

Summary Report: Responsible Fatherhood Groups and Domestic Violence Education: An Exploratory Study of Current Practices, Barriers, and Opportunities



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Introduction

Domestic violence (DV), or intimate partner violence, is a pervasive social problem that disproportionality affects low-income communities and communities of color (Black et al., 2011; Capaldi, Knoble, Shortt, & Kim, 2012). Responsible Fatherhood Groups (RFGs), which are evidence-informed interventions that foster positive parenting and other life skills, were developed to serve the very fathers who comprise these communities (Dion, Zaveri, & Holcomb, 2015; Holmes, Hawkins, Eggington, Robbins, & Shafer, 2018). Although there is increasing recognition that the unique features of RFGs make them a potentially powerful venue for selective and universal DV prevention (Thoennes & Pearson, 2015; Thomas, Mederos, & Rodriguez, 2019), the few studies on this topic suggest that addressing DV in RFGs is neither widespread nor standardized (Bronte-Tinkew et al., 2007; Dion et al., 2018). Moreover, research has yet to explore what DV-related practices are being used within RFGs, what about those practices are perceived as helpful, and what factors support and hinder their adoption. Such research is necessary for informing effective integration of DV prevention efforts within RFGs and the Responsible Fatherhood Field.

Study Aims

To address the identified gaps in knowledge and practice, we conducted a qualitative study, the aims of which were to explore 1) to what extent and how are RFGs addressing DV in their curricula; 2) factors at the intrapersonal, interpersonal, organizational, community, and policy levels that act as barriers and supports to addressing DV and incorporating DV content into RFGs; and 3) strategies and approaches for incorporating DV into RFGs in ways that support fathers' educational and other needs. The purpose of this brief report is to provide an overview of that study.

Conceptual Framework

The study and research aims were guided by an "adaptive challenge" institutional change framework (Heifetz & Linsky, 2017), which posits that sustainable change must begin with a critical analysis of a system's landscape. The principles of this framework provide useful guidance when trying to diagnose the factors that help and hinder change, which aligns with the current study. Specifically, the framework emphasizes the need to a) examine current practices in order to identify gaps and growth areas (aims 1 and 3), and b) uncover people's attitudes and norms, because they are the key to true behavior change (aim 2). The study was also informed by the Ecological Model for Health Promotion, which includes five levels: intrapersonal, interpersonal, organizational, community, and policy (McLeroy, Bibeau, Steckler, & Glanz, 1988). This model served as an organizing strategy during the coding process for the second aim.

Methods

This study used a qualitative design and a practice-research engagement approach (Brown, Bammer, Batliwala, & Kunreuther, 2003) to conduct a content analysis of RFG curricula and in-depth interviews with stakeholders. For the content analysis, we selected four RFG core curricula: 24/7 Dad: AM[®] (National Fatherhood Initiative, 2015), the Fatherhood Development Program (National Partnership for Community Leadership, 1995), Nurturing Fathers Program (Perlman, 1998), and Fatherhood Is Sacred[®] & Motherhood Is Sacred[™] (Native American Fatherhood Families Association, 2016). We also reviewed one DV-specific curriculum, Understanding Domestic Violence[™] (Mesa, Vecere, & Brown, 2009), which is used as a supplement to the 24/7 Dad: AM[®] and other NFI curricula. Another DV-specific curriculum, Addressing Family Violence and Abuse[®] by the Native American Fatherhood Families Association, was being revised at the time of the study and not available for review. For a list of Responsible Fatherhood and Fatherhood-related curricula, see the compendium compiled by the National Responsible Fatherhood Clearinghouse



(National Responsible Fatherhood Clearinghouse, 2011). Finally, to guide the analysis, we developed an eight-item checklist with open-ended follow-up questions and analyzed the text using directed content analysis (Hsieh & Shannon, 2005)

For the interview component, we used purposive and snowball sampling to recruit three groups of stakeholders (n = 40): leaders in the Responsible Fatherhood Field (n = 10), RFG facilitators with at least five years of facilitation experience (n = 20), and DV advocates who have collaborated with an RFG (n = 10). The sample included six representatives of OFA-funded fatherhood programs (3 leaders and 3 facilitators), and 24 representatives of programs that did not receive OFA funding (7 leaders and 17 facilitators). See [Table 1](#) in the Appendix for participant information.

We conducted phone interviews in English using a semi-structured interview guide developed for the study. Data analysis involved directed and conventional content analysis (Hsieh & Shannon, 2005) as well as an eclectic approach to coding (Saldaña, 2016). Both authors participated in the multiple rounds of coding that produced the final set of categories and subcategories.

Results

The content analysis revealed that none of the four core curricula addressed DV explicitly; however, each covered content and concepts that could be used as windows into addressing DV (aim 1). As one example, the Nurturing Fathers Program's focus on "power over" versus "power to" (Perlman, 1998) closely mimics the concept of coercive control, a form of DV. In addition, three of the four core curricula had developed supplemental content that specifically addressed DV. It did not appear, however, that facilitators in our sample were using or even knew about these supplemental materials.

Participants described a wide range of barriers and supports that influence the extent to which RFGs are willing and able to address DV with fathers (aim 2). At the **intrapersonal and interpersonal levels**, the fathers who attend RFGs were described as being profoundly multi-stressed. They struggle with histories of unresolved trauma; ongoing interpersonal and community violence; labelling and unfair treatment by systems; a lack of opportunities due to racism and poverty; and social networks that reify hypermasculine attitudes, norms, and behaviors. Together, these factors coalesce into barriers that affect fathers' receptivity to the topic of DV, including their willingness to even discuss the topic let alone disclose their experiences of perpetration and victimization.

At the **organizational level**, the overarching finding was that willingness to address DV as a core concern has increased within the Responsible Fatherhood field; however, programs need a mix of funding *and* individual commitment in order to do so in holistic and authentic ways. We found that smaller, less resourced agencies were limited in their capacity to address DV, and that the work that they were able to do was often driven by the sheer willpower of a few dedicated staff with lived experiences of DV. Conversely, larger agencies that received federal funding had much more capacity to address DV, but they still needed dedicated staff to take on the issue for it to be done well. At the same time, the **policy level** mandate requiring Responsible Fatherhood programs funded by the U.S. Department of Human Services, Office of Family Assistance to have a DV protocol was seen as helpful to bringing about change within some programs, but insufficient without continued attention to changing norms and attitudes.

At the **community level**, participants described deep-seated "framework tensions" that have hindered collaboration and cross-pollination between the Responsible Fatherhood field and the DV field. These tensions have centered on how to work with men who use violence and differing ideas of which oppression to prioritize (i.e., sexism versus racism and poverty). These barriers to collaboration pose a major challenge to incorporating DV in RFGs. Luckily, however, there has been progress in overcoming these framework tensions due to supportive factors such as relationship-building, mutual education, and identifying areas of common ground.



Finally, we identified **four strategies for effectively meeting fathers' educational and other needs related to DV** (aim 3). The first involved combining cognitive and affective educational strategies to change fathers' norms, attitudes, and behaviors. This includes offering interactive psychoeducation about the dynamics of DV and its impact on children, providing supportive opportunities to interact with female DV survivors, and encouraging "deep work" (i.e., engaging fathers in activities that affect them emotionally and connect their own traumatic interpersonal experiences with DV.) The second strategy involved embracing a framework that balances empathy and accountability. Participants described the importance of conveying genuine care and respect for fathers, remaining aware of the adverse social context surrounding fathers, and empowering them to take control over their internal and external responses. The third strategy involved providing a safe space for DV discussion and disclosure. This included avoiding the use of labels such as "batterer," focusing on fathers' behaviors rather than on their character, and building trust among group members. The fourth strategy involved harnessing men's desire to be a good father. The general sentiment was that fathers are more willing to discuss DV and change their attitudes and behaviors related to DV when the content is connected to the ways DV negatively affects their children. Together, these strategies highlight the profound importance of being aware of fathers' lived experiences and intersectional identities.

Discussion and Implications

The purpose of this study was to conduct an in-depth exploration of the extent to which RFGs address the issue of DV by focusing on the content of their curricula and stakeholders' perceptions of best practices, barriers, and supports. As one of the few studies to address this topic, our findings represent an important contribution to the field. Informed by the findings, we offer the following recommendations for practitioners in the Responsible Fatherhood and DV fields:

- Our findings support the integration of DV-specific content and activities in core Responsible Fatherhood curricula, rather than relying on optional supplements. Doing so would lead to more consistent practice and increase their potential for more widespread DV prevention. Given the pressure to cover many essential topics within a span of a few sessions, it may make sense to add a session to existing core curricula, as some of the participants in this study have done.
- It is important that DV content be delivered by the "right people." According to study participants, this phrase refers to practitioners who the men can relate to and who engage in reflective and appropriate use of self, understand men's needs and situations, and have a nuanced understanding of DV and a genuine commitment to preventing it.
- Efforts to increase DV education within RFGs should not attempt to turn them into interventions for men who use violence and abusive behaviors with partners. Participants were clear that the focus should be on prevention not treatment. Instead, RFGs can serve as a venue for education, connecting current violent behaviors with experiences of childhood DV exposure, and connection to outside resources.
- Strategies for addressing DV in fatherhood groups must take into account fathers' experiences of poverty, trauma, oppression, and DV victimization and perpetration. The Responsible Fatherhood and DV practitioners in this study have developed a rich assortment of sensitive approaches to educate low-income fathers and fathers of color about DV. These strategies should be disseminated to other practitioners in both fields.
- There is a need for increased dialogue and relationship building between members of the RFG and DV fields in order to foster collaboration and cross-pollination. Attempts to do so must take into account the framework tensions that have historically divided these two fields. The participants in this study, many of whom reported varying degrees of successful collaboration, shared tactics that have been helpful for them. One example was mutual education on oppression. The RFG field needs a more nuanced understanding of sexism, gender bias, and



safety needs of female DV survivors; the DV field needs a more nuanced understanding of racism and poverty on low-income men and men of color.

- Not surprisingly, additional funding is needed to support RFGs in addressing DV in a holistic and effective way. In order for RFGs to succeed, they need the financial resources to support collaboration with DV advocates and hire support staff who are trained to address fathers' emotional and practical needs related to DV and other forms of interpersonal violence. Likewise, DV programs also need adequate funding to support the person power necessary for meaningful collaboration with RFGs.
- It is essential that any requirement that RFGs address DV be coupled with adequate funding as well as efforts to continue to foster attitudes and norms among RFG practitioners and programs that are genuinely supportive of DV prevention.

Conclusion

This study provides valuable insight on whether and how RFGs address the issue of DV with the fathers they serve. Findings indicate that there has been considerable progress among many RFGs regarding their DV-related attitudes, norms, and practices. Ensuring that this progress continues will require substantially more financial resources as well as ongoing mutual education and relationship-building between the Responsible Fatherhood and DV fields.



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Appendix

Table 1: Participant Demographics

	RFG Leaders ^a (n = 10)	RFG Facilitators (n = 20)	DV Advocates ^b (n = 10)	Total (n = 40)
Age (mean, range)	58.1 (35-74)	54.5 (32-74)	52.7 (32-67)	54.9 (32-74)
Gender (%)				
Male	80.0	90.0	20.0	70.0
Female	20.0	10.0	90.0	30.0
Race/Ethnicity (%)				
African American/Black	50.0	40.0	30.0	40.0
Latinx	10.0	10.0	20.0	12.5
Multiracial	0.0	5.0	10.0	5.0
Native American	10.0	20.0	0.0	12.5
White	30.0	25.0	40.0	40.0
Years working in/with RFGs (mean, range)	17.7 (4–30)	11.1 (5–24)	13.1 (3–23)	13.2 (3–30)
Agency Location (by Region, %)				
Mid-Atlantic	30.0	20.0	70.0	35.0
Mid-West	20.0	10.0	10.0	12.5
New England	10.0	30.0	20.0	22.5
South	20.0	5.0	0.0	7.5
South West	20.0	30.0	0.0	20.0

Note: RFGs = Responsible Fatherhood Groups; DV = domestic violence

^a Applies to people for whom at least one of the following applies: developed a well-established Responsible Fatherhood Curriculum, or is the founder or director of a Responsible Fatherhood agency or program and whose role does not involve (or no longer involves) direct group facilitation.

^b Applies to people with DV expertise who work at DV-focused agency and have experience developing or delivering DV content into RFGs.

