

Summary Report: Participation Dosage in *Key to Kāne*: A Pilot Text- Messaging Intervention for Fathers



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Introduction

Unlike in previous generations, fathers today want to be more actively engaged in their children's lives (Marsiglio & Roy, 2012; Petts, Shafer, & Essig, 2018), but their involvement may be constrained by myriad factors, such as limited socioeconomic opportunity (Berger & Langton, 2011; Cheadle, Amato, & King, 2010; Fagan & Lee, 2012; Jaffee, Caspi, Moffitt, Taylor, & Dickson, 2001; Johnson, 2001; Tamis-LeMonda & McFadden, 2010), the quality of the coparenting relationship (Coley & Hernandez, 2006; Fagan & Palkovitz, 2011; Futris & Schoppe-Sullivan, 2007; McBride & Rane, 1998; Rienks, Wadsworth, Markman, Einhorn, & Etter, 2011), and levels of parental self-efficacy (Bogenschneider et al., 1997; Jacobs & Kelley, 2006; Sanderson & Thompson, 2002; Trahan, 2018). Given the extensive evidence that involved fatherhood benefits children, understanding how to support men's positive and active participation in parenting has become a central concern for policymakers, researchers, and practitioners. Fatherhood interventions have been designed to help increase quantity and quality of involvement (Bronte-Tinkew, Burkhauser, & Metz, 2012). However, fathers report a series of barriers to participation in these interventions, such as scheduling conflicts and time demands (see Fagan & Pearson, 2018; Heinrichs, Bertram, Kuschel, & Hahlweg 2005; see Spoth & Redmond, 2000). Therefore, alternatives to face-to-face interventions have been developed to help men overcome these barriers.

The Current Study

Key to Kāne is a pilot, technology-assisted, text-messaging intervention for fathers of children aged 0 to 12, delivered in Hawai'i. The intervention aims to help men become more involved in their children's lives and was created through an interdisciplinary collaboration among a researcher, a fatherhood practitioner, and a phone application programmer. *Key to Kāne* focuses on three topics with the potential of supporting father involvement: information about normative child development, concrete and simple ideas for fathers on ways to become engaged with their children, and encouragement of men in their role as *Nā Mākua Kāne* (fathers). Messages are delivered based on the age of the focal child. The main goals of this study were to examine whether demographic and personal characteristics of fathers predict the extent to which fathers read text messages (i.e., reading dosage) and whether different reading dosages differentially affect our intervention outcome: father engagement.

Recruitment of participants for the intervention was conducted by personally reaching out to families known at Maui Family Support Services, Inc. (the host agency), by spreading the word through community organizations and non-profit and government agencies, by posting flyers throughout the city, and posting information in social media. Fathers who expressed interest in *Key to Kāne* were invited to a group meeting at the host agency that included a presentation of the intervention, a question-and-answer session, and the possibility to enroll by signing the consent form and downloading the phone application (app). A total of 120 participants enrolled in *Key to Kāne*. At time of enrollment, nearly three-quarters of these men were resident fathers (most were married to the mother of the focal child and some were cohabiting with her), almost three-fifths of the sample had attended at least some college, and over three-fifths of the participants were employed full time. In terms of race/ethnicity, slightly over one-third of the sample was multiracial and, among the single-race participants, the largest group was the Native Hawaiian/Pacific Islander (more than one-quarter), followed by white (almost one-fifth).

To meet the goals of this study, at time of enrollment (baseline) and at the time of intervention completion (post-intervention), participants were asked to respond to a self-report survey. One hundred nineteen participants completed the baseline questionnaire, and 87 completed the post-intervention one. In addition, we collected in-depth data about participants' experiences with the intervention through three focus groups. A total of 18 men participated in these groups.



Key Findings

Finding #1: Many fathers do not read any messages, while many others read most or all messages.

We had some challenges recruiting participants for the program, but retaining men presented a bigger challenge. We found that reading dosage is bimodal, meaning that many fathers do not read any messages, while many others read most or all messages. In our study, more than half of the participants read most or all messages and nearly one-fifth did not read any. Recognizing the importance of tailored approaches and monetary incentives, we provided both, but it seems that while these efforts helped with the initial enrollment, they were not enough to motivate many of the men to read our messages.

Finding #2: Native Hawaiian/Pacific Islander fathers have a lower reading dosage than fathers from other racial/ethnic groups.

At least two sociocultural factors can possibly explain why we found that Native Hawaiian/Pacific Islander fathers are almost twice as likely to read no texts compared to non-Native Hawaiian/Pacific Islander fathers. First, many Native Hawaiian/Pacific Islander families live in multigenerational households that include not only grandparents but also aunts and uncles, where the adults collaborate in all household tasks. In this situation, when adults share common resources such as childcare, it may be the case that no specific adult carries the full parenting responsibility and that fathers are less motivated to acquire parenting knowledge and skills. Second, since it is important for Native Hawaiians/Pacific Islanders to maintain their unique culture, including parenting practices, they may well be less receptive to parenting approaches and interventions that are not culturally specific.

Finding #3: There is an inverse relationship between the number of children the fathers have and reading dosage.

There are possibly two alternative explanations to why fathers with fewer children read more text messages compared to fathers with a larger number of children. First, it is possible that fathers with higher numbers of children feel more knowledgeable about parenting and less in need of learning new things. In this context, fathers with fewer children may be parents who are eager to learn more. Second, it is possible that fathers with a larger number of children are busier with work and family life and have less time to read text messages. This could be especially true in the case of multi-partner fertility, when men have their children with more than one partner and might experience more unstable family relationships and make fewer investments in their children.

Finding #4: Fathers that experience more personal challenges are less active participants in the intervention.

In general, fathers who experience more daily hassles in areas such as work, health, and family are less accessible to and play less with their children than fathers with fewer difficulties. We found that the same occurs when looking at reading dosage. Men who experience no economic challenges (e.g., not having enough money to buy things for the child) or no behavioral and legal challenges (e.g., being accused of violence toward partner, having a protection order against him, having difficulties keeping a job), are more likely than men who experience these personal challenges to read most or all texts.

Finding #5: Reading text messages does not lead to higher levels of fathers' engagement with their children.

Contrary to the expectation, our findings do not provide evidence that higher reading dosage can effectively encourage fathers' engagement with their children. We propose two possible explanations for this discrepancy. First, although we tailored text messages to match the focal child's developmental stage, the content was not customized to address the needs and interests of each individual father. Therefore, fathers with individual needs not covered in our text messages may not have benefited from the intervention, even if they had faithfully read texts and registered a high reading dosage. Second, our data suggest that fathers who enrolled in the intervention were fathers with



fewer barriers to involvement and higher involvement levels to begin with, so it may be that there was little room to grow during the intervention and that a higher reading dosage could not help them become a better father. That is, it is possible that we had a “ceiling effect” from recruiting mostly low-risk participants, as we would expect stronger effects with high-risk participants.

Finding #6: A very preliminary examination of the qualitative data obtained through focus groups indicates that for some men, the intervention was perceived to be influential.

Initial analysis of our qualitative data suggests that participants perceived changes in their involvement with their children following their exposure to the intervention. For example, using text messages that suggest ways to read to children when not living in the same household—. . . If you don't live with your child, you can do this on the phone or with any form of video chat—a participant said: “My girls are off-island . . . so this was a way, with a limited amount of time to see and talk to them, this was just a great tool . . . to maximize that time. Well, yeah. I would read to them, start reading books . . . over FaceTime, and I would share some of the stuff with them. It was encouraging. I need constant reminding because I would just go off somewhere.”

Implications

Our findings constitute evidence that different fathers respond differently to the same intervention. Because eliciting active participation in fatherhood programs continues to be a major challenge, there is clearly a need to expand the examination of different ways potentially to influence dosage, which, in turn, could have an effect on program outcomes. In light of the results of the current study, there are a few implications for future research and practice:

While we carefully planned for and devoted time and resources to recruitment of participants, it was difficult to recruit participants who potentially were not engaged in their children's lives. Thus, recruitment efforts should continue targeting vulnerable fathers who are less engaged.



Considering that initial analysis of our qualitative data indicated that fathers would like to have meetings with other fathers, either face-to-face or through an online forum, future research should test *Key to Kāne* as an enhancement of an intervention that is more interactive, offered in combination rather than being a stand-alone program.

Future studies should continue collecting qualitative data either with individual interviews or focus groups to determine the kind of help fathers want. The goal should be to ask not only whether reading dosage works, but also to determine the mechanisms by which such interventions are helpful, in order to better meet the needs of fathers.

Many parents in other studies valued receiving similar parenting information directly on their cell phones. It appears, therefore, that using cell phones in interventions, either as an enhancement to other forms of intervention or even as the main mode of intervention, could be an effective tool for delivering parenting information, especially with enhanced tailoring and even more effective delivery. It is thus a promising avenue for future research and practice.



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