidence-based methods illustrates this concept as it relates to violence prevention among Latino teens. Guerra and Knox (2008) evaluated a pilot study of an evidence-based family-school partnership entitled Families and Schools Together (FAST) and found that "culture must be viewed as a key moderator of intervention effectiveness" (p. 304). The intervention targeted school-aged children and involved a collaborative team of parents and professionals conducting home-based outreach to other parents and engaging them in multi-family group meetings, followed by support meetings with project team support over an additional two years. Eight weekly group meetings were held, each of which comprised a family meal and highly-interactive activities among parents and children. The goal of the program was to "increase the strengths and connections of the family, school, and communities through this shared participation"

11

(Guerra & Knox, 2008, p. 305). In four randomized controlled trials using FAST with four distinct cultural populations, results showed significant decreases in delinquency and aggressive acts, substance abuse, gang membership, arrests, and incarceration, as well as an increase in family adaptability and student academic performance (Philliber Research Associates, 2000; Guerra & Knox, 2008). As these studies reveal the wide applicability of the FAST program to diverse populations, it was the finer points of agency and client culture interactions that made the outcomes successful. At every stage of the intervention's design, the family's culture was taken into consideration—from the selection of outreach workers to the nature of their interactions with the families. Family work was more reflective than prescriptive in this study, so the workers, who were most often from the same communities as those being served, were able to use their cultural competency in devising ways to help the families, as opposed to implementing a generic curriculum. Guerra and Knox (2008) propose:

> "…that it is virtually impossible and probably not even desirable to strive for perfect replication across diverse cultures and settings. A key challenge is now to encourage fidelity to the essential elements of the program while still allowing for adaptations and adjustments at the local level… " (p. 312).

To summarize, if researchers are to sidestep culture as the primary focus of program design and claim the proponents of culture-centric design, then they are operating from a misguided motivation. To choose EBP over culture-centric-researched programs forces a choice between needing hard evidence and cultivating cultural competence. The best example of a marriage between EBP and culture-centric design is exemplified in the FAST program design, and its successes are based on that dual focus

of evidence and cultural sensitivity, as well as its close attention to evaluation and revision to fit diverse populations.

Comprehensive Program Design

The third model of program dissemination—the comprehensive approach—centers on the work of Dr. Lisbeth Schorr. This "what works" approach considers every possible aspect of policy making, from individual client needs to the elements that promote programmatic integrity, in order to make positive and lasting change for families. Through the comprehensive study of evidence-based data, community building, education, and social service supports, Schorr and her colleagues (2008) tackle the fundamental question of "what works." In November of 2008, Schorr issued a press release entitled, "Realizing President-elect Obama's Promise to Scale Up: What Works to Fight Urban Poverty." In that report, she brings the issue of program implementation into sharp focus by illustrating two highly successful proposals currently under President Obama's consideration: the Nurse-Family Partnership (NFP) and the Harlem Children's Zone (HCZ). Dr. Schorr explicates both policy proposals in detail, both of which incorporate the "intricately woven tapestry of services and supports" to serve what President Obama has designated as "Promise Neighborhoods" (Schorr, 2008, ¶ 1).

The first program Schorr presents, the Nurse-Family Partnership, illustrates a program's successful development and dissemination in which one success builds on the momentum of previous successes. Based on the work of David Olds from the upstate-New York town of Elmira, NFP was developed in 1985 as a program that trained and fielded registered nurses to go into the neighborhoods where poor pregnant women live and to give them the support they need in the form of counseling and connecting them

with services to "change the odds for disadvantaged children" (Schorr, 2008, ¶ 4). Four years into the study, fewer babies were born prematurely; the incidence of child abuse and neglect decreased; more young mothers returned to school, and the rate of subsequent pregnancies decreased during the process of the study. Olds began with a program that worked, added further research to determine its applicability to other regions of the country, and successfully disseminated the program to two new site-cities. With that additional data showing the program's success, he consulted with outside experts to develop 18 "essential elements" that might explain why the program worked. By 2008, NFP expanded into 25 states, developing an infrastructure along the way that was eventually formed into the National Service Office. This entity moved forward the program's dissemination by collaborating with public and private ventures and a nationally recognized program replication organization, which aided in maintaining program fidelity as it expanded throughout the country. As NFP continues to expand, local leaders are consulted to help tailor the program to their communities. What Olds accomplished was developing an intervention that not only worked but drew on a strong multi-disciplinary team for its successful dissemination. Programs like these, Schorr demonstrates, are emerging as the answers to growing poverty and family distress. Best of all, they work because they have been rigorously studied, tested, evaluated, revised, and disseminated with many potential obstacles having been anticipated and overcome. What Obama and Schorr share is their belief that "we cannot do business as we have been doing all along; it hasn't worked… [We need to] stop treating unemployment, violence, failing schools, and broken homes in isolation, but to put together what works to 'heal that entire community'" (Schorr, 2008, ¶ 20).

Dissemination and Evaluation: Strategies for Sustainability

It is effective and economical to take a program that we already know works and to give it the boost it needs to succeed in dissemination. This is a concept proposed in an article by Small, et al. (2009) that aims to promote the sustainability of good EBPs already available. The authors propose adding the component of systematic evaluation of quality and impact to existing evidence based practice, which transforms them into evidence based programs. So as not to expend energy and resources by developing new programs from scratch in an ever-ailing economy, we can strengthen ones which have already shown promise by adding evaluation, revision, and effective promotion and dissemination strategies (Small et al, 2009). The authors conclude that the designation of "evidence-based practice" is not enough to determine a program's success. Indeed, it must be worthy of endorsements by government agencies and well-respected research organizations in order to insure its future. Thus, these programs are not only proven as successful, "they are well-documented so that they are more easily disseminated" (Small et al., 2009, p. 1) and replicated.

Small et al. (2009) propose a method to evaluate prevention programs for effectiveness and accountability that they call the Evidence-Informed Program Improvement (EIPI). EIPIs target EBPs already in existence to help them become sustainable. In order for there to be a successful evidence-based prevention program, four overarching principles must be examined: program design and content, program relevance, program implementation, and program assessment and quality assurance. These categories "provide a framework for thinking about different aspects of what a family-based prevention program does, how it does it, who it reaches, and how it is

monitored and evaluated" (p. 3). The authors make suggestions on how to carry out thorough program evaluation for existing prevention programs; program design and content should be 1) theory driven, 2) of sufficient dosage and intensity, 3) comprehensive, 4) actively engaging, 5) relevant, 6) developmentally appropriate and appropriately timed, and 7) socioculturally relevant. During the program's implementation, designers must ensure that it be delivered by well-qualified, trained, and supported staff, and that it is focused on fostering good relationships. In the program assessment and quality assurance phases, the authors recommend that all programming during the research periods be well-documented and that all members—from the managers and supervisors to line workers—be committed to evaluation and refinement.

A corollary to program evaluation is offered by Wandersman et al. (2008). He and his colleagues propose a model adding a liaison, or "prevention support system," between the research and dissemination efforts. This "primary link" would be responsible for connecting "prevention synthesis and translation system and the prevention delivery system" (as cited in Guerra & Knox, p. 308), as well as securing funding for new innovations. This liaison also would assist in the implementation and sustainability efforts of specific innovations. Instead of expecting overloaded agency personnel and researchers to assume these tasks, the prevention support system would be responsible for training, technical assistance, and support for grantees. Again, this model would address transforming research into culturally competent practice—a good intention, but adding additional personnel to act as liaison between programs and implementation is probably not financially realistic for most agencies.

16

Fatherhood in Search of EBPs

It has become all too commonplace to exclude fathers from the social services arena, and that apparent exclusion of fathers is reflected in the lack of literature on father involvement in social work journals. In a revealing study, Strug and Wilmore-Schaeffer (2003) performed a content analysis of social work journals, and found that although fathers are increasingly a topic of national interest, there is a shortage of quantitative and qualitative literature about how and why father involvement strategies work. The authors found that contrary to popular belief, fathers are of significant importance to their children's well-being. In fact, Strug and Wilmore-Schaeffer conclude, fathers are necessary agents in the healthy development of their children.

The majority of articles examined by Strug and Wilmore-Schaeffer (2003) are written about noncustodial fathers, some of whom are no longer involved in their children's lives after separation from the children's mothers. The number of noncustodial fathers (divorced, separated, and never-married) has grown over the past two decades due to more births out of wedlock and the increasing divorce rate (Cooney & Mackey, 1998; U. S. Department of Commerce, 2001). Often treated as an invisible population, the documented number of single, custodial fathers who are raising children alone has risen from 393,000 in 1970 to 2 million in 2000 (U.S. Department of Commerce, 2001). These numbers suggest that fathers are in need of programs that address their relationships with their children and ex-partners. The authors proclaim that the need for such programs is great, yet programs have not followed (Strug & Wilmore-Schaeffer, 2003, p. 509).

Before the mid-1970s fathers were thought of as irrelevant to the psychosocial development of their young children (Strug & Wilmore-Schaeffer, 2003). The

noncustodial father also has been unfairly stereotyped as being "a scoundrel or a victim, as being either unwilling or unable to support his children, or as being an alcoholic or a drug addict who is potentially dangerous to mothers and children" (Garfinkel et al., 1998, p. 6; Hall, 1981). Interest in fathers has waxed since the mid-1970s, including a surge in 2000 when George Bush made "responsible fatherhood" a national priority, earmarking $100 million to encourage disadvantaged people to marry. National policy changed very little, however, and the divorce rate continued to rise (Pear, 2002; Toner, 2002) until leveling off in 2000 (Centers for Disease Control, 2009a.). The number of births out of wedlock has continued to rise steeply, however, from the mid-1970s through 2007 (Centers for Disease Control, 2009b.).

Assuming that many research studies eventually find their way into the professional, peer-reviewed literature, Strug and Wilmore-Schaeffer (2003) found only 118 such articles containing the word "fathers" through the Social Works Abstracts Plus (SWAB+) database for the period of January 1977 to December 2000. Eighty of those articles were directly cited, and an additional 38 were culled from the references cited in those 80 articles. All articles were read and analyzed for content, and for purposes of this literature review, I refer to the findings that are salient to my particular research question regarding the need for rigorous research-based programs supporting father involvement. Of the 118 articles reviewed, 28% of them were about adult noncustodial fathers and 26% discussed adolescent noncustodial fathers, which is to say that the majority (54%) of research about fathers was written about noncustodial fathers. Only 6% of the reviewed articles were about single-parent fathers; this is one subset of fathers who need much support from the social service industry. As cited in Strug & Wilmore-Schaeffer (2003),

18

Grief (1992) suggested that "social workers should lend support to these fathers in various ways, including providing them with information on how best to serve the needs of their children and advising fathers raising girls on appropriate interactions of fathers with young daughters" (p. 507). Another gap in the literature (9%) emerged about married fathers, a group also in need of services pertaining to parenting, roles, responsibilities, and societal and familial expectations. The balance of articles (31%) discussed fathers in general.

In summary, although there is a surplus of research to support the positive effects derived by father involvement, the professional journals do not provide social workers with examples of interventions for fathers. Based on that shortage, it is unknown how much knowledge practitioners have about promoting father involvement. What they do know "may affect the way in which they deliver services to male caretakers and their families" (Strug & Wilmore-Schaeffer, 2003, p. 509). To broaden the argument, O'Hagan (1997) suggests that social work schools include content about fatherhood in their class offerings so prospective practitioners can work more effectively with fathers and families (as cited in Strug & Wilmore-Schaeffer, 2003, p. 509).

Insofar as Strug and Wilmore-Schaeffer's (2003) findings pertain to the Supporting Father Involvement Project (SFI), discussed in more detail below, no articles offered "a formal assessment of the support service needs of noncustodial fathers" (p. 505). The journals contained even fewer articles about residential fathers overall, and many fewer for Latino fathers (Carbrera & Garcia Coll, 2003). Articles about African American fathers, another subset of the SFI sample , however, were plentiful, yet they tended to promote negative stereotypes about African American men (Strug & Wilmore-

Schaeffer, 2003), showing prevalence information (addiction, domestic violence, incarceration, joblessness) rather than focusing on helpful interventions.

Supporting Father Involvement (SFI) as a Father Involvement EBP

The Supporting Father Involvement (SFI) Project is the first father intervention study using randomized clinical trials "to measure the effectiveness of an intervention to facilitate … positive involvement … of fathers with their children … by strengthening men's relationships with their children's mothers" (Cowan, et al., 2006). In recognition of the gap of good evidence-based programming to promote father involvement, Cowan, et al. (2006) embarked on a multi-year preventive intervention study, and as of this writing at year six, SFI has produced considerable success in strengthening relationships among fathers and their children, as well as whole families.

Following assessments and orientations, nearly 300 participant families across five sites completed the SFI curriculum up to this point. Since the study is ongoing, these program details will be discussed in the present tense. The SFI curriculum is a 32-hour intervention comprising couples groups and fathers-only groups that meet for sixteen two hour sessions. A male-female pair of therapists experienced in facilitating group and family sessions lead each group through the use of activities, discussions, short presentations, and open-ended time for participants to discuss their personal concerns.

Data, most of it being gathered through questionnaires, and some of it through clinical observation, are collected from participating couples before the intervention, two months after groups end, and 18 months after the couples enter the study. For a portion of the original sample, a fourth and final assessment is conducted 30 months after participants enter the study to examine longer-term effects of the interventions.

Additional data regarding any change in the level of father friendliness are collected at each Family Resource Center (FRC).Staffing is the same at each site: Project Director, Case Managers, Group Leaders, Child Care Worker, and Data Coordinator. In two counties, new case manager or group leader positions were created to accommodate the site's individual needs, as will be discussed in more detail in the "Findings" section.

Initially, each site was responsible for recruiting 60 families. Recruitment is conducted through direct referral, either from the FRC in which the SFI program is embedded, or from other county agencies. SFI staff members also recruit participants through community solicitation at presentations, "family fun days," information tables placed in public locales, and print advertising. All families are offered case management throughout the term of their intervention, as well as food and childcare during meetings as incentives for participating in the SFI study.

Original exclusion criteria for participation were: all couples had to be married, cohabitating, or living separately and raising at least one child under the age of seven; both parents had to agree to be in the program; the parents must be the biological parents of the target child; there must have been no current involvement with Child Protective or Child Welfare Services (CPS/CWS); and no untreated drug, alcohol abuse, or physical or sexual abuse history within the past year serious enough to interfere with the parent's daily functioning or ability to be in a group together or separately.

Over the last six years, the SFI study has evolved through three "phases". The phases are distinguished by the following:

Phase I—Hold groups as described, including control group;

Phase II— Hold groups as described, including control group, but broadening the

criteria for eligibility (targeted child may now be 11 or under). Father figures are

now included (uncles, grandfathers, mothers' long-term boyfriend, etc.);

Phase III—Each site's project director can experiment with the program to see

what works or does not work with their particular population—addition of teen

groups, mothers-only group, etc. This phase is in preparation for Phase IV which

will include CPS/CWS families;

Phase IV- Broadening eligibility for participation to include families with open

Child Protection Services/Child Welfare Services.

At the time of this writing, SFI is completing Phase III and entering Phase IV.

In addition to the Project Directors' responsibilities outlined above, PDs were

asked to identify one or two agencies in their county in which to disseminate SFI

concepts or father friendly strategies with the help of the technical assistance

organization, Strategies. Strategies defines itself as "a nationally recognized alliance of

professional trainers, organizational development coaches, facilitators and support staff

united by a set of core values and strategic approaches…[to provide] training, coaching,

facilitation, curriculum development, and the practical application of research and best

practices to programs, organizations, and networks that strengthen families and

communities" (Strategies, 2008, ¶ 1).   Strategies has partnered with SFI to disseminate

all or part of the SFI curriculum or father friendly strategies statewide, through funding

by OCAP. For those wishing to implement the SFI intervention, Strategies has a web-

based implementation approach, that offers organizations three levels of support to

choose from so that an organization can "develop their SFI efforts in the best way for their organization" (Strategies, 2008, ¶ 8).

CHAPTER III

METHODOLOGY

This qualitative study was designed to determine the types and

effectiveness of dissemination techniques used in the five SFI project sites in California.

Much has been written on the effect of father involvement on children, and many father

involvement programs have been created and disseminated across the country. However,

there is minimal literature measuring what has and has not worked in terms of

successfully disseminating these programs and describing what factors contributed to the

success or non-success of the dissemination. This chapter outlines the methods used to

approach this gap in the literature and will discuss the sample selection, data collection,

and data analysis process.

Sample

Information was obtained via interviews with the five Project Directors, as well as

with key contacts provided by the Directors in each county. A sample of eleven

individuals participated in the study, including three men and eight women. Five of the

participants were SFI Project Directors (two female and three male) from the following

counties and corresponding Family Resource Centers (FRCs): Yuba County

(Gracesource, Inc.), Tulare County (Lindsay Healthy Start), Santa Cruz County (PAPAS/

Family Child Development Program), San Luis Obispo (Positive Opportunities for

Parenting Success/ EOC), and Contra Costa County (YMCA). All Project Directors,

regardless of their progress in SFI dissemination, were included in the study.

Project Directors also provided the names and contact information for their

Partner Agency contacts and an introductory email was sent to them containing the

logistics and purpose for the interview and an invitation to a one-on-one phone meeting. Participants from Partner Agencies included six females who implemented SFI strategies and/or the curriculum. Inclusion criteria for this second round of interview participants required that they had received training on the SFI curriculum and father friendliness and had begun to implement father friendly strategies within their agencies, or were planning to conduct the curriculum in the near future. One county provided the name of a person who had attended a training session on the curriculum, but she had not begun to implement the new strategies in her agency. She was therefore excluded from the interviews because she failed to meet the inclusion criteria requiring some implementation of father friendly strategies. Four of the five Project Directors whose sites have been involved with SFI for six years provided Partner Agency contacts for this study.   The fifth county, Contra Costa County, has been involved with SFI for two years and was at the beginning stages only in recruiting partner agencies at the time of the interview. The four Project Directors provided the following contacts to be interviewed as Partner Agencies:

> ● Yuba County— Family Team Conference Facilitator and Parenting
> Instructor, Children's Services Division of the Yuba County Department
> of Health and Human Services;
> ● Tulare County—Program Director, Woodlake Family Resource Center;
> ● Santa Cruz County—Program Director and Certified Trainer, Head Start
> State Preschool; Education Manager, Santa Cruz County Head Start;

● San Luis Obispo County—Regional Manager in Child Welfare Services

and Family Support Services Manager, Economic Opportunity

Commission.

Data Collection

Data collection was obtained through semi-structured interviews that were

conducted at mutually convenient times. Because the human subjects protocol was

formerly approved in the original SFI study by the Committees of The University of

California, Berkeley, Yale University, and California State Department of Human

Services, a Human Subjects Review (HSR) waiver was submitted to Smith College's

HSR Board on November 24, 2009.

Interviews with Project Directors lasted approximately 45 minutes to one hour

and contained 16 questions; those with Partner Agencies were about 30 minutes in

duration and covered 12 questions. When appropriate, the respondents' answers

prompted the interviewer to ask for elaboration, and the additional information enriched

the overall content for the interviews. All interviews were tape recorded on a digital

hand-held device, and took place between February 19th and March 30th, 2009.

The questionnaires used for the interviews were developed in collaboration with

Dr. Pruett, an investigator on the project and this researcher's master's thesis advisor.

Areas of assessment included what types of dissemination strategies were used by the SFI

Project Directors, as well as the knowledge, understanding, and nature of collaboration

that was developed with partner agencies. Two questionnaires, one for Project Directors

and a second for Partner Agencies, consisted of questions about how SFI looked in each

agency, the obstacles and successes encountered in using either the SFI curriculum or

father friendly strategies, and the future goals for the interviewees in terms of SFI. See Appendix A for entire contents of questionnaires.

Data Analysis

The qualitative data collected from phone interviews were transcribed for general themes expressed. Answers to a total of 28 questions (16 for Project Directors and 12 for Partner Agencies) were summarized for each interviewee. The interview questions were then collapsed into two major categories: "Project Directors" and "Partner Agencies," with four discreet categories under each. Topics analyzed for Project Directors are based on occurrence of similar themes across the responses of the interviewees, as explained above: 1) new populations of interest; 2) what we need to do more of; 3) clarity of what we're offering, and 4) program sustainability versus "giving the program away." For Partner Agencies, the following themes emerged: 1) strengths of relationships with SFI; 2) what has been gained from SFI; 3) supports needed, and 4) future goals for SFI.

To analyze the data, the constant comparative method was used, a grounded theory whereby the researcher mines data for similarities and differences throughout the process of data collection and analysis (Anastas, 1999). The data's "lowest common denominators" were then determined, the themes of which are covered in the "Findings" chapter below This study serves to expand on two former summaries written by Drs. Phil and Carolyn Cowan (2004, 2005), two primary investigators of the SFI project, and is similar in design. As in the earlier reports, interviews were conducted and data were compiled, using a grounded, constant comparative method, to measure the successes and setbacks of specific aspects of the SFI Project.

CHAPTER IV

FINDINGS

The purpose of this study is to explore the challenges, successes, and other

consequences, intended or unintended, encountered in the implementation and

dissemination of the Supporting Father Involvement Project (SFI).   This will be

accomplished by comparing and contrasting the responses to our interviews given by

SFI's Project Directors and their corresponding Partner Agencies and synthesizing the

information to extract overarching themes.

SFI Project Directors are embedded within the "intervention locales" known as

Family Resource Centers (FRCs). The FRCs serve primarily low-income families living

in small cities or rural areas in California. Partner agencies are located in the same

counties as their corresponding SFI sites and occasionally share clients with their SFI

counterparts.

The findings for this research are organized by themes that arose from the

interviews with Project Directors and Partner Agency contacts. Themes uniting Project

Directors include: new populations of interest, what we (SFI researchers) need to do more

of, clarity of what we're offering, program sustainability, and funding. For Partner

Agencies, the themes include: strengths of relationships with SFI, what has been gained

from SFI, supports needed to continue SFI, and future goals for SFI. A third section

compares Project Directors' responses with those of the Partner Agencies to evaluate

differences, as well as shared experiences, while implementing either the SFI curriculum

or father friendly strategies. The results gleaned from the interviews will ultimately

inform Strategies and the California Office for Child Abuse Prevention in their future

dissemination efforts, as this research has served essentially as one of many aspects of the ongoing evaluation of what works with both the SFI program and dissemination efforts thus far. For purposes of clarity in this section, I will refer to the SFI as "study" and my research as the "research" or "thesis".

<center>Project Directors</center>

Project Directors shared similar themes in their answers to the questionnaire. While many of their issues of concern were anticipated in the original SFI study design, there were a few unexpected aspects that emerged in their efforts to implement SFI within their FRCs and to disseminate the program to their targeted Partner Agencies.

<center>*New Populations of Interest*</center>

The original SFI sample parameters included lower-income, Latino, European American, and in one county, African American families. While these groups comprised the majority of participants, other groups emerged as potential recruits for SFI participants, therefore suggesting the need for additional culturally appropriate group leaders and case managers for the future. For instance, in Yuba County, there is a large Hmong population, and they present with a higher risk profile than any other group in the county. When Hmong families appear in "the system," it is usually within the more severe Child Protective Services cases. Similarly, a hope of the Project Director in San Luis Obispo was that there would be some attention given in the future to newly discharged veterans, as well as fathers in the prison population, since Post Traumatic Stress Syndrome (PTSD) cases are so prevalent:

> Veterans returning from war, Santa Barbara Vandenburg Airforce Base, I think this could be a great program for them—we are still working on the prisons, and they have the money. The Sherriff's been working on that.

<center>29</center>

> We'd love to do a group there for fathers to get back to their families and how to communicate with them again.

Project Directors identified two additional groups of people who would fit the criteria for participation in SFI groups: church-goers and Native American populations not involved with social services. As the Yuba Project Director explained, churches would be ideal venues for SFI groups to be held, however, this would work best if the groups were conducted "in house," using members of the church as group leaders.

What We Need To Do More of

Project Directors were unanimous about the need for more funding to both continue the efforts they have begun within their own FRCs and to disseminate the program to other agencies. They believe funding is the vehicle to achieve SFI's primary needs, such as the hiring and training of new staff members. All PDs expressed that more male and bilingual group leaders are needed because men are more comfortable talking with other men, and non-English speaking people, or those with minimal English, are less likely to express themselves fully, or be understood, if not speaking in their native language. There is a "built-in trust factor," the PDs concluded, that favors a Group Leader (GL) who is fluent in clients' native language.

PDs articulated their concerns about funding for SFI after the research is completed. Their concern was about how they would be able to maintain the momentum of the current SFI programs within their FRCs during the lag time between the end of the SFI study and subsequent funding, which is not expected to arrive without considerable efforts on their part. Or, PDs from San Luis Obispo and Tulare County, mused, what might be alternative ways to keep SFI going with little to no funding?

Another "should have" area of attention concerns the target audience for SFI marketing strategies. The initial activity used to promote SFI took the form of large-scale orientations or workshops to recruit agencies to adopt father friendly strategies. These workshops were held with the hope that one or two of the agencies might show enough interest to adopt the SFI curriculum, thus becoming Partner Agencies. A topic addressed in this researcher's questionnaires regarding what could be improved to garner productive interest, it was suggested that the workshops might generate more "buy-ins" if the trainings were directed at high-level agency administrators. As the workshops were conducted, the "net was cast too wide," and many of the people who came to the orientations were not decision makers for their agencies. Moreover, despite the strong and genuine interest by the workshop attendees, somehow that interest got lost in the translation or transmission to their agencies' administrators. A possible solution to that problem, three PDs concurred, was for SFI PDs to have more one-on-one conversations with agency leaders to ensure that they have the chance to discuss how the program would fit the idiosyncrasies of their agencies, clarifying their vision for using SFI.

Clarity of What We're Offering

Project Directors had similar generalized visions about how SFI would be disseminated to Partner Agencies, yet the details about what they were actually charged to offer varied from county to county. Two PDs posed: "Are we offering training and technical assistance for Partner Agencies to conduct the SFI curriculum for themselves, or are we preparing to be hired by the agencies as a full-service, SFI curriculum delivery system?" While all PDs knew that they themselves would initially provide training and technical assistance within the Partner Agencies about how to implement father friendly

31

strategies, it was unclear whether they would continue to provide training and technical assistance as an outside resource, or whether SFI personnel would continue to run groups within their agencies, after the study's conclusion.

Regarding the content of the curriculum, three PDs were unclear about how groups would be defined after the study was over, and what form they would take: fathers-only, father and mothers, mothers-only, and for Phase IV, CPS and non-CPS cases. The development of SFI's Phase IV, with the introduction of CPS cases, has clarified the latter of those concerns. Dovetailing the issue about group definitions, concern was raised as to what the different dynamics would be between mandated (CPS/CSS) group members and voluntary, non-CPS/CWS clients. Would this diversity cause a fissure in the group dynamics if integrated, or would the mandated and volunteer groups be segregated from one another? One county, Contra Costa County, works with a significantly different population—poor, urban African-American families. As that county's PD stated, the population's concerns and situations are significantly different from the other four counties that serve primarily Latino Americans and European Americans, many from rural areas or smaller towns. That difference may affect what SFI ultimately offers to this site:

> [It is] possible they're experiencing more challenges in their lives. Many fathers are in prison. This is the most violent and depressed part of the county, and the only place where African American families could buy homes after WW2. Now it's becoming more Latino. The issues are different than in the other counties: homelessness, violence, more child welfare participation. So, engaging and compliance might be tougher.

One staffing difference between Contra Costa County and the other four counties is that, in recognition of the importance of community reception, that county's PD has added the SFI staff position of Community Outreach Coordinator to help bridge the gap

32

between SFI and that community, since the program is new to the locale and might take longer to be accepted.

Concerns arose from San Luis Obispo's Project Director about Phase IV, at which time CPS/CWS participants will be added to the study's sample. To paraphrase, this PD asked, would the courts perceive SFI as a parenting program (since most counties do not have formal parenting education programs), and would it therefore become a court mandated program? If so, how would that affect the original design of SFI if the court were possibly to impose curriculum changes and/or additions? And how would this shift in "ownership" affect the sustainability of SFI?

Program Sustainability versus "Giving the Program Away"

Two counties' PDs spoke to the concern about the sustainability of SFI—of whether SFI should continue to act as an outside contractor to provide its own group leaders and case managers, or whether SFI should be responsible for training internal staff therapists and case managers, as well as providing technical assistance to become SFI group leaders and SFI case managers. The first scenario would ensure the sustainability of SFI because their service would be called upon again and again, indefinitely. The second option would enable agencies to conduct the program "in house," and eventually mold it to fit the agency's culture:

> One of the models Strategies has used in the past is capacity building. We would have regional cohorts to do site visits to six to eight groups at a time. We'd provide training for the sites (especially for case managers) to be able to deliver technical assistance. Cohorts would bring other people in and work with them as a team—to evaluate how each site is doing. This still might be possible in phase IV. To see things hands-on. The CMs are the experts; they need to be involved. If we could teach others what they know, we could do others site by site. Then we could bring in other professionals—First5, CWS, Executive Directors of those mega organizations who should be invited in and meet us. Kyle is very

33

compelling, and if we could put the right people together and put him in front of them with the data with concrete people in their region, we could give it a better sell.

A second PD echoed Yuba County's PD, but with an added focus on program fidelity:

If we continue to do dissemination, we need to decide what we're disseminating. If to neighboring county, I have difficulty because I'm trying to be the provider of the program because we have the expertise. If we give it away, we become obsolete. Program sustainability requires resources, financial assistance. If we are passing it off completely, then they have to find resources to do it completely, fidelity to program. We would need someone to oversee it. If OCAP heads it up, it should go to neighboring counties, and we can go do the training. If others get a hold of it, they could develop their own version of it and then it would be a different program to compete with. We would find seed money and a sustainability plan for one-and-one-half years, long enough for the organizations to adopt it. Then at the third year, they'd have to find a matching fund, and by then it would have a fully functioning SFI based program, and it would spread like wildfire.

To summarize, Project Directors were unanimous in their concerns about funding, and the majority of them expressed concerns about new populations of interest, the need for more qualified bilingual and male therapists, which would necessitate aggressive funding efforts, clarity of what they are offering, and program sustainability.

<center>Partner Agencies</center>

Project Directors, with the help of Strategies, were charged with infusing father friendliness, as well as the SFI curriculum, into one or two partner agencies within their respective counties. Although the Partner Agencies, with the guidance of the Project Directors, were able to infuse father friendliness into their agencies successfully, both concretely and psychologically, they encountered obstacles in adopting the actual SFI intervention. Below are reflections from the six Partner Agency representatives interviewed for this study.

<center>34</center>

Strengths of Relationships with SFI

All Partner Agencies recounted their experiences about performing their agency self-assessments that showed that they did not serve fathers at a satisfactory level, though each agency's mission statement mandated that they serve entire families. All six PAs agreed that SFI "came along at just the right time" when they were looking for ways to fulfill their promise to families. They stated that the concept of father friendliness was novel and positive, and they all expressed excitement at involving fathers in their services at a genuine level of engagement. As articulated by one Partner Agency representative:

> In our county there is next to nothing for fathers. Up until a couple of weeks ago we didn't have any drug and rehab. No programs for men in the county. Most programs address mothers. We could do this program without increasing contract costs, too. Lots of standing need. Since POPS was doing a lot of other good parenting programs in our offices, we thought they were reliable—it was especially powerful when it was opened to Child Welfare families.

Furthermore, the relationships that were fostered between SFI Project Directors and the Partner Agencies were extensions of many years of working together on various projects, and sitting on networks and committees. PDs introduced the SFI philosophy to the PAs from a starting point of trust and positive regard, and this facilitated the easy working relationships among them. Throughout the entire process of implementing father friendly strategies into the Partner Agencies, the PAs said that they all felt supported by the PDs in all aspects of implementation.

What Has Been Gained From SFI?

As a result of the father friendly strategies promoted within the agencies, partners reported that more fathers are appearing in their case work "across the board." Two PAs articulated that families' risk in terms of CPS/CWS involvement has been lowered,

allowing the families to remain in the prevention arm of services. SFI is perceived by the families as a very positive intervention, and their regard is now generalized to include other social services, toward which many families historically had shown wariness. In one Partner's response to the survey question asking what changes were noticeable in her Agency as a result of the work with SFI, she replied:

> [We increased] our knowledge and awareness of what we can do. We've had inservice training for all staff from [PD]. We've increased training—had him come to parent meetings and policy council. We also have a committee that meets regularly (monthly) to see what we can do as a program with [PD's] support to increase father friendliness that's been going for about 1.5 years. Changes are now in our applications—two parent signatures, not one. We changed how we do environmental assessments, annual parent survey—changed the form and added a question for parents: are we father friendly? We've seen a big difference—more fathers at meetings. In one year we brought fathers from 8 fathers to 54 into our agency. More fathers involved in field trips—[the] Aquarium. We see fathers as volunteers in the center. We've gone ahead to purchase children's books that show how fathers can become more involved in their children's lives. Posters showing men in non-traditional roles with fathers. [PD] made boards that rotate among the centers regarding father friendliness. Male parent representatives attend the policy council at the board of trustees meetings—within Head Start. They meet with all the reps of Head Start and make decisions about policy and budget, etcetera. This is the second year that's happened.

All PDs claimed that father friendliness efforts are supporting fathers to become more involved in their children's lives, so much so that the mother's "load" of responsibility is lessened. Consequently, mothers are less stressed and less likely to displace onto their children their frustrations. Another accomplished goal of the researchers is that mothers and fathers are working more closely as a team in raising their children, which has resulted in improved relationships between parents, regardless of their relationship status.

As shown in the quote above, an unintended consequence that most all partner agencies shared is that they are seeing fathers beginning to get involved, not only in their children's lives, but in activism efforts to support father involvement. The impact on fathers from father friendliness efforts is unprecedented, three PAs claimed. One Partner Agency representative expressed delight at one father's new found enthusiasm:

> I was doing a literacy workshop. Was talking to several men, and was talking about how fathers talk to a child to take time to have the child answer in their own time. And this young father told a story that was so great. When he was a child and when his father would ask him a question, his father would always answer it for him. It made him feel very small because his father thought he couldn't answer the question, and it made him very insecure as a grown-up. Through the support group at PAPAS he learned that he was going to wait for his child's answer. He knew that he had a father who didn't really know how to talk to him.

Supports Needed

In consensus, Partner Agencies expressed their uncertainty over whether SFI could be fully implemented within their agencies, due to their concern about the fate of the current budget crisis in California. They agreed that in order to keep fidelity to the curriculum, they would need funding for such things as meeting space, new staff members, training, materials, and similar items, and they were perplexed as to where that would come from. Inasmuch as new staff members were concerned, they all expressed a strong need for bilingual and male therapists to run support groups—a need that is vital in the social services industry in general.

All PAs were unsure about the plan for the SFI curriculum implementation after the research is completed and whether the program would continue to be supported after that point, if at all, by SFI. Specific issues of concern that arose were: Who would be training whom on the curriculum and father friendliness components? Would groups be

run from outside SFI therapists, or would their own therapists be trained to deliver the curriculum? How would SFI be run administratively within their agencies, and what support could SFI continue to provide to them? All PAs wanted clarity on the fate of SFI because they all recognize it as a very positive program that they did not want to see fade into the nonexistence.

Future Goals for SFI

Three Partner Agencies reported that they envision continuing SFI within their agencies, although it would take significant program changes to do that. Many details about the funding, training, and staffing need to be determined before those visions can become clearer.

Despite their concerns, three PAs expressed their enthusiasm for the program by saying that they wanted to see SFI expanded throughout the entire social services industry in their counties, especially within all divisions of DSS. Moreover, two partners envisioned the program extending outside of "the system" into different populations: prisons, veterans, and churches. Moreover, one Partner recommended a creative alternative for increasing the therapist pool for SFI groups:

> If we expanded services—build it and they will come—and at first we couldn't recruit, now there's a waiting list. Hire more group leaders. We could have more groups. I'd like to see how to get fathers who've graduated from SFI to do support groups. Or have their own support groups outside of the research. I'd also like to see us go into the jails and prisons. When they get released, they need to have skills of communication and respect and child-rearing. When they're released they are at sea as far as working and family and social skills are concerned.

Similarities and Differences between Project Directors and Partner Agencies

Project Directors and Partner Agencies were more in agreement with each other than not in their responses to questions about challenges, successes, and future plans for SFI in their counties. In particular, the data generated clarity about barriers faced to successful dissemination. Note: since Contra Costa County is in its early stages of SFI, there are as yet no Partner Agencies affiliated with SFI, and there are no results presented below for that county.

Project Directors and Partners

Similar Perspectives

Tulare County:

> • Tulare County's Partner Agency is not doing the SFI curriculum, but they have been participating in the inservice/staff training. They feel they are ahead of the game in that their therapist has been trained, unlike other agencies. They are hoping the state (OPAC) can carry out the training of therapists for other FRCs.
>
> • They are looking at the funding issue for the future.
>
> • Both PD and PA feel that it is harder to find therapists in Tulare County than in other counties.
>
> • There is not enough funding at present to carry out SFI groups, and there are not enough male therapists, but they claim to have increased awareness within their agencies.

Yuba County:

> • Yuba County has a large Hmong population, a strong methamphetamine problem, as well as many one-parent families—usually single mothers—

39

so they are experiencing difficulty in finding two-parent families, or even families with significant others, to recruit for SFI groups.

• Feedback from parents is that both groups are "great" and "fun." Yuba County's PD reports having two families who want to attend a second time. The comments are very similar among group members, past and present.

San Luis Obispo County:

• The only "bad thing" that has happened is that the group used a classroom and the teacher's supplies and did not clean up afterwards, "so that didn't go over very well". Once, a group forgot to lock up the room and building after their group, but that was a mistake. Building security may become more of an issue with the new PII (Personal Identifying Information--legislation to monitor who uses county buildings, etcetera) by increasing paperwork. How parents enter and exit the building might become more challenging after PII is implemented.

• "At this point," stated a PA, "we're ahead of the game as far as how to collaborate. We had the confidentiality piece in place, childcare and POPS already there, and staff training. If we had done this five years ago, it might have been more difficult, but implementation is easy."

•The county is seeing a trend of more fathers in single-parenting situations, so the need for this program is urgent. Many mothers are incarcerated, or in drug rehabilitation, so they are seeing more males needing services for their families.

40

Santa Cruz County:

> • The Fatherhood Summit was a "big success" in bringing families to
> participate in the SFI program.

> • Changes reported by both partners include increasing fathers'
> participation from 8 in 2008 to 54 fathers today in the Head Start program.
> There are more fathers at meetings, on field trips, and as volunteers at the
> center, as well as sitting in on policy-making councils and meetings held
> with the Board of Trustees.

> • The county has added six items about father involvement in the agency
> to the Early Childhood Environment Rating Scale (ECERS)—a tool
> designed to assess group programs for children of preschool through
> kindergarten age, 2½ through 5.

> • Some mothers do not want the fathers "on board" because they do not
> want to share the parenting role, and for some mothers, for safety reasons.

> • "We need to meet the clients where they are and consider their lives
> when scheduling groups and activities." One partner felt the same—that
> they needed to be more flexible in how they met with clients—on
> weekends and evenings, for examples, "but teachers have a life, too, so
> that might be difficult to promote."

Unique Perspectives

Four of the six Partner Agencies want their own staff to be trained to carry out the
SFI curriculum, and SFI Project Directors have some reservations about handing it over

so completely for fear that by doing so, it may threaten their site's sustainability as a leader in establishing father involvement.

Tulare County

• The partner did not echo the PD's fear about losing potential Partners' interest during the lag time between training and actually having a program to offer. According to the Partner, discussions about father involvement, and the PD's continual involvement with staff, have "kept things going." The partner understands the funding issue and does not hold the PD or SFI accountable, and she does not see SFI as an endangered program at this point. The SFI project is not "up and running" to date, but the PA considers her agency in the beginning stages of adopting the program.

• The Partner stated that the FRC Network has discussed bringing the SFI project to the FRC under a Department of Mental Health grant, and they await OPAC's commitment to train therapists to carry out the curriculum. But the PD understood this process a little differently: she expected that OPAC would somehow encourage or mandate each county to create "X amount of father friendliness measures when they came up with their county plan," not necessarily to have OPAC train therapists, although that may be how OPAC decides to run the program.

• Differences emerged regarding reasons why SFI has not been implemented yet: the PD said that it was not clear what SFI was offering. "We had trouble getting our offerings clear; do we offer training? Or our

own trained people to implement it? All or part of the program?"

Moreover, offers had to be given to the right people, according to the PD.

"The net was cast really wide, too wide." People who are really interested

are different, she said, from people who can implement it.

• The Partner said that "it may be more about the clients than SFI's

efforts": what she found difficult in promoting father involvement was that

fathers often do not want to be involved with their children after the

relationship with the mother is over. That factor makes it difficult to

create a sense of excitement in them to become involved in their children's

lives. And few fathers are willing to leave the job early to make room for

those meetings, at the risk of jeopardizing their income. The Partner

mentioned that the PD's FRC offered cash rewards to fathers to attend, but

her agency does not have such resources to offer such incentives to

participants.

• The partner also admitted, "I don't think [the PD] will allow SFI to die

down, which puts a lot of responsibility on her." This Partner said that

SFI would have to be funded as a new program in the agency, and that

would require more money." However, if she can't get the funding, she

concluded, she is confident that there will be other agencies that will apply

for the funding and bring SFI to them that way.

San Luis Obispo County

• "Despite the excellence of [the PD] and her team," one partner said,

"outreach to families and agencies has to be done on a daily basis, and that

might have been put on the Project Directors' shoulders more than it should have been.   The project can't just be promoted once in the beginning; it takes constant rejuvenation from all staff members."

•The same partner said, "My pet peeve about good programs is that they come and go. Startup money appears; then it's gone. That's frustrating."

• The PD said that the most significant obstacles to dissemination have been financial, at least at the county level. She also believes that interest is not strong enough to adopt the program, especially since people are "doing their own thing" in their programs. But that sentiment was not repeated by either partner who views adoption of SFI more hopefully, and one Partner has begun to work at ways of spreading SFI into more of the county, by performing some outreach of their own. Both PD and PA expressed that the interest is "definitely there," it just needs to find a way to work in this difficult economic environment.

• Both partners stressed that the changing profile of the county has put families at a special disadvantage—layoffs, foreclosures, people from the Los Angeles area buying second homes—all of which force lower- to middle-income families out of the county, or two or more families into a shared house, increasing stress on families. In the past four to six months the DSS caseload has increased by 30%. Their workload, therefore, has increased dramatically while their funding has remained stagnant.

• One partner said that their job is to work with "both sides of the house," meaning they have a holistic philosophy of linking child welfare and the

families' financial situations to make families work better, and that, she declared, will always be the focus of their work. She also believes that if they use SFI, it may keep families out of the CPS caseload and keep them in Prevention instead, ultimately lessening the overall workload for the Department of Social Services (DSS).

• The PD did not mention Phase IV and how SFI would be extended to open CPS cases, and while one partner described this development as "powerful" the other partner expressed concern about it. She said that if SFI becomes a court-mandated parenting program, the voluntary nature of it would disappear, and that would also create a waiting list for SFI. She believes also that in the group setting, there may be different dynamics between mandated versus voluntary clients, altering how the groups are run.

Yuba County

• The PD said that he is hesitant to get the Mental Health Department "up and running" with SFI, since they have no Spanish-speaking male facilitator, and no capacity to help the Hmong population in their language. What makes the program attractive to agencies is the mental health component, even though it's not officially therapy. It works on couples' relationships, which most parenting classes do not usually address.

• While the PD stated that the most successful strategies were one-on-one meetings with agencies to hook interest, the Partner said that she "got

45

hooked" by word of mouth from a trusted source working at the PD's FRC, and that was what made her move ahead with SFI.

Santa Cruz

• The PD expressed that keeping the curriculum and staff within SFI would keep the program sustainable, but the Partners have a different idea. One Partner stated, "We'd want to have the groups here at the agency so we wouldn't have to farm it out to SFI although I don't see that happening right now." A second Partner said that funding would have to support a full-time staff person, preferably a man, to carry out the father involvement curriculum and to maintain the current momentum of the program. Having SFI staff come in and provide the program has been a considerable luxury, this Partner admitted, but she feels that the program would operate best as an integrated one.

• One partner said that challenges encountered in implementing father involvement strategies included not only breaking the social service industry's mindset around working primarily with mothers, but also with the teachers in the Head Start centers. Frequently, SFI and the partner had to sell the father inclusion ideas to teachers who were helping to sustain the mothers-only culture.

• One partner reported that at the outset she was a bit nervous. She was afraid that SFI would add another layer of work onto her workload. Partly due to her being new at the agency, her nervousness was quelled by the

PD's commitment to "making it work" for them.   Now she sees the

program as having alleviated some of the stresses of her job.

The above sentiments do not strongly support any motivations for adjustments to

the SFI program or its dissemination plan.   What is of particular interest is why the data

are largely similar from different sources and therefore do not indicate any conclusive

ideas for programmatic change. Possible reasons for this similarity in view and lack of

constructive criticism that could facilitate positive change in the program is considered in

the discussion section below.

CHAPTER V

DISCUSSION

Social service programs may endure several incarnations before becoming

effective and sustainable interventions. The effectiveness of social service program

dissemination cannot be measured in isolation. Indeed, all components of program

design, implementation and evaluation determine the longevity of any program, well into

dissemination. In analyzing the Supporting Father Involvement Study (SFI), this

researcher attempted to draw upon the lessons learned from SFI's Project Directors and

Partner Agencies, particularly as they pertain to successes and challenges encountered in

the dissemination of the program. The results from this study may guide SFI designers in

their dissemination efforts for the future, as well as offer a retrospective of what has

worked and what has presented challenges over the past five years of the study's lifespan.

This discussion raises new issues for SFI researchers in the form of questions to promote

mindfulness of the consequences of dissemination, and so that new questions can be

inspired for exploration as SFI grows into the future.

As the literature review demonstrates, program design and implementation for

social service programs fall primarily into three categories: one that is grounded

exclusively in empirical findings; culture-centric focused design; and a comprehensive

model that includes elements from both of the other categories. The third model, the

Comprehensive Model of Dissemination, emerges as the best descriptor for the SFI

intervention. The comprehensive method combines the other two methods of evidence-

based practice and culture-centric design with the components of constant evaluation and

subsequent revision to create a thorough and effective prevention program for families.

Thus, what the SFI investigators ask in regard to dissemination are: What has worked in the past? What is working now? What changes do we need to make to move forward?" This approach to dissemination takes into consideration previous research, theory, and practice (Schorr, 2003) to address the complex needs of families. Throughout the process, SFI designers Drs. Carolyn and Phillip Cowan and Drs. Kyle and Marsha Kline Pruett have stopped to reflect on the essential elements that might explain why the program has worked.

Once program designs are determined, after rigorous testing and implementation, they often end before the focus can turn toward making it available to a wider population. This is often a function of lack of funding, sustained interest, or both. SFI, however, stands currently at the threshold between program development and dissemination, while simultaneously evaluating their initial efforts at dissemination, so that they may promote the program throughout the state of California. We learned from our interviews that although (and perhaps because) the relationships forged between Project Directors and Partner Agencies were extremely positive, and while father friendly strategies were enthusiastically implemented into the Partner agencies, bringing the actual SFI groups into those agencies was not successful. The questions we are left to answer are: In light of the multiple successes of SFI, what were the barriers to the dissemination of its full curriculum? And what are areas for growth for SFI as it moves out of research and into sustainability? Two key areas will be discussed which have impeded SFI from reaching its goal of dissemination thus far: staff workload and staffing changes, director/partner relationships and sustainability. A third topic—new populations—explains how SFI can meet the needs of more diverse populations as it expands into other areas of California.

Staff Workload and Staffing Changes

As we learned from the interviews with SFI's five Project Directors, the responsibilities associated with running the program within their own FRCs, coupled with disseminating it to another agency, were experienced as rewarding but not without challenges. The multiple demands placed on PDs weighed heavily on their ability to perform both jobs sufficiently. SFI investigators, upon learning about staff overload, were effectively mobilized to make changes in PDs' job descriptions by removing dissemination outside of their counties from their list of responsibilities, and by leaving those dissemination activities to a full-time program disseminator. A new position, funded by OCAP, was filled by the Strategies Dissemination Coordinator, who continues to collaborate with the five original Project Directors.

Another successful staffing addition was made in Contra Costa County with the creation of the "Neighborhood Services Coordinator" to join its SFI team. As the program enters more and diverse communities, it may be advantageous for this position to be added to every SFI team, serving as the key link to translate SFI into any community, while maintaining program fidelity. Contra Costa County's staffing model approximates Wandersman et al.'s (2008) "prevention support system," in this case a person responsible for connecting "prevention synthesis, a translation system, and the prevention delivery system" (as cited in Guerra & Knox, 2008, p. 308).

Another staffing matter, concerning Group Leaders, emerged upon the dissemination of SFI into the Partner Agencies. SFI has thus far been conducted with three populations: Latino, Caucasian, and more recently, African American. As the program expands into other areas of the state, SFI will need to adjust the staffing,

literature, and other media to accommodate new populations, and the agencies will need to hire appropriate Group Leaders for future target populations. Bilingual therapists are needed in the Partner Agencies because SFI works at a deep clinical level, therefore, speaking one's native language is especially important to be understood clearly and for full emotional expression. Project Directors and Partners concurred that there is a level of built-in trust and understanding perceived by the client when speaking to someone of his own cultural group. For the same reasons of trust and understanding, Partner Agencies will need to hire more male therapists to accommodate future groups, since the majority of staff comprise women in the social service industry, including the Partner Agencies who were chosen to work with SFI. The shortage of masters-level male therapists graduating from schools of social work continues to be endemic (McAllister, 2004), so male staffing may continue to present challenges as SFI expands throughout the rest of California. One insightful solution to this dilemma was offered by one Partner, which was to train graduates from the SFI program to run groups, capitalizing on their enthusiasm for SFI, much as recovery groups are led by ex-addicts. The contraindication of this suggestion, however, is that these graduates would not, in most cases, have the clinical expertise or professional training required to facilitate the groups. Moreover, having an SFI graduate facilitate groups may blur the necessary boundaries between the group leader and familiar community member that protect the confidentiality of group members.

<div align="center">Sustainability and Partner/Project Director Relationship</div>

As discussed in the Results section, concern arose between two Project Directors about SFI program sustainability versus "giving it away." Before the options to that

answer can be explored, it is important to examine the relationships between the SFI

Project Directors and their Partner Agency representatives. Indeed, offering extensive

training, technical assistance, and ongoing support by an outside agency, free of charge,

is a relative luxury to the program's recipients. Therefore, it is not surprising that the

nature of the relationships between PDs and PAs was characterized as extremely positive.

Alternately, having a curriculum to implement gives Project Directors power by keeping

a monopoly on the material, thus sustaining their job security. Given these positively-

charged relationships, coupled with longstanding friendly work relations, there would

appear to be little motivation for this dynamic to change. The price for Partners to fully

adopt the SFI curriculum, with all the financial, administrative, physical, technical, and

staffing requirements that it would require is high, much as Project Directors' "letting the

program go" threatens their own job security.

Aside from the "customer" and "vendor" dynamics, however, the PDs who

insightfully expressed concern about sustainability elucidated what they already knew

about the history of programming. Programs are created and disseminated with all

supports in place for successful implementation, and once the receiving agency has

integrated the program in a smooth working rhythm, they no longer have a need for the

entity (SFI Project Directors and staff). Such is the life cycle of research and

dissemination in many cases, so PDs' fears of becoming obsolete may be well justified.

Their fears also are justified by the statements made by several PAs who admitted that

even though the implementation of father friendliness has been a complete success, their

goals are to conduct SFI "in house." This gap in intentions between Project Directors and

Partners suggests that the conversations between them about the future goals for SFI

might not have occurred, possibly out of discomfort. PDs, therefore, might have done better to choose Partner Agencies with whom they have more distant relationships, therefore making the program transfer process clearer and less uncomfortable.

In exploring program sustainability, PDs will need to address such questions as: 1) What would become the roles of Project Directors and staff after the research is completed and SFI has been adopted into the Partner Agencies? 2) Would PDs' roles change from being implementers to overseers? 3) Or would PDs provide group leaders? These are three of the more salient questions that arise in light of SFI sustainability.

In most cases, as any program is implemented into a new agency, it bears a close resemblance to the original research design, but it could look very different after five years. It should be considered how much fidelity can be maintained over time in a non-SFI setting with no SFI involvement. Additional consideration may be given to whether it is important at all that the resemblance to the original program be maintained, as long as families' successful outcomes flow out of father friendliness and father involvement efforts. Ideally, agencies will alter the program to suit their agency's and clients' cultures while keeping the focus on "what works."

Since the collection of these data, changes have been made to the dissemination plan resulting from earlier conclusions drawn from this researcher's interviews with PDs and PAs. It was decided that OCAP would continue to support dissemination efforts, and that Strategies would disseminate SFI to additional counties in California. PDs are not expected to continue to identify new agencies into which they would disseminate the SFI curriculum. For this reason, OCAP will need to consult closely with current PDs to help inform their dissemination plans, and it is through OCAP that sustainability of SFI will

succeed. From a fiscal point of view, SFI's ultimate success will be measured by the gross number of California tax payers' dollars saved as it moves from a study into sustainability.

<div align="center">New Populations</div>

The SFI intervention to date necessarily excluded other cultural groups who may adopt SFI as it expands to additional California counties. To that end, SFI would need to translate all written materials and media into new languages and dialects. This is an important area for consideration, given that the rate of English spoken in California by people over five years old has fallen steadily since 1990 (U.S. Department of Commerce, 2001). Moreover, approximately 25% of California's population is foreign-born, and 54.8% of those inhabitants were born in either Latin America or Mexico, followed by Asia (34.0%) and Europe, 7.6%. The remaining 3.9% were from Africa, Canada, and Oceania. (U.S. Census Bureau, 2002, as cited in Lopez, 2002). The census report, however, does not disclose the numerous dialects of Spanish and Native American languages used in California, which will also present new challenges for SFI. One SFI Project Director mentioned that it was problematic when he presented the Spanish translation of a film used at his site's orientation, "Show Your Love" to prospective participants. Since many of this site's participants spoke mostly the Chicano dialect of Spanish, the film was difficult for them to comprehend. One can assume that accommodating the numerous Spanish dialects, as well as tribal languages, will present intriguing challenges in future dissemination efforts.

SFI differs from the FAST program (Guerra & Knox, 2008) mentioned above in the literature review, where the researchers stopped after each stage of dissemination and added research to the program to inform their future dissemination efforts with new cultures. While this method of study design proved to be effective for FAST, it required

more energy than it would take to develop a culture-neutral intervention such as SFI. The

SFI curriculum was designed to be effective with various cultural groups, through its use

of non-directive and psychoeducational modalities. In other words, SFI is not

prescriptive; its groups are led in facilitated, participant-driven conversation with other

group members sharing a common language. Since SFI groups are led by culturally

competent group leaders using culturally appropriate (and translated) written and media

materials, they will not require extensive curriculum revision as they encounter each new

cultural group. Through a comprehensive method combining Evidence Based Practice,

culture-centric design, and continual evaluation and revision, SFI determined ways in

which most populations can be reached, while leaving room for cultural adaptation.

As SFI expands, questions arise as to how much change would need to be made to

the curriculum to accommodate new populations outside of the social service arena

without losing fidelity to the original intervention. Some religious institutions, for

example, may require considerations of physical setting and ideological fit in order to

adopt SFI. If the program was to be conducted by "in-house" clergy in churches, as was

suggested by the PD in Yuba County, SFI could potentially face losing program content

involving such taboo topics as infidelity, divorce, sexuality, abuse, and drug use. By

losing those areas of discussion, one must ask if doing so would compromise the

curriculum to such an extent that it departs too much from the original intervention.

Alternately, if these topics were left into the curriculum, would this inadvertently exclude

the more devout candidates by the inclusion of these subjects? Ultimately, after any

study is concluded, fidelity to research fades in significance, and programs take on their

own idiosyncrasies, but at what point of adjustment is the SFI "branding" removed from the program?

Another example about new populations and dissemination was introduced by one PD involving the tailoring of SFI to Native Americans in California. In addition to having Group Leaders speak any of the six native tribal languages in the state (U.S. Census Bureau, 2000), participants at this site's orientation spoke about amending the SFI curriculum by adding a "talking circle" to the beginning of each group session. Researchers may also consider whether such groups should be held inside the reservations, which could create a higher comfort level for participants. Or would they come to the FRC? How would taking SFI off-site affect SFI's philosophy as being an FRC -based program?

Yet another demographic that PDs reported the need for SFI is newly discharged veterans. What would the logistics be of introducing the curriculum to this group? It is optimal for SFI to reach newly discharged veterans as close to discharge as possible, since data show that the onset of Post Traumatic Stress Syndrome (PTSD) can begin as soon as immediately following a traumatic event up to many years later (NIMH, 2009). By adding this population to the SFI roster, therapists must be trained in the particular diagnostic and treatment methods for Post Traumatic Stress Disorder (PTSD), as well, in order to be effective.

SFI researchers already have addressed the concerns expressed above by PDs about the introduction of Child Protective Services (CPS) cases in Phase IV, making the necessary programmatic adjustments. Now that most of those fears have been allayed, SFI investigators may turn to questions, such as: By introducing the curriculum to

prisons, would this cause an overlap in caseloads between families involved with CPS/CWS and prisons? If so, how would that overlap be managed administratively among agencies? The introduction to SFI of prison populations may necessitate mothers-only groups for those families in which the father is incarcerated, or where there are concerns about ongoing violence or debilitative substance abuse. Moreover, the format for groups and restrictions imposed on group leaders, without imposing significant alterations to the curriculum, would need to be addressed by those who are implementing the program.

Regarding the SFI prison group composition, the concern was raised about different dynamics arising between mandated (CPS/CWS) group members and voluntary participants. Would this diversity cause a fissure in the group dynamics if integrated, or would the mandated and volunteer groups be segregated from one another? This topic was addressed after these interviews were conducted, and SFI staff have undergone a thorough training and further program development in the adoption of high-risk families into SFI. Consequently, much of the trepidation about moving into Phase IV has been overcome.

<div align="center">Conclusion</div>

Ideally, all roads lead to successful dissemination in prevention research, and that success is determined by successful cycles of creation, implementation, evaluation, and revision. Even after all the original components of program design are examined, others will surface from unexpected directions. Such unexpected guests at the table include the state's declining economy, over which program developers have no control. In light of the California budget crisis, Project Directors found it particularly difficult to "sell" a

new program to agencies, particularly since the program is quite intensive and longer (32 hours) than most parenting type interventions, therefore potentially more expensive than most, but also potentially more effective. So, the question that arises out of this conundrum around non-implementation is: Is the SFI intervention too long? Such a long program is not easily accommodated in an agency prevention program's funding. Indeed, SFI would need its own funding stream within the FRC for new staff, physical space, materials, and the additional hours for present staff to oversee the program, requiring considerable organizational energy for such a program to become a reality. In social services, too little money is endemic. However, in today's dire economy, PDs have an even harder job selling such a program. With the help of the researchers, their job is to convince the state that the intervention will ultimately save California money instead of having to pay for law enforcement agents and CPS workers to rescue families after damage has been done. SFI has been designated as an Evidence Based Practice and a successful one, in part, because the intervention is longer in length and works at a therapeutically deeper level than most interventions. Moreover, it is empirically proven to help prevent the multiple risks children encounter in families in which a father is not involved. As was so well articulated by a Partner from San Luis Obispo County:

> This could make such a profound change in the way our families are struggling. SFI has been such a support to the families in this county….If a child could have the benefit of two parents, why wouldn't they do it? It makes no sense. It needs to be spread out everywhere. The parents have to agree to get along enough to raise the child and to get beyond their own relationship problems. We don't need any more screwed up kids in the world. We need strengthening families. It's an ingredient that has to be in every service we offer.

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Appendix A

Dissemination Interview Questions, Project Directors

(Strategies for Early Dissemination Work)
1. What does the SFI project look like in your agency? Describe its structure in terms of the FRC in which is it embedded and FRC staff involvement.
2. What was your understanding of how the local dissemination of SFI would take place? How did it evolve over the past two years or so?
3. What were your specific outreach strategies for local dissemination? Name all the ones you tried and which ones you used most.
4. What have been your most successful activities to interest agency leaders and organizations to adopt the SFI philosophy and/or program? Your least successful? Explain.
5. What kinds of agencies attended the orientation half-day program in your area (if applicable)?
6. Which of these types of agencies have you found to be most receptive to the program--Community Leaders, Community Based Organizations, Public Agencies, etc.?

(When Narrowing your Focus to One or More Agencies for Dissemination)
7. Which organizations did you choose (or get chosen by) to work with more intensely? Give name, briefly describe type of organization, size, and populations served.
8. What factors do you think made them interested or able to consider implementing SFI?

Current Dissemination Activities: (answer each question below for each organization that is part of your dissemination)
9. What is the nature of your contact with each agency that you are working with on dissemination activities?
10. On average, how much contact do you maintain with each agency? And by which method(s): phone, email, face-to-face?
11. What are you hearing from the agency organization you are working with about how SFI is impacting them and their clients?
12. What are some of the obstacles to dissemination that you are encountering?
13. How successful or unsuccessful have the agencies and organizations been in 1) adopting father engagement strategies, 2) implementing the curriculum/program?
14. What alterations or additions to the curriculum have the agencies/organizations made to suit their particular population? If none yet, do you anticipate any?
15. What agencies that you approached were ones you wanted to adopt the program but chose not to do so, and why?
16. Knowing what you do now, if you were beginning all over again to spread the word about SFI and engage local organizations in dissemination, what would you do differently?

Dissemination Interview Questions, Partner Agencies

1. What hooked your interest in the SFI program?
2. How have you used or integrated the SFI program in your organization to date? How do you intend to use the program in the near future?
3. What is changing in your organization as a result of your work with SFI? What else would you like to change?
4. How does the program enhance (advance?) the mission/objectives/work of your organization?
5. What do you find hardest about implementing new father engagement strategies in general? The curriculum specifically?
6. What would you need to implement the program as fully as you'd like?
7. What would be your vision for an integrated father involvement program in your organization in the future? What would you need to make it happen? What kinds of training or Technical Assistance (TA) would you like?
8. What has it been like working with _____ (fill in name, Papas, Pops, Lindsay Healthy Start, Gracesource? Feel free to describe what has worked well and not so well.
9. How could the collaborative process with _____ have been made more efficient and effective?
10. Do you plan to continue the SFI program within your agency?
11. What feedback have you received from clients, if any? (my question)
12. If you could say one thing to other agencies about why they should do SFI, what would you tell them?