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RESEARCH ARTICLE

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Low-income fathers are emotionally resilient: A qualitative exploration of paternal emotions across early parenting

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Abstract

Emotions play an important role in fostering positive parenting and healthy child development. This qualitative study explored the affective experiences of racially diverse US fathers with low income across the prenatal, postnatal, and early childhood periods. Semi-structured interviews were conducted with 24 fathers. Interview questions asked about fathers' early parenting experiences that elicit parenting emotions of different valence. Results from thematic analysis demonstrated activation of multiple emotions depending on different proximal and distal experiences. Specific to proximal experiences, fathers reported feeling both excited and anxious about pregnancy and joyful and disappointed at childbirth. Related to distal experiences, fathers reported feeling encouraged by their social support networks that further aid their parenting, but feeling marginalized given systematic barriers (e.g., societal bias, high incarceration rates of Black fathers). Most importantly, fathers' parenting emotions, especially negative ones, led to them resolving to stay involved in their children's lives, gaining a sense of responsibility, and changing behaviors to do right by their children. Fathers resorted to various coping strategies to regulate their negative emotions. Overall, fathers with low income are emotionally resilient. Infant and early childhood health professionals should support fathers' mental health to promote father-child engagement and thus, ultimately, young children's mental health and wellbeing.

KEYWORDS

early childhood, emotions, fathers with low income, infancy, mental health, racially diverse fathers, papás racialmente diversos, emociones, infancia, bajas entradas económicas, temprana niñez, salud mental

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1 | INTRODUCTION

In the United States, 62% of men (75 million) aged 15 years and over are fathers (U.S. Census Bureau, 2019). Of them, 13.5 million men father young children between the ages of 0 and 5 years. Fathers today are significantly more involved in their young children's lives than they were several decades ago; such father involvement is beneficial for children's development (Bakermans-Kranenburg et al., 2019; Cabrera et al., 2018; Diniz et al., 2021; Livingston & Parker, 2019; Schoppe-Sullivan & Fagan, 2020). Specific to the perinatal period, early father involvement has been linked with decreases in low birth weight and small for gestational-age infants, along with mothers' higher levels of prenatal care use and abstinence from drinking and smoking (Alio et al., 2010). Fatherhood is taking a salient role in promoting children's well-being, suggesting the need to understand men's early parenting experiences better.

Indeed, perinatal and early fathering experiences come with notable biobehavioral and psychological changes in men (Bakermans-Kranenburg et al., 2019; Shorey & Ang, 2019; van Vulpen et al., 2021). Fathers have reported, for example, positive emotions with pregnancy being a "magic moment" full of wonder and childbirth as akin to "being in love" (Ledenfors & Berterö, 2016; van Vulpen et al., 2021; Walsh et al., 2014, 2021). Research also documents the challenges fathers face across the perinatal period that contribute to feelings of negativity and exclusion (Gemayel et al., 2018; Vallin et al., 2019; Xue et al., 2018). Much of this research has been conducted with middle-income, majority White fathers, limiting our current understanding of how racially diverse American fathers with low income navigate their affective experiences with parenting young children. The current qualitative study explored the affective experiences of US fathers from low-income urban contexts across the perinatal and early childhood periods using an affective parenting theoretical model.

Key Findings

- Racially diverse US fathers with low income reported feeling both positive emotions (e.g., joy, happiness) and negative emotions (e.g., sadness, disappointment) across the perinatal and early childhood periods. Furthermore, fathers reported feeling encouraged by their social support networks (e.g., family members, fatherhood program staff, other fathers in the community) that further aid their parenting, but felt marginalized by systematic barriers (e.g., negative stereotypes and biased images, high incarceration rates of Black fathers).
- Importantly, fathers' negative emotions were associated with positive behavioral intentions, such as resolving to stay involved in their children's lives and changing behaviors to do right by their children. Fathers also used various creative coping strategies for emotion regulation.
- Infant and early childhood professionals could support the parenting of racially diverse fathers with low income by engaging in education around emotional awareness and regulation, helping fathers identify and leverage their interpersonal and intrapersonal resources, and advocating for anti-racist family policies and employing culturally responsive practices to serve fathers of color raising young children.

1.1 | Parenting experiences of fathers during the prenatal and childbirth periods

Numerous qualitative studies have identified and documented the early parenting experiences of fathers, especially around the perinatal period (Elmir & Schmied, 2016; Johansson et al., 2015; Plantin et al., 2011; Vallin et al., 2019; Wells, 2016; Werner-Bierwisch et al., 2018; Xue et al., 2018, 2018). Such studies primarily focus on describing the ways in which fathers are involved during pregnancy and childbirth, their parenting needs, as well as facilitators and barriers to fathers' early involvement (Plantin et al., 2011; Xue et al., 2018). For example, Xu et al. (2018)'s review of the literature, including nine qualitative studies on fathers' involvement during pregnancy, showed that fathers who attended prenatal visits with the mothers and listened to their babies' heartbeats or saw ultrasound scans had positive attitudes toward their involvement and were motivated to continue to participate in prenatal activities. This was especially the case when fathers were treated equally and respectfully by medical professionals. Specific to labor and childbirth, Johansson et al. (2015) in their meta-synthesis of eight qualitative studies found that while many fathers were worried about their partners' and babies' wellbeing during labor, they experienced a number of positive emotions, including surprise, pride, relief, and happiness, immediately after their babies were born.

Compared to these positive parenting experiences and emotions, prior research has identified and documented more commonly fathers' negative experiences and their accompanying emotions during pregnancy, labor, and childbirth (Plantin et al., 2011; Vallin et al., 2019; Xue et al., 2018). During the prenatal period, fathers have reported feeling anxiety, distress, discomfort, and irritability when

seeing pregnancy as a possible disruption in life (Xu et al., 2018). Fathers felt they lacked knowledge about healthy behaviors during pregnancy and were unwelcomed or excluded when accompanying their partners to prenatal visits where information and communication tended to be mother-centric (Xu et al., 2018). With respect to labor and childbirth, fathers have reported feeling helpless, confused, angry, and fearful during both normal and unexpectedly complicated childbirths that led to assisted births (e.g., emergency cesarean section). Fathers felt these negative emotions especially if they were less supported by medical professionals or lacked adequate information (Plantin et al., 2011; Vallin et al., 2019; Werner-Bierwisch et al., 2018; Xue et al., 2018). Others have described hidden feelings, with fathers fighting to stay calm or hiding their emotions to support their partners through a complicated birth or an adverse situation (Johansson et al., 2015). In more severe cases, fathers have reported unresolved feelings around the trauma of complicated childbirths that manifest in nightmares with few opportunities to process their feelings with anyone (Elmir & Schmied, 2016).

1.2 | Parenting experiences of fathers during the postpartum and early childhood periods

Studies examining fathers' affective experiences at postpartum and early childhood are less common. In one review of mostly qualitative studies on Swedish fathers, Wells (2016) found that nearly a third to half of fathers discussed being unhappy and dissatisfied with the postpartum service they received. Fathers reported that the type of support available was more catered towards mothers and they were less able to contribute to decision-making processes (Wells, 2016). A few studies have documented fathers' emotional experiences parenting their toddlers and preschoolers (Kerr et al., 2022; Kwon et al., 2013; Wilson & Prior, 2010). For example, applying open-ended questions from a validated parenting interview with 74 majority White, middle-income fathers in the United States, Kerr et al. (2022) showed that positive emotions such as joy, pride, and happiness were most commonly experienced with fathers watching their toddlers grow and spending time with them. Findings related to fathers' negative emotions were more nuanced in that fathers experienced pain and difficulty most commonly when their toddlers were in emotional or physical pain. Fathers reported guilt when they felt they were not being good parents (e.g., too much time spent at work). Anger or annoyance was most common in fathers when their toddlers misbehaved. Similar findings have been reported by others (Kwon et al., 2013), with fathers resorting to more controlling and power-assertive methods to manage child misbehaviors, as well as possibly regulate the negative feelings activated by them.

Despite this evidence base, very few of these prior studies have focused on fathers in low-income contexts, with most available reviews synthesizing qualitative research in this area focusing on middle-income, majority White samples from high-income countries (e.g., United Kingdom, Sweden, Canada, Australia, New Zealand) (Elmir & Schmied, 2016; Johansson et al., 2015; Plantin et al., 2011; Vallin et al., 2019; Wells, 2016; Werner-Bierwisch et al., 2018). Many of these countries have more generous and egalitarian family policies and programs than the United States, suggesting that fathers in America—especially those with low income—may be parenting in very different socioeconomic contexts. Although a few reviews (Steen et al., 2012; Werner-Bierwisch et al., 2018; Xue et al., 2018) included US-based studies, again the majority was fathers with middle-income, along with their partners, who were receiving perinatal care from high-resource settings. Despite calls to examine the parenting experiences of racially and socioeconomically diverse fathers (Plantin et al., 2011; Xue et al., 2018), the voices of fathers with low income concerning their early involvement and accompanying parenting affects are largely missing and not readily reflected in the literature.

1.3 | Theoretical framework: An affective organization parenting model

Emotions play a vital role in parenting because they can either help facilitate or undermine sensitive and responsive parenting behaviors that have been linked with children's healthy development (Deneault et al., 2022; Dix, 1991). Relatively little attention has been focused on parental affects or emotions, even with ample evidence pointing to strong correlations between emotions, cognitions, and behaviors (Bornstein et al., 2018; Dix, 1991; Palkovitz, 2022; Palkovitz & Hull, 2018). Specific to fathers, scholars have argued for the need to focus on fathers' lived experiences and related emotions as potential resources for positive fathering (Palkovtiz & Hull, 2018). In their articulation of the resource theory of fathering, Palkovitz and Hull (2018) noted that all fathers possess some level of positive resource that could benefit their children's development and that such resources include fathers' experienced cognition, behaviors, and emotions. Relatedly, Dix (1991) theorized an affective organization parenting model that places emotions at the center of one's parenting experiences and emphasizes three components of parental emotion organization: (1) *activation of parental emotions* (i.e., occurrences of emotions based on the child, parent,

and context); (2) *engagement of parental emotions* (i.e., orienting and motivating effects emotions have on parenting); and (3) *regulation of parental emotions* (i.e., processes parents use to understand and control emotions).

Dix's (1991) model has been used to research mothers' emotions linked with parenting young children (Duncan et al., 2009; Martin et al., 2002). Martin et al. (2002), in particular, noted that Dix's (1991) model provides a useful heuristic for outlining the affective structure of parenting behaviors. Their study aimed at obtaining descriptive information on two out of three dimensions proposed by Dix (1991) (i.e., emotions activated and engaged) during mothers' interactions with their 2-year-old toddlers under both an enjoyable situation (i.e., unstructured, free play with toys) and a challenging situation (i.e., the child was presented with a nicely wrapped gift but asked to wait to open it until the mother was done filling out questionnaires). The researchers found that maternal negative emotions were more commonly activated during the challenging interaction task than during the enjoyable interaction task. The researchers noted that negative maternal emotions activated during the challenging interaction task stemmed from the competing demands in the mother-child dyad (e.g., the toddler wanting to open the gift versus the mother preventing such behaviors while completing questionnaires). Furthermore, the researchers observed that mothers with moderate to high levels of negative emotions engaged in less sensitive behaviors in their parenting (Martin et al., 2002), suggesting that intense and frequent negative maternal emotions activated and engaged could have an undermining effect on mothers' positive parenting behaviors as proposed by Dix (1991).

1.4 | Early fathering experiences amongst men with low income

Fathers with middle and low-income share similar early parenting experiences (including feelings of joy and overwhelmingness). Both groups of fathers are involved prenatally (e.g., attending prenatal appointments and ultrasounds), find having a new baby a life-altering experience, and want their children to do better than themselves and not make the same mistakes they have (Coley, 2001; Walsh et al., 2017). That said, in some aspects, fathers with low income are different and unique from fathers with middle income in that fathers with low income face additional barriers—both proximal and distal—to stay engaged in their children's lives (Coley, 2001; Coley & Hernandez, 2006; Edin & Nelson, 2013; Nelson, 2004; Tamis-LeMonda & McFadden, 2010). These barriers likely contribute to the parenting emotions of fathers with low income and thus impact their involvement throughout perinatal and early childhood periods.

Specific to proximal barriers fathers with low-income face, literature documents high rates of unintended pregnancies (and the feeling of unpreparedness that comes with them) (Combs et al., 2021), relationship conflict with mothers (Coley & Hernandez, 2006), and economic challenges in providing for their children's and family's needs (which often stem from unemployment or job insecurity) (Tamis-LeMonda & McFadden, 2010; Threlfall et al., 2013). Specifically, unintended pregnancies have been linked with lower levels of engagement in socially and cognitively stimulating activities with infants among fathers with low income (Combs et al., 2021). Similarly, relationship conflict between mothers and fathers has been associated with lower levels of involvement (e.g., cognitive stimulation, emotional support, caregiving) with their preschoolers among fathers with low income (Coley & Hernandez, 2006). In prior qualitative studies, fathers with low income have reported not having sufficient money, limiting the way in which they could be involved with their children and money being a source of worry and decreased self-worth (Threlfall et al., 2013).

Barriers to father involvement for men with low income are also distal (Lemay et al., 2010; Mattis et al., 2021; Roberts et al., 2014; Tamis-LeMonda & McFadden, 2010; Tyrell & Masten, 2022). These distal barriers include, but are not limited to, family members (e.g., maternal grandmothers) preventing contact fathers with low income have with their children (Coley, 2001); residence in high-poverty neighborhoods with limited educational and employment opportunities (Tamis-LeMonda & McFadden, 2010; Threlfall et al., 2013); punitive child support orders and constantly falling behind payments or never having enough money to pay the expected amount (Threlfall et al., 2013); social beliefs about fathers with low income being uninvolved or "deadbeat" without considering their positive parenting practices (Mattis et al., 2021); and prior incarceration histories—which adversely and disproportionately impact Black and Latinx fathers given systemic racism (Bronson & Carson, 2019; Hinton & Reed, 2018)—that make it challenging for fathers with low income to obtain employment post-release and financially contribute to their children and families (McLeod & Gottlieb, 2018). Qualitative results have suggested that fatherhood for incarcerated men is associated with feelings of guilt, demoralization, and helplessness (Edin & Nelson, 2013; Roy, 2005; Thomas et al., 2022).

1.5 | The current study and its contributions

The current qualitative study used an affective parenting model to explore the parenting emotions of US fathers from low-income contexts across the perinatal and early

childhood periods. This topic is important given the vital role emotions play in promoting or undermining sensitive parenting behaviors that could support the healthy development of children, especially that of children living in poverty (Dix, 1991). Furthermore, there are critical reasons to focus on fathers' parenting emotions early on: (a) the transition to parenthood is a unique period in which there are multiple changes in parents (Kuersten-Hogan & McHale, 2021); (b) early developmental periods demand high levels of caregiving which may generate a range of parenting emotions and stress (Murray, 2022); (c) these periods also necessitate high levels of parental emotion regulation for raising rapidly developing children (Leerkes et al., 2022); (d) early parenting, including father-infant secure attachments, sets the foundation for healthy child development in subsequent years (Cabrera, 2020; Deneault et al., 2022); and (e) more specific to fathers with low income, there are multiple barriers that make it challenging for such fathers' ongoing engagement with their children (Edin & Nelson, 2013; Mincy et al., 2015).

By focusing on this underexamined topic of inquiry, the current study makes key contributions to the literature in the form of (1) introducing and amplifying the voices of racially diverse fathers with low income to the current evidence base which has predominantly focused on documenting the early parenting experiences of middle-income, majority White fathers; (2) elucidating how the parenting emotions of fathers with low income are shaped within the context of proximal and distal factors (e.g., facilitators and barriers to father involvement); (3) generating hypotheses that could be subsequently tested with quantitative research; and (4) yielding findings that could inform early childhood professionals to engage in father-inclusive practices.

2 | METHOD

2.1 | Procedures and participants

The current study was part of a larger project involving the development and implementation of a father-focused home visitation program. As part of the program development, fathers eligible to participate were asked to provide feedback on father-friendly parent education materials along with their early parenting experiences. A convenience sampling method was used to recruit heterosexual fathers from a small US midwestern rust-belt city in 2017. To be eligible to participate, fathers were required to be: (1) 18 years and above; (2) parenting at least one child; (3) and were considered low income as indicated by their or their female partners' involvement in community programs (e.g., Head Start preschool program; Women, Infants, and Children's [WIC] clinic) serving families eligible for Medicaid. Medicaid is a public health insurance program in the United States that provides health coverage to millions of Americans, including families with low income (Centers for Medicare & Medicaid Services, n.d.). To be eligible for Medicaid, families' taxable household incomes typically must be at or below 133% of the poverty guidelines. In 2017, the poverty guideline, for example, was $24,600 for a family of four. Thus, applying the 133% poverty guidelines criterion, all such families (e.g., a family of four in this example) with income at or below $32,718 were eligible for Medicaid and thus considered low income in our study.

Recruitment locations included a WIC clinic, a Head Start preschool program, a fatherhood advisory board, and a Community Action Resource agency. Several different methods were used to recruit potential participants. First, staff at these agencies shared information about the current study's larger project with the fathers they serve and reached out to our research project coordinator with the contacts of fathers who showed interest in participating. The research coordinator then contacted potential participants, further explained the project (including the qualitative study), determined eligibility, and scheduled in-person interviews with those fathers who were interested. Second, we used flyers that detailed our project. Some of the agency supervisors distributed flyers to fathers at their agencies. Fathers who saw the flyers and were interested in the project emailed the project coordinator and in-person interviews were scheduled after confirming they met eligibility. Finally, we approached fathers who accompanied their female partners to the WIC clinic and shared details about the project. For fathers who showed interest, their contact information was collected, and the project coordinator followed up to assess for eligibility. Again, the project coordinator scheduled in-person interviews for fathers who met eligibility.

A total of 24 fathers met eligibility and thus participated in the current study. This sample size is consistent with prior recommendations of 5 to 50 participants being adequate sample sizes for qualitative research (Dworkin, 2012). Such a sample size allows for examining characteristics that adequately address our research questions and to distinguish conceptual themes or categories of interest (Dworkin, 2012). It also maximizes the possibility that sufficient data has been collected to clarify relationships between conceptual themes and reach saturation when using in-depth interviews (Charmaz, 2006; Dworkin, 2012; Morse, 1995).

The in-person interviews involved semi-structured interviews in which fathers were asked to retrospectively describe their lived experiences, including their affective experiences, of fathering across the perinatal and early childhood periods. All fathers provided informed consent,

and trained master's-level research assistants, including the project coordinator, conducted the interviews with the fathers individually either over the phone or in person at a local café. For in-person interviews, we borrowed and used a separate room within the café to ensure fathers felt comfortable sharing their lived experiences, including negative ones, and to protect their privacy to the best possible extent.

Interviews ranged from 1 to 1.5 hrs and were audio-recorded and transcribed. The research coordinator primarily conducted the transcription of the interviews, with transcripts being de-identified to ensure confidentiality. Fathers received a $35 Visa gift card for completing the interview. The Institutional Review Board at the University of Michigan approved the larger project, including the current study.

2.2 | Data collection

Fathers first completed demographic questionnaires, which included questions about their age, race, and ethnicity (1 = Latinx/Hispanic, 2 = Black/African American, 3 = White, 4 = Biracial or Multiracial, 5 = Other), annual income (1 = $0–$29,999, 2 = $30,000–$49,999, 3 = $50,000–$69,999, 4 = $70,000 or more), employment status (1 = working, 0 = not working), education status (1 = some high school, 2 = high school diploma, 3 = some college, 4 = associate's degree, 5 = college degree, 6 = graduate degree), marital status (0 = unmarried, 1 = married), number of children, age of the first-born child, age of the last-born child, and whether fathers were currently expecting a new baby (1 = yes, 0 = no).

The interview questions were constructed by the first and second authors with expertise and extensive experience working with fathers from low-income contexts. Fathers were asked about their early parenting experiences that elicited both positive and negative emotions. Examples include, "How did you feel when you first found out you were going to be a father?," "What was fun or exciting during the prenatal period?," "What was the pregnancy with your partner like?," "What was challenging or difficult during the perinatal period?," "What was it like for you when your first baby was born?," "What were some of the most challenging or difficult moments (of being a new father)?," "What were the most exciting and happy moments (of being a new father)?," and "When you picture your child growing up and starting a family of his or her own, what things do you hope he or she takes from you as a father and passes on to his or her family?"

Although many of the original questions pertained to men's experiences of having their first-born children or becoming new fathers, some fathers—especially those with more than one child—naturally reported on their experiences of having their most recent children (e.g., last-born children) given the saliency and recency of such experiences. For these fathers, the interviewers allowed the fathers to speak to these more recent experiences, especially when recalling memories of being a new father was challenging or the interview continued to digress into stories involving subsequent children. A final list of interview questions was developed iteratively through inputs from home visitation administrators and practitioners (i.e., program directors, fatherhood, and coordinators) who were involved across multiple stages in the development of the father-focused home visitation program. These interview questions reflect Dix's (1991) theoretical model in that they elicit different types of early parenting emotions in the context of becoming a father and aid in understanding how such emotions are organized in supporting fathers' positive parenting of their young children. Interview questions used for the current study can be found in Table 1, and the full interview protocol is in Supplemental Material 1.

2.3 | Coding and thematic analysis

Coding and thematic analysis were primarily conducted by the first and third authors—separate from the project coordinator and master's-level students who interviewed fathers—of the current study. The study team engaged in thematic analysis (Guest et al., 2012; Joffe, 2012; Nowell et al., 2017) and used Dedoose Version 8.035 (SocioCultural Research Consultants, LLC, 2018). Informed by the steps outlined in Nowell et al. (2017), the two researchers first familiarized themselves with the data by independently reading all the interview transcripts and noting initial ideas about possible codes. Then, the first author developed an initial codebook, a structured compendium of codes with definitions of each code and description of how the codes are related to one another (Guest et al., 2012), by reading three randomly selected transcripts in-depth in addition to the transcription readings completed in the first step.

Second, each of the two researchers took approximately 25% of the transcripts and independently applied the codes in the initial codebook to their respective transcripts. Third, the two researchers met to compare coding results, reconciled any discrepancies in coding through extensive discussion, engaged in detailed notetaking of important decisions (i.e., expand or merge themes), and updated the codebook accordingly. Fourth, the researchers repeated this process for two additional rounds, iteratively coding remaining transcripts, meeting to discuss results and documenting key decisions regarding themes, and updating the codebook. Finally, a third researcher on the team—the second author—was invited to review all codes, themes, and

TABLE 1 Semi-structured interview questions for fathers.

Interview questions
How did you feel when you first found out you were going to be a father?
What was pregnancy with your partner like?
What was fun or exciting during the prenatal period?
What was challenging or difficult during the prenatal period?
What was it like for you when your first baby was born?
What were the first few months with your baby like?
What were some of the things you remember most about being a new father?
What were the most exciting or happy moments?
What were the most challenging or difficult moments?
What were some things that helped you reduce your stress during the challenging moments? How did you take care of yourself?
What did you have to change about yourself in those first few months after your baby was born?
What kinds of routines did you have with your partner and your baby?
What sort of daily tasks do you take part in (e.g., baths, reading, diaper changing, etc.)?
When you picture your child growing up and starting a family of his or her own, what things do you hope he or she takes from you as a father and passes on to his or her family?
Do you have any other stories about your experience you would like to share?
What types of supports (healthcare professionals, family members, friends, classes, support/cultural groups you're a part of) did you have? What kind of supports do you wish you had?

their relations to each other. A final codebook is provided as Supplemental Material 2.

Consistent with recommendations to determine reliability when conducting thematic analysis (Joffe, 2012), we calculated interrater reliability. Interrater reliability allows for assessing the rigor of the coding scheme and its application to the data (O'Connor & Joffe, 2020). The first and third authors compared their results at each of the three coding rounds in an iterative manner. The final interrater reliability had a Cohen's Kappa of 0.92, CI [0.86–0.99] which represented 92.75% agreement between the two authors.

2.4 | Research team and reflexivity

Because qualitative research involves closely engaging with participants, experts have noted that it is not possible to completely avoid perceived biases (Tong et al., 2007). As such, it is recommended that researchers engaging in qualitative research recognize and articulate their identities, credentials, occupations, and trainings among other things. This allows for improving the credibility of the findings, as well as considering how these factors might have influenced the researchers' observation and interpretation of the data (Tong et al., 2007). As noted above, trained research assistants, including the project coordinator, carried out the majority of the interviews. The project coordinator and research assistants were master's-level social work students who were trained in conducting semi-structured interviews with fathers. They reflected diverse race/ethnicity (e.g., White, Black, Asian) and gender (e.g., male, female) backgrounds. The researchers involved in analyzing the data and writing the manuscript involved four members with doctorate degrees in social work or psychology and two graduate students in social work. Again, the race/ethnicity of this group was diverse (e.g., White, Asian, Multiracial), although all identified as female. We are mindful that our research team's high education levels may have influenced interactions with participating fathers (e.g., creating power dynamics based on socioeconomic status). Further, the large presence of females on the team may have biased our results and their interpretations to be more female-oriented (and by extension mother-oriented), despite the expertise team members have in working effectively with fathers.

3 | RESULTS

3.1 | Descriptive results: Participant characteristics

Descriptive results, including participant characteristics, can be found in Table 2. The majority of the fathers identified as Black, followed by White, and Biracial or Multiracial. Most fathers had some college education or less and were working, with example job descriptions including handyman, carpentry, construction, and painting. The vast majority reported an annual household income below

TABLE 2 Participating father characteristics.

Variable	*M* (*SD*) or %
Fathers' age (range: 23–43 years)	31.39 (6.55)
Fathers' race and ethnicity:	
Black or African American	50.09%
White	36.36%
Biracial or multiracial	4.55%
Fathers' education level:	
Some high school	9.09%
High school diploma	31.82%
Some college	36.36%
Associate's degree	9.09%
College degree	13.64%
Fathers' employment status (working)	62.50%
Father's marital status (married)	45.45%
Annual household income:	
$0–$29,999	72.22%
$30,000–$49,999	22.22%
$50,000–$69,999	5.56%
Number of children:	
One	27.27%
Two	45.45%
Three	13.64%
Four	4.55%
Five	9.09%
Age of first-born child (range: 0–24 years)	6.07 (5.88)
Age of last-born child (range: 0–5 years)[a]	1.60 (1.65)
Expecting a new child (yes)	8.33%

Note: Two fathers were missing on sociodemographic information, and therefore, the participant characteristics were calculated using a total $N = 22$.
[a]Only for the 15 fathers who reported having more than one child and had valid data on age of the last-born child.

$30,000. Over half of the fathers were unmarried and had either one or two children. Fathers' first-born children were on average 6 years old. For those with more than one child, fathers' last-born children were approximately 1.5 years old (for details, see Table 2).

3.2 | Thematic analysis results

Resulting themes were organized by fathers' proximal (i.e., intrapersonal and interpersonal) and distal (i.e., familial, neighborhood, and institutional) experiences, with the former emerging primarily in response to interview questions and the latter more naturally occurring based on what the fathers wished to discuss. Within proximal experiences, themes were further organized by time periods across early parenting: *prenatal and pregnancy* was defined as a period ranging from conception to labor; *labor* and *birth* was defined as a period ranging from the earliest stages of labor to childbirth, and *postpartum*, *infancy*, and *toddlerhood* was a period ranging from immediately after birth through the child's first 3 years of life. Although postpartum, infancy, and toddlerhood were initially kept as distinct periods in the coding process, they were merged given the lack of excerpts within each period and to keep the results as parsimonious as possible. As shown in Table 1, not many early childhood-related interview questions were asked, in part, because the larger study predominantly focused on the perinatal period. However, given that some fathers had children (be it firstborn or lastborn) whose ages were older than 3 years old, such fathers naturally discussed parenting experiences related to raising their children during the early childhood period. As such, we included an *early childhood* period in our results and defined it as a time covering children ages 3–5 years.

Within distal experiences, two themes that pertained to *social support networks* and *systematic barriers* emerged. Social support networks involved support from family members, friends, and fathers from the community to help facilitate fathers' parenting and thus were associated mostly with positive emotions. Systematic barriers were institutional and societal factors such as negative portrayals of fathers of color in media, social services, and the larger society, as well as disproportionately high rates of incarceration of fathers of color from low-income backgrounds that hinder fathers' parenting and thus primarily evoked negative emotions. As shown in Table 3, fathers' parenting emotions accompanying proximal and distal themes were further organized by the three components noted in Dix's (1991) affective parenting model: (1) activation of parental emotions; (2) engagement of parental emotions; and (3) regulation of parental emotions.

3.3 | Proximal: Intrapersonal and interpersonal level factors

3.3.1 | Prenatal and pregnancy

Pregnancy and prenatal positive emotions

Positive emotions during the pregnancy and prenatal period included feelings of excitement, happiness around connecting with the baby, and joys arising from preparing for the baby's arrival. Nearly all men reported feelings of excitement when they found out about their partners' pregnancies and described the prenatal period using affective terms like "ecstatic," "overjoyed," and "awesome." Some reported that they saw this as an opportunity to be the best fathers they can be, especially because they grew up without their own fathers. More than half of the fathers noted the happiness that came from bonding with their babies in

TABLE 3 Activation, engagement, and regulation of fathers' positive and negative emotions by proximal and distal experiences.

	Activation		Engagement		Regulation	
	+	−	+	−	+	−
Proximal experiences (by parenting stages):						
Prenatal and pregnancy • Learning about pregnancy • Connecting with baby • Preparing for baby's arrival • Employment and financial challenges • Maternal and child health issues • Unpreparedness	• Feelings of excitement when fathers found out about the pregnancies • Happiness around bonding with their babies in the womb (e.g., ultrasound) • Joyful in preparing for their babies' arrival	• Worries about ability to financially provide for child and family • Concerns about partner and child health • Negative or mixed feelings about pregnancy (e.g., unintended or poorly timed pregnancy)	• Feelings of excitement around pregnancies galvanizing men to be the best fathers they can be	• Worries motivating fathers to look for jobs or additional hours of work in preparation for baby's arrival • Concerns about partner's health leading fathers taking care of partner during day while juggling work	• None reported	• Concerns about potential for baby to have birth defect regulated by hoping and praying to hear baby's heartbeat during prenatal visits and feeling relief upon hearing the baby's heartbeat • Coping with depressive mood and impulse to leave mother and baby by speaking with a professional who provided encouragement
Labor and birth • Being part of childbirth • Being the first ones to hold baby • Birth complications and assisted birth (e.g., cesarean section) • Missing childbirth • Seeing partner in labor pains	• Positive emotions (e.g., elation, happiness) related to being part of babies' births • Feeling proud of their active involvement in the labor and birth process and being the first ones to see their babies	• A range of negative emotions from scared to disappointment around cesarean section births • Disappointment, anxiety, and distress around various labor and childbirth events (e.g., missing childbirth, wanting a different sex baby) • Worries about prematurely born babies	• Sharing the news of baby's birth with other family members • Acquiring a sense of responsibility • Talking with and letting baby know who their father is	• None reported	• None reported	• Regulating negative emotions around cesarean section through staying prayerful and supporting partners • Focusing on preparing for baby's arrival (e.g., babyproofing rooms, getting crib ready)

(Continues)

TABLE 3 (Continued)

	Activation		Engagement		Regulation	
	+	−	+	−	+	−
Postnatal, infancy, and toddlerhood • Bonding with newborns • Seeing developmental milestones • Employment and financial challenges • Relationship conflict with mother • Lack of sleep related to newborn caregiving • Lifestyle changes	• Joyful in bonding with their newborns in the context of caregiving and spending quality time • Excited and happy to see their young children reach developmental milestones (e.g., rolling over, crawling, talking)	• Worries around financial challenges and work-related complications (e.g., layoffs, unemployment) • Frustration and anger from relationship conflict with mothers • Fatigue, stress, irritability from lack of sleep, around-the-clock care of newborns, handling infant crying • Disappointment that cannot engage in usual activities (e.g., hangout with friends, fishing, smoking)	• Joys around bonding with their newborns and seeing their young children reach developmental milestones motivating fathers to stay involved (e.g., coming home to see baby, spending more time with children, planning to never be gone, buying toys fathers did not have growing up)	• For unemployed fathers, using time at home to engage in caregiving and play with their children • Efforts (e.g., mediation) to resolve conflict with mothers • Channeling disappointment around reduced leisurely activities to make lifestyle changes (e.g., not going as much, quitting smoking, altering changing habits)	• None reported	• Regulation of fatigue and stress from newborn care by adjusting sleep, splitting responsibilities, accepting parenthood, taking breaks • Coping with disappointment around reduced leisurely activities by changing mindset to focus on and prioritize children and their needs
Early childhood • Spending time with children • Having a positive impact on their children • Employment and financial challenges • Coparenting issues with mothers • Child externalizing behaviors	• Joys of spending time with children irrespective of activity type • Satisfaction that comes with knowing they are having positive impacts on their children (e.g., teaching responsibility)	• Range of negative emotions (e.g., distress, disappointment) around employment and financial challenges • Anger, sadness, and annoyance around coparenting issues with mothers • Frustration and irritability associated with child externalizing behaviors	• Staying engaged despite challenges (e.g., relationship conflict with mother) so children know who their fathers are and can say in the future their father were always there	• Looking for temporary support (e.g., having ex-partner or parents care for child) or finding creative alternatives to buying things/experiences for children • Solving coparenting conflicts (e.g., making it work) for the sake of children • Frustration and irritability associated with child externalizing behaviors leading to fathers employing various behavioral management strategies (e.g., physical separation, explanations)	• None reported	• Handling negative emotions arising from employment and financial challenges by resolving to stay involved in their children's lives (e.g. never leave children) • Regulating negative emotions and stress from coparenting conflict by exercising and thinking about what is best for children (e.g., stable relationships) • Regulating frustration and irritability arising from child externalizing behaviors by creating physical distance to calm down, accepting that difficult child behaviors are part of child growth, temporarily blocking feelings out to get through tough moments

(Continues)

TABLE 3 (Continued)

	Activation		Engagement		Regulation	
	+	−	+	−	+	−
Distal experiences:						
Social support networks • Family members and friends • Community members (e.g., church members, other fathers through fatherhood programs)	• Relieved knowing support from various social networks available to help their parenting • Surprised to know there are alternative ways to parent by observing others (e.g., friends) and liking their methods • Feeling good and encouraged about fathers in the community coming together as "fellow brothers" to support one another and that they are not alone in their parenting journey	• Generally negative feelings and thoughts arising from parenting challenges	• Relieved knowing support from various social networks available to help their parenting • Motivated to try alternative parenting behaviors they picked up observing others	• Speaking with male home visitation staff and processing feelings	• None reported	• Thinking about what male home visitation staff introduced as alternatives to prior coping strategies that were unhealthy (e.g., drinking)
Systematic barriers • Negative portrayals of fathers of color in media, social services, and society at large • Disproportionately high rates of incarcerating Black and Latinx fathers	• Hopeful about historical progress given seemingly post-racialized contemporary context	• Feelings of unfairness, offense, exclusion, and marginalization that fathers, including Black fathers, experience (e.g., not given credit for being good parents but rather stigmatized for being absent) • Sadness and disappointment for missing out on birth of children due to being incarcerated	• None reported	• Engaging in behaviors "opposite" to the negative stereotypes (e.g., absentee father) and thus staying engaged with children and prioritizing their needs • Being actively involved in subsequent children's birth and lives as a result of missing out on first-borns' births due to being incarcerated	• None reported	• Various strategies (e.g., drinking, smoking, turning to others, engaging in self-talk, using humor) to regulate negative emotions from missing out on birth of children due to being incarcerated

Note: The plus sign indicates positive parenting emotions, and negative sign indicates negative parenting emotions.

the womb. Bonding took different forms including reading books, playing music, talking, and listening to their heartbeats at prenatal appointments. Others recounted seeing their babies during ultrasound appointments. For example, Dad 16 described that "going to the doctor's visits and seeing the ultrasound" was a special moment. He was able to "[see] the baby move inside the stomach," which was "fun" and "cool." He also noted that his baby would move or kick "every time [he] talk[ed] to him (son)." Although reported less, fathers reported joy in preparing for their babies' arrival. Seven fathers mentioned this subtheme, which included the joys that came with "trying to find a name" for their baby, "[preparing] the room for the kid," and "getting [baby] clothes."

Pregnancy and prenatal negative emotions

Fathers' negative emotions during the pregnancy and prenatal period included fathers' worries about employment (i.e., underemployment, unemployment), maternal and child health, and negative or mixed feelings about the pregnancy. More than half the fathers mentioned the employment subtheme. Upon learning about their partners' pregnancies, fathers expressed concerns about their abilities to provide financially for their families. These were rooted in a lack of stable employment and workable hours, recent layoffs from work, the need to work multiple jobs, and partners not being able to currently work and thus feeling responsible to be the sole breadwinner of the family. However, for some fathers, activation of negative emotions was a motivating factor in looking for employment or additional hours of work as in the case of Dad 14, who said: "Okay, I got [a] responsibility now. I got [to] start working. [I] had to pick up more hours and make sure I provide for her (mother) and my child."

Another challenge during this period as mentioned by half of the fathers was related to maternal and child health. Fathers indicated that their partners experienced considerable health challenges (e.g., past miscarriages, extreme nausea, preeclampsia). As a case in point, Dad 3 noted: "She (mother) had a lot of health complications. She was having issues with her blood pressure. Her doctor had put her on bed rest early on in pregnancy." In response, some fathers took the role of caregivers of their partners, caring for their partner's needs during the day while looking for work or working odd jobs during the evenings to financially support their families. Others reported not being able to attend prenatal appointments due to conflicts with work schedules. Specific to their children's health, some fathers reported worries about birth defects which "run in the family" and were causes of constant anxiety. Dad 1, for example, mentioned that during every prenatal visit, he would be "hoping and praying" that he and his partner would hear their baby's heartbeat, and when they did, feeling immense relief.

Another challenge was fathers' negative or mixed feelings about the pregnancy, with over half of the fathers mentioning this theme. These emotions stemmed from having unintended pregnancies or the pregnancy being poorly timed, being surprised at the pregnancy given the older age of the father, or feeling unprepared to have a baby. For example, Dad 16, noted: "I was ready, but then again, I wasn't cause I wasn't where I wanted to be in life to have a kid first." Similarly, Dad 13 said that while he was at first excited to learn about the pregnancy, he soon became "depressed about it," to the extent that he was "ready to leave" his partner and baby because the pregnancy meant to him "no more hanging out" or doing other things he currently enjoys. The same father spoke of working through his emotions by speaking with a therapist who helped him see "how much fun [he][was] going to have (with his future child)" and encouraged him "not to walk out of the kid's life." Dad 13 subsequently noted that talking with his therapist changed his mind and to "do better than what [he] was thinking about doing."

3.3.2 | Labor and birth

Labor and birth positive emotions

Nearly all fathers mentioned joys related to labor and childbirth. Fathers noted that being part of their babies' births was one of the best experiences of their lives (e.g., "It was the most exciting thing ever happened to me," "warm feeling I ain't never felt before"). They commonly used words such as "awesome," "ecstatic," "elated," "happy," "wild," and "wonderful" to describe their feelings. Dad 19 said regarding his first son's birth: "Like you eatin' your favorite food. That's how it feels. Like something really good…I was so happy." Similarly, Dad 22 who was at the birth of all three of his children said:

> That (birth) was the most amazing experience there was. Each of 'em when they was born I just like broke down. I mean, it just brings tears of joy to me seeing this life come into the world. Knowing that I'm part of it…was cool. I really enjoyed it.

Some fathers mentioned sharing their joys with others. For example, Dad 23 said he was on the "verge of tears when" his baby was born and called his own fathers to share the good news. Others like Dad 10 noted feeling as if he has "now got a responsibility" upon seeing his first-born daughter whom he described as "that is like mine."

Importantly, many fathers spoke with pride about their involvement in the childbirth process (e.g., "I cut the umbilical cord," "I ain't faint or nothing," "I was in the room") and being the first ones to see, hold, and feed their babies. Dad 24 described his partner's cesarean section birth as: "I was the first one to hold my baby. [I] held her for hours before I let someone else hold her. That was a feeling I cherish, so I wouldn't let nobody take that away from me." Describing that the first person his newborn son ever saw was him, Dad 21 shared that the "connection was crazy" and "something [he] will never forget." As a result, he gave his now 10-month-old son a "big speech about being his dad."

Labor and birth negative emotions

Half of the fathers reported fear or other negative feelings, especially around cesarean section births. Another half reported mixed feelings rooted in various reasons (e.g., wanting a boy but the baby was a girl, missing the timing of childbirth). Others reported worries about their prematurely born babies and watching them in the Neonatal Intensive Care Unit (NICU). Specific to cesarean sections, fathers' emotions ranged from feeling scared because they lacked sufficient information about cesarean section births to feeling disappointed about not being able to be in the same room as the mothers due to the procedure being an "emergency C-section". Some fathers expressed nervousness related to surgeries and feeling upset around the birth being cesarean, and not vaginal. For example, Dad 14 said:

> She (mother) had to have a c-section because [my][son] was so big. [That] was really nerve wracking for me [because] it was my first time having a child. They (medical staff) decided [on][a][c-section] and she agreed to it, which kind of upset me. They [also] had to cauterize her and they were scrambling, shoving everything in. Then, you could smell the burning, and she turned green and shaking. It was just the craziest thing I've ever been through. It was like a *baby nightmare* (emphasis in Italics added).

Some of these fathers mentioned coping with their negative emotions through staying prayerful to "[get] through it (the operation)" and focusing on supporting their partners (i.e., staying calm to support partner when actually feeling "freaked out"). Others reported their babies being born prematurely and thus being in the "NICU unit [with][baby] on machine, on incubator" challenging to deal with. However, some of these fathers like Dad 22 used the opportunity to ensure "everything was in place," including babyproofing rooms, setting up the crib, and making sure the nursery "looked nice."

Fathers also frequently discussed their mixed feelings, which included negative emotions, that came with labor and childbirth. For these fathers, while the joys of childbirth were present, they also experienced disappointment, anxiety, and distress around labor and childbirth for a number of reasons. For example, Dad 13 said one reason he felt sad to the extent that he cried was because he was out of town during the birth of his child who came early. Dad 11 had a similar experience when his son was born shortly after he stepped outside the room per the doctor's orders, missing the opportunity to witness and be part of his son's birth. Dad 22 wanted a boy for his second child and shared his initial disappointment to find out his second baby was a girl. Dad 15 reported that seeing the contractions come for his partner was a "hell of a sight" and was "not fun."

3.3.3 | Postpartum, infancy, toddlerhood

Postpartum, infancy, and toddlerhood positive emotions

Positive emotions for fathers during the postpartum, infancy, and toddlerhood period included the joys of bonding with their newborns (via caring for and spending time with them) and seeing their children meet developmental milestones. Approximately two-thirds of fathers indicated that this period was marked by joys in bonding with their infants. Dad 24 described bonding with his newborn by "holding them…jSimust to see something so small [and] so precious, and knowing that they're a part of me, it's crazy. Life's amazing." Bonding with their newborns often took place in the context of fathers' caregiving for and spending quality time with their babies. For example, Dad 20 said, "I don't care if it is a 20-min stretch of him sitting on my lap drinking a bottle or a 2-h period of me and him watching TV, I cherish those moments." Similarly, describing the time he spends with his baby son, Dad 19 noted: "He (son) just holdin' onto my chest in the morning time—nursery time I guess they say. I would say quality time' cause that's what we do now. We spend a lot of quality time like in the morning." As a result of bonding with their newborns and accompanying emotions, fathers noted being "more excited to come home" to see their babies, "never plan[ning] [to][be] gone," and telling their babies "How good of a father" they are going to be to them.

A quarter of the fathers noted that they enjoyed seeing their infants and toddlers meet developmental milestones. Fathers used words and phrases such as "the best," "amazing," "awesome," and "cool" to describe their feelings around watching their young children grow. Dad 11 said, "Seeing little milestones of development, it's like 'Oh my god! You (baby) couldn't roll over yesterday but now you're

doing it. That's awesome. And, watching [my] baby try to form words. Those are some things that I think are cool." Dad 21 said he got to see his son take his first steps as a result of staying home, which he described as "crazy." In a similar vein, when asked about the most exciting moments during this period, Dad 24 noted how happy he was watching his children grow which seems to have motivated him to be involved (e.g., spending time, getting a bike he never had growing up):

> Just watching them grow from a little bitty baby to crawling to climbing up on things and taking a big first toy, handing it to me to play with and I felt like a big kid because I wasn't never able to be a kid, you know. I didn't have a lot of toys that other kids used to have…So, me being able to be free get on the floor roll around with my kids, run around the yard with my 1-year-old. I was happy doing that, you know, and I do that every day. You know, and it felt good and at the end of the day…I got a bike now (for his daughter). You know, I'm teaching my baby how to ride her little power wheels, got her playing in the yard with it, just watching her just smile at everything she do and holler "Da-da."

Postpartum, infancy, and toddlerhood negative emotions

Negative emotions in the postpartum, infancy, and toddlerhood periods arose in fathers due to challenges with finances and work, relationships with mothers, lack of sleep and fatigue related to newborn caregiving, and lifestyle changes. Close to half of the fathers reported financial and work-related challenges. These fathers noted difficulties securing enough economic and material resources for their new babies: "We can't afford diapers. We got a little bit of [financial] support that we can turn to, but it's still kind of a struggle" (Dad 24). Other fathers expressed hardship securing childcare when both they and their partners worked, navigating layoffs, working odd jobs or nontraditional hours (e.g., 4 to 11 pm), and lacking transportation that prevented them from looking for many good job opportunities "outside of city limits." Dad 8 said that he has been out of work for 2 months—a stressful experience for him—and thus has been staying home taking care of his 6-month-old daughter and engaging in various activities with her (e.g., visiting relatives, going to the children's museum).

Seven of the fathers indicated that their relationship with the mothers was a challenge during this time. Referring to a contentious relationship resulting in maternal gatekeeping, Dad 17 noted: "Keeping my son away from me [is] the worst thing that someone could do to me. That's what's happening with my newborn. I've tried mediation with this woman (mother). It might be another year before I actually get custody rights." Half of the fathers pointed to the lack of sleep and fatigue as another challenge, especially during the postpartum period. Fathers noted waking up in the middle of the night to care for their babies as a factor contributing to feeling tired. Other fathers noted feeling irritated and agitated by their babies' constant crying and not knowing why they were crying and trying to find the reason or a solution. Describing his baby son's cries, Dad 7 said: "All the crying and screaming and, he'd be screaming for like [hours]. It [was] definitely stressful." Other related challenges fathers mentioned included navigating their children's neurodiversity (e.g., ADHD) or health complications (e.g., swollen adenoids) and keeping them safe (e.g., preventing children from climbing furniture). Fathers spoke of dealing with such challenges by "adjusting your sleep," "balancing work and home," "splitting time" with their partners, "just [getting] out (of the house)," and "accept[ing] and embrace[ing] [parenthood]."

More than half of the fathers reported difficulties related to lifestyle changes, such as reducing or quitting smoking, altering spending habits, going to church, and "no more late-night video game playing and hanging out with some of my friends from high school" (Dad 14). Although many fathers successfully coped with these challenges, there was a sense of loss or disappointment fathers expressed early on when they realized they had to make what probably felt like drastic changes to their previous lifestyle. Relatedly, Dad 5 reported that it initially was "hard" and "challenging" knowing he could not go fishing whenever we wanted to because he had to take care of his child. Fathers mentioned handling these challenges and accompanying feelings by not going out as much, focusing on the child's needs, and changing their "selfish" mindsets. For example, Dad 17 and Dad 22 both noted the need to prioritize their children over their needs and wants:

> It is definitely not about you. When you're so used to doing what you want to do with your money. I couldn't go out and buy that motorcycle now. I had to buy diapers and all the other stuff. You figure you have to start thinking about your kid…You start thinking about [your][child] more than you. It's not about you anymore. You're not the priority. these children become the priority once you become a parent. (Dad 17)

Similarly, Dad 22 said: "After they was born? Probably tellin' myself it ain't all about me anymore. It's about them first, you know. Anything I do, any decision I make, it's

gonna affect them. You know, whether it's career-wise, moving-wise. If I chose to do drugs… I mean, anything I did I knew it was going to affect them so I had to change that way of thinking.".

3.3.4 | Early childhood

Early childhood positive emotions

Fathers identified positive emotions during the early childhood period in relation to spending time with their children and reflecting on having an impact on them both currently and in the future. Over half of the fathers directly mentioned spending time with their children as a joyful experience. The contexts in which fathers mentioned spending time with their child included family vacations, parks, outdoors, movies, and homes, and fathers found pleasures in spending quality time irrespective of types of activity. For example, Dad 1 found joy in the "little things" such as "just being able to be with them (children), sitting there watching movies with them. To some people they might take it for granted, but it's *wonderful* just sitting there" (emphasis in Italics added). Dad 12 described taking his daughter to the park and playing with her. To him, "[that][was] the best feeling in the world to see her happy. To see my daughter running around [and] us playing together. It's one of the best feelings in the world. As long as they happy, I'm happy." Some of the men noted staying engaged in their children's lives in spite of challenges such that their children recognize them as their fathers and are happy. These men noted the satisfaction and pride that comes with their involvement and acknowledgment of their fathering roles from their children. For example, Dad 10 spoke of being involved in his first daughter's life even after he and the mother of his daughter "broke up…when she (daughter) was one." Importantly, he emphasized how his involvement has allowed his daughter to know him as her father:

> I've still been around so like for her to still know who her daddy is I feel like that you know. Like if I asked her, "Who's your daddy?" She'd know who her daddy is, so there's no doubt that they know I'm their daddy. So basically, them acknowledging me as their dad and making them happy. (Dad 10)

Some fathers noted the satisfaction of having a positive impact on their children. For example, Dad 21 described instances in which friends and family members said his children are "trained well" and "listen well," which is "an outlook on you as a parent" and an opportunity to "brag about your own children [that] makes you feel like you're doing your job." Fathers emphasized positive impact predominantly in the realm of teaching their children to be responsible and "doin' what's right." Other areas of positive impact included helping their young children learn (e.g., reading), showing affection, being a male role model, and instilling values (e.g., provide for your family, do your best, put God first). Reflecting on what their children may say about him in the future, Dad 14 noted: "They'd say, 'I had the number one dad. He was there. He was always [was] there.' And I [will] always be there…Until God say otherwise, I'm gonna always be there."

Early childhood negative emotions

Similar to previous periods, fathers during the early childhood period experienced negative emotions related to employment and income, coparenting issues with mothers, and child externalizing behaviors. Specifically, seven fathers reported early childhood challenges involving employment and income, which ranged from losing their current jobs to lacking the sufficient income to purchase everyday goods for their children and families to the need to establish financial stability to reunite with their children. Not having a stable job or enough economic resources made some of the fathers feel they were not doing what they were supposed to do, namely, fulfill the traditional breadwinner role. In the case of Dad 5, he shared his doubts about economically providing for his children, including his preschool-aged son, given his specific context (e.g., partner struggling with substance use, needing to quit job to care for his children):

> My significant other was struggling with addiction and I wasn't allowing it. So, I had to quit work and stay home with my kids, and financially, yeah, we were struggling…My parents were helping us out, but I questioned whether or not I was going to be able to handle this.

Importantly, the same father noted that these set of challenges eventually "instilled in me [that] I would never leave my kids. That's just it. Bottom line. Struggles or no struggles, they're my kids, they're my responsibility. It's my job to love them, and that's what I live on."

In the case of Dad 4, a noncustodial father with child support orders, he expressed hopes to better support his son's material needs but also disappointments around the difficulties of maintaining a job and managing expectations from his ex-partner and mother of his son to economically provide. Dad 3 described an incident involving his daughter asking for chicken nuggets but not having enough money to afford them:

> I think the hardest thing ever is…there will be times now where I'm in the car driving her home from preschool and she like, "Daddy, I want some chicken nuggets," and I'm like, "Daddy doesn't have any money for chicken nuggets and that's $1.45, and you know, I don't have a $1.45. I don't even know how I'm gonna get to work the rest of this week because I don't have enough gas in the car." It's like moments like that that are really rough sometimes.

When a similar incident arose with a circus his daughter wanted to attend but he could not pay for, Dad 3 said "instead of being all sad about it and everything, we made a fort in the living room you know and watched movies all day. And, she (daughter) forgot all about the circus."

Seven fathers shared their negative emotions related to coparental relationships with the mothers. Coparental issues fathers experienced ranged from mothers being unavailable to coparent together to maternal gatekeeping (especially after mother re-partnered) to frequent arguments with mothers. Specifically, for Dad 5, he said there was currently no coparenting relationship with the mother of one of his children, because "my ex-significant other is kind of out of the picture right now due to addiction, and that's sad." Dad 11 referred to maternal gatekeeping behaviors occurring within the context of re-partnering:

> There would be times where it seemed like any time that she (mother) got into a new relationship, her effort to make things easier for me was just gone like almost instantly. Ya know, 'Oh, I'm down in Detroit. I have him (son), so I guess you won't see him.'

He simultaneously noted the importance of working things out with the mother:

> Make sure that you have a decent relationship with the mom. That's a big priority, and sometimes it's really tough to do. There are things that they're gonna do that are gonna annoy me and there are things I'm gonna do that might get on their nerves. But, you have to make it work.

Other fathers echoed the importance of solving coparenting conflicts with mothers. For example, Dad 8 described his coparenting relationship with the mother as "ain't about crap," "up and down" and a "bunch of drama." However, he deals with it through addressing the situation with the mother because ultimately, he does not want to allow his tumultuous relationship with the mother to "affect these kids." He also mentioned regulating coparenting stress by "working out and playing basketball." In the case of Dad 4, whose partner had left him for a new boyfriend, said he was angry and hurt at the situation as the re-partnering was "almost instant." That said, he was trying to maintain a "grateful" attitude as a regulation strategy because his ex-partner now seemed to be in a stable relationship, and "the alternative would be men in and out of her life, which means men in and out of the children's lives."

A third of the fathers expressed their negative emotions around child externalizing behaviors (e.g., exceedingly high energy levels, temper tantrums, misbehaviors). Referring to his son's recent behaviors, Dad 7 said, "I'm going through this thing with him where I'm teaching him stuff, but he got a thing where he wants to talk back, and it stresses me out." He further noted public settings being exceptionally challenging because he "can handle the situation at home…but out in public, you've got a screaming child…kids know when they can act up." Other fathers mentioned their child's meltdowns, writing on the wall, watching too much TV, or waking up too early as additional challenges during the early childhood period. For example, Dad 12 said: "I just hate when…my daughter…my 3-year-old be writing on the walls. She writes on the walls. [Also], all she wants [is] Dory and Nemo—that's all she want to watch. And the new [show]: Paw Patrol. That's all she want to watch is Paw Patrol."

Similarly, Dad 2 said he becomes "upset" and "frustrated" when his preschool daughter "gets in her moods…isn't listening and being a typical 4-year-old…she just does the opposite" of what he asks her to do. That said, he subsequently mentioned engaging in behavioral management strategies that also help regulate his negative emotions. Specifically, he noted creating physical distance between himself and his daughter:

> I will just be like go be your way, and I will be over here. Not that I'm ignoring her or shifting her off down to her bedroom or don't come out until I calm down or until I leave the room. I'm just like I sit back and take a step back and calm down for a little bit.

Other fathers have noted other strategies to manage child behaviors as well as regulate negative emotions accompanying them. These strategies included using explanations with their children, "block[ing] out" feelings to get through the toughest moments managing their children's misbehaviors, and accepting that such behaviors are part of growing up and parenting young children.

3.4 | Distal: Familial, community, and systematic level contexts

Two distal themes emerged—social support networks and systematic barriers—that were associated with fathers' parenting emotions.

3.4.1 | Social support networks

Fathers reported two major types of social support networks that gave them relief around early parenting and engendered other positive emotions (e.g., surprised in a good way, feeling encouraged). These included a social support network of family members and friends and a social support network of other members (e.g., fathers, church members) in the community. A total of 18 fathers mentioned receiving support for their parenting either from a family member (e.g., partner, fathers' own parents, mothers' parents, grandparents, siblings, relatives, in-laws) or a friend. Fathers asked for parenting advice, requested help with childcare, and observed others' parenting behaviors. Specifically, Dad 12 spoke of getting help from his wife on how to care for his first child early on: "[With] my first one, it was hard. Because I had to learn how to change the diaper. I could never get that. The way I used to put it on, I put it on backwards sometimes. Then my wife had to help. She had to show me stuff to do." Dad 18, who relied on his relatives for childcare said:

> We kind of have a situation where we're close to my grandparents and my aunt. I mean like within a block, so where we don't have to call a babysitter, we just say, 'Hey, would you mind watching the kids for an hour?' And they have no problem with that. So that worked out really well.

Describing his experience observing his friend's parenting, Dad 7 noted, "Sometimes it is helpful because somebody might be doing something that you never thought about, but it's a great parenting technique. I'm like, 'I like that [and] I'm going to try that.'"

A quarter of the fathers reported turning to other members in the community for social support. These included church members and other fathers they met through community-based fatherhood groups, as well as male staff (i.e., community health workers) facilitating groups or providing services to men as part of the father-focused home visitation program. Dad 21 said that the most helpful part about attending group sessions with other fathers was that "It's good to come amongst fellow brothers and discuss your weekly situations. We all have good days and bad days [as][fathers], but it's good to come together and speak positivity into each other." Similarly referring to the fatherhood groups, Dad 22 noted, "Just to know that there are other dads out there that struggles with their kids and it's not just me. Knowing that we all need help and it's okay to ask [for][help]…it's very encouraging." Dad 24 specifically spoke about the male home visitation staff who was exceptionally helpful for him in navigating some tough feelings:

> So, Aaron was just at my house a couple days ago. In fact, Monday, we were sitting up there talking and I was telling him about some emotional feelings I was having and thoughts I was having. He was giving me some alternative ways on thinking [and] how to deal with it. And me talking about it and…thinking about things that he said and some of the programs that he was mentioning that I could try [was][helpful]…[I][could][see] why every time I get to this [low][point] I want[ed] to drink, which makes me even more angry that I'm allowing myself to get this low with myself. So, [Aaron] [and] the program taught me how to have other options and…become a better person and a better father.

3.4.2 | Systematic barriers

Importantly, fathers noted several systematic barriers that made early parenting challenging and thus were predominantly associated with negative emotions. These barriers included bias against fathers of color—especially Black fathers—in media, social services, and the larger society, as well as disproportionately high rates of incarcerating Black fathers. Some fathers pointed to histories of slavery and systemic racism in the United States being the root causes of these systematic barriers. Half of the fathers mentioned biases they see in the media (e.g., TV) and available services in the forms of excluding fathers in TV advertisements, portraying fathers of color—especially Black fathers—poorly, and tailoring parenting services to mothers only or prioritizing mothers' rights (e.g., courts). Fathers used phrases such as "they (media) don't give enough credit (to fathers)," picture fathers as "secondary to mothers," paint the false image that "dads are all locked up," "stigmatize that Black fathers aren't there," and "Black men [are] good fathers, but they (society) point a finger at the wrong people" to describe their feelings of exclusion and marginalization in society. Dad 17 pointed to slavery as a culprit for low marital rates amongst Black parents: "Yes, there's a lack of marriage in the Black community, but there's a history to all that. That dates all

the way back to slavery. The Black man was always taken away from the family. It's deeper than what people just perceive."

To overcome some of these negative stereotypes and feelings of marginalization, some fathers tried engaging in behaviors opposite to the stereotypes and be "really great dads." In the case of Dad 17, a Black father, he noted being "an exception to the rule" such that he tries to stay engaged with his children (e.g., go everywhere with them), "put to the side" his wants, and prioritize the safety and wellbeing of his children. He noted the positive comments he receives from those in his community that "[I] always got [my] kids [and] everywhere we go [I] got [my] kids." However, Dad 9, who also identified as Black, shared having a different reaction to comments, especially from White strangers who came up to him at a grocery store and said he was doing a good job as a parent. Dad 9 said the comments came off "condescending because [they][are] saying it like as if [they][have] never seen a Black man with his kids." Other fathers, including Dad 8, a Black father, shared their hopefulness for their children's future, given the country's historical progress and seemingly contemporary post-racialized context: "Like from slavery to having a Black president. The sky is the limit now. Anything could happen. Don't set no standards for yourself. You can go as far as you want to."

Specific to disproportionate rates of incarcerating Black fathers, a quarter of the men mentioned their incarceration histories. Of those who reported their race, one father identified as White and four fathers identified as Black. Furthermore, three fathers noted that they were in jail when their babies were born, which left them feeling sad and disappointed. For example, Dad 10 said, "I went to jail like 20 hrs before she (daughter) was born [and] spent 2 or 3 weeks in jail. So, I missed the beginning of my baby. I came home and she was like 2 weeks old. So, yeah, that was kind of messed up." Similarly, Dad 8 noted, "When my [first][child] was born, I was in prison…I didn't get out until…she was 2 years old." In the case of Dad 24, he was in prison for almost two decades, which resulted in him missing his first-born daughter's birth and growth throughout the years. He noted the challenges of building a relationship with this now adolescent daughter and accompanying parenting emotions:

> When I found out my oldest [partner] was pregnant a couple days or week after that I was going to prison…So my oldest daughter was born while I was in prison. She was almost 11 years old [when][I][got][out]. She's seventeen right now, and we still trying to form a better relationship with each other. We have trust issues. You know, so cause she's already set in her ways. Her mother raised her while I was locked up, and I'm still trying to deal with it…I am her father. I have to support her [still]. There have been times…I'll get to the point where I stress out, I have panic attacks, anxiety attacks, and I want to run. I want to run as far as I can to get away. Then I have to realize I can't do what my father did. I have to stay and fight, you know.

Despite the challenges and negative emotions noted above, Dad 24 shared that he made it a point to be present for the birth of his two younger children he had with his current girlfriend and noted how "wonderful" it has been to be involved in his children's lives: "Because I never had it with my first child…I was like, 'Wow, I can actually watch them be born and I can watch them grow up because I [am] in the same household with them.'" Dad 8, who also missed the birth of his first-born daughter, described his active involvement with the pregnancy and birth of his second daughter: "I was there the whole 9 months, and I cut the umbilical cord. [It] was wonderful."

In addition to compensating for lost time from being imprisoned, fathers mentioned a number of emotion regulation strategies to cope with negative feelings stemming from being incarcerated. These ranged from drinking, smoking, exercising, turning to others for help, and engaging in self-talk. Trying to focus on the positives, Dad 8 noted while it was challenging to have missed the first 2 years of his first daughter's life, it "ain't something I dwell on…[don't][let][the] past destroy [me]. I look at the bright side of [things]." In the case of Dad 10, who was in jail for a shorter duration of time (e.g., a couple of weeks) compared to others. He noted coping with his negative feelings by talking with his partner, who was understanding of his circumstance, and using humor in their conversations: "I was kind of messed up about it (i.e., missing out on the birth of his first daughter because he was in jail)…at the same time…She (mother of baby) [was][understanding]…I talked to her [and] we made a joke out of it afterward, you know?"

4 | DISCUSSION

Emotions are central to parenting because they can either help facilitate or undermine sensitive and responsive parenting, which is associated with positive child outcomes (Deneault et al., 2022; Dix, 1991). Fathers play an important role in child development (Bakermans-Kranenburg et al., 2019; Cabrera et al., 2018; Diniz et al., 2021; Livingston & Parker, 2019; Schoppe-Sullivan & Fagan, 2020). Numerous studies have documented fathers' parenting

experiences, including those around the perinatal periods (Elmir & Schmied, 2016; Gemayel et al., 2018; Johansson et al., 2015; Kerr et al., 2022; Plantin et al., 2011; Vallin et al., 2019; van Vulpen et al., 2021; Wells, 2016; Werner-Bierwisch et al., 2018; Xue et al., 2018, 2018). That said, with the majority of these prior studies focusing on White fathers with middle income, many of whom are from high-income countries outside the United States, little is still known about the perinatal and early parenting experiences of racially diverse fathers living with low income living in the United States—a country with less egalitarian family policies and programs than other high-income countries.

Importantly, researchers have argued the critical need to examine the parenting experiences of racially and socioeconomically diverse fathers (Plantin et al., 2011; Xue et al., 2018). In responding to this call, as well as to fill knowledge gaps in this area, the current study aimed to amplify the voices of racially diverse fathers with low income concerning their early involvement and accompanying parenting affect, with a focus on exploring the types of emotions activated (given both proximal and distal experiences) and how such emotions are engaged and regulated across different parenting stages as proposed by Dix (1991). Specifically, Dix (1991) identified three components of parental emotion organization: (1) activation—occurrences of emotions based on the child, parent, and context; (2) engagement—orienting and motivating effects emotions have on parenting; and (3) regulation—processes parents use to understand and control emotions.

4.1 | Activation, engagement, and regulation of positive parenting emotions

Fathers in the current study experienced activation of positive emotions. For example, during the prenatal period, fathers reported feeling excited about the pregnancy, and happy to see and bond with their babies during ultrasounds. Importantly, these experiences moved and motivated fathers to want to be the best fathers they can be in their children's lives. These findings support prior studies of majority White fathers with middle income that during pregnancy fathers who attend prenatal visits and see their babies' ultrasounds have positive attitudes toward their involvement and are motivated to stay engaged in prenatal activities (Wells, 2016; Xu et al., 2018). They also align with findings from qualitative research with young unmarried fathers and Black fathers who have reported feeling the joys of early parenting (Edin & Nelson, 2013; Florsheim & Moore, 2020; Lemay et al., 2010; Mattis et al., 2021). For example, Lemay et al. (2010), in interviewing 30 young urban fathers, showed that being in the hospital and holding their babies for the first time were joyful experiences for such fathers, who subsequently developed a sense of responsibility to financially provide for and support their children and families.

Concerning postpartum and beyond (e.g., early childhood), fathers in our study expressed positive emotions such as excitement to see their children reach developmental milestones and the joys of spending time with their children. Again, these findings support those from research conducted with fathers with middle income (Johansson et al., 2015; Kerr et al., 2022) and fathers with low income (Edin & Nelson, 2013; Lemay et al., 2010). Specifically, Lemay et al. (2010) have documented the joy and happiness young urban fathers feel in spending time (e.g., playing, listening to music, and dancing together) with their children. Our results also mirror those from prior work applying Dix's (1991) affective parenting model with mothers (Duncan et al., 2009; Martin et al., 2002). For example, Martin et al. (2002) found that mothers expressed and experienced a range of emotions, including positive ones, that were dependent on their toddlers' emotional expressions and the tasks at hand. Similarly, for fathers in our study, their activated positive (and negative) emotions were closely interlinked with their children's feelings (e.g., seeing children be happy) or behaviors (e.g., witnessing children reach new milestones by rolling over, crawling, or walking), as well as specific parenting contexts that were proximal or distal.

Fathers in our study, to a lesser extent, directly mentioned regulating their positive emotions. Perhaps fathers did not feel the need to clamp down on such emotions unless it became disruptive. Our lack of findings in this area seems to be consistent with what others have found in that regulating emotions may more frequently occur in the context of negative than positive feelings. For example, Johansson et al. (2015) in their review found that, specifically within the context of adverse or complicated births (e.g., cesarean section), fathers experienced panic, fear, and helplessness, but also felt the need to stay calm or hide their emotions to support the mothers. Similarly, fathers in our study shared regulating their strong feelings, especially negative ones, during childbirth by staying prayerful and focusing on supporting their partners.

Relatedly, others have noted that while fathers may often hide strong feelings, childbirth may serve as an opportunity for them to freely express their positive emotions (i.e., pride, relief, gratitude, joy) (van Vulpen et al., 2021). For fathers in our study, it seems as if free expressions of joy and happiness—without the need to hide or regulate such feelings—were present throughout all the early parenting stages. Given that the majority of the fathers identified as Black, some of this may be capturing the expression of Black joy as a form of resilience and resistance to hardship and injustice (Lewis-Giggetts, 2022).

Resilience is the capacity for successful adaptation in spite of challenging or threatening circumstances (Masten et al., 1990), and fathers in our study demonstrated their resilience—especially emotional resilience—in the face of multiple structural barriers, including negative portrayals and stereotypes against Black fathers and disproportionate rates of policing and incarceration of Black men and boys. Importantly, fathers seem to have drawn upon their intrapersonal (e.g., self-talk, motivation, unrelenting joy) and interpersonal (e.g., social networks including family members, male home visitation staff, other fathers in the community) resources to navigate barriers and successfully manage their negative emotions stemming from some of the structural barriers identified in this study.

Prior research also documents the open expression of joy among Black fathers (Edin & Nelson, 2013; Florsheim & Moore, 2020; Lemay et al., 2010; Mattis et al., 2021). Although it is challenging to directly compare and ascertain whether fathers in our study were more willing than those in these prior studies to share or express their positive emotions, it is important to note our study's unique context. Specifically, our interviews with fathers occurred in the context of creating a father-focused home visitation program and related father-friendly education and media campaign materials. This process involved working closely with a fatherhood coordinator, a Black father himself, who connected some of the interviewed fathers to peer support groups and other parenting resources, in addition to getting feedback on program materials from fathers and incorporating their feedback into material development. Having some level of prior interaction with a fatherhood coordinator fathers could identify with or connection to the father-focused home visitation program might have allowed fathers to openly express their positive emotions. Additional research is needed to better understand why fathers with low income and fathers of color were willing to openly express their positive feelings, as well as the role of positive emotions in coping with and navigating structural barriers throughout early parenting.

4.2 | Activation, engagement, and regulation of negative parenting emotions

Concerning negative parenting emotions, our results also suggest that fathers with low income have similar early parenting experiences and emotions as fathers with middle income, which is consistent with what others have found (Coley, 2001; Kerr et al., 2022; Walsh et al., 2017). That said, there were additional challenges that were both proximal and distal that made the engagement of fathers with low income in their children's lives difficult and thus were often associated with negative parenting emotions. Some of the proximal challenges included unintended pregnancies, conflict with mothers, and economic insecurity stemming from being unemployed or not being able to maintain employment—factors that support what others have found among fathers with low income (Coley & Hernandez, 2006; Combs et al., 2021; Edin & Nelson, 2013; Lemay et al., 2010; Tamis-LeMonda & McFadden, 2010; Threlfall et al., 2013). Such prior research also suggests that fathers facing these challenges are likely to be less involved with their children, possibly given the constant negative emotions (e.g., worry, anxiety) and reduced self-worth these challenges generate.

Fathers in our study also experienced similarly negative emotions, and even shared thoughts of leaving their families given their current challenges. However, many demonstrated resilience by channeling their negative emotions to motivate themselves to stay engaged and find creative and alternative ways to support their children (e.g., take "responsibility now," or "work things out with the mother"). Our results support qualitative accounts of fathers with low income seeing the arrival of their new babies as an opportunity to change their lifestyles, take responsibility financially, work on their relationships with mothers, and "do right" by their children (Edin & Nelson, 2013; Florsheim & Moore, 2020).

Because generally less is known about fathers' coping strategies, let alone those of fathers with low income, it was interesting to discover the various methods fathers in our study used to regulate their negative emotions in the context of proximal challenges. These included changing their mindset to focus on their children's needs, accepting the difficulties (e.g., child misbehaviors) as part of parenting, exercising, and turning to others (including professionals) for help. Concerning the last point, the fact that fathers felt comfortable seeking support from others—a finding that contrasts that of prior research with majority of middle-income White fathers (Kwon et al., 2013)—suggests that fathers in our study may be more open or willing to seek help to work on their thoughts and process their feelings. It could also signal the communal nature of this group of fathers, many of whom attended local fatherhood group sessions where support-seeking was encouraged and additional resources (e.g., access to counseling services) were made available.

Another key finding of our study is that fathers described how distal factors, including systematic barriers, make it challenging for them to parent and are associated with additional negative emotions. The two most prominent types of systematic barriers were societal bias and stereotypes against fathers with low income and disproportionate incarceration rates of Black fathers, both of which along with other systematic barriers have been documented in prior research (Bronson & Carson, 2019;

Hinton & Reed, 2018; Mattis et al., 2021). Both distal experiences activated plenty of negative emotions (e.g., feelings of unfairness, exclusion, marginalization) in fathers in the current study—a finding that is also consistent with prior research (Edin & Nelson, 2013; Roy, 2005; Thomas et al., 2022). For example, qualitative research with incarcerated men showed that being in jail was linked with fathers' feelings of guilt and helplessness (Edin & Nelson, 2013; Roy, 2005; Thomas et al., 2022).

However, the remarkable aspect is how fathers engaged and regulated negative emotions they felt within them. Specific to fathers with incarceration histories, for example, such fathers shared how actively involved they were in the lives of their subsequent children, perhaps as a way to compensate for lost time with their first-born children. These fathers employed a number of coping strategies—including maladaptive ones (e.g., drinking, smoking)—which suggests the toll incarceration, or most precisely, post-incarceration and re-entry into society has on fathers (e.g., difficulty finding reliable employment). Still, some discussed engaging in positive self-talk and using humor to overcome their negative thoughts and feelings, remaining hopeful that they could have a positive impact on their children. Because poorly regulated emotions can undermine effective parenting, fathers' regulation of their negative emotions is important (Dix, 1991). By regulating their negative emotions, fathers are able to control what they communicate with their children, the emotional contexts of the father-child dyad, and even their ongoing involvement.

More broadly, these findings point to the critical need to address and counteract biased images and narratives of fathers with low income and fathers of color, including Black fathers, through more accurate portrayals of them in mass media (e.g., news, entertainment, social media), as well as other areas of American society including government, academia, and social services. As this study has shown, fatherhood in the context of poverty is more complex than simply "absent" or "deadbeat," but rather filled with a range of parenting experiences and emotions that accompany them. In particular, positive experiences and emotions of fatherhood need to be more readily reflected in images, narratives, and perceptions of fathers with low income, including Black fathers.

Related to study findings on fathers and their parenting emotions in the context of post-incarceration, a quarter of the men in our sample discussed their incarceration histories in relation to their parenting experiences, which highlights the critical need to address the disproportionate impact of incarceration on Black fathers. Indeed, the racial disparities are staggering, with the Black imprisonment rate (797 per 100,000) being five times the rate of White imprisonment (268 per 100,000) (Gramlich, 2020). Such trends should galvanize new and ongoing efforts to end punitive crime control policies, eliminate mandatory minimum sentences, end cash bail, and invest resources to support the socioeconomic needs of families in low-income urban communities (Ghandnoosh et al., 2023). These systemic efforts would reduce the disproportionately negative toll of incarceration on Black fathers, as well as support their successful re-entry into society in the form of finding reliable employment and developing healthy coping strategies. By equipping them with tools to meet their material and psychological needs, Black fathers would be able to leverage their parenting emotions to engage in positive parenting behaviors and develop healthy father-child interaction contexts that ultimately benefit their children for years to come.

4.3 | Limitations and future research directions

Limitations of this study include the use of a small convenience sample of fathers some of whom volunteered to be part of the larger father-focused home visiting program. Other fathers were recruited from community organizations serving mothers and young children. Fathers in both contexts may have already had higher levels of involvement, awareness of their parenting affect, and emotional engagement with their young children, given their interests in benefiting from these programs. Hence, our results cannot be generalized and transferable to fathers with low income in other contexts, including those that are international. Other limitations include fathers' reports being retrospective, which could have contributed to recall bias, especially for fathers whose children were older and thus were further out from the early parenting months and years. Future research in this area may want to use a prospective research design to more accurately capture the ways in which parenting emotions are activated, engaged, and regulated in racially diverse fathers with low income.

Furthermore, given limited resources, we were not able to engage in member checking, where results are typically shared with interviewed participants to check for the authenticity and credibility of the findings and interpretations. Future research will do well to ensure that the credibility of the work is established by getting input from fathers whom they interview. Separately, the use of a public location like a local café may have prevented some fathers from fully expressing themselves on sensitive topics, such as their parenting challenges and negative emotions accompanying them. Future research could consider other locations and modalities that better ensure privacy and allow participants to feel comfortable sharing their experiences. Finally, the interview

questions originally focused on the first-born child as opposed to the last-born child. With the majority of the fathers having more than one child and given our interest in understanding early parenting experiences, a focus on the last-born child—who was on average several years younger than the first-born child—could have better approximated some of the early periods (e.g., prenatal, labor and birth, postpartum) examined in this study.

Despite these limitations, a focus on racially diverse fathers with low income in the United States (a group that has been traditionally understudied); the use of an affective parenting framework; elucidation of how parenting emotions are activated, engaged, and regulated; and multiple researchers' involvement with the data collection and analysis processes are notable strengths of the current study. Further, this study contributes to the literature in the form of hypothesis generation. From our results, we hypothesize that proximal and distal experiences across early parenting stages would elicit multiple and co-occurring emotions in fathers with low income. We also hypothesize that negative emotions are just as strong motivators as positive emotions in motivating and promoting father involvement among fathers with low income, especially when such fathers have strong support systems. A final hypothesis future research could test is that fathers with low income use various affective, cognitive, and behavioral strategies to regulate their emotions, especially negative ones, with the goal to stay engaged in their children's lives.

4.4 | Conclusion and implications for practice

Overall, our study results highlight the importance of the emotions—those that are activated, engaged, and regulated—of fathers with low income across the early parenting period. By virtue of caring for mothers, infants, and young children, healthcare professionals and paraprofessionals including those taking an infant and early childhood mental health approach to practice are likely to come in contact with fathers and thus may be in ideal positions to serve their needs, including their affective needs, by engaging in father-inclusive practices. For example, during the prenatal period, in addition to getting maternal inputs, healthcare professionals could invite expectant fathers to share their feelings and wishes around childbirth and incorporate their desires (e.g., preference for natural birth and using c-sections as a last resort only) into birth plans. That is, it would be important to include father-focused elements of birth plans to ensure fathers' needs are met, promote their parenting self-efficacy, and encourage their involvement early on. Healthcare professionals can also equip fathers with information on childbirth basics and comfort strategies they can employ to support mothers during labor and birth.

Across the perinatal period, in identifying negative affective patterns (e.g., negative emotions perpetually activated, challenges with emotion regulation) and preventing their escalation into more serious mental health problems, it would be critical to screen for fathers' postpartum depression in addition to mothers' postpartum depression. Efforts specific to postpartum and beyond could include educating fathers to be aware of and reflect on the varied emotions that come up with different parenting experiences (e.g., forming an attachment with their new baby, losing sleep in the early weeks and months of caring for a newborn, financially and instrumentally supporting partner and new baby). Through needs assessments and resource mapping, healthcare providers could help fathers identify both their interpersonal and intrapersonal tools and resources to help navigate challenging circumstances and regulate negative emotions that arise from them. At a broader level, training health professionals for early father engagement should leverage reflective supervision, address implicit biases, and prioritize gender and race equity in service provision. There is also a need for health professionals and health organizations to advocate for anti-racist family policies and employ culturally responsive practices to strengthen families of color living in poverty and promote their young children's well-being.

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CONFLICT OF INTEREST STATEMENT

The authors declare no conflicts of interest.

HUMAN SUBJECTS APPROVAL

The Institutional Review Board at University of Michigan approved the larger project, including the current study.

DATA AVAILABILITY STATEMENT

The data that support the findings of this study are available on request from the corresponding author. The data are not publicly available due to privacy or ethical restrictions.

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REFERENCES

Alio, A. P., Salihu, H. M., Kornosky, J. L., Richman, A. M., & Marty, P. J. (2010). Feto-infant health and survival: Does paternal involvement matter? *Maternal and Child Health Journal*, *14*(6), 931–937. https://doi.org/10.1007/s10995-009-0531-9

Bakermans-Kranenburg, M. J., Lotz, A., Alyousefi-van Dijk, K., & IJzendoorn, M. (2019). Birth of a father: Fathering in the first 1,000 days. *Child Development Perspectives*, *13*(4), 247–253. https://doi.org/10.1111/cdep.12347

Bornstein, M. H., Putnick, D. L., & Suwalsky, J. T. D. (2018). Parenting cognitions → parenting practices → child adjustment? The standard model. *Development and Psychopathology*, *30*(2), 399–416. https://doi.org/10.1017/S0954579417000931

Bronson, J., & Carson, E. A. (2019). *Prisoners in 2017*. S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics. https://bjs.ojp.gov/content/pub/pdf/p17.pdf

Cabrera, N. J. (2020). Father involvement, father-child relationship, and attachment in the early years. *Attachment & Human Development*, *22*(1), 134–138. https://doi.org/10.1080/14616734.2019.1589070

Cabrera, N. J., Volling, B. L., & Barr, R. (2018). Fathers are parents, too! Widening the lens on parenting for children's development. *Child Development Perspectives*, *12*(3), 152–157. https://doi.org/10.1111/cdep.12275

Centers for Medicare & Medicaid Services. (n.d.). Medicaid. https://www.medicaid.gov/medicaid/index.html

Charmaz, K. (2006). *Constructing grounded theory: A practical guide through qualitative analysis*. Sage Publications.

Coley, R. L. (2001). (In)visible men: Emerging research on low-income, unmarried, and minority fathers. *American Psychologist*, *56*, 743–753. https://doi.org/10.1037/0003-066X.56.9.743

Coley, R. L., & Hernandez, D. C. (2006). Predictors of paternal involvement for resident and nonresident low-income fathers. *Developmental Psychology*, *42*(6), 1041–1056. https://doi.org/10.1037/0012-1649.42.6.1041

Combs, K. M., Knauer, H., Altschul, I., & Lee, S. J. (2021). Associations between fathers' prebirth pregnancy intentions and involvement with their child 15 months later: A Propensity score analysis. *Journal of Family Issues*, *42*(10), 2464–2484. https://doi.org/10.1177/0192513X20983382

Deneault, A.-A., Cabrera, N. J., & Bureau, J.-F. (2022). A meta-analysis on observed paternal and maternal sensitivity. *Child Development*, *93*(6), 1631–1648. https://doi.org/10.1111/cdev.13832

Diniz, E., Brandão, T., Monteiro, L., & Veríssimo, M. (2021). Father involvement during early childhood: A systematic review of the literature. *Journal of Family Theory & Review*, *13*(1), 77–99. https://doi.org/10.1111/jftr.12410

Dix, T. (1991). The affective organization of parenting: Adaptive and maladaptive processes. *Psychological Bulletin*, *110*(1), 3–25. https://doi.org/10.1037/0033-2909.110.1.3

Duncan, L. G., Coatsworth, J. D., & Greenberg, M. T. (2009). A model of mindful parenting: Implications for parent–child relationships and prevention research. *Clinical Child and Family Psychology Review*, *12*(3), 255–270. https://doi.org/10.1007/s10567-009-0046-3

Dworkin, S. L. (2012). Sample size policy for qualitative studies using in-depth interviews. *Archives of Sexual Behavior*, *41*(6), 1319–1320. https://doi.org/10.1007/s10508-012-0016-6

Edin, K., & Nelson, T. J. (2013). *Doing the best I can: Fatherhood in the inner city*. (1st ed.). University of California Press.

Elmir, R., & Schmied, V. (2016). A meta-ethnographic synthesis of fathers' experiences of complicated births that are potentially traumatic. *Midwifery*, *32*, 66–74. https://doi.org/10.1016/j.midw.2015.09.008

Florsheim, P., & Moore, D. (2020). *Lost and found: Young fathers in the age of unwed parenthood*. Oxford University Press.

Gemayel, D. J., Wiener, K. K. K., & Saliba, A. J. (2018). Development of a conceptual framework that identifies factors and challenges impacting perinatal fathers. *Heliyon*, *4*(7), e00694. https://doi.org/10.1016/j.heliyon.2018.e00694

Ghandnoosh, N., Barry, C., & Trinka, L. (2023). *One in five: Racial disparity in imprisonment—causes and remedies*. The Sentencing Project. https://www.sentencingproject.org/publications/one-in-five-racial-disparity-in-imprisonment-causes-and-remedies/

Gramlich, J. (2020). *Black imprisonment rate in the U.S. has fallen by a third since 2006*. Pew Research Center. https://www.pewresearch.org/short-reads/2020/05/06/share-of-black-white-hispanic-americans-in-prison-2018-vs-2006/

Guest, G., MacQueen, K. M., & Namey, E. E. (2012). *Applied thematic analysis*. Sage. https://us.sagepub.com/en-us/nam/applied-thematic-analysis/book233379

Hinton, E., & Reed, C. (2018). *An unjust burden: The disparate treatment of Black Americans in the Criminal Justice System*. (Vera Evidence Brief). Vera Institute of Justince. https://www.vera.org/downloads/publications/for-the-record-unjust-burden-racial-disparities.pdf

Joffe, H. (2012). Thematic analysis. In D. Harper, & A. Thompson, (Eds.), *Qualitative research methods in mental health and psychotherapy: A guide for students and practitioners* (pp. 209–223). Wiley-Blackwell.

Johansson, M., Fenwick, J., & Premberg, Å. (2015). A meta-synthesis of fathers' experiences of their partner's labour and the birth of their baby. *Midwifery*, *31*(1), 9–18. https://doi.org/10.1016/j.midw.2014.05.005

Kerr, M. L., Fanning, K. A., Engbretson, A. M., Buttitta, K. V., Borelli, J. L., Smiley, P. A., & Rasmussen, H. F. (2022). Fathers' emotional experiences while parenting toddlers: A qualitative exploration. *Early Child Development and Care*, *192*(12), 1982–1997. https://doi.org/10.1080/03004430.2021.1960517

Kuersten-Hogan, R., & McHale, J. P. (2021). The transition to parenthood: A theoretical and empirical overview. *Prenatal family dynamics: Couple and coparenting relationships during and post-pregnancy* (pp. 3–21). Springer Nature Switzerland AG. https://doi.org/10.1007/978-3-030-51988-9_1

Kwon, K.-A., Han, S., Jeon, H.-J., & Bingham, G. E. (2013). Mothers' and fathers' parenting challenges, strategies, and resources in toddlerhood. *Early Child Development and Care*, *183*(3–4), 415–429. https://doi.org/10.1080/03004430.2012.711591

Ledenfors, A., & Berterö, C. (2016). First-time fathers' experiences of normal childbirth. *Midwifery*, *40*, 26–31. https://doi.org/10.1016/j.midw.2016.05.013

Leerkes, E. M., Parade, S. H., & Benito-Gomez, M. (2022). Parenting during Infancy and Early Childhood. In A. S. Morris, & J. Mendez Smith (Eds.), *The Cambridge Handbook of Parenting: Interdisciplinary Research and Application* (pp. 191–212). Cambridge University Press. https://doi.org/10.1017/9781108891400.012

Lemay, C. A., Cashman, S. B., Elfenbein, D. S., & Felice, M. E. (2010). A qualitative study of the meaning of fatherhood among young

urban fathers. *Public Health Nursing*, *27*(3), 221–231. https://doi.org/10.1111/j.1525-1446.2010.00847.x

Lewis-Giggetts, T. M. (2022). *Black Joy: Stories of resistance, resilience, and restoration*. Simon and Schuster.

Livingston, G., & Parker, K. (2019). *8 facts about American Dads*. Pew Research Center. https://www.pewresearch.org/fact-tank/2019/06/12/fathers-day-facts/

Martin, S. E., Clements, M. L., & Crnic, K. A. (2002). Maternal emotions during mother-toddler interaction: Parenting in an affective context. *Parenting: Science and Practice*, *2*(2), 105–126. https://doi.org/10.1207/S15327922PAR0202_02

Masten, A. S., Best, K. M., & Garmezy, N. (1990). Resilience and development: Contributions from the study of children who overcome adversity. *Development and Psychopathology*, *2*(4), 425–444. https://doi.org/10.1017/S0954579400005812

Mattis, J. S., McWayne, C. M., Palmer, G. J. M., Johnson, M. S., & Sparks, H. L. (2021). Color him father: Generative parenting among low-income, urban-residing, coresidential Black fathers. *Psychology of Men & Masculinities*, *22*(3), 455–465. https://doi.org/10.1037/men0000300

McLeod, B. A., & Gottlieb, A. (2018). Examining the relationship between incarceration and child support arrears among low-income fathers. *Children and Youth Services Review*, *94*, 1–9. https://doi.org/10.1016/j.childyouth.2018.09.022

Mincy, R. B., Jethwani, M., & Klempin, S. (2015). *Failing our fathers: Confronting the crisis of economically vulnerable nonresident fathers*. Oxford University Press.

Morse, J. M. (1995). The significance of saturation. *Qualitative Health Research*, *5*(2), 147–149. https://doi.org/10.1177/104973239500500201

Murray, S. H. (2022, October 19). *Why we long for the most difficult days of parenthood*. The Atlantic. https://www.theatlantic.com/family/archive/2022/10/early-child-parenting-first-years-hardest/671790/

Nelson, T. J. (2004). Low-income fathers. *Annual Review of Sociology*, *30*, 427–451.

Nowell, L. S., Norris, J. M., White, D. E., & Moules, N. J. (2017). Thematic analysis: Striving to meet the trustworthiness criteria. *International Journal of Qualitative Methods*, *16*(1), 1609406917733847. https://doi.org/10.1177/1609406917733847

O'Connor, C., & Joffe, H. (2020). Intercoder reliability in qualitative research: Debates and practical guidelines. *International Journal of Qualitative Methods*, *19*, 1609406919899220. https://doi.org/10.1177/1609406919899220

Palkovitz, R. (2022). *Involved fathering and men's adult development: Provisional balances* -. Psychology Press. https://www.routledge.com/Involved-Fathering-and-Mens-Adult-Development-Provisional-Balances/Palkovitz/p/book/9780805835656

Palkovitz, R., & Hull, J. (2018). Toward a resource theory of fathering. *Journal of Family Theory & Review*, *10*(1), 181–198. https://doi.org/10.1111/jftr.12239

Plantin, L., Olukoya, A. A., & Ny, P. (2011). Positive health outcomes of fathers' involvment in pregnancy and childbirth paternal support: A scope study literature review. *Fathering: A Journal of Theory, Research, and Practice about Men as Fathers*, *9*, 87–102. https://doi.org/10.3149/fth.0901.87

Roberts, D., Coakley, T. M., Washington, T. J., & Kelley, A. (2014). Fathers' perspectives on supports and barriers that affect their fatherhood role. *SAGE Open*, *4*(1), 2158244014521818. https://doi.org/10.1177/2158244014521818

Roy, K. (2005). Nobody can be a father in here": Identity construction and institutional constraints on incarcerated fatherhood. In W. Marsiglio, K. Roy, & G. L. Fox (Eds.), *Situated fathering: A focus on physical and social spaces* (pp. 163–186). Rowman & Littlefield Publishers.

Schoppe-Sullivan, S. J., & Fagan, J. (2020). The evolution of fathering research in the 21st century: Persistent challenges, new directions. *Journal of Marriage and Family*, *82*(1), 175–197. https://doi.org/10.1111/jomf.12645

Shorey, S., & Lina, A. (2019). Experiences, needs, and perceptions of paternal involvement during the first year after their infants' birth: A meta-synthesis. *PLoS One; San Francisco*, *14*(1), e0210388. http://doi.org/10.1371/journal.pone.0210388

SocioCultural Research Consultants, LLC. (2018). Dedoose: Web application for managing, analyzing, and presenting qualitative and mixed method research data [Computer software].

Steen, M., Downe, S., Bamford, N., & Edozien, L. (2012). Not-patient and not-visitor: A metasynthesis fathers' encounters with pregnancy, birth and maternity care. *Midwifery*, *28*(4), 422–431. https://doi.org/10.1016/j.midw.2011.06.009

Tamis-LeMonda, C. S., & McFadden, K. E. (2010). Fathers from low-income backgrounds: Myths and evidence. In M. E. Lamb (Ed.), *The role of the father in child development* (5th ed., pp. 296–318). Wiley.

Thomas, A., Wirth, J. C., Poehlmann-Tynan, J., & Pate, D. J. (2022). When she says daddy: Black fathers' recidivism following reentry from jail. *International Journal of Environmental Research and Public Health*, *19*(6), 3518. https://doi.org/10.3390/ijerph19063518

Threlfall, J. M., Seay, K. D., & Kohl, P. L. (2013). The parenting role of African American fathers in the context of urban poverty. *Journal of Children & Poverty*, *19*(1), 45–61. https://doi.org/10.1080/10796126.2013.764846

Tong, A., Sainsbury, P., & Craig, J. (2007). Consolidated criteria for reporting qualitative research (COREQ): A 32-item checklist for interviews and focus groups. *International Journal for Quality in Health Care*, *19*(6), 349–357. https://doi.org/10.1093/intqhc/mzm042

Tyrell, F. A., & Masten, A. S. (2022). Father–child attachment in Black families: Risk and protective processes. *Attachment & Human Development*, *24*(3), 274–286. https://doi.org/10.1080/14616734.2021.1976923

U.S. Census Bureau. (2019). Census bureau releases first ever report on men's fertility. https://www.census.gov/newsroom/press-releases/2019/mens-fertility.html

Vallin, E., Nestander, H., & Wells, M. B. (2019). A literature review and meta-ethnography of fathers' psychological health and received social support during unpredictable complicated childbirths. *Midwifery*, *68*, 48–55. https://doi.org/10.1016/j.midw.2018.10.007

van Vulpen, M., Heideveld-Gerritsen, M., van Dillen, J., Oude Maatman, S., Ockhuijsen, H., & van den Hoogen, A. (2021). First-time fathers' experiences and needs during childbirth: A systematic review. *Midwifery*, *94*, 102921. https://doi.org/10.1016/j.midw.2020.102921

Walsh, T. B., Carpenter, E., Costanzo, M. A., Howard, L., & Reynders, R. (2021). Present as a partner and a parent: Mothers' and fathers'

perspectives on father participation in prenatal care. *Infant Mental Health Journal*, *42*(3), 386–399. https://doi.org/10.1002/imhj.21920

Walsh, T. B., Tolman, R. M., Davis, R. N., Palladino, C. L., Romero, V. C., & Singh, V. (2014). Moving up the "magic moment": Fathers' experience of prenatal ultrasound. *Fathering: A Journal of Theory, Research, and Practice about Men as Fathers*, *12*(1), 18–37. https://doi.org/10.3149/fth.1201.18

Walsh, T. B., Tolman, R. M., Singh, V., Davis, M. M., & Davis, R. N. (2017). Expectant fathers' presence at prenatal ultrasounds: An opportunity for engagement. *Social Work Research*, *41*(3), 181–185. https://doi.org/10.1093/swr/svx014

Wells, M. B. (2016). Literature review shows that fathers are still not receiving the support they want and need from Swedish child health professionals. *Acta Paediatrica (Oslo, Norway: 1992)*, *105*(9), 1014–1023. https://doi.org/10.1111/apa.13501

Werner-Bierwisch, T., Pinkert, C., Niessen, K., Metzing, S., & Hellmers, C. (2018). Mothers' and fathers' sense of security in the context of pregnancy, childbirth and the postnatal period: An integrative literature review. *BMC Pregnancy and Childbirth*, *18*(1), 473. https://doi.org/10.1186/s12884-018-2096-3

Wilson, K. R., & Prior, M. R. (2010). Father involvement: The importance of paternal Solo Care. *Early Child Development and Care*, *180*(10), 1391–1405. https://doi.org/10.1080/03004430903172335

Xue, W. L., Shorey, S., Wang, W., & He, H.-G. (2018). Fathers' involvement during pregnancy and childbirth: An integrative literature review. *Midwifery*, *62*, 135–145. https://doi.org/10.1016/j.midw.2018.04.013

SUPPORTING INFORMATION

Additional supporting information can be found online in the Supporting Information section at the end of this article.

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