



Prevention Research Centers

Boys' Health Risks May Be Reduced by Strengthening Father-Son Bonds

University of Michigan: Prevention Research Center

Background

Many African-American boys grow up in single parent households, a situation that limits their chance of building a meaningful relationship with their biological fathers. The lack of a positive father-son relationship is believed to contribute to a predisposition in adolescence for violent behavior, early sexual encounters, substance abuse, and poor academic achievement—all of which may compromise individual and family health and well-being in the short and long term.

Context

Flint, Michigan, an economically disadvantaged community in which the prevalence of adolescent risk behaviors is high, was chosen by the University of Michigan's Prevention Research Center (PRC) as an intervention site. The PRC offered academic strength as well as concern and commitment to collaborate with the Genesee County Health Department, community-based organizations (CBOs), and other community representatives in addressing the health risks of youths. The community expressed concern about the problem of adolescent violence and was interested in finding ways to reduce substance abuse and early sexual behavior as well as in increasing healthy behavior among its adolescent residents.

Methods And Results

Using a community-based participatory process, a steering committee composed of PRC researchers and community representatives systematically explored potential ways to positively affect preadolescent African-American males living apart from their biological fathers. Eight focus groups (77 participants) were conducted to gather information to guide intervention development, and relevant findings from the scientific literature were reviewed. Based on these sources of information, the steering committee chose to focus on 8- to 12-year-old boys and their nonresident fathers through a program centered on effective communication, cultural awareness, and skill building. The program combined several behavioral theories: Theory of Reasoned Action, Social Cognitive Theory, Social Networks and Social Support, and Models of Racial Identity and Race Socialization.

The intervention consisted of 15 sessions, each 2 to 3 hours, held twice per week over 2 months. The sessions provided information, discussion time, and opportunities for role reversal exercises and for practicing skills, such as refusing drugs from peers (for sons) and specific parenting behaviors (for fathers). In addition, boys and their fathers worked on homework assignments together and attended community events as a pair (approximately 13 hours). One booster session was offered to graduates 4 months after they had completed the program.

The intervention was designed to provide the researchers both qualitative and quantitative outcome and process data for evaluation. A pretest and a posttest had been administered, and the results were compared with those from a similar group of nonresident fathers and sons who did not have the opportunity to participate in the program.

Participants included 186 father-son pairs, 87% (162) of which completed the program. The fathers had an average age of 36 years; 55% reported having barely enough money to get by, and 40% were unemployed. The boys had an average age of 10 years. Data collection from the nonparticipant group is nearing completion. Quantitative comparative analyses are expected to get under way once data collection and processing are complete.

Fathers and Sons Project

- Preliminary findings suggest improved communication between fathers and sons and increased healthy behaviors among the adolescents
- Formal evaluation in progress
- Large-scale replication study in development

Qualitative analyses are under way on measures such as attitudes and intentions toward violent behavior, substance use, and sexual initiation for sons; communication about risk behaviors, and family values and social norms regarding these behaviors; father-son closeness and frequency of contact; and racial socialization issues. In addition, aggressive behavior in sons and substance use in fathers will be assessed.

Consequences And Potential Impact

Participants, CBOs, and the project's steering committee believe in the program's value, and they have encouraged its limited dissemination during the formal evaluation period. In early 2006, the PRC began testing a dissemination plan for the program in four communities in Michigan. The goal is to determine how effectively aspects of the program can be implemented by CBOs not affiliated with the project. Further, one dedicated program participant is leading a continuing father support group that is seeking nonprofit status and funding for long-term involvement of fathers and sons who have graduated from the program. Such an effort has the potential of supporting evaluation of the program's effects on the participants over several years.

With funding from the Ford Foundation (fall 2007), the PRC is now collaborating with Columbia University's School of Social Welfare to plan a large-scale replication of the project. The researchers are selecting multiple sites throughout the country for replicating the program. They are revising the curriculum, based on findings from the original study, and designing an extensive evaluation to determine the types of subgroups for which the program may be most effective. Preliminary findings suggested that outcomes may differ by age and education of the father, number of siblings in the son's household, and other factors related to whether the fathers and sons ever lived together. In addition, unlike the original study, the replication project will consider a limited set of maternal factors.

References

Caldwell CH, Brooks CL, De Loney EH, Roberts E. Stories from the field: preliminary results from the Flint Fathers and Sons evaluation project. Paper presented at the American Public Health Association Meeting, Washington, D.C., November 2004.

Caldwell CH, Wright JC, Zimmerman MA, Walsemann KM, Williams D, Isichei PA. Enhancing adolescent health behaviors through strengthening non-resident father-son relationships: a model for intervention with African American families. *Health Education Research: Theory and Practice* 2004;19:644–56.

Caldwell CH, Zimmerman MA, Isichei PA. Forging collaborative partnerships to enhance family health: an assessment of strengths and challenges in doing community-based research. *Journal of Public Health Management Practice* 2001;7:1–9.

Wallace JM, Forman TA, Caldwell CH, Willis DS. Religion and American youth: recent patterns, historical trends, and sociodemographic correlates. *Youth and Society* 2003;35(1):98–125.

For more information, please contact
Centers for Disease Control and Prevention
National Center for Chronic Disease Prevention and Health Promotion
Mail Stop K-45, 4770 Buford Highway NE, Atlanta GA 30341-3717
(770) 488-5395
cdcinfo@cdc.gov
<http://www.cdc.gov/prc>

