Promoting Positive Father Involvement: A Strategy to Prevent Intimate Partner Violence in the Next Generation





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About Shift

Shift: The Project to End Domestic Violence was initiated by the Brenda Strafford Chair in the Prevention of Domestic Violence, in the Faculty of Social Work, at the University of Calgary. Shift's goal is to significantly reduce domestic violence in Alberta using a primary prevention approach to stop first-time victimization and perpetration. In short, primary prevention means taking action to build resilience and prevent problems before they occur.

Shift's purpose is to enhance the capacity of policy makers, systems leaders, clinicians, service providers and the community at large to significantly reduce the rates of domestic violence in Alberta. We are committed to making our research accessible and working collaboratively with a diverse range of stakeholders to inform and influence current and future domestic violence prevention efforts through primary prevention.

About this Report

This report is situated within a broader research agenda designed to serve as a foundation for a comprehensive strategy to engage men and boys in violence prevention to reduce rates of domestic violence in Alberta. Positive fatherhood involvement was one of seven key entry points identified for engaging men and boys. (Please visit our website at www.preventdomesticviolence.ca to download this and other research on engaging men and boys in violence prevention).

Over the next two years, Shift will continue to produce research papers to support the design of a comprehensive strategy to engage men and boys in violence prevention. This research will focus on informing and changing policy and practices with the end goal of preventing domestic violence from happening in the first place.



1.0 Introduction

Supporting fathers to become more positively engaged in the lives of their children is a promising strategy to prevent intimate partner violence (IPV) in the next generation. Myriad studies completed over the past three decades have confirmed that both positive and negative parenting practices and adult relationship skills can be transmitted inter-generationally. For the most part, the research has focused on poor parenting practices and skills, showing that negative and abusive behaviours directed towards one's children or partner (or both) are often perpetuated by those children when they become adults.¹ In short, children who are raised by a parent with poor parenting skills are less likely to become supportive, nurturing parents; children who are directly maltreated by a parent or exposed to intimate partner violence (IPV) are damaged in a host of ways and are more likely to abuse their own children and relationship partners.²

Until recently, the vast majority of the parenting research and interventions focused on mother-child relationships. Research pertaining to fathers as parents has largely been limited to the ways in which fathers' economic and other contributions foster family stability and support mothers' ability to parent well.³ Research is now confirming and clarifying the vital and distinct role that fathers play in child development.⁴ New studies indicate that, for better and for worse, fathers influence their children independently from mothers and as strongly as mothers.⁵ In addition, fathers are increasingly involved in childrearing in two-parent families and there has been a clear trend toward shared custody and shared parenting in families in which the parents are separated or divorced.⁶

The new research and social trends have sparked interest in Canada and other countries in policy and programming interventions to support or improve fathers' parenting skills and to increase their involvement with their children in ways that promote children's positive development. This paper focuses specifically on positive father involvement as a primary IPV prevention strategy, that is, a strategy to prevent IPV before those behaviors develop in the next generation. The paper provides a rationale for investments in positive father involvement strategies for fathers who have perpetrated or may be at risk of perpetrating either or both IPV or child maltreatment in order to prevent IPV perpetration and victimization in the coming decades, along with recommendations in the areas of research, policy, and programming.

Intimate partner violence

As defined by the World Health Organization, "intimate partner violence" is behaviour within an intimate relationship that causes physical, sexual or psychological harm, including acts of physical aggression, sexual coercion, and psychological abuse and controlling behaviours.⁷

Intimate partners

Alberta Justice defines "intimate partners" as opposite-sex or same-sex partners in current and former dating relationships, current and former common-law relationships, current and former married relationships, and persons who are the parents of one or more children, regardless of their marital status or whether they have lived together at any time. 8

Primary prevention

"Primary prevention" in this context means reducing the number of new instances of intimate partner violence by intervening before any violence has occurred. Primary prevention "relies on identification of the underlying, or 'upstream,' risk and protective factors for intimate partner violence, and acts to address those factors." This report offers primary prevention strategies to reduce the chances that children will grow up to be perpetrators or victims of intimate partner violence.



2.0 Methods

The information in this paper was gathered through (i) searches of the academic data bases (including PubMed, CINAHL, Cochrane Library, Campbell Library, JSTOR, PsycINFO, SSRN, and Google Scholar) and (ii) searches of academic and government websites and databases on evidence-based and/or model programs in Canada, the United States; Australia, and the U.K. using search terms including but not limited to the term "fathering" and "fatherhood" in conjunction with "positive," "parenting," "outcomes," "child development," "program," "evidence based," "synthesis," "engage," "transmission," "inter-generational transmission," "child abuse," "child maltreatment," "domestic violence," and/or "intimate partner violence" and, given the high volume of published research and grey literature, with particular attention to articles published since 2005.

2.1 Scope and limitations

This paper focuses specifically on positive father involvement as an IPV primary prevention strategy; it does not address all aspects of the research, policy, or programs relating to fathering as a whole.

Not included in the discussion are the social and economic ramifications of the growing number of children who are being raised in families with absent fathers, particularly in the United States, where one in three children lives in a home without a biological father present. Encouraging and assisting fathers to take financial responsibility for their children is one of the key drivers of the American responsible fatherhood movement but this has not been at the forefront of fatherhood initiatives in Canada, where the vast majority of fathers are employed and present in their children's lives. 12

In addition, there appears to be no empirical research on effective positive fatherhood involvement strategies for gay fathers, so the content of the paper is largely limited to heterosexual fathers. There is also very little or no empirical research on strategies for immigrant or Canadian-born ethno-cultural minority fathers or Aboriginal fathers, so specific approaches for these populations are not addressed here. While some of the American research on fathering and its outcomes, along with strategies to engage at-risk fathers in programming, has included or focused on at-risk African-American fathers, due to social, demographic, and other differences between the United States and Canada, it is not clear that the findings from this research are applicable in Canada. It is likely, however, that programming which targets fathers belonging to dominant ethno-cultural and non-Aboriginal groups in Canada may not be appropriate for or effective with immigrant and Aboriginal fathers. To achieve positive, sustained outcomes, program content must be relevant to and suitable for participants.¹³ More information may soon be available through the gay/bi/queer fathers, indigenous fathers, and immigrant fathers research clusters of the Father Involvement Research Alliance housed at the University of Guelph.¹⁴



Finally, despite the widespread emergence of fatherhood programs and initiatives in the western world, very few programs have been subject to repeated evaluations using a large sample and an experimental design. The vast majority of fatherhood programs, including some that are well known, have not been evaluated at all. Many of the unevaluated programs do not appear to use an evidence-based model or evidence-based practices, suggesting either that they may not be effective or that they are advancing the field with innovative approaches that have yet to be evaluated. Either way, there are, at present, only a few fatherhood programs

that meet the "gold standard" of evidence-based practice and can be singled out as effective models that should be widely replicated, although rigorous evaluations of a few new promising programs are currently underway.

In this paper, best practices in positive fatherhood programs have been drawn from the few programs that have been demonstrated to be effective, supplemented with information about programs that have shown promise of effectiveness through a single experimental evaluation. Findings from the evaluations of promising programs will help to further inform the development of primary IPV prevention strategies through positive fatherhood policies and programs but, as discussed elsewhere, local replications would be helpful. Rigorous evaluations of new, innovative programs would also contribute to the research base.

Evidence-based programs

In this document, an "evidence-based program" is defined as one that: (i) has been identified as a "model" or "best practice" program, meaning that it has been repeatedly demonstrated to be effective through studies using good methods, a reasonable sample size, and an experimental, "gold standard" design (includes a control group with random assignment of subjects to the experimental and control groups) or a quasi-experimental design (includes a control group but not random assignment), with the results published in a peer-reviewed journal, or (ii) may be considered a "promising" program, meaning that it has been demonstrated to be effective in at least one study meeting the above criteria.

3.0 Rationale for investing in positive father involvement as an IPV prevention strategy

3.1 Fathers' increased parenting role

Most children in Canada live with their fathers: In 2006, 80% of fathers lived with their children full-time, and only 4% of fathers had no children in the home. In addition, fathers are more involved with childrearing than in the past. For instance, the number of Canadian fathers reporting daily participation in child care rose from 57% in 1986 to 73% in 2005, and the proportion of families with a stay-at-home father rose from 4% in 1986 to 13% in 2011. Also, in 2011, 3.5% of families in Canada were lone-parent families headed by men, up from 2.9% in 2001.

There is good evidence that extending paid parental leave following the birth of a child increases the likelihood that fathers will take advantage of this opportunity, and research indicates that "generous parental leaves lead to increased father time investment in their children and involvement with their children generally." Following amendments to the Employment Insurance Act in 2001, the proportion of Canadian fathers who took paid parental



leave increased from 3% in 2000 to 20% in 2006. In Quebec, where fathers are entitled to up to five weeks of paternity leave in the first year of a child's life, with higher benefits than those provided under federal legislation, more than 50% of fathers take paternity leave. Similar patterns have been observed in countries offering extensive parental or paternal leave benefits, such as Norway and Sweden, particularly among higher-earning fathers.

In addition, most fathers remain a strong presence in their children's lives after the parents separate or divorce. At present, it is impossible to determine the precise proportions of separated and divorced fathers who have no custody, sole custody, joint custody, and shared custody. Current figures represent only those cases decided by the courts, and the majority of separating couples now make their own custody and shared parenting arrangements. Although these data do not appear to be tracked, research indicates that couples who make their own arrangements are twice as likely to enter into a shared parenting agreement as those who take the matter before the courts. We do know that there has been a clear trend over time away from sole custody by either parent toward joint custody and shared custody, and that, overall, separated and divorced fathers in Canada with and without shared parenting arrangements combined spend an average of 100 days with their children. Even when a child lives primarily with the mother, father involvement usually continues, suggesting that "shared parenting" has become the norm in Canada. Although recent data do not appear to be available, in the mid-1990s, 77% of Canadian children who lived with their mothers spent time with their fathers on at least a weekly or bi-weekly basis.

Joint custody and shared parenting are also common in families where the father has perpetrated IPV. One American study reported that, in a community sample of IPV victims, 80% still lived with or had contact with the perpetrator through child custody or access six months after the abuse had been reported to the police;²⁶ other American research shows that IPV is often not documented in custody proceedings²⁷ and that a history of IPV has little impact on courts' decisions regarding visitation.²⁸ There appears to be no recent Canadian research on this issue, but a review of Canadian family law cases from 1997-2000 found that judges tended not to grant custody to male perpetrators of IPV if the woman's claims of abuse were accepted as valid, but routinely granted these fathers access to their children on an unsupervised basis.²⁹ Jaffe notes that "[c]ustody arrangements that provide as much contact as possible with both parents are assumed to be in children's best interests, and contact is only limited in situations where children are directly harmed or where there is a clear aggressor and victim, and there is evidence to support the claims of the victim."³⁰

The debate about child custody and access for fathers who have perpetrated IPV is contentious,³¹ given (i) the high co-occurrence of child maltreatment and IPV,³² (ii) research showing that perpetrators of IPV sometimes use shared custody and access as a means of ensuring ongoing contact with and control over their former partners,³³ and (iii) tensions between child protection systems, which sometimes expect parents to leave abusive partners



or risk apprehension of their children, and family law systems, which encourage continued contact between children and both parents.³⁴

As observed by Hughes and Chau, "[d]ecisions are clear in situations where children are directly harmed by the actions or behaviours of one or more of their parents. In families where intimate partner violence (IPV) is occurring, however – where it is not clear how much violence children have been exposed to and will continue to witness – the decision-making process is more challenging. If IPV is not recognized, children can be placed at risk and exposed to further violence. Conversely, if the level of violence or risk is overestimated, relationships between parents and children may be unnecessarily restricted."³⁵

A number of IPV assessment tools and frameworks have been developed in recent years to determine level of risk and patterns of violence and provide guidance on suitable parenting and custody arrangements,³⁶ but there appears to be no research on how frequently they are used and under what circumstances by Canadian family courts. We do know that research has documented the lack of IPV training and use of IPV intervention guidelines among divorce mediators and child welfare investigators,³⁷ suggesting that provincial requirements or guidelines may be required to protect children and partners and to identify perpetrators who may benefit from appropriate fathering programming.

Even highly-skilled parents sometimes need professional guidance and support to manage coparenting or child custody and access following separation, and challenges can be profound in families that have experienced IPV. Alberta has already implemented programming to assist separating parents to address challenges relating to co-parenting: Alberta's *Parenting After Separation Seminar (PASS)* is a mandatory six-hour course for all separating or divorcing parents with children up to 16 years of age. Developed by the Court of Queen's Bench and Alberta Justice, the program covers topics including relationship building, effective communication, the effects of divorce on children and on parents, and co-parenting plans.³⁸ The Province also offers a supplementary, three-hour program to parents in "high conflict" families, *Parenting After Separation for High Conflict Families (PASHC)*, which includes planning for parenting, safety, boundaries, and safety planning, and monitored exchange of children.³⁹ Participation in PASHC is voluntary. Finally, the Province offers a voluntary six-hour, skill-based course to teach parents how to communicate effectively while living apart (*Focus on Communication in Separation (FOCIS)*).⁴⁰ All three programs are provided free of charge.

3.2 Fathers' influence on child development

3.2.1 What constitutes "positive" fathering

There are two primary components of good or "positive" fathering: Having an authoritative parenting style and being involved with the child as a father. 41



Extensive research over many decades has shown that, for both fathers and mothers, an "authoritative" parenting style trumps both "authoritarian" (or "punitive" or "harsh") and "permissive" parenting in terms of child and youth positive development. "Authoritative" parents balance encouragement of independence and sense of identity within warm and responsive relationships with high and consistent expectations about behaviour and maturity and compliance with their authority. "Permissive" parents may have warm and loving relationships with their children, but rules are few and expectations of children are low. "Authoritarian" parenting is verbally hostile and coercive, i.e., arbitrary, pre-emptory, domineering, and intended to demonstrate the power of the parent over the child.⁴² Both permissive and authoritarian parenting styles are associated with child and youth internalizing and externalizing problems, including internalized distress, conduct disorder, and delinquency. 43 Although most of the research on parenting style has been conducted on families of European or African descent in the Western world, recent studies suggest that these outcomes appear to be generally true across cultures, 44 with a few variations. 45 For instance, many studies have attempted to sort out the intricate cultural factors that mediate the association between authoritative parenting by Chinese parents and positive child outcomes.⁴⁶

In its simplest conception, father involvement, whether positive or negative, includes three domains: engagement (direct interactions with the child), accessibility (being available to the child while engaging in something else), and responsibility (managing the child's time and care). Fathers who are engaged with, accessible to, and responsible for their children in positive ways (i.e., ways that exhibit qualities such as warmth, support, and consistency help them to flourish.

Drawing on the research, Cowan and colleagues identify five domains that individually and collectively shape the quantity and quality of fathers' involvement with their children:⁴⁹

- (i) individual family members' mental health;
- (ii) the patterns of both couple and parent-child relationships transmitted across the generations from grandparents to parents to children;
- (iii) the quality of the mother-child and father-child relationships;
- (iv) the balance between life stressors and social supports outside the immediate family; and, perhaps most importantly,
- (v) the quality of the relationship between the parents, regardless of whether the parents are married, divorced, separated, or never married.⁵⁰

Additional factors identified by research that may influence fathers' involvement include fathers' demographic and other characteristics, such as age, ethno-cultural background, personality, education level, and employment status, along with children's characteristics (e.g., age, temperament, disabilities). There are mixed findings in the research about whether married fathers are more engaged with their children than cohabiting fathers. 52



3.2.2 The benefits of positive fathering to children's healthy development

Research shows that supportive, encouraging fathers help mothers to parent better: It has long been established that positive inter-parental relationships promote a harmonious home environment, which fosters children's positive development;⁵³ that fathers' contributions to both parenting⁵⁴ and home and family maintenance⁵⁵ foster maternal satisfaction with the inter-parental relationship; and that supportive fathers can "buffer" the effects of a less supportive (e.g., depressed) mother.⁵⁶

But, apart from its effects on mothers' ability to parent well, positive fathering also has direct impacts on child well-being. Of the three domains of father involvement, engagement has been the most studied, with research showing that, overall, positive father engagement reduces behavioural problems and delinquency in adolescent boys and emotional problems in adolescent girls, improves boys' and girls' social and inter-personal functioning from childhood to adulthood, and improves cognitive development and educational outcomes in both boys and girls in low socio-economic status families.⁵⁷

These positive effects begin in infancy. For example, fathers who care for and engage with their infants and toddlers help to foster children's secure attachment relationships, 58 which promote emotional well-being and healthy relationships across the lifespan⁵⁹ and lay the foundation for strong father-child bonds throughout childhood, adolescence, and beyond. Within the context of a positive father-child relationship, low-income fathers' engagement in learning activities with their children in early childhood is associated with children's subsequent cognitive development and academic success.⁶⁰ Some research also suggests that fathers may play a larger role than mothers in supporting children's confidence in exploration and interaction with their social and physical environments. 61 This is often facilitated through physical play between fathers and children, 62 at least in the dominant North American culture, 63 which also has a direct link to children's cognitive capacity and emotional well-being.⁶⁴ Emotional well-being in childhood is also strengthened by father availability and reliability. 65 In adolescence, a strong father-child relationship has been shown to prevent delinquency among boys, 66 and effective parenting by fathers can buffer the effects of negative peers on adolescent girls' conduct problems.⁶⁷ Furthermore, the quality of the father-child relationship in adolescence is associated with adult children's life satisfaction.⁶⁸

3.2.3 The impacts of negative fathering on children's well-being

In its most extreme forms, negative fathering includes child maltreatment in the form of child physical, sexual, or emotional abuse, child neglect, or exposure to intimate partner violence (IPV). Fathers and father surrogates (step-fathers, mothers' partners) are far more likely than female caregivers to perpetrate sexual abuse and severe physical abuse ⁶⁹ although, at least in Canada, mothers are responsible for more of the substantiated cases of child neglect and abuse in general than fathers are. ⁷⁰ While there is little empirical research on the incidence of child



maltreatment by unrelated males in the household, a few American studies⁷¹ and two older Canadian studies⁷² identified father surrogates as responsible for a high proportion of serious child maltreatment and homicide cases.

It is well established that both direct maltreatment and indirect maltreatment (through exposure to IPV) are predictors of emotional problems, as well as a range of aggressive and delinquent behaviours for both male and female children and adolescents.⁷³ Research also shows that these problems can continue into adulthood.⁷⁴ Experiencing or witnessing abuse and violence can lead to the inability to regulate emotions,⁷⁵ and teaches young people that abuse is appropriate, justifiable, and deserved,⁷⁶ and that aggressive behaviour can be a useful way of achieving certain goals.⁷⁷ Many studies have found that boys who have been maltreated are more likely to develop externalizing behaviours, such as aggression, whereas girls are more likely to develop internalizing problems, such as depression,⁷⁸ although some studies have concluded that maltreated children of both genders can develop aggressive and anti-social behaviours and attitudes.⁷⁹

Negative fathering need not be as extreme as overt child maltreatment. Extensive research over many decades has shown that authoritarian parenting is associated with child and youth internalizing and externalizing problems, including internalized distress, conduct disorder, and delinquency.⁸⁰ Other common forms of negative parenting by both mothers and fathers include inconsistent discipline, corporal punishment, lack of warmth and affection, detachment and hostility, rejection, and poor monitoring and supervision.⁸¹ A substantial body of recent research also shows that even mild and moderate corporal punishment has harmful side effects that can endure into adulthood.⁸² These negative effects include but are not limited to antisocial behaviour in children; 83 adult emotional problems and depression 84 (even controlling for socioeconomic status, gender, spousal violence, alcohol consumption, and witnessing violence);85 adult aggression and criminal behaviour;86 and increased verbal and physical aggression with marriage and dating partners.⁸⁷ In addition, there is some indication that corporal punishment (spanking, slapping) and minor forms of neglect (e.g., not comforting a child who is upset) experienced in childhood are independently associated with an increased probability of young women and, more commonly, young men verbally coercing (e.g., insisting or threatening) and physically forcing others to have sexual relations with them against their will.⁸⁸

3.2.4 Risk factors for negative fathering and inter-generational transmission of child maltreatment and IPV

In Canada, the most common caregiver risk factors for substantiated child maltreatment, regardless of gender, are being a victim of IPV, having few social supports, experiencing mental health issues, and abusing alcohol and/or drugs. Additional risk factors include being a perpetrator of IPV, having a history of foster care (generally a proxy for having experienced serious maltreatment), having physical health issues, and being cognitively impaired. ⁸⁹ Early



parenting, particularly in the adolescent years, can also be a risk factor, as it is linked with negative parenting attitudes and behaviours, along with lack of knowledge and unrealistic expectations about infant and child development. 90 Research indicates that a high proportion of young fathers are engaged in illicit activities and drug use, and have difficulties controlling their tempers, 91 all of which place them at higher risk of perpetrating child maltreatment. 92

In addition, fathers who have served time in custody may also be at risk of perpetrating child maltreatment and negative fathering due to overlaps between criminal offending and other risk factors (e.g., substance abuse). It is estimated that at least one-third of men in custody have perpetrated IPV. A 2007 study by Correctional Services Canada reported that about 32% of men in federal correctional institutions were fathers, and about 60% had children living with them at the time of their arrest. Fifty-three percent of fathers without child custody and 37% of those with some type of child custody identified substance use as a source of marital or family problems. Page 194

Although they are not necessarily at risk of maltreatment, some children are simply more difficult to parent than others, and parents' personality traits and parenting styles can be amplified by their children's temperaments, for better and for worse. For instance, personality characteristics can influence the emotions parents experience and/or the attributions they make about the causes of child behaviour (e.g., the parent may interpret crying to be the result of tiredness or as the child's desire to manipulate the parent). Also, parenting a child with a disability sometimes carries with it a range of challenges that may be exacerbated by a wide range of other stressors that can compromise parenting skills, and parents of children with disabilities face the additional challenge of "teasing out which behaviours are a consequence of physical and mental limitations and which are rebellious and require assertive parental intervention" and what sorts of consequences are appropriate.

The experience of maltreatment in childhood is a significant risk factor for maltreating one's own children. A large body of research documents the ways in which both positive and negative parenting practices can be passed on from parent to child. While this is by no means inevitable, many longitudinal studies have shown that both positive parenting practices⁹⁸ and, as more frequently studied, harsh and/or abusive parenting practices⁹⁹ can be transmitted inter-generationally. Of interest in the research are the life factors that prevent or moderate the transmission of negative parenting. Research in this area is limited, but moderating factors appear to include having a good relationship with a partner with good parenting skills,¹⁰⁰ higher educational attainment¹⁰¹ and positive social and emotional development in adolescence.¹⁰² Personality and social competence also appear to play a role.¹⁰³

It is clear that IPV is also often transmitted from one generation to the next, although the pathways may be complex. ¹⁰⁴ Most—although not all—adult perpetrators of IPV were exposed to violence in childhood, and male IPV perpetrators with a history of violence in childhood are often more hostile toward women and express a greater desire to control their partners than



those without such a history. ¹⁰⁵ Exposure to parental IPV increases both boys' and girls' risk of dating violence in adolescence, as well as men and women's experience of IPV in adulthood. ¹⁰⁶

4.0 Preventing IPV through positive fathering programming

Research has identified many parenting and family-strengthening programs and policies to improve mothers' parenting attitudes and behaviours. Fortunately, new research is emerging to guide program and policy efforts to strengthen fathers' ability to nurture their children's healthy development and to prevent the perpetuation of child abuse and IPV in the next generation.

Despite the proliferation of positive fathering programs in recent years, only a handful of programs can be identified as evidence-based. An additional few programs have been evaluated using pre- and post-program assessment, but most of these evaluations have not included post-program follow-up to determine whether positive outcomes are sustained over time. Experimental evaluations of parenting programs targeting parents of both genders have shown that behavioural parent training can be effective for both mothers and fathers. Examples of parenting programs that have been demonstrated to improve fathers' parenting include the Triple P - Positive Parenting Program, discussed further below, and the Incredible Years Program, although mothers and fathers may not benefit equally from participation. However, most of the father involvement interventions that have emerged in recent years involve men's participation in programs led by male speakers, counselors, or group leaders, and these programs do not appear to have been evaluated.

The small body of existing high-quality research indicates that some features of programs for fathers contribute to positive outcomes. Overall, successful fathering programs:

- clearly target and recruit a specific group (e.g., young fathers, new fathers, at-risk fathers, fathers who have perpetrated IPV, fathers who have perpetrated child maltreatment; fathers from specific ethno-cultural groups);
- are grounded in a clear theory of change based upon theories of child development and therapeutic support that reflect high-quality research;
- use an evidence-based program model with a proven track record of improving outcomes for fathers and children;
- in most cases, use behavioural or cognitive behavioural training strategies;
- promote authoritative parenting and positive discipline skills; and
- promote good communication with the mother and effective co-parenting strategies. 109

The empirical research also suggests that positive fathering programs may be more effective if they fully or partially include mothers because the quality of the mother-father relationship strongly affects a father's willingness and ability to be involved with his children. The need to involve mothers in programming that targets young or adolescent fathers is particularly



clear, first, because some research indicates that young fathers who do not live with the mothers of their children are sometimes excluded from parenting by grandmothers who are involved in raising their daughters' children; second, because evaluations of some programs for teen fathers that did not include mothers have reported a decrease in father involvement after the intervention. The need to involve mothers in some capacity also applies to programs targeting fathers who have perpetrated IPV in that, while mothers may not attend the program along with the fathers, they may be engaged in separate support services and, at minimum, in the evaluation of the program.

What does not appear to be effective are services and programs that aim to "hook" fathers into family services by involving them in activities that they may like but are not linked to improved child outcomes, such as father-child sports programs or "bring your dad to school" events. While these sorts of initiatives are often enjoyable and well-received by participants, they are not likely to improve child outcomes, and the majority of fathers who attend them are already highly involved in their children's lives. The effectiveness of informal group programs, where fathers meet up to three or four times a month and receive information on parenting, coparenting, and so on, is unclear, as even well-known programs of this type, such as the Baltimore Responsible Fatherhood Program, do not appear to have been evaluated.

4.1 Engaging fathers in programming

At present, most behavioural parent training programs in Canada and elsewhere target and are attended by mothers. Reasons for fathers' lack of involvement in parent training are largely speculative. Some qualitative research identifies barriers to participation that include lack of awareness of parenting programs or the value of parenting programs; work commitments; programs that are oriented to mothers; service providers' lack of attention to fathers or bias toward mothers; resistance to guidance or instruction on parenting behaviours; feelings of parenting inadequacy experienced by fathers from socially, politically, legally and/or economically disadvantaged populations; and, for some fathers, the belief that their literacy skills are inadequate to attend. 116

Practices to overcome these barriers may include direct recruitment and advertising that targets fathers and explicitly articulates the benefits of such programs to both the father and the child (e.g., improved relationships, peer support); flexible timing (e.g., not only during weekends and evenings) and alternative delivery mechanisms (e.g., online programs, alternate venues); programming that is directly tailored to fathers (e.g., linked into everyday activities and interests, staff who are trained to work with fathers); and programming that is culturally appropriate, with plain language written materials.¹¹⁷

Several qualitative studies suggest that lessons may be drawn from father-engagement efforts in other areas, such as school and early childhood development programs, which have successfully used strategies including a gender differentiated approach with male-oriented



activities, along with individualized, strength-based training provided by skilled program leaders, ¹¹⁸ and child protection services, which have engaged fathers though a proactive approach, including an insistence on men's involvement with services; and the use of practical activities. ¹¹⁹ In addition, some research indicates that fathers are more likely to attend programming when the purpose of improved child outcomes is clearly stated. There appears to be no evidence that fatherhood programs should be delivered exclusively by males. ¹²⁰ Including mothers has also proven helpful in engaging and retaining fathers in programming, and some qualitative research suggests that some fathers prefer mixed group to father-only programs. ¹²¹

4.2 Prevention and intervention programs for all fathers

A wealth of studies completed in recent years have consistently demonstrated improvements in parenting practices and children's developmental outcomes resulting from participation in comprehensive, evidence-based parenting training programs.¹²²

The components of parenting programs that are consistently associated with improvements in parenting include (i) increasing positive parent—child interactions and emotional communication skills; (ii) teaching parents to use positive discipline techniques and the importance of parenting consistency; and (iii) requiring parents to practice new skills with their children during parent training sessions. Programs that focus on (i) teaching parents problem solving; (ii) teaching parents to promote children's cognitive, academic, or social skills; and (iii) providing other, additional services are less effective or ineffective. However, most of the research on such programs has focused on mothers; less is known about the ways and extent to which such programming improves fathers' parenting competence. As discussed below, the Triple P — Positive Parenting Program has been demonstrated to be effective with fathers, although to a lesser degree than with mothers.

• Triple P - Positive Parenting Program

The Government of Alberta offers the *Triple P - Positive Parenting Program* to Alberta parents through the provincial Child and Family Services Authorities and designated First Nations agencies. Developed in Australia and used in countries around the world, Triple P is designed for families with children from birth to age 12, with extensions to families with teenagers ages 13 to 16, and seeks to prevent social, emotional, behavioral, and developmental problems in children by enhancing their parents' knowledge, skills, and confidence. Triple P has five intervention levels of increasing intensity to meet each family's specific needs, as follows: Level 1 (Universal Triple P) is a media-based information strategy; Level 2 (Selected Triple P) provides specific advice on how to solve specific developmental issues (e.g., toilet training); Level 3 (Primary Care Triple P) targets children with mild to moderate behavioural problems (e.g., tantrums) and includes active skills training for parents; Level 4 (Standard Triple P and Group Triple P) is an intensive eight to 10 session



program for parents of children with more severe behavioural problems (e.g., aggressive behaviour); and level 5 (Enhanced Triple P) supplements Level 4 with three to five sessions for families in which parenting difficulties are complicated by other sources of family distress (e.g., inter-parental conflict, parental depression). Variations of the program are available for parents of young children with developmental disabilities (Stepping Stones Triple P) and for parents who have maltreated their children (Pathways Triple P).¹²⁵

Triple P Level 1 appears to have little or no effect. ¹²⁶ In addition, a recent, large, Alberta-based, quasi-experimental evaluation of Triple P Levels 2 and 3 reported high levels of parent satisfaction with the program but found no significant differences between Triple P and service-as-usual groups on parenting stress, parent-child interaction, family functioning, child problem behaviours, or any other secondary outcomes. ¹²⁷

Triple P Level 4 (Standard Triple P) is one of the few parenting programs in existence that has been demonstrated to be effective in multiple randomized trials in many settings and countries, ¹²⁸ and may be described as a true evidence-based program. Although most evaluations of Triple P have not analyzed the effects of the program by gender, two evaluations have concluded that Triple P does improve fathers' parenting practices but, with the exception of the Stepping Stones program, to a smaller degree than it improves mothers' parenting practices. ¹²⁹

4.3 Prevention and intervention programs for separated/divorced fathers

• Dads for Life Program

The *Dads for Life* program has proven effective in reducing inter-parental conflict and improving child outcomes following marriage or relationship breakdown. *Dads for Life* is a 10-session (eight group sessions, two individual sessions) program developed in the United States for recently divorced noncustodial fathers of children aged four to 12 years. The curriculum uses a cognitive-behavioural approach to manage anger and reduce conflict with a view to improving parenting skills and the father-child relationship, and reducing interparental conflict. Experimental evaluations of the program have reported significant and sustained beneficial effects on children's well-being and adjustment among children of participants, ¹³⁰ as well as reductions in inter-parental conflict as reported by both fathers and mothers. ¹³¹

4.4 Primary prevention programs for at-risk fathers

A number of programs have been developed for men who may be at risk of committing IPV and/or direct child maltreatment. This includes programs that target adolescent fathers, new fathers with at-risk characteristics, fathers who experienced or witnessed abuse in childhood, and fathers with a criminal history.



Specific programming is required for young fathers, especially adolescent fathers, who generally require a great deal of assistance beyond behavioural parent training. Research indicates that, in order to improve their engagement with and parenting of their children, young fathers often require assistance in finding employment and/or completing an educational program, in meeting basic needs (housing, health care, legal services), in improving their social support systems, and in improving their relationships with their children's mother.¹³²

In addition, there is currently a deal of interest in the possibility that home visitation programs may be a feasible and effect strategy to improve fathers' involvement and parenting skills. Home visitation programs generally target high-risk mothers of infants, and a few programs, the *Nurse-Family Partnership (NFP)* in particular, have proven highly effective in changing home environments, maternal life course, mothers' parenting skills, and children's developmental outcomes. Research-identified elements for success in home visitation programs include fidelity to an evidence-based model, targeting at-risk families, starting in the prenatal period and continuing for at least two years; including at least four visits per month; delivery by a professional, ideally a nurse or social worker; specifically teaching caregiving and parenting skills; working to improve the social and physical environments in which families live; and including explicit, evidence-based IPV content designed to screen for and address IPV.

Four home visitation programs in the U.S. are currently experimenting with father inclusion initiatives in some locations, ¹⁴² and Canada's *Nurse Family Partnership Home Visitation Pilot* recently completed a study to assess the acceptability of the NFP to fathers, with promising initial results. ¹⁴³ The effectiveness of home visitation programs for fathers also is currently being investigated, most notably through a large clinical trial being conducted between 2013 to 2017 by the U.S. National Institute of Child Health and Human Development (NICHD) and Penn State University that will assess the impact of home visitation alone and in conjunction with a co-parenting prevention program on fathers, mothers, and children. ¹⁴⁴ In addition, the Pew Center on the States has funded a clinical trial by researchers at the University of Chicago to identify the ways in which father involvement in home visitation may impact families' engagement and outcomes for parents and children and the effectiveness of home visitation on fathers' parenting skills through the "Dads Matter Enhancement." So far, a small pilot study has reported promising initial results. ¹⁴⁵

Examples of "promising" primary programs (meaning that they have been evaluated at least once using an experimental design and demonstrated to be effective in at least one way) for atrisk fathers are provided below. ¹⁴⁶ At present there appear to be no promising home visitation programs for fathers, although further information will be available within the next few years.



• Parenting Together Project

The *Parenting Together Project* is an eight-session group program which begins during pregnancy for first-time, generally low-risk parents aged 18 to 45 years. The program seeks to improve fathers' knowledge, skills, and commitment to the fatherhood role.

One experimental evaluation of the program has been completed, and it reported mixed results, with improvements in fathers' skills in interacting with their babies on the days when they had been working outside of the home for part of the day, and no changes on the days when they were at home all day.¹⁴⁷

Supporting Father Involvement

The *Supporting Father Involvement* program is a 16-week, curriculum-based group program that targets low-and middle-income parents and caregivers of children from birth to 11 years of age. Couples with a parent or parent with mental illness, substance abuse problems, or open police or child welfare files are excluded from participation.¹⁴⁸ A replication of *Supporting Father Involvement* is underway in four sites in Alberta.¹⁴⁹

A comprehensive, experimental evaluation of *Supporting Father Involvement* reported interesting findings. First, providing control group parents with nothing but a three-hour informational session on the importance of fathers' engagement with children had no positive impacts at 11-months follow-up; in fact, among the control group, couple relationship satisfaction declined and children's problem behaviours (aggression, hyperactivity, shyness, depression or anxiety) increased. Second, providing the program to fathers alone, without mothers, resulted in increased psychological engagement and daily child care among fathers, no changes in children's problem behaviours, and a decline in couple relationship satisfaction as reported by both fathers and mothers. However, providing the program to couples together resulted in increased psychological and behavioural engagement among fathers, a decline in parenting stress among both fathers and mothers, and no change in children's problem behaviours or couple relationship satisfaction. In addition, mothers reported an increase in conflict with the fathers about child discipline; fathers reported a decrease. Another evaluation of the program with a sample of African-American families is now underway.

Video Self-Modeling for First-Time Fathers

Video Self-Modeling for First-Time Fathers is an Alberta program first offered in the early 2000s for first-time fathers at two time points: when the infant was five months old and, again, at six months of age. Fathers were videotaped by a specially-trained home visitor in a semi-structured play task with their infants. The father and home visitor would then review critical segments of the video. During the review, the home visitor provided positive



feedback and coaching for areas where the father could improve the quality of play to foster the infant's development. At the conclusion of the session, the home visitor provided a handout reinforcing the feedback to the father; a copy of the video tape was mailed after the home visit. Experimental evaluation of the intervention in two cities reported that fathers in the intervention group were significantly more skilled than those in the control group in fostering cognitive growth and maintained their sensitivity to infant cues when the baby was eight months old. In fact, the skills of the fathers in the control group decreased over time. 153

The intervention was replicated with first-time fathers of late preterm infants and found to have similar effects on the quality of father–infant interactions. Given that it is more challenging to parent preterm infants because they are more irritable and difficult to soothe, four home visits were provided to this group of fathers. The modified intervention was identified as successful in improving fathers' parenting skills in a multisite experimental evaluation. ¹⁵⁴

Young Dads

Young Dads is an American program that targets African-American adolescent fathers aged 16 to 18 years. The program seeks to help teen fathers to establish and meet individual goals (e.g., employment, education); improve social support systems; and develop consistent, positive feelings about their relationships with their children now and in the future. To these ends, Young Dads provides individual and group counseling, education and vocational referrals and placements, medical care and referrals, housing and legal advocacy, cultural and recreational activities, and parenting skills training. Information about the program duration, curriculum, and structure does not appear to be available.

An experimental evaluation of the program provided all services as described above to the treatment group and nothing but a weekly parenting skill training session to the control group. The study found that, as reported by participants, fathers' relationships and their expectations about their future relationships with their children improved relative to the control group. However, the study did not use standardized measures to assess father-child relationships or solicit input from the children's mothers, and there was no longitudinal follow-up to determine whether the fathers' expectations materialized.¹⁵⁵

Minnesota Early Learning Design (MELD) for Young Dads

MELD for Young Dads is a program for fathers aged 16 to 25 years that seeks to reduce social isolation and improve young fathers' ability to co-parent with the mothers of their children. The curriculum consists of five, 90-minute sessions delivered over five consecutive weeks. The program is delivered by a range of community and health care organizations in the United States. ¹⁵⁶



One large, quasi-experimental evaluation has been completed on a version of the program delivered by male facilitators to both parents, with fathers up to age 25, prior to the birth of the child. The evaluation compared the effects of participation on subsequent co-parenting behaviours of fathers in the pre-birth (treatment) group with those of fathers in the usual post-birth program and a no-treatment group. Improvements on some dimensions of co-parenting were reported for both the pre-birth and the post-birth groups relative to the no-treatment group, with the strongest effects on fathers who resided with the mothers and on fathers who attended the post-birth group. ¹⁵⁷

4.4 Programs for fathers who have perpetrated IPV and/or direct child maltreatment

Specific programming is required for fathers who have perpetrated IPV although, at present, none of the fathering programs for these fathers have been subject to repeated experimental or quasi-experimental evaluations, although some programs are currently being evaluated. This is largely because many of these programs have been developed within the past few years.

While there is much discussion in the research about exploiting fathers' desire to be good parents as a "hook" to both improve parenting and stop IPV, 158 these programs, some of which are described below, generally seek to improve parenting behaviours and, sometimes, to improve the co-parenting relationship, but they do not usually target IPV directly or cite a reduction in IPV as a desired outcome of programming. The concept of engaging fathers who have perpetrated IPV in fatherhood programming reflects research indicating that many of these fathers genuinely want to be good parents and desire stronger relationships with their children, 159 but these fathers disagree that childhood exposure to IPV is harmful and/or they are also abusing or at high risk of directly abusing their children, ¹⁶⁰ or they are either unaware or only somewhat aware of the ways in which their children are harmed by exposure to IPV. 161 Also, some research has found that some fathers who have perpetrated IPV may express concerns about the effects of their abuse on their children, but they do not report intentions to stop perpetrating IPV or to take action to mitigate the harm of IPV exposure to their children. 162 Overall, most research indicates that fathers who perpetrate IPV also exercise poor parenting practices, 163 with at least one study finding that children whose fathers have subjected their mothers to IPV describe their fathers as disengaged and not responsible for their well-being, with their mothers being the primary or sole care provider. 164

The following programs should be considered "promising programs" or "programs to watch" until further research on their efficacy has been conducted.

Caring Dads

Caring Dads: Helping Fathers Value Their Children is a voluntary, 17-week, curriculum-based, group program developed in Canada, for fathers who have abused or neglected their



children or exposed their children to IPV. Fathers with substance abuse issues are not eligible for the program. Partners and other family members do not participate in the program. Caring Dads is offered in several sites in Ontario and in Grande Prairie, Alberta, and has been adapted and applied in the U.S. and several European countries.¹⁶⁵

A central theory behind *Caring Dads* "is that men will be more motivated to engage in an intervention to address their abusive behaviour if the focus is ostensibly on their relationship with their children." ¹⁶⁶

Caring Dads uses a range of approaches, including motivational interviewing, psychoeducation, cognitive-behavioral techniques, and case management, with outreach to mothers to ensure their safety. The program seeks to address four goals: (i) engaging men to examine their fathering; (ii) increasing awareness and application of child-centered fathering; (iii) increasing awareness of, and responsibility for, abusive and neglectful fathering and IPV; and (iv) rebuilding children's trust in the men's fathering and planning for the future. The program includes outreach to mothers to ensure their safety and case management of fathers with other professionals. 167

Caring Dads has not been evaluated using a large sample or a control or comparison group. A 2007 pre-post outcome evaluation of a Canadian program using a small sample reported decreases in participants' hostility and anger toward, and denigration and rejection of their children, but no statistically significant decline in self-reported IPV. Likewise, a qualitative and limited outcome evaluation of the program in Wales concluded that the program increased participants' understanding about the negative effects of exposure to IPV on their children, along with their ability to control their anger, but there appeared to be no change in participants' attitudes toward women or on IPV incidence. A recent Canadian study reported declines in some dimensions of anger and negative parenting, and improvements in perceptions about co-parenting, bringing those participants with increased scores in line with the general population on these indicators. This study did not use a control group or follow participants longitudinally, not did it track changes in IPV.

• Fathering After Violence

Fathering After Violence is a widely-disseminated American curriculum-based program for fathers who have contact with their children at supervised visitation centres. It is designed to be incorporated within a batterer intervention program and seeks to improve fathers' empathy for children's experiences resulting from exposure to IPV, teach positive parenting behaviours, increase support for mothers' parenting, and increase fathers' understanding of their roles in the process of repairing a damaged relationship with their children.¹⁷¹

Fathering After Violence does not appear to have been subject to a comprehensive evaluation. An initial evaluation completed in 2004 suggested that the program may have



achieved its goals, but the limits of the evaluation preclude drawing any conclusions about its effectiveness. 172

Strong Fathers Program

The *Strong Fathers Program* is a 20-session, psycho-educational and skills-building group program for men referred by child welfare and with a history of domestic violence. Launched in the U.S. in 2009, the program is premised on the assumption that improving how men relate to their children also improves how they relate to their intimate partners. The curriculum integrates parenting education with raising awareness about the negative impacts of IPV on children and their mothers. The curriculum also addresses how the men's childhood experiences affect how they relate to their children and their partners. ¹⁷³

A comprehensive, experimental evaluation of the *Strong Fathers Program* is underway. Interim, unpublished findings from an evaluation with a small group of men who have completed the program thus far indicate that the program appears to increase knowledge of child development; reduce abusive beliefs toward the participants' partners; increase awareness of poor parenting behaviours; increase ability to identify and overcome challenges in relating to children and children's mothers; and maintain or increase time spent living with their children.¹⁷⁴

• Fathers for Change

Fathers for Change is a new program for fathers of children aged zero to three years who have perpetrated IPV and who have alcohol or substance abuse issues. Consisting of 16 60-minute individual treatment sessions, the program seeks to reduce aggression, violence and substance abuse; to improve co-parenting and family interactions; to improve parenting behaviours and parent child relationships; and to decrease child symptoms. Co-parenting treatment sessions may include the mother of the child. Fathers for Change was developed in response to the absence of evidence-based programs for fathers who have both substance and violence issues, given the high association between substance abuse and IPV, and between IPV and direct child maltreatment.

Fathers for Change is currently being evaluated using a non-randomized trial by researchers at the Yale School of Medicine, Child Study Center. Preliminary findings of a feasibility study based on a sample of ten participants indicated that all participants remained non-violent with both mothers and children throughout treatment and reduced their substance use, with 80% becoming abstinent during treatment.¹⁷⁶



5.0 Conclusion and recommendations

The research presented in this paper clarifies the important ways in which fathers shape their children's positive or negative development and outcomes over the life course. Targeting fathers, as well as mothers, to strengthen parenting skills, prevent or stop child maltreatment, and prevent or stop childhood exposure to IPV is a feasible way of preventing both child maltreatment and IPV in the next generation.

There is a growing recognition among the people of Alberta, the education and social services sectors, and the Government of Alberta as a whole about the social and economic benefits of preventing problems before the occur, rather than intervening when they are already underway. Given the increasing role played by fathers in raising their children, now is an opportune time to adopt a comprehensive strategy to increase fathers' positive involvement in their children's lives and improve their parenting skills.

Alberta is recognized as a leader in Canada and in the world for its proactive and innovative efforts to prevent and stop all forms of family violence. The Government is urged to enhance its current strategy by strengthening its efforts to prevent IPV in the next generation through legislative change, public and professional education, investments in evidence-based programs, and investments in comprehensive research and evaluation to ensure that scarce resources are used to support effective strategies to increase positive father involvement and parenting practices.

Recommendations

- 1. Improve the individual and shared parenting skills of mothers and fathers who are separating and divorcing.
 - 1.1 Along with the *Parenting After Separation Seminar (PASS)*, Focus on Communication in Separation (FOCIS) should also be mandatory for all separating couples with children, and the seminar should be mandatory in order to file any documents pertaining to the separation (e.g., a separation agreement, an interim custody agreement).
 - 1.2 The Law Society of Alberta should inform its members who practice family law about the existence of the *Triple P Positive Parenting Program* and, as the research base grows, other evidence-based parenting programs, so that these lawyers may refer clients to the program as appropriate.
- 2. The Government of Alberta should encourage a greater focus on fathers' roles in parenting as a whole and in early childhood development research, policy, and programming, taking care to reflect and further investigate the diverse needs and



circumstances of Aboriginal, immigrant, ethno-cultural minority, and gay/bisexual/transsexual/transgendered fathers.

- 2.1 The Government of Alberta should explicitly include fathers and the goal of increasing positive father involvement in its Early Childhood Development strategy. All efforts by Alberta Human Services, Education, and Health within priority actions to help children get a healthier start and to support parents to help their children reach developmental milestones¹⁷⁷ should be directed to fathers as well as mothers.
- 2.2 The Alberta Family Wellness Initiative should explicitly include fathers and the goal of increasing positive father involvement in policies, programs, and investments.
- 2.3 Invest in a provincial coalition to promote engagement of father involvement, bringing key stakeholders together, acting as a best practice clearinghouse (such as the Father Involvement Network in British Columbia), taking on public messaging, advocacy for sustainable funding, creating and implementing a provincial research agenda. This would ensure that policy makers and parenting professionals can easily access current research on and best practices in positive father involvement and to spearhead public awareness and social marketing strategies in the province.
- 2.4 The Government of Alberta along with key partners should undertake a broad campaign to increase public awareness about the benefits of good parenting, including positive discipline techniques, by both mothers and fathers. The campaign should include information about where to go for help with parenting challenges.
- 2.5 Recommend that post-secondary institutions offering degrees, diplomas, or certificates in social services and/or health professions include in such programs curriculum, practicum, and/or internship content on the importance of positive parenting by both mothers and fathers.

3. Increase the availability of evidence-based parenting programs for fathers. To this end:

3.1 When the current initiative to increase fidelity in program implementation and delivery has been completed, continue to increase the availability of and participation in Levels 4 and 5 of the *Triple P – Positive Parenting Program* and *Pathways Triple P* on an annual basis by increasing the number of sessions provided annually and by increasing the number of referrals to the program. Directly market the program to fathers and to programs serving fathers and, as recommended by Fletcher and other researchers, ¹⁷⁸ modify the program to better engage and serve fathers by including more active learning components and by including men as co-facilitators of the program. Using an experimental design, evaluate the modified program.



- 3.2 Ensure that any positive fathering programs for men who have perpetrated IPV are not offered as stand-alone programs. Rather, programs for fathers who have perpetrated IPV should be provided as a component of evidence-based treatment programs for men who have perpetrated IPV. Fathers should be required to attend both the fatherhood program and the treatment program.
- 3.3 Invest in scientifically rigorous research and evaluation to identify and support the most effective strategies to increase positive father involvement and improve parenting practices. Do not invest in any new family support or parenting programs that are not supported by high-quality, comprehensive research or accompanied by a comprehensive, experimental evaluation. Rather, invest in Alberta-based demonstrations, replications, and/or experimental evaluations of fatherhood programs, as follows:
 - For all first-time fathers, implement a large-scale replication of the *Video Modeling Service for First-time Fathers*, with a comprehensive experimental evaluation component, in at least two Alberta cities.
 - Monitor the evaluation of the Canadian Nurse-Family Partnership, along with the
 findings of the clinical trials on home visitation for fathers being conducted by the
 U.S. National Institute of Child Health and Human Development (NICHD) and Penn
 State University and by the University of Chicago, to determine how the learnings
 might best be applied in Alberta to prevent child maltreatment in at-risk families
 with infants.
 - Monitor the evaluation of the Supporting Father Involvement Program, which is currently being replicated in four Alberta sites. If the program is successful,
 - o consider scaling up the program to ensure that it is delivered throughout the province at no cost to participants, and
 - support a pilot of the program, with a comprehensive experimental evaluation component, targeting young fathers.
 - Monitor the evaluation of the *Fathers for Change* program for fathers of children up to three years of age who have perpetrated IPV and who have alcohol or substance abuse issues. If the program is successful, consider replicating the program in at least two sites in Alberta.
 - Consider a Dads for Life program replication in Alberta, with a comprehensive experimental evaluation component, with a sample of non-custodial fathers who are experiencing conflict (excluding IPV) with the mothers of their children.
 - Consider identifying two innovative, Alberta-based positive fathering programs and supporting rigorous, experimental evaluations of these programs.



• Ideally, the experimental evaluations of the above programs would include assessment of different program effects for immigrant, ethno-cultural minority, Aboriginal, and gay/bisexual/trans-sexual/transgendered fathers. However, when the sub-population samples of participants are too small to allow for such analysis, the evaluations should be supplemented by qualitative evaluation to determine whether modifications to program content and delivery or stand-alone programs for sub-population groups are required to increase the likelihood of program effectiveness for immigrant, ethno-cultural minority, Aboriginal, and gay/bisexual/trans-sexual/transgendered fathers. Any significantly revised program should be piloted, with a comprehensive experimental evaluation component.

4. Prohibit corporal punishment.

- 4.1 Amend Alberta's *Protection Against Family Violence Act*, RSA 2000, c. P-27, section 1(1)(e) to revise the definition of "family violence," which currently allows parents and persons standing in the place of parents to use reasonable force by way of correction.
- 4.2 Amend the *Child, Youth and Family Enhancement Act*, RSA 2000, c. C-12 to include a provision explicitly stating that "[c]hildren are entitled to care, security and a good upbringing. Children are to be treated with respect for their person and individuality and may not be subjected to corporal punishment or any other humiliating treatment." ¹⁷⁹
- 4.3 Lobby the Government of Canada to repeal section 43 of the *Criminal Code*, RSC 1985, c. C-46, which currently allows the use of reasonable force by schoolteachers, parents and persons standing in the place of a parent to correct children's behaviour. Once repealed, develop a policy for police and prosecutors in Alberta that outlines the proper enforcement of the assault provisions of the Criminal Code in cases of corporal punishment.
- 4.4 Fund awareness initiatives directed at parents/individuals acting in the capacity of parent and professionals who work with children, including health and education professionals, around the importance of positive discipline techniques and the negative, enduring impacts of corporal punishment on child development.
- 5. Amend Alberta's *Protection Against Family Violence Act*, RSA 2000, c. P-27, sections 2(3) and 4(2) to include a requirement that completion of a government-sanctioned parenting programs is mandatory for any parents or individuals acting in the capacity of parent who are made subject to an Emergency Protection Order or Queen's Bench Protection Order involving child maltreatment or where children have been exposed to IPV. Programs should be available at no cost to participants.



ENDNOTES

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