PREVENTION PROGRAMS FOR DIVORCED NONRESIDENT FATHERS

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Divorced nonresident fathers are a promising target for preventive efforts to assist families after divorce. The research literature suggests that such programs should focus both on the frequency and the quality of the child’s contact with the father, as well as the quality of postdivorce mother–father relations. Dads For Life (DFL) is the program for this target group with the most convincing evidence of preventive effects. This eight-week program centers on professionally made videos. It was tested in a randomized trial with 214 families. In comparison to control families, children in families in which the father participated in DFL had significantly lower internalizing problems. The preventive impact of DFL was strongest for the most troubled youngsters.

Keywords: prevention programs; nonresident fathers; child well-being; randomized trial; children of divorce

Children from a home where divorce occurs are at risk for a variety of later problems. They are two to three times more likely than intact families to experience clinically significant levels of mental health problems or to receive mental health services (e.g., Amato & Keith, 1991; Zill, Morrison, & Coiro, 1993), engage in elevated levels of drug and alcohol use (e.g., Furstenberg & Teitler, 1994), engage in sex before age seventeen (Furstenberg & Teitler, 1994), and drop out of school or encounter academic problems (e.g., Astone & McLanahan, 1991). Thus, providing preventive services to these high-risk families to help ameliorate the problems seems an obvious priority.

PREVENTION WITH NONRESIDENT FATHERS: CONSIDERATIONS FROM THE RESEARCH LITERATURE

To guide these preventive efforts, a large empirical literature has accumulated illuminating the factors that contribute to a child’s problems or help the child to avoid these problems (e.g., Amato & Keith, 1991; Amato, 2000). It is clear from a review of this literature that divorced fathers typically have a substantial impact on their children’s adjustment after divorce. For example, an emotionally close relationship with a supportive and authoritative father has been shown to relate to child well-being (Amato & Gilbreth, 1999). Moreover, the factor with the greatest importance for the child’s adaptation is the degree of conflict between the parents postdivorce (Amato & Keith, 1991; Braver, Hipke, Ellman, & Sandler, 2004); fathers are one of the two parents who jointly create this conflict. Thus, there is a plausibly considerable benefit to children that will accrue by a preventive program designed to work with fathers.

Preventive efforts with fathers are likely to be most effective if they take into account the reality that the vast majority of fathers become nonresidential parents after divorce,
although, according to Meyer and Garasky (1993) this percentage appears to be slowly decreasing to its current value of about 90% (Nord & Zill, 1997). Parenting within the nonresidential context is difficult, with few role prescriptions or guideposts (Wallerstein & Corbin, 1986). For example, the time with the child is substantially restricted by the visitation arrangement, which interferes with continuity and thus, restricts discipline, limit setting, and regulation. Additional difficulties are posed because the relationship between the parents may be strained or hostile, especially around the issues of visitation (Kruk, 1993) and child rearing (Braver & O’Connell, 1998). Finally, unique to the postdivorce period, the nonresident father’s relationship to his children, especially his financial support, is a matter for governmental and legal scrutiny and control.

Another important reality for preventive efforts with divorced fathers is the heavy emotional toll these constraints pose on fathers (Albrecht, 1980; Bloom, Asher, & White, 1978). For example, the suicide risk for recently divorced fathers is greatly elevated, compared to married fathers or divorced mothers (Bloom, 1978; Kposowa, Breault, & Singh, 1995). Umberson and Williams (1993) found that nonresident fathers’ psychological distress can be explained in large degree by the conflicts and role strains engendered by the confusion of the divorced-fathering role. Moreover, only a minority of fathers sought the divorce; the substantial majority opposed the marital termination (Braver, Whiteley, & Ng, 1993; Ahrons, 1994). “Dumpees” are typically more emotionally distressed than the partner that initiated the termination (Pettit & Bloom, 1984). This further impairs their parenting and is an important consideration for programs working with nonresident fathers.

TARGETS FOR PREVENTIVE EFFORTS WITH FATHERS

Preventive programs for divorced fathers that focus on modifying the children’s adjustment must lead efforts to the most critical areas. Should we attempt to help them adjust better and cope with their own problems in the hopes that this will trickle down to the children? Should we exhort them to “be more responsible,” as undertaken by several policy groups and supported by federal initiatives (U.S. Department of Health and Human Services, 2002)? How do we deal with their anger and frustration, which, judged by fathers’ political activism, both here and abroad, is rampant and critical among this population (McElroy, 2003). We argue here that it is crucial to base program design on features of nonresident fathers’ experience that the research literature has established are strongly implicated in children’s well-being and adjustment to divorce. By this criterion, interventions should focus on four dimensions of father parenting that impact the long-term well-being of their children: (1) frequency of father–child contact, (2) father–child relationship quality, (3) father’s financial support, and (4) quality of postdivorce mother–father relations.

FREQUENCY

Older research (e.g., Furstenburg & Nord, 1985; Fulton, 1979) showed that most fathers spent relatively little time with their children and a good many fathers entirely discontinued the father–child relationship. However, substantially higher levels of contact have been observed in more current research (Braver et al., 1993; Maccoby, Depner, & Mnookin, 1988; Seltzer, 1992). It appears some of the difference is due to better methods of measuring contact, and that there is also a cohort difference, with current generations of divorced
fathers visiting their children more (Cooksey & Craig, 1998). In fact, one of the most important reasons for fathers not visiting more is the arrangements specified in the divorce decree, which conform closely to the mother’s preferences, and oppose the more liberal visitation desires of both fathers and their children (Fabricius & Hall, 2000). Research has actually demonstrated an inconsistent relationship between the frequency of the father’s contact and child well-being, with some studies showing positive outcomes for children (e.g., Guidubaldi, Cleminshaw, Perry, Nastasi, & Lightel, 1986; Wallerstein & Kelly, 1980), and others showing no effect, or even negative effects (e.g., King, 1994; Healy, Malley, & Stewart, 1990). Nonetheless, any preventive program for fathers should probably devote at least some intervention efforts to encouraging as much contact as the father is allowed under the divorce decree.

QUALITY

While frequency of contact had weak or inconsistent effects on child well-being, quality of contact has demonstrated more convincing effects on child well-being. In the most compelling report, Amato and Gilbreth (1999) conducted a meta-analysis of sixty-three published studies and found that both quality of contact, in terms of fathers’ authoritative parenting practices (such as limit setting, instrumental assistance, and talking about problems), and fathers’ emotional closeness to their children were consistently related to children’s well-being. Therefore, a feature to target for preventive efforts should clearly be to upgrade the quality of nonresident fathers’ parenting.

FINANCIAL SUPPORT

The most obvious target of government programs for fathers is to make sure they meet their financial obligations toward their children. Inconsistent evidence is available about the prevalence of divorced fathers’ voluntarily and irresponsibly failing to comply with their financial obligations (Teachman & Paasch, 1993; Braver & O’Connell, 1998; Fabricius & Braver, 2003). What is becoming less ambiguous is that voluntarily paid child support is better for children than coerced support, probably because it conveys to the child more concern, love, caring, and regard than mandated or ordered child support (Argys, Peters, Brooks-Gunn, & Smith, 1998). Thus, preventive efforts should target increasing nonresident fathers’ desire to voluntarily provide financial support to their children.

THE INTERPARENTAL RELATIONSHIP

The nonresidential father’s relationship to the mother should be a final target for preventive intervention. Studies indicate that high levels of conflict and hostility commonly persist for three years or more after the divorce is final (Ahrons & Wallisch, 1986; Mashieter, 1991). After that, about half of couples appear to disengage from protracted conflict and instead go into a parallel parenting mode (Maccoby & Mnookin, 1992); another quarter become cooperative or “co-parental” (Ahrons, 1981), which is more beneficial; and the remaining quarter continue their high levels of conflict more or less indefinitely (Ahrons, 1994). Meta-analyses have shown that conflict between parents is among the leading stressors for children of divorce and the best predictor of child maladjustment (Amato & Keith, 1991). Particularly damaging to children is conflict between parents that the child witnesses (Cummings & Davies, 1994).
The four dimensions above appear to be moderately strongly linked to one another. For example, the effects of conflict levels on child adjustment are mediated by the quality of parent–child relationships after the divorce (Tschann, Johnston, Kline, & Wallerstein, 1989). This interconnectedness has fortunate implications for intervention. For example, an intervention attempting to enhance the postdivorce mother–father relationship might have unintended benefits for the father–child relationship or for the payment of child support. Thus, it is certainly plausible that an intervention targeting only one dimension will have ramifying beneficial effects on the others. Also plausible is that a failed intervention effort to directly alter one dimension can nonetheless find success because another one of the correlated dimensions was successfully improved.

PREVENTIVE INTERVENTIONS FOR NONRESIDENT FATHERS

As discussed above, there is a clear need and great promise for preventive intervention designed to promote the well-being of children whose parents divorced by working with their nonresident fathers. Moreover, the literature implies rather obvious targets for such an intervention. While there is indication that a number of programs for divorced nonresidential fathers are being developed and deployed, spurred by the support of The Fatherhood Initiative funding (U.S. Department of Health and Human Services, 2002), only three were found described in the published literature. Thus, only those three can be reviewed here. The first was developed by Devlin, Brown, Beebe, and Parulis (1992) to address the parenting issues faced by divorced fathers that are unique to nonresident parents, such as discipline with interrupted contact schedules. In its evaluation, the only significant effect found in the Devlin et al. (1992) intervention was a tendency to increase fathers’ sense of competence in the parenting role. However, several methodological weaknesses, such as not employing random assignment to conditions, not using observational measures to assess parenting behavior, and a small self-selected sample, make it difficult to draw firm conclusions as to the effectiveness of this program in changing fathers’ parenting behaviors. A second program, a “counseling group” for nonresidential fathers, was developed and described by Hall and Kelly (1996). The program content they detail seems adequate to address the targets the literature, as described earlier, implicates. However, no attempt to evaluate the program is reported. Thus, of the three programs in the published literature, the empirical support for the first two above is not (yet) convincing.

DADS FOR LIFE

The third published program working with fathers, however, one developed by the present authors (see Braver & O’Connell, 1998; Braver & Griffin, 2000; Braver et al., in press), has more convincing evidence of its efficacy to positively impact desirable targets, and so will be described in some detail. With the aid of a five-year NIMH grant, Dads For Life (DFL), was developed to focus on three of the four primary target dimensions implicated by the literature: the father’s relationship with the child (which subsumes both quantity and quality) and the relationship with the mother/ex-spouse. The “theory” of the intervention (Sandler, Braver, Wolchik, Pillow, & Gersten, 1991) is presented in Figure 1. As shown, the primary goal (“distal outcome,” upper right) is to increase child well-being and mental health. The program intends to accomplish this by affecting the two “proximal
The Theory of the DFL Intervention

Figure 1. The theory of the Dads For Life intervention.

outcomes" (or mediational processes) specified above, improving the father–child relationship and reducing interparental conflict. These two "mediators" are hypothesized also to affect child support compliance, or the financial support of the child, (as well as some other outcomes, such as decreased court actions, not necessarily clearly of benefit to the child) (Goodman, Bonds, Sandler, & Braver, 2004) even though child support payment is not addressed directly by the program. Finally, we expect these two mediators to be impacted by modifying the following four “immediate intervention goals.”

COMMITMENT TO THE PARENTAL ROLE

The level of commitment to the parental role has been observed to be a strong predictor of the level of father involvement (e.g., Ihinger-Tallman, Pasley, & Buehler, 1993; Minton & Pasley, 1996). Thus, a portion of the DFL intervention presents factual information on the importance of an involved father to children’s well-being and an emotional appeal which vividly demonstrates children’s emotional vulnerability and need for paternal support.

SKILLS FOR NONRESIDENTIAL PARENTING

A warm and authoritative nonresidential parenting style is consistently associated with better child outcomes (Amato & Gilbreth, 1999). However, many divorced fathers are perplexed by the difficulty of parenting when they are not in daily contact with the child and are without full parental authority. Well-developed parenting skills training interventions aim at enhancing communication skills, the use of positive reinforcement, and
noncoercive limit setting (e.g., appropriate commands, logical consequences, and time-out from reinforcement) have been shown to enhance both parental warmth and effectiveness in limit setting (e.g., Webster-Stratton, 1984; Patterson, Chamberlin, & Reid, 1982). While the teaching of such parenting skills to recently divorced custodial mothers (Wolchik et al., 1993, 2002, 2005; Forgatch, in press) has led to very substantial improvements in child outcomes even six years later (Wolchik et al., 2002), most of the research on parenting programs has excluded fathers (Coplin & Houts, 1991). DFL included a component that teaches parenting skills and tailors them to the demands and constraints of the nonresidential parent situation. The above two factors were intended to influence the mediator of improving the father–child relationship.

**FATHERS’ MOTIVATION AND SKILLS FOR CONFLICT MANAGEMENT WITH HIS EX-SPouse**

Because conflict with the ex-spouse was shown in the literature to be a critical predictor of child well-being after divorce, an important intervention goal is motivation and skill to reduce or manage conflict with the child’s mother. We chose a stress inoculation training approach (Meichenbaum, 1975) that teaches fathers to better understand and manage situations that prompt intense anger (Novaco, 1977). This focuses on increasing awareness of one’s personal anger process, identifying, challenging, and modifying irrational thoughts (using thought-stopping and self-talk) that lead to loss of control, and learning alternative coping strategies such as relaxation, assertiveness, and problem solving.

**FATHERS’ PERCEIVED CONTROL OVER THE DIVORCE PROCESS**

Finally, many researchers have noted father’s sense of helplessness and powerlessness after divorce (Arditti & Allen, 1993; Braver & O’Connell, 1998; Umberson & Williams, 1993). To counter this, we focused on areas where fathers exert substantial control, for example, while the child is in their care on visits. We also taught the concept of secondary control (Rothbaum, Weisz, & Snyder, 1982), which refers to attempts by the individual to recognize and mentally adjust to environmental events or situations over which they have no or limited control. Our theory posited that increasing perceptions of control would increase quality of involvement with the child as well as decrease interparental conflict (Bay & Braver, 1990).

**THE STRUCTURE OF THE INTERVENTION**

DFL consisted of eight 1–3/4 hour weekly group sessions and two individual sessions of 3/4 hour each. A pair of one male and one female Masters-level counselors led each group. These leaders received ten three-hour training sessions prior to beginning, and had weekly supervision meetings led by an experienced Ph.D.-level clinician.

Each group session centered around a professionally developed videotape, about ten minutes long, which used professional child and adult actors and was didactically sound, yet emotionally and dramatically powerful. It was used both to motivate and convince, and to teach skills by presenting two-person vignettes that modeled an incorrect and a correct example of the skill.

The nonvideo material presented and method of group leadership was also designed for easy export by being heavily scripted and manualized. Each session was accompanied by
homework assignments and considerable practice at skill acquisition. They also involved ample group discussions and considerable role playing. The first session provides a program overview, reviews normal processes that are associated with divorce (normalizing), and attempts to motivate fathers to maintain regular attendance in the program. It also focuses on increasing commitment to the parenting role (though it acknowledged the special problems divorced fathers encounter) by presenting research findings and expert opinions about the effects of father absence on children and by having videotaped children share feelings about visitation (e.g., fears of losing dad, sensitivity to missed visitations) which emphasize their emotional attachment to the father. Sessions two and three are devoted to the intervention goal of enhancing parenting skills: for example, working on listening and communication skills and discipline strategies. The next two sessions deal with the intervention goals of building the motivation and skills for conflict management and enhancing perceived control. They consist of a series of exercises that teach each father to show attending behaviors (e.g., looking), reduce contemptuous behaviors (e.g., eye roll), and in general, acknowledge the issue being discussed. Session six returns to parenting skills, primarily working with effective discipline techniques such as positive reinforcement. Session seven returns to building commitment to the parenting role. The final session addresses maintenance of acquired skills and problem solving. Also covered is where fathers can acquire additional information about parenting, especially handling developmental changes. Extensive reference material covering the divorce process, and material about local educational and recreational facilities for children is provided.

In the two individual sessions, a leader helped to individualize the lessons and tailor them to the father's own circumstance and to strategize about overcoming obstacles.

EVALUATING DADS FOR LIFE

DFL was evaluated for efficacy in an experimental field trial, with fathers being assigned at random either into DFL or a self-study control condition. We conducted assessments of children's behavior problems, using standardized scales at pretest and three follow-up waves: an immediate posttest, four-month follow-up (chosen because we anticipated it would take about that long for any changes in the father's behavior to impact or be detected by the mother and child), and a one-year follow-up.

Another critical issue for the evaluation was acceptability of the intervention to its intended target population, as critics had been skeptical that many nonresident fathers would be willing to participate in any study, let alone a demanding intervention (Phares, 1992, 1995). Accordingly, we attempted to enroll participants in the most rigorous possible fashion, contacting a random sample of recently divorced fathers identified by public court divorce records. In order to be eligible, the couple's legal divorce had to have occurred four to ten months ago, they had to have at least one child aged four to twelve, the mother had to have primary physical custody (so that the father was nonresident), and both parents needed to reside in the geographic area.

The fathers we contacted by phone were informed of the potential benefits of participation, but were cautioned to decline participation unless they could commit to complete whichever of the two conditions randomness (an actual lottery) dictated. Forty-seven percent of those contacted and eligible agreed to participate in either DFL or the home study control condition (which we described for them as the "home version" of DFL) and to accept random assignment to either. We mailed the control group a copy of what we
deemed as the best self-help books available at the time, Divorced Fathers: Reconstructing a Quality Life (Oakland, 1984) and Divorced Dad Dilemma (Mayer, 1994). These books offer practical advice to divorced fathers on four major areas, including (1) personal life adjustment, (2) improvement of existing relationships with children, (3) establishment of a separate home, and (4) constructive methods for handling legal matters connected with divorce.

Primary participants were 214 recently divorced fathers, 127 in DFL, 87 in control. In addition, assessment data was obtained from the ex-wives of these men, and, when the child was of sufficient age, from one child (the “target” child) and from that child's teacher.

DATA ANALYSIS APPROACH

The data analysis technique we chose was a “mixed model” analysis, also known as a random coefficient model or multilevel model (Diggle, Liang, & Zeger, 1994; Verbeke & Molenberghs, 2000). In this approach, the outcome variable score for a given participant at each of the three posttest waves is modeled as a linear function of time, using unequal spacing to reflect the timing of the three posttest waves of measurement. We attempted to predict both the intercept and the slope of this “within-person” regression line over time from treatment condition and from the pretest score on the respective outcome variable. Interactions of all the predictors, especially the interaction between treatment condition and pretest score, were also modeled.

This statistical approach could best accommodate the facts that: (1) There were four waves of data collection, of which three were posttest, and unequally spaced (0, 4, and 12 months posttreatment), and we wished to analyze all simultaneously, so as to avoid the Type 1 error inflation endemic when conducting multiple tests, maximize statistical power, and avoid focusing on differences between the waves that might actually be trivial or non-significant; (2) we had nontrivial missing data; and (3) we had pretest data available on each outcome variable, obtained just before the conditions were randomly assigned. There is considerable evidence that in preventive interventions, pretest level not only correlates with later waves, it very often interacts with treatment condition in its impact on outcomes in later waves (Brown & Liao, 1999). The mixed model technique (using the MIXED procedure of SAS software, version 8.01) was used to evaluate the model and solve for and test for the significance of the coefficients, including for the baseline X treatment interactions.

RESULTS OF THE DFL RANDOMIZED TRIAL ON CHILD BEHAVIORAL PROBLEMS

We report in this article only our results on child behavioral adjustment; findings relative to the immediate intervention goals and the mediational process variables, such as the parents' conflict, are to be described elsewhere (e.g., Braver, Griffin, Cookston, Sandler, & Williams, in press).

An illustrative outcome is displayed in the first four columns of Table 1, for mother's report of total problem behaviors, as measured by Achenbach's Child Behavior Checklist (CBCL; Achenbach, 1991) the most widely used standardized scale measuring child behavior problems. As Table 1 shows, neither coefficients $b_1$, $b_2$, $b_3$, or $b_4$ approached the $p < .05$ level of statistical significance. Because these were the coefficients indexing the Months
Table 1.
Coefficients, df’s and p-levels for model parameters for mother’s report of total child behavior problems from mixed model analysis.

<table>
<thead>
<tr>
<th></th>
<th>Mother’s Reports</th>
<th>Father’s Reports</th>
<th>Mother’s Reports</th>
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<tr>
<td></td>
<td>Total Behavior</td>
<td>Internalizing</td>
<td>Internalizing</td>
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<tr>
<td>df/</td>
<td>Value</td>
<td>p</td>
<td>df/</td>
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<tr>
<td>b0: intercept</td>
<td>193</td>
<td>1.7378</td>
<td>0.43</td>
</tr>
<tr>
<td>b1: Pretest (Pre)</td>
<td>193</td>
<td>0.8455</td>
<td>0.001*</td>
</tr>
<tr>
<td>b2: Month Post Treatment (MPT)</td>
<td>348</td>
<td>0.2763</td>
<td>0.18</td>
</tr>
<tr>
<td>b3: Treatment Condition (GRP)</td>
<td>193</td>
<td>1.3016</td>
<td>0.66</td>
</tr>
<tr>
<td>b4: Pre X MPT</td>
<td>348</td>
<td>-0.00838</td>
<td>0.20</td>
</tr>
<tr>
<td>b5: Pre X GRP</td>
<td>193</td>
<td>-0.1498</td>
<td>0.08*</td>
</tr>
<tr>
<td>b6: MPT X GRP</td>
<td>348</td>
<td>-0.02992</td>
<td>0.94</td>
</tr>
<tr>
<td>b7: Pre X MPT X GRP</td>
<td>348</td>
<td>0.003909</td>
<td>0.66</td>
</tr>
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</table>

*Significant or near-significant coefficients.

Post Treatment effect (i.e., the trend in the scores over posttest waves), both as a main effect and in interaction with treatment condition, pretest (baseline) value (and both), these coefficients imply that the scores over Waves are essentially equal, with zero slope to the trend line. Moreover, this trend line slope does not interact with the other factors in the model. This implies that the various posttest waves do not significantly differ from the first, immediate posttest measurement. Of the remaining coefficients (with the exception of b0, the intercept), only b3, the Pretest X Treatment Condition interaction effect, approaches significance (p = .08). To illustrate how to interpret this near-significant effect, we plot the regression lines that result from the Table 1 coefficients (ignoring those involving the nonsignificant MPT coefficients), inserting 0 for the dummy coded GRP effect for the control condition, and 1 for the DFL condition, using the method of Cohen and Cohen (see Cohen, Cohen, Aiken, & West, 2003). The resulting lines are displayed in Figure 2a.

As Figure 2a conveys, children’s posttest levels of Total Problems (as reported by mothers) are higher for the Control condition than for the DFL condition for most families, except for those with extremely low levels of baseline problems (i.e., less than –1 SD). Thus, the anticipated Baseline X Treatment interaction emerged (as near-significant), implying that DFL is particularly (or only) effective in reducing children’s level of problems for those who have some problems to begin with.

Analogous analyses were attempted on all remaining CBCL child behavior problem outcome variables: internalizing, externalizing, and total problems, each as reported by the mother, the father, the child him/herself (if seven or older), and the child’s teacher (if school-aged child). The only outcome variables in which a coefficient involving Treatment Condition (GRP) was significant were internalizing problems (such as depression), both as reported by fathers and mothers. The coefficients for these two outcomes are reported in the remaining columns of Table 1.

These columns of Table 1 disclose significant coefficients for both b4 and b5. They differ, however, in that the b4 coefficients convey that fathers report internalizing problems getting significantly worse over posttest waves as the pretest problems are greater; the reverse
is significantly true for mother's report of internalizing problems. In addition, the $b_0$ coefficient (intercept) was significant for father's report, and the $b_4$ coefficient (Months Post Treatment main effect) was significant for mother's reports. None of those significant effects interacted with Treatment Condition, however, implying that the all-important
Baseline X Treatment effects \(b_3\) on these variables require no qualifications. The regression plots are presented in Figures 2b and 2c; they disclose patterns analogous in form to that found for mother's report of total problems in Figure 2a. Control condition children have greater problems with depression and pathological withdrawal (as measured by the Achenbach internalizing scale) than do children whose fathers participate in DFL; the reduction in problems due to participation in DFL was especially noticeable for children who were initially most impaired.

CONCLUSION

In sum, the evaluation of DFL found encouraging results. We had hoped to secure better outcomes for children of divorce by delivering an intervention to their nonresidential fathers. We appear to have been successful, especially (or perhaps only) for families where the child is relatively impaired when the program begins. Moreover, the beneficial effects of DFL for these children appear to remain twelve months later. Importantly, we have obtained such reports of reduced child problems not only from the participants themselves, but also from the ex-wives of these men, who were not DFL participants, and who didn't even know (at least from us) of their ex-husband's participation.

We did not, however, find beneficial (nor any significant) effects as reported by children or teachers. One possible reason is that there were substantially fewer families who had children who had reached the interview-eligible age (only 45% of children completed all four waves and 5% more completed three); similarly, many children were too young to have teachers. Thus the size of the sample from these reporting sources, and the attendant statistical power to detect effects, was reduced. A second possibility is that the improvements due to participation in DFL were somewhat subtle and observable only to the parents who knew the children best.

Preventive efforts to better the well-being of children of divorce through working with their nonresidential fathers thus appears fruitful. What needs to be done now? What additional questions remain and what research or other work needs completion to have beneficial effects for divorcing families? We will focus on several issues below.

First, the program can probably be improved. Although DFL had some success, especially with families with the most troubled youngsters, it is probably not as strong as it potentially could be, and certainly, other models are possible. As such, "tinkering" with the program or designing new ones should continue. It is important, however, to subject any such modification or new programs to strong evaluations. The lack of sound empirical evidence that programs are working as intended has plagued much research in this area (Blaisure & Geasler, 1996; Arbuthnot & Gordon, 1996).

Second, research needs to proceed on how, why, and for whom such programs work. Issues such as: which mediators or change techniques are the ones accounting for children's improvements and why some benefit more than others can be explored with subsequent analyses we plan based upon this sample. One example is potential age and gender effects. Previous research has shown that internalizing problems differ by age and gender of children of divorce (Amato & Keith, 1991; Wolchik et al., 2002). Yet, will the effect of DFL on children's adjustment also vary by children's age and gender? As a second example, it would be useful to identify the exact percentage of families that can profit from this program and to know how to recognize those children and families who can best benefit from undergoing it. We also will analyze other child outcomes besides CBCL, such as
the unhappiness outcomes that Laumann-Billings and Emery (2000) analyze. These analyses might change the theoretical model underlying the program, as displayed in Figure 1.

In redesigning based on such analyses, these considerations of how to improve it must be balanced against the attention to the palatability of such programs. Programs that simply exhort nonresident fathers to “be more responsible” or pay more in child support, even if they were to “work,” would probably not attract much participation. Successful interventions not only attempt to change fathers, they empower and respect them in order to appeal to them. The success of DFL in attracting a surprisingly high level of participation from fathers was, we believe, based on this philosophy, as well as on our strong outreach and marketing efforts. In addition, we believe, based on focus groups and other feedback from our participants, that the fact that we precluded participation of residential fathers and nonresidential mothers was important in attracting high participation. Fathers came because they felt they would be understood and safe in DFL.

Third and most importantly, attention needs to be paid to how to get efficacious programs out of the university “laboratory” and into the real world “delivery system,” preferably the court-based delivery system. Still, how can courts obtain such programs, while modifying them enough to suit their needs without changing what made them work, and enrolling sufficient numbers of families in them to have a genuine preventive effect? What resources will that need? What are the scientific, marketing, and training issues that need to be solved? What are the barriers or challenges courts will face in doing so; for example, is an eight-session program too long, or one that excludes mothers or custodial fathers implausible based on the realities in which courts function? Can programs that appear to benefit only some people be offered? These are formidable and thorny puzzles that need to be solved for prevention activities to fulfill their promise of improving the lives of families of divorce.

NOTES

1. The National Center on Fathers and Families “fathering programs” database (http://www.ncoff.gsce.upenn.edu/programsdb/programsrch.htm) lists nine programs nationally under the keywords “noncustodial fathers.”

2. Several books we regard as superior have subsequently been published, for example, Bernstein, Worth, & Worth, 1997; Condrill & Small, 1998; Klatte, 1999; Knox & Leggett, 2000; Prengle & Yale, 1999; Wasson & Heffner, 2002.

3. This unequal split was intended for logistical reasons (to assure that our groups filled), and accomplished by a disproportionate allocation of lots in the lottery.

4. More statistical and technical detail than is typical for FCR articles is given here because we chose FCR for the first release of the child outcomes findings because of FCR’s importance to programming for divorced families. Under APA publication policy (Principle 6.24, APA manual), later, more detailed and technical publication of these same results would otherwise be precluded, preventing a detailed, rigorous, and technical presentation anywhere.

5. In other words, the analysis model is:

\[ Y_{ij} = b_0 + b_1 P_{Prei} + b_2 MPT_{ij} + b_3 PRC_{ij} \cdot MPT_{ij} + b_4 P_{Prei} \cdot GRP_{ij} + b_5 MPT_{ij} \cdot GRP_{ij} + b_6 P_{Prei} \cdot MPT_{ij} \cdot GRP_{ij} + \epsilon_{ij} \]

where \( Y_{ij} \) represents the \( i \)th participant’s outcome score at the \( j \)th posttest wave, \( P_{Prei} \) represents the \( i \)th participant’s pretest score on that variable, \( MPT_{ij} \) represents the number of months post-treatment the \( j \)th wave is measured at (\( MPT_{ij} = 0, MPT_{ij} = 4, MPT_{ij} = 12 \)), \( GRP_{ij} \) represents which treatment condition participant \( i \) is assigned to (\( GRP_{ij} = 0 \) for control group, \( GRP_{ij} = 1 \) for DFL), \( b_0 \) to \( b_6 \) are coefficients to be estimated, and \( \epsilon_{ij} \) is random error. \( b_6 \), for example, is the “within-person” regression slope over posttest waves; it is the “random” factor in the
mixed model. $b_4$ through $b_7$ are coefficients for the various interactions. Of particular interest are coefficients $b_7$, $b_4$, $b_5$, and $b_6$, since they index the effects of treatment condition, either as a main effect ($b_7$) or in interaction. Of these interactions, $b_4$ would display the baseline X Treatment interaction. Unstandardized data were used throughout.

Although the majority of mothers and fathers completed all four waves of measurement (approximately 80% of mothers and 70% of fathers), a substantial number of families (approximately 10% of mothers and 15% of fathers) were missing data at either Waves 2, 3, or 4, although few were missing at even two of the three posttest waves.

REFERENCES


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