



Summary of Formative Evaluation Findings: Doctor Dad™ Pilot Test *Center for Social Work Research University of Texas at Austin Spring, 2004*

This report is a summary of a formative-evaluation study on the Doctor Dad™ workshop and curriculum conducted by the Center for Social Work Research at the University of Texas at Austin. The formative evaluation was part of a pilot test to assess the effectiveness and impact of Doctor Dad™. Kathleen A. Casey, MA, Lori Holleran, PhD, ACSW, and Susan A. Stone, JD, MD authored the original report.

Introduction

Promoting health and recognizing illness in young children are not intuitive skills and many fathers lack the knowledge, skills, and confidence to safely care for the health and well-being of their children. The National Fatherhood Initiative's (NFI) Doctor Dad™ workshop was created in 2002 specifically to address this concern. Designed by a physician and a registered nurse, Doctor Dad™ is an 8-hour workshop that empowers fathers to play an active role in their child's healthcare.

The Doctor Dad™ curriculum has two primary objectives: 1) to increase fathers' parenting skills in the area of infant and toddler health; and (2) to help fathers realize that they play a unique role in caring for their children. The curriculum is designed to provide an interactive, structured learning experience that includes four, two-hour topics:

- I. The Well Child
- II. The Sick Child
- III. The Injured Child
- IV. The Safe Child

The Doctor Dad™ workshop is implemented in a variety of settings such as healthcare centers, hospitals, birthing centers, Head Starts, and churches. Because organizations often need flexibility in how they deliver the workshop, they can either implement all four two-hour sessions as a one or two-day workshop, or they can implement individual sessions weekly, bi-weekly, or monthly, until all four sessions are complete.

Overview of the Study

University of Texas staff conducted the Doctor Dad™ evaluation in the Fall of 2003 and Spring of 2004 in Arizona, Oklahoma, and Washington. NFI identified several community-based organizations in each state whose staff NFI trained to deliver the workshops and recruit fathers to attend the workshop. The fathers who participated in the workshops represented a culturally and socio-economically diverse group of men. The goal of the evaluation was to assess the effectiveness of the Doctor Dad™ curriculum and provide NFI with feedback to improve the Doctor Dad™ curriculum and its workshops.

The evaluation used a simple pre-test/post-test design with components that measured outputs, outcomes, and fidelity to the program model (i.e., whether or not the workshop was administered correctly.) Evaluators collected data through observation, trainer evaluation, participant self-reports, and participant feedback.

Evaluators used a checklist of workshop activities to measure program outputs. NFI staff who participated in the evaluation also completed an 8-item form as they observed the workshops.

Evaluators used two surveys to measure outcomes. The first was an 8-item satisfaction questionnaire that fathers completed at the end of the workshop. The second was a pre-test/post-test survey that measured knowledge, skills, and attitudes related to the learning objectives of the Doctor Dad™ curriculum.

Findings

The overall results of the evaluation were positive and provided NFI with a wealth of invaluable information and feedback. Participant outcomes, program outputs, and information regarding how organizations administered the workshop are discussed below.

FINDINGS FROM THE WORKSHOPS

I. Pre/Post-test Scores

Fathers completing the pre/post surveys on average scored 45% mastery of the workshop content on the pre-test and 87% mastery on the post test, which was a statistically significant improvement ($p < .05$) and indicated that the workshop increased these fathers' knowledge and skills in the area of infant and toddler healthcare.

II. Evaluation Observations and Fathers' Feedback

Fathers were enthusiastic and asked a lot of questions, which suggests that fathers were engaged by the material. Fathers perceived the facilitators as personable and caring and appreciated facilitators making an extra effort to include community-specific information (e.g., where to seek assistance in an emergency).

Even though the facilitators were personable and caring, there was room to improve on facilitation skills. Some facilitators allowed fathers to carry on side conversations and some fathers to dominate the discussions. Some facilitators had difficulty handling challenging questions. Facilitators had difficulty answering questions about child abuse laws, for example, which vary by state. Finally, facilitators did not consistently distribute certificates to fathers that they should have distributed to show fathers' attendance.

The most significant problem dealt with logistics of the workshops. Organization staff did not inform some fathers about the workshop start time, location, and the purpose of the workshop. Fathers also suggested a more interactive format, rather than one that resembles a lecture. Fathers made valuable suggestions on the order in which facilitators should present the information, such as discussing nutrition before immunizations.

FINDINGS FROM THE TRAINING INSTITUTES

I. Perceived Strengths

Facilitators thought the content of the curriculum was useful and appropriate, and reported that overall they liked the institute. Furthermore, facilitators had a good grasp of the content of the curriculum. Evaluators noted that the trainers did a good job covering the learning objectives, that the trainers were very enthusiastic about delivering the institute, and that the trainers paid attention to facilitators' questions and feedback.

II. Areas in Need of Improvement

The area most in need of improvement revolved around logistics of the training institute. Failure to prepare the rooms and settings ahead of time resulted in delays in starting the institute. This lack of attention to detail was particularly frustrating for facilitators who traveled great distances to attend the institute. There was also some confusion among participating organizations on the staff that should attend the training institute and on the purpose of the institute.

The length of the institute also varied from site to site. Trainers conducted some of the institutes in 4 hours, others in 8 hours. Some facilitators thought that the institute was too long and expressed a desire for a more interactive format, rather than a didactic, lecture-style institute.

III. Outcome Data

Facilitators gave the training institute an average rating of "good." Facilitators also commented that they valued the curriculum content and that they were excited to facilitate the workshop. Facilitators were committed to providing the workshop, grateful that NFI created Doctor Dad™, and thoroughly enjoyed the training institute.

NFI's Response

Because of favorable feedback regarding the curriculum content, NFI made few content changes to the curriculum with the exception that NFI created interactive, hands-on exercises for fathers that increase their skills in caring for their children, that make the workshop more enjoyable, and that take advantage of group dynamics to enhance learning. The evaluation data suggested that most of the problems facilitators encountered were logistical in nature. Below is an overview of how NFI responded to the evaluation findings.

Curriculum Materials

- ❖ All of the content in the first version of the Doctor Dad™ curriculum was contained in a single binder. NFI also provided facilitators with a PowerPoint® presentation to use during the workshop. The binder included all of the information that the facilitator needed to deliver the workshop as well as handouts facilitators could copy and provide to fathers. NFI divided the binder into two materials: a workshop manual that facilitators use to deliver the workshop and a fathering handbook that fathers use during the workshop and that they can keep as a reference. NFI also developed a facilitator's guide that explains the history behind the development of the workshop and the philosophy and values behind the workshop, and that provides tips on, among other things, facilitation and marketing the workshop.
- ❖ NFI also revised the presentation of the content for facilitators. The workshop manual now contains the approximate time needed to conduct each session of the curriculum, the goals of each session, and "Pre-Session Procedures" that identify the materials facilitators need to deliver each session and other preparation activities that will make each session run smoothly. The PowerPoint® slides are now integrated with the workshop manual so that facilitators can see exactly which slide they should show when they are delivering information on a topic. The manual also includes a suggested script for each session. This script lends consistency to the workshop even if the facilitator changes. NFI also revised the content to help facilitators answer questions that fathers might have about a particular topic.

Training Institutes

- ❖ The format of the training institutes now allows for more time spent on helping facilitators learn how to use the curriculum, and less time spent reviewing curriculum content.
- ❖ NFI now offers training institutes in two format—as a one-day or two-day institute—so organizations can select a more comprehensive training (two-day) if they need or want it.
- ❖ Other modifications to the institute include facilitators practicing the interactive, "hands-on" activities that they will use with fathers during the workshop. This change has made the institutes more enjoyable and helps facilitators present information to fathers in a more fun and interactive manner.

For more information on this evaluation, please contact Jana Olshansky, MS, NFI's Director of Evaluation, at jolshansky@fatherhood.org.