

# Using CBPR\* to Assess Risk, Resilience, and Depressive Symptoms in Low-Income African American Fathers

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*\*Community based participatory research methods*



# What is Community Based Participatory Research (CBPR)?

- CBPR involves research scientists working together with community members as a team through all stages of research.
- Developed as an ethical way to conduct research within disadvantaged communities in the context of historical research injustices.
- Community participation in CBPR can yield higher response rates and retention in longitudinal studies.
- CBPR also enables the development of culturally appropriate procedures and measures.

*Israel et al., 1998; Shalowitz et al., 2009*

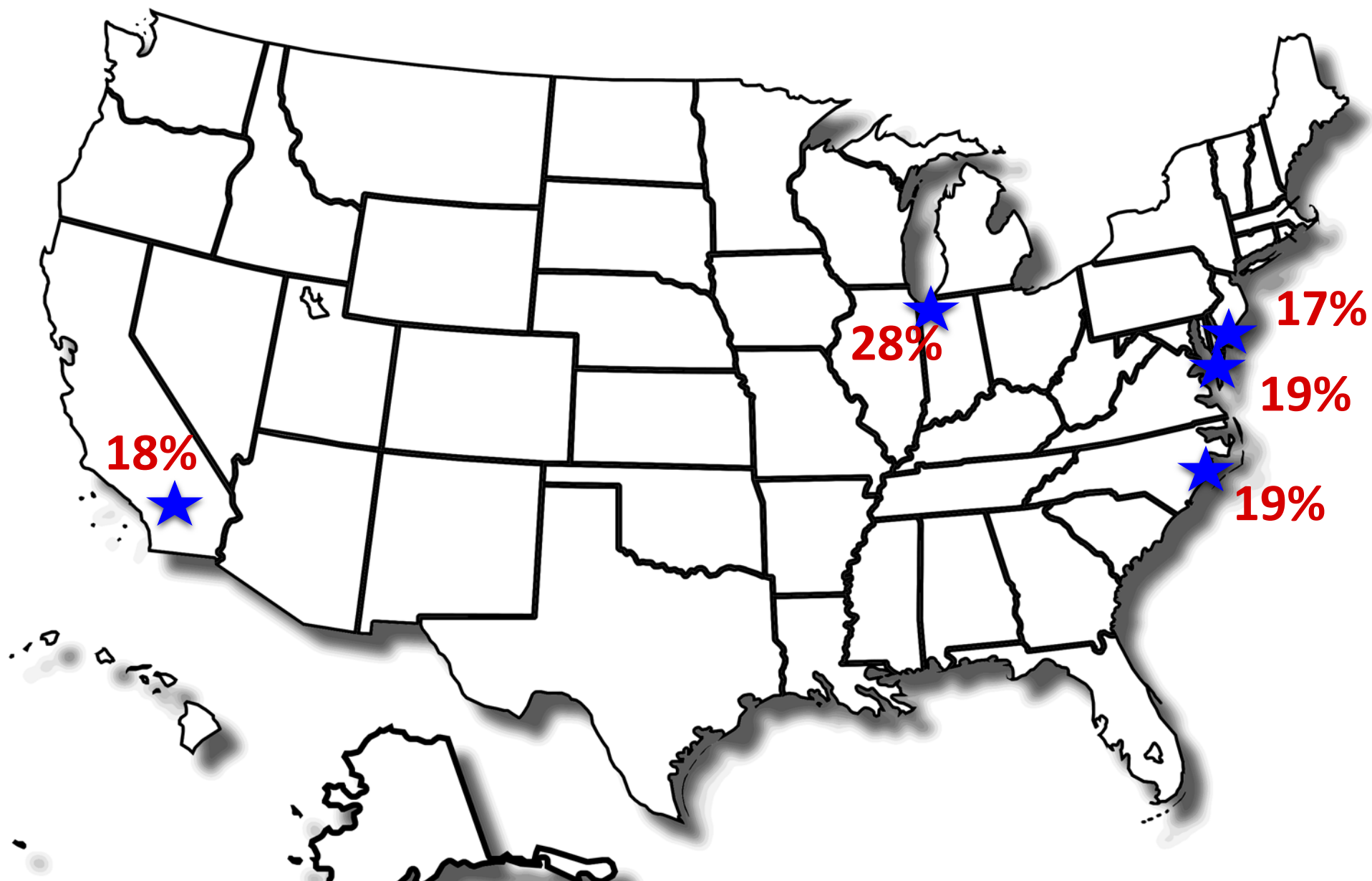
# Community Child Health Network (CCHN)

- Formed to understand racial/ethnic and SES health disparities in low-income African Americans and Latinos through CBPR.
- CCHN has five sites: Baltimore, Washington D.C., several counties in eastern North Carolina, Lake County, IL, Los Angeles County
- Mothers and fathers were recruited at the birth of a child and followed for two years at roughly 6 month intervals.



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# CCHN Study Sites



# CBPR Core Values

- **Value 1:** It is participatory.
- **Value 2:** It is cooperative.
- **Value 3:** It is a co-learning process where there is mutual exchange and mutual learning.
- **Value 4:** It builds on the strengths of the community.
- **Value 5:** It is empowering to the community.
- **Value 6:** It entails implementing an intervention.
- **Value 7:** It entails recognizing the community as a social entity.
- **Value 8:** It requires a long-term commitment.

*Israel et al., 1998; Jones et al., 2010; Ramey et al., 2014; Shalowitz et al., 2009*

# Sample

- 2,448 mothers completed the T1 interview
- 2,305 (94%) indicated they were married to or in a relationship with the father of their child
- 1,923 (76%) gave permission to contact the father
- 1,179 (48%) fathers enrolled and completed the T1 interview

# Factors in Recruitment and Retention

**Maternal** factors related to mother permitting us to invite fathers to participate, fathers agreeing to participate, and staying in the study:

- Older age
- Married
- More educated
- Higher income
- Cohabiting with the baby's father
- Living in the same location for at least 6 months
- Less likely exposed to interpersonal violence
- Higher relationship satisfaction

*Schafer et al., 2014*

# Sample Characteristics (n = 1,179 Fathers)

- Race/Ethnicity
  - 46% African American
  - 26% Latino
  - 25% White
  - 3% Other
- 23% Foreign Born
- Mean Age = 29 yrs (17 – 62 yrs)
- Marriage and Cohabitation
  - 40% Married and Cohabiting
  - 36% Cohabiting, Not Married
  - 23% Neither Married nor Cohabiting



# CCHN Fathers: SES Indicators

- Household Income Adjusted for Cost of Living
  - Mean income = \$15,955 (SD = \$25,929)
- Education
  - 24% Less than HS
  - 43% HS Diploma
  - 33% Some college, 4 year degree, or higher
- Employment
  - 70% Employed Part-Time or Full-Time
  - 20% Unemployed
  - 10% Other

# CDC Report: African American Fathers

- African American fathers are highly involved in the lives of their children.
- In comparison to White or Latino fathers, African American fathers are more likely in the last month to have:
  - Bathed, dressed, diapered, or helped children use the toilet everyday
  - Taken children to and from events and activities
  - Played with non-coresidential children
  - Read to non-coresidential children
  - Talked to children about their day
  - Helped children with homework

*Jones & Mosher, 2013*



# CCHN studied 522 African American Fathers

- Sites
  - North Carolina (29%)
  - Washington D.C. (28%)
  - Baltimore (27%)
- Mean age = 27 (17 - 58)
- Marriage and Cohabitation
  - 22% Married and Cohabiting
  - 41% Cohabiting, Not Married.
  - 36% Neither Married nor Cohabiting

# African American Fathers: SES Indicators

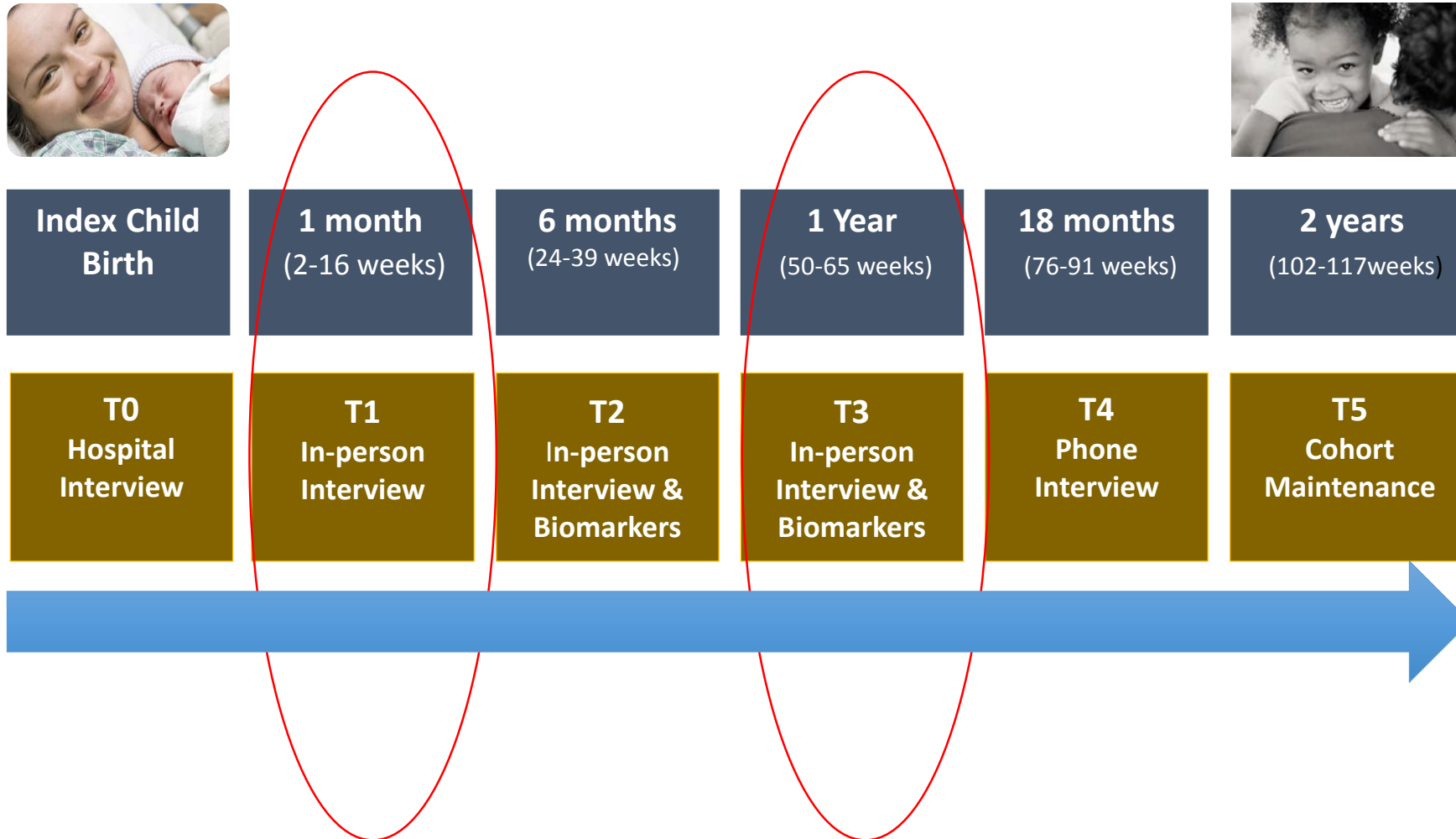
- Household Income Adjusted for Cost of Living
  - Mean Income = \$13,821 (SD = 15,266)
- Education
  - 22% had less than high school degree
  - 55% has a high school degree
  - 23% had some college, a four year degree, or higher
- Employment
  - 55% were working full-time or part-time
  - 33% Unemployed
  - 12% Other

# My Study Goals

1. To characterize low-income African American fathers on attitudes toward fatherhood and psychosocial variables.
2. To identify possible risk and resilience factors one month after birth that predict a **change in** depressive symptoms\* at 12 months after the birth of child.
3. To explore the moderating effects of hypothesized resilience factors on the relationship between risk factors and depression.

\*Measured with *Edinburgh Postnatal Depression Scale (Cox et al., 1987)*

# Community Child Health Network (CCHN) STUDY DESIGN



# Attitudes toward Fatherhood at 12 months after birth in African American Fathers

- A father should be as heavily involved as the mother in the care of the child.
  - 98% of fathers who responded agreed or strongly agreed.
- One of the most important things a father can do for his children is to give their child's mother encouragement and emotional support.
  - 97% of fathers who responded agreed or strongly agreed.
- Fatherhood is a highly rewarding experience.
  - 99% of all fathers who responded agreed or strongly agreed.

# Traditional Stress/Risk Measures

- **Perceived Stress Scale** (Cohen, Kamarck, & Mermelstein, 1983); 10 items
  - In the last month, how often have you been upset because of something that happened unexpectedly?
  - In the last month, how often have you felt that you were unable to control the important things in your life?
- **Life Events Checklist** (Dominguez et al., 2005): 24 items
  - Victim of a violent crime
  - Robbed or burglarized
  - Natural disaster



# Additional Risk Measures

- **Experiences of Racism:** Williams Everyday Discrimination Scale (1997)
  - 10 items
    - You are treated with less courtesy than other people are.
    - You receive poorer service than other people at restaurants or stores.
- **Avoidant Coping Style** (collected at T3):
  - 10 items from Brief COPE (Carver, 1997)
    - I've been turning to work or other activities to take my mind off things. (Self-distraction)
    - I've been saying to myself "this isn't real." (Denial)
    - I've been using alcohol or other drugs to make myself feel better. (Substance use)
    - I've been giving up trying to deal with it. (Behavioral disengagement)
    - I've been criticizing myself. (Self-blame)

# Resilience Measures

- **Collective Efficacy** scale (Earls et al., 1997): 10 items
  - If there is a problem around here, neighbors get together to deal with it.
  - This is a close knit neighborhood.
- **Social Support** scale - MOS (Sherbourne & Stewart, 1991): 19 items
  - Someone who shows you love and affection.
  - Someone who hugs you.
- **Self-esteem** scale (Rosenberg, 1965): 10 items
  - I feel that I have a number of good qualities.
  - I take a positive attitude toward myself.

# Resilience Measures

- **Approach-Oriented Coping Style** (collected at 12 mos after birth)
  - 12 items from Brief COPE (Carver, 1997)
    - I've been taking action to try to make the situation better. (Active coping)
    - I've been getting emotional support from others. (Emotional support)
    - I've been getting help and advice from other people. (Instrumental support)

# Table 1. Correlations among Study Variables

|                           | T1 Depressive SX | T3 Depressive SX |
|---------------------------|------------------|------------------|
| 1. Household Income       | .03              | -.00             |
| 2. Years of Education     | -.11*            | -.00             |
| 3. T1 Perceived Stress    | .66**            | .41**            |
| 4. T1 Racism Frequency    | .27**            | .30**            |
| 5. T1 Life Event Count    | .43**            | .32**            |
| 6. T1 Life Event Impact   | .25**            | .15*             |
| 7. T2 Avoidant Coping     | .41**            | .47**            |
| 8. T1 Social Support      | -.46**           | -.28**           |
| 9. T1 Collective Efficacy | -.15*            | -.13*            |
| 10. T1 Self-esteem Score  | -.48**           | -.27**           |
| 11. T2 Approach Coping    | -.06             | -.09             |

\*p <.05. \*\*p <.01. \*\*\*p <.001.

# Differences Between Depressed and Non-Depressed African American Fathers at One Month

- Depressed fathers had higher
  - Perceived stress
  - Negative life events and impact of life events
  - Experiences of racism
  - Avoidant coping
- Depressed fathers had lower
  - Social support
  - Self-esteem

*Bamishigbin et al., under review.*

# Regression Analyses predicting depressive symptoms at 12 months

- All 8 risk and resilience factors—except for approach-oriented coping—were significant predictors of depressive symptoms in fathers at 12 months after the birth of the child.
- **After controlling for 1 month levels of depressive symptoms, the only significant predictors of depression at 12 months (out of 8) were racism and avoidant coping.**
- None of the other 6 risk factors or resilience factors were significant.
- There were also no interactions of risk and resilience factors.

*Bamishigbin et al., under review*

# Findings and Implications

- **Summary of Findings**

- These low-income African American fathers have very positive attitudes towards fatherhood and have a lot of resources.
- More frequent experiences of racism were related to more depressive symptoms and more avoidant coping was related to more depressive symptoms.

- **Possible Implications**

- These findings run contrary to stereotypes about African American fathers as uninvolved and lazy.
- Also consistent with previous literature demonstrating the harmful associations of racism and avoidant coping for mental health in fathers as well as in mothers.

*Dole et al., 2004*

# Future Directions

- We are currently looking at the relationships of risk and resilience in mothers and fathers in CCHN. For example:
  - Do mothers risk/resilience factors have an effect on a father's depression and vice versa?
- Interventions might be developed to teach the public about the adverse effects of everyday racism based not only on this study but others.
- Interventions could also enhance resilience to help fathers avoid depression after birth
- Interventions might also be implemented to teach fathers more approach-oriented coping strategies and ways to reduce avoidant coping strategies.



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