Enhancing adolescent health behaviors through strengthening non-resident father–son relationships: a model for intervention with African-American families
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Abstract
This paper provides a description of and rationale for components of a theoretically based conceptual model that guided the development and implementation of the Fathers and Sons Intervention Program. Using a community-based participatory research process, this intervention was designed to prevent risky health behaviors through strengthening father–son relationships among non-resident African-American fathers and their pre-adolescent sons. The implications of the conceptual model for future interventions with African-American fathers and sons are discussed.

Introduction
Several objectives of the national report Healthy People 2010 indicate that substance use, violent behavior and early sexual initiation among youth remain major public health concerns (US Department of Health and Human Services, 2000). One approach to increasing the likelihood of achieving the nation’s health objectives in these areas is the development of more innovative theory-based interventions designed to influence youth risky behaviors. The purpose of this paper is to provide the rationale for and description of the conceptual model that guided the development and implementation of one such intervention, the Fathers and Sons Program.

With a 50% divorce rate, a growing number of births to unwed mothers, and a loss of parental involvement due to substance abuse, AIDS and death, over 60% of children in the US are expected to grow up in single-parent households (National Center for Health Statistics, 1996). These trends raise questions about whether or not who lives with adolescents makes any difference for their health and well-being. Because mothers are typically heads of single-parent households, most studies of family structure effects on adolescent problem behavior involve mothers and their children, with the assumption that fathers are non-residential and, therefore, inconsequential. When father influences were considered, father absence and child problem behavior was typically the focus (Gadsden and Smith, 1994; Wade, 1994).

Historically, father absence research has shown that children from two-parent families do better than those from single-parent households in a number of areas. Stevenson and Black (Stevenson and Black, 1988), however, conducted a meta-analysis of 67 studies, and found few differences between father-absent and father-present households. Recently, researchers have refocused their efforts to better understand father involvement in the lives of their children, regardless of residential status. The results of most of these studies indicate that positive father involvement relates to better child outcomes (Levine and Pitt, 1995; Zimmerman et al., 1995, 2000). Phares (Phares, 1992) noted that the quality, not the quantity, of time youth spend with their father is essential for their well-being.
Thus, helping fathers spend quality time with their children should be a consideration in the prevention of problem behaviors among youth.

Factors influencing African-American father involvement with their children from the father’s perspective are not well understood (Cochran, 1997). The few studies that have included African-American fathers indicate that never-married African-American fathers were less involved in the socialization of their children than formerly married fathers. Never-married African-American fathers, when compared to married fathers, also were economically marginal and had greater difficulty in their efforts to be good fathers (Bowman and Forman, 1997). Nevertheless, African-American fathers have been found to be more involved in the socialization of their children than white fathers (McAdoo, 1993). The explanation frequently offered for this finding is that most African-American families believe in the flexibility of family roles between males and females. Building on the cultural belief in family role flexibility (i.e. woman can be the provider and men can be the caretaker), we thought that an intervention promoting effective parenting skills among African-American non-resident fathers could be beneficial in preventing problem behaviors among their sons.

The Fathers and Sons Intervention Program focuses on enhancing assets, promoting healthy relationships, and creating opportunities for positive interaction and social support for non-resident African-American fathers and sons. It builds upon the cultural belief in the interconnectedness of people among African-Americans (Harrison et al., 1990), which suggests that in working with African-American adolescents, it is especially important to engage family members or other supportive figures in intervention efforts. Cultural resources such as the interconnections of family members are often overlooked in prevention interventions regarding substance use, violent behavior and early sexual initiation with African-American youth.

The Fathers and Sons Program was designed to address substance use, violent behavior and early sexual initiation as a syndrome of problem behavior (Jessor, 1991) rather than as distinct aspects of youth problem behavior. The primary focus was at the interpersonal level rather than just at the individual level of intervention, which allows for an active targeting of father influences on their sons’ decisions regarding these issues. In this paper, we provide a review of research on parental risk and protective factors for African-American adolescent health outcomes. Because few studies focus exclusively on African-American fathers and their pre-adolescent sons, the review includes findings from studies of African-American mothers and their children that have implications for our intervention. Where possible, we highlight findings from studies involving African-American fathers and sons. Table I summarizes studies identifying family assets associated with each of the three problem behaviors. An overview of the Fathers and Sons Program also is provided, including specific examples of how theory was applied in developing the model, as well as how the conceptual model guided program implementation.

### Family correlates of youth health behaviors

#### Substance use behavior

Although marijuana is the most frequently used substance for African-American adolescents (Johnston et al., 2001), the most prevalent substance researched within an intergenerational family context for African-American youth is alcohol. Many studies of adolescent substance use behavior from a family perspective examine substances in general rather than individually. Thus, we focus on parental factors associated with alcohol use and other substances when possible. This is a limitation because some individual risks and assets for using or avoiding marijuana may be different than those for alcohol use. Our approach to intervention, however, assumes that youth problem behaviors cluster and that some paternal behaviors will be protective across multiple problems.

The intergenerational link between family member drinking behavior and adolescent drinking has been suggested by findings from several large studies that include African-American youth. In
a sample of 4874 seventh graders, of which 71% were African-American, Epstein et al. (Epstein et al., 1999) found that the drinking behavior of family members directly influenced the drinking behavior of adolescents, regardless of gender. Rodney et al.'s (Rodney et al., 1996) also found that 25% of the 649 African-American adolescents in their study were children of alcoholics (COA) and 27% of alcohol users were COAs. COA status was found to be a strong predictor of youth drinking, regardless of gender. The authors concluded that the risk that parental alcoholism poses for children may have less to do with alcoholism than with the way the family functions.

Previous studies have identified an array of parental factors associated with adolescent drinking behaviors that are informative in planning youth prevention interventions. In summary:

(1) Parental support, parental monitoring and positive communication with mothers were found to be associated with more prosocial drinking behaviors among African-American youth (Barnes et al., 1994).

(2) African-American parents had strong norms against drinking for youth and involved their children in fewer family substance use activities (e.g. getting beer for parents) (Peterson et al., 1994).

(3) African-American parents were proactive in setting rules and in monitoring their children’s behavior (Catalano et al., 1992).

(4) African-American adolescents’ attitudes toward alcohol use were influenced by parental norms (Biddle et al., 1980).

(5) African-American adolescents considered parental influences more important than peer influences on their drinking behavior (Biddle et al., 1980; Wallace and Muroff, 2002).

Consistent with the family strengths approach, Salem et al. (Salem et al., 1998) examined substance use behavior among 679 African-American youth, 14–17 years old, 50% of whom were male, living in

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Table I. Family protective factors associated with youth substance use, violent behavior and early sexual initiation

<table>
<thead>
<tr>
<th>Parenting characteristics (theory/model)</th>
<th>Substance use</th>
<th>Violent behavior</th>
<th>Early sexual initiation</th>
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<tbody>
<tr>
<td>Parental norms, values and agreement about behavior (Theory of Reasoned Action)</td>
<td>Biddle et al. (1980); Peterson et al. (1994)</td>
<td>Howard et al. (1999)</td>
<td>Dittus et al. (1997)</td>
</tr>
<tr>
<td>Parent involvement (Social Support—all types)</td>
<td>Biddle et al. (1980); Griffin et al. (2000); Howard et al. (1999); Salem et al. (1998); Wallace and Muroff (2002); Zimmerman et al. (2000)</td>
<td>McCabe et al. (1999); Howard et al. (1999); Zimmerman et al. (1995)</td>
<td>–</td>
</tr>
<tr>
<td>Parental support (Social Support—all types)</td>
<td>Barnes et al. (1994); Klein and Forehand (2000); Zimmerman et al. (2000)</td>
<td>Salem et al. (1998); Zimmerman et al. (1998)</td>
<td>–</td>
</tr>
<tr>
<td>Parental monitoring (Social Networks—density)</td>
<td>Barnes et al. (1994; Catalano et al. (1992); Griffin et al. (2000); Howard et al. (1999)</td>
<td>Howard et al. (1999); Li et al. (2000)</td>
<td>–</td>
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<tr>
<td>Parental Role Modeling (Social Cognitive Theory)</td>
<td>Epstein et al. (1999); Rodney et al. (1996)</td>
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<tr>
<td>Racial/ethnic identity development (Race Identity/Socialization)</td>
<td>Belgrave et al. (1997); Brook et al. (1998); Scheier et al. (1997)</td>
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</table>
five family constellations—single mother, mother and stepfather, both biological parents, mother and extended family, and extended family only. Findings from this study indicated that many non-resident fathers were still present in their children’s life. No family structure effects were found. Parental support and family conflict mediated the relationship between father effects and adolescent substance use. Similarly, in a study including 210 African-American youth, Barnes et al. (Barnes et al., 1994) found that living in a single-parent family had no effect on adolescent drinking behavior.

The above findings suggest that family factors other than family structure may be more influential on the substance use behavior of African-American adolescents. Previous research has found that African-American youth from families with low family involvement, low parental monitoring and poor communication were more likely to use alcohol and other drugs than those from families that were involved, monitored and had good parent–child communication (Howard et al., 1999). In addition, findings from the National Longitudinal Study on Adolescent Health, which over-sampled middle class African-Americans in Grades 7–12, indicated that family connectedness was related to less substance use behaviors (Resnick et al., 1997). Further, Griffin et al. (Griffin et al., 2000) found that parental monitoring was associated with less drinking for African-American boys.

Using longitudinal data, Zimmerman et al. (Zimmerman et al., 2000) tested the hypothesis that father involvement would lead to less problem behavior from 10th to 11th grade for African-American adolescents. Father involvement was measured by the amount of time spent with fathers in shared activities in a typical week, father support and father concern for school achievement. They concluded that father involvement in 10th grade was associated with less problem behaviors in 11th grade after 10th grade problem behaviors were taken into account. This study suggests that non-resident African-American fathers who remain appropriately involved with their children can have positive influences. Thus, involving non-resident African-American fathers in a family intervention aimed at preventing substance use and other problem behaviors may be a unique and beneficial approach to preventing problem behaviors among African-American youth.

We also hypothesized that culturally specific family process factors were vital to consider to better represent the life experiences of African-American youth. Race-related socialization is one such process that has implications for how youth feel about themselves. Several studies have found that African-American parents with internalized positive racial attitudes taught their children about racial issues and that this influenced the youth’s racial/ethnic identity development (Thomas and Speight, 1999). This is important because a strong ethnic identity has been protective against the onset of alcohol and drug use among African-American youth in previous research. These ideas have been incorporated into several interventions targeting African-American youth with mixed results. Belgrave et al. (Belgrave et al., 1997) and Scheier et al. (Scheier et al., 1997) both found support for racial/ethnic identity as a protection against substance use among African-American adolescents within both a direct and moderating context. Burlew’s (Burlew, 2000) study of long-term intervention effects, however, did not support racial/ethnic identity enhancement as a protective factor. These studies were designed to influence the individual youth without considering environmental changes that may be necessary to support long-term effects. Involving family members, including fathers, in youth interventions may be one way to sustain racial/ethnic identity enhancement effects.

Violent behavior

Despite the integral role fathers can play in child rearing even when they are absent from the home, relatively few investigations have explored the association between father involvement and youth violent behavior. The few studies that have done so identified four mechanisms that are associated with less violent behavior in African-American youth. These are (1) parental monitoring, (2) parental involvement, (3) parent–child communication and (4) parental closeness. Most studies find that
parental monitoring is inversely associated with violent behavior among youth. Gender differences, however, were evident in one study of mostly African-American youth, suggesting that specific types of parental monitoring (e.g. eating together, checking homework) were less effective for preventing delinquency and aggressiveness among males than among females (Griffin et al., 2000). Further, Li et al. (Li et al., 2000) found that African-American males perceived less parental monitoring than did African-American females. These gender-specific findings for males may be related to the fact that fathers either were not included or not distinguished as a focus of the research. That is, the unique influences of fathers on youth violent behavior were not assessed. Mothers and fathers may use different strategies for monitoring their children; therefore, monitoring by fathers may be more effective for sons.

McCabe et al. (McCabe et al., 1999) examined protective processes within African-American families with 11- to 14-year-old children. A trend in the data indicated that children whose fathers were involved in their care tended to have fewer teacher reports of acting out behavior in school (i.e. being aggressive, disruptive and impulsive in class). Zimmerman et al. (Zimmerman et al., 1998) examined the protective effects of mother and father support for countering the effects of African-American youth’s prior fighting behavior and non-familial adult violent behavior. Father support protected youth from the negative influences of violent adults and fighting. Thomas et al. (Thomas et al., 1996), however, found that involvement from non-residential African-American fathers in the lives of their sons resulted in more delinquent behavior for the sons. This suggests variations in the ability of some non-resident fathers to effectively parent. Thus, the McCabe et al. (McCabe et al., 1999) and Zimmerman et al. (Zimmerman et al., 1998) studies indicate a protective effect of father involvement, while the Thomas et al. (Thomas et al., 1996) study suggest the need for more effective father involvement for some fathers.

Parent–child communication is another characteristic of the parent–child relationship that can significantly influence youth violent behavior. Griffin et al. (Griffin et al., 2000), for example, found that frequency of parent–child communication was associated with less adolescent delinquency for African-American youth. Howard et al. (Howard et al., 1999) examined the relationship between parent–adolescent concordance about violence (i.e. low, medium and high parent–child agreement) and youth violent behavior. Their findings indicated that African-American youth that reported recent violent perpetration were more likely to be from families with low parent–adolescent concordance than those who had not engaged in violent acts. They also were more likely to come from families characterized as low in family involvement and monitoring.

Parental connectedness, which is characterized by closeness, caring, satisfaction with family relationships, and feeling loved and wanted by family members, has also been found to be protective against violent behavior in African-American youth. Resnick et al.’s (Resnick et al., 1997) findings from the National Longitudinal Study of Adolescent Health indicated that youth that rated their family connection as close and caring were less likely to perpetrate violence.

Early sexual initiation

Few studies examine the sexual behavior of African-American adolescents within the context of the family. In one study of mostly African-American adolescents, DiIorio et al. (DiIorio et al., 1999) found that the number of sexual issues discussed with fathers did not result in lower rates of sexual initiation among males. Males also reported higher rates of sexual communication with friends and with mothers than with fathers. Males reported feeling most comfortable talking to their friends, but were more comfortable talking to their fathers than to their mothers about sexual topics. Thus, same-gender communication about sex matters and perhaps the content of sexual discussions may be more important than the number of issues discussed.

Thornberry et al. (Thornberry et al., 1997) examined risk factors for teenage fatherhood
among urban youth, including the residential status of biological fathers. They did not find an association between early paternity and paternal residential status. Dittus et al. (Dittus et al., 1997), on the other hand, considered sexual initiation among African-American youth more generally. They hypothesized that adolescents that live with their fathers would be less likely to have sex early compared to adolescents with non-resident fathers. They initially found that the children of resident fathers delayed sexual initiation; however, this relationship disappeared once perceived parental disapproval of premarital sex was controlled. Dittus et al. (Dittus et al., 1997) suggested that when adolescents are aware of their parents’ attitudes about premarital sex, they are more likely to adhere to their parents’ values. They further suggested that a father’s ability to convey parental disapproval of premarital sex might be enhanced if he lives with his child. Because non-resident fathers spend less time with their children than residential fathers, they may need assistance in effectively conveying these messages to their children.

**Summary of the literature**

Several parenting behaviors within African-American families were identified as protective across two or more of the problem behaviors for African-American youth identified in this paper. While it was not possible to distinguish father influences in all of the studies presented, we were able to build upon findings from studies of African-American mothers or parents more generally to craft a model for intervention that considers father influences as separate from the influences of mothers. The implications of contradictory findings [e.g. (Griffin et al., 2000)] regarding parental monitoring and males, for example, were incorporated to test the effectiveness of monitoring of sons’ behaviors by fathers. As indicated in Table I, the following parental characteristics are important for positive child outcomes: parent–child communication generally and specifically about family values and norms regarding substance use, violence and sexual issues, parent–child closeness, parental involvement, parent support, and parental monitoring.

Empirical findings also suggest that a culturally relevant and gender-specific intervention may be useful in prevention interventions with African-American youth.

### The Fathers and Sons Intervention Program

The goals of the Fathers and Sons Program were to develop a family-centered, culturally relevant and gender-specific intervention designed to enhance the relationship between non-resident African-American fathers and their 8- to 12-year-old sons in order to prevent or reduce substance use and violent behavior among fathers and sons and to prevent early sexual initiation among sons. Pre-adolescence was selected as the developmental period for intervention because at this stage the sons are capable of cognitively engaging in reasoning tasks and pre-adolescence is the time before children begin to differentiate from parents and become most vulnerable to extra-familial influences (e.g. peers, society). In addition, pre-adolescence is the time before most youth begin to experiment with a number of risky health behaviors. We decided to include only males in this intervention because we expect fathers to have different effects on their sons and daughters. We focused on non-resident African-American fathers because it is these fathers that are more likely to have fewer contact hours and be less involved with their children than residential fathers.

The Fathers and Sons Project used a community-based participatory research approach to develop the intervention program (Caldwell et al., 2001). This approach addresses community needs while engaging the community in the research process as equal partners (Israel et al., 1998). It builds on empowerment theory, which stresses the value of including members of the focus audience in developing relevant and acceptable programs appropriate to their needs. Collaborators in the Fathers and Sons Project are representatives from several community-based organizations (e.g. The Flint Odyssey House–Health Awareness Center, the
Neighborhood Roundtable, GCCARD, Encephalon Youth Services, Inc., FACED), the Genesee County Health Department and the University of Michigan School of Public Health. These partners came together to form the program’s steering committee, the governing body that oversees the development, implementation and evaluation of the Fathers and Sons Program.

Focus group strategy and theoretical underpinnings of the model

Focus groups were conducted separately with non-resident African-American fathers and sons to obtain their ideas about what the core of the intervention program should be. Additional focus groups were conducted to refine the content of the intervention program. Eight focus groups—two father, two son, two mother and two intact family groups—were conducted. Input from the 77 African-American participants in the eight focus groups was critical for developing the program’s conceptual model and curriculum. Factors that facilitated or hindered the development of strong relationships between non-residential fathers and sons, as well as barriers to consistent father–son involvement and communication were identified.

It was important for us to obtain multiple perspectives as we designed the curriculum because we wanted to situate the intervention within the context of broader community and family issues (e.g. economic hardships, access to resources, personal relationships). The focus groups with mothers provided information in a number of areas, including the female perspective on barriers to strengthening non-resident father–son relationships (e.g. fathers must follow through/dependability, fathers must be role models). The two focus groups with intact families provided information on the quality of African-American father–son relationships when the father is in residence (e.g. both parents must know the rules, communication must be open) for families from the same communities as the non-resident father–son families. The information gathered allowed us to better understand similarities and differences in experiences in raising African-American boys based on the father’s residential status.

Data from the focus groups were analyzed by having all partners independently identify issues for consideration in developing the final intervention framework. The partners then compiled a list of common codes to represent areas of consensus as the basis for developing the intervention framework (Caldwell et al., 2001). Five content areas emerged from this process: diversity among families, personal relationships and family responsibilities (e.g. parental monitoring, financial obligations), parenting values and behaviors (e.g. role modeling), communication skills, and social support. Interestingly, these content areas are consistent with the parenting practices associated with fewer adolescent problem behaviors identified in the literature review (i.e. parental monitoring, communication of parental values, parental closeness, parent involvement, parental support). What is unique about the Fathers and Sons Intervention is its emphasis on cultural factors as moderators of parenting behaviors and youth outcomes.

The Fathers and Sons Program has 45 contact hours over a 2-month period and one booster session 4 months after the intervention program has ended. Thirty-two hours are spent in 15 intervention sessions and 13 hours are spent completing homework assignments and participating in community events. Three consistent themes run throughout the intervention: (1) effective parent–child communication, (2) enhancing cultural perspectives, and (3) practicing parenting and refusal skills. The effectiveness of the program will be evaluated using a quasi-experimental design comparing the results for intervention group families with those of a comparison group of non-resident African-American father–son families.

The focus group approach was one source of data used to select the theories/models incorporated into the program’s conceptual model. The model also reflects relevant empirical findings and the expertise of the project steering committee in understanding the social environment of non-resident African-American father–son families. Figure 1 presents the conceptual model for the Fathers and Sons Program. Table II shows how different components of the model are linked to intervention activities. The following theories/models were selected to develop
Fig. 1. The Fathers and Sons Intervention Program Model.
the program’s conceptual model: Theory of Reasoned Action, Social Cognitive Theory, Social Networks and Social Support, and Models of Racial Identity and Race Socialization. The rationale for selecting the theories/models and a brief description of each follow.

**Theory of Reasoned Action**

This theory was selected to serve as the cornerstone of the conceptual model because of its focus on behavioral intentions and the inclusion of subjective norms. It asserts that the most important determinant of behavior is a person’s behavioral intention (Ajzen and Fishbein, 1980). Direct determinants of a person’s behavioral intention are his/her attitudes toward performing the behavior and his/her subjective norms associated with the behavior. Attitudes are determined by beliefs about the outcome (e.g. drinking alcohol will make me sick) and an evaluation of the outcome as being positive or negative (e.g. being sick is not good). A person’s subjective norms determined by his/her normative beliefs (i.e. whether important people to the person approve or disapprove of the behavior) and his/her motivation to comply with the opinions of people important to him/her. Because some of the behaviors (e.g. substance use and sexual initiation) are not likely to occur over the 2-month timeframe of the intervention for the pre-adolescent sons, a focus on intentions about future behavior is critical. A number of other studies, especially in the early sexual initiation area, have built upon this theory to develop prevention interventions for youth. All of the components of the Theory of Reasoned Action are incorporated into the conceptual model and are measured in the pre- and post-test evaluation instruments for both intervention and comparison group families.

<table>
<thead>
<tr>
<th>Theoretical/model construct</th>
<th>Sample program activities</th>
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<tbody>
<tr>
<td><strong>Social Cognitive Theory</strong></td>
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<tr>
<td>role modeling behavior</td>
<td>A role reversal activity in which fathers and sons write a play together focused on expectations regarding drinking alcohol or smoking marijuana or tobacco as part of a homework assignment. They act out the play for the group during Session 8 with fathers playing sons and sons playing fathers. Group discussions follow each play to highlight critical strategies for talking about expectations for substance use behaviors and parents as role models for substance use for their children.</td>
</tr>
<tr>
<td>behavioral capacity/skill building</td>
<td>The communication styles activity is designed to improve the parent’s/child’s (communication skills) ability to hear what each other is saying. Participants enact planned scenarios depicting different communication styles (e.g. passive, aggressive, assertive). Discussions of effective listening and general communication skills follow. This occurs during Session 5 and these skills are practiced throughout the program.</td>
</tr>
<tr>
<td>self-efficacy to avoid violence</td>
<td>A PowerPoint presentation on the effects of violence in African-American communities is shown during Session 11 with opportunities for practicing how to avoid violent situations. Each family develops a family pledge against violence based on a Black Family Poem by Maya Angelou.</td>
</tr>
<tr>
<td><strong>Social Networks/Social Support</strong></td>
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</tr>
<tr>
<td>density (knowledge of people in the social network/parental monitoring)</td>
<td>Sons complete a social network diagram with three concentric circles including people who are at varying levels of closeness to them in Session 8. Fathers and sons discuss people in the sons’ social network. A critical aspect of this exercise is to determine how many of their sons’ friends the fathers know and who the important people are in the sons’ life. Fathers complete a similar exercise, except the focus for them is on which community resources have been helpful to them in meeting their parenting responsibilities. This information is shared with the group. Fathers are also provided with a guide to community services and resources.</td>
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</table>
Social Cognitive Theory

This theory suggests that behavior, personal factors and environmental influences all interact to determine a person’s behavior. There are 11 specific constructs in Social Cognitive Theory (Baranowski et al., 1997). Four are included in the Fathers and Sons Program’s conceptual model. These are: (1) modeling behavior, which allows a person to learn by observing others, (2) behavioral capacity or skill building, (3) self-efficacy, which is the person’s confidence in performing a particular behavior, and (4) the environment, which includes opportunities for social support. Components of this theory were selected because they were consistent with findings from both focus group data (e.g. the need for role models, parental monitoring, environmental constraints) and empirical findings (see Table I). Self-efficacy was especially important to include in the model because it is critical for translating knowledge into action. Table II provides examples of program activities related to these constructs.

Social Networks and Social Support

These models emphasize the health-enhancing aspects of social relationships (Israel and Rounds, 1987). Examples of social relationships that have implications for health behavior include the extent to which: (1) resources and support are both given and received (reciprocity), (2) emotional closeness is offered, (3) network members know and interact with each other (density), and (4) similarity or differences among network members (homogeneity) exist. Social network relationships are thought to provide four specific support functions: (1) emotional support, (2) instrumental support (i.e. tangible aid, goods or services), (3) informational support and (4) appraisal support (i.e. information useful for self-evaluation). In addition to informal sources of support (i.e. support from close personal relationships such as family members, friends, coworkers), individuals and families can be supported by institutions (e.g. churches, schools, service agencies, businesses). Results of most studies on youth substance use, violent behavior and early sexual initiation support parental social relationships as being critical to prevention efforts with African-American youth (see Table I). Thus, all of these constructs are incorporated into the conceptual model. Examples of program activities for several social network components are presented in Table II.

Racial Identity and Racial Socialization

Positive racial identity development among African-American youth has been associated with positive health outcomes (Caldwell et al., 2003). Thus, enhancing racial/ethnic pride to develop a strong racial identity is an important empowerment strategy. A related concept is racial socialization, which most often occurs within the context of the family (Hughes and Chen, 1997). African-American families are in the unique position of having to raise their children to function within the African-American community as well as within the larger society. Strategies for successfully raising African-American children must be considered to help them effectively cope with being part of a societal system that they may perceive as not valuing them. Empirical findings from short-term substance use interventions for African-American adolescents support the inclusion of these concepts (Belgrave, 1997; Scheier et al., 1997). Racial identity development and racial socialization strategies, therefore, are critical components of the model.

Culturally specific program activities are included throughout the Fathers and Sons Intervention Program to build racial pride, enhance racial identity development and emphasize family racial socialization practices. One activity involves selecting an Adinkra Symbol (i.e. an African symbol representing value statements) during Session 4 to be placed on a T-shirt that is given to all participants and staff to build a sense of racial pride and unity in the program. One group, for example, selected the symbol literally meaning, ‘Love does not get lost on the way home’. Each family also creates an Adinkra cloth during Session 3 and it is used as a basis for discussing family race-related socialization goals. Both fathers and sons have welcomed this type of
cultural symbolism that is part of the Fathers and Sons Intervention Program.

**Model description**

Figure 1 presents the conceptual model that guided the development and implementation of the Fathers and Sons Program. It suggests that background factors (i.e. family and individual) will directly influence father/son attitudes about the health outcomes of interest (i.e. substance use, violent behavior, early sexual initiation) and attitudes about non-resident father–son relationships (i.e. father involvement, father–son closeness). In addition, background factors are expected to directly influence the subjective norms that fathers and sons hold regarding moral values and expectations for health-risk and protective behaviors and their own relationship. Based on the Theory of Reasoned Action, father/son attitudes and subjective norms are expected to directly influence behavioral intentions toward future behaviors (i.e. their relationship, substance use, violent behavior, early sexual initiation).

Monitoring by fathers, father–child communication and father modeling behavior are also expected to directly influence father/son behavioral intentions. The performance of these behaviors, however, are likely to be influenced by a number of background factors, such as living arrangements, marital status and exposure to stress. The Fathers and Sons Program was designed to increase parenting knowledge, enhance parenting skills, and influence attitudes and subjective norms; therefore, these factors are expected to mediate the relationship between negative background factors and positive behavioral intentions.

The relationship between behavioral intentions and intervention outcomes should be moderated by: (1) characteristics of the fathers’ and sons’ social networks and the availability of informal and formal social support; (2) cultural factors; (3) their behavioral capacity to improve parenting skills among fathers and refusal skills toward risky health behaviors among sons, and relationship skills among both; and (4) their sense of domain specific self-efficacy for improving their relationship and parenting/refusal skills and avoiding negative health behaviors. Finally, participation in the Fathers and Sons Program and using community resources are expected to enhance all mediating and moderating factors presented in the conceptual model, which should produce the desired short-term outcomes (i.e. more father involvement and father–son closeness, and less violent behavior). The short-term outcomes are ultimately expected to influence long-term outcomes (i.e. less substance use and delayed sexual initiation).

**Conclusions**

Although additional research is necessary to identify appropriate father influences for developing family-centered preventive interventions for African-American youth, a number of current findings are suggestive. Empirical findings, as well as focus group data and theoretical evidence suggest the importance of focusing primary prevention efforts on strengthening father–son communication, father–son closeness, father involvement, fathers as role models and encouraging developmentally appropriate supervision of sons by fathers. The challenge is to clearly specify how these parenting behaviors are expected to relate to adolescent outcomes when involving non-resident African-American fathers. The conceptual model presented in this paper is just one example of how theories, empirical evidence and experience can be used to inform intervention development and implementation. The advantage of such an approach is that the conceptual basis of the intervention can be articulated, replicated and evaluated for its effectiveness. Evaluation results from such interventions will provide specific knowledge about critical factors that promote positive health behaviors when involving non-resident African-American fathers more fully in their sons’ life.

A number of additional mediating and moderating factors could have been explored within the current Fathers and Sons intervention program. Both time and financial constraints limit what could be accomplished in one relatively unique,
short-term intervention program. The Centers for Disease Control and Prevention has provided funding to test components of the Fathers and Sons Program conceptual model. We are using a pre-test–post-test with comparison group design to evaluate the effectiveness of the intervention. In addition, the utility of using a community-based participatory research approach in developing and implementing the intervention program is being evaluated. Findings from the project evaluation will provide information that will be more precise for future programs interested in tailoring family-centered health interventions for non-resident African-American fathers and their sons.

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