

PERSPECTIVES OF MOTHERS WITH SUBSTANCE USE PROBLEMS ON FATHER INVOLVEMENT

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ABSTRACT

Background

A number of complex factors contribute to pregnant and parenting women's alcohol and substance use. To date, little research has focused on the implications, meaning and experiences of father involvement on mothers with substance use problems.

Objective

The current study explores the experiences of mothers with substance use problems with respect to the role, impact and meaning of father involvement.

Methods

This study conducted two focus groups utilizing a phenomenological approach. Mothers receiving clinical services at a comprehensive, community based program serving pregnant and parenting women with substance use problems were recruited to participate in this research.

Results

The meaning of father involvement among this group of women centered on four dimensions: emotional support, financial contributions to the family, amount and quality of time spent with the children and the family, and was dependent upon the particular expectations of the mother involved. Barriers and influences of father involvement were identified. The nature of father involvement had negative and positive impacts on participants.

Discussion

Maternal use of alcohol is a complex issue, one factor often ignored in father involvement. For mothers with substance use problems father involvement has a number of implications, both positive and negative.

Key Words: *Mothers, alcohol use, substance abuse, father involvement*

Fetal Alcohol Spectrum Disorder (FASD) is "a birth defect that has its primary effect on the brain."¹ It is caused by maternal alcohol use during pregnancy and is the most common known cause of cognitive disability,² impacting from 0.5 to 3 per 1000 births.³⁻⁶

For over three decades, researchers have sought to better understand the nature of the condition in order to inform prevention efforts; however, the prevalence rates of FASD have

remained relatively unchanged.⁴ To date, FASD prevention efforts have typically focused solely on maternal alcohol use and it has been suggested that this approach may have limited impact for women whose alcohol use co-exists with other conditions that influence their alcohol use.⁷ These contributing factors have been defined as determinants of health, and include a range of social and economic conditions that influence women's alcohol use. They describe the

circumstances that not only bring some women to use alcohol, but which also make it difficult for them to stop or decrease during pregnancy.⁸

Fathers are associated with a number of determinants of health including genetic, relational, familial, and environmental factors that either contribute to or protect against maternal alcohol consumption.⁹ Given the primary importance of each of these areas, it becomes essential to explore further the unique contributions that fathers make within each realm.

In the case of FASD, initial exploration into father involvement most reasonably starts by gaining a better understanding of the nature and meaning of father involvement as perceived by substance using women themselves. A comprehensive understanding of the meaning of father involvement begins with explorations into mothers' relationship with her own father, as well as the father of her child(ren). The nature, implications, and meaning of father involvement on mothers experiencing alcohol use problems are under investigated. However, the complex factors experienced by pregnant and parenting women with alcohol use problems are described as follows: these women are more likely to be using other substances including alcohol, to have comorbid histories of serious violence and trauma, to have serious mental health problems, and to have a substance-involved partner who often controls their substance use and access to services.^{3,10,11}

The current study explores the experiences of mothers with substance use problems with respect to the role, impact and meaning of father involvement. By examining the experiences of women with substance use problems, this investigation explored the way in which mothers are impacted, positively and negatively, by their own fathers and their children's fathers' involvement. This research is the first investigation of its kind to attempt to understand these experiences from a women's perspective and, thereby, gain insights into the role of fathers in the lives of women with substance use problems. The research objectives included: 1) To explore and begin to identify an understanding of what father involvement means to mothers managing substance use problems; 2) To describe the details and patterns of involvement with mothers managing substance use problems; and

3) To identify and describe potential barriers and/or opportunities to promote healthy father involvement in the lives of mothers who are managing substance use problems; and

4) To highlight recommendations for father involvement in the lives of mothers and children who are managing substance use problems.

To date, little investigative attention has focused on the implications, meaning and experiences of father involvement from the perspective of mothers with substance use problems. This qualitative study, therefore, addresses a gap in the literature by exploring these experiences and examining implications for father involvement among this population.

METHODS

To understand these processes from a mother's perspective, this study conducted two focus groups utilizing a phenomenological approach. The design of this study followed an established approach associated with focus group interviews and data collection. Phenomenological focus groups provided individual descriptions,¹² which generated general and universal meanings, and ultimately could capture the "essences of structures of the experiences."¹³ In addition, focus group interview generated rich information drawing from the "synergy between group members" and were an ideal research method given that the group was comprised of individuals from similar backgrounds.¹⁴ Using focus groups in this population also allowed for an increase in authenticity and trustworthiness of the research since participants learned from their own and others' experiences and the groups providing an empowering opportunity for participants to engage with peers.

Following ethics approval, 14 mothers were recruited from mothers receiving clinical services at a comprehensive, community based program serving pregnant and parenting women with substance use problems and their young children. A sample of convenience was used, driven by phenomenological theory that seeks to understand human experiences¹⁵⁻¹⁷ with the goal of capturing a range of experiences of mothers managing substance issues. This technique was intended to capture variant experiences, facilitating the acquisition of the essential meanings and patterns of the overall

population of mothers. Participation in this study was voluntary. Child care was available for participating mothers and each participant received a \$20 food voucher as compensation for their time.

Mothers in this study ranged in age from 21-39 years. Participants' level of education ranged from grade 9 to some college education, with 50% of mothers achieving a minimum of grade 10. Participants' monthly income was between \$280 and \$1200 (CDN), with a mean of \$790 and standard deviation of \$313. Eleven (79%) of mothers had child welfare involvement. Twenty-one percent of mothers resided in shelters or supportive housing with 79% living in rental accommodations. Among participant, 57% lived without another adults present in the home. The mother participants reported that they had received clinical services for approximately 1 month to 4 years. Thirteen of the 14 mothers indicated that they were abstinent from their primary drug of choice; however, only 7 mothers indicated that they were abstinent from all substances. The remaining 7 mothers stated that they used variable amounts of alcohol and marijuana.

Each focus group interview was audio-taped, transcribed verbatim and subjected to qualitative data analysis. Participants were interviewed using a semi-structured interview guide, allowing mothers sufficient latitude to describe their unique experiences and perceptions. However, the interviews were sufficiently structured in order to capture themes that were the target of the current investigation. The design of this study incorporated a number of elements and methods to ensure trustworthiness and enhance rigor, specifically prolonged engagement and thick description.

The qualitative NVivo software program was used to analyze the data captured from the focus groups. NVivo is well suited for phenomenological research as it allows each discourse to be analyzed into individual and group themes. Accordingly, phenomenological data analysis "proceeds through the methodology of reduction, the analysis of specific statements and themes, and a search for all possible meanings."¹⁵

RESULTS

Mother's Perceptions of the Meaning and Importance of Father Involvement

The meaning of father involvement among this group of women varied substantially depending

upon the particular expectations of the mother involved. Involvement was defined and evaluated as a combination or sole contribution of four overall dimensions: emotional support, financial contributions to the family, as well as the amount and quality of time spent with the children and the family. Through descriptions of their experiences, mothers discussed how these four types of support, individually and in combination, were particularly important for them and for their children. Positive evaluation on any one of the four dimensions resulted in a more favorable appraisal of a father's status overall; however, a negative appraisal of the fathers' involvement was more frequent amongst the mothers. While most mothers' voiced expectations of father involvement, they were uncertain that most fathers were able to meet these expectations.

Mothers had varied responses regarding the importance of father involvement, ranging from very important to not important at all, in which case some mothers felt capable of assuming both mother and father roles within the family. Their responses appeared to be related to the mothers' relationships with their own fathers, and the mother's assessment of the impact of the father's involvement on both the child and herself.

Recollections of a mother's relationship with her own father seemed to influence how mothers' expectations regarding father involvement with their own children. Several mothers reported fond memories of their fathers, yet regardless of the nature of the mothers' recollections, it appeared that most mothers used these memories to express their views on father involvement in parenting. As such, mothers' memories of their fathers led to either positive or negative perspectives on the importance of fathers' role in child-raising:

...Considering mine wasn't the greatest...I think I would have been better without him...So I don't know. I'm glad her father's around, and I think it's important that he's around because he's now made an effort to be. But I think if they're just never around, then it's okay. I don't think they're that important. "I think it's important for a child to have a mother and a father...I think it's very important for a child to know their roots, their mother and their father. I'm adopted, and I know who my biological mother is, but I don't know who my father is, and it eats me up inside. And also, when

I was adopted I lost my father at thirteen, and life changed for me, so I can see how it can be important for a father to be involved.

In addition, mothers' views on the importance of father involvement were based on their assessment of whether the father was a positive influence and role model for the child. A few mothers indicated that due to the father's poor lifestyle habits, a lack of involvement was best for the child and family. For example paternal behaviours that resulted in mothers' decisions to restrict or exclude fathers' involvement with their children included substance use and conflict with the law. A few mothers expressed these concerns:

The father ... started getting back into the drugs again and the alcohol...And it makes me mad...I know he loves his kids but how you going to do that stuff? That's just messing with his head right now. Because I don't want him around my kids when he's like that. I don't even let him see her. He's out on bail a lot, so it's just not worth it. I have, in the past, when he's out, let him see the baby and it just turns out to be like, hell, for a whole month. So we just decided not to do that anymore.

Overall, mothers described themselves as playing the role of mediator between the father and child and to a large degree described themselves as determining the overall level of involvement. Mothers indicated that when a father would pose a threat or contribute negatively to the lives of the children that they were obligated to intervene and set limits around father involvement. One mother expressed the importance of a father being a good role model for her child:

To me it's important to have that role of a father but only if that father is a good influence and is emotionally and financially there, and can set a good example. But if the father can't set an example or be there in any way, then I think the child is better off with a mom who can provide both father and mother role.

When mothers felt that the father would contribute a positive influence, they acted as a facilitator for father involvement and promoted the father-child relationship. Collectively, mothers

reported several ways they encouraged father involvement, including providing a location for the child and father to spend time, encouraging play and "fathertime", keeping the father informed about the child's life, ensuring that the child was only exposed to "positive talk" about the father, and "working on" the intimate relationship between the mother and father. A few mothers expressed their attempts to promote a positive father-daughter relationship:

So I try to really encourage their hanging out because ...I want them to end up having a good relationship. But it's all just stuff like that - like encourage them to play, and when we're home say 'oh, do you remember doing this with daddy,' and stuff, to make a positive spin on his existence. I do try to (support their relationship). Whenever they're together, it's kind of like - it's them two. And I try to move back, I don't really try to force myself in the whole 'family' thing, because we're not. It's a separate code of parenting things, so I don't want her to be confused with that, so I try to really make it his time.

However, despite the mothers' encouragements, a few mothers reported that some attempts were futile, further describing how their children were 'hurt', 'not happy', or 'coping' with their fathers' lack of involvement. One mother even indicated that due to the father's lack of involvement, she had stopped issuing encouragement as a means to protect her daughter:

I used to be like, 'oh come on, dad's coming!' that type of thing ... but I don't do that now. I don't encourage it all ... She doesn't need to know what he's all about, right? It's not healthy - it's not healthy for anybody.

Finally, a few mothers assessed the capability of a father's involvement within the context of the relationship between the mother and father. One mother expressed it as follows:

But if the father's just not there, emotionally for you, how could he be there for the child? I don't know, I'm trying to think of my situation, like if he can't fulfill the commitment of getting together with me

right now, and even planning for this child, how's he ever going to be there for this child.

This type of practical evaluation played a large role in determining whether or not the mother would allow the father to be involved with his children.

Patterns of Father Involvement

Of the twenty-nine children that were born to the fourteen mother participants, only nine children had some level of contact with their biological father, and mothers reported that only five children had contact with an 'involved' father, who was being described as a father who routinely interacted with the children in a positive manner. It was reported that, in a four cases, the father had initial contact with the child; however, this contact ceased within the child's beginning months. In some five cases, mothers reported that a male, other than the child's biological father, such as a new partner, a friend, or a grandfather, assisted with parenting who was committed to being involved in the child's life. Two mothers reported that they had the full support of their child's father and they praised their partners for their high level of involvement.

Overall, mothers expressed that their relationships with the children's fathers as often changing, requiring them to often make adjustments and accommodations. For many of the mothers, the pattern of father involvement or availability did not necessarily correspond with the needs of the mother and/or child(ren). Some mothers wished that the level of involvement provided by their child's father would improve and most indicated frustration or voiced negative experiences relative to the father's lack of involvement. For example, one mother expressed her decision to cease the father's involvement with the child given the unfavourable circumstances:

I'm really getting at wits end with it. It's very difficult. As much as I'd like to see him be involved, I just don't think it's going to happen anymore.

Influences on Father Involvement

Mother participants perceived various reasons for the fathers' lack of involvement, including

enforced separations, fathers' substance use problems, and voluntary separations stemming from the fathers' choice. A few mothers believed that their own decisions to make more positive life choices had influenced the father's level of involvement. For example, a related influence on father involvement was the impact of the mother's decision to change or stop using alcohol or other substances.

In addition, some mothers reported that the father's involvement with them and their children competed with the father's relationships with other women and children. This situation was described in the following context:

My first son's father has got six kids with four different mothers. And the last one – she didn't get in the way but I'm saying they could, they could. Jealousy maybe or favouritism between her kids and their kids, and – you know what I mean? The girlfriend could get in the way. New girlfriend. Like my baby's father's got – I don't even know how much kids he has. I lost contact. Wow, I'm surprised he even remembers my son's name half the time.

For some mothers, the "status" of the relationship at the time of conception, influenced a mother's expectations for father involvement. Where there was a strained relationship or where no true emotional relationship ever existed, it was not necessarily expected that the father would want to be involved with the child. For instance, one woman described the relationship status which lowered her expectations of the child's father:

I think that if you're in a solid relationship and married to the man and have the baby, and it's a good relationship, and there's nothing wrong in their life, then they're going to be around, be involved. But in the situation I was in ... there's nothing between us.

A few of the mothers expressed an acceptance for the limited involvement their child's father was willing to offer. However, most mothers felt that the fathers' lack of involvement was the father's personal choice and was behaviour amenable to change. For example, one mother expressed that

she believed a father was responsible for his own actions:

They choose. That's what I think, they make that choice. They choose not to be involved, they choose not to come around, they choose not to visit them. There's nothing that stops them. You know? There's nothing, not another woman can do that, not a job, there's always time to come see that child, and if they don't come see them it's because they choose not to. Plain and simple. I don't give them any sympathy.

Mothers acknowledged that the choice regarding involvement did not rest with the father in all cases. For example, the following quotes described how enforced separations due to incarceration or deportation dramatically altered the fathers' involvement with mother and child:

The father of my first two, he wasn't around much, because three days before my due date with my first one he went to jail. Came back out when she was four months, was involved with her for about a week, which wasn't much involvement. He would basically just sit there and look at her...So then he ended up going back to jail and he was involved again when he got back out and at that point she's about a year old. He stayed around a week – he didn't want to work, he didn't want to touch her, feed her, right –so he wasn't involved. And then I got pregnant with the second one, the same father, accidentally. He had absolutely nothing to do with that one, did not see her. He just wanted to argue with me: 'why aren't we together, why aren't we a family?' You know, but you can't be a family with someone who's in jail all the time.

Another barrier to fathers' involvement was the fathers' substance use. In cases of both illegal activity and substance use, mothers described a duty to protect the children from the negative consequences of the fathers' activities. The presence of a father who was actively using or experiencing ongoing problems with the law was seen as a threat to the welfare of her children and/or to her maintaining custody of her child(ren). For instance, two mothers described

inappropriate interactions with the father of their child.

He tells me oh, I'm going to go pick up money. But every time he calls, the money's gone! So I know it's going to drugs or alcohol, so stupid. And it makes me mad, because how could ... you know? I know he loves his kids but how are going to do that stuff?... because I don't want him around my kids when he's like that. Because obviously, I wasn't allowed around them when I was like that, so why does he get to be? I can't let him see her alone. I mean he could have an alcoholic seizure in front of a subway or something like that.

In addition, father involvement was seen as both contributing to and ameliorating maternal stress related to her substance use. For example, when father involvement was perceived as unsupportive and problematic, it was described as creating additional stresses for a mother trying to cope with the stresses of her addiction.

When I stopped using, of course he's not going to be as interested in me because I won't go drink with him, smoke with him, the rest of it. Right? So I messed up that relationship, because I changed it, he didn't change it. And I've been to treatment and they say that two people – if one has an addiction and the other one's clean, it's not going to work out. You can't – because it just puts more pressure on you to watch it, and support him, and try to help him out, but you get tired by nine months...and it hurts, to finally say okay, I have to decide: baby, or do I put hope out there with the baby's father?

Positive father involvement, on the other hand, was described as an important force in trying to cope with mothering. For instance, one woman explained:

My drug of choice was alcohol, and I was really good at it. My husband was always just, well, a social kind of drinker, but when I stopped he stopped drinking too, just to support me, so that's a big help for me.

Each mother participant assumed responsibility to adhere to her recovery plan so that she was able to care for herself and her family, as well as to be a good role model to her children. Collectively, mothers reported two keys to adhering to their recovery plan: 1) understand the reasons and triggers for substance use and make changes to behavior patterns; 2) have access to multi-levels of support, including self-support, support from others and support to learn new ways of coping. Several mothers described the need for support as essential to not using substances:

You have to have a lot of support people. You do. You have to surround yourself with them. And make sure you cut off all the people that are being negative. Which brings us back to the father – he's negative right now. He's the only negative... You gotta go. My addiction's been a lot easier to deal with now.

DISCUSSION

This study explored the experiences of mothers with substance use problems with respect to the role, impact and meaning of father involvement. Through an analysis of the women's varied experiences, father involvement was defined and evaluated as a combination or sole contribution of four overall dimensions: emotional support, financial contributions to the family, as well as the amount and quality of time spent with the children and the family. Mothers described the relationships with their children's fathers and father figures as dynamic and constantly changing, requiring mothers to accommodate the shifting involvement of biological and non-biological fathers. Consequently, service providers should be aware that the role of the biological father and father-figure(s) may change over time, as may the mother's desire for involvement from a particular father or father-figure.

Fathers who demonstrated some level of involvement were reported to play with the child, spend time with the child, be present in the child's home and/or help with the child's care. It was evident that there was a discrepancy between most mothers' expectations of father involvement and what most fathers were willing to provide. The women had varied opinions regarding the actual

importance of father involvement, and in several of these cases, mothers felt capable of assuming both mother and father roles within the family. It is important for service providers to ask the mother whether or not she wants the father involved. Mother participants perceived various reasons for the fathers' lack of involvement, including selfishness, fear of commitment and responsibility, and the belief that childcare was the responsibility of mothers. A few of the mothers expressed an acceptance for the limited involvement their child's father was willing to offer. However, most mothers felt that the father's lack of involvement was the father's personal choice and it was behaviour amenable to change and noted that the lack of father involvement had a significant impact on their daily stresses and responsibilities. Earlier research recognized that paternal substance use may indeed heighten the stressors impacting both the mother and child.¹⁸ Overall, mothers described themselves as playing the role of mediator between the father and child and to a large degree described themselves as determining the overall level of involvement. Mothers indicated that when a father would pose a threat or contribute negatively to the lives of the children that they were obligated to intervene and set limits around father involvement. Also, service providers should not assume that father involvement is beneficial to a substance using mother and her child(ren).

When mothers felt that the father would contribute a positive influence, they described ways in which they acted as a facilitator of father involvement and promoted the father-child relationship. A stable and nurturing home environment has similarly been found in the literature as a positive and protective factor against maternal drinking.^{18,19} Collectively, mothers described a high level of responsibility to make and maintain changes in their alcohol and substance use behaviour in order to be able to care for themselves and their children, and to provide good role models for their children. Existing research has associated paternal drinking as a risk factor for maternal drinking.²⁰⁻²² Similarly, this study found the impact of father involvement on their ability to achieve their recovery and mothering goals was a factor in determining the pattern and nature of father involvement.

Given the cumulative effect of these findings, mothers were exceptionally aware that they needed extra support from family, friends and professionals to care adequately for their child(ren), and ultimately, to adhere to their recovery plan. It was evident that with limited positive father involvement, it was critical that the mothers relied on other support mechanisms to ensure the well-being of themselves and their family.

This study has several limitations. One, the research intentionally investigates and captures the perspective of mothers with substance use problems; however, the study does not incorporate the perspective of fathers. Two, the study includes only the perspectives of mothers with a male partner and does not describe the viewpoint of mothers who have a female partner. Three, this study focuses on the perspectives of 14 women, derived from 2 focus groups, who are in recovery in one community. Although these findings may not be directly generalizable to all women working on recovery from substance use, we hope that these findings and recommendations provide transferable information for future clinical practice and research in this under investigated area.

This study reinforced that fathers are associated with a number of determinants of health that either contribute to or protect against maternal alcohol consumption.⁹ This study also supported that, in the case of women with addictions, maternal alcohol use frequently co-exists with other factors that influence their use, including a partner who uses substances. Research has established that maternal drinking has a distinct impact on child functioning.²³ This study highlighted that father involvement may impact child functioning by its influence exerted, either positively or negatively, on maternal drinking. In this study, mothers with substance use struggle with a number of conflicting and contrasting issues in their recovery. While father involvement is only one area, it clearly has a number of implications to mothers working on their substance use problems.

Recommendations for father involvement in the lives of the alcohol or substance-involved women and their children must take into account the contexts of women's alcohol and substance use, including the high rate of substance use

among fathers, and its influence on children and mothers. Social support and services need to continue to assess mothers with substance problems, while recognizing the larger relational and environmental issues, such as father involvement that may influence their use and path to recovery. Also, services need to be made available for fathers, with substance use problems.

Finally, future research into this area is strongly recommended. Further research into the diverse conditions and factors that impact women's use of alcohol is not only warranted, but may offer new insights to assist in their recovery.

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