# Fatherhood Research Bulletin

## Bulletin 26 October 2014

**SPECIAL ISSUE ON FATHERS AND FAMILY VIOLENCE**

## FATHERS AND FAMILY VIOLENCE

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- Partner support and the prevention of perinatal depression and anxiety
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FROM ARACY

FROM The Family Action Centre
Fathers and family violence

When working on Domestic Violence for the Health Promotion Unit in Newcastle in the 1980s I came up with the idea of targeting television ads to the men who were being violent. My female colleagues were sceptical “They’ll never listen – they don’t want to change” was typical of the comments. We did go ahead with the ads featuring the captain of the local football team (an ex-policeman who had plenty of experience attending DV calls) but after a short run as community service announcements the campaign petered out. Since that time we’ve had major developments in the way that we identify violence in families and how we frame our responses: we now recognize emotional and financial abuse as part of the family violence picture and there is a shift to preventing violence from occurring in the first place. Within this uneven advancement there are also signs of a significant shift in how fathers and fathering are viewed. On the one hand, we now see the harm to children of witnessing domestic violence. As well, however, there is a growing recognition that fathers’ longing for a loving relationship with their children may be a motivator for fathers to heal the damage caused by abusive behaviour. The shift to be more inclusive of fathers has also arisen in services’ response to the abuse and neglect of children, with professionals and researchers pushing for fathers to be seen as a potential resource for the family rather than simply as a risk. In this Bulletin we feature web-based resources, practice examples and research which follow this trend to include fathers’ behaviours in our picture of family violence while seeking respectful engagement with fathering for the benefit of all the family.

Richard Fletcher
Responsive parenting: a strategy to prevent violence

**FRB comment:** The Bernard van Leer Foundation based in the Netherlands is a major funder of early childhood programs around the world. They promote responsive parenting as a strategy to prevent violence in families in low- and middle-income countries. The June 2014 edition of Childhood Matters describes mother programmes, child playgroup programs and a fathering program from Turkey.

In the Beyo lu district of Istanbul, the Bernard van Leer Foundation is funding the Informed Families – Healthy Generations project. While the project has yet to be formally evaluated for its effectiveness in reducing violence, this article describes its activities to promote responsive parenting and positive early anecdotal feedback.

I used to yell a lot at my children, even slapped them sometimes, but I stopped this behaviour after I attended the workshops. I mean when you yell and beat, the child begins to be worse. And the child doesn’t do what you told anyway. But, when you talk, when you explain it well the child does both what you have told and you are happy and the child is happy. It is really nice. My relationships got better with my husband and child.

These are the words of a woman who attended family seminars and group workshops to support responsive parenting, held by the Informed Families – Healthy Generations project in the Beyo lu district of Istanbul, Turkey. The project has been implemented since 2012, with the support of the Bernard van Leer Foundation, by the Culture City Foundation in cooperation with the Beyo lu Municipality, Istanbul Bilgi University and the Beyo lu Region Department of the Ministry of Education. The project aims to reduce all forms of violence in the lives of young children, including neglect, psychological/verbal abuse, harsh physical punishment, and exposure to violence at home or in the community. It involves various activities to develop responsive parenting, such as mother support groups, father support groups...
RESOURCES ON THE WEB

The fatherhood programme

The 8-week fatherhood programme focused on developing better communication skills and giving fathers an opportunity to practise the techniques they learned, for example in storytelling and toy making activities. Most of the fathers participating in the programme believed that they gained a better understanding of the importance of their role, with some speaking of creating ‘memorable moments’ with their children which they had not experienced in childhood with their own fathers.


Download the report from http://www.bernardvanleer.org/Responsive-parenting-a-strategy-to-prevent-violence

All babies count – The Dad Project

FRB comment: In the United Kingdom the National Society for the Prevention of Cruelty to Children (NSPCC), a leading children’s charity fighting to end child abuse launched their report of a unique dads project this month All babies count – The Dad Project.

Pregnancy and the first months of life are a critical period in a child’s development, a time when they are developing rapidly and when the foundations for their future are laid. During this period, parents are incredibly important. Their actions, the home environment they create, and the way in which they interact with their child, influence how the baby’s body, brain and mind develop. As experts from Harvard have written, “children develop in the context of relationships.”

Through the Dad Project we looked at how we could strengthen the relationships between dads, their child and his or her mother, and the services that work with them during pregnancy and the year after a baby is born. The project was run by the NSPCC, with support from the Design Council and funding from the Guy’s and St Thomas’ Charity. Our goal was to explore how we could improve information, advice and support for dads in order to promote their emotional wellbeing and help them to achieve better outcomes for their families.

Download the report from http://www.nspcc.org.uk/preventing-abuse/research-and-resources/all-babies-count-dad-project/
Fathering in the midst of violence

FRB comment: Much of our research and many of our practice examples are from the wealthier countries where the level of violence in the community is not a major factor. These short videos give some idea of the harsh conditions for becoming a father in South Africa, Brazil and Sri Lanka. They also demonstrate that change is possible with local interventions.

"The Gift of Fatherhood" - MenCare South Africa

The gift of fatherhood

Fatherhood is a gift to children, but it's also a gift to dads. In Khayelitsha, Themba inspires his younger brother, Andrew, who is about to become a father. Produced by Goodfight Media with Sonke Gender Justice...for Sonke, MenCare Global and MenCare, South Africa.

http://vimeo.com/97159996
RESOURCES ON THE WEB

Becoming Papa in Brazil

During the World Cup all eyes were on Brazil and the violence occurring on Brazil’s streets was a feature of several news reports. However there are remarkable examples of working with fathers to prevent violence in family contexts. Set in Rio de Janeiro, this film highlights the importance of work being done in Brazil – and worldwide – to teach fathers the power of nonviolence and the strength of equality. Warning: this 25 minute report begins with some violent news images.

https://www.youtube.com/watch?feature=player_embedded&v=X3NQ_erEr_4

Tamil fathers groups

100 fathers completed the MenCare fathers’ groups in the Ambagamuwa area of Sri Lanka recently. This father is wearing a T-shirt that reads "I am a loving father" in the Tamil language. He successfully completed the program’s fatherhood classes and carried his child to the stage to receive his graduation certificate.
Victim Support: Domestic Violence Yellow Card Program

*FRB comment:* A rigid gender categorization of family violence where men are seen as exclusively perpetrators and women are only seen as victims has made it more difficult to notice fathers and to address the variety of violent behaviours in families. The program developed in the Hawkesbury district of Sydney does not directly target fathers. It is, however, a practical example of identifying men’s need for assistance in the family violence area.

The Domestic Violence (DV) Yellow Card Program was collaboratively developed between Windsor Police and Hawkesbury District Health Service (HDHS) in 2012, after identifying male victims of domestic violence in the Hawkesbury Local Government Area.

Stephen Lillie, Men’s Health Coordinator at HDHS said, “Research and service provision rarely recognises men as victims of domestic violence. Knowing that male domestic violence victims exist, Windsor Police and HDHS collaborated to overcome the barriers to supporting men after DV incidents.”

“When attending domestic violence incidents, police obtain the victim’s consent for HDHS to contact them directly, overcoming self-referral barriers such as embarrassment, fear, apathy and helplessness,” said Stephen. “A NSW Police Force Domestic Violence Liaison Officer fills out a yellow card, which is then faxed to HDHS for referral to me.”

Stephen said, “Once I receive the referral, I contact the DV victims directly to discuss support and assistance options.”

“Men respond well to man-to-man phone contact, and perceive it as non-confrontational and less time consuming than formal counselling sessions.

“Phoning victims on their mobile phones is an effective method, and provides victims with an opportunity to talk in their own safe environment,” said Stephen.

In 2011 a snapshot was taken of 36 male victims, who were referred to the Yellow Card Program, which demonstrated that there is one male victim of domestic violence reported for every five female victims.

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PROGRAMS AND FATHER INCLUSIVE PRACTICE

An initial statistical review of the data showed:

5.5% of male victims of domestic violence were under 18 years-of-age, and were the victims of their father’s behaviour,
25% of male victims of domestic violence were the victims of their x-partner’s behaviour,
25% of male victims of domestic violence were the victims of their son/grandson/son-in-law’s behaviour,
30.5% of male victims of domestic violence cited separation issues as the cause of the incident, and
30.5% of male victims of domestic violence cited drugs and alcohol as the cause of the incident or a major contributing factor.

Stephen said, “Issues presenting included separation, blended families, adult children living at home and parenting. Services required include education, behavior management, counselling referral as well as “just listening to men and validating their experiences.”

“The second part of the program was a media campaign targeting the broader community and highlighting that a significant number of men are victims of DV, and that they are not all in same sex relationships,” said Stephen.

(NSW Health reports that 18.4% of the Hawkesbury region’s domestic violence incidents occur between same sex couples, compared to 5% stated by NSW Government)

The program encourages men to know (via the Yellow Card Program and local publicity) that:

services and support are available for male victims of domestic violence,
there is no shame in asking for help and support,
health services provide non-judgemental support, and
health services will recognise and respond appropriately to male victims of domestic violence.

Stephen said, “This partnership has provided a service to a group who were previously largely disregarded by the health sector and community services.”

“This is the first time that a service initiative has targeted male victims of domestic violence in Western Sydney, with face-to-face referral at the point of crisis to a local health service specializing in men’s health.

“The program has worked to raise awareness about male domestic violence, and challenges the premise that DV is solely a women’s issue without diminishing the value or necessity of women’s health provision locally.

“The program’s service delivery is tailored to meet men’s needs including: flexibility; and non-confrontational counselling methods designed to overcome barriers to men receiving typical counselling services. This service is a core business at HDHS and has helped families to deal with once ignored issues,” concluded Stephen.

Contact: Stephen Lillie Men's Health Coordinator Hawkesbury District Health Service - 02 4560 5714
Indigenous fathers healing violence

**FRB comment:** Aboriginal men in a recent NSW meeting discussing the way forward for the community were asked to identify the main issues facing them at this time. The stigmatising effect of the NT intervention was top of the list. The men spoke of the way that all Aboriginal men were painted as paedophiles and abusers how they struggled to ignore that shaming media tag when they were interacting with their children or grandchildren in public. The two programs described below do not address the harm caused by current abusive policies directly. They do however give an idea of the range of programs that have a constructive part to play in addressing fathers’ role in family violence in Indigenous communities. The *Red Dust Healing* program originated in the experience of fathering and violence in the lives of Tom Powell and Randall Ross. It has grown though strong community support from Aboriginal and Torres Strait Islander men and women. The *Community Program: Strong Aboriginal Men* has been developed by the NSW Government Education Centre Against Violence to provide a safe place for men to discuss their own history and its effect on their family roles.

**Red Dust Healing**

Red Dust Healing utilises traditional spiritual beliefs from LORE to heal people who are victims of LAW. Capturing the power of this simple yet effective technique through the observation and testimonials of those who have, before the program come against insurmountable adversities and then once completed workshop come out the other side alive, on the path to healing and equipped with the “tools” to build a future as leaders for their families and communities.

TOM POWELL: When the dust starts and it... the momentum starts rolling. And it just touches you in ways. Sometimes when you don’t want it to it just touches you. When the dust settles on our lives, all we get to keep and take with us is our dignity, our integrity and the love and respect we shared with people.

MAN: (SPEAKS ABORIGINAL LANGUAGE) Welcome. You have come here. This is my country. This is Biripi country. Thank you.

TOM POWELL: A little bit about Red Dust. It is just us coming together, like they did in the old times, sitting around working through some things. But like anything in life, what you put into these next few days is what you get out of it. It’s alright not to know the answers. It’s alright... to feel shame. It’s alright to cry. It’s alright to be angry.

RANDALL ROSS: We’ve come together to share our knowledge of going back to look at, ‘Well, what did they do to men?’ Then look at the history of oppression, to deal with the history side of it first. So that men have an understanding why, you know, you don’t know how to be a father. Why are you sitting in jail, you know? Why are you in mental health, you know? Why is it that, you know, you’ve left your partner? You know? Why is it that your children are hurting?

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PROGRAMS AND FATHER INCLUSIVE PRACTICE

TOM POWELL: Grief and loss is tearing our communities apart. How many of our communities have been through funeral after funeral after funeral? One community in particular, there was 10-, 12-year-old kids knew what uniforms they had to wear to funerals. Lost 40 in a year. That's why it's so important for us to come through, have a look at this. And fix the things in our lives. Because it's the ripple effect. You fix the man, you fix the family. Everyone needs to be and has to be accountable and responsible for their own actions. But if they haven't got the tools, they can't fix it. Like a mechanic can say, 'Look, that car is chugging along, you know, and it needs its fuel filter changed.' But if he hasn't got his tools with him, he can't fix it.

RANDALL ROSS: I want to ask you - how many of us have been in jail? I want to ask you - how many of us... have grown up without fathers? I want to ask you - even today in your own community... how many families don't have men? 'Cause I too grew up without a father figure.

RANDALL ROSS: My main motivation for doing this comes back to my own childhood. I grew up in a domestic violence situation. You know, I said I'd never be the same. I never wanted to turn out how... like my father. And it was an uncle that pulled me up and said to me, 'You know, son, understand where your dad has come from and what he had to go through growing up.' And that sort of made me realise - if my dad has gone through this, then there are many men that have gone through this. And I said, 'Well, I want to be able to use some of that experience, my own experience, to help many of our brothers.'


Contact: [http://www.thereddust.com/](http://www.thereddust.com/)

**Community Program: Strong Aboriginal Men – NSW Health**

It is crucial that Aboriginal men have an opportunity to address the trauma and shame of their own histories of abuse, and time to reflect on how this has shaped their adult lives. This needs to be done in a safe and respectful way that ensures Aboriginal men are supported and empowered to make the right decisions for the safety of themselves, their families and community. Over time it has become evidence that Aboriginal men seeking personal support with violence and abuse issues prefer to speak in a men's only context. In order to address the emerging issues

for Aboriginal men in a culturally competent and respectful way, ECAV has established an Aboriginal men's educational team.

Caring Dads: Helping Fathers Value Their Children

FRB comment: As identified by Prof Humphreys in her preliminary research findings, existing programs fail to address both fathering and domestic violence. This Canadian program has received wide acclaim and several services in Australia are considering testing its use with fathers.

Caring Dads is an intervention program for fathers (including biological, step, common-law) who have physically abused, emotionally abused or neglected their children, or exposed their children to domestic violence or who are deemed to be at high-risk for these behaviours.

The program consists of a 17-week, empirically-based, manualized group parenting intervention for fathers, systematic outreach to mothers to ensure safety and freedom from coercion, and ongoing, collaborative case management of fathers with referrers and with other professionals involved with men’s families.

The group component of Caring Dads combines elements of parenting, fathering, battering and child protection practice to enhance the safety and well-being of children. Program principles emphasize the need to enhance men’s motivation, promote child-centered fathering, address men’s ability to engage in respectful, non-abusive co-parenting with children’s mothers, recognize that children’s experience of trauma will impact the rate of possible change, and work collaboratively with other service providers to ensure that children benefit (and are not unintentionally harmed) as a result of father’s participation in intervention. The Caring Dads program can be located on a continuum of service.

Caring Dads was developed by Katreena Scott, Ph.D. C. Psych., Claire Crooks, Ph.D. C. Psych., Tim Kelly, Executive Director of Changing Ways, and Karen Francis, Ph.D. C. Psych in collaboration with child protective services, batterer intervention programs, children’s mental health agencies, women’s advocates, centres for children and families involved in the justice system, family resource agencies and probation and parole services. The university-community partnership at the heart of this program means Caring Dads is based on a solid foundation of both theory and practice.

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<th>Dominant therapeutic Strategies</th>
<th>Sample activities</th>
<th>Preferred Outcomes</th>
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<td>1. To develop sufficient trust to engage men in the process of examining their fathering</td>
<td>Motivational interviewing; Supportive stance; Building group cohesion</td>
<td>Genograms for each family; Reflecting on fathers’ own experiences of being parented; Goal setting</td>
<td>Consistent and punctual attendance; Completion of early homework assignments; Less overt hostility; Goals that are focused on fathers’ behavior, not children’s or mothers</td>
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<td>2. To increase men’s awareness of child-centered fathering</td>
<td>Psychoeducational; Behavioral (homework); Family systems (indirectly)–getting dads and kids to interact in new ways</td>
<td>“How well do you know your child” quiz; Nurturing wheel; Developmental stages</td>
<td>Move away from focus on abuse as a dichotomous outcome; Embrace goal of increasing child-centered parenting</td>
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<td>3. To increase men’s awareness of, and responsibility for, abusive and neglectful fathering, including domestic violence</td>
<td>CBT framework; Direct challenging and confrontation to take responsibility for own behavior; Integrating skills to apply in a variety of situations</td>
<td>Discuss child abuse wheel; Analyze video clips; Facilitated brainstorm of child abuse definition; CBT deconstruction of incidents</td>
<td>Increasing ability to differentiate between thoughts and feelings; Analysis of incidents shifts away from focus on controlling child to controlling themselves; Group members question each other’s motivations and perceptions of an event and provide feedback</td>
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<td>4. To help men appreciate the impact of their behavior and to plan for the future</td>
<td>Shame work; Increase awareness and decrease mistrust of other helping professionals and community resources</td>
<td>Supportive disclosure; Guest speaker to describe programs; Brochures, information</td>
<td>Can take responsibility for past behavior without being overwhelmed by shame; Link to other community services</td>
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The Caring Dads Manual and information is available at: [http://caringdads.org/](http://caringdads.org/)

Evidence of clinically significant change in fathers participating in Caring dads has been published as Katreena L. Scott, Vicky Lishak (2012) Intervention for maltreating fathers: Statistically and clinically significant change *Child Abuse & Neglect*, 36, 9, 680-684. This paper can be downloaded at [http://ac.els-cdn.com/S0145213412001433/1-s2.0-S0145213412001433-main.pdf?_tid=7f1c317e-6546-11e4-a686-00000aacb360&acdnat=1415231598_5e94a2a8a6bebb9b85bc18586adcf1f1a](http://ac.els-cdn.com/S0145213412001433/1-s2.0-S0145213412001433-main.pdf?_tid=7f1c317e-6546-11e4-a686-00000aacb360&acdnat=1415231598_5e94a2a8a6bebb9b85bc18586adcf1f1a)

The Caring Dads Manual and information is available at: [http://caringdads.org/](http://caringdads.org/)
NZ shaken baby prevention program “Are you strong enough?”

In December 2009 Child, Youth and Family invested funds over two years into supporting the Auckland District Health Board’s ‘preventing shaken baby syndrome programme’. The pilot programme commenced in January 2010 and was initially set up as a two year pilot. The main purpose of the pilot was to create a sustainable programme that educates caregivers of all newborns on how to cope with a crying baby, and the dangers of shaking a baby. The ADHB preventing shaken baby syndrome programme is based on American paediatrician Mark Dias’ model, which has shown to reduce Shaken Baby Syndrome rates by almost 50 percent.

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The programme involves talking with new mums and dads about why babies cry, and the things they can do if they begin to feel frustrated by the crying.

The education package takes ten minutes to deliver, and consists of:

- One brochure
- Six key messages
- A New Zealand produced DVD where families share their stories
- A poster that supports the messages to families
- An educator’s guide for anyone delivering the programme.

We want all new parents and caregivers to stop, think and count to ten. As well as teaching them strategies about never shaking a baby, we are embedding a message about protecting and nurturing vulnerable babies. More information on the program is available at http://www.powertoprotect.net.nz/education-programme/

**RESEARCH**

**FRB comment:** Investigations into fathers and family violence can begin from any number of points. In this sample of recent research we begin with the role of attachment between infants and their fathers and mothers and later violent behaviour and with the terrifying task of protecting your children from a violent regime. The following studies suggest several ways that fathers might be more effectively included into child protection and family violence services.

**Father-infant Attachment as protective**

**FRB comment:** In her review of attachment, parental bonds and physically aggressive and violent behaviour Joanne Savage identified seven studies that reported separate analyses for paternal and maternal attachment measures. The results were inconsistent and some varied for boys and girls but in a number of studies an infant’s secure attachment to the father predicted less violent behaviour as an adult. The impact of attachment history on inmates’ aggression also showed that early parenting and environmental factors can influence later family violence.

The association between attachment, parental bonds and physically aggressive and violent behavior: A comprehensive review

In the present paper a comprehensive review of studies of the association between indicators of attachment or its proxy, and physical aggression or violence is presented. The review includes both early developmental studies and criminological studies of older children and adolescents. The studies fall into five categories: studies of separation from parents or parent death; studies using attachment categories (such as secure or insecure-avoidant) conducted with very young children; studies of continuous measures of attachment and violent delinquency conducted with adolescents and young adults; studies of parental bonding and violence; and studies of parental sensitivity.

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The findings overall suggest a very consistent association between indicators of attachment and violent behavior. This association withstands a host of conservative control variables in multivariate models, including those for “child effects” and abuse. It is reported in both male and female samples and across cultures. The findings remain consistent in longitudinal analyses and in studies of attachment bonds to fathers. Nuances of the findings and suggestions for further research are presented as well as a summary of findings from studies of incarcerated samples.


**Fathering in the face of violence**

*FRB comment:* A violent environment surrounding the family can dramatically change fathering. The Argentinian right-wing military dictatorship ‘disappeared’ thousands of students and young people during the period 1976-1983. Mothers who came to protest carrying photos of their missing children “Mothers of the Plaza de Mayo,” became the most public form of resistance to the torture and murder of dissidents. Since the end of the regime there have been numerous accounts of the mothers’ role but now a film and TV series have documented the perspective of fathers who lost children to the terror. An analysis of the footage from these films has been published describing not only the agony and guilt of these fathers but also why ‘Los Padres de la Plaza’ did not grow to prominence alongside the mothers’ organization.

**Fatherhood in the Context of Political Violence Los Padres de la Plaza**

Grounded on a documentary film-based qualitative research methodology, the article undertakes a social constructivist theoretical analysis of the story of a group of Argentinean fathers whose children were victims of enforced disappearance. It focuses specifically on the impact of the massive use of enforced disappearance on fathers by the Military government in Argentina between 1976 and 1983. The premeditated use of this tactic gave birth to a protest movement named “Mothers of the Plaza de Mayo,” established by a group of mothers whose children were abducted. Whereas the mothers’ role in the context of this historical period of political violence was extensively documented, the question of the fathers’ role remains unclear. Based on “Padres de la Plaza: 10 Recorridos Posibles” by director Joaquin Daglio, a documentary film that portrayed the stories of ten fathers whose children were abducted, the article examines the experience of fatherhood in the context of political violence, the impact of enforced disappearance on these fathers, the role of the fathers in the Mothers’ protest movement, and the construction of fatherhood under these particular historical and personal circumstances. The article shows how fatherhood is experienced and transformed in the contexts of political violence, specifically in contexts of the institutionalized, state-sponsored violation of human and civil rights.

Changing Child protection practice to include fathers

**FRB comment:** Child protection services have for some time noted the need to engage with fathers and initiatives are regularly launched but few signs of progress are visible. In the US a *Strong Fathers* program (Pennell *et al.*) had fathers set their own change goals such as get my own place for me and my kids, be less physical with my discipline, be leader and not controller. Weekly logs by the fathers and data from child protection notifications confirmed the changes. In the UK context Goff describe how child protection conferences can be managed to include fathers so as to better tackle risks. One common complaint is that projects are too narrow, only addressing one aspect of service delivery. Scourfield and colleagues evaluated an intervention to change the culture of 6 local authorities in the UK to be father-inclusive. The project included audits of case files, policies and procedures; face-to-face training and an e-learning package for practitioners and the design of local action plans. In spite of this wide ranging approach the change over two years was modest. One of the clearest findings from the project was in the difficulty of conducting an evaluation which assesses changes in practice. An Australian study by Zanoni and colleagues of 35 fathers involved in an intensive parenting program identified the men’s own history of abuse and exposure to violence as well as their attempts to protect their children from their partner’s violence.

**Family violence: Fathers assessing and managing their risk to children and women**

All too often, child protective workers fail to identify domestic violence, thus, endangering both child and adult family members. A potential solution is engaging men who abuse in assessing and managing their own risk to family members. This was the aim of a psycho-educational fathering program developed and tested in the southeastern United States. Over the course of the group, the men set goals on how to relate to their children and to their current or former partners, and they reflected on their achievement of these goals. Themem’s self-appraisals were supported by their caseworkers’ assessments. A comparison of child protection data before and after entry in the group showed an extensive decrease in the families assessed with child protection findings and with household domestic violence. The evaluation used a qualitative comparative analysis (QCA) that identified configurations of conditions overlapping with child protection outcomes. Some of the men’s characteristics included in these configurations ran counter to predictors usually associated with child maltreatment and domestic violence. The evaluation results point to the unique contributions that QCA can make to risk assessment.


**The Participation of Fathers in Child Protection Conferences: A Practitioner’s Perspective**

Fathers’ involvement in child protection processes appears to remain low and is problematic given their influence over the lives and wellbeing of their children and partners. Men’s views need to be taken into account, as part of consideration of risk and the meaning of their participation for others in the family.

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While the risk or presence of abuse may necessarily limit how the participation of a father is managed in case conferences, and needs to be explored and challenged, in most cases it does not justify failing to contact or seeking to involve fathers. Involving fathers is crucial to actively managing and tackling risks. Most work on engaging fathers has been focused on engaging them one-to-one or in families. This article focuses on the neglected issue of the participation of fathers in child protection conferences and subsequent inter-agency team work on the child protection plan recommended at the child protection conference. It argues that, with careful preparation and chairing, fathers’ participation can be managed using the skills of relationship-based and authoritative practice in tandem.


**A Systemic Approach to Improving the Engagement of Fathers in Child Safeguarding**

Increasing the involvement of fathers in child safeguarding is an issue which has seen relatively little practice innovation in mainstream services. This article concerns a bold attempt to improve practice in this domain through a systemic approach. Key findings are presented from an evaluation of a Fatherhood Institute project in six English local authorities. The intervention was positively received and the self-efficacy of children’s services staff improved on most measures as a result of training. However, not all planned aspects of the project could be implemented. The article reflects on the challenge of achieving practice change in these areas – both child safeguarding and engaging fathers – where established practices are deep-rooted. There is also reflection on the challenge of public service innovation in a context of austerity.


**Child protection fathers’ experiences of childhood, intimate partner violence and parenting**

Research on mothers in child protection families has revealed that they often have a history of childhood abuse. Research has also shown that a considerable proportion of child maltreatment co-occurs with intimate partner violence (IPV) towards the mother. However, there is a dearth of research on the childhood histories and IPV victimization experiences of fathers in child protection families. To address these gaps in the literature this exploratory mixed method study of 35 men associated with a parenting program in Australia investigated fathers’ childhood experiences, exposure to IPV and concern for their children’s safety. Although this study was conducted with a specific group of fathers screened for serious personal problems, the findings suggest that, similar to mothers in child protection families, there are some fathers within typical child protection populations who have histories of childhood abuse and IPV victimization. In addition, many of the fathers in this study tried to protect their children from maltreatment related to the other parent. The main implication of the findings is that child protection fathers who have histories of abuse and IPV victimization should be afforded the same support and assistance as mothers in similar situations.

**ONGOING RESEARCH**

**Fathers, Family Violence and Intervention**
This ARC Linkage project brings together researchers from The University of Melbourne, University of South Australia and University of Western Australia and a large consortium of NGOs and Governments from three states across three different program areas:
1. Men’s Behaviour Change (MBC)
2. Culturally specific programs for Indigenous men who have perpetrated family violence (Indigenous)
3. Fathering programs that address child abuse (Fathering).

The ultimate aim of the project is to improve the parenting experience of children whose fathers have used domestic and family violence (D/FV). There will be two related outcomes:
1. Foundational knowledge about how and under what circumstances fathers who have used D/FV are parenting
2. Standards and guidance for practice in working with men where there is D/FV to improve the parenting experience of children and the safety of women.

This research project was also discussed by Prof Humphreys in an AIFS webinar in July.

**Family violence, separated parents and fathering: Empirical insights and intervention challenges**

In this webinar Prof Humphreys explained:

So in terms of the precursors to the research, I’d been previously involved in a program called "Talking to my mum" which involved strengthening the mother/child relationships in the aftermath of domestic and family violence, and I have to say that in presenting over a number of years about that program of work and the activities that we developed as part of that program of work, that there was rarely an occasion where I wasn’t asked, "And what about the fathers?" And so it was clear that there was a gap in relation to thinking about the issues for fathers where there was domestic violence and particularly when the men were perpetrating the violence.

We also found that previous research showed that many men on men’s behaviour change programs engaged most strongly with the issues of fathering, that the engagement strategy, the motivation to change actually often came from their thinking about their children. We also found when we’ve been doing some work on men's behaviour change programs in Australia that many of these men are now being referred from Child Protection or from Family Relationship Centres, that is that in fact they’re not really being referred necessarily for the violence directly about women but for the impact of that violence on their children. And I guess we had concerns that most of the programs they were being referred to don't actually address much in relation to parenting or fathering and so there seems a mismatch between the referral sources and the issues that men are being referred for.

The transcript can be accessed here:
**ONGOING RESEARCH**

**Partner support and the prevention of perinatal depression and anxiety**

I am a Masters of Clinical Psychology/PhD student at the Australian Catholic University in Melbourne. My interest in mental health literacy and the prevention of mental illness was fostered through my previous work as a research assistant in the Population Mental Health Group at the University of Melbourne. My current research focuses on the role of partner support in the prevention of perinatal depression and anxiety. I developed a specific interest in perinatal mood problems when a family member experienced difficulties with the transition to parenthood. While reviewing the academic literature it became clear that partner support is an ideal target for prevention efforts targeting perinatal distress. It is well-established as a protective factor and it is modifiable. A couples-focused approach also recognizes the need to address the mental health of both mothers and fathers. Although partners typically view each other as their primary source of support this has not been adequately utilised by existing prevention programs, which tend to exclude fathers and be limited to low attendance rates. It is hoped that this Delphi consensus study will identify how partners can best support each other to prevent perinatal depression and anxiety. The resulting guidelines will be used as the basis of a universal prevention strategy to reduce the incidence of perinatal depression and anxiety in both mothers and fathers.

Contact: ta0126503@myacu.edu.au

**Expert panel wanted**

We would like to invite clinicians and researchers to participate on an expert panel to develop guidelines for partners on actions they can take to support each other and prevent perinatal depression and anxiety. This project is being conducted by Pam Pilkington, Dr Tom Whelan, and Dr Lisa Milne at the Australian Catholic University in Melbourne.

Research has established that partner support protects against perinatal mood problems. However, little is known about the specific actions partners can take to support each other and reduce their risk of developing depression and anxiety symptoms during pregnancy and following childbirth.

We are recruiting an international panel of clinicians, researchers, and consumer advocates to improve our understanding of how partners can best support each other to prevent the development of perinatal depression and anxiety.

You are eligible to participate if you: Have a minimum of five years of experience in research and/or clinical treatment involving perinatal mental health OR You are a consumer or carer advocate with experience of perinatal depression or anxiety

We would greatly appreciate your help with this project. Panel members will be asked to independently complete three online questionnaires. The total time commitment is about 2 hours.

If you would like to participate please click the link below to find out more and access the first questionnaire. Contact: [https://acu.qualtrics.com/SE/?SID=SV_3jDk1ZlPePFERRYEJ](https://acu.qualtrics.com/SE/?SID=SV_3jDk1ZlPePFERRYEJ)
Ongoing Research

Paternal perinatal mental health.

As part of my Doctor of Psychology (Health) studies I am completing a research thesis looking at men’s mental health during their partner’s pregnancy, and following the birth of their baby, with a focus on paternal postnatal depression. I had been interested in men’s health for a while before starting my postgraduate studies because I have known other young guys who have been struggling with their mental health and finding it difficult to access appropriate treatment options. I was also concerned by media reports about farmers suiciding as they struggled to cope with the drought, PTSD symptoms amongst soldiers returning from Iraq and Afghanistan, and depression amongst men who experienced the Black Saturday bushfires. I also remember looking around at the faces of my fellow doctoral students on our orientation day, and feeling somewhat disappointed that out of 20 new students, I was one of only two males. At that point I think I felt that I had an obligation to focus on men’s health as part of my Health Psychology studies. I took the opportunity to study this area because I had been hearing many stories from friends about young men they knew who were having difficulties in their role as new fathers, so I wanted to explore this in more detail. I am not a father myself yet, but I expect to become a parent at some point in the next few years, so at the moment I have an objective interest in this topic and hopefully it will also be of subjective interest to me one day. I think the role of fathers, and society’s expectations of young adult men more generally, has been changing quite significantly over the last few decades, and combined with current economic circumstances that are challenging father’s traditional role as full-time working breadwinners, there is a need for research that focuses on men’s mental health issues and developing systems to treat mental health issues experienced by men.

Our research

My current research, with supervisors Professor Helen Skouteris and Dr Ben Richardson at Deakin University, is focussing on paternal depression in the perinatal period, and is also looking at the impact of fatherhood on men’s wellbeing and the risk factors for depression amongst fathers with dependent children. Our initial review of the literature into male depression found that young men between ages 20-45 report the highest prevalence of depression symptoms compared to older men or adolescent males, and Australian Bureau of Statistics data indicates that this same group of men have the highest suicide rate compared to any other population group. Research has also consistently identified that expectant and new fathers report rates of depression up to twice as high as the adult male general population. Because most men between ages 20-45 have dependent children, our first study was a systematic review (currently under review) examining whether fathers report higher rates of depression than childless men, and whether there are specific lifestyle, economic, or relationship factors that are associated with depression experienced by fathers. Our second study was a longitudinal study (also under review) that investigated whether the quality and satisfaction that a father has with his relationship with his partner, and also with his social supports, is predictive of not only postnatal depression, but also postnatal anxiety and stress.

Our third study, which we are still conducting, is examining paternal perinatal mental health beyond the “traditional” DSM symptoms of depression, and looking at “masculine depression” symptoms. There has been little previous research examining externalising behaviour amongst new fathers, so we are hoping to expand on current knowledge in this area.

We are still looking for fathers to participate in our study, so if you or someone you know is the father of a child under 12 months old, participation involves completing an anonymous, online questionnaires, which should take about 20 minutes. For further information go to http://www.deakin.edu.au/psychology/research/adrian_schulz/ or contact Adrian Schulz at sadri@deakin.edu.au
FROM ARACY


FROM The Family Action Centre

Students completing the postgraduate course Engaging men and fathers commented:

“The actual course itself has been priceless (professionally) as I have used every article and new concept to put together some wonderful professional development opportunities for my colleagues. These opportunities will build the capacity of the staff as we continue to inform and refine our practice when engaging members of our community, particularly fathers.

“As a man and a father; with over two decades of experience working in the welfare sector, studying this course has provided me some new/further insight into both the theoretical and practical aspects of fatherhood.

“ This course has not only provided me with a new appreciation of a fathers role in developing a child’s social, emotional and spiritual state of being, but it has also allowed me to become more aware of the students around me who come from single families and appreciate them on a whole new level.

Don’t worry
Now that you have read this entire Bulletin you still have something to look forward to:

The next Bulletin

Please view in HTML. If HTML is not accessible or you are having trouble viewing the links go to
Or contact Richard Fletcher:
richard.fletcher@newcastle.edu.au

This edition of the Fatherhood Research Bulletin was produced with assistance from Simon Fowler, Bachelor of Social, Science Student UoN, on behalf Family Action Centre, The University of Newcastle