Shortly after the Family Foundations Early Head Start (EHS) program in Pittsburgh, PA, was selected to participate in the EHS national evaluation, the program's local research partners held a meeting with staff to share the good news and explain the research design. The first question following the presentation was by Jeff, then a parent involvement specialist and later a home visitor. With a friendly but determined tone, he asked: "What about the dads?" Jeff went on to raise concerns that the research plan, which called for a series of interviews with "the primary caregiver" of each study child, would result in numerous interviews with mothers but few with fathers. He challenged local researchers to include fathers in the study, arguing that failure to do so could undermine program efforts to increase father participation in EHS activities and services.

Carl, who had worked as a home visitor for Family Foundations since its inception seven years earlier as part of the Comprehensive Child Development Project, clearly agreed. Consistent with his own approach, he didn't raise this challenge directly, instead proceeding in a quiet, gentle manner to include fathers whenever possible in home visits and encouraging their participation in a fathers' support group he organized at his EHS community site. Over the coming months, Carl also began to talk more frequently about fathers with other program staff and the local researchers, sharing their stories and, in this way, raising our consciousness about both the importance and the possibility of father involvement.

The example of these two staff members--one an outspoken advocate for father involvement, the other a persistent but relatively silent pursuer of this dream--along with the commitment of the Family Foundations leadership, spurred the local research team to begin a pilot study interviewing fathers of EHS children. This effort eventually contributed to the design and implementation of the National EHS Fathers Studies that Consisted of several research components. One component, the Practitioner's Study, looked at the experiences of EHS programs themselves in developing and supporting father involvement.

This article is based on an in-depth qualitative study of efforts by one Early Head Start program to involve fathers in program activities with the aim of supporting and strengthening their involvement in their children's lives. Since this program employs a home-visiting model of service delivery, our focus is on the thinking and practice of home-visiting staff. As one strand in the multi-faceted study of fathers in EHS, this in-depth examination of the experiences of direct-service staff provides insight into the day-to-day work and challenges of father involvement in programming for young children.

While there is a modest and expanding literature on fatherhood roles and father involvement with children, studies on father involvement in early childhood programs and the role of such programs in supporting father involvement with children and families is still rather sparse. Within the Head Start community, and more generally in terms of programs for low-income families, most attention is on father involvement in classroom activities and with children of preschool age. Our goal is to contribute to the discussion on father involvement by examining a program's experiences in trying to engage fathers with infants and toddlers within a home-visiting program model. Our

intent is not primarily evaluative but rather exploratory as we attempt to understand the evolving perspectives of EHS staff, using this discovery process to more closely examine aspects of the issue of father involvement raised in this and previous studies.

RESEARCH ON FATHER INVOLVEMENT IN PROGRAMS

In the last 15 years, there has been a growing interest in fathers and father involvement with their children. Part of this interest stems from the recognition that the societal roles of fathers have changed over time, which has led to a lack of consensus among researchers about what the appropriate and expected roles of fathers are and should be (Lamb, 2000). Since the 1970s, consensus has emerged, however, around the desirability of fathers assuming a more active, nurturing role in childrearing (McBride, Rane, & Bae, 2001). The substantial research on father involvement has shed considerable light on fathering generally and on the impact of a variety of other variables (including race and ethnicity, employment status and income level, sex of the child, and age of the father) on father involvement.

The myth of the absentee father has returned to prominence in recent years. Among the most important findings of recent research on father involvement, and corroborating earlier studies (see Stack, 1974; McAdoo, 1988), is an overwhelming rejection of this myth and its application to and representation of fathers generally and low-income, minority fathers in particular (Fagan, Newash, & Schloesser, 2000; McBride, Rane, & Bae, 2001). Despite demographic trends that show an increasing prevalence of female-headed households, father and father figure involvement in such families tends to be quite regular and is perceived to be significant even by many single mothers (Fagan, Newash, & Schloesser, 2000). This has led some researchers and policy advocates to call for new, broader definitions of father involvement that include less-formal and nonresidential forms of fathering, and non-biological father-figures (Cabrera & Peters, 2000; Levine, 1993) as well as to examine the cultural logic of fathering that may be unique to different ethnic, racial, or cultural groups (Ahmeduzzaman & Roopnarine, 1992).

Accompanying a growing recognition of father involvement is resounding agreement that father involvement correlates with significant childhood gains socially, emotionally, and cognitively while also contributing to better school outcomes (Fagan & Iglesias, 1999; Levine, 1993; Fagan, 1999; Cabrera & Peters, 2000). As such, there has been great effort to discover vehicles for enhancing this involvement and to identify and overcome possible barriers to it.

One arena in which father participation has been and continues to be extremely low, however, is in early childhood programs. Preschool programs have traditionally equated "parent" with "mother," making limited, if any, attempts to actively involve fathers in preschool activities. The vast majority of these programs still tend to be mother-centered (Carter, 1996; Fagan & Iglesias, 1999). Public policy, which frequently shapes the design of these programs, has tended to privilege the nuclear family (Cabrera & Peters, 2000), reinforcing a mother-centered approach to early childhood programs in two ways. First, by privileging the nuclear family, such policies have reinforced stereotypical gender roles

of the father as "provider" and the mother as "nurturer," which often decreases expectations of father involvement outside of an economic context (Marsiglio & Cohan, 2000). Second, the "traditional" nuclear family has become less the normative form of social organization in North American families, as high divorce rates (Braver & Griffin, 2000), children born out of wedlock, and other demographic and cultural changes have led to what Marsiglio and Cohan (2000) call a "fragmentation of fatherhood" (p. 78).

Related to this, program staff, who tend to be predominantly female, are often not trained to include fathers in program activities or encouraged to design uniquely father and child-focused activities and often hold personal prejudices against fathers' capacity to be positively involved with and supportive of their children (McBride, Rane, & Bae, 2001; Levine, 1993; Fagan, 1996; Garinger & McBride, 1995). Mothers also frequently limit father involvement in programs by serving as gatekeepers between fathers and program staff (Fagan, Newash, & Schloesser, 2000; Levine, 1993) as well as between fathers and their children (Marsiglio & Cohan, 2000; Braver & Griffin, 2000). Many mothers, like preschool staff, feel fathers are inadequate caregivers (Fagan, 1996), and these attitudes limit attempts to involve fathers formally (and often even informally) in preschool activities.

Jay Fagan, who has implemented a pilot father program in Philadelphia-area Head Starts, demonstrates that programs that actively recruit fathers can successfully engage them using various strategies including designing and implementing father-specific programs, recruiting fathers as classroom volunteers, and training staff to be sensitive to fathers' social and emotional needs (Fagan, 1996, 1999). Father involvement in these programs has the potential to pay dividends in fathers' own lives, especially when combined with the development of childcare skills or job training seminars and support groups (Fagan, 1996, 1999).

This and similar programs also helped change staff and mothers' attitudes about father involvement, partly by addressing women's attitudes and concerns, and partly by fathers' competent performance as caregivers, play partners, and nurturing but firm disciplinarians in the preschool setting (Fagan, 1996). Despite such promising results, these studies conclude that high levels of prolonged father involvement remain elusive, while it is precisely this nature and degree of involvement that reap the greatest benefits for young children (Fagan & Iglesias, 1999; Levine, 1993; McBride, Rane, & Bae, 2001).

The current study differs from the majority of previous work in three major ways, thus addressing serious gaps in the literature and in our knowledge of father involvement. First, it assesses the attempt by an Early Head Start program to involve fathers of infants and toddlers in program activities. The vast majority of existing work on father involvement has dealt with Head Start and similar preschool programs, not programs for infants and toddlers. The study reported here is part of the fathers research that was developed in conjunction with the national EHS evaluation (Love, Kisker, Ross, Schochet, Brooks-Gunn, Paulsell, 2002). Besides the EHS research, the only other comprehensive studies of father involvement with infants and toddlers are the Fragile Families study and the Early Childhood Longitudinal Study--Birth Cohort (see Cabrera,

Brooks-Gunn, Moore, West, Boiler, & Tamis-Lemonda, 2002; Cabrera & Peters, 2000). But these studies do not focus primarily on the question of father involvement in infant and toddler programming. Our study thus provides insights into how programs might engage fathers in the earliest years of their children's lives.

Second, our research deals with a home-based rather than a center-based program, presenting different social dynamics for families involved in the program and different challenges for staff working with those families and their children. Home-visiting is being given new attention as an effective intervention strategy with long-term positive outcomes (Olds, Henderson, Cole, Eckenrode, Kitzman, Luckey, et al., 1998; Olds, Henderson, Kitzman, Eckenrode, Cole, & Tatelbaum, 1999). And yet there are no in-depth studies of the particular approaches to or challenges of father involvement in the home visitation model. Our study begins to address this gap.

Finally, our study provides a close-up look at actual experiences of program staff in attempting to foster father involvement both in program activities and in the lives of EHS children. It thus complements and helps inform the broader survey of father involvement in EHS programs as reported in Raikes, Boiler, vanKammen, Summers, Raikes, Laible, et al. (2002). In particular, our qualitative examination uncovers some of the program processes entailed in father involvement and thus helps to unpack the "why" and "how," not just "what," of father involvement. This knowledge is important for program practice and contributes to the growing research agenda on father involvement. It begins to elucidate the actual mechanisms through which father involvement works, for whom, and under what conditions. Such an exploratory study with its openness to emergent themes and factors also contributes to the identification of new dimensions of father involvement and challenges to it that can then be further examined through additional research.

THE PITTSBURGH EARLY HEAD START PROGRAM

At the time of our study, the Family Foundations EHS Program was serving families in three communities in the Greater Pittsburgh Metropolitan Area: a public housing development in the City of Pittsburgh, a working class borough on the outskirts of the city, and a former steel mill town located in a more rural setting. Across all three sites, the program enrolled and worked with 140 families with children ages three and under. Approximately 70% of these families were African American; the other 30% White. The majority of enrolled mothers described themselves as unmarried single parents. Most fathers either lived with the EHS child and the child's mother in an unmarried partnership or lived separately from mother and child but still had some involvement in the child's life. The majority of EHS men were the biological fathers of the children though some were social fathers, usually the mother's partner, making the status of EHS fathers similar to that noted by other researchers and policy advocates calling for broader definitions of fathering and father involvement (Levine, 1993).

The economic history of the Pittsburgh region is pertinent to the EHS program's efforts to engage fathers in program activities and in their children's lives. Throughout the region, working-class families have been critically affected by the general process of de-

industrialization over the past 30 years and especially by the dismantling of the local steel industry in the 1980s. After a period of mass unemployment following the closing of the mills, working-class men and women find themselves dependent on low-wage, non-union, often part-time and temporary jobs, or on public welfare, largely available only to mothers of dependent children. The effects of this economic restructuring have been particularly devastating for African-American families. As noted by Baum, Shore, and Fleissner (1988), "Black households had the worst time with unemployment in a situation where all households suffered. Black household members were virtually wiped out of the skilled blue collar jobs that had been the life blood of the river communities for so long" (p. 10).

A study based on 1990 census data and comparing the Pittsburgh region with other large U.S. cities and counties found that Pittsburgh's Black male teenage unemployment rate was 49% and ranked fourth worst among large U.S. cities. The same study reported unemployment rates among both White and Black men age 2554 among the highest in the United States, and Black unemployment rates more than three times White rates (Bangs & Hong, 1996, p. 9). A report in the late 1990s indicates the continuing problem of lack of jobs at a living wage, especially for adults without higher education or extensive job experience (Bangs, Kerchis, & Weldon, 1997).

The Family Foundations EHS program is located in urban neighborhoods and small towns impacted by these economic changes. These communities, though in many ways still vibrant and close-knit, have experienced a drastic deterioration in infrastructure and resources, resulting in rising levels of violence and social alienation and a decline of basic services such as education and health care (McAllister, 2001). The program operates through a home-visiting model of service delivery in which program staff visit weekly with parents and children in their own homes. The purpose of home visits is to foster and facilitate parent-child play activities, offer parenting support and education, and work with parents to identify and achieve family goals around matters such as employment, education, housing, and family relationships. The program also organizes bi-monthly group socializations where parents and children meet together with other families to engage in joint parent-child activities and learning experiences. The local program has a strong parent leadership and involvement component through community-based parent committees and the program-wide policy council. Home visitors encourage enrolled families to attend monthly parent committee meetings and to serve on the policy council, and parent involvement specialists provide special training and support to parents who choose these leadership roles. The parent committees and the policy council make recommendations about program services, budgets, and the hiring of staff as well as provide a mechanism for EHS parents to collectively identify and address local community concerns such as the quality of public schools or proposed cutbacks in local health or transportation services.

The leadership and staff of Family Foundations believe parents and parenting are key to healthy child development. The program therefore "goes through the parent" to deliver child-focused services and promote child health and development. Program staff focus on building strong relationships with parents, believing these relationships serve as models

and vehicles for developing strong parent-child relationships and good parenting. The Pittsburgh EHS program also attempts to adhere to a number of family support principles in the delivery of services, including focusing on family strengths rather than deficits, allowing families to make their own choices about goals and services, and respecting family and community cultures. While focused on infants and toddlers, the program attempts to work comprehensively with the whole family and involve all family members, whether co-residential or not, who are important in a child's life. This includes working with the child's biological and/or social father. These program approaches have required staff to repeatedly revisit the issue of father involvement both in program activities and in the lives of infants and toddlers.

THEORETICAL FRAMEWORK AND METHODOLOGY

The study reported here focused on EHS staff perceptions of father involvement and their own efforts to involve fathers in program services and in the lives of EHS children. Our theoretical framework represents an integration of three approaches. First is a synthesis of interpretive and political-economic models in the field of anthropology as employed, for example, in recent work in critical-interpretive medical anthropology (Scheper-Hughes, 1990, 1992; Lock & Scheper-Hughes, 1996). This approach guides us to focus our discovery process on ideas, concepts, and perspectives about father involvement as understood by EHS staff, while at the same time paying attention to social, economic, and political factors that constrain program options and choices of enrolled fathers. In other words, we are concerned with both meaning and context and their dynamic interaction.

Related to this anthropological approach is the social ecology model of health and development, as articulated early on in the field of child development by Bronfenbrenner and colleagues (Bronfenbrenner, 1979; Bronfenbrenner & Ceci, 1994), which provides the underpinning for the recent project of the Institute of Medicine and National Academies of Science, From Neurons to Neighborhoods: The Science of Early Childhood Development (Shonkoff & Phillips, 2000). The basic premise of this approach is that the health and development of individual persons must be holistically understood as consisting of many interacting dimensions (e.g., physical, emotional, social, economic, and spiritual) and as significantly influenced by the multi-layered social environments in which people live. A social ecology framework highlights the importance of father-child relationships, and of social environments that support such relationships, for children's health and development. It also helps us to think holistically and contextually about the lives of the fathers themselves, that is, to consider matters such as fathers' relationships with their children's mothers, the shaping of their own roles and expectations by community values, and the way social issues such as high levels of unemployment affect fathers and fathering.

Finally, we carried out our research guided by an evaluation model that is both theory-based and participatory (Green & McAllister, 1998). Following this approach, one of our primary goals was to help the program identify and articulate its implicit theory concerning work with fathers (i.e., what it were trying to accomplish and how it intended

to achieve these results). This development of program theory and other research and evaluation activities were accomplished in a participatory manner. We thus engaged program practitioners as partners who helped determine research questions and methods, shared in oversight of the research process, and participated actively in the interpretation of findings (McAllister, Green, Terry, Herman, & Mulvey, 2003).

Our research was based on an ethnographic mode of inquiry and employed several complementary qualitative methods. In order to appreciate both the methods and the findings of the father involvement study, it is necessary to understand how it is embedded within and linked to the broader research agenda involving the Family Foundations EHS program.

The first author of this paper and principal investigator for the father involvement study has worked as a research partner with the local program for 13 years, carrying out ethnographic research as part of the program's research and evaluation (1) and quality improvement efforts. In this capacity, she has completed thousands of hours of participant observation of program meetings and activities (including weekly meetings of the program development team, bi-weekly meetings of community-based program staff, monthly meetings of parent committees and the parent policy council, case conferencing around specific families, staff training, and program activities such as retreats, fieldtrips and picnics) as well as in-depth in-home interviews and case studies of enrolled families. All observational, interview, and case study data were recorded in the form of detailed field notes (Hammersley & Atkinson, 1995; Sanjek, 1990), which could then be utilized for analysis related to a diversity of research questions.

While this broader ethnographic research was not focused specifically on questions of father involvement, concerns about involving fathers both in the program and in children's lives were a frequent topic of discussion among program staff and enrolled families. Meetings and other program activities also provided opportunities to observe fathers' participation and engage in informal conversations with staff and parents about father involvement. This ongoing research thus allowed us to develop some preliminary questions about father involvement that could be explored in a more focused way in the specific father involvement study. It also provided contextualization that informed the interpretation of our findings as well as a historical view of father involvement in this EHS program.

The core of the specific father involvement study, which took place during the third and fourth years of the program's operation as an EHS site, consisted of three primary methods: focus groups with program staff, mini-case studies of how staff work with fathers in particular families, and participant observation of father involvement activities.

Focus groups helped identify many key issues that arise in attempting to involve fathers in program activities and support their involvement with children and families. Focus groups were organized to reflect and respect the organizational culture of the program itself. The first four groups involved community-based staff. Thus each group was held at an EHS community site and consisted of all the home visitors who worked in that

community (two to five in number depending on site) as well as more specialized support staff such as a child development specialist, parent involvement specialist, public health nurse, mental health and drug and alcohol counselors, and van driver. In this way, staff who regularly worked together, served the same set of families, and were knowledgeable about factors in their local community that affect their work with fathers were given an opportunity to explore these issues in a facilitated discussion format. The final two focus groups were held with the program development team and the program's policy council. The program development team consists of all management and coordinating staff (i.e., community site coordinators and coordinators of key program services) while the policy council consists of elected parent representatives from each program site along with community representatives selected by this parent leadership. All six focus groups were facilitated by a graduate student researcher, whose dissertation work focused on African-American fathers, guided and supported by the principal investigator.

Focus groups began by asking participants to talk about their own ideas of "fatherhood" and "good fathering." They then proceeded to explore EHS program goals related to father involvement, what staff do to involve fathers, what works and what does not, barriers to father involvement, and desirable programmatic changes in terms of father involvement. Focus group discussions were taped and then transcribed. The principal investigator took observational fieldnotes during the group discussion.

The focus groups were supplemented by mini-case studies of how home-visiting staff work with fathers in specific families. Rather than carrying out individual discussions with staff, the principal investigator asked to meet with the home visitors from all the program sites during their regularly scheduled cross-site meetings. At a series of such meetings, each community site was asked to prepare and present two cases that illustrated their work with fathers in enrolled families. Staff were asked to select cases that exemplified both successful strategies and impediments to father involvement. As the family's home visitor presented a case, other staff from that community site added additional information and perspectives, and then home visitors from other sites were invited to provide their commentary and interpretations. In this way a rich picture emerged both of how home visitors work with fathers and of how they conceptualize father involvement.

Participant observations of specific father involvement activities rounded out our study. These observations occurred at group activities--support groups, sporting events, and dinners--organized specifically for fathers as well as at staff meetings devoted to planning and evaluating these events. The graduate student researcher who joined in the activities as a father himself carried out these observations. Participant observations were recorded in the form of field notes that were reviewed with the principal investigator.

In qualitative research, it is important to analyze data throughout the research process and to use preliminary findings to inform further data collection as well as to reformulate or elaborate research questions. Thus, after each group interview and participant observation, analytic notes were developed that focused on the identification of emergent themes and thus the generation of new questions that could be asked in the next stages of

data collection. Particularly important in the overall analytical process was the use of triangulation whereby preliminary findings from each strand of data collection (i.e., focus groups, mini-case studies, and participant observations) were compared and contrasted to enable clearer identification of key issues and relationships. In line with some of the newer thinking and practice in ethnographic research, we also employed a reflexive approach whereby preliminary findings and analytic insights were shared with program staff. Staff were then invited to share their own reactions and interpretations, which became part of the final analysis. This process culminated in the collaborative development of this manuscript by two researchers and one of the program's home-visiting staff.

Our employment of an ethnographic approach and a combination of qualitative methods allowed us to develop insights into both the cultural meaning and the everyday practice of father involvement in this EHS program as well as to place these understandings in a wider socioeconomic context. Such methods, when employed in-depth and over a period of time, facilitate the development of "thick description" (Geertz, 1973) and grounded theory (Burawoy, 1991; Glaser & Strauss, 1967) and allow the discovery and exploration of significant issues that provide direction for both program practice and further research. The issues we will focus on in this discussion are the evolutionary development of program thinking and practice regarding fathers and father involvement, barriers or challenges to father involvement, and critical components of successful strategies for engaging fathers on both a programmatic and an individual family basis.

RESULTS

AN EVOLUTIONARY APPROACH TO FATHER INVOLVEMENT

Perhaps our most important finding is that over the course of its history the Family Foundations program has undergone a significant evolution in its thinking and practice in terms of father involvement. This suggests that father involvement on the part of early childhood programs may develop through specific stages that entail not only changes in practice but also paradigmatic shifts in thinking. This is not to suggest that new programs cannot learn from the "best practices" of more experienced programs, but it does raise a question about whether early childhood programs need to go through a maturing process that includes development of a more comprehensive understanding of father involvement. The survey of 261 EHS programs reported in Raikes et al. (2002) also reveals different stages whereby more experienced programs tend to have a larger number of and more diverse father involvement activities. Our qualitative study suggests that the critical factor may not be simply adopting new activities but developing new ways of thinking and fundamentally different approaches to father involvement. In the Pittsburgh case, we identified several "stages" of father involvement.

Stage 1: In this initial stage of program planning and operation, Family Foundations had a nearly exclusive focus on the mother-child dyad. Usually only the mother was recruited to the program and only mothers and children were formally enrolled in program services. Inclusion of fathers occurred when the father became the child's legal guardian

or when the mother herself included the child's father in home visits or other program activities. The roles and needs of the father, and the relationship of the father to both child and mother, were sometimes discussed with the mother, but there was little staff contact with fathers themselves.

Stage 2: In this second stage, as the program matured and gained more experience working with enrolled families, staff began to recognize the important role fathers play in children's lives. At this point greater attempts were made to encourage father engagement with the child and with the program. However, father involvement occurred primarily through special male-only activities. For example, some of the program sites organized periodic activities for fathers such as attending local sports events or watching a local game together in the program center. In some cases, these activities evolved into informal support groups for men providing opportunities for them to talk about their experiences and roles as fathers. During this stage, some attempts were also made to consider the needs and goals of fathers in family goal planning. Usually, however, this was not done in an integrated fashion, but rather the goals of fathers were added on to the family goals, still largely articulated by mothers. Staff often steered men to focus on employment-related goals and services rather than to think more holistically about their goals as fathers.

Stage 3: This stage was initiated when Family Foundations became an Early Head Start program with a focus on the child in relationship with primary caregivers. It entailed a new policy to recruit the whole family to the program and to offer the same services to mothers and fathers. If at all possible, the father was formally enrolled in program services at the same time the mother and child were signed up. Attempts were made to inform fathers as well as mothers of the whole array of program services (i.e., home visits, parenting education, family goal planning, case management, socializations, and parent leadership opportunities), and to encourage their involvement across these domains. During this stage, a shift gradually occurred whereby fathers were encouraged to meet with staff and articulate goals toward which they would like to work with the help of staff who provided case management. At the same time, special men's activities continued with an increasing shift toward their function as fathering support groups.

Stage 4: The transition into the next stage was subtle but critical. It entailed active attempts to engage fathers in child-focused home visits. We began to hear staff talk about "getting the dad down on the floor" to play with his infant or toddler, something we used to hear only in relation to mothers. There was also an attempt to engage fathers as well as mothers in developing family goal plans. Fathers were encouraged to articulate their own goals and to think beyond the issue of employment, considering other dimensions of their lives and their roles as parents. And then ideally a mother and father would work together to integrate these goals into a comprehensive plan for family development that would best support their child(ren). During this stage staff began to attempt to meet more regularly with fathers. Father involvement in parent leadership activities, which had occurred sporadically throughout the program's history, was now more consistently fostered.

Stage 5: This final stage was underway as our study concluded. It entailed the development of a perspective that consistently views fathers as co-parents and attempts to promote and support a father's close engagement with his child(ren). Going beyond practices to simply include fathers in parent-child activities, staff were encouraged to think reflectively about the relationship between a father and his child and what the father contributes through that relationship to the child's health and development. Staff also began to encourage and facilitate this same sort of reflection on the part of both mothers and fathers. This evolution became particularly clear when fathers began to be regularly discussed as part of infant mental health case conferencing. Here the goal is to develop strategies to support infants and toddlers in vulnerable family situations by mustering all relationship resources available to the child. Fathers are now intentionally included in these case discussions and in the development of plans for strengthening parenting and parent-child relationships.

It is important to recognize that these changes in program approach were paralleled by an evolution in staff ideas about core activities of fathering--away from a focus on job-seeking toward a more integrated view of nurturing that includes economic provision but also emotional engagement with children and other family members. This changed thinking reflects what Pittsburgh fathers themselves told us about their roles. In responding to open-ended interview questions, their own definition of a "good father" focused on emotional involvement and everyday parenting activities as well as on providing financially for their children. (2)

In practice, stages of father involvement were not always clearly delineated and there was some unevenness in how new practices and modes of thinking were adopted and applied. Also, activities from earlier stages were sometimes carried over but "reinvented" in light of new conceptualizations of father involvement. For example, the first attempts at special activities for fathers were for men apart from children, shaped by staff assumptions about father interests (frequently sports focused), and isolated from other program activities or components. Later, when father involvement came to be conceptualized more holistically, activities often allowed fathers and children to do things together, followed the interests of diverse groups of men, and tended to be linked to other program components such as home visits or child socializations.

A good illustration of this occurred in the EHS site located in a public housing development in the city of Pittsburgh. Rather than organizing a trip to professional sports events, this program site helped fathers organize their own softball team. This occurred the year before Family Foundations was funded as an EHS program. While softball practice provided an opportunity for fathers to interact in a male-only group, games in a local league were attended by children and mothers, creating a family atmosphere. At the end of softball season, fathers decided they wanted to have monthly dinners together, using these occasions to host speakers on aspects of fathering and to talk about parenting matters themselves. This support group, which became known as Fathers Reaching Out, also helped participants set and achieve goals related to their fathering roles, supplementing individual relationships and lines of support that were developing between program staff and these same men. Perhaps of most importance, these and other special

father activities were no longer viewed as the vehicle for father involvement but rather as only one component of a comprehensive approach to fathers. This approach increasingly emphasized working with fathers through the primary vehicle of home visiting with a focus on the father's role in child development.

BARRIERS OR CHALLENGES TO FATHER INVOLVEMENT

This leads to the issue of barriers or challenges to father involvement. If fathers are increasingly viewed by early childhood programs as co-parents and core members of families of young children, what prevents their active engagement in the program and the lives of their children? In our discussions with program staff and observations of program activities, we uncovered two types of barriers or challenges: those that reside in the program and those that reside in the circumstances of fathers themselves.

Program barriers. Some program barriers were identified by program staff themselves; others emerged from analysis of researcher observations. A barrier noted in several of the focus groups concerns the historical development of social service and early childhood programs as programs for mothers and children to the exclusion of fathers. Staff felt that this historical paradigm and policy orientation still influences both internal program thinking and community perceptions of programs such as EHS.

Another program challenge we observed and that was also noted by several staff concerns a lack of clarity about who holds the responsibility to shape program policy and practice related to father involvement. Unlike some EHS and Head Start Programs, Family Foundations did not employ a staff person whose primary function was "father involvement." Sometimes this responsibility fell informally to various male staff members. At other times, this function was not delineated along gender lines but rather followed other staff roles, for example father involvement being given most attention by parent involvement specialists. There were periodic discussions about how all staff are responsible for carrying out father involvement activities and keeping this program component "on the table." There were also complicated dynamics around the role of program leadership and management, who tended to be women, over the extent to which they should oversee or give autonomy to (especially male) direct service staff as regards father involvement. Though creating a degree of stress and uncertainty, this lack of clarity around responsibilities for father involvement was not necessarily detrimental. On the positive side, it kept the issue alive for staff as a whole and encouraged some of the evolution in conceptualization of father involvement described above.

Another issue not articulated by program staff, except through teasing and jokes, concerns the tendency of some staff to stereotype men and male roles. Such stereotyping entailed talking about EHS fathers as if they were a homogenous group, in particular as if they were all interested in and motivated by the same things. For example, following gender stereotyping common in the larger society, it was assumed that all EHS fathers would be interested in sports and that their program goals would focus on employment. It was likewise assumed fathers would not want to talk about emotional or personal matters or be that interested in activities with their infant children. Part of the evolution of father

involvement discussed above entailed development of a more individualized approach to fathers, recognizing individual differences and allowing fathers to determine their own direction. In this way, program thinking about fathers came to more closely resemble program thinking about mothers, which clearly emphasizes respect for individual differences and individualized service provision.

A final program challenge around father involvement emerges from staff members' own experiences with fathers and other men in their personal lives. For male staff, emotionally charged issues often revolved around relationships with their own fathers; for female staff, these issues more often centered on (former) male partners. In some cases, female staff were intimidated by male family members in the homes they were visiting, which sometimes led them to avoid engaging the fathers. This challenge is not unique to the question of father involvement. In a program focused on the issue of relationships and requiring strong staff-family engagements, painful experiences in one's own life are often re-opened by one's work. This is also the case for researchers working with such programs. It does, however, raise a question about whether staff need to be offered support to handle such emotions for the work of father involvement to be successful.

Situational barriers. In focus group discussions, several barriers to father involvement that arise from the circumstances of EHS fathers were noted. These include:

* Relationship issues within the family, especially partnership issues, but sometimes extended family relationships as well;

* Reluctance on the part of both mothers and fathers to share information--including existence and whereabouts of an involved father--that could jeopardize welfare, public housing, and other government subsidies;

* Economic realities in the local area, especially lack of jobs at a living wage for those without substantial higher education;

* High rates of incarceration, especially for young African-American fathers; such incarceration is often drug-related and thus indirectly related to limited economic opportunities; and

* Images from the media and popular culture that undermine the confidence of men in EHS families in their value as fathers.

These factors were thought to be barriers both to program involvement on the part of fathers and to involvement with their children. Further insights into several of them were provided by the mini-case studies concerning the work of home visitors with fathers in specific families.

THE CHALLENGE OF EMPLOYMENT

Several of these barriers or challenges have an economic component. A lack of jobs, high rates of incarceration, reluctance to share information that could jeopardize alternative sources of income, and the image of fathers, which really refers to the image of "poor" fathers, all have an economic dimension. In many cases, "relationship issues" are also the result of economic stress. One could therefore argue that father involvement efforts by programs and the involvement of fathers in children's lives are significantly undermined by poverty and economic insecurity (see also Braver & Griffin, 2000; Fagan, 1999). The issue of employment--its terms and its lack--seems especially critical. In fact, this emerged as an issue in each of the case studies.

In some cases, home visitors felt the father's employment limited or even precluded his involvement in the EHS program and curtailed his engagement with his children and family. In part, this may be a question of the specific conditions of a father's work, specifically, long or irregular hours, non-daylight hours, and a job at a considerable distance from home (Marsiglio & Cohan, 2000). However, we should note that many EHS mothers are also employed, often under similar circumstances, given the new requirements of welfare reform. Yet most EHS mothers still manage both program and family involvement and are expected to do so, even if with difficulty, by program staff. An important question to explore further is whether this "barrier" may result in part from staff (and perhaps family) perceptions of father roles. Is male employment accepted, and in ways expected, as an impediment to parental engagement?

In most case examples, however, it was the father's unemployment or unstable employment which created challenges to successful father involvement. The problem was not simply material but rather had important social and psychological dimensions around a father's sense of adequacy as a "provider" (see Cabrera & Peters, 2000). Limited income was also seen to contribute to family stress and conflict (Fagan, 2000).

TANF regulations, especially as regards establishment of paternity and child support enforcement, have in many cases added to these stresses and further inhibited program involvement. EHS parents expressed particular concern about the requirement that a mother applying for public assistance must disclose the identity and whereabouts of her child's biological father. During focus group discussions, staff noted the reluctance of both mothers and fathers to share information that could jeopardize welfare payments. As noted elsewhere (Fagan, 1999, p. iii; Jarrett, Roy, & Burton, 2002; Nelson, Clampet-Lundquist, & Edin, 2002), these policies may inhibit father involvement with children and also preclude active involvement in early childhood programs for many fathers. While EHS mothers were critical of men who simply failed to make child support payments, they were generally sympathetic to those who lacked economic resources but were involved with their children in other ways. In their experience, some fathers also provided financial support in informal ways rather than through the child support system (Cabrera & Peters, 2000). In these cases, a father might actually be highly involved with his children, an involvement that remains, however, hidden from public view.

In addition to these complicated family dynamics, EHS staff described the development of low self-esteem by unemployed or underemployed EHS fathers, based on their self-

perceptions as "inadequate providers." This is similar to the findings of Fagan (2000), who suggests that unemployment and underemployment are major emotional strains for male heads-of-households, often contributing to and exacerbating domestic problems (see also Harris & Manner, 1996; Volling & Belsky, 1991). This body of research suggests that feelings of inadequacy and shame around unemployment and underemployment may be critical barriers to effective father involvement and relate to the long-held socially expected role of fathers as breadwinners (Lamb, 2000). In the Pittsburgh case, EHS staff felt a father's inability to economically provide inhibited his engagement with his children and sometimes also led to avoidance of program services and activities related to issues of jobs or income. While providing job training may thus be important in fostering or maintaining father involvement (see Fagan, 1996; 1999), these staff observations suggest that focusing on employment-related services may not be the ideal route to encouraging father involvement for all fathers.

The following case provides a good example of how issues of employment and unemployment affect father involvement and how program staff attempt to negotiate this barrier:

> Ralph and Harriet are a married couple who had three sons when they enrolled in the EHS program. (3) Periods of unemployment for Ralph were a major family issue frequently discussed with EHS staff. For a period of time, Harriet was employed outside the home while Ralph was at home with the children. Home visits were therefore done primarily with Ralph, except for goal planning, which included both parents. During home visits, Ralph would sit on the floor and be very engaged with the children. Home visitors felt he was a loving father who was very "in tune" with his children. Ralph also regularly attended the infant/toddler group with his youngest child and was active in program governance activities.
>
> Harriet then became pregnant with another child. Ralph was upset about the pregnancy and temporarily left home. The EHS program was key in helping both Ralph and Harriet work through their conflicts around this unexpected and difficult pregnancy and achieve a reconciliation. During Ralph's absence from the home, program staff continued to attempt home visits but also stayed in touch through phone calls. They talked with Ralph as much as possible though most of their discussions were with Harriet who then talked with Ralph.
>
> Around the time of the birth of their new baby, Ralph found a full-time job with a local trucking company. However, his long hours of work--often 10-hour shifts--meant he was now rarely available for home visits, even though Harriet encouraged and supported his participation. Then Ralph lost his job. This created an even bigger barrier to program participation. At first, Ralph didn't tell Harriet about the job loss, nor did he share this information with EHS staff. Ralph's "denial" of his unemployed status created a major conflict and loss of trust with Harriet. His discomfort in talking about the job loss also led to his "pulling back" from participation in home visits and other program activities.

```
     When we completed this case study, program staff were still
hoping "to pull Ralph back in, in a round-about way," through his
interest in the parent committee and his willingness to sometimes
attend the infant/toddler group. Home visits were now carded out
exclusively with Harriet since Ralph avoided these family-focused
sessions. Home visitors did not feel they could at this point talk
about the job loss directly with Ralph. Rather they were trying to
help Harriet deal with her feelings around this issue so that she,
in turn, could talk with Ralph. When home visitors called to set up
appointments, however, they always made a point to ask Ralph,
not just Harriet, "how the kids were doing" and to invite both to
program activities.
```

Intimated in this case study is that the issue of employment in contemporary American society involves both generic and gendered expectations. In general, parents are expected to economically provide for children, and adult partners often expect such support from each other. But in many American families and communities, there may be an added expectation that male parents (i.e., fathers) are economic providers. While early childhood programs might challenge this gender construction and promote other ways men can fulfill fathering roles, there remains at base the lack of jobs and opportunities for economic stability. It is likely that unless this issue is addressed in the broader society, EHS and Head Start programs will continue to be hampered in their efforts at father involvement.

MOTHER-FATHER RELATIONSHIPS

The above discussion of employment suggests another important aspect of father involvement efforts, that is, the role of the child's mother in either facilitating or inhibiting such involvement (Fagan, 1996; Levine, 1993; McBride & Darragh, 1995). This was a theme developed during staff focus groups and corroborated by participant observations. During focus groups and other conversations, staff recounted several instances in which the mother brought the father into the program and encouraged his participation. For example, many men who participated in parent committees (often perceived by fathers as largely women's gatherings) did so with the initial encouragement and support of their female partners who were also active participants.

The opposite also occurred--that is, mothers, even those in positive, stable partnerships with their child(ren)'s father, sometimes discouraged father participation. For many women, the program served as a context in which they, perhaps for the first time in their lives, were experiencing a sense of self-efficacy and self-respect. Through active involvement in the program, they had the opportunity to develop supportive relationships with staff and other parents as well as to make choices and decisions affecting their lives. For many mothers, it seemed difficult to share this new-found power, especially with their male partners. Throughout years of participant observation, the first author found herself in several informal group discussions in which EHS mothers expressed quite ambivalent feelings about father involvement--on the one hand, desiring such involvement and displaying frustration with the general lack of male participation; on the

other hand, revealing deep-seated conflicts about allowing men a larger role either in program activities or in their children's (and their own) lives.

These issues become even more complex when mothers and fathers are in conflictual relationships or are no longer intimate partners. Based on interviews with EHS families as well as case conferencing by program staff, such situations appear to be quite common among EHS families just as among families in American society as a whole. Some relationships involve physical or psychological abuse. If the man is the abusive partner, this raises particularly difficult questions about father involvement that programs must address. In other cases, the conflict or the ending of an intimate relationship results in a mother's decision that she does not want the child's father involved in the program and/or the child's life. Here the dilemma for program staff is how to respect both the mother's choices (assuming she is the primary program participant) and the father-child relationship. Further complications, though often with positive potentials for fathering, arise when the mother develops a relationship with another man who begins to serve as the child's social father. In these cases, questions arise about what approach the program should take in terms of encouraging involvement in program activities and whether the biological or social father (or both) should be the one principally involved. (4)

These are complicated matters that cannot be resolved by categorical decisions about father involvement. However, they do suggest a couple of general directions. One core element of effective father involvement might be a program's role in helping mothers and fathers continue to parent together or in some way cooperate in parenting, even if their relationship as adult partners has changed or ended. In focus group discussions, staff emphasized the need to help mothers understand the importance of fathers in their children's lives and to help fathers understand their importance in "being there" not only for the child but also for the mother's parenting efforts. Effective father involvement may also depend on a program's ability to support both mothers and fathers around the issue of father involvement. In other words, ambivalent feelings of mothers around father involvement need to be given serious and empathetic attention as part of the process of strengthening father involvement.

PSYCHOLOGICAL ISSUES

Barely mentioned in focus group discussions, psychological issues emerged as significant barriers to effective father involvement in the family stories shared by home-visiting staff. These issues include low self-esteem and lack of self-confidence, serious conflicts in primary relationships, domestic violence, history of abuse or abandonment during the father's own childhood, clinical symptoms of mental illness, and developmental immaturity. The following case provides a good illustration of such dynamics and how they intersect with issues of employment and relationships:

```
Darnell and Chardea are a young couple who were expecting their
first child at the time of our study. Darnell already served as a
social father to Chardea's two older daughters who lived with her
aunt in the same small town. Darnell and Chardea were very
happy with each other, had married about a year previously, and
```

were excited about the impending birth. On the surface, the primary
difficulties experienced by this family appeared to be economic,
in particular budgeting issues and Darnell's lack of
employment. However, as the home visitor related the family's
story, several underlying issues emerged.

   Though in his mid-20s, Darnell had never held a job for longer
than a month or two and had never been employed in the Pittsburgh
area. When his home visitor helped him set up a job interview, he
didn't go, claiming he didn't have a bus ticket (the EHS program
provides both van rides and bus tickets when needed). Commenting
on Chardea's employment, Darnell told their home visitor: "She's
working.... I don't want a wife who's lazy."

   Darnell spent most of his days at home playing video games,
rarely went outside, and had no friends. Both he and Chardea
spent a lot of money on "non-necessities," leaving the family
strapped in terms of basics. When his home visitor urged him to
make a phone call to a local program offering free baby furniture,
Darnell became frightened and hung up. However, after the home
visitor encouraged and role-played this conversation with him, he
was able to make the call and was delighted with this
accomplishment. Darnell was receiving SSI "because of developmental
delays." While his home visitor questioned this diagnosis, he did
think Darnell was developmentally immature and had significant
difficulties in prioritizing, making decisions, and realistically
assessing his life circumstances and options. The group discussion
among home visitors raised additional questions about Darnell's
self-esteem and whether he might be willing to talk with the family
therapist who made home visits to EHS families.

   In a formal sense, Darnell was very uninvolved in the program.
In other words, he didn't participate in scheduled home visits
or come to activities at the program center. However, the home
visitor's general presence in the community and his close
engagement with program families gave him the opportunity to
informally get to know and talk with Darnell. In fact, he seemed to
have developed a strong relationship with this young man and to
be playing a central role in developing his sense of fatherhood. At
the conclusion of our study, Darnell had begun to come to some
parent committee meetings, including a "parent buck auction"
where parents could bid with vouchers (acquired as a result of
program participation) for various household goods. Darnell was one
of the most vigorous bidders, focusing his attention only on baby
items and winning several that would certainly be helpful when
his new son or daughter arrived.

It may be significant that psychological problems, very prominent in this case study, were
not highlighted in focus groups. This suggests issues of mental health, frequently
discussed by staff in relation to mothers, may not be explicitly recognized as factors
influencing father involvement. This is likely related to gendered assumptions about
susceptibility to psychological problems and willingness to talk about and explore
feelings, as staff are much more aware of and proactive about these issues for mothers
and mother-child relationships than for fathers. This raises a question about whether the

relative lack of attention to men's emotional and psychological health potentially undermines father involvement efforts.

SUCCESSFUL STRATEGIES

The Family Foundations EHS program has developed several successful strategies that promote and support father involvement. But when we asked program staff about "what worked and why," or when they told us stories about "getting fathers involved," they had difficulty answering our questions or linking such successes to what the program did or how it functioned. Instead they focused on the characteristics and strengths of the fathers and families themselves. We would suggest, however, that this focus on a father's and a family's strengths might itself represent an aspect of successful engagement of fathers. This strategy, of course, reflects the general strengths-based approach of the Pittsburgh EHS program.

General program model. We begin, therefore, with aspects of the program's general model and approach to working with families that we believe also contribute to effective father involvement. Again, these were rarely articulated by staff but rather emerge from our observations of program functioning and analysis of what staff told us about their work with fathers. Besides a strengths-based approach (i.e., helping families, and in this case, fathers, discover and build on their strengths rather than focusing on deficits or problems), of most importance is the program's relationship-based approach.

One of the most effective ways to encourage father involvement is for staff to build relationships with fathers as they do with mothers. This relationship-building happens at the most basic level. For example, early on in the program's history, each community center was decorated with beautiful pictures of mothers and children, with the intention of providing a welcoming space for EHS parents. But only later, when pictures of men and children were added to the decor, did these sites become truly welcoming spaces for fathers as well as mothers.

In relating a story about spending the day in court with a father, one home visitor stated: "It's important that families know you care enough to be there with them all day ... and that you really know them so that you can tell the court about them." Another home visitor who was working with a family in which the father's unemployment was a barrier to progress on family goals notes: "I have developed a relationship [with the father] where I can say to him, 'What about YOU getting a job?'" To a father going through a hard time, including losing custody of his children to child protective services, a home visitor said, "Come on ... you've got to give me one smile and come to fathers group." Staff-father relationships have important instrumental dimensions, but more significant is the development of trust and the father's assurance that the staff member "cares." This is very similar to the program's approach to working with mothers. What differs is the degree to which staff explicitly recognize relationship-building as a pathway to parental involvement.

A closely related aspect of the Family Foundations program model is its team approach. This means that a number of staff persons with different professional roles, personalities, backgrounds, and sometimes different genders work together with one family. While a single home visitor usually meets regularly with a family, other core EHS staff (i.e., child development specialists, parent involvement specialists, and site coordinators) as well as subcontracted staff, such as public health nurses, mental health counselors, drug and alcohol specialists, even van drivers, are all available to work with families. This facilitates relationship-building as discussed above, in that it allows fathers to work most closely with a staff person with whom they are able to form a positive relationship. It also allows flexibility in working with families so that one staff member might meet with the mother and another with the father while coordinating work on child development and family goals.

The following case, alluded to above in our discussion of staff-family relationships, provides a good illustration of how these program factors work together to mutually support effective father involvement:

> Sallie Mae and Tim are young parents in their early 20s with two young daughters. Both parents were very involved in Family Foundations, regularly keeping home visits and coming to parent committee meetings and other activities at the program center. For a whole year, Tim attended the special fathers group at his program site, never missing a meeting.
>
> The major issue in this family was the persistent conflict between the parents, a conflict linked to issues of employment and unemployment. When they were both in the home and not fighting, Tim participated actively in home visits, engaging in the parent-child interactions guided by the home visitor as well as in discussions of family goals. He also encouraged Sallie Mae's involvement with the program. However, when the conflict escalated or when Tim left the home, this disrupted his participation in both home visiting and in the fathers group.
>
> When their daughters were ages two and three, they were removed from the home by child protective services. EHS staff questioned this decision but agreed that the parents needed help to bring their sometimes violent conflicts under control. In spite of the involvement of child protection services staff, EHS staff continued their home visits, with two home visitors working jointly with the family. One of these was a male staff member who ran the fathers group and had a strong relationship with Tim; the other was a young woman whose expertise was in child development and parent-child relationships. They also urged Sallie Mae and Tim to meet with the program's mental health specialist for counseling around their relationship and to work on other psychological issues, thus bringing in another member of the neighborhood team.
>
> This intensive work, both with the home visitors and with the mental health specialist, continued for six months. Program staff report that Tim was as engaged as Sallie Mae in both the therapy and the general home visits. At the same time, Tim was encouraged to return to the fathers group where more mature dads played

a key role in emphasizing the importance of fathers being in the home to younger dads like Tim.

The family's home visitors, along with the site coordinator, also played a critical role in supporting these parents' efforts to regain custody of their children. Home visitors worked jointly with the family and child protective services. They accompanied the parents to court hearings and provided testimony. They spent considerable time, in addition to weekly home visits, working with Sallie Mae and Tim to prepare them for the return of their daughters. They also helped the family obtain a better apartment and the funds to pay for it. In all of this, the home visitors continually encouraged and supported Tim's participation in the whole process that eventually led to the successful reconciliation and reunification of the family.

Program staff point to several factors that were key in encouraging this young father's involvement in the program and his engagement with his family and children. Perhaps of most importance was the building of trust between home visitors and the father. In other words, the relationship piece was primary. By relating to Tim in a respectful and caring way and helping him to identify his own strengths, Tim came to accept that EHS staff were them to "work with" him, not to "check up" on him. This trust was then enacted and reinforced in the practical support given at court hearings and meetings with child protective services. The team approach of the program was also important. This allowed flexibility in home visiting, reinforced the sense of being accompanied through the process of reunification of parents and children, and helped coordinate the support being offered through the multiple venues of home visits, fathers group, and parent committee activities. It also meant that the specialized therapeutic services offered this family were delivered within a team that had already developed lines of trust with the family, including the father, rather than through an outside agency. Home visitors felt this might have been a critical factor in engaging the father as well as the mother in the whole array of services and activities that helped this family make positive changes of benefit to their children.

An additional and related dimension of program function that deserves mention is the commitment of program leadership to engage in ongoing critical and reflective thinking and regular self-evaluations. This includes their own examination of cases like that of Tim and Sallie Mae. While led by program management, this process engages the whole staff through various venues such as team meetings at community sites, cross-site meetings, and interactive trainings. This orientation was, of course, key to the evolution in thinking and practice about father involvement as discussed above.

These general program elements (i.e., a strengths-based approach, a focus on relationship-building, team work, and reflective thinking) work together to provide a foundation for effective father involvement. Our analysis suggests that basic approaches rather than particular activities are key to successful parental involvement, whether the parent is male or female. At the same time, there are some additional program orientations or strategies that specifically foster father involvement.

Specific strategies. Perhaps of most importance is the recognition and treatment of fathers as full co-parents and as potential nurturers of children. This is an evolving and ongoing process in the Pittsburgh EHS program, sometimes needing reinforcement by program leadership. For example, during our discussions with home visitors, one person noted that he readily carried out activities with the father and child, "if the mother was not home or not available." Another home visitor, however, talked about how she "always asked the father as well as the mother how the kids are doing, and to come to program activities." Related to this program evolution is growing alertness to the father's emotional engagement with and interest in his children's development.

The availability of a diversity of activities--for example, home visits, parent/child socializations open to both fathers and mothers, father support groups, and governance opportunities--allow fathers to find their own way into the program in a manner most comfortable to them. The case studies of father involvement illustrated the way staff sometimes "pulled the father back in a round-about way" when he temporarily became uncomfortable with or withdrew from one type of program service. In this way, fathers were encouraged to continue involvement in the program at some level and thus continue program support for their child's development even if they dropped out of specific activities. This is especially important given the transitory nature of father involvement reported in previous studies (Fagan, 1999; McBride, Rane, & Bae, 2001) and experienced in the Pittsburgh program in relation to special fathers-only activities.

As noted earlier, psychological issues such as low self-esteem and conflictual relationships present challenges to father involvement. Some family stories, however, illustrated how providing help with rather than avoiding such issues led to both successful father involvement and improved family and child outcomes. In addition, trusting relationships with home visitors and peer support through fathers groups were helpful in this regard. In terms of the latter, this implies opportunities during fathers-only activities for men to share perceptions and feelings about their experiences as parents.

Though staff-father relationships were key, participant observations as well as case studies revealed the importance of peer relationships in fostering successful father involvement. In the case of the Fathers Reaching Out group discussed earlier, fathers were the most effective recruiters of other fathers, encouraging their involvement. Young fathers, in particular, needed reassurance that other fathers were involved in EHS; in other words, their involvement needed to be "normalized." Staff also noted the positive influence of more experienced fathers on younger fathers. Sometimes these more experienced fathers were program staff, sometimes they were older fathers, either enrolled in EHS or from the community, who participated in special father activities.

A whole program approach. In order for these strategies to be successful, they had to be integrated into existing program components and become fundamental parts of a whole program approach to father involvement. In the case of the Pittsburgh EHS program, a critical turning point occurred when father involvement became integral to the work of home visitors and an important part of the home-visiting process as well as central to the program's core mission of child health and development. Assisting in this transformation

was a new recruitment strategy, whereby staff attempted to enroll the whole family during initial door-to-door canvassing, trying from the beginning to involve fathers as well as mothers in all program services and activities, not just in special "father involvement" program components. We have noted above the importance of working with mothers as well as fathers around the question of father involvement, thus making father involvement a family matter, not a matter for men alone. Likewise, vehicles (e.g., regular trainings and meetings) had to be developed for all staff, not just for male staff or staff who have special expertise or interest in working with fathers, to help them assimilate and implement evolving program thinking and practices around father involvement. While these ideals are not always realized, their articulation as program goals has changed the basic framework of father involvement in this EHS program.

CONCLUSIONS AND FUTURE DIRECTIONS

This study of father involvement in one Early Head Start program used a number of qualitative methods to develop an in-depth and multi-faceted understanding of the efforts and challenges of program staff in working with fathers of EHS children. The study's close-up look at staff experiences and program process, combined with its focus on father involvement in a home-visiting program and with children during their earliest years of life, contributes a number of new insights to both practice and research in the field of father involvement.

Of most significance is our conclusion that effective program involvement of fathers requires the evolution or maturing of a program so that not only new and more diverse activities are offered to men but also program thinking fundamentally changes by developing a more complex and comprehensive understanding of fathering. This process itself requires a reflective and self-critical approach to program services, with opportunities for program management and staff to evaluate and learn from their own experiences as well as to incorporate the perspectives of participating parents.

A second major contribution of this study is the insight that this developmental process must entail the application of general program approaches and principles to work with fathers to the same degree that such approaches and principles are applied to work with mothers. In the case of the Pittsburgh program, this included using a relationship-focused and strengths-based approach, individualizing program services, and employing effective teamwork. We suggest that these specific approaches may themselves be of particular value in working with fathers, especially in home-visiting programs that require long-term and intense engagements between families and program staff.

At the same time, father involvement must become anchored in the primary program vehicle(s) for service delivery--in the Pittsburgh case, home visiting--and in central program activities, for example, home visits, infant-toddler socializations, and parent committee meetings. This does not mean special fathers-only activities are not important but rather that father involvement needs to be integrated into core program components and not marginalized as a side-line operation. Such integration both depends on and fosters a view of fathers as full co-parents, as nurturers as well as providers. It also helps

orient father involvement efforts toward primary program goals such as promoting the health and development of children through building and supporting effective parenting. While this integration can occur in all kinds of program models, the study reported here indicates that programs can develop effective father involvement in home-visitation models focused on services for infants and toddlers.

Another contribution of this study concerns the issue of staffing patterns in relation to father involvement. While a staff member with specific responsibility for father involvement may facilitate the realization of this program objective, the Pittsburgh study suggests that it is important for all program staff to develop an understanding of father involvement as a key aspect of their work with program families. This "whole program" approach also means that staff may need to work with mothers as well as fathers around the issue of father involvement, respecting and addressing mothers' as well as fathers' concerns. At the same time, emotional issues of adult development and parenting must be addressed with fathers just as with mothers. In this way, father involvement becomes another aspect of family development--a general EHS goal--oriented toward supporting the development of the young child.

In spite of the use of effective father-involvement strategies, our study indicates that significant challenges and barriers remain to engaging fathers in program activities and in the lives of their infants and toddlers. Most of these challenges or barriers are not under the control of either individual fathers or early childhood programs, and many have an economic dimension. In particular, the conditions of employment and the prevalence of underemployment and unemployment in the lives of EHS fathers mitigate against their confident involvement either with their own children or in child and family development programs. Our study reinforces the conclusions of previous studies that conditions of poverty and economic insecurity undermine father involvement efforts just as they undermine the general parenting and child health and development goals of early childhood programs. Our close-up look at program thinking contributes the insight that general societal norms as well as program cultures may exacerbate these problems because of the persistent assumption that men financially provide while women nurture, actual life experiences notwithstanding.

All of this suggests the need for further research. Some of the emergent themes about father involvement discussed above would benefit from additional close-up examinations of individual program efforts to involve fathers (i.e., more qualitative studies of what works, for whom, how, and why). There are also important questions that were outside the parameters of our Pittsburgh study that could be addressed in further qualitative research. For example, it is necessary to develop a fuller understanding of how the kind of program evolution reported here affects the quality of fathers' engagement with their children and the subsequent impact on the children themselves. It would also be valuable to know whether and how programs are able to maintain involvement of individual fathers over time as their children mature and transition from early childhood to preschool programs and then to public schools.

Going beyond this close-up focus on program development, we suggest that those of us concerned about these matters must also engage in a broader re-examination of questions of gender, work, caregiving, and poverty. These dimensions of family life intersect in increasingly complex ways and are mutually influenced by rapidly changing economic structures and largely unchanging ideological constructions. Some understanding of how these factors work in the lives of women has been developed over the past few decades, but they remain largely unexamined for men. Particularly missing are the implications of these dynamics for programs attempting to encourage father involvement and parenting by both fathers and mothers. A better understanding of this larger social context will not eliminate barriers to father involvement but may prepare early childhood programs to help individual families more effectively negotiate these challenges. It might also contribute to efforts to create better economic and social policies that truly support parenting whether it is undertaken by women or by men.

NOTES

(1.) This ethnographic research was conducted first as part of the Comprehensive Child Development Project's implementation study and then as a core aspect of the local Pittsburgh component of the national EHS Research and Evaluation Project.

(2.) These interviews were conducted as part of the national EHS Fathers Studies (see Cabrera et al., 2002).

(3.) All names of family members, as well as some demographic details, have been changed to maintain confidentiality.

(4.) In another study with Family Foundations that focused on family risks, staff raised particular concerns when mothers pursued the dream of companionship and romantic love through serial relationships with several men, each of whom briefly played some father role in the child's life.

REFERENCES

Ahmeduzzaman, M., & Roopnarine, J.L. (1992). Sociodemographic factors, functioning style, social support, and fathers' involvement with preschoolers in African-American families. Journal of Marriage and the Family, 54, 699-707.

Bangs, R.L., & Hong, J.H. (1996). Pittsburgh benchmarks: Black and white quality of life in the City of Pittsburgh and Allegheny County. Pittsburgh: University Center for Social and Urban Research, University of Pittsburgh.

Bangs, R.L., Kerchis, C.Z., & Weldon, L. (1997). Basic living cost and living wage estimates for Pittsburgh and Allegheny County. Pittsburgh: University Center for Social and Urban Research, University of Pittsburgh.

Baum, M., Shore, B., & Fleissner, K. (1988). When unemployment strikes: The impact on women in families. Pittsburgh: School of Social Work, University of Pittsburgh: River Communities Project.

Braver, S.L., & Griffin, W.A. (2000). Engaging fathers in the post-divorce family. Marriage & Family Review, 29(4), 247-267.

Bronfenbrenner, U. (1979). The ecology of human development. Cambridge, MA: Harvard University Press.

Bronfenbrenner, U., & Ceci, S.J. (1994). Nature-nurture reconceptualized in developmental perspective: A bioecological model. Psychological Review, 101,568-586.

Burawoy, M. (1991). Reconstructing social theories. In M. Burawoy, A. Burton, A.A. Ferguson, K. Fox, J. Gamson, N. Gartrell, et. al. (Eds.), Ethnography unbound: Power and resistance in the modern metropolis (pp. 8-27). Berkeley: University of California Press.

Cabrera, N., & Peters, H.E. (2000). Public policies and father involvement. Marriage and Family Review, 29(4), 295-314.

Cabrera, N., Brooks-Gunn, J., Moore, K., West, J., Boiler, K., & Tamis-Lemonda, C.S. (2002). Bridging research and policy: Including fathers of young children in national studies. In C.S. Tamis-Lemonda & N. Cabrera (Eds.), Handbook of father involvement: Multidisciplinary perspectives (pp. 489-523). Mahwah, NJ: Erlbaum.

Carter, N. (1996). See how we grow: A report on the status of parenting education in the U.S. Philadelphia: The Pew Charitable Trusts.

Fagan, J. (2000). Head Start fathers' daily hassles and involvement with their children. Journal of Family Issues, 21, 329-346.

Fagan, J. (1999). Predictors of father and father figure involvement in pre-kindergarten Head Start. Philadelphia: National Center on Fathers and Families.

Fagan, J. (1996). Principles for developing male involvement programs in early childhood settings: A personal experience. Young Children, 51(4), 64-71.

Fagan, J., & Iglesias, A. (1999). Father involvement program effects on fathers, father figures, and their Head Start children: A quasi-experimental study. Early Childhood Research Quarterly, 14(2), 243-269.

Fagan, J., Newash, N., & Schloesser, A. (2000). Female caregivers' perceptions of fathers' and significant adult males' involvement with their Head Start children. Families in Society, 81, 186-196.

Garinger, J.G., & McBride, B.A. (1995). Successful parent involvement strategies in prekindergarten at-risk programs. School Community Journal, 5(2), 59-77.

Geertz, C. (1973). The interpretation of cultures. New York: Basic Books.

Glaser, B., & Strauss, A. (1967). The discovery of grounded theory. Chicago: Aldine.

Green, B.L., & McAllister, C. (1998). Theory-based, participatory evaluation: A powerful tool for evaluating family support programs. Zero to Three, 18(4), 30-36.

Hammersley, M., & Atkinson, P. (1995). Ethnography: Principles in practice. London: Routledge.

Harris, K.M., & Manner, J.K. (1996). Poverty, paternal involvement, and adolescent well-being. Journal of Family Issues, 17, 614-640.

Jarrett, R.L., Roy, K.M., & Burton, L.M. (2002). Fathers in the "hood": insights from qualitative research on low-income African-American men. In C.S. Tamis-Lemonda &

N. Cabrera (Eds.), Handbook of father involvement: Multidisciplinary perspectives (pp. 211-248). Mahwah, NJ: Erlbaum.

Lamb, M.E. (2000). The history of research on father involvement: An overview. Marriage & Family Review, 29(2-3), 23-42.

Levine, J.A. (1993). Involving fathers in Head Start: A framework for public policy and program development. Families in Society, 74, 4-19.

Lock, M., & Scheper-Hughes, N. (1996). A critical-interpretive approach in medical anthropology: Rituals and routines of discipline and dissent. In C.F. Sargent & T.M. Johnson (Eds.), Medical anthropology: Contemporary theory and method (pp. 41-70). Westport, CN: Praeger.

Love, J.M., Kisker, E.E., Ross, C.M., Schochet, P.Z., Brooks-Gunn, J., Paulsell, D., et al. (2002). Making a difference in the lives of infants and toddlers and their families: The impacts of Early Head Start. Washington: Child Outcomes Research and Evaluation, Office of Planning, Research, and Evaluation, Administration of Children, Youth, and Families, Department of Health and Human Services.

Marsiglio, W., & Cohan, M. (2000). Contextualizing father involvement and paternal influence: Sociological and qualitative themes. Marriage and Family Review, 29(2-3), 75-95.

McAdoo, J.L. (1988). The roles of black fathers in the socialization of black children. In H.P. McAdoo (Ed.), Black families (pp. 257-69). Newbury Park, CA: Sage.

McAllister, C.L. (2001). Early Head Start community assessment. Pittsburgh: Office of Child Development, University of Pittsburgh.

McAllister, C.L., Green, B.L., Terry, M.A., Herman, V., & Mulvey, L. (2003). Parents, practitioners, and researchers: Community-based participatory research with Early Head Start. American Journal of Public Health, 93, 1672-1679.

McBride, B.A., & Darragh, J. (1995). Interpreting the data on father involvement: Implications for parenting programs for men. Families in Society, 76, 490-497.

McBride, B.A., Rane, T.R., & Bae, J. (2001). Intervening with teachers to encourage father/male involvement in early childhood programs. Early Childhood Research Quarterly, 16, 77-93.

Nelson, T.J., Clampet-Lundquist, S., & Edin, K. (2002). Sustaining fragile fatherhood: Father involvement among low-income, noncustodial African-American fathers in Philadelphia. In C.S. Tamis-Lemonda & N. Cabrera (Eds.), Handbook of father involvement: Multidisciplinary perspectives (pp. 525-554). Mahwah, NJ: Erlbaum.

Olds, D.L., Henderson, C.R., Cole R., Eckenrode, J., Kitzman, H., Luckey, D., et al. (1998). Long-term effects of nurse home visitation on children's criminal and anti-social behavior: 15 year follow-up of a randomized controlled trial. JAMA, 280, 1238-1244.

Olds, D.L., Henderson, C.R., Kitzman, H.J., Eckenrode, J., Cole, R.E., & Tatelbaum, R.C. (1999). Prenatal and infancy home visitation by nurses: Recent findings. The Future of Children--Home Visiting: Recent Program Evaluations, 9(1), 44-65.

Raikes, H., Boller, K., vanKammen, W., Summers, J., Raikes, A., Laible, D., et al. (2002). Father involvement in Early Head Start programs: A practitioners study. Lincoln, Nebraska: The Gallup Organization.

Sanjek, R. (Ed.). (1990). Fieldnotes: The makings of anthropology. Ithaca: Cornell University Press.

Scheper-Hughes, N. (1990). Three propositions for a critically applied medical anthropology. Social Science & Medicine, 30(2), 189-197.

Scheper-Hughes, N. (1992). Death without weeping: The violence of everyday life in Brazil. Berkeley: University of California Press.

Shonkoff, J.P., & Phillips, D.A. (Eds.) (2000). From neurons to neighborhoods: The science of early childhood development. Washington, DC: National Academy Press.

Stack, C.B. (1974). All our kin." Strategies for survival in a black community. New York: Harper & Row.

Volling, B.L., & Belsky, J. (1991). Multiple determinants of father involvement during infancy in dual-earner and single-earner families. Journal of Marriage and the Family, 53, 461-474.

CAROL L. MCALLISTER

University of Pittsburgh

JEFFREY BURTON

Family Foundations Early Head Start Program

PATRICK C. WILSON

University of Lethbridge, Canada

Correspondence concerning this article should be addressed to Carol L. McAllister, Department of Behavioral and Community Health Sciences, 220 Parran Hall, Graduate

School of Public Health, University of Pittsburgh, Pittsburgh, PA 15261. Electronic mail: allister@pitt.edu.