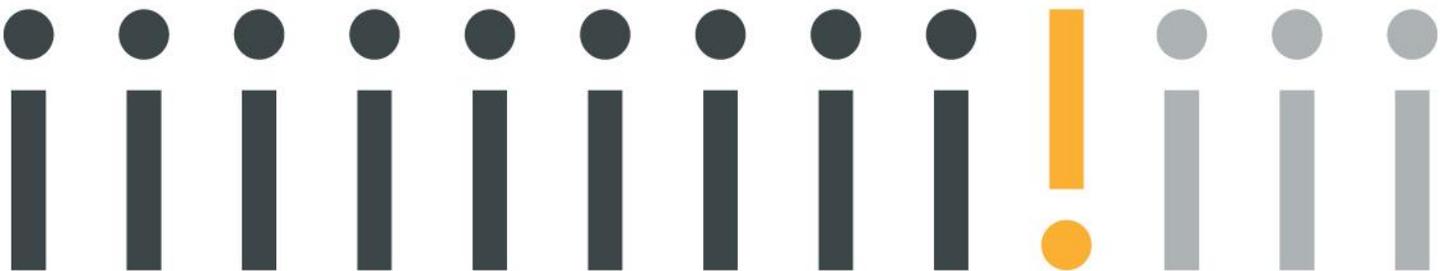

Supporting Young Fathers as a Prevention
Strategy for Stopping Intimate Partner
Violence in the Next Generation: Research
and Recommendations for the Louise Dean



Authors

Merrill Cooper, Lana Wells

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Contact

Lana Wells, Brenda Strafford Chair in the Prevention of Domestic Violence
2500 University Drive NW, Calgary, AB, Canada T2N 1N4
Phone: 403-220-6484
Email: lmwells@ucalgary.ca

2013 Shift: The Project to End Domestic Violence
www.preventdomesticviolence.ca

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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.

This particular report was designed to build the case for designing and implementing a best practice program to support teen/young dads at the Louise Dean Centre in Calgary, Alberta.

1. 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. Adults' inter-personal skills and their relationships with friends, family, colleagues, and intimate partners are largely shaped by the dynamics of their families in childhood and the ways in which they were parented. Recent research has confirmed that, for better and for worse, fathers influence children's physical, social, emotional, and cognitive development as much as mothers do.

The research on positive father involvement is summarized in a recent Shift paper entitled *Promoting Positive Father Involvement: A Strategy to Prevent Intimate Partner Violence in the Next Generation*, which is available at www.preventdomesticviolence.ca. This supplementary paper was designed as a background paper to support a partnership between Shift and Catholic Family Services to explore the potential benefits when teenaged and young fathers are involved in their children's lives, and the special challenges they face in a fathering role. Together, the partnership aims to improve the parental engagement and parenting skills of the young male partners of pregnant and parenting girls and women participating in the Louise Dean¹ program located in Calgary, Alberta.

Young parenting is considered to be a major social and health problem. This is partly because of the health risks associated with adolescent pregnancy and childbirth and the negative effects on the life course of many young mothers and fathers. Of most concern, however, are the health and developmental risks faced by the children of young parents. In infancy, early childhood, and middle childhood, these children frequently experience higher rates of developmental challenges, learning difficulties, and behavioural problems¹ and, later in life, lower educational aspirations, increased school failure, higher rates of criminality, welfare dependency (as adults), and greater likelihood of becoming teen parents themselves.² These problems result in significant costs associated with health care, social assistance, child welfare, and incarceration, as well as lost tax revenue due to lower earnings.³ While poor life outcomes are not inevitable for the children of young parents, most young parents need extensive supports to get and keep their own lives on track and to master and exercise positive parenting practices in order to provide stable, nurturing environments for their children.

Until a few years ago, the vast majority of the research on young parents focused on teenage mothers. The fathers of the children of teenaged mothers, who are sometimes teenagers but more often young men, were often dismissed as either poor influences

¹ Louise Dean School provides an education program for pregnant and parenting teens. The school currently operates with a September to June traditional program along with a six-week summer school component. Students enter the program throughout the year. To support the young women while they are at Louise Dean Centre, a team consisting of an educator, a social worker, and a health professional works with them to improve academic achievement, social/emotional concerns, and healthy lifestyle choices for themselves and their babies. The team also accesses other supports as needed such as medical care, career development, and financial assistance.

for their children or not interested in playing an active parenting role. Increased recognition of the desire of many young fathers to be a part of their children's lives along with better knowledge about fathers' influences on their children's developmental outcomes has sparked recent studies on the best ways of increasing positive father involvement among young fathers. Although there is still much to learn, the knowledge base is sufficient to provide insights and to inform recommendations based on research about the best ways of doing so.

This paper begins with a brief profile of young fathers' personal characteristics, followed by a brief summary of the research on young fathers' parenting skills and limitations and the factors that can encourage or impede young fathers' involvement in their children's lives. The paper concludes with recommendations for programming for young fathers who are connected to the Louise Dean program.

Important terms and definitions

Young fathers: In this paper, "young fathers" are those under the age of 25 years and "teenaged fathers" are those under the age of 20 years at the time of their child's birth.

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.⁴

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.⁵

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."⁶ This report offers primary prevention strategies to reduce the chances that children will grow up to be perpetrators or victims of intimate partner violence.

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.

2. 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 “parenting,” “parenthood,” “young,” “adolescent,” “teen,” “teenage,” “child development,” “program,” “evidence based,” “synthesis,” “engage,” “transmission,” “inter-generational transmission,” and, given the low volume of published research on the subject, to articles published from 1990 to 2013.

2.1. Limitations

Very little is known about adolescent and young adult fathers in Canada, as this country lacks methods for tracking their demographics, marital status, and personal characteristics. Very little is known about effective programs, policies, or other initiatives to enable young fathers to become and remain engaged with their children. A body of research on adult fathers is developing, but there are very few studies on young fathers. There appear to be no Canadian studies whatsoever that are specific to young fathers.

3. Young fathers: Who are they?

The number of teenaged and young, unmarried adult fathers in Canada and in Alberta is either not tracked or is not publicly available. We do know that about 2,200 infants were born to teenaged mothers in Alberta in 2013,⁷ most of them aged 18 and 19 years.⁸ It is roughly estimated that one-quarter of these infants were fathered by teenaged boys,⁹ most of whom were 18 or 19 years of age,¹⁰ with most of the remaining fathers in their early 20s.¹¹ The proportion of teenaged and young adult fathers in Canada who are living with the mothers of their children is not known. In the United States, 11% of teenaged mothers are married and 46% are living common law,¹² but the ages of their husbands and partners are not known, nor is it known whether these husbands and partners are the same boys and men who fathered the children. One recent American study reported that half of teenaged fathers lived with, and 18% were married to, the mother of their child;¹³ older American research found that 30% and 50% of teenaged mothers continued to reside with their own parents for at least two years after the child’s birth,¹⁴ although the father may also have lived with the larger family.

Like teenaged mothers,¹⁵ most teenaged fathers have experienced many challenges in childhood and adolescence. Repeated studies have shown that, compared to non-father teenaged males, teenaged fathers are more likely to have grown up in low-income families, to have parents with low levels of education, to have had young parents, and

to have experienced child maltreatment.¹⁶ In adolescence, they are more likely to engage in high-risk sexual behaviours, to chronically use drugs and alcohol, and to be criminally involved.¹⁷ And, as with teenaged mothering, fathering in adolescence is often inter-generationally transmitted, with a recent study reporting that, controlling for other risk factors, the sons of adolescent fathers were 1.8 times more likely to become teenaged fathers than the sons of older fathers were.¹⁸

Young fathers who are over the age of 18 years have similar histories of disadvantage and are more likely to have low levels of education and to be unemployed or in poorly-paid, poor-quality jobs than young men who marry before becoming a father or who are not fathers.¹⁹ In addition, one longitudinal study found that by the time they reach the age of 26, young men who are highly antisocial father nearly three times more children than do less antisocial young men.²⁰

The disadvantages that increase the likelihood of young fathering can be perpetuated by the experience of fathering. At last report in Canada, about 40% of teenaged fathers attended school full time, 37% were employed, and 68% had very low incomes.²¹ However, the education and employment challenges encountered by many young fathers may be largely attributable to their pre-existing characteristics, rather than fathering itself.²² For instance, recent research using longitudinal data from the United States found that teenage fatherhood decreased the likelihood of completing a high school diploma by 15% relative to boys whose partners had become pregnant but miscarried.²³

In addition, Futris and colleagues observe that, because adolescent fathers do not carry and bear a child, the consequences of early fatherhood is partially contingent upon their willingness to assume parenting and financial responsibilities.²⁴ In fact, the proportion of young fathers who become and remain involved in their children's lives is low. Recent Canadian research is not available, but American studies have reported large declines in fathers' involvement in the first few years of their children's lives.²⁵ A recent, large American study found that 32% of teenaged fathers had no recent contact with their children, either by choice or because they were refused access by the mother.²⁶

4. Young fathers' ability and desire to be engaged parents

Like teenaged mothers, most young fathers are experiencing the physical, emotional, and cognitive changes and stresses that are a normal part of development in adolescence and early adulthood.²⁷ In conjunction with the cumulative disadvantages they have experienced, this means that many young fathers are ill equipped for both adulthood and parenting and, if they are involved in their children's lives, they are at risk of using poor parenting practices, such as authoritarian parenting, inconsistent discipline, corporal punishment, and detachment.²⁸ Early parenting, particularly in adolescence, is a risk factor for child maltreatment, partly because it is linked with negative parenting attitudes and behaviours, along with lack of knowledge and

unrealistic expectations about infant and child development.²⁹ Also, research indicates that a high proportion of young fathers are engaged in illicit activities and drug use, and have difficulties controlling their tempers,³⁰ each of which places them at higher risk of perpetrating child maltreatment.³¹ In addition, young parents and women who become pregnant before the age of 25 years are at particularly high risk for intimate partner violence (IPV).³² Exposure to parental IPV is a form of child maltreatment and, like all types of child abuse, it is associated with a wide range of social and emotional problems in childhood and adolescence,³³ increased bullying victimization and perpetration in adolescence,³⁴ and increased IPV victimization and perpetration in both adolescence³⁵ and adulthood.³⁶ Overall, as summarized by Woodward and colleagues, children born to young parents “are likely to be at substantial risk, not only because of their parents’ immaturity but also because, due to “assortative pairing” [the tendency to seek a partner with similar background and traits], contributing partners are more likely to be characterized by common problematic developmental histories and genetic tendencies.”³⁷

However, poor outcomes are not inevitable for young fathers or for their children. Research has shown that early parenting can provide young fathers with the impetus to upgrade their education, training, or employment,³⁸ and several studies have found that the income of young fathers who live with the mothers of their children is much higher than among those who live apart.³⁹ In addition, there is some evidence that young fathers’ involvement in parenting and contributing financially to the household improves young fathers’ psychological well-being.⁴⁰

Likewise, while poor developmental outcomes have been identified for the children of young parents, and of teenaged parents in particular,⁴¹ this may be primarily due to parental characteristics other than young age. A recent large, longitudinal study from the United States comparing fathers under the age of 19 with those over the age of 19 at the time of the child’s birth reported that, while having a teenaged father (or, as reported in a second study using the same data, having a teenaged mother⁴²) was associated with compromised health and development among young children, this was explained by lower household socio-economic status and poorer home environments, along with lower frequency of marriage, among fathers in the younger age group.⁴³ This study also found few differences in father-child relationships between the two father age groups.⁴⁴ A second recent study found that poor child outcomes appear to be more attributable to cumulative mother and father risk and cumulative family risk than to the age of the parents.⁴⁵

The research is clear that children benefit when their fathers are involved in their lives in positive ways, even if the father does not reside with the child, and, as noted by Tuffin and colleagues, “[b]eing young, and arguably ill-prepared for fatherhood, does not necessarily diminish the importance of the father’s role in the life of his children.”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).⁴⁷ 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 consistency⁴⁸) help them to flourish. 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.⁴⁹ Fathers also foster positive child development by contributing to household finances and home maintenance,⁵⁰ supporting mothers to be good parents,⁵¹ and promoting a harmonious family environment.⁵² Positive behavioural, social, emotional, and academic effects of father involvement have been reported even among never-married young fathers who do not reside with their children, even after controlling for maternal risk factors.⁵³

Research indicates that, despite both negative social stereotypes and legitimate concerns about young fathers, most young fathers have a strong desire to play a meaningful role in their children's lives.⁵⁴ A recent American study reported that young fathers hoped to be both nurturing parents and financial providers.⁵⁵ Other qualitative research has shown that young fathers do not see age as a barrier to being good fathers, and many are motivated to be so by their own fathers' lack of involvement in their lives and a desire to be better parents than their own fathers.⁵⁶

5. What influences young fathers' engagement?

It is likely that, as proposed by Cabrera and colleagues, father engagement is predicted, moderated, and mediated by complex inter-actions among father characteristics (e.g., age, employment, education, personality), family characteristics (e.g., maternal depression, socio-economic status), and contextual factors (e.g., mother–father relationship).⁵⁷

Being under the age of 20⁵⁸ and, especially under the age of 16,⁵⁹ disinterest in child rearing,⁶⁰ not wanting the pregnancy,⁶¹ and having only an acquaintance relationship with the mother⁶² appear to be consistent predictors of young fathers' lack of engagement in parenting their children. Young fathers with low human capital are less likely to become and remain involved,⁶³ as are those with characteristics that place them at risk of poor parenting behaviours (e.g., school dropout, psychopathology).⁶⁴ At least one recent study has identified the father having no other children and the mother having higher self-esteem and few depressive symptoms as predictors of young fathers' initial and ongoing engagement.⁶⁵ Although young fathers sometimes identify gatekeeping by the maternal grandmother as a reason for their withdrawal from parenting,⁶⁶ the research findings are mixed as to whether strong support from or the

teenaged mother's cohabitation with the maternal grandmother increases or decreases young fathers' sustained involvement with their children.⁶⁷ Overall, however, the most important predictors of young fathers' initial and sustained engagement in their children's lives appear to be:

- (i) living with the mother;⁶⁸
- (ii) the existence of a romantic relationship with the mother,⁶⁹ even if the parents do not cohabit;⁷⁰
- (iii) the quality of the relationship with the mother,⁷¹ even if the relationship is not or is no longer romantic;⁷² and
- (iv) father involvement in the prenatal period.⁷³

As discussed earlier, many relationships between teenaged mothers and young fathers do not last after the birth of the child, and many couples do not live together at any point. When the parents do not live together, the extent to which teenaged mothers grant fathers' access to their children is strongly influenced by the mother's perceptions about conflict with the father before and after the birth of the child,⁷⁴ whether the father is capable of caring for the child,⁷⁵ and the extent to which the father takes on parenting responsibilities.⁷⁶ Transitions to new relationships and having one or more additional children with a new partner or partners by either or both parents generally reduces father involvement.⁷⁷

Recent research indicates that a key factor in sustaining father involvement after the parental romantic relationship breaks down is the early development of a strong co-parenting relationship between the mother and father,⁷⁸ and this may be more important in sustaining the involvement of young fathers than it is for older fathers.⁷⁹ In general, "a quality co-parenting relationship can be conceived of as an ongoing, interactive, cooperative, and mutually supportive relationship that is primarily focused on raising children, with both parents actively engaged in the lives of their children and childrearing."⁸⁰ In addition to supporting positive father involvement, good co-parenting is vital to healthy child development. Research shows that "parental cooperation and collaboration supports children's social and emotional development, whereas conflict and undermining behaviour between parents leads to adjustment problems."⁸¹

Research also shows that young fathers who become engaged in the prenatal period are more likely to be committed to parenting and that prenatal engagement improves the parental relationship and both parents' commitment to co-parenting.⁸² Fathers' engagement in the prenatal period can also lead to cohabitation, which also increases father involvement.⁸³

Developing and maintaining a co-parenting relationship appears to be more challenging for fathers than for mothers, regardless of the father's relationship status with the mother.⁸⁴ This might be because, as a recent study showed,⁸⁵ fathers' expectations

about how the parents would work together to raise the child were not related to how the co-parenting relationship actually evolved, but the mothers' expectations were, suggesting that mothers have more realistic understanding of the demands of parenting and co-parenting.⁸⁶

6. Improving the parenting skills, engagement, and positive involvement of young fathers in Calgary: Recommendations for the Louise Dean program

It is generally agreed that increasing the initial and ongoing engagement and positive involvement among young fathers requires:

- (i) improving young fathers' parenting skills;
- (ii) establishing strong, positive relationships between young mothers and fathers and improving their co-parenting skills⁸⁷; and
- (iii) increasing fathers' human capital⁸⁸ by assisting them to find employment and/or complete an educational program, to meet their own basic needs (housing, health care, legal services) and provide child support, and to improve their social support systems.⁸⁹

The empirical research indicates that positive fathering programs may be more effective if they fully or partially include mothers,⁹⁰ and the need to involve mothers in programming that targets young or adolescent fathers⁹¹ is particularly clear because evaluations of some programs for teen fathers that did not include mothers have reported a decrease in father involvement after the intervention.⁹² It is also generally agreed that programming should begin in the prenatal period⁹³ and continue throughout the infant and toddler period, even and, perhaps, especially, when the parents are no longer romantically involved.⁹⁴

At this time there are very few published, rigorous evaluations of either fatherhood or co-parenting interventions for pregnant and young parents or programs for young fathers. As noted by Lachance and colleagues, "[s]trategies from successful interventions are needed to inform both intervention design and policies affecting these adolescents. More rigorous program evaluations are urgently needed to provide scientifically sound guidance for programming and policy decisions."⁹⁵

The small body of existing high-quality research on fatherhood programs in general indicates that some program features appear to be essential to improving parent and child 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 discipline⁹⁶ skills; and
- promote good communication with the mother and effective co-parenting strategies.⁹⁷

There is, at present, no evidence that informal group programs or programs that aim to “hook” fathers into other services by involving them in enjoyable activities (such as father-child events) have any impact on positive father involvement.⁹⁸

A comprehensive review of existing fatherhood programs revealed only two that (i) are evidence based; (ii) target adolescent and young adult fathers; (iii) include fathers who do not reside with mothers; and (iv) include a strong emphasis on positive relationships and co-parenting with mothers.

Shift recommends that both of these programs, one of which targets fathers and mothers together and one of which targets fathers alone (at least initially), be provided to boys and men aged 16 to 25 years who will be the fathers of children born to girls and women participating in the Louise Dean program. The programs should be offered in succession but under a single program banner, rather than marketed as two distinct programs. To contribute to the knowledge base on positive father involvement among young fathers, the programs should be subject to rigorous, longitudinal evaluation, ideally replicating the evaluation methods used in previous evaluations of each program.

The two recommended programs are (i) Florsheim and colleagues’ Young Parenthood Program (YPP) and (ii) Fagan and colleagues’ Minnesota Early Learning Design (MELD) for Young Dads.

6.1. Young Parenthood Program (YPP)

The YPP is a 10-week counseling program delivered in 75-minute sessions during pregnancy and designed to facilitate interpersonal skill development and positive parenting among adolescent *parents* (both fathers and mothers). As described by Florsheim, the YPP is based on an integration of family systems theory and adolescent developmental theory and organized into five phases:

- The first phase focuses on the development of the therapeutic alliance and educating couples about the connection between co-parenting and child development.
- The second phase is designed to set relationship goals and determine which specific interpersonal skills are needed to reach identified goals.

- The third phase includes specific activities designed to help couples develop communication and self-regulation skills related to positive co-parenting. The YPP targets specific interpersonal skills hypothesized to promote positive communication and lower the risk for intimate partner violence, paternal disengagement, and harsh parenting.
- The fourth phase focuses on negotiating changing roles associated with the transition to parenthood, particularly within the context of extended families.
- The fifth phase focuses on future co-parenting issues, including family planning to avoid “rapid repeat” pregnancies.⁹⁹

An intervention manual has been developed to assist in the YPP counselor training process and to help maintain intervention fidelity. Counselors participate in regular supervision meetings focusing on therapeutic process and adherence to the intervention model. At least in its initial administration, YPP training and primary supervision were provided by a licensed clinical psychologist with expertise in adolescent development and psychotherapy.

YPP counselors follow a clear protocol, but have some latitude to customize the intervention to the particular needs and circumstances of each couple. It appears to be intended that the YPP be administered by master’s level clinicians with clinical skills and experience working with adolescents and couples.¹⁰⁰

Evaluation of the program showed that, 18 months after the birth of the child, fathers who completed the YPP demonstrated more positive parenting than did fathers in the control group. Interestingly, the positive outcomes in paternal functioning were mediated through changes in the mother’s interpersonal skill development. These findings indicate that the positive effect of YPP on young fathers’ parental functioning was mediated through both mothers’ and fathers’ change in inter-personal bonding scores, underscoring the value of targeting co-parenting couples in efforts to promote healthy parenting. That is, positive changes in the young mothers’ capacity for interpersonal bonding scores predicted positive changes in the fathers’ inter-personal bonding scores, which, in turn, predicted positive parenting and co-parenting, including higher rates of paternal nurturance and lower child abuse potential scores. The finding that YPP was more effective for fathers than for mothers is consistent with previous research indicating that the young father’s relationship with his partner might be more critical to his functioning as a parent than the young mother’s relationship with her partner.¹⁰¹

6.2. 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. First developed in 1973, the program is now delivered by a range of

community and health care organizations in the United States. The goals of the program include helping fathers share parenting responsibilities, regardless of their relationship with the child's mother; reducing fathers' isolation; and providing positive role models for fathers.¹⁰² As described in Mathematica's 2011 *Catalog of Research: Programs for Low-income Fathers*, the topics covered in the five sessions are:

- (i) Sharing parental responsibilities; recognizing that father involvement is a father's responsibility;
- (ii) Communication with the child's mother regarding needs and responsibilities; the fathers' homework was interviewing the mothers about their expectations and the partners completing a "contract" about responsibilities;
- (iii) How co-parenting benefits the child;
- (iv) Identifying and addressing barriers to co-parenting; and
- (v) Fostering solidarity between the parents, such as dealing with extended family and new partners; guest speakers shared their experiences and strategies.¹⁰³

As described in the U.S. Office of Juvenile Justice and Delinquency Prevention (OJJDP) manual, *Effective Family Programs for Delinquency Prevention*, MELD has been adapted to meet the needs of young, single mothers or single fathers, Hispanic and Southeast Asian parents, children, deaf and hard of hearing parents, first-time adult parents, and parents of children with special needs, although it does not appear that the program has been evaluated for these groups, other than the version for young mothers, and this evaluation focused only on attitudes, rather than behaviours. MELD reports that its curriculum and learning processes are usable by parents who are not highly literate, and recognizes and addresses everyday concerns of low-income parents. It appears that the formal MELD program is typically followed by up to two years of parent education groups facilitated by trained volunteers from the community under the supervision of a certified MELD leader. The longer-term parent education group also has a curriculum that covers health, child development, child guidance, family management, use of community resources, home and community safety, balancing work and family, and other issues related to the parenting needs of the target group.¹⁰⁴

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 also attended the post-birth group.¹⁰⁵

Outstanding questions:

1. Challenges that may interfere with fathers' ability to parent include substance abuse, mental health issues, physical abuse, and criminal involvement. It has been observed that such challenges may weaken relationships with mothers and may not be conducive to increased father involvement in some cases.¹⁰⁶ The research does not clearly indicate whether supports and interventions for these sorts of challenges should be included in programming to improve the parenting skills, engagement, and positive involvement of young fathers. There exist two promising American fatherhood programs that specifically target fathers dealing with specific challenges: The Strong Fathers Program, for fathers referred by child welfare and with a history of domestic violence,¹⁰⁷ and Fathers for Change, for fathers of children aged zero to three years who have perpetrated IPV and who have alcohol or substance abuse issues.¹⁰⁸ However, both of these programs are still in the process of being evaluated, so their effectiveness is not confirmed and, in any case, neither was designed for adolescent/young fathers.

Further consultation with the researchers who developed the YPP and MELD is required to clarify whether fathers facing one or more of the above challenges are eligible to participate and, if so, the types of supplementary services and supports that should be provided to them.

2. The YPP has not been evaluated for fathers who are members of population groups other than Caucasian, African/Caribbean, and Latin American and who were born in or reside in the United States. The efficacy of the program for fathers belonging to other population groups and/or who are immigrants or refugees requires testing through comprehensive evaluation, should there be sufficient numbers of participants and comparison group members to test for between-group differences.

ENDNOTES

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- ¹ See, for example, Dryburgh, H. 2000. "Teenage pregnancy." *Health Reports*, 12(1), 9-19. Available at <http://www.statcan.gc.ca/studies-etudes/82-003/archive/2000/5299-eng.pdf>; Chen, X.K.; et al. 2007. "Teenage pregnancy and adverse birth outcomes: A large population based retrospective cohort study." *International Journal of Epidemiology*, 36(2), 368-73; Letourneau, N.; et al. 2007. "Longitudinal study of social-environmental predictors of behaviour: Children of adolescent and older mothers compared." *Canadian Studies in Population*, 34.1, 1-27.
- ² See, for example, Pogarsky, G.; Thornberry, T.P.; Lizotte, A.J. 2006. "Developmental outcomes for children of young mothers." *Journal of Marriage & Family*, 68(2), 332-344; Young, T.; Turner, J.; Denny, G. 2004. "Examining external and internal poverty as antecedents of teen pregnancy." *American Journal of Health Behavior*, 28(4), 361-373.
- ³ Hoffman, S. 2006. *By the Numbers: The Public Cost of Teen Childbearing*. (Washington, DC: National Campaign to Prevent Teen Pregnancy).
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