

The Effectiveness of National Fatherhood Initiative's 24/7 Dad® Intervention in Improving Men's Parental Self-Efficacy¹

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Abstract

This study assessed the links between participation in National Fatherhood Initiative's 24/7 Dad® program and parental self-efficacy. Baseline and post-intervention data were collected from participating men (N=32). Results of multiple regression analysis indicated that greater participation dosage predicted larger gains in self-efficacy. Associations between men's participation and self-efficacy were similar across both resident and nonresident fathers.

Introduction

Father Involvement and Child Outcomes

The role of fathers in their children's lives is well documented (see Cabrera & Tamis-LeMonda, 2013; see also Lamb, 2010), pointing to the ways in which fathers affect their children's wellbeing. The beneficial effects of fathers on children's development include better social competence, cognitive ability, personality dispositions, school readiness, and more (see Fagan, Day, Lamb, & Cabrera, 2014).

In families with resident fathers, father involvement predicts a child's positive psychological outcomes. For example, when fathers regularly engage in physical play with their preschool-aged children, such as taking them for a ride on their shoulders, children are less likely to exhibit anger or aggression, maybe because father-child play facilitates the development of behaviors like reciprocity and mutual compliance and thus may protect children from developing these externalizing symptoms (Jia, Kotila, & Schoppe-Sullivan, 2012). Involvement protects older children and pre-teenage boys from externalizing behaviors in the same way (Gryczkowski, Jordan, & Mercer, 2010). Similarly, adolescents whose fathers engage in positive activities with them, even watching television together, are less likely to have depression or anxiety symptoms, maybe because by spending time together fathers show their children that they value the time with them and this time may protect them from developing these internalizing symptoms (Temmen & Crockett, 2021). In addition to psychological outcomes, father involvement predicts positive behavioral outcomes. Toddlers who have regular, active physical play with their fathers, such as playing with a ball, are likely to have better self-regulatory abilities, like lower levels of frustration with difficult tasks, than toddlers who do not have that regular play, maybe because this interaction gives opportunities to practice and experience different roles (Bocknek, Dayton, Raveau, Richardson, Brophy-Herb, & Fitzgerald, 2017).

¹ This research was supported by the U.S. Department of Agriculture, National Institute of Food and Agriculture (HAW03023-H, managed by the University of Hawaii at Manoa)

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Fortunately, considering the positive influence of father involvement on children's development, fathers today want to be more engaged with their children than in previous generations (Marsiglio & Roy, 2012), and resident fathers are taking a more active role than in the past (Livingston & Parker, 2011). At the same time, however, children are increasingly growing up without a father at home. According to a report recently released by the U.S. Census Bureau, more than 20% of children nationwide live with their mother alone (U.S. Census Bureau, 2022a). Not sharing a residence makes it more difficult for nonresident fathers to be involved in raising their children and participate in their everyday life, such as reading bedtime stories (Castillo, Welch, & Sarver, 2011). For some men, the quantity of visits and contact decreases as children grow older, even to the point of losing touch (Cheadle, Amato, & King, 2010; Lerman, 2010).

Nevertheless, research shows that whether or not fathers live with their children, their involvement contributes to their children's wellbeing in an array of outcomes. For example, regardless of residence status, stable and close relationships with one's father predict children's higher levels of self-regulation (Vogel, Bradley, Raikes, Boller, & Shears, 2006) and better social skills (Adamsons & Johnson, 2013). In terms of cognitive outcomes, toddlers have a better vocabulary and are better at counting when resident and nonresident fathers alike stimulate them cognitively with activities like reading books and singing songs (Fagan & Lee, 2012). Older children have better reading and math skills not only when their fathers are involved specifically with their schooling like going to a parent-teacher conference or serving on a school committee (Miller, Thomas, Waller, Nepomnyaschy, & Emory, 2020), but also when these fathers are warm towards them, hugging or kissing and comforting them when they are upset or crying, maybe because providing emotionally supportive opportunities to children may help support the growth of exploration and learning (Coley, Lewin-Bizan, & Carrano, 2011). In both families with and without resident fathers, involvement protects adolescents from engagement in risk behaviors. Adolescents who feel close to their father are less likely to use alcohol and engage in subsequent problems such as sexual situations and physical fights while under the influence of alcohol (Goncy & van Dulmen, 2010).

Taken together, these findings suggest that when fathers, resident and nonresident alike, maintain positive father-child relationships and engage in children's activities, they promote children's positive outcomes and protect from negative ones. Promotion and protection appear to be less connected to the quantity of time together, which could be more restricted for nonresident fathers, and more connected to the quality of the father-child interactions in that time. As such, our intervention has focused on facilitating positive father-child relationships in diverse family contexts.

Men's Parental Self-Efficacy and Father Involvement

Given how beneficial it is for children to grow up with involved fathers, a natural step in fatherhood interventions would be to focus on what makes some men more positively involved than others, and work with fathers on precursors to actual involvement. There is strong evidence that one such precursor is parental self-efficacy, a cognitive construct characterized by parents' beliefs that they can effectively manage parenting tasks. Parents with higher parental self-efficacy have more effective parenting skills than parents with lower parental self-efficacy (see Jones & Prinz, 2005), and these effective parenting skills, in turn, positively affect children's outcomes.

Parental self-efficacy of men with children from infancy until 18 years of age is associated with different dimensions of parenting. For example, men who see themselves as generally able to manage being a parent or see themselves specifically as having good childcare skills are more likely to assume responsibility for their children, like providing financial support or arranging for routine

physical care, and more likely to be warm and affective (Sanderson & Thompson, 2002; Trahan, 2018). Fathers and mothers who highly appraise their competence as parents are more likely to be engaged with their preschool-aged children and enjoy their time together and the conversations they have with their children (Murdock, 2013). Similar associations are present in families of adolescents in the United States and abroad. When fathers and mothers of adolescents perceive themselves as generally efficacious as parents, they are more likely to be warm and hug and kiss their children (de Haan, Prinzie, & Dekovic, 2009) and actively engage in everyday interactions like asking the child about their day in school or driving them to a special activity (Glatz & Buchanan, 2015). When parents perceive themselves as being able to maintain adequate limits for their adolescents or adjust to their demands for independence or privacy, they are more likely to engage in positive parenting practices like rewarding or complimenting their children for behaving or doing something well or discussing with them reasons for their behavior (Glatz & Buchanan, 2015). Conversely, fathers who do not perceive themselves as efficacious parents in general, or at performing routine childcare tasks like feeding or giving a bath, are more likely to be hostile towards their preschool-aged children, expressing irritability, frustration, and anger towards them (Rominov, Giallo, & Whelan, 2016).

Together, these findings suggest that when men see themselves as less efficacious parents, they are less likely to be generally involved and less likely to engage in some specific parenting behaviors. Fathers who lack confidence in their parenting skills may find it difficult to care for their child, successfully parent, and promote their children's positive development. Unfortunately—and unrelated to the inconsistent findings about whether fathers' and mothers' amount of self-efficacy may naturally increase or decrease over time—fathers in the United States and abroad report overall lower self-efficacy than mothers at any given time (Hudson, Elek, & Fleck, 2001; Junntila, Aromaa, Rautava, Piha, & Raiha, 2015).

The Present Study

Fatherhood interventions like National Fatherhood Initiative's (NFI's) 24/7 Dad® program are an important vehicle for the promotion of father involvement in the lives of children. Across the nation, evaluations of the effectiveness of the 24/7 Dad® program in improving parenting skills and behaviors have clearly demonstrated that the intervention works. For example, fathers who completed the intervention in Alabama showed higher expectations from themselves to devote significant amounts of their time and energy to raising their children than their initial, pre-intervention, expectations (Adler-Baeder, McGill, Landers, Odomes, & Chan, 2019). Similarly, fathers who completed the intervention in Kentucky showed a gain in parenting knowledge from pre- to post-intervention (Perry, 2019), and fathers in Texas developed better fathering skills through participation in the intervention and built protective factors shown to reduce the risk of child abuse and neglect (Osborne, Michelsen, & Bobbitt, 2017). An evaluation of the intervention in Hawaii, which included not only pre- to post-intervention data but also a control group of men who were not part of the intervention, showed that, compared to pre-intervention data and compared to fathers who did not receive treatment, men were more likely to directly engage with their children in activities such as reading together or helping with homework, and feel happier about being a parent and have a better relationship with their children after participating in the intervention (Lewin-Bizan, 2015).

Building upon the existing evaluations of the 24/7 Dad® program that show significant improvement in the parenting skills and behaviors of participating men, and taking into consideration the studies

summarized in this introduction that suggest that it may be particularly beneficial to increase fathers' confidence in their ability to understand and meet their child's needs rather than exclusively focusing on improving direct involvement, the present evaluation of the 24/7 Dad® program focused on the following questions: Does the intervention promote parental self-efficacy? And if so, for whom? Two hypotheses were formulated. First, men who participate at higher rates in the 24/7 Dad® intervention would have larger gains in parental self-efficacy from pre- to post-intervention than those who participate at lower rates. Second, the intervention would have the same effect on the parental self-efficacy of resident and nonresident fathers.

Method

The Intervention and Participants

Forty-eight men participated in this evaluation of the outcomes of the 24/7 Dad® program. According to NFI, the program trains fathers to be involved, responsible, and committed fathers regardless of a father's circumstance (e.g., father's age, income, marital status, residential status, age of his children, etc.). The program builds pro-fathering knowledge, attitudes, and self-efficacy with a focus on five cross-cultural characteristics of effective fathering: self-awareness, caring for self, fathering skills, parenting skills, and relationship skills. The program is delivered by facilitators to groups of fathers and to individual fathers (i.e., one-on-one). It is comprised of 12 two-hour sessions (24 hours) typically delivered one session per week for 12 weeks, although it can be delivered in a shorter time frame (e.g., two sessions per week over six weeks).

The 24/7 Dad® intervention was offered by a social service agency in Maui County, Hawaii, which serves families that live nearby. These 48 participants were divided into smaller intervention groups that met one evening a week for a period of 12 weeks. Over pizza and soft drinks, they discussed topics covered in the program's curriculum that included family history, the meaning of being a man, showing and handling feelings, men's health, communication, the father's role, how to discipline children, child development, ways to be involved with children, coparenting, and work-family balance. Most meetings were held at the social service agency site. Two male co-facilitators, with one having been trained in 24/7 Dad® by NFI, led the meetings.

Of the 48 participants, two-thirds responded to both the baseline and post-intervention survey. This report is based on the responses of these 32 men. About half of the fathers were resident (that is, living with the child and the mother of the child; around 48%), and the rest were nonresident. The average age of responding fathers was 34.7 years, with most of them in their 20s and 30s. About a quarter of the participants reported being multiracial. Among the single-race men, the largest racial group of fathers was white (around 26% of the total sample, reflecting the rate of the white people in the state), followed by Native Hawaiian/Pacific Islander (around 23%), and Asian (around 13%).

Compared to the town-wide population (U.S. Census Bureau, 2022b), men who participated in the 24/7 Dad® intervention were socioeconomically disadvantaged. For example, while 94% of the adult population in the town has at least completed high school, 12.5% of the men in the sample did not have a high school diploma nor obtained a GED. In terms of employment, 63% currently held jobs, either part- or full-time, and most (around 58%) had an annual income of less than \$25,000 counting all income sources, while the town per-capita income is \$33,250. See Table 1 for a detailed sample description.

Table 1. Descriptive statistics for control variables (32 participants who completed baseline and follow-up survey unless specified otherwise)

	% or mean (SD)
Residence status (n=31)	
Resident father	48.4
Nonresident father	51.5
Educational attainment	
Less than high school	12.5
High school/GED	50.0
Some college	18.8
College	12.5
Graduate school	6.2
Employment status (n=30)	
Unemployed	36.7
Employed part-time	33.3
Employed full-time	30.0
Last year's income (n=21)	
< \$15,000	33.33
\$15 - \$25K	23.81
\$25 - \$40K	19.05
\$40 - \$75K	23.81
Age	34.7 (8.5)
Race (n=31)	
White only	25.8
Native Hawaiian/Pacific Islander only	22.6
Asian only	12.9
Other (one race only)	12.9
Multiracial	25.8
Children	
Number of children	2.3 (1.8)
Focal child is female	62.5
Focal child's age	7.5 (5.6)

Measures

Change in parental self-efficacy. Fathers' self-efficacy in parenting was measured using a subscale of the Self-Perception of the Parental Role (SPPR) inventory (MacPhee & Benson, 1986; see also MacPhee, Fritz, & Miller-Heyl, 1996, and Seybold, Fritz, & MacPhee, 1991). This is a self-report instrument with questions related to the parents' assessment of their functioning in the parental role (22 items in four subscales, reliability for subscales ranges from $\alpha = .72$ to $\alpha = .80$). The subscale used to measure feelings of confidence in one's skill as a parent contains six items, and each item includes two contrasting descriptions pertaining to the same issue (e.g., "Some parents have clear ideas about the right and wrong ways to rear children, but other parents have doubts about the way they are

bringing up their children,” and “Some parents seem to have a knack for understanding what their children need or want, but other parents often can't figure out what their children need or want”). First, the respondents select the statement that best represents their position on the topic, and then decide whether the chosen description is partially true for them or very true for them. The scores for all individual items of the subscale were averaged to create a single parental self-efficacy score. Possible scores range from 1 (low self-efficacy) to 4 (high self-efficacy). The difference between the pre- and post-intervention scores was calculated to create the change variable.

Participation dosage in 24/7 Dad®. Intervention participation was measured as dosage. That is, weekly attendance was checked and how many meetings – out of the possible 12 – each man participated in were counted. As in prior studies (Fagan & Iglesias, 1999; Lewin-Bizan, Mattos, & Baguio-Larena, 2020, 2021), four dosage groups were created following Fagan and Pearson's (2018) recommendation for cutoffs: A no-dosage, a low dosage, a moderate dosage, and a high dosage groups. For analysis purposes, the four groups were treated as a continuous variable, ranging from no dosage to high dosage (Table 2).

Control variables. Father's residential status and child's gender were measured as dichotomous variables, resident or nonresident, and female or male; educational attainment, employment status, and income were measured as continuous variables, ranging from less than high school to graduate school, from unemployed to employed full-time, and from less than \$15,000 to \$40-75k; race was measured as a set of categorical variables, White or not, Native Hawaiian/Pacific Islander or not, Asian or not, another single race or not, and multiracial or not; and father's and child's age and number of children were measured as continuous variables.

Table 2. Descriptive statistics for main predictor (32 participants who completed baseline and follow-up survey)

Dosage categories	% (# of participants)
No dosage	34.4 (11)
Low dosage (less than 42%; 1-4 meetings)	9.4 (3)
Moderate dosage (42%-75%; 5-9 meetings)	12.5 (4)
High dosage (76% or more; 10-12 meetings)	43.8 (14)

Results

Main Effects of Participation Dosage on Parental Self-Efficacy

Multiple regression analysis was used to test the study hypotheses. The first hypothesis, that men who have a higher dosage of participation in NFI's 24/7 Dad® intervention would have larger gains in parental self-efficacy from pre- to post-intervention than those who participate at lower rates, was examined using a regression model that included change in parental self-efficacy as the dependent variable and participation dosage as the independent variable. In addition, the model included the following control variables: father's characteristics including residential status, race, age, education, employment status, and income, and child characteristics including age and gender of the focal child, and number of children (see Table 3, Model 1). Estimation results revealed a significant positive association between participation dosage and parental self-efficacy ($b = .5, p < .10$). **That is, the results indicate that greater participation dosage in the 24/7 Dad® intervention predicted a**

greater increase in parental self-efficacy. Considering the control variables, the model shows that parental self-efficacy was lower for nonresident fathers compared to resident fathers.

Effects of Participation Dosage on Parental Self-Efficacy as a Function of Father Characteristics

To test the second hypothesis, that the intervention would have the same effect on the parental self-efficacy of resident and nonresident fathers, a second regression model was used which included the same variables as Model 1 in addition to a moderator term (dosage x residence status) (see Table 3, Model 2). Estimation results revealed no significant difference between resident and nonresident fathers in the association between participation dosage and parental self-efficacy. **That is, the results indicate that greater participation dosage in the intervention was equally effective in increasing parental self-efficacy for resident and nonresident fathers.**

Table 3. Regression models of change in parental self-efficacy, predicted by dosage (standard errors in parentheses)

	Competence (SE)
Model 1: Main effects (number of observations = 32)	
Dosage	0.5 (0.2) +
Controls, father characteristics	
Nonresident (versus resident)	-2.5 (0.8)***
Race (versus white, the largest group)	
Native Hawaiian/Pacific Islander only	ns
Asian only	ns
Other (one race only)	ns
Multiracial	ns
Age	ns
Education	ns
Employment status	0.4 (0.2)*
Income	-1.0 (0.5)*
Controls, child characteristics	
Number	-0.5 (0.3)+
Female (versus male)	ns
Age	0.3 (0.2)*
Constant	-6.5 (4.5)
R^2	0.7
Model 2: Interactions by father's characteristics (include all the controls; number of observations = 32)	
Dosage	
Nonresident (versus resident)	ns
Dosage X nonresident	ns
Constant	-6.6 (5.2)
R^2	0.7

*** $p < .001$. ** $p < .01$. * $p < .05$. + $p < .10$

Discussion

The main purpose of this study was to assess the effect of NFI's 24/7 Dad® intervention on fathers' parental self-efficacy. Parental self-efficacy is a cognitive construct that is broadly defined as parents' perception of their competence in the parental role, and research shows that it is a key variable in why some fathers are more involved with their children than others (see Jones & Prinz, 2005). Regression analysis results revealed that men who participated in the intervention at higher rates had higher levels of parental self-efficacy at the end of the intervention compared to the levels they had before the intervention; that is, greater participation dosage in the intervention predicted a greater increase in parental self-efficacy. **These results provide support for the effectiveness of 24/7 Dad® in increasing fathers' confidence in their parenting role.** This is an important contribution of 24/7 Dad® to the wellbeing of families, considering that research has shown that parental self-efficacy is lower among fathers than among mothers (Hudson et al., 2001; Junttila et al., 2015), but it is central to their ability to take more active, positive roles in their children's lives.

Another purpose of this study was to assess the differential effects, if any, of the 24/7 Dad® intervention on the parental self-efficacy of resident and nonresident fathers since the intervention has focused on facilitating positive father-child relationships in diverse family contexts. Regression analysis results revealed no significant differences between the effects of the intervention on resident fathers and the effects of the intervention on nonresident fathers. **That is, results provide support for the effectiveness of 24/7 Dad® in increasing fathers' confidence in their parenting role among resident and nonresident fathers.** This is another important contribution of 24/7 Dad® to the wellbeing of families, considering that men who believe that they can effectively manage parenting tasks are more likely to be involved fathers and, in turn, when both resident and nonresident fathers alike maintain positive father-child relationships and engagement in children's activities, they may promote children's positive outcomes and protect from negative ones (Adamsons & Johnson, 2013; Coley et al., 2011; Fagan & Lee, 2012; Goncy & van Dulmen, 2010; Miller et al., 2020; Vogel et al., 2006).

One limitation of this study is the small number of participants. Despite efforts to retain all 48 men who enrolled in the intervention, a third was lost along the way due to conflicting work schedules, lack of transportation to and from the agency, and lack of evening childcare arrangements. This may suggest a need to consider flexibility in the delivery of fatherhood interventions to address men's participation barriers and improve rates of intervention completion more adequately.

Nevertheless, this assessment of NFI's 24/7 Dad® intervention adds to the list of 24/7 Dad® evaluations that provide valuable insights into the benefits of participation (Adler-Baeder et al., 2019; Lewin-Bizan, 2015; Osborne et al., 2017; Perry, 2019). Considering that men who are less efficacious as parents show lower levels of parenting warmth, parent-child closeness, and responsibility, and higher levels of parenting hostility which, in turn, have a negative effect on their children's development (de Haan et al., 2009; Glatz & Buchanan, 2015; Murdock, 2013; Rominov et al., 2016; Sanderson & Thompson, 2002; Trahan, 2018), findings from this evaluation highlight an important way of how to support fathers to increase their positive and active participation in parenting their children.

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