1. **Introduction**

In the second year of the contract, the Center for Family and Community Engagement (CFFACE) implemented the evaluation plan that was put in place during the prior year. This included collecting evaluation data from the two Strong Fathers groups that took place during this reporting period. Data collected included data from fathers referred to the program, interviews with mothers, Forsyth County Department of Social Services, North Carolina Division of Social Services, and the Time Out comparison group. Additional program evaluation work completed during the year included the development and administration of Program Fidelity measures, and administration of a Community Stakeholder Focus Group and individual Interviews. North Carolina State University Internal Review Board (IRB) modifications and Annual Review were submitted and approved. Finally, proposals were submitted for presentations at the National Outreach Scholarship Conference and the Prevent Child Abuse North Carolina Conference.

2. **Administration of the Evaluation Plan**

Beginning on November of 2009 the first Strong Fathers group began, at this time the evaluation of the program began as well. The first group began in November of 2009 and concluded in April of 2010. Seven men were referred to the first group, 5 men attended at least one session and 2 men completed the group. Completion of the group is defined as attending at least 65% of the sessions. The second group began in April and ended in July of 2010. Nine men were referred to the second group, 7 men attended at least one session and 4 men completed the group. While each program was in progress multiple sets of data were collected from the fathers. Data collected included: Assessment forms (1 per participant), Mothers Contact Information (1 per participant), Parenting Logs (completed weekly), Goal Setting Worksheets (collected at 4 time points), Measure of Abusive Beliefs (Pre/Post), Contact with Children (Pre/Post), Child Development Test (collected at 3 time points), Relationship Building Challenges (collected at 3 time points), Group Notes (recorded weekly), Attendance (recorded weekly), and Weekly Facilitator Notes.

For each group, interviews with the mothers were conducted at the beginning and end of each group. For group 1, the contact information for 6 mothers were obtained, 2 pre and 2 post interviews were conducted. For group 2, the contact information for 6 mothers were obtained, 1 pre and 1 post interview were conducted. All interviews were transcribed and coded for further analysis. Mothers' interviews consist of qualitative and quantitative components taking approximately one and a half hours to complete.

To further explore the impact of the Strong Fathers Program comparison data was collected from fathers enrolled in the Time Out batterer intervention program. Comparison data collected includes:
Pre/Post Measure of Abusive Beliefs, Assessment forms, and Partner’s Safety Assessment (if applicable/available). Comparison participants were required to be fathers, begin the program during a similar time period that a Strong Fathers program is beginning, and be enrolled in a group that is run by facilitators who do not facilitate the Strong Fathers program. For group 1, comparison data from the Time Out program was collected for 3 men. For group 2, no eligible participants could be identified. In order for comparison data to be collected, participants need to give their consent to have their information be included in the evaluation. During this time period, comparison participants were reluctant to consent to this part of the research plan. Procedures for obtaining potential comparison participant consent were revised.

County level Department of Social Services data was collected on the children on the fathers enrolled in the program. For group 1, data was collected for 4 children. For group 2, data was collected for (NUMBER) children. Forms requested for each family were: the Family Assessment of Strengths and Needs (DSS-5229), Family Risk Assessment of Abuse/Neglect (DSS-5230), Safety Assessment (DSS-5231), Family Services Agreement Form (DSS-5241) and Child and Family Team Meeting Documentation. Some of these forms were completed multiple times during the data collection period. The number of forms completed for each type is listed in table 1.

Table 1: The number of County DSS forms collected for each family by group

<table>
<thead>
<tr>
<th>FCDSS Form</th>
<th>Group 1 (n = 4)</th>
<th>Group 2 (n = 1)</th>
<th>Total (n = 8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Assessment of Strengths and Needs</td>
<td>4</td>
<td>4</td>
<td>8</td>
</tr>
<tr>
<td>Family Risk Assessment of Abuse/Neglect</td>
<td>4</td>
<td>4</td>
<td>8</td>
</tr>
<tr>
<td>Safety Assessment</td>
<td>4</td>
<td>4</td>
<td>8</td>
</tr>
<tr>
<td>Family Services Agreement Form</td>
<td>2</td>
<td>3</td>
<td>5</td>
</tr>
<tr>
<td>Child and Family Team Meeting Documentation</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

State level Division of Social Services data was collected on the children of the fathers enrolled in the program. For group 1, data was collected for 11 children. These were the children of 7 fathers. For group 2, data was collected for 7 children. These were the children of 4 fathers. Information requested for each child included: County, Date of Birth, Sex, Race/Ethnicity, services requested, date requested, date terminated, risk assessment rating, living arrangement, petition filed with Juvenile Court, perpetrator relationship, contributory factors type, contributory factors, type reported, maltreatment types reported, type found, finding reason, and maltreatment type found.

Feedback from community stake holders was solicited through a focus group and individual interviews. In total, (NUMBER) community stakeholders gave feedback about the program. The Community Stakeholder Report is listed in the Appendix for more information.
Summary evaluation reports were completed for each Strong Fathers program administered. The evaluation reports summarize data collected from the fathers, mothers, County DSS, State DSS, and the Comparison group (see attached Evaluation Report).

3. Additional Evaluation Work: Testing Program Fidelity

Additional program evaluation measures were developed to measure the fidelity of the Strong Fathers program. The development of program fidelity measures included facilitator interviews, observation of one session and conducting a focus group with program participants. All measures designed to test program fidelity were put through IRB and approved prior to administration of program fidelity measures. The entire program fidelity report can be found in the Appendix.

4. IRB

Continuing work with the IRB at NCSU was conducted during this reporting period. This work included slight modifications to the evaluation plan for the Strong Fathers program, model fidelity implementation, and the Strong Fathers program Annual Review. The Annual Review and its supporting documents can be located in the Appendix.

5. Team Meetings

The Strong Fathers program evaluation team met regularly (biweekly or monthly) with the Curriculum development team (the Center for Child and Family Health) and the program administration team (Family Services, Inc.). These meetings took place to review the ongoing work of all three organizations related to the Strong Fathers program and their collaboration on work related to the program.

6. Proposals and Presentations

CFFACE prepared two proposals for presentations on the Strong Fathers program. These presentations were in collaboration with the Curriculum Development team, the program administration team, and NC Division of Social Services. Both proposals were accepted for presentation at the National Outreach Scholarship Conference and the Prevent Child Abuse North Carolina Learning and Leadership Summit. Both presentations are cited in references.

References


Appendices
Evaluation Report
Community Stakeholder Report
Program Fidelity Report
IRB Annual Review
North Carolina State University
Center for Family & Community Engagement

Strong Father’s Year 2 Group 1 & 2: Preliminary Summary of Findings
Report Completed 12/20/10

Report Completed by:
Dr. Joan Pennell
Amy Ryder-Burge

This report is intended for distribution to the program team at Family Services, Inc., the curriculum development team at the Center for Child and Family Health, and the evaluation team at the Center for Family and Community Engagement only.
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Introduction

This evaluation report was prepared as a summary of the first two groups of participants that were referred to the Strong Fathers program. This report is for distribution to the evaluation team at the Center for Family and Community Engagement, the program team at Family Services, Inc., and the curriculum development team at the Center for Child and Family Health. It covers the findings from the data instruments used for the Strong Fathers curriculum, mothers interviews, DSS county level data on the families, and comparison data from the Time Out program. This report does not cover the NC DSS state level data as these were not extracted at the time of this report; they are to be provided later this summer to the Center. Curriculum data were collected to determine how well the curriculum was administered and the participants’ responses to it. Mothers’ pre and post interviews provided their perspectives on the father enrolled in the program including his relationship with her and with their child(ren) at the beginning and the end of the program. DSS county level data provided family-level information on the fathers enrolled in the program and their families. Data from a group of comparison participants in the Time Out program were collected to determine if and how the Strong Fathers were different from participants enrolled in a court-ordered batterer-intervention program.
Curriculum Evaluation

Data Instruments:
Data included in this report were collected from the fathers that were enrolled in the Strong Fathers program. This group met weekly from the middle of November through the middle of April. Some weeks the group did not meet due to holidays or a cancelled session. The following table lists each instrument that was used, who completed the instrument, a short description of the form, and the number of participants who completed the form (or in the case of the facilitator’s notes the number of sessions that they were completed). Specific data collected for each of the forms are listed in the appendix.

<table>
<thead>
<tr>
<th>Instrument:</th>
<th>Completed By:</th>
<th>Description:</th>
<th>Number Collected:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessment Information</td>
<td>Fathers</td>
<td>The form collected information about the fathers, including their relationship with the mother of their children, parenting, history of domestic violence, and substance use at the beginning of the program.</td>
<td>16</td>
</tr>
<tr>
<td>Strong Fathers Pre/Post test</td>
<td>Fathers</td>
<td>This form collected information about the father’s abusive beliefs at the beginning and the end of the program.</td>
<td>Pre-test: 10</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Post-test: 6</td>
</tr>
<tr>
<td>Contact with Children</td>
<td>Fathers</td>
<td>This form collected information about the fathers contact with his children at the beginning and the end of the program.</td>
<td>Pre-test: 9</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Post-test: 6</td>
</tr>
<tr>
<td>Parenting Log</td>
<td>Fathers</td>
<td>This form collected weekly parenting information on the fathers.</td>
<td>12</td>
</tr>
<tr>
<td>Goal Setting Worksheet</td>
<td>Fathers</td>
<td>This form collected the father’s goals for themselves, their children, and the mother of their children at four time points throughout the program.</td>
<td>Session 2: 8</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Session 7: 10</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Session 10: 6</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Session 19: 1</td>
</tr>
<tr>
<td>Child Development</td>
<td>Fathers</td>
<td>This form tested the father’s knowledge of child development at sessions 4, 6, and 20.</td>
<td>Session 4: 10</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Session 6: 9</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Session 20: 4</td>
</tr>
<tr>
<td>Relationship Building Challenges</td>
<td>Fathers</td>
<td>This form recorded items that fathers could report as challenging in their relationships with their child(ren) at two time points.</td>
<td>Time 1: 5</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Time 2: 5</td>
</tr>
<tr>
<td>Attendance</td>
<td>Group Facilitators</td>
<td>This form recorded the participants’ attendance at each session.</td>
<td>12</td>
</tr>
<tr>
<td>Group Notes</td>
<td>Group Facilitators</td>
<td>This form collected the facilitator’s notes for each session.</td>
<td>9</td>
</tr>
<tr>
<td>Facilitator Notes</td>
<td>Group Facilitators</td>
<td>This form collected information at each session about the activities of the session and the facilitator’s notes.</td>
<td>36</td>
</tr>
</tbody>
</table>
Sample:
Sixteen men were referred to either group 1 or group 2; of these, twelve attended at least one session. The ages of the men referred ranged from their early 20s through their 30s. The men referred were composed of 5 European Americans, 7 African Americans, 2 Hispanic/Latinos, and 23 unknown. The majority of men referred had 1-4 children. Thirteen of the men referred were involved with the mother of their children, and three were not involved with them. All but one man referred had all of their children with one woman, and most of these men referred were still involved in a relationship with them. Most of the men referred had factors that have been found to be related to domestic violence/coercive control. The referred men’s level of education ranged from 10th grade through a graduate level education. Seven men referred were unemployed, and 8 were employed. Four men referred had a Current 50B protective order against them by their child’s mother. Six men referred had a history of being charged or convicted with a domestic violence crime. Five men referred had a history of mistreatment as a child. Six men referred reported domestic violence between their parents/guardians. Most men referred (n= 10) had a recent (less than 4 months) history of substance or alcohol use.

Group Participation and Objectives:

Attendance:
A total of 12 participants attended at least one session. Eight participants joined the group at session 1, 1 participant at session 2, 2 participants at session 3, 2 participants at session 5, and one participant at session 6. Six participants attended 65% or more of the sessions. Six participants attended 50% or less of the sessions. Low completion rates in the groups limit our capacity to determine the impact of program as it was intended.

Group Notes:
Group notes were collected on 7 participants who were enrolled in Group 2 of the Strong Fathers program. Participants were assessed weekly on their amount of participation, quality of participation, expressed empathy for the mother of their children, expressed empathy for their children, demonstration of parenting skills, positive attitude, and positive behavior. Possible responses were in a range of 1 (poor) to 5 (excellent). Group notes were recorded by program facilitators after each session. Amount of participation ranged from a 3 to a 5 for all participants. Figure 18 displays the amount of participation per session for each participant. The mean participation is also displayed in figure 18. Quality of participation ranged from a 3 to a 5 for all participants. Figure 19 displays the quality of participation per session for each participant. The mean quality of participation is also displayed in figure 19. Empathy for the mother of their children ranged from a 3 to a 5 for all participants. Figure 20 displays empathy for the mother of their children per session for each participant. The mean empathy score for the mother of their children is also displayed in figure 20. Empathy for children ranged from a 3 to a 5 for all participants. Figure 21 displays empathy for children per session for each participant. The mean empathy score for children is also displayed in figure 21. Demonstration of parenting skills ranged from a 3 to a 5 for all participants. Figure 22 displays demonstration of parenting skills per session for each participant. The mean demonstration of parenting skills for each session is also displayed in figure 22.
Demonstration of a positive attitude ranged from a 3 to a 5 for all participants. Figure 23 displays positive attitude per session for each participant. The mean score for demonstration of a positive attitude is also displayed in figure 23. Demonstration of positive behavior ranged from a 3 to a 5 for all participants. Figure 24 displays positive behavior per session for each participant. The mean score for demonstration of positive behavior is also displayed in figure 24.

Figure 18: Amount of Participation per Session by Participant

* Scores are reported by participant. Participants who completed the group (attended 65% or more of the sessions) have a solid line. Participants who partially completed the group (attended from 1 to 64% of the sessions) have a dotted line.
Figure 19:

* Scores are reported by participant. Participants who completed the group (attended 65% or more of the sessions) have a solid line. Participants who partially completed the group (attended from 1 to 64% of the sessions) have a dotted line.
Figure 20:

* Scores are reported by participant. Participants who completed the group (attended 65% or more of the sessions) have a solid line. Participants who partially completed the group (attended from 1 to 64% of the sessions) have a dotted line.
Figure 21:

* Scores are reported by participant. Participants who completed the group (attended 65% or more of the sessions) have a solid line. Participants who partially completed the group (attended from 1 to 64% of the sessions) have a dotted line.
Figure 22:

* Scores are reported by participant. Participants who completed the group (attended 65% or more of the sessions) have a solid line. Participants who partially completed the group (attended from 1 to 64% of the sessions) have a dotted line.
Figure 23:

* Scores are reported by participant. Participants who completed the group (attended 65% or more of the sessions) have a solid line. Participants who partially completed the group (attended from 1 to 64% of the sessions) have a dotted line.
Figure 24:

* Scores are reported by participant. Participants who completed the group (attended 65% or more of the sessions) have a solid line. Participants who partially completed the group (attended from 1 to 64% of the sessions) have a dotted line.

Facilitator Notes:

Most activities were completed as scheduled, and most activities addressed the session objectives. In all, 5 activities were not completed as scheduled (4 in group 1 and 1 in group 2). Two of those activities were not completed in one session where a focus group was also conducted during the same session. Facilitator noted for group 1 that session 17 felt like it could have more activities, and they had to provide filler in order to make the group run the entire time.

Overall participants’ writing and comprehension/reading skills remained a challenge for group 1 participants. Writing and comprehension skills for group 2 participants were notably stronger. Initially it was challenging to cover all of the material for the session and allow for group discussion; this seemed to decrease as the group continued (noting that the group had a small number of participants). This seemed to be less of a problem for group 2. For both groups, participants were increasingly engaged in the program. The facilitator’s feedback indicated that participants understood and applied the material over several sessions. This seems especially true for material on domestic violence, child development, and communication with their children’s mother. Although this evaluation measure cannot speak to changes in the men’s behavior, it does appear that the men were thinking about how their behavior had impacted their relationships with their children and the mothers of their children.
**Results:**

*Strong Fathers Pre/Post Test:*

A higher score on this test indicates lower levels of abusive beliefs. A 100 on the test is the highest score a participant can receive. Participants who completed the Strong Fathers pre-test scored at a grade level of B (80-89) or higher while one participant scored in the D (60-69) range. At post-test two participants scored in the range of a C (70-79) and four participants scored in the range of an A (90-100). Participant’s scores increased by 9 points or less from pre to post-test. For two participants their scores decreased by 4 points or less from pre to post-test.

*Contact with Children:*

Participants’ contact with their children was measured at two time points. At pre-test, data were collected on 9 fathers. Two fathers lived with their children, 3 lived with their children part of the time, and 4 did not live with their children. At post-test, data were collected on 6 fathers. Three fathers lived with their children (this was a change for 2 fathers) and 3 fathers lived with their children part time. Contact with children on the remaining measures largely reflected the living arrangements they had with their children.

*Parenting Log:*

Qualitative data analysis of the parenting logs has not yet been completed. Fathers were given the option to rate their parenting on a scale of 1-5 (5 being the best) during the prior week. All answers ranged from 1-5 with different degrees of variation among participants. Most participants parenting rating ranged one point higher or lower from week to week. For 2 participants there was much more variation in their parenting rating from week to week. Participants parenting ratings decreased at different time points throughout the group for each participant. By week 17 participants parenting ratings remained stable or increased through the end of the group.

Participants completed their parenting logs mostly writing about their relationships with their children. At times their relationship with the mother of their children, work, and money were also mentioned. Relationships with their children centered first on having time with their children. Once this was established, the focus was on handling parenting responsibilities with their children.

*Goal Setting: Self, Children, & Mothers:*

Participants’ goals were measured 4 times. Participants goals for themselves, for their relationship with their children, and their relationship with the mother of their children were assessed at three time points (sessions 2, 7, & 10). Goals for self centered around improving parenting (n = 5), employment (n = 4), being a better husband (n = 3), working on their anger (n = 3), housing (n = 2), obtaining custody of children (n = 1), going to school (n = 1), improving finances (n = 1), and religion (n = 1). Father’s goals for their relationship with their children focused around spending more/better time with them (n = 9), praising them (n = 4), love (n = 3), making them feel safe (n = 2), reducing violence/anger (n = 2), adjusting finances for benefit of children (n = 2), listening more (n
= 1), improving their self esteem (n = 1), and educating them about how to behave like their gender (n = 1). Father’s goals for their relationship with the mother of their children centered around improving communication (n = 6), love (n = 5), be supportive through finances (n = 2), increasing contact (n = 1), decreasing/no contact (n = 1), respecting her (n = 1), (re)gaining her trust (n = 1), having patience (n = 1), and reducing blaming (n = 1). Father’s goals for their relationship with the mother of their children were not always positive. For some participants goals reflected controlling beliefs about her (e.g. “forgiving her for…,” “letting her…,” “she will do…”). When these beliefs were expressed they were always among program partial completers. One program completer consistently listed only one goal with the mother and that was to “stay away;” this father did not have a current 50B in place that would require no contact. Additionally, this father reported in other measures that he wanted to get custody of his child. In other measures no contact between the father and mother was mentioned. This father did improve on several measures including the parenting log, child development tests, and the Strong Fathers program pre and post test.

Short and long term goals for the fathers were assessed at the end of the group (session 19). Short term goals centered around their relationship with their partner (n = 2), school (n = 1), and finances (n = 1). Long term goals centered around their relationship with their partner (n = 1), employment (n = 1), school (n = 1), and moving (n = 1).

Child Development:

Eleven participants completed the pre and/or post tests on child development. A higher score indicated an increased knowledge of child development. At pre-test, 4 participants scored in the range of a D (60-69), 2 in the range of C (70-79), 2 in the range of a B (80-89), and 2 in the range of an A (90-100). At the first post-test, 1 participant scored in the range of a D (60-69), 1 in the range of a C (70-79), 1 in the range of a B (80-89), and 6 answered 100% of the questions correctly. Four participants completed the second post-test. One participant scored in the range of a B (80-89), another scored in the range of an A (90-99), and the remaining 2 answered all of the questions correctly. The scores for every participant increased at each time point and did not decrease once they received a 100%.

Relationship Building Challenges:

Measures of relationship building challenges of fathers with their children were collected at two time points. At pre-test participants often reported many relationship building challenges or few challenges. All participants were able to indicate specific obstacles, often not included on the list, and 2 or 3 ways that they could respond. At post test similar results were found. Fathers did decrease or maintain their number of relationship building challenges from pre to post test.
Mother’s Evaluation Report

Data Sources:

Data for the mother’s evaluation report comes from interviews with mothers of children of the men that were enrolled in the Strong Father’s Program Group 1. The interviews collected qualitative data and quantitative data from the mothers. Quantitative data included four survey’s designed to measure (1) the parenting relationship between the mother and father of the child(ren) (using the Parenting Alliance Measure; Konold, Abidin, & Virginia, 2001), (2) the number of people the mother had for social support and her satisfaction with their support (using the six-item short form of the Social Support Questionnaire; Sarason, Sarason, Shearin, & Pierce, 1987), (3) the presence of fairness and safety in the relationship between the mother and father (using a 25-item survey prepared by Amy Ryder-Burge), and (4) the mother’s experiences with battering (using the Women’s Experience with Battering scale; Smith, Earp, & DeVellis, 1995). Qualitative data were collected from four open ended questions designed to capture the mother’s home life, her perceptions of the father’s relationship with their children and other family members, her relationship with the father of her children, and the support that she had in her life. The entire interview process was designed to take no more than one and half hours. Each mother was to take one pre-interview at the beginning of the Strong Fathers program and one post-interview at the end of the program.

Demographic Information:

Three women participated in and completed the pre interview. Three women participated in and completed the post interview. One mother completed both the pre and post interview. The mothers indicated they were not Hispanic or Latino (n = 5), African American (n = 2), or European American (n = 3). The ages of the mothers ranged from over 25 to under 35 (n = 4). The highest level of education completed was high school (n = 1) or completed between one or three years of college (n = 3). At the time of the pre interview the mothers were married (n = 1), married but separated (n = 1), or an ex-girlfriend (n = 1) to the father of their children. At the time of the post interview the mothers were friends (n = 2) or indicated “child’s father” (n = 1). From pre to post interview the relationship between the father and the mother decreased from a classification of ex-girlfriend to indicating there is no relationship between the two of them and he is only the child’s father. At the time of the pre interview the mothers indicated their employment status: unemployed (n = 2) and working part time (n = 1). At the time of the post interview the mothers indicated their employment status: unemployed (n = 1), working part time (n = 1), working full time (n = 1). From pre to post test one mother was initially unemployed and at post test was employed part time. The educational levels and employment status of the mothers were comparable to the men referred to the Strong Fathers program. At the time of pre interview data was collected on two mothers who were the mothers of children with the same father enrolled in the program. Interviews allowed for four fathers who were enrolled in the program. All pre interviews were collected on fathers who did not complete the program. One post interview was collected on a father who did not complete the program. Two post interviews (and no pre interview) were collected on fathers who completed the program.
Parenting Relationship:

The Parenting Alliance Measure (PAM) measures the perceived strength of alliance between parents of children ages 1 through 19. The PAM is a 20 item measure with possible scores ranging from 20 to 120. The scoring for this measure is on a six point Likert scale ranging from strongly agree to strongly disagree. Lower scores are associated with a stronger and more positive parenting alliance. Parenting alliance scores for each participant at pre and post test are in Figure 25.

Participants C1, C2, and J were parents with fathers who did not complete the group. Participants D and H were parents with fathers who did complete the group. The differing parenting alliance scores for father C likely reflect the different parenting relationship the two mothers had with the father. The high level of parenting alliance recorded at pre-test for C1 may be related to the relationship status between her and the father including that they were newly married and had a new baby together.

Figure 25:

Social Support:

For each mother, at pre and post test, the number of people who provide social support and their satisfaction with social support was measured using six items addressing different types of support. Satisfaction with social support was measured on a six point Likert scale ranging from very dissatisfied to very satisfied. Higher scores indicate more satisfaction with social support. Average scores for the number of people providing support and satisfaction with social support were computed at each time point for each mother (see figures 26 and 27).

Social support is perceived as a protective factor against physical, sexual and emotional abuse. In general, the mothers would benefit from having people to turn to for support. Accordingly, from pre to post test the number of people that provide social support should increase for the mothers. With mother C2, the desired trend in social support was achieved. The low level of the number of people who provide social support for mother D (social support = 0) at post-test could be a risk factor for future abuse. It was not uncommon for mothers to indicate themselves or God as being a source of support. If either were indicated they were not counted.
towards the number of people providing support. Regardless of the number of people providing social support, the mothers indicated higher levels of satisfaction with the support that they are receiving.

Figure 26:

![Average Number of People Providing Social Support at Pre and Post Test by Participant](image)

**Average Number of People Providing Social Support at Pre and Post Test by Participant**

Figure 27:

![Average Satisfaction with Support at Pre and Post Test by Participant](image)

**Average Satisfaction with Support at Pre and Post Test by Participant**

**Fair and Safe Relationship:**

For each mother, at pre and post test, measures of a fair and safe relationship between the mother and the father were assessed. Items for this measure were created by the Center for Family and Community Engagement. Possible scores in this measure range from 25 to 150. A lower score indicates a highly fair and safe relationship between the mother and father. Scores were adjusted for some participants when some items were not applicable to the participants. For
every item (between 1 and 3 items for each participant) that was listed as “not applicable” 3 points were added to the participant’s final score. Items that were not applicable to participants were items related to having a pet together, currently living together where household decisions including finances were made together, and items addressing violence. For mother H violence in the relationship (currently or in the past) was not a part of the relationship. This finding is concerning considering history of domestic violence is required for referral to the program.

The low score of mother C1 may be due to the same factors affecting the parenting alliance measure. The slight decrease in scores for mother C2 may be due to the increasing stability in the mother’s life. While the relationship between the mother and father had not improved, the changes in the mother’s life might be protective factors reducing the impact of his coercive control. Overall, it is difficult to evaluate changes in this measure for the mothers. With the exception of C1, post test scores are lower than those at pre test.

Figure 28:

![Graph](image-url)

Women’s Experience with Battering:

For each mother, at pre and post test, their experience with battering was measured using the Women’s Experience with Battering (WEB) scale. The WEB is designed to measure women’s current and ongoing experiences and the impacts of battering beyond measures of physical abuse. The WEB is a 10 item measure. Responses are measured on a six point Likert scale ranging from *strongly disagree* to *strongly agree*. WEB scale scores range from 10 to 60. The mean score for battered women is 49 ($SD = 11.7$) and for non-battered women the mean was 11 ($SD = 3.6$) (Smith, Earp, & DeVellis, 1995). Higher scores indicate higher levels of psychological vulnerability (see Figure 29).

The mother’s scores and the post-test may indicate that these women were no longer experiencing abuse from the fathers enrolled in the program. While their scores were not as low as women who have not experienced abuse, their scores may still reflect the lowest that their scores would go for women who were once abused by their partner.
Interview Data:

During the interview process several significant themes stood out including: court/DSS, children, housing and employment. During the pre-interviews mothers C1 and C2, while both the mothers of children with the same father, were in very different places. Both mothers were very much involved with social services and completing what was required from them to get social services out of their lives. Social services were involved with each of the mothers for different reasons. At the time that social services became involved with mother C2, the father of her child(ren) was not involved in his child(ren)’s lives. The mother was very angry that social services involved the father in his child(ren)’s life. While the child(ren) were with the father, social services opened a case on his family including mother C1; at this point the child(ren) of mother C2 were removed from the father’s primary care.

Mother C1 was very much invested in things going well for her and her family. This may reflect the stage of life that she was in (newly married with a new baby). At the time of the pre-interview, the mother’s living situation had changed substantially from the prior year. In the prior year (at the time that social services became involved in the family) the couple had independent housing, the mother was employed (the father unemployed), drug and alcohol use were common, and violence was present in the relationship. At the time of the interview both mother and father were unemployed. The mother did have plans to return to school within the next month. The mother, father, and their two children were all living together at a relative’s house. The living situation did not appear to be reciprocal in nature. The couple had unsupervised visitation rights with children that they both had from previous relationships. At the time of the interview the couple was sharing one car for transportation. The mother indicated that there was not more drug
or alcohol use and that there was no more violence between the couple. The mother also indicated that they had completed several of the programs that social services wanted them to complete. While there were significant changes in her life from the prior year the lack of employment of both parents, the lack of independent housing, and the uncertain custody issues of (some of) the children of the couple is concerning. This mother came across as being invested in her (immediate) future, including the future of her children and her husband. There were numerous positive plans for action for this family but little was currently being put into action. The status of this family may be reflected in the mother’s scores of parenting, social support, fairness and safety, and her experiences with battering. In all of these measures her scores portrayed a healthy and safe family, information obtained from the interview contradicted these scores.

At the time of the first interview mother C2 was very angry with the father of her child(ren). The couple had no relationship (including any communication) with each other and were together only in court regarding their child(ren). The mother was very much involved in social services and completing what was asked of her and was often in court (ranging from once a month to once every three months). The mother had extreme distrust of her social worker, especially related to the direct interest of her child(ren). In the past the mother was consistently employed (she reported that the father was not) and maintained independent housing. At the time of the interview she did not have independent housing, was getting rides for transportation, and was unemployed (she stated she would be starting a job soon). The mother did seem to be on track in completing the classes that were required of her by social services. At the time of the post interview things had changed in the life of mother C2. She still remained in the same housing situation, while not independent housing, this does indicate stability in her housing. The living arrangement does also seem to be beneficial to both the mother and the person she is living with. She had recently begun part-time employment. In between the pre and post interview she did attempt to begin employment in her career field but was unable to maintain the position due to her criminal history. Her current employment is less skilled work but she seems happy to be employed and to see where the position can take her in the future. The mother is still getting rides to and from the places that she goes to. The mother reported that she completed the programs that social services required of her and was taking some additional non-required classes as well. While the relationship between the father and the mother was still strained the mother seemed better able to distance herself from their past and his present actions and focus on what she wanted to do for the future. The mother did know prior to the interview that the father did not complete the group, that he had been driving illegally, and that he was not visiting with their child(ren) as social services was expecting from him. The mother reported at the post-interview that her social support had increased and was able to talk about specific people that she has been able to talk to.

Mother D was only interviewed for a post-interview. She was no longer in a relationship with the father of their child(ren) but they were in regular communication. Communication between the two of them is mostly about the child(ren) but at times was about their relationship. She noted that there was some jealousy on his part with her communication with other men. At the time of the interview mother D was unemployed, used rides for transportation, and was living with her mother. The mother did have some health problems. The child(ren) primarily resided with her while the father had unsupervised visitation, that he did use. In the past, there was conflict between the couple (including the fathers mother) where the mother was blamed for
certain things. One story in particular clearly still upset the mother. At the time of the interview, there seemed to be little if any conflict between the couple. They seemed to be in a pattern of healthy behavior and communication to each other privately and around the children. The mother did not indicate any social support but through conversation did mention a man that helped her out at times, including with transportation. The mother has parts of her life, including her children where she finds great satisfaction and pride, however these parts of her life were shown for a short period of time during the interview. The mother appears to have a low self-esteem. She stated that they were just friends and that this was the man that the father of her children was jealous about. Overall, the lack of employment and independent housing is a concern. Mother D did not indicate any specific plans to change her current situation. The information from the mother suggests that the relationship between the mother and the father and the father and his children has improved. While not the purpose of this evaluation, the mother, while not at high risk for abuse from the father, would still be at a high risk of abuse from a future partner.

Mother J was interviewed for a pre interview. Initially the mother was unsure of how her input for this interview would be useful. At the time of the interview the father had supervised visitation with his children but had not exercised his right to visit. The mother was temporarily living with family with the understanding from her family that she was to find another place to live with her children soon. Her goal was to find independent housing. It appears that the mother has received support from her family in the past, particularly at various crisis points. This support seems to be very temporary but may be changing for one family member. The mother indicated that her friends (whom she recently is more distanced from) indicated that when the mother and father were together as a couple they suspected abuse. She wondered why they never said anything. She felt that at this point they were not strong sources of support for her (wealthy, Christian, stay-at-home moms) that did not understand where she was now.

The father was not providing any financial support to the mother, which appeared to be directly related to the mother’s current instability in housing. It appeared that the father was a self-employed who, in the past, made a very good income. The mother believed that the father did still make a similar amount of money. At the time of the interview the mother worked part time. The father does contact the mother although a current restraining order prohibits this communication. It is interesting to note that the father does not pay regular child support payments but will respond to specific requests for money from the mother. It appears that the father is using his money to manipulate and increase his conversations and contact with the mother.

The mother and the father had been separated and involved with the legal system for almost one year. The couple was married for almost a decade. There are times when the couple did have animals together. The mother indicated that (both cat and dog) did not get along with the father. The father would blame the dog for overreacting to him and getting him into trouble. The mother reported a history of violence from the father throughout the relationship. The father was especially violent and controlling during times when the mother was pregnant. She reported that the father did not get along with his children (especially one in particular). She reported that the father did not seem to be concerned with the children, only with her. She reported stories from other people who came to the same conclusion. When the couple split up (just under a year prior) the mother filed a restraining order against the father. The father was still allowed visitation with the children. This visitation often took place at the mother’s home. This continued for approximately six months when an incident occurred causing DSS to be called on the father.
for his behavior with one of his children. Since then her children had not seen their father and the restraining order was reinstated.

A post interview with this mother was scheduled but never administered. The father did not complete the program. Based on this interview, it appears that the father has an extensive history of abuse towards the mother of his children, his children and his pets. While physical contact with the mother and children was not possible at the time of the interview the father appeared to remain manipulative and controlling of the mother. His access to the mother was mostly around control of the finances. The mother has limited support. It is unclear if her support systems grew weary of her long and violent history with the father of her children. It appears that some of her support systems may be increasing. Considering that this father did not complete the group and has continued his controlling contact with the mother, the mother has a lot to struggle with to keep herself and her children healthy and safe.

Mother H was interviewed at post interview only. The father of her child did complete the Strong Fathers program. The mother indicated that her housing was independent and stable. She was also a student and employed full time. The mother reported that the father visited with her child(ren) often and regularly. He also provided regular financial support for his child. She felt that he was a terrific father. She felt that his fathering remained wonderful throughout his participation in the program. She noted that the father indicated that he felt he was a better father as part of his participation in the program. The mother indicated that both parents had separate cases with DSS and their child together. The mother did not acknowledge any violence in their relationship ever or any violence on the part of the father that she knew of.

There were some inconsistencies in the information that the mother was reporting. The first, and most alarming, was her denial on any violence on the part of the father. It is a requirement for referral to the program that the father have a history of domestic violence. The mother was very vague about a timeline of her relationship with the father of her child including when certain milestones were reached. The mother also reported that when there was conflict she was rightly the cause of the conflict. She easily reprimanded herself for her past decisions, insisting that the father of her child would forgive her and welcome her back with no conflict. The mother's information about her schooling and employment seemed to conflict. Her source of employment and history of an DSS case seemed to conflict as well. The mother indicated that she had many sources of support, yet during the open ended questions none of these individuals were mentioned when discussing times of crisis in her life. Finally, during the interview the mother often used formal and polite responses to the interviewer’s questions. It was suspected that these responses were used to maintain a barrier, masking emotions she may have been feeling and points where there was more information that she did not want to provide.
Data Collected:
The County Department of Social Services provided redacted forms from their files. These were six forms completed nine months prior to the start of the Strong Fathers program and for an additional nine months after the beginning of the Strong Fathers program. The six forms were: Child and Family Team Meeting Referral/Summary Form, Safety Assessment, Family Services Agreement Review, Family Assessment of Strengths and Needs, Family Risk Assessment of Abuse/Neglect, and the Family Risk Reassessment of Abuse/Neglect. At the time of this report, data were collected on the children of four men referred to the Strong Fathers program (Father A attended eight sessions, father B thirteen sessions, father C nine sessions, father F zero sessions).

Child and Family Team Meeting Referral/Summary Form:
One father (father A) participated in a Child and Family Team meeting. This meeting took place prior to the father’s referral to beginning the Strong Father’s program. The only family members in attendance at the meeting were the child’s mother and father. Prior to the meeting the risk level for the family was high. The meeting determined that the family was in need of services addressing domestic violence and drug use. In addition, the family had employment and housing needs.

Safety Assessment:
Safety assessments were completed involving the children of all four fathers. For father “A” (who had one child) a safety assessment for the child was completed while the father was enrolled in the Strong Fathers program. This report determined that the caregiver and child were safe for every factor listed on the form.

For father “B” (who had three children) two safety assessments for the children were completed. The first safety assessment was completed 11 months prior to the beginning of the Strong Father’s program. In regards to the child and caregiver relationship, the child was assessed as a lack of safety on four out of 12 safety factors. At the time the worker determined that the child was conditionally safe. The second safety assessment was completed five months prior to the beginning of the Strong Fathers program. On the child and caregiver relationship, a lack of safety was identified on one out of 12 safety factors. At the time the safety decision was that the child was safe.

For father “C” (who had two children) two safety assessments for the children were completed. The first safety assessment was completed within 1-2 weeks of the beginning of the Strong Father’s program. On the child and caregiver relationship, a lack of safety was identified on 2 out of 9 factors. At the time the safety decision was that the child was unsafe. The second safety assessment was completed within weeks of the end of the Strong Father’s program. On the child and caregiver relationship, a lack of safety was identified on 2 out of 9 factors. At the time the safety decision was that the child was unsafe.

For father “F” (who had two children) one safety assessment for the children were completed three months prior to the beginning of the Strong Father’s program. On the child and caregiver relationship, a lack of safety was identified on 3 out of 12 factors. At the time the safety decision was that the child was conditionally safe.
Family Services Agreement Review:
The Family Services Agreement Review was completed as related to the children and families of two fathers. For father “B” this form was completed 8 months prior to father beginning the Strong Father’s program. Family strengths identified included housing, working with child welfare, and using community resources. Parents were determined to be in need of services dealing with parenting. This report noted that the family had exhausted their family resources for support.

For father “A” this form was completed 9 months prior to the father beginning the Strong Father’s program. Family strengths identified included housing and working with child welfare. Parents were referred to services addressing anger management, substance abuse, mental health, and domestic violence (this referral was to the Strong Father’s program).

Family Assessment of Strengths and Needs:
The Family Assessment of Strengths and Needs was collected for the children and families of the four fathers, ranging from one to four different times for each father. Scores on this assessment can range from a negative 17 (indicating multiple strengths in the family) to a 43 (indicating multiple needs in the family). For father “A” the first assessment took place three months prior to the beginning of the Strong Fathers program. The form indicated that this was the third assessment for the family. For this assessment the score for the family was a 2. One family strength listed was housing. One family need listed was employment/income management. The second assessment took place two months prior to the beginning of the Strong Father’s program. This form indicated that it was the second assessment for the family. For this assessment the score for the family was a 2 and the same strengths and needs were listed for the family. The third assessment took place within 2 weeks after the beginning of the Strong Fathers program. This form indicated that it was the fourth assessment for the family. For this assessment the score for the family was a 1. No strengths and needs were listed for this family during this assessment. The fourth assessment for this father took place 2 months after the beginning of the Strong Father’s program. This form indicated that it was the fifth assessment for the family. For this assessment the score for the family was a -1. The strength of housing was listed for the family and the need of employment/income management/needs stable employment was listed.

For father “B” the first assessment took place 8 months prior to the beginning of the Strong Father’s program. For this assessment the score for the family was a 2. The strengths of the family were listed as housing and social support systems. One need listed for the family was employment for the father. The children and family well-being needs were all being met at the time of the assessment. The second assessment was completed 5 months prior to the beginning of the Strong Father’s program. For this assessment the score for the family was a 2. The strengths of the family were listed as housing and social support systems. One need listed for the family was employment for the father. The children and family well-being needs were all being met at the time of the assessment.

For father “C” the first assessment took place within a week of the beginning of the Strong Father’s program. The form indicated that this was the fourth assessment for the family. For this assessment the score for the family was a 12. The strengths of the family were listed as meeting the basic needs of the children, the child’s characteristics, and physical health. The
needs of the family were the caregiver’s history of neglect, parenting skills and employment. The children and family well-being needs were all being met at the time of the assessment. The second assessment was completed around the end of the Strong Father’s program. The form indicated that this was the fifth assessment for the family. For this assessment the score for the family was a 7. The strengths of the family were listed as meeting the basic needs of the children, the child’s characteristics, and physical health. The needs of the family were the caregiver’s history of neglect, parenting skills and employment. The children and family well-being needs were all being met at the time of the assessment.

For father “F” the first assessment took place two months prior to the beginning of the Strong Father’s program. The form indicated that this was the first assessment for the family. For this assessment the score for the family was a 19. The strengths of the family were listed as the child’s characteristics. The needs of the family were parenting skills, substance use, and the family relationship. The children and family well-being needs were all being met at the time of the assessment. Suspected mental health needs for the mother were noted.

Family Risk Assessment of Abuse/Neglect & Family Risk Reassessment of Abuse/Neglect:

Some data on each of the four fathers and their families were collected on their family risk assessment. Families were given a neglect risk score ranging from 0 to 20. Families were given an abuse risk score ranging from 0 to 16. Families were then given a categorical risk level of either low, moderate, high, or intensive. These scores reflect the scores given using the Family Risk Assessment of Abuse/Neglect. The Family Risk Reassessment of Abuse/Neglect does not give separate risk scores for abuse and neglect, instead one score is generated.

For father “A” the risk level for his family was measured at four time points. The first risk assessment took place 6 months prior to the beginning of the Strong Father’s program and was reassessment number 1. The total risk level score was a 4. While a categorical risk level was not given this roughly correlates with a moderate risk level. The second risk assessment took place two and a half months prior to the beginning of the Strong Father’s program and was reassessment number 2. The total risk level score was a 4. While a categorical risk level was not given this roughly correlates with a moderate risk level. The third risk assessment took place within two weeks of the beginning of the Strong Father’s program and was reassessment number 3. The total risk level score was a 4. While a categorical risk level was not given this roughly correlates with a moderate risk level. The fourth risk assessment took place 2 months into the Strong Father’s program and was reassessment number 4. The total risk level score was a 3. While a categorical risk level was not given this roughly correlates with a low risk level.

For father “B” the risk level for the family was measured at two time points. The first risk assessment took place 7 months prior to the beginning of the Strong Father’s program and was reassessment number 1. The total risk level score was a 4. While a categorical risk level was not given this roughly correlates with a moderate risk level. The second risk assessment took place 5 months prior to the beginning of the Strong Father’s program and was reassessment number 2. The total risk level score was a 2. While a categorical risk level was not given this roughly correlates with a low risk level.

For father “C” the risk level for the family was measured at two time points. The scale for this information was slightly different than for the other participants. The first risk assessment took place within a week of the beginning of the Strong Father’s program. The total risk level
score was a 2, a categorical risk level of moderate. The second risk assessment took place within weeks of the end of the Strong Father’s program. The total risk level score was a 2, a categorical risk level of moderate.

For father “F” the risk level for the family was measured at one time point. This risk assessment took place 2 months prior to the beginning of the Strong Father’s program. The total neglect score was a 15 and the total abuse score was a 9. The risk level for the family was listed as intensive.

Summary:
Only one participant’s family completed a Child and Family Team meeting during the reporting period. There may be a relationship between completion rates in the program and the risk level of the families. Families with a moderate risk level may be more likely to attend and complete the program. More data are needed to determine if the family risk level decreases in relationship to the father’s attendance in the program or if it is related to prior progress with child welfare.
Data Sources:
Data were collected from three participants who were selected as a comparison to the participants in the Strong Fathers group. Data were collected to determine if the participants in the Strong Fathers program were different at the time of enrollment than the participants who were court mandated to attend the Time Out group. The Time Out program is a Batterer Intervention Program run by Family Services, Inc. The participants that were eligible because they were enrolled in a group that was not facilitated by the same facilitators of the Strong Fathers program and they had children under the age of 18. At the time of this report, data collected from the comparison participants include the assessment information and the Time Out pre-test, which mirrors the Strong Fathers pre-test.

Assessment Form:
Information from this form was collected to compare to assessment information from participants in Strong Fathers.

Relationship/contact with the person they are accused of abusing: not involved (n=1)/no contact (n=1), dating (n=1)/living with (n=1)
Separation was due to violence: no (n=1)
Number of children: 1 (n=2), 4 (n=1)
Educational history: 12th grade (n=2), completed 1st year in college (n=1)
Employed: Yes (n=1), No (n=2)
Victim of assault has a 50B against participant: Yes (n=1), No (n=2)
History of charge/conviction of domestic violence: Yes (n=2), No (n=1)
History of mistreatment as a child: Yes (n=1), No (n=2)
History of physical/emotional violence between parents/guardians: Yes (n=1), No (n=2)
How discipline children: Talk and explain the rule (n=2), time out (n=1), restrict friends (n=1), take away toys/TV/games (n=2), spank (n=1)
Current CPS/DSS involvement with family: no (n=2)
History with DSS/CPS: No (n=2)
History of substance or alcohol use: Yes (n=2), No (n=1)
Last reported use of alcohol or drugs: 1-3 months (n=1), 4-6 months (n=1)

Time Out Pre-test:
A higher score indicates non-abusive beliefs, the highest score being 100.
Score 40-49 (n=1), 70-79 (n=1), 80-89 (n=1)

Summary:
The Time Out participants were comparable to the participants in the Strong Fathers program. The small numbers of participants in both the experimental and comparison groups needs to be taken into account. Overall, both groups of participants have similar relationships with the victim/survivor, number of children, educational history, employment history, history of 50B, history of mistreatment as a child, history of violence between parents/guardians, discipline of children, and substance/alcohol use. The pre-test scores of the Time Out participants are
comparable to the Strong Fathers group. One participant did score noticeably lower than any participants in the Strong Fathers group but it may still be in the range of normal distribution of scores for both groups.
North Carolina Division of Social Services Data

Demographics:

Data was requested for 28 children of 16 fathers enrolled in the Strong Fathers program. Demographic information was collected on 18 children. These were the children of 11 fathers enrolled in the Strong Fathers program. Demographic information on the children is in Table 1.

Table 1

*Number and Percentage of Children by: Gender, Race/Ethnicity & Age (n = 18)*

<table>
<thead>
<tr>
<th>Gender</th>
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<th>%</th>
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<td>38.9</td>
</tr>
<tr>
<td>Male</td>
<td>11</td>
<td>61.1</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>White/Non Hispanic or Latino</td>
<td>7</td>
<td>38.9</td>
</tr>
<tr>
<td>White/Hispanic or Latino</td>
<td>3</td>
<td>16.7</td>
</tr>
<tr>
<td>Black/Non Hispanic or Latino</td>
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<td>44.4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Age</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Newborn - 4 years old</td>
<td>14</td>
<td>77.8</td>
</tr>
<tr>
<td>5 – 9 years old</td>
<td>3</td>
<td>16.7</td>
</tr>
<tr>
<td>10-14 years old</td>
<td>1</td>
<td>5.6</td>
</tr>
</tbody>
</table>
Risk Assessments:

Risk level of children was assessed by the Social Worker for the family/child at time points that were relevant to the case. For instance, some children had multiple assessments as they moved from a Child Protective Services (CPS) Assessment, to a CPS In-Home Assessment, and to a Foster Care Assessment. The risk level of the children of the fathers enrolled in the Strong Fathers program was organized around three time points that are relevant to the father’s enrollment in the program. Risk level for children was categorized prior to the father beginning the group, during the father’s enrollment in the group, and after the group had completed. Up to three assessments of the child’s risk level were taken for a given time period (e.g. prior to the father beginning the Strong Fathers program).

Risk level for a given child could range from low (1), moderate (2), high (3), and intensive (4). Pre Assessment 1 includes the risk levels of 14 children. At this assessment period, 7 children had a moderate risk level, 4 high, and 3 intensive. Of these 14 children, 7 were assessed for a second time during this pre period. Four children had a moderate risk level, 1 high, and 2 intensive. Of these 7 children, 2 were assessed for a third time during this pre period. Both children had a moderate risk level. For the children whose risk levels were assessed multiple times during this reporting period their risk levels did not increase or decrease during any assessment. Risk level for each child is reported in figure 30. Risk level for the child or children of each father is reported in figure 31.

During the Strong Fathers program the risk levels of the children of the father’s were assessed. During Assessment 1 includes the risk levels of 8 children. At this assessment period, 1 child had a low risk level and 7 moderate. Of these 8 children, 2 were assessed for a second time during this period. Both children were at moderate risk level. For the children whose risk levels were assessed multiple times during this reporting period their risk levels did not increase or decrease during any assessment.

The risk levels of 7 children were collected prior to the father joining the program and during the program. For these 7 children, their risk level neither increased nor decreased while the father was enrolled in the program. Data on the risk levels of children after the group was completed was not available for this reporting period. It is expected that this data will be available for some fathers whose post/after group data will be collected once their post reporting period is complete.

Additional data was collected on two children of fathers enrolled in the Strong Fathers program where the listed perpetrator was the mother. For these children, the risk level of the child was assessed in relation to their involvement with the mother alone. Data on the risk level of the children was organized in the same three time periods reflecting the father’s involvement in the Strong Fathers program (Figure 32). Prior to the father beginning the Strong Fathers program the risk level for both children was high. Data on the risk level of one child was available after the group completed. For this child, the risk level decreased to moderate. Decreases in the risk level of the children in their relationship with their mother may, in part, be related to the Strong Fathers program. The program is designed to improve the parenting relationship between the father and child as well as the father and mother. A decrease in the risk
level may indicate an improved parenting relationship between the father and mother, where the mother is better able to parent her child(ren) in a safe and healthy way.

Differences in the risk level of children over time (pre, during and post) was also examined for fathers who completed the program (attended greater than or equal to 65% of the sessions), partially completed the program (attended between 1 and 64% of the sessions, and non-completers (attended 0 sessions). For fathers who completed the program, prior to the start of the program the risk levels of children ranged between moderate (n = 2), high (n = 1) and intensive (n = 1). Over time these risk levels did not change (Figure 33). For fathers who partially completed the program, prior to the start of the program the risk levels of children ranged between moderate (n = 4) and high (n = 3). Over time these risk levels did not change (Figure 34). For fathers who did not complete the program, prior to the start of the program the risk levels of children ranged between moderate (n = 1) and intensive (n = 4). For one father the only data on the risk level of their child was during the group. This child’s risk level was low. Data on changes in risk level over time for these children was not available (Figure 35).

Data on the risk level of the children prior to the fathers beginning the program may give some insights into the likelihood of fathers completing the program. The range in risk level (from moderate to intensive) for program completers may indicate that fathers with children at a range of risk levels will complete this program. The high number of intensive (n = 4) risk levels for children of non-completers may indicate that these fathers are less open to participating in a fathering program. Borrowing from Prochaska’s Stages of Change Model, fathers with a high risk level may be more likely to be in the Pre-Contemplation Stage, resisting any change, thus affecting their participation in the program.

Further analysis was conducted to compare possible differences in risk level by child’s age or race/ethnicity. The majority of the children in the sample were newborns to 4 years old (n = 14). Comparisons between risk level and age of the child are difficult to make for Time 1 (see Table 2) and Time 2 (see Table 3) due to the small sample size of children older than 4 years old.

The distribution of children by race ethnicity is roughly even for White (n = 7) and Black (n = 8) Non Hispanic or Latino children, while the number of White Hispanic or Latino children was 3. Comparisons between risk level and race/ethnicity of child can be found for Time 1 (see Table 4) and Time 2 (see Table 5). During Time 1 the distribution of White Hispanic or Latino and Non-Hispanic or Latino children was relatively even ranging from moderate to intensive. During Time 1 the majority of Black (Non Hispanic or Latino) children were rated at a risk level of moderate. During Time 2 Black (Non Hispanic or Latino) children had similar risk levels with the range of risk changing from ‘moderate to high’ to ‘low to moderate.’
Figure 30:

Risk Level of Child Prior to Group and During Group

Figure 31:

Risk Level of Child/Children by Father Prior to Group and During Group
Figure 32:

**Risk Level of Child with Mother Over Time**

![Bar chart showing risk levels over time for children with mothers.]  
- Pre: Assessment 1
- Pre: Assessment 2
- Post: Assessment 1

Legend:
- CC5
- BC1

Figure 33:

**Risk Level of Children of Program Completers Over Time**

![Bar chart showing risk levels over time for children of program completers.]  
- Pre: Assessment 1
- Pre: Assessment 2
- Pre: Assessment 3
- During: Assessment 1

Legend:
- EC1
- DC2
- DC1
- BC1
Figure 34:  
Risk Level of Children of Partial Program Completers Over Time

Figure 35:  
Risk Level of Children of Non-Completers
Table 2

*Frequency of Risk Level at Time 1 by Age of Children (N = 14)*

<table>
<thead>
<tr>
<th></th>
<th>Newborn – 4 yrs. old</th>
<th>5 – 9 yrs. old</th>
<th>10-14 yrs. old</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Moderate</td>
<td>5</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>High</td>
<td>3</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>Intensive</td>
<td>3</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table 3

*Frequency of Risk Level at Time 2 by Age of Children (N = 8)*

<table>
<thead>
<tr>
<th></th>
<th>Newborn – 4 yrs. old</th>
<th>5 – 9 yrs. old</th>
<th>10-14 yrs. old</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Moderate</td>
<td>4</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>High</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Intensive</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Table 4

*Frequency of Risk Level at Time 1 by Race/ethnicity of Children (N = 14)*

<table>
<thead>
<tr>
<th></th>
<th>White (Non Hispanic or Latino)</th>
<th>White (Hispanic or Latino)</th>
<th>Black (Non Hispanic or Latino)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Moderate</td>
<td>1</td>
<td></td>
<td>6</td>
</tr>
<tr>
<td>High</td>
<td>2</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Intensive</td>
<td>1</td>
<td>2</td>
<td></td>
</tr>
</tbody>
</table>

Table 5

*Frequency of Risk Level at Time 2 by Race/ethnicity of Children (N = 8)*

<table>
<thead>
<tr>
<th></th>
<th>White (Non Hispanic or Latino)</th>
<th>White (Hispanic or Latino)</th>
<th>Black (Non Hispanic or Latino)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td></td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>Moderate</td>
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<td>5</td>
</tr>
<tr>
<td>High</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Intensive</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Contributory Factor and Maltreatment Type Reported:

Maltreatment type was reported for each contributory factor indicated for each child. Contributory factor and maltreatment type reported was grouped into three possible time points. Time 1 includes assessments made prior to the beginning of the Strong Fathers group. Contributory factors during time 1 were reported for 14 children (see Figures 36 & 37). Time 2 includes assessments made during the administration of the group. Contributory factors during time 2 were reported for 8 children (see Figure 38). Time 3 includes assessments made after the completion of the group. No assessments were reported during time 3.

Contributory factors could be related to the caretaker (with 10 factors related to the caretaker), child (with 10 factors related to the child, or the household (with 5 factors related to the household). For the children in this sample, at time 1, 2 contributory factors were listed as related to the child, 4 contributory factors were listed as related to the caretaker and 4 were listed as related to the household. For 9 children none of the contributory factors applied in regards to the child, caretaker or household. It is unclear what factors are being accounted for that are not included in the list of options. For 7 of these children no other contributory factors were listed.

For time 2, 1 contributory factor was listed as related to the child, 1 contributory factor was listed as related to the caretaker and 4 were listed as related to the household. For 7 children none of the contributory factors applied in regards to the child, caretaker or household. For 5 of these children no other contributory factors were listed. For 5 children, changes in contributory factor reported from time 1 to time 2 could be assessed. For these children contributory factors listed remained the same from time 1 to time 2. It is interesting that for only 4 children (including time 1 and 2) domestic violence was listed as a contributory factor. Additionally these were the children of only 2 of the possible 11 fathers enrolled in the group where state level data was collected.

Figure 36:
Figure 37:

Contributory Factor Reported Time 1:
Part 2 (n = 14)

Figure 38:

Contributory Factor Reported Time 2
(n = 8)
For each contributory factor indicated a maltreatment type was reported. Figures were generated for each contributory factor and are reported here if there were at least 5 children that a given contributory factor was indicated. For time 1 see Figures 39-44 for time 2 see Figures 45-47. Maltreatment type reported could include 4 types of abuse, 10 types of neglect or a combination of abuse and neglect. During time 1 and time 2 maltreatment type reported for each contributory factor often includes domestic violence, substance abuse, injurious environment and improper discipline with or without physical injuries. From time 1 to time 2 the frequency of maltreatment type reported for the contributory factor of “child – none of the contributory factors apply” decreased for 3 children (out of a possible 5). “Neglect – injurious environment” was removed for 2 children (both were the children of one father). For these children, the father was a completer of the program. “Neglect – improper discipline with no physical injuries” was removed for one child. For this child, the father was a partial completer of the program.

These preliminary findings indicate that children of men enrolled in the Strong Fathers program do not have an increased likelihood of maltreatment being reported. Additionally, while the fathers are enrolled in the program children may be better off as indicated by a reduction in maltreatment types reported in assessments completed during the fathers’ participation in the program. Data on the children after the fathers have completed the program would be useful to determine if these trends continue over time.

Figure 39:

**Frequency of Maltreatment Type Reported by Contributory Factor: Caretaker - None of the Contributory Factors Apply, Time 1 (n = 9)**
Figure 40:

Frequency of Maltreatment Type Reported by Contributory Factor:
Household - Domestic Violence, Time 1
(n = 5)

Number of Children
0 1 2 3 4 5 6

Neglect - Injurious environment
Neglect - Injurious environment - Domestic violence
Neglect - Injurious environment - Substance abuse

Figure 41:

Frequency of Maltreatment Type Reported by Contributory Factor:
Household - Financial Problem, Time 1
(n = 6)

Number of Children
0 1 2 3 4 5 6

Neglect - Injurious environment
Neglect - Injurious environment - Substance abuse
Neglect - Improper care
Figure 42:

**Frequency of Maltreatment Type Reported by Contributory Factor: Household - Inadequate Housing, Time 1 (n = 5)**

![Bar chart showing frequency of maltreatment types]

Figure 43:

**Frequency of Maltreatment Type Reported by Contributory Factor: Household - None of the Contributory Factors Apply, Time 1 (n = 9)**

![Bar chart showing frequency of maltreatment types]
Figure 44:

Frequency of Maltreatment Type Reported by Contributory Factor: Child - None of the Contributory Factors Apply, Time 1 (n = 9)

Number of Children

0 1 2 3 4 5 6 7

Neglect - Improper discipline with no physical injuries
Neglect - Injurious environment
Neglect - Injurious environment - Domestic violence
Neglect - Injurious environment - Substance abuse
Neglect - Improper supervision

Figure 45:

Frequency of Maltreatment Type Reported by Contributory Factor: Caretaker - None of the Contributory Factors Apply, Time 2 (n = 7)

Number of Children

0 1 2 3 4 5 6 7

Neglect - Injurious environment - Domestic violence
Neglect - Improper discipline with no physical injuries
Neglect - Injurious environment
Figure 46:

Frequency of Maltreatment Type Reported by Contributory Factor: Household - None of the Contributory Factors Apply, Time 2 (n = 7)

Figure 47:

Frequency of Maltreatment Type Reported by Contributory Factor: Child - None of the Contributory Factors Apply, Time 2 (n = 7)
**Date Terminated:**

The last assessment completed for each child was recorded as taking place prior to the start of the program, during the program, or after completion of the program. For 4 children, the last assessment recorded took place prior to the start of the program. For these children 2 assessments were CPS Assessments and 2 were In-Home Services Assessments. For 10 children, the last assessment recorded took place during the administration of the program. For these children, 8 assessments were CPS Assessments and 2 were In-Home Services Assessments. For 1 child, the last assessment recorded took place after the completion of the program. For this child the assessment was for foster care. For three other children the last assessment took place while the child was in foster care and did not indicate a date that the assessment was terminated.

**Type Found:**

Data in this field records the finding of the assessment. A total of 7 findings could be reported. For this sample five different findings were reported, these include: services provided, child protective services are no longer needed; services needed; abuse and neglect substantiated; neglect substantiated; and services recommended. Findings were grouped into one of three time periods: Time 1, Time 2 and Time 3. Time 1 includes assessments made prior to the beginning of the Strong Fathers group. Time 2 includes assessments made during the administration of the group. Time 3 includes assessments made after the completion of the group. No assessments were reported during time 3.

During Time 1, 14 out of a possible 18 children had a finding reported (see Table 6). Seven of these children had multiple assessments during this time period. The findings reported during additional assessments did not change for these children.

During Time 2, 8 out of a possible 18 children had a finding reported (see Table 7). Two of these children had multiple assessments during this time period. The findings reported during additional assessments did not change for these children.

For 5 children findings were reported for both time points. The findings reported did not change over time.

Assessment findings were also reported for 2 children where the mother was listed as the perpetrator. Due to the small sample size (less than 5) of these assessment findings these results are not included in this report.

Further analysis was conducted to compare possible differences in assessment findings by child’s age or race/ethnicity. The majority of the children in the sample were newborns to 4 years old (n = 14). Comparisons between different findings by age of the child are difficult to make for Time 1 (see Table 8) and Time 2 (see Table 9) due to the small sample size of children older than 4 years old. Most children were reported as services needed.

The distribution of children by race ethnicity is roughly even for White (n = 7) and Black (n = 8) Non Hispanic or Latino children, while the number of White Hispanic or Latino children was 3. Comparisons between findings reported and race/ethnicity of child can be found for time 1 (see Table 10) and time 2 (see Table 11).
Table 6

*Frequency of Assessment Finding at Time 1 (N = 14)*

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
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</thead>
<tbody>
<tr>
<td>Services provided, Child Protective Services no longer needed</td>
<td>1</td>
</tr>
<tr>
<td>Services needed</td>
<td>10</td>
</tr>
<tr>
<td>Neglect substantiated</td>
<td>1</td>
</tr>
<tr>
<td>Services recommended</td>
<td>2</td>
</tr>
</tbody>
</table>

Table 7

*Frequency of Assessment Finding at Time 2 (N = 8)*

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Services needed</td>
<td>5</td>
</tr>
<tr>
<td>Services recommended</td>
<td>3</td>
</tr>
</tbody>
</table>

Table 8

*Frequency of Assessment Finding at Time 1 by Age of Children (N = 14)*

<table>
<thead>
<tr>
<th></th>
<th>Newborn – 4 yrs. old</th>
<th>5 – 9 yrs. old</th>
<th>10-14 yrs. old</th>
</tr>
</thead>
<tbody>
<tr>
<td>Services provided, Child Protective Services no longer needed</td>
<td>1</td>
<td>9</td>
<td>1</td>
</tr>
<tr>
<td>Services needed</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Neglect substantiated</td>
<td></td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Services recommended</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
</tbody>
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Table 9

*Frequency of Assessment Finding at Time 2 by Age of Children (N = 8)*

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Services needed</th>
<th>Services recommended</th>
</tr>
</thead>
<tbody>
<tr>
<td>Newborn – 4 yrs. old</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>5 – 9 yrs. old</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>10-14 yrs. old</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table 10

*Frequency of Assessment Finding at Time 1 by Race/ethnicity of Children (N = 14)*

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Services provided, Child Protective Services no longer needed</th>
<th>Services needed</th>
<th>Neglect substantiated</th>
<th>Services recommended</th>
</tr>
</thead>
<tbody>
<tr>
<td>White (Non Hispanic or Latino)</td>
<td>1</td>
<td>3</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>White (Hispanic or Latino)</td>
<td></td>
<td>2</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>Black (Non Hispanic or Latino)</td>
<td></td>
<td></td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>
Table 11

*Frequency of Assessment Finding at Time 2 by Race/ethnicity of Children (N = 8)*

<table>
<thead>
<tr>
<th></th>
<th>White (Non Hispanic or Latino)</th>
<th>White (Hispanic or Latino)</th>
<th>Black (Non Hispanic or Latino)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Services needed</td>
<td>2</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Services recommended</td>
<td></td>
<td></td>
<td>3</td>
</tr>
</tbody>
</table>

**Finding Reason:**

Finding reason was reported if a finding of unsubstantiated, services recommended, or services not recommended was reported. There are a total of 6 finding reasons that could be given. Services were recommended for a total of three children during time 1 or time 2. The finding reason given for these children was “no lack of safety/no protection issue.” This reason indicates that at the time of the case decision there were no immediate or future safety protection issues. Changes in finding reason over time was not able to evaluated due to the characteristics of the sample.

A finding reason was also reported for 1 child where the mother was listed as the perpetrator. Due to the small sample size (less than 5) these results are not included in this report.

**Maltreatment Type Found:**

Maltreatment type found is reported if the case is substantiated. Findings could include 4 types of abuse and 10 types of neglect. In this analysis cases were substantiated for one child where the mother was listed as the perpetrator. Due to the small sample size (less than 5) these results are not included in this report.
Appendix

Assessment information:
Group 1: 7 participants enrolled in the Strong Fathers program
Group 2: 9 participants enrolled in the Strong Fathers program

Group 1: Age: 26-30 (n = 2), 31-35 (n = 2), 36-40 (n = 1)
Group 2: Age: 20-25 (n = 3), 26-30 (n = 1), 31-35 (n = 3), unknown age (n = 2)

Group 1: Ethnicity: European American (n = 2), African American (n = 3), Hispanic (n = 1), unknown race/ethnicity (n = 1)
Group 2: Ethnicity: European American (n = 3), African American (n = 4), Hispanic (n = 1), unknown race/ethnicity (n = 1)

Figure 1:

* Completers of the program are defined as participants who attended 65% or more of the sessions in the program. Partial completers are participants who attended between 1 session and 64% of the sessions. Non-completers are participants who were referred to the program and did not attend any sessions.

Group 1: Number of children: 1 (n = 2), 2 (n = 3), 3 (n = 1), 4 (n = 1)
Group 2: Number of children: 1 (n = 4), 2 (n = 2), 3 (n = 2), 4 (n = 1)

Group 2: Gender of Children: Female (n = 3), Male (n = 5)

Group 2: Ethnicity/Race of Children: African American (n = 5), European American, (n = 3)
Group 2: Age of Children: 0-4 yrs (n = 5), 5-9 yrs (n = 3)

Group 1: Current relationship with child’s mother: dating (n = 1), married (n = 1), separated (n = 2), not involved (n = 2), living together (n = 1)
Group 2: Current relationship with child’s mother: dating (n = 1), married (n = 2), separated (n = 4), not involved (n = 1), living together (n = 1)

Group 1: Current relationship with second child’s mother (n = 1): living together
Group 2: Current relationship with second child’s mother (n = 1): living with daily

Group 1: Amount of contact with child’s mother: living with daily (n = 3), few times a week (n = 2), no contact (n = 2)
Group 2: Amount of contact with child’s mother: living with daily (n = 3), few times a week (n = 2), monthly (n = 1), no contact (n = 2)

Group 1: Amount of contact with second child’s mother (n = 1): living with daily
Group 2: Amount of contact with second child’s mother has changed recently (n = 1): yes

Group 1: Relationship with mother has changed recently: Yes (n = 4), No (n = 2)
Group 2: Relationship with mother has changed recently: Yes (n = 4), No (n = 3)

Group 1: Relationship with second child’s mother has changed recently (n = 1): yes
Group 2: Separated from children’s mother due to violence: Yes (n = 2), No (n = 3)

Group 1: In a new relationship: No (n = 5)
Group 2: In a new relationship: No (n = 7)

Group 1: Current relationship status with mother was reported as fine, improving and approaching significant milestones (n = 3)
Group 2: Current relationship status with mother was reported as happy, temporarily separated, or n/a (n = 5)

Group 1: Current relationship with children: reported as good and improving (n = 6)
Group 2: Current relationship with children was reported as good (n = 6), stressed due to lack of contact (n = 1)

Group 1: Children’s responses to violence: varying responses ranging from “none,” “child was infant,” “crying,” “it impacted them to witness” and “not affected.”
Group 2: Children’s responses to violence: varying responses ranging from none (n = 1), not applicable (n = 3), it impacted them to witness (n = 3).

Group 1: What happened when children got involved during an argument with partner: did not get involved (n = 1), n/a (n = 3), child cried (n = 1), child screamed and cried (n = 1)
Group 2: What happened when children got involved during an argument with partner: did not get involved (n = 1), n/a (n = 2), child cried (n = 1), child tried to verbally intervene (n = 2)

Group 1: How discipline children: Talk and explain the rule (n = 4), time out (n = 2), restrict to room (n = 1), take away toys/TV/games (n = 1), Other (I don’t) (n = 1), infants no discipline (n = 1)

Group 2: How discipline children: Talk and explain the rule (n = 7), put in corner (n = 2), time out (n = 7), restrict to room (n = 2), restrict friends (n = 2), take away toys/TV/games (n = 4), scold (n = 1), yell (n = 3), spank (n = 4)

Group 1: Why CPS/DSS is involved with family: child taken from mother (n = 1), mother drug use (n = 1), father charged with child abuse and assault (n = 1), domestic violence (n = 4).

Group 2: Why CPS/DSS is involved with family: father to child abuse (n = 2), domestic violence (n = 2), partner (reason unclear) (n = 2).

Group 1: History with DSS/CPS: No (n = 5), Yes (n = 1)

Group 2: History with DSS/CPS: No (n = 5), Yes (n = 2)

Group 1: Educational history: 10th grade (n = 2), 11th grade (n = 1), 12th grade (n = 2), GED (n = 2)

Group 2: Educational history: 12th grade (n = 3), GED (n = 1), completed some of college (n = 2), completed 4 years of college (n = 1), completed more than 4 years of college (n = 1)

Figure 2:
* Completers of the program are defined as participants who attended 65% or more of the sessions in the program. Partial completers are participants who attended between 1 session and 64% of the sessions. Non-completers are participants who were referred to the program and did not attend any sessions.

Group 1: Employed: Yes (n = 3), No (n = 4)
Group 2: Employed: Yes (n = 5), No (n = 3)

Figure 3:

* Completers of the program are defined as participants who attended 65% or more of the sessions in the program. Partial completers are participants who attended between 1 session and 64% of the sessions. Non-completers are participants who were referred to the program and did not attend any sessions.
* Employment was determined prior to participants beginning the program.

Group 1: Mental health concerns/history: Yes (n = 1), No (n = 5)
Group 2: Mental health concerns/history: No (n = 8)

Group 1: Medical history: No (n = 6)
Group 2: Medical history: No (n = 9)
Group 1: Children’s mother has a 50B against father: Yes (n = 1), No (n = 6)
Group 2: Children’s mother has a 50B against father: Yes (n = 3), No (n = 6)

Figure 4:

* Completers of the program are defined as participants who attended 65% or more of the sessions in the program. Partial completers are participants who attended between 1 session and 64% of the sessions. Non-completers are participants who were referred to the program and did not attend any sessions.
* Existence of a 50B protective order was against the father for the mother of his children and was determined prior to participants beginning the program.
Group 1: History of charge/conviction of domestic violence: Yes (n = 1), No (n = 4)  
Group 2: History of charge/conviction of domestic violence: Yes (n = 3), No (n = 6)  

Figure 5:  

* Completers of the program are defined as participants who attended 65% or more of the sessions in the program. Partial completers are participants who attended between 1 session and 64% of the sessions. Non-completers are participants who were referred to the program and did not attend any sessions.  
* History of Domestic Violence was determined prior to participants beginning the program and does not include history of protective orders.
Group 1: History of mistreatment as a child: Yes (n = 2), No (n = 4)
Group 2: History of mistreatment as a child: Yes (n = 3), No (n = 6)

Figure 6:

* Completers of the program are defined as participants who attended 65% or more of the sessions in the program. Partial completers are participants who attended between 1 session and 64% of the sessions. Non-completers are participants who were referred to the program and did not attend any sessions.

* Childhood history of abuse was determined prior to participants beginning the program.
Group 1: History of physical/emotional violence between parents/guardians: Yes (n = 3), No (n = 3)
Group 2: History of physical/emotional violence between parents/guardians: Yes (n = 3), No (n = 5)

Figure 7:

* Completers of the program are defined as participants who attended 65% or more of the sessions in the program. Partial completers are participants who attended between 1 session and 64% of the sessions. Non-completers are participants who were referred to the program and did not attend any sessions.
* Childhood witness to domestic violence was determined prior to participants beginning the program.

Group 1: Reports of emotional abuse (n = 1), father abusive to mother and removed from home (n = 1)

Group 1: Reported response to anger: turn to oneself to calm down (n = 4), express anger and frustration in ways that others can know (n = 1)
Group 2: Reported response to anger: walk away (n = 4), verbally aggressive (n = 3), explode/hit things/react on the spot (n = 3)
Group 1: History of substance or alcohol use: Yes (n = 5), No (n = 1)
Group 2: History of substance or alcohol use: Yes (n = 7), No (n = 2)

Figure 8:

* Completers of the program are defined as participants who attended 65% or more of the sessions in the program. Partial completers are participants who attended between 1 session and 64% of the sessions. Non-completers are participants who were referred to the program and did not attend any sessions.

* Alcohol/drug use was determined prior to participants beginning the program. Participants with alcohol/drug use within the past 3 months were categorized as recent alcohol/drug use. Participants with alcohol/drug use in the past 4 months or longer were categorized as no recent alcohol/drug use.

Group 1: Last reported use of alcohol or drugs: Less than one month (n = 3), 1-3 months (n = 1), 4-6 months (n = 1)
Group 2: Last reported use of alcohol or drugs: Less than one month (n = 4), 1-3 months (n = 2), 10 or more years/never (n = 2)
Strong Fathers Pre/Post test on Abusive Beliefs (also used by Time Out groups):
A higher score indicates non-abusive beliefs, the highest score being 100.

Pre-test:
Group 1: Score 60-69 (n = 1), 80-89 (n = 1), 90-100 (n = 2)
Group 2: Score 80-89 (n = 2), 90-100 (n = 4)

Figure 9:

* Completers of the program are defined as participants who attended 65% or more of the sessions in the program (n = 5). Partial completers are participants who attended between 1 session and 64% of the sessions (n = 4). Non-completers are participants who were referred to the program and did not attend any sessions (n = 1). Sample sizes reflect the data collected for this measure.
Post-test:
Group 1: Score 70-79 (n = 2). At post-test one participant’s score decreased by 4 points and one participant’s increased by 9 points.
Group 2: 90-100 (n = 4). Comparison from pre to post-test was available for three participants. At post-test one participant’s score decreased by 3 points, one participant’s score increased by 4 points and another increased by 9 points.

Figure 10:

Change in Abusive Beliefs from Pre to Post-test by Participant

Contact with children:
Pretest:
Group 1: Living arrangements with children: live together all of the time (n = 2), live together part of the time (n = 1), we don’t live together (n = 1)
Group 2: Living arrangements with children: live together part of the time (n = 2), we don’t live together (n = 3)

Group 1: Where fathers see their children: visit with children in fathers house (n = 4)
Group 2: Where fathers see their children: visit with children in fathers house (n = 4), I visit with my children in public locations only (n = 1)

Group 1: Custody of children: full custody (n = 1), joint custody (n = 2), don’t have custody (n = 1)
Group 2: Custody of children: joint custody (n = 2), don’t have custody (n = 1), I don’t know (n = 2)
Group 1: How time spent with children is arranged: visit when mother and father work it out (n = 2), visit when court says father can (n = 1)
Group 2: How time spent with children is arranged: visit when mother and father work it out (n = 3), visit according to what DSS allows (n = 2)

Group 1: How often see children: live with children (n = 2), with them 5-6 times per week (n = 1), with them 2 times per week (n = 1)
Group 2: How often see children: with them 3-4 times per week (n = 2), with them once per week (n = 3)

Group 1: How often you contact your children: everyday (n = 2), a few times a week (n = 2)
Group 2: How often you contact your children: everyday (n = 2), a few times a week (n = 3)

Posttest:
Group 1: Living arrangements with children: live together all of the time (n = 1), Live together part of the time (n = 1)
Group 2: Living arrangements with children: live together all of the time (n = 2), Live together part of the time (n = 2)

Group 1: Where fathers see their children: visit with children in fathers house (n = 1), visit with children where they live (n = 1)
Group 2: Where fathers see their children: visit with children in fathers house (n = 4)

Group 1: Custody of children: joint custody (n = 2)
Group 2: Custody of children: full custody (n = 1), joint custody (n = 2), I don’t have custody (n = 1)

Group 1: How time spent with children is arranged: visit when mother and father work it out (n = 1)
Group 2: How time spent with children is arranged: visit when mother and father work it out (n = 3)

Group 1: How often see children: live with children (n = 1), with them 2 times per week (n = 1)
Group 2: How often see children: live with children (n = 2), with them 3-4 times per week (n = 1), with them once per week (n = 1)

Group 1: How often you contact your children: everyday (n = 1), a few times a week (n = 1)
Group 2: How often you contact your children: everyday (n = 2), a few times a week (n = 2)

Contact with children was evaluated at pre and post-test for five participants. For one participant, contact with his child(ren) remained similar. His understanding of his custody status regarding his child(ren) changed from full to joint custody. For two participants contact with their child(ren) decreased slightly. One participant now visits with his child(ren) where they live (n = 1) and sees them twice per week as opposed to 5-6 times per week. For another participant,
contact with children decreased in that they communication through the phone decreased from everyday to a few times per week. For two participants contact with their child(ren) increased. At post-test both fathers now lived with their child(ren). The change in contact with children for the remaining measures is likely a result of the change in living status with their children.

**Parenting Log:** 11 participants completed 2 or more parenting logs
Qualitative data analysis of questions 1-3(or 4) has not been completed
Participants rated how they felt about their parenting for the prior week from 1 (I did not feel good at all about the parenting decisions I made) to 5 (I feel great about those decisions)
Session 2: (n = 6)
Participants rated their fathering in the past week as 3 (n = 3), 4 (n = 3)
Session 3: (n = 6)
Participants rated their fathering in the past week as 1 (n = 1), 3 (n=2), 4 (n=1), 5 (n=2)
Session 4: (n = 8)
Participants rated their fathering in the past week as 1 (n = 1), 2 (n = 1), 4 (n = 2), 5 (n=4)
Session 5: (n = 7)
Participants rated their fathering in the past week as 3 (n = 1), 4 (n = 3), 5 (n = 3)
Session 6: (n = 10)
Participants rated their fathering in the past week as 3 (n = 2), 3.5 (n = 2), 4 (n = 3), 5 (n = 3)
Session 7: (n = 10)
Participants rated their fathering in the past week as 3 (n = 3), 4 (n = 4), 5 (n = 3)
Session 8: (n = 7)
Participants rated their fathering in the past week as 4 (n = 6), 5 (n = 1)
Session 9: (n = 5)
Participants rated their fathering in the past week as 4 (n = 3), 5 (n = 2)
Session 10: (n = 6)
Participants rated their fathering in the past week as 2 (n = 1), 3 (n = 1), 4 (n = 2), 5 (n = 2)
Data on support and CFT’s was only recorded for one participant
Number of people father goes to for support 3 (n = 1)
Had a Child and Family Team meeting (n = 1)
Number of Child and Family Team meetings 2 (n = 1)
Session 11: (n = 4)
Participants rated their fathering in the past week as 4 (n = 4)
Session 12: (n = 5)
Participants rated their fathering in the past week as 1 (n = 1), 3 (n = 1), 4 (n = 3)
Session 13: (n = 6)
Participants rated their fathering in the past week as 1 (n = 1), 3 (n = 1), 4 (n = 4)
Session 14: (n = 3)
Participants rated their fathering in the past week as 4 (n = 1), 5 (n = 2)
Session 15: (n = 5)
Participants rated their fathering in the past week as 3 (n = 1), 4 (n = 2), 5 (n = 2)
Session 16: (n = 6)
Participants rated their fathering in the past week as 3 (n = 3), 4 (n = 2), 5 (n = 1)
Session 17: (n = 4)
Participants rated their fathering in the past week as 3 (n = 1), 4 (n = 2), 5 (n = 1)
Session 18: (n = 5)
Participants rated their fathering in the past week as 3 (n = 1), 4 (n = 2), 5 (n = 2)
Session 19: (n = 5)
Participants rated their fathering in the past week as 4 (n = 3), 5 (n = 2)
Session 20: (n = 4)
Participants rated their fathering in the past week as 4 (n = 3), 5 (n = 1)

Figure 11:
**Goal setting worksheet**: (n = 10)
Self Goals:
Session 2: (n = 8)
7 participants listed 3 goals for themselves
1 participant listed 1 goal for themselves
Session 7: (n = 10)
6 participants listed 3 goals for themselves
4 participants listed 2 goals for themselves
Session 10: (n = 6)
6 participants listed 3 goals for themselves
Figure 13:

Goal Setting for Self Across Session by Participant

* Program completers are participant’s b, d, e, f, k & h. Program partial completers are participant’s c, a, g, i & j.

Children Goals:
Session 2: (n = 8)
7 participants listed 3 goals for their relationship with their children
1 participant listed 1 goal for their relationship with their children
Session 7: (n = 10)
6 participants listed 3 goals for their relationship with their children
4 participants listed 2 goals for their relationship with their children
Session 10: (n = 6)
6 participants listed 3 goals for their relationship with their children
Mother of Children Goals:
Session 2: (n = 8)
4 participants listed 3 goals for their relationship with the mother of their children
2 participants listed 2 goals for their relationship with the mother of their children
2 participants listed 1 goal for their relationship with the mother of their children
Session 7: (n = 10)
4 participants listed 3 goals for their relationship with the mother of their children
5 participants listed 2 goals for their relationship with the mother of their children
1 participant listed 1 goal for their relationship with the mother of their children
Session 10: (n = 6)
4 participants listed 3 goals for their relationship with the mother of their children
2 participants listed 1 goal for their relationship with the mother of their children
* Program completers are participant’s b, d, e, f, k & h. Program partial completers are participant’s c, a, g, i & j.

Session 19: (n = 3)
2 participants listed 3 short-term goals including ways that they would accomplish those goals
1 participant listed 2 short-term goals including ways that they would accomplish those goals
1 participant listed 3 long-term goals and ways that they would accomplish those goals
2 participants listed 2 long-term goals and ways that they would accomplish those goals

Pre/Post child development test: (n=11)
A higher score measures increased knowledge of child development.
Group 1:
Pre score .62 (8/13) Post score .69 (9/13) Second post test score .85 (11/13)
Pre score .62 (8/13) Post score .77 (10/13) Second post test score 0.92 (12/13)
Pre score .85 (11/13) Post score 1.00 (13/13)
Pre score .70 (7/10)  
Group 2:
Pre score .85 (11/13) Post score 1.00 (13/13)
Pre score 1.00 (13/13) Post score 1.00 (13/13)
Pre score .77 (10/13)  
Pre score .62 (8/13) Post score 1.00 (13/13) Second post test score 1.00 (13/13)
Pre score .69 (9/13) Post score 1.00 (13/13)
Post score .85 (11/13)  
Pre score .92 (12/13) Post score 1.00 (13/13) Second post test score 1.00 (13/13)
Figure 16:

* Scores are reported by participant. Participants who completed the group (attended 65% or more of the sessions) have a solid line. Participants who partially completed the group (attended from 1 to 64% of the sessions) have a dotted line.

**Summary:**
For each participant that completed this test more than once, their scores increased with each subsequent test.

**Relationship building challenges with child:**
**Pretest:**
Participant “B” recorded that 13 out of 13 items were challenging to the participant. This participant was able to indicate 2 specific obstacles and three things that he could do to respond to each obstacle.

Participant “F” recorded that 13 out of 13 items were challenging to the participant. This participant was able to indicate 2 specific obstacles and two things that he could do to respond to each obstacle.

Participant “H” recorded that 0 out of 13 items were challenging to the participant. This participant was able to indicate 1 specific obstacle and three things that he could do to respond to this obstacle.
Participant “K” recorded that 2 out of 13 items were challenging to the participant. This participant was able to indicate 2 specific obstacles and three things that he could do to respond to each obstacle.

Participant “I” recorded that 1 out of 13 items were challenging to the participant. This participant was able to indicate 2 specific obstacles and two things that he could do to respond to each obstacle. This participant did not complete the group.

Posttest:
Participant “B” recorded that 4 out of 13 items were challenging to the participant. This participant was able to indicate 2 specific (and different from pretest) obstacles and three things that he could do to respond to obstacle 1 and 2 things he could do to respond to obstacle 2.

Participant “D” recorded that 1 out of 13 items were challenging to the participant. This participant was able to indicate 1 specific obstacle and three things that he could do to respond to that obstacle.

Participant “F” recorded that 12 out of 13 items were challenging to the participant. This participant was able to indicate 1 specific obstacle and three things that he could do to respond to this obstacle.

Participant “H” recorded that 0 out of 13 items were challenging to the participant. This participant was able to indicate 2 specific obstacles and two things that he could do to respond to each obstacle.

Participant “K” recorded that 2 out of 13 items were challenging to the participant. This participant was able to indicate 2 specific obstacles and three things that he could do to respond to each obstacle.
**Attendance:**
Table of attendance listed on the following page. Attendance record reflects that participation of referred participants who attended at least one session.
### Year 2 Groups 1 & 2 Attendance Record: P = Present, A = Absent, M = Made-up, C = Cancelled Session

<table>
<thead>
<tr>
<th>Participant Number</th>
<th>Session Number</th>
<th>Number of Sessions attended</th>
<th>Number of sessions left at program start date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>C P A A A A A A A A A A A A A A A A</td>
<td>1</td>
<td>16</td>
</tr>
<tr>
<td>2</td>
<td>P P C A A P A M A P P P P A A A A A</td>
<td>9</td>
<td>20</td>
</tr>
<tr>
<td>3</td>
<td>P C P A P P P P A A P A A A A A A A</td>
<td>8</td>
<td>19</td>
</tr>
<tr>
<td>5</td>
<td>C P P P P P A P P P P P P P P P P</td>
<td>15</td>
<td>16</td>
</tr>
<tr>
<td>6</td>
<td>A A A A P P P P P P P A P P P P P</td>
<td>12</td>
<td>16</td>
</tr>
<tr>
<td>7</td>
<td>A A A P P P A P P P P P A P A P</td>
<td>11</td>
<td>16</td>
</tr>
<tr>
<td>8</td>
<td>P P A P A P A P P P P P P P P P</td>
<td>14</td>
<td>16</td>
</tr>
<tr>
<td>9</td>
<td>P A A P P A A A A A A A A A A A A A</td>
<td>3</td>
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</tr>
<tr>
<td>11</td>
<td>P P P P P A A A A P A A A A</td>
<td>7</td>
<td>14</td>
</tr>
<tr>
<td>12</td>
<td>P P P A A A A A P A A A</td>
<td>4</td>
<td>11</td>
</tr>
</tbody>
</table>

* For Group 2 Sessions 12 & 13, 14 & 15, 16 & 17, 18 & 19 were combined. The number of sessions that participants could attend was reduced from 20 to 16 due to this change.
**Group notes:**

**Figure 18:**

* Scores are reported by participant. Participants who completed the group (attended 65% or more of the sessions) have a solid line. Participants who partially completed the group (attended from 1 to 64% of the sessions) have a dotted line.

**Figure 19:**
Scores are reported by participant. Participants who completed the group (attended 65% or more of the sessions) have a solid line. Participants who partially completed the group (attended from 1 to 64% of the sessions) have a dotted line.

Figure 20:
* Scores are reported by participant. Participants who completed the group (attended 65% or more of the sessions) have a solid line. Participants who partially completed the group (attended from 1 to 64% of the sessions) have a dotted line.

Figure 21:

Empathy for Child per Session by Participant

* Scores are reported by participant. Participants who completed the group (attended 65% or more of the sessions) have a solid line. Participants who partially completed the group (attended from 1 to 64% of the sessions) have a dotted line.
Figure 22:

Demonstrates Parenting Skills per Session by Participant

* Scores are reported by participant. Participants who completed the group (attended 65% or more of the sessions) have a solid line. Participants who partially completed the group (attended from 1 to 64% of the sessions) have a dotted line.
Figure 23:

* Scores are reported by participant. Participants who completed the group (attended 65% or more of the sessions) have a solid line. Participants who partially completed the group (attended from 1 to 64% of the sessions) have a dotted line.
Figure 24:

![Graph: Demonstrates Positive Behavior per Session by Participant]

* Scores are reported by participant. Participants who completed the group (attended 65% or more of the sessions) have a solid line. Participants who partially completed the group (attended from 1 to 64% of the sessions) have a dotted line.

**Facilitator notes:**

**Session 1:**

- **Group 1:**
  - 4 out of 5 activities completed
  - All activities addressed the objective

- **Group 2:**
  - 4 out of 5 activities completed
  - All activities addressed the objective

**Session 2:**

- **Group 1:**
  - 3 out of 3 activities completed
  - All activities addressed the objective

- **Group 2:**
  - 5 out of 5 activities completed
  - All activities addressed the objective

**Session 3:**

- **Group 1:**
  - 3 out of 3 activities completed
All activities addressed the objective

Group 2:
4 out of 4 activities completed
All activities addressed the objective

Session 4:
Group 1:
4 out of 4 activities completed
All activities addressed the objective
Group 2:
4 out of 4 activities completed
All activities addressed the objective

Session 5:
Group 1:
4 out of 4 activities completed
All activities addressed the objective
Group 2:
4 out of 4 activities completed
All activities addressed the objective

Session 6:
Group 1:
5 out of 5 activities completed
All activities addressed the objective
Group 2:
5 out of 5 activities completed
All activities addressed the objective

Session 7:
Group 1:
4 out of 5 activities completed
4 out of 4 completed activities addressed the objective
Group 2:
5 out of 5 activities completed
All activities addressed the objective

Session 8:
Group 1:
8 out of 8 activities completed
All activities addressed the objective
Group 2:
4 out of 4 activities completed
All activities addressed the objective
Session 9:
Group 1:
  5 out of 5 activities completed
  All activities addressed the objective
Group 2:
  6 out of 6 activities completed
  All activities addressed the objective

Session 10:
Group 1:
  5 out of 5 activities completed
  All activities addressed the objective
Group 2:
  6 out of 6 activities completed
  All activities addressed the objective

Session 11:
Group 1:
  5 out of 5 activities completed
  All activities addressed the objective
Group 2:
  5 out of 5 activities completed
  All activities addressed the objective

Session 12:
Group 1:
  6 out of 6 activities completed
  All activities addressed the objective
Group 2:
  6 out of 6 activities completed
  All activities addressed the objective

Session 13:
Group 1:
  6 out of 6 activities completed
  All activities addressed the objective
Group 2:
  6 out of 6 activities completed
  All activities addressed the objective

Session 14:
Group 1:
  5 out of 5 activities completed
  All activities addressed the objective
Group 2:
5 out of 5 activities completed
All activities addressed the objective

Session 15:
Group 1:
3 out of 5 activities completed
2 out of 2 completed activities addressed the objective
The focus group was conducted during this group
Group 2:
5 out of 5 activities completed
All activities addressed the objective

Session 16:
Group 1:
5 out of 5 activities completed
If the activities addressed the objective was not recorded
Facilitator included in notes that the bottle activity was not completed
Group 2:
5 out of 5 activities completed
All activities addressed the objective

Session 17:
Group 1:
4 out of 4 activities completed
All activities addressed the objective
Group 2:
4 out of 4 activities completed
All activities addressed the objective

Session 18:
Group 1:
5 out of 5 activities completed
All activities addressed the objective
Group 2:
5 out of 5 activities completed
All activities addressed the objective

Session 19:
Group 1:
4 out of 4 activities completed
All activities addressed the objective
Group 2:
4 out of 4 activities completed
All activities addressed the objective

Session 20:
Group 1:
4 out of 4 activities were completed
All activities addressed the objective

Group 2:
4 out of 4 activities completed
All activities addressed the objective
Referrals and Participation

The number of referrals has been low but grew slightly from the first to the second group. Group 1 had 7 men referred, and of these 2 completed the program (defined as attending 65% or more sessions from point of entry into the program). Group 2 had 9 men referred and of these, 4 completed the program.

Focus Group (July 23, 2010)
The group had 18 attendees, of whom 4 were from county Social Services, 2 were from state Social Services, 5 were from Family Services Inc, 1 was from the Center for Child and Family Health, and 6 were from other organizations (related to the courts, corrections, and public health).

The feedback pertinent to recruitment was as follows:
- Are referral sources looking at the whole family?
- Informing new workers/people at referral source about the program
- Thinking about how referral sources can reinforce the program
- Do participants need to have an active CPS involvement?

Community Interviews (Sept. – Oct. 2010)
During the month of September and October 2010, interviews were conducted with 3 non-DSS respondents (from FSI, court, and community organizations serving youth)

The main points related to recruitment were:
- In general, it is hard to initiate a new group program.
- If dependent on DSS as sole referring agency, then there is a need for extensive collaboration. DSS also needs to monitor attendance in order to increase compliance.
- It would be advantageous to enlarge the referring sources beyond DSS.
- The courts should be able to mandate attendance in order to increase compliance in attendance. This works well as long as the men are open to attending.
- A psycho-educational group sounds more positive than a therapy group that targets the abuser’s “abusive behavior.”

Social Services Interviews (Sept. – Oct. 2010)
During the months of September and October 2010, interviews were conducted with 3 county Social Services staff.

The main points related to recruitment were:
- Workers lack knowledge of the Strong Fathers program.
- If they were aware, they would make referrals.
- The program has the potential to help clients with anger management and help workers with assessing client needs and risks.
- The timing of the group and transportation to the program are barriers for clients.
The program is a “softer” on the abuser than other programs and, thus, other accredited abuser programs are more appropriate as the primary service. However, Strong Fathers would be a “great secondary program” if it were locally delivered.
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EXECUTIVE SUMMARY
This report presents the findings from the implementation analysis of the Strong Fathers program. The implementation analysis was comprised of documenting the implementation procedures for the Strong Fathers program, assessing the extent to which the implementation of the Strong Fathers program adhered to the program procedures, and assessing the program’s procedures.

Background
The Strong Fathers program was developed through the partnership of the Center for Child and Family Health, the Center for Family & Community Engagement at North Carolina State University and the Family Services Inc. in response to a Request for Proposal (RFP) by the North Carolina Department of Health and Human Services to address the rise in domestic violence in the state.

The Strong Fathers Program is a pilot program aimed at ending violence against women using fatherhood as the leading approach. The program’s goals are to strengthen fathers to make children and their mothers safer and to improve family relationships; and to use child and family teams to build supports around participating fathers and their families.

As the Strong Fathers Program is a pilot program, it is critical to conduct an implementation analysis with its first cohort of participants to determine fidelity to the program’s design. The results from the implementation analysis will be used by the staff to modify the program’s delivery for the next cohort. It will also complement the outcome evaluation.

The Strong Fathers Program
The Strong Fathers program is a 20-week voluntary program with a two-hour session each week. The current grant will fund two cohorts of men for a year. Each cohort will have 12 men. Successful completion will involve attending a minimum of 17 sessions.

The eligibility criteria for the program are fathers who are receiving child welfare service, and have been physically or emotionally abusive toward their partners. Men who have committed child sexual abuse or have court orders that prohibit them from having contact with their children are not eligible for the program.

Evaluation Methodology
The key objective of the evaluation is to determine if the Strong Fathers program is being implemented the way it was originally intended and to provide recommendations for program refinement. Further, the evaluation will provide a context for the interpretation of the outcome
evaluation of the Strong Fathers program. Two main steps were taken to achieve the evaluation objective.

The first step was to develop a detailed understanding of how the program is designed to be implemented. Second was to assess whether the program was being implemented according to the prescribed guidelines and to identify any barriers to implementation.

The data collection utilized a mix-method approach to gather information to address the key evaluation questions. The methods used included interviews with participants and facilitators, on-site observations of a session, focus group with participants, participant survey, and document review.

**Findings**

While the curriculum was found to have high fidelity to the curriculum procedures, dosage and recruitment were found to have moderate and poor fidelity respectively. The program faced major challenges in the recruitment of participants. Seven participants completed the intake process, one – three participants attended the sessions regularly but only two participants completed the entire curriculum.

**Recruitment**

1. *Targeting the appropriate participants:* Data collection confirmed that the program reached its target population.

2. *Recruitment barriers:* The cohort nature of the program, despite being very beneficial to participants, posed a major challenge to recruitment. Some participants were lost between the time that they were referred and the start of the cohort. Another barrier was the initial limitation of the program to only Forsyth County. Given that the program is voluntary, it limits the leverage to retain participants in the program.

3. *Lack of buy-in from the community:* The low recruitment rates could be attributed to the fact that Strong Fathers program was new to the community of Winston-Salem and its neighboring cities and towns.

4. *Uncertainty of the Future:* The recruitment goals were impacted by the uncertainty of the future of the program. The community has been reluctant to make long-term commitments to the program. The uncertainty impeded the program facilitators’ efforts to get buy-in from the community.

**Dosage**

1. *Prescribed dosage:* The curriculum was delivered weekly for 2 hours per session. Facilitators completed the key modules during each session.
2. *Participant engaged in sessions:* Participants were very involved in sessions however, there were some sessions in which participants found it challenging to engage because of the content, personal reasons, or literacy concerns.

**Curriculum Delivery**

1. *Followed the implementation procedures:* The facilitators implemented the curriculum according to the implementation procedures.

2. *Male vs. Female Facilitator:* The participants did not have a problem with engaging the female facilitators. The female facilitator was able to provide a female perspective on various discussions during the program.

3. *Delivery barriers:* Both facilitators and participants indicated that 2 hours was not enough time to cover all the materials per session. However, they did not want the session length extended. The literacy level of the participants also posed a challenge for the facilitators in administering some activities and explaining the content of sessions. Another barrier was that the curriculum did not address diversity (race, regional or cultural).

**Program Feedback**

1. *Recruitment:* Participants indicated that they were not given or told much information about the program.

2. *Program Logistics:* Participants were pleased with the location and timing of the program.

3. *Facilitators:* Participants spoke highly of the facilitators. They indicated that the facilitators were very respectful, helpful and willing to have make up sessions when they missed a session.

4. *Curriculum:* Participants found the curriculum very insightful and found the role playing particularly beneficial. However, they indicated that a session on substance abuse should be included in the curriculum.

The facilitators indicated the participants “enjoyed the sessions and hate[d] to miss sessions.” They also indicated that they would like the curriculum to address diversity issues and suggested a session or module on myths about relationships and parenting.
**Recommendations**

There are several recommendations for program improvement. Below is a summary of recommendations with regard to recruitment, dosage and general program improvement.

**Recruitment**

The recommendations for improving recruitment are to develop strategies to guarantee the future of the program, engage caseworkers and community, expand the program’s reach and participant follow-up.

1. **Develop strategies to guarantee the future of the program**: These strategies may include applying for grants from both state and national agencies and private foundations.

2. **Develop partnerships with caseworkers**: Increase emphasis on educating caseworkers about the importance of the Strong Fathers program. It is also crucial to communicate to the caseworkers not to present the program to participants as rectifying their deficiencies but in terms of fathers becoming more confident as parents, learn ways to reduce stress and become role models of their children.

3. **Develop partnerships with the community**: A way to engage the community will be to create a community advisory board (CAB) in Winston-Salem, NC. The CAB should be open to all stakeholders including participants of the program.

4. **Expand Reach**: Program developers and facilitators should continue to engage neighboring counties to reach the target cohort size.

5. **Participant Follow-Up**: Curriculum staff should engage participants as soon as they are referred to the program and should continue the engagement throughout the course of the program. Another strategy is to incorporate the buddy system by pairing participants up to hold each other accountable.

**Dosage**

The recommendations for improving participant involvement in the program include improving how activities are framed and modifying curriculum materials and activities to the literacy level.

1. **Framing of activities**: Allow participants to customize a discipline/parenting plan with the help of facilitators targeting a major issue challenging the father.

2. **Literacy level**: Modify curriculum to reflect the literacy levels of the participants.

**Program Feedback**
The recommendations for the overall program include incorporating diversity and again modifying literacy.

1. *Incorporate diversity:* Program developers and facilitators should discuss ways to best incorporate the appropriate culture and diversity into the curriculum.

2. *Literacy level:* Modify curriculum to reflect the literacy levels of the participants.
CHAPTER 1: INTRODUCTION

Practitioners are increasingly recognizing the necessity of pilot testing programs and assessing their implementation as a way to check the feasibility and/or to help improve the design and structure of programs before delivering it on a large scale. In implementing a new curriculum or program, practitioners and other stakeholders are usually interested in the outcomes of the program. Therefore, much attention and resources are devoted to the outcome evaluation as indispensable element in effective service delivery (Bond, et al. 2009). However, successful outcomes require paying attention to the way the program is implemented and the factors that might influence the implementation.

The Strong Fathers program, a pilot program that targets fathers with a history of domestic violence and involvement in the child welfare system, was developed by the Center for Child and Family Health (CCFH), the Center for Family & Community Engagement (CFCE) at North Carolina State University and the Family Services Inc. (FSI) in response to request for proposal put forth by the North Carolina Department of Social Services. Recognizing the significant impact of program implementation on program outcomes this study examines the implementation of the Strong Fathers Curriculum. The National Implementing Evidence-Based Practices Project demonstrated that routine monitoring of program implementation yields high fidelity (Bond, et al. 2009). The lack of knowledge of the process of implementing programs has been described as the hindrance to the widespread dissemination of evidence-based practices (McHugo, et al. 2007). Research indicates that implementation plans are often inadequate with no clear model specifications.

The purpose of implementation analysis is to ensure that the original designed intervention is implemented, as well as being implemented in a manner consistent with the program theory and plan. Despite the importance of implementation analysis, outcome evaluation is frequently conducted without an assessment of the program implementation. This lack of evaluation can lead to “Type III error,” which refers to the conclusion that a seemingly ineffective program was, in actuality, not implemented as intended (Wilson, et al. 2009).

This paper reports on how well the program implementation adheres to the key elements of the program – recruitment, and dosage and curriculum delivery – and program feedback. It is widely believed that attention to these elements affects the outcomes of the participants of the program.
CHAPTER 2: STRONG FATHERS PROGRAM

2.1: BACKGROUND

Partner abuse continues to be considered one of the major threats against women in our society today. It is estimated that approximately 12% of American women experience intimate partner violence, of which 3% are severely beaten by their intimate partners each year (Graham-Bermann and Edleson 2002). Partner abuse puts women in danger and exposes children to physical and emotional abuse (Williams, Boggess and Carter 2002). The issue of partner abuse is further complicated when the abuser is the father of the victim’s child(ren). This raises several concerns about women’s and children’s safety. Research shows that witnessing domestic violence is associated with negative outcomes in a child’s development (Graham-Bermann and Edleson 2002).

In contrast, there are advocates who are concerned about the rights of fathers. These advocates support the provision of emotional and financial support for fathers to assist them in taking responsibility of their children (Williams, Boggess, & Carter, 2002). Additionally, there is extensive research that shows the importance of father involvement in the development and life of a child (Graham-Bermann & Edleson, 2002).

Despite the contention between advocates for abused women and fathers, most abusers who are fathers continue to have contact with their children even after separating from their partners because the courts, mothers, or children choose it (Graham-Bermann & Edleson, 2002). Additionally, research shows that some abused women are willing to engage the fathers in their children’s lives if the children will be safe and have healthy relationships with their fathers (Stith, Rosen and McCollum 1999). There is some evidence that some abusive men do change their behavior and are not abusive towards their children (Williams, Boggess, & Carter, 2002); however, there is little literature on these men.

In the last few decades, attention has turned to the development and delivery of intervention programs that seek to reduce the incidences of domestic violence by engaging male abusers who are also known as batterers (Day, et al. 2009). There are a range of options that are an alternative to incarceration for male abusers including batterers’ treatment programs and counseling (depending on the severity of the abuse). Batterer interventions are attended by batterers usually as part of a court order in response to an act of domestic violence. Batterer interventions were introduced as a way to hold batterers accountable and to ensure victim safety. Additional goals of batterers’ intervention include education and rehabilitation of the batterer. Recent research suggests that batterer treatment programs have little or no effect on batterers (Gondolf 2004, Jackson, et al. 2003).

In recent years, a new approach has emerged into the forefront of the discussion of addressing domestic violence issues by reconciling the concerns of both advocates of men and women. This new approach seeks to help men who have renounced their violence to become better fathers and co-parents while creating healthy, safe, protected, nurturing and secure environments for parents and children (Williams, Boggess, & Carter, 2002). It is upon this approach that the Strong Fathers Program is based.
2.2: PROGRAM DESIGN

In February, 2007 a group of concerned stakeholders including both state and national Department of Social Services (DSS) staff, mental health workers, evaluators, practitioners, and the former director of DSS, JoAnn Lamm, interested in fatherhood and domestic violence met to discuss new ways to address domestic violence in the community given that there is limited evidence to suggest that current batterers’ interventions are effective in rehabilitating offenders. Following the meeting, Ms. Lamm and her office put together a Request for Proposal (RFP) with the deliverables – a curriculum to address domestic violence using the fatherhood approach, an evaluation of the curriculum and to pilot test the curriculum.

2.3: PARTNERS

The Strong Fathers Program was developed in response to the RFP through the partnership of the Center for Child and Family Health (CCFH), the Center for Family & Community Engagement (CFCE) at North Carolina State University and the Family Services Inc. (FSI).

FSI, which is the lead agency, is a non-profit, family service agency that has the clinical expertise and extensive knowledge regarding the content area. FSI has been serving Forsyth, Davie and Stokes counties in North Carolina since 1905 and is the primary provider for domestic violence counseling services in Forsyth County (Family Services Inc 2007). The curriculum was developed by CCFH, a leader in delivering and providing instruction on evidence-based interventions in the area of trauma treatment including child abuse and domestic violence. CFCE will be conducting an outcome evaluation of the program. The center has worked on family group conferencing, safety conferencing, and child and family teams.

2.4: THE INTERVENTION

The Strong Fathers Program was based on the Fathering after Violence (FAV) model, a national initiative developed by the Family Violence Prevention Fund to enhance the safety and well-being of women and children. The primary focus of FAV is to motivate men to renounce their violence and become better fathers (or father figures) and more supportive parenting partners.

The Strong Fathers Program is a pilot program aimed at ending violence against women using fatherhood as the leading approach. The program’s goals are to strengthen fathers to make children and their mothers safer and to improve family relationships; and to use child and family teams to build supports around participating fathers and their families.

The program is a 20-week voluntary program with a two-hour session each week. The current grant will fund two cohorts of men for a year. Each cohort will have up to 12 men. Successful completion will require attending a minimum of 17 sessions. The program chose to have male and female facilitators to serve as role models of healthy relationships between men and women for the participants.
The goal of the curriculum is to strengthen the fathers’ ability to have a meaningful, benign, and non-coercive relationship with their children. The curriculum will focus on the effects of domestic violence on children, application of positive behavior management skills and the delivery, practice and implementation of parenting strategies (Family Services Inc 2007).

The program will adhere to the principles of the Fathering after Violence model when selecting participants. These principles include: the safety of women and children is the first priority; an essential piece of ending violence against women and children is working with fathers; and the reparative process between abusive fathers and their children is often long, complex and not appropriate for all men.

Each session of the program comprises of several modules. However, three modules are consistent throughout the curriculum. The first module is called the ‘check in’ which welcomes the participants and reviews the previous session. The second section, which includes a ten minute break, is the ‘topic’ of the session. The facilitators discuss the topic, provide the participants with handouts and conduct activities with the participants as specified by the curriculum. The last session is called the ‘check out’ which solicits feedback from the participants about the session and reviews their homework assignments if any were given.

2.5: CURRICULUM DELIVERY MODEL

The curriculum developers of the Strong Fathers Curriculum defined the core characteristics of the intervention guided by the constructs from the theoretical frameworks that were used to develop the curriculum. The core characteristics that informed the development of the implementation processes of the Strong Fathers Curriculum are 1) strengths based, 2) role play & practice, and 3) model good behavior.

**Strengths based** – Unlike most programs that target the same population, the Strong Father Curriculum focuses on helping participants identify problem practices in their lives and provide them with an alternative practice that builds off their strengths. Research indicates that the strengths based approach is a more empowering alternative to the traditional approach, which is typically confrontational and identifies the participant in terms of the problem; it avoids the use of stigmatizing language and fosters hope which causes participants to be more vested in the process (Braswell, et al. 1997).

**Role play & practice** - Another key component of the curriculum is role playing and practice because it demonstrates to the participants the good and not so good ways of behaving and the implications of their behavior on their child(ren) and family. Additionally, role-playing allows the participant to apply the new strategies he is learning. It also helps the participant to understand others and their positions on various issues.

Participants are further encouraged to practice the new strategies at home and documenting these efforts through the use of a weekly parenting log. The structure of the curriculum allows for a week between sessions to allow participants to practice new strategies and get feedback from facilitators and other participants during sessions.
Model good behavior – Social learning theory indicates that most behaviors are learned by observation and modeling (Bandura 1977). As such there are several components of the curriculum that allow participants to observe good behavior. The male and female facilitators, though not a requirement of the curriculum, model healthy relationships between a male and female for the participants. Facilitators are trained to engage participants in a respectful and cordial way during sessions.

2.6: PARTICIPANTS

The eligibility criteria for the program are fathers who are receiving child welfare service, and have been physically or emotionally abusive toward their partners. Men who have committed child sexual abuse or have court orders prohibiting contact with their children are not eligible for the program. All participants are screened by FSI prior to beginning the program. The Forsyth Department of Social Services (DSS) refers men who have been identified by the child protective system (including foster care services) of Forsyth Department of Social Services (DSS) as having a history of intimate partner violence (Family Services Inc. 2007).

2.7: LOCATION

Winston-Salem, Forsyth County, was chosen as the implementation site because of its diversity of both urban and rural regions. According to the North Carolina Department of Administration, 947 women and 32 children (under 18 years) were victims of domestic violence in 2007-2008 in Forsyth County. Additionally, the partners have a good relationship with the Forsyth County Department of Social Services (DSS) who will be referring the prospective fathers to the program.

Currently, Time-Out is a state approved program for abusers in Winston-Salem. The program focuses on helping abusers accept responsibility for their attitudes and behaviors. There are however no programs that specifically target fathers with a history of intimate partner violence in Winston-Salem.

2.8: FACILITATOR TRAINING

The Strong Fathers facilitators are employees of the FSI and were selected by the management of FSI based on their extensive experience of working with fathers, child victims, child trauma victims, child development and batterers interventions. Male and female facilitators were selected for the program; however, the curriculum does not prescribe the gender of the facilitators.

The facilitators were trained prior to the start of the program and received more training midway through the intervention period. Overall, the facilitators received three days of training. The training content included: an overview of the Strong Fathers Curriculum, a detailed review of the
Strong Fathers Curriculum, a presentation of facilitator expectations and interactions with participants. The curriculum developers served as the trainers and used a participatory approach during training. Role playing was used during training to show facilitators how to interact with participants and to allow facilitators to practice implementation strategies. It also provided the trainers an opportunity to identify problems areas and provide facilitators with immediate feedback.

There was no formal evaluation of the training sessions. But the curriculum trainers sought feedback from the facilitators in between sessions. Additionally, the curriculum trainers observed a session to evaluate the facilitators.
CHAPTER 3: EVALUATION METHODOLOGY

3.1: BACKGROUND

Every good evaluation begins with studying the implementation of the program because the way a program is implemented greatly influences the outcomes of the program (Huston 2005). As the Strong Fathers Program is a pilot program, it is critical to conduct an implementation analysis with its first cohort of participants to determine fidelity to the program design. The results from the implementation analysis will be used by the staff to modify the program’s delivery for the next cohort. It will also complement the outcome evaluation.

An implementation analysis will be conducted to determine if the program is actually being delivered in the way it was intended. Based on the results of the implementation analysis, recommendations will be made to improve the implementation of the Strong Fathers Program.

The implementation analysis will assess the fidelity of the program to its intended model or design. Fidelity is defined as implementation as intended by the curriculum (Pankratz, et al. 2006). Measuring the fidelity of the program is important because it helps determine if the success or failure of the program is a result of the program model or how the program was implemented (Mowbray, et al. 2003). Additionally, evaluating the gaps between the intended program model and implementation will enable the curriculum developers to identify sections that need revision. Developers may modify the curriculum or training of the facilitators to improve implementation quality (Pankratz, et al. 2006).

The first step is to define the intended model of the Strong Fathers Program. The purpose of this step is to describe fully the Strong Fathers Program, including the purpose of the program, the program model, its goals and objectives and the expected impact and outcomes of the program. A well-defined framework is imperative to determining the fidelity of the program because it will serve as a benchmark against which the results from the data collection will be measured.

For a program to result in behavior change there is the need for facilitators to follow certain processes of the program (Baranowski and Stables 2000). Based on preliminary research on the Strong Fathers Program, the key program processes include dosage (delivered and received), content, reach and recruitment. A key component in evaluating the fidelity of the Strong Fathers Program is the “adherence checklist”, which measures the adherence to the program model. The “adherence checklist” will be used to identify and measure significant gaps between the program model and the actual program delivery (Mowbray, et al. 2003).

3.2: ADHERENCE CHECKLIST

The adherence checklist includes three categories – Recruitment, Dosage and Curriculum Delivery - and Program Feedback because they are essential in determining fidelity of a program. The adherence checklist is critical in this study because it is used to measure adherence of the activities, principles and structure to the specific model of the curriculum. While these elements are undoubtedly important to implementation, there is also a need to assess the quality of the interactions of the facilitators and participants (Wilson, et al. 2009). Such assessment will
help with the interpretation of the outcome evaluation. Did the program succeed or fail because of the program model or because of how it was implemented?

**Recruitment**– This category assesses how participants found out about the program and evaluates participation rates. A potential question about recruitment could be what strategies were used to attract participants? The evaluation of this category should yield clear and concise recruitment procedures and/or strategies. A potential question about reach could be how many members of the target audience actually participated in the program? An assessment of this category should indicate that the program is reaching the target population (Saunders, Evans and Joshi 2005, King, Morris and Fitz-Gibbon 1988).

**Dosage** - There are two elements to the dosage category—dose delivery and dose received. Dose delivery determines the completeness of the program. Dose received determines the exposure of the program to its target audience. There are two main questions for this category; how many of the intended sessions were implemented and to what extent did participants engage in the program (King, Morris and Fitz-Gibbon 1988, Saunders, Evans and Joshi 2005)?

**Curriculum Delivery** – This category seeks to determine the extent to which the program was implemented as planned. The main question for this category is to what extent was the program implemented consistently with its program model (Saunders, Evans and Joshi 2005, King, Morris and Fitz-Gibbon 1988)?

**Program Feedback** – This category is intended to gather feedback about the structure of the curriculum and topics of the curriculum and the quality of interactions between facilitators and participants (Saunders, Evans and Joshi 2005, King, Morris and Fitz-Gibbon 1988).

Any deviations from what each of these categories should yield, would require the curriculum developers to make revisions to the program model and/or facilitator training for the next cohort.

### 3.3: DATA COLLECTION METHODS

The data collection was guided by the adherence checklist. The key elements described in adherence list guided the development of items for the evaluation instruments.

**Interviews**

The purpose of the interviews was to gather information on the program background and goals, design, implementation procedures and experience to date.

**Curriculum Developers** - To effectively define the Strong Fathers program, interviews were conducted with the curriculum developers (Appendix A: Curriculum Developers Interview Protocol). The goal of the interview with the curriculum developers was to garner information about the program model, implementation strategies and the selection
and training of the facilitators. The information from the interviews with the curriculum developers was important because it served as the benchmark against which the fidelity checklist was assessed.

Facilitators - Facilitators are the bridge between the program developers and the target population therefore getting their feedback was very important. Interviews were conducted with the facilitators to gather information on how the program is implemented. The interview covered elements such recruitment, program delivery, retention, participants and the curriculum that influence the implementation of the program. Oftentimes, group sessions may deviate from the prescribed curriculum. While this may be exactly what participants want and/or need, program developers and evaluators must have the most updated information as deviations in the curriculum and activities affect the outcome measures.

Focus group & Survey

A focus group discussion (FGD) was conducted with the participants of the program to obtain in-depth information about the participants’ perceptions of the program. Topics discussed in the FGD include recruitment, facilitators and program (Appendix C: Focus Group Protocol). The data from the FGD will be crucial to program improvement. The FGD were taped, transcribed and summarized to produce an account of the experience of the participations.

In addition to the FGD, the participants completed a survey that covered accessibility, timing, recruitment, facilitators and barriers to participants (Appendix D: Participant Survey). In order to cover the necessary topics effectively, the survey contained a variety of question types. Likert scale questions were used to allow respondents to provide answers that cover a range of opinions. For other questions, respondents checked all responses that were applicable to them.

The topics for discussion in both the FGD and survey are worth investigating because they influence a program’s ability to reach its target population, the ability of the facilitators to implement the program as planned and the ability of the participants to be engaged in the program.

Session Observation

Another data collection method used with the participants was an observation of a session. The observation protocol evaluated the facilitators on competence in giving instructions, establishing a rapport, pacing and efficient use of time. The literature shows that most implementation evaluations use a rating ranging from “poor to excellent.” However, a different approach was used in this study given the goal of the intervention which is to create a positive environment through the modeling behavior of the facilitators (Wilson, et al. 2009). Therefore, the facilitators were rated on a three point scale include 1 (not at all), 2 (to some extent) and 3 (to a great extent). The observation protocol is divided into sections based on curriculum content for that
day (Appendix E: Observation Form). The purpose of this method is to report whether the facilitators complete the session’s requirements and the various interactions between the facilitators and the participants especially since one of the facilitators is female. Additionally, it is to assess how the various components of the sessions (activities, strategies, handouts) are being implemented.

**Document Review**

*Curriculum* - Documents reviewed include but are not limited to the documentation of the curriculum development and implementation strategies, and the curriculum. The curriculum was reviewed to identify the activities and content. The goal of the documents review was to garner information about the program model, implementation strategies and the selection and training of the facilitators.

*Facilitator Notes* - Further, the Strong Fathers Curriculum requires facilitators to complete facilitator notes at the end of each session as monitoring protocol. The facilitator notes were also reviewed to supplement the interviews with the facilitators.

*Participant attendance logs* – The attendance logs were assessed the reach of the program to the target population. It is recommended that researchers compare the attendance log to the number of potential program participants in order for the review to be meaningful (Saunders, Evans, & Joshi, 2005). A review of the attendance log will also determine the number of participants who drop out of the program. This information will be usefully in improving retention strategies.

*Intake form* - Participants completed an intake form after being referred to FSI for the Strong Fathers Program. A demography summary was compiled from the intake form to determine the participant-program match. Delivering the program to the intended population is important to program’s success. The demography summary might also shed some light on factors that participants have in common apart from being fathers and having a history of domestic violence. If such common factors exist, they could influence the way the participants engage in and receive the program. It may also provide some insight into the retention of participants.

*Parenting logs* – Participants are asked to complete a parenting log prior the start of each session. The parenting logs are “meant to help them consider how the discussions and presentations directly relate to their experiences as fathers and to help them reach the goals that they set in group.” Therefore, a review of the parenting logs will determine how engaged the participants are in the program and if they understand the concepts being taught and are applying them in their homes.
CHAPTER 4: DATA ANALYSIS

The goal of the data analysis is to evaluate the implementation of program activities against the curriculum and the program as defined by curriculum developers during the interviews. This analysis seeks to determine if there were deviations from the prescribed program model and whether the deviations had any impact on the effectiveness of the program.

Each of the four adherence checklist categories was rated on a four-point scale: 1 (No Adherence), 2 (Least Adherence), 3 (Some Adherence) and 4 (Full Adherence). Scores were assigned based on adherence to the program model/plan with regard to each of the adherence checklist categories. A score of “4” requires a high level of fidelity to all components of the adherence category. For example, if the participants are representative of the target population, then the prescribed dosage of the curriculum was delivered and all of the curriculum sessions were implemented accordingly. A score of 3 indicates less than optimal adherence to the adherence category. For example, dose of the curriculum was less than what is described in the curriculum. A score of 2 denotes that there were deviations and/or omissions from the adherence category, for instance, facilitators omit the activities for specific sessions. An unsatisfactory score will be a result of consistent deviation from all aspects of the adherence component or being confrontational with participants.

A score was not assigned to the fourth category – Program Feedback - because it provides the curriculum developers and other stakeholders general feedback about the overall implementation of the curriculum. The remaining three categories reflect an independent rating. In addition, a total score of overall adherence is derived from the total of the three categories (e.g. scores will range from 4 to 12).
CHAPTER 5: RESULTS
5.1: RECRUITMENT

To achieve the outcomes of the Strong Fathers Program, it is important for the program staff to target the appropriate participants based on the eligibility criteria.

1. Design/Plan
   The Forsyth Department of Social Services (DSS), a partner of the FSI, will be referring men who have been identified by the child protective system (including foster care services) of Forsyth County as having a history of domestic violence and meet the program’s eligibility criteria. All participants will be screened by FSI prior to enrolling into the program. The Strong Fathers Program is expected to have at least 12 participants in each of the two cohorts in the first year of piloting the curriculum.

2. Purpose of Evaluation
   The purpose of the evaluation of recruitments is to determine how well the program is targeting the participants, to find out if there are recruitment barriers and to determine the effectiveness of the recruitment strategies.

3. Evaluation Activities
   The evaluation methods used were interviews with facilitators and curriculum developers, a focus group with the participants and document review.

   a. Interviews were conducted with facilitators and curriculum developers to determine the strategies used and challenges to reaching and recruiting participants for the program.

   b. A focus group with the participants was conducted to obtain feedback on the recruitment strategies.

   c. The intake forms were reviewed to determine if the demographic and background information of the participants matched the eligibility requirements.

4. Results
   The overall findings for recruitment included the program targeted the appropriate participants based on the eligibility criteria, there were barriers to reaching the participants, uncertainty of the future and the lack of buy in from the community.

   Targeting the appropriate participants
   Box 1 shows summary characteristics of the participants. The document review of the intake forms and focus group confirmed that the program is reaching its target population.
Recruitment barriers
The program was plagued by several barriers to recruitment which eventually delayed the start of the program. Recruitment was considered the biggest challenge by the facilitators and curriculum developers. Seven participants completed the intake process but only 1-3 participants attended sessions consistently. Only two participants completed the entire curriculum.

The referrals from the Forsyth DSS did not meet the target number of participants because the Strong Fathers Program is a cohort program. In a cohort program a group of participants are admitted into a program start and complete the program together. Therefore, when participants are referred after the start of cohort, they have to wait till the next cohort or program staff has to wait till they reach their target number of participants to start a cohort. The advantage to having a cohort program is that it provides continuity, support and a dynamic learning environment for participants. The program lost some participants because of the lag between when they were referred and when the cohort started. During the lag time, participants either lost interest in the program or program staff lost contact with the participants given the transient nature of the target population.

Furthermore, DSS case workers only referred participants whose cases were open because it was easier to maintain communication with the participants whose cases were

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**Box 1: Demography & Background Summary**

*General Information* - Seven participants completed the intake process for the first cohort. Participants ranged from 26 to 38 years. All participants were male; three were African American, two Caucasian and one Hispanic.

*Family/Relationship History* – Participants had at least one child with four children being the maximum. Two participants were separated from the mother of the child(ren) because of violence. Participants indicated that their relationship with their child(ren) was either getting better or good. When asked how they disciplined their children, participants indicated that they do not discipline their child(ren), talk and explain rule, time out, restrict to room or take away toys/TV/games.

*Educational History* – Two participants had their GED, two completed high school, two dropped out at tenth grade and one completed eleventh grade.

*Employment History* – Four participants were unemployed and the remaining three employed.

*Substance Abuse History* – Five of the six participants indicated that they have used either alcohol or other substances.
open rather than closed. When a person has a case opened, the individual usually has court-mandated requirements s/he is expected to complete. Not completing the requirements often results in a penalty. Therefore, it is easier to locate the individual during this time. Additionally, given that case workers are burdened with many cases and are liable for participants’ actions when their cases are open, case workers are more likely to close a participant’s case immediately after the person completes all departments required treatments than keep the case open while waiting for the start of a new cohort. Further, recruitment was limited to only Forsyth County. Due to these challenges, the program was opened up to neighboring counties’ DSS specifically Davie and Stokes. Participants also received incentives. Additionally, given that the Strong Fathers Program is voluntary, there is no leverage to retain participants in the program.

**Lack of buy-in from the community**
The poor results from recruitment may also arise from the fact that the Strong Fathers Program is new to the community of Winston-Salem, Forsyth County and lacks the buy-in from the community (county staff, churches, schools, social workers, etc.). Based on interviews with the facilitators, it is apparent that the community currently does not have information about the Strong Fathers Program and is not aware of the benefits of the program. The focus group results indicate that the participants had no information about the program except that their case workers had asked them to attend.

**Uncertainty of the Future**
The Strong Fathers Program currently has funding for only two cohorts making the future of the program uncertain. The uncertainty of the future of the program after the completion of the second cohort is impeding the facilitators’ ability to “sell” the program to and engage the community especially for the purposes of recruitment.

5.2: **DOSAGE**

Literature suggests that “participants’ adherence to the program (i.e. participants’ involvement in program activities) and dosage (participants’ attendance)” (Charlebois, et al. 2004) are critical to having successful outcomes. Also, research confirms a positive relationship between dosage and outcomes (Braswell, et al. 1997).

1. **Design/Plan**
The participants met once a week (Thursdays) for two hours for 20 weeks. The parenting log was completed each week by participants to document changes and their challenges as parents and to provide feedback about the previous session.

2. **Purpose of Evaluation**
The purpose of evaluating the dosage is answer two main questions: how many of the intended sessions were implemented and to what extent were the participants engaged in the program?
3. Evaluation Activities
To address the evaluation questions, document review of attendance reports and parenting logs, interviews with facilitators and curriculum developers, a focus group with participants and a session observation were conducted.

   a. Attendance reports were reviewed to determine if the participants were consistently attending the sessions.

   b. Parenting logs were reviewed to determine if the participants were applying the skills and strategies they were learning at home.

   c. Interviews with the facilitators and curriculum developers were conducted to provide an understanding of the order of the sessions of the curriculum and dosage.

   d. A focus group and session observation were conducted to determine the participants’ involvement/engagement in the program.

4. Results
Overall, dosage was implemented as prescribed and participants were fully engaged except for those affected by literacy concerns.

Prescribed dosage
As of March 11, 2010, the curriculum has been delivered weekly, 2 hours per session. Three participants had completed 12 of the 20 sessions. Facilitators had makeup sessions for participants who missed sessions.

Participation engaged in session
During the session observation, participants were overwhelmingly engaged in the discussion of the content for the day; they posed questions relevant to the session, treated each other respectfully, and identified anything that was unclear to them and asked for clarification and discussed/challenged other participants’ explanation. The participants discussed with the facilitators at the beginning of the session how they had been applying what they had been learning and challenges at home with their children. A participant who had missed the previous session requested a makeup session at the end of the session.

The parental log is meant to capture how the participants are applying the skills and strategies they are learning at home. However, it was challenging to capture that detailed information with the parental log because of the literacy levels of the participants.
Further, the participants had literacy challenges with other material handouts and activities.

Interviews with the facilitators indicated that there were a few sessions and activities\(^1\) that participants found challenging to relate to. *Session 4: Introduction to Child Development* session was difficult to implement because the content of the session was above the literacy level of the participants.

Another activity that some participants had a challenge applying to their lives was the “praise activity\(^2\).” Participants were hesitant to praise their child(ren) for fear of “spoil[ing]” their child(ren).

### 5.3: CURRICULUM DELIVERY

The curriculum delivery is a composition of the expectations and strategies for successfully implementing the content and the processes of the curriculum. Central to the implementation model is the curriculum itself – content - and the facilitator trainings – process. The curriculum contains the activities, handouts, and instructions for the facilitators.

1. **Design/Plan**
   The core characteristics of the implementation processes of the Strong Fathers Curriculum are 1) strengths based, 2) role play & practice, and 3) model good behavior.

2. **Purpose of Evaluation**
   The purpose of evaluating the curriculum delivery is to identify barriers to the delivery and to compare curriculum delivery to the curriculum procedures.

3. **Evaluation Activities**
   The evaluation methods used included the observation of a session, interviews with facilitators, a focus group with the participants, and a participant survey.

   a. The observation of a session allowed for an analysis of how the curriculum was being implemented at the site.

   b. The interviews with facilitators provided an understanding of how the facilitators were implementing the curriculum and explore their challenges in the delivery of the curriculum.

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\(^1\) As of the time of the report only 12 of the 20 sessions had been delivered.

\(^2\) The “praise activity” is Module 3 in Session #5: Parenting Skills: How to use praise as a Parent (Appendix F: The Curriculum). This module will provide an overview of the power of positive praise in changing child behaviors and how praise can enhance relationships between fathers and their children.
Interviews were also conducted with curriculum developers to find out how the curriculum should be delivered.

c. The focus group with participants and the participant survey provided an understanding of how the curriculum was delivered from the perspective of the participants.

4. **Findings**

Overall, the curriculum was delivered in the manner in which it was intended. The participants had a good rapport with the facilitators and seemed very comfortable with other participants and facilitators. The participants seemed very enthusiastic about the sessions.

**Following the implementation procedures**

The training went over the goals and objectives of the curriculum and the processes of implementing the curriculum. The facilitators had three training sessions, one session prior to the start of the program and two during the course of the program. The session observation and the focus group confirmed that the facilitators followed the prescribed curriculum procedures which were consistent with the core characteristics. The facilitators also used role playing to explain certain concepts.

During the session observation, the facilitators were very respectful and engaged each participant during the discussions and activities. The facilitators seemed very comfortable with the material and the participants. They engaged quiet participants by probing them with questions like “So what do you think <name of participant>?”

Facilitators had dinner with the participants prior to the start of each session. This was an opportunity to engage participants in conversation about their week and also model good behavior.

**Male vs. Female Facilitators**

The participants did not seem to have a problem opening up to the female facilitator neither did the female facilitator have any challenges engaging the men in the discussions. However, the male facilitator was able to share his challenges as a parent from a male perspective and how he is putting into practice some of the lessons they had discussed in previous sessions. He also participated in the Empathy exercise\(^3\) by drawing a picture through the eyes of his children. The participants seemed to appreciate his willingness to share his challenges with them. The female facilitator was able to provide the participants a woman’s perspective on topics. Participants sought the female

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\(^3\) “This exercise is designed to help participants see through their children’s eyes and develop a better understanding of how children can be affected by violence. The exercise is taken directly from the Fathering After Violence curriculum.”
facilitator’s advice or opinions when they had questions about parenting their female child(ren).

Delivery barriers

There were several barriers that were highlighted during the interviews with the facilitators and the focus group with the participants. The results indicated it was a challenge covering all the modules and addressing the needs of the participants in a 2 hour session. The session observation also confirmed the time constraint. Participants were very enthusiastic and engaged in discussions which sometimes diverted from the session’s topic. Despite the time constraints, both facilitators and participants indicated the session length should not be extended.

To address the time limit, the facilitators utilized the meal time to engage the participants and to find out how they were doing. The meal time puts the participants at ease, shows the participants that the facilitators care about them and it is also a time for the facilitators to model healthy environment.

The literacy level of the participants posed a challenge to facilitators in administering some of the activities and explaining the content of the curriculum to the participants. The education level of the current participants ranges from 10th grade to General Education Development (GED). Session 4: Introduction to Child Development was mentioned as particularly challenging to delivery because of the content and the literacy level of the participants. Participants had challenges comprehending the content.

Another barrier arose from the diverse population (race, regional, cultural) of the program. Consequently, there are cultural differences that consistently come up during the sessions. However, the curriculum does not address diversity or cultural differences that might influence parenting. Culture was mentioned by the facilitators to play an important role in the way the participants parent their children. However, the facilitators indicated that they do their best to address diversity issues and incorporate the cultural difference into their delivery of the curriculum. The ability to identify the issue of diversity and to address it shows the extensive experience of the facilitators with the target population.

5.4: PROGRAM FEEDBACK

This category provides additional understanding of how the curriculum was implemented from the perspective of the participants and facilitators. Participant satisfaction has been noted to have a significant impact on a participant’s response to a program. “If a participant is very satisfied with a program, s/he is more likely to feel a responsibility to change his/her behavior” (Bond, et al. 2009).
1. **Design/Plan**
   To achieve a change in the attitudes and behaviors of the participants, it is important that the program is implemented in the way it was intended. Therefore, participants need to understand the curriculum and the various curriculum activities and materials.

2. **Purpose of Evaluation**
   The purpose of gathering participant and facilitator feedback on the curriculum/program is to determine how well the participants understand the curriculum and to determine participant and facilitator satisfaction.

3. **Evaluation Activities**
   The evaluation methods include a focus group with the participants, a participant survey and interviews with facilitators.
   
   a. The focus group and participant survey capture how well the participants understand the program and measure how satisfied they are with different aspects of the curriculum.
   
   b. The interviews with facilitators provide feedback on the structure of the curriculum.

4. **Findings**
   Overall, the feedback on the implementation was positive.

   *Recruitment*
   The participants indicated that they first heard of the program from and were referred by their caseworkers. However, the participants indicated during the focus group that they did not know much about the program or receive much information about the program except that it would improve their parenting skills and improve the relationship they have with their children.

   Participants indicated during the focus group that the program was definitely meeting their expectations. One participant indicated that initially he “thought it was a waste of his time, but it wasn’t.” He went on to say he has learned a lot that has helped with his relationship with his son.

   *Program Logistics*
   Participants were asked to provide their feedback on the accessibility of the program site and the timing. The program was initially held at Union Baptist Church in Winston Salem instead of the FSI because there was not a space available at FSI. The program was later relocated to the FSI on March 4, 2010 because of the small size of the cohort. Both participants in the focus group indicated that the locations were easy to get to but
they provided conflicting responses regarding their awareness that Family Services provides free rides and money for gas/bus fares.

Facilitators spoke about the challenges of finding an appropriate off-site location. They mentioned that despite securing Union Baptist Church, it was sometimes challenging because the sessions were held in a different room each week. They indicated that it would be better to have the sessions at the FSI. Since March 4, 2010, the Strong Fathers Program has been held at the FSI.

Participants indicated that they preferred meeting once a week and that the length of the session (2 hours) is adequate.

**Box 2: Focus Group Summary**

*Recruitment*

Participants were referred by their caseworkers but were not given much information about the Strong Fathers program at the time of referrals. The main reason given by participants for enrolling in the program was to improve their relationship with their children and to be better fathers. Participants indicated that the program meet their expectations.

*Facilitators*

Participants spoke highly of the facilitators. Facilitators were described as “good people”, respectful, kind, and knowledgeable. Participants said facilitators were “pretty decent to me and my family” and “they [facilitators] help me to open my eyes to a lot of things that I couldn’t see at first, but now I see.” The gender of the facilitators did not make a difference to the participants. A participant with female children indicated that the female facilitator provided female perceptions on issues during sessions.

*Program*

Overall, the participants were pleased with the program and would recommend it to friends and family. Participants indicated the following sessions 3, 5, 6, 8, 9, 10, 11 & 12 were very useful. They also found the role playing, “praise activity” and “how to ignore activity” very valuable in relating to their children. Substance abuse was mentioned by participants as topic that should be included in the curriculum.
Participants were very pleased with and spoke highly of the facilitators during the focus group. The participants “strongly agreed” that the facilitators treated them with respect, respected their privacy, had a good relationship with the facilitators, the facilitators communicated with them in a way that they understood and were sensitive to their cultural/ethnic background. However, participants “agree” and “mildly agreed” that facilitators were able to find services that addressed their needs.

When asked about their views on having a female and male facilitator, participants indicated that it made no difference to them. They appreciated having a female facilitator because they were able to learn things from a female’s perspective. A participant who had female children added that it was great to have a female to talk to about his challenges parenting his female children.

Participants also indicated that facilitators were willing to have makeup sessions when they missed a session.

The Curriculum: Participant Feedback

The participants indicated that the curriculum is very insightful and particularly found the following sessions very valuable:

- Session 3: How do I parent my children now,
- Session 5: Parenting skills: how to use praise as a parent,
- Session 6: The impact of violence,
- Session 8: Parenting skills: how to give good directions and use positive attention and ignoring,
- Session 9: Getting support,
- Session 10: Parenting with your children’s mother,
- Session 11: Parenting skills: practicing praise,
- Session 12: Building trust and talking to your children about violence,

Participants found role playing, ignoring a child and the empathy exercise - drawing pictures of themselves (participants) from the perspective of their children - very helpful.

Participants indicated that the curriculum taught them many lessons about parenting and the impact of violence on their children. They were appreciative of having other participants in the group because it was an opportunity to learn from other participants’ experiences, which made them realize that they were often similar to their own experiences. They indicated that it was helpful because they realized they are not alone in their struggles.

Participants strongly agreed that they were satisfied with the number of times they had to attend the meetings, that the handouts and other materials were easy to read and understand and that facilitators used practical examples during their meetings. Participants were split on whether the handouts and other materials were useful.
The curriculum does not have a session on substance abuse but the participants indicated that there should be a session on the substance abuse in the curriculum.

*The Curriculum: Facilitators Feedback*
Facilitators mentioned in their interviews that the participants “enjoyed sessions and hate to miss sessions.” They spoke of a participant, who came by the site just to let the facilitators know he could not attend the session that night despite not owning a car. Another participant mentioned to the facilitators that he “doesn’t know what he would have done without the program.”

Facilitators mentioned that the curriculum did not address diversity issues (geographic locations, race, ethnicity or gender). However, the facilitators did their best to address the diversity issues that came up during sessions. They also suggested including a session or activity on myths about relationships and parenting. Facilitators had to explain to participants that differences are not bad. Given the participants’ levels of education, the facilitators suggested that the literacy level of participants should be considered when designing and developing materials/handouts/activities.

In comparison to the Time-Out, the facilitators mentioned that the Strong Fathers Program is more nurturing and focuses on building relationships. However, Strong Fathers Program has some sessions that require facilitators to confront participants about their abusive behavior but the approach is more gradual especially the partner violence session. Further, participants feel like they do not have to own up to much especially in their relationships.

The facilitators indicated that the key to success in the program is the participant’s willingness to change. They also attributed attrition to participant’s willingness to change.
CHAPTER 6: DISCUSSION

The implementation analysis of the Strong Fathers program suggests that the overall fidelity of the implementation of the curriculum was moderate. The total score for the overall adherence is derived from the total of three categories is nine out of twelve. However, because of the lack of the comparison group, the results from this study should be viewed as descriptive (McHugo, et al. 2007). Furthermore, there is limited research on interventions for fathers with violent pasts to which these results may be compared.

The curriculum was implemented successfully based on the curriculum delivery model and was found to have high fidelity to the original goal. However, dosage and recruitment were found to have moderate and poor fidelity respectively.

Despite the program having a high fidelity to curriculum delivery, low recruitment numbers may make the outcomes less generalizable to the target population. Additionally, the low number of participants who completed the program may raise questions about the validity of conclusions drawn by the outcome evaluation (Prinz, et al. 2001).

Recruitment—Score 2 (Least Adherence)

Recruitment is a crucial component of program effectiveness and thus not achieving the recruitment goal of a program can limit the ability to evaluate the program and make it less generalizable (Dumka, et al. 1997). However, of the three categories, recruitment achieved the lowest score of 2 (least adherence). The program faced major challenges regarding recruitment and the subsequent retention of all program participants through all 20 sessions.

First, the program was not able to meet its recruitment goal of 12 participants per cohort. Instead, there were only seven participants who completed the intake process after being referred by their caseworkers. The low recruitment rates may speak to the feasibility of the recruitment strategies and the appeal of the program to potential participants (Prinz, et al. 2001).

Second, of the seven participants who completed the intake process only two completed the entire program. This result brings to light the challenge of retaining participants during the 20 weeks of the program. Research indicates that “significant attrition over time can erode the impact and value” of an intervention “by diminishing exposure to intervention” (Prinz, et al. 2001).

In addition, the program did not keep its original target area of Forsyth County for the recruitment of participants because of the limited referrals from the Forsyth County DSS. Despite the fidelity being low in terms of maintaining the initially stated target area, expanding the recruitment efforts to neighboring counties might be helpful to reach the target cohort size for the program since the program uses the cohort format. However, transportation might be a challenge for participants who live in the neighboring counties who will have to commute to the sessions. The Strong Fathers program therefore provides transportation incentives to curb transportation issues of participants.
Dosage – **Score 3 (Some Adherence)**

Despite having only two participants complete the first cohort; the dosage goal of a 2 hour session once per week for 20 weeks was accomplished. Facilitators held a session even if only one participant was in attendance. Additionally, the suggested goal of delivering all of the modules per session was reached most of the time. However, the facilitators delivered the critical modules each session as prescribed by the program developers when time was an issue.

The low attendance and the limited completion of the parental logs reduced the dose received by the target population. This outcome may be a result of the challenges discussed earlier in Chapter 5, the literacy levels of the participants and the reluctance on the part of some participants to adapt certain skills. Participants engaged facilitators in lengthy discussions during sessions about their challenges and how they were applying the skills they were learning. Their parenting logs however, did not capture most of what they discussed with facilitators because of literacy challenges. Participants completed the parenting logs during sessions. The low attendance might also suggest that the people who completed the program are systematically different from the participants who did not complete the program. Further, research will need to be completed to determine if a difference exists and what the difference is.

Research suggests that curricula that focus on changing attitudes of individuals have the challenge of getting participants to adapt the new skills, regardless of how well the curriculum is delivered it is up to the individual to make the change in his/her life (Lipsey and Cordray 2000). The program however, had measures such as role playing and other activities incorporated into the curriculum to encourage participants to apply the new skills they learn.

**Curriculum Delivery – Score 4 (Full Adherence)**

The findings from the data collection suggests that the fidelity of the curriculum delivery is high, thus, the score 4 – full adherence. The curriculum was delivered the way it was intended and was consistent with the core characteristics of the curriculum delivery model. The successful implementation of the curriculum seems to be a result of having well trained facilitators and facilitators with extensive experience working with the target population. The training of the facilitators and follow up by program developers appeared to be effective in allowing facilitators to implement the curriculum. Fidelity to the curriculum delivery model is essential as it has a positive relationship to the participant outcomes.

**Curriculum Feedback**

The feedback from participants and facilitators provided the program developers with important information about the curriculum and its implementation. Program developers may use the information to revise training of facilitators and/or to modify the curriculum and its activities.
CHAPTER 7: RECOMMENDATIONS

Recruitment

The following recommendations are aimed at improving the recruitment of the Strong Fathers program to increase participation in the program. Facilitators indicated during interviews that they were implementing some of the recommendations.

1. **Develop strategies to guarantee the future of the program**

Like any other state or federally funded program, the program’s future is always uncertain. To alleviate program staff’s concerns, it is important that program developers keep program staff and caseworkers informed about plans and/or strategies to sustain the future of the program.

2. **Develop partnerships with caseworkers**

Successful recruitment and retention of any program requires that the target population sees their participation in “the program important and personally worthwhile” (Dumka, et al. 1997). However, when a program is solely dependent on referrals, it is essential for the entity making the referrals to recognize the importance and benefits of the program to the referrals. As the referral source for the Strong Fathers program, the DSS caseworkers are very important to the success of the program because they provide the first impression of the program to potential participants.

Caseworkers should be educated on what the program is about and most importantly what the program is not. It is also crucial to communicate to the caseworkers that the program is strength-based. The program is not about rectifying fathers’ deficiencies, but to encourage them to become more confident as parents, learn ways to reduce stress and become role models for their children (Dumka, et al. 1997). In addition to the caseworkers, it is important to engage the directors of the DSS offices. With the buy-in of the directors of the DSS offices, the program is more likely to also get buy-in from the caseworkers because the directors have an influence on the procedures of the caseworkers. Given the busy nature of the caseworkers’ work schedules, program staff can schedule lunches with caseworkers quarterly or semi-annually or request to participate in regular DSS meetings at the local DSS offices to discuss the challenges faced by caseworkers and to re-emphasize the importance of the program. Additionally, program staff should maintain constant contact with the caseworkers and the local DSS offices.

More information should be provided to participants at the time of referral. The information should be conveyed by both word of mouth from the caseworkers as well as promotional materials that emphasis the importance of the program and the benefits to participants and their child(ren) and families.
Promotional material should also be made available to the caseworkers and the local DSS offices. The promotional materials should convey the importance of the program to the target population and make clear that the program is personally worthwhile. Additionally, the promotional materials should be culturally sensitive and reflect the diversity of the community. The promotional materials could include pamphlets, postcards and information sheets.

3. **Develop partnerships with the community**

Despite the program’s being dependent on referrals from the local DSS offices, it is important to gain support from the community at large. Community buy-in is crucial to the effectiveness of the program.

Program staff should continue to engage various stakeholders like religious communities, schools, court system, etc. and by attending various meetings like DSS meetings, town council meeting, etc., conferences and other events in the community and distribute promotional information about the program. In addition, program staff and developers should create a community advisory board (CAB) within the community. The CAB should be open to all stakeholders in the community including the participants of the program. The purpose of the CAB will be to inform the community about the program, advise the program staff and developers on best ways to engage stakeholders and provide support.

4. **Expand Reach**

Since the Strong Fathers Program utilizes a cohort model, recruitment will continue to be a challenge with Forsyth DSS as the only referral source. Therefore, the reach of the program needs to be expanded to neighboring counties. Program staff should continue to engage DSS offices of neighboring counties. Program staff and developers can utilize FSI networks in Stokes and Davies Counties since FSI serves families in those counties.

5. **Participant Follow Up**

The results indicated that some participants are lost between when they are referred and when the program starts. The lag time between being referred and the start of a cohort is crucial and requires intense follow-up and contact with participants. Research further indicates that it is important to have the same program staff maintain contact with participants (Yancey, Ortega and Kumanyika 2006). Program staff will need to develop trust and rapport with participants during the gap period to ensure that they attend sessions once the cohort starts.
Participant follow-up should also continue during the course of the program. Another strategy is to incorporate the buddy system into the program. Program staff can pair up participants to update each other and hold each other accountable. Additionally, program developer should formally develop retention strategies with facilitators and the CAB.

**Dosage**

1. Framing of activities

To enhance participation in the activities and the program, the literature suggests allowing participants to customize a discipline/parenting plans by targeting an issue of the father’s choice (Dumka, et al. 1997). Packaging skills in a customized plan will allow participants to see the benefits of the skills they might be reluctant to apply.

2. Literacy

Curriculum activities/handouts should be modified to reflect the literacy levels of the participants. This adjustment will encourage participant involvement in activities.

**Curriculum Feedback**

1. Incorporate diversity

Program developers and facilitators should discuss the best ways to incorporate culture and diversity into activities and other handouts in the curriculum. Research indicates that cultural adjustments to the curricula “may positively influence participation and retention” in a program (Yancey, Ortega and Kumanyika 2006).

2. Literacy

Curriculum activities/handouts should be modified to reflect the literacy levels of the participants. It is essential that participants are able to comprehend the materials they are presented with to achieve the positive outcomes.
CHAPTER 8: CONCLUSION

Successfully engaging fathers to participate in a voluntary program like the Strong Fathers program is challenging. However, having the community’s support may encourage greater participation in the program. Research indicates that the framework upon which the Strong Fathers program is built is effective at causing participants to renounce their negative attitudes and adapt new strategies and skills (Arean n.d., Day, et al. 2009, Family Services Inc. 2007)

The implementation analysis findings contributes to the understanding of methods and challenges of implementing programs/interventions that target fathers who have used violence in their past. The findings in this report are important to program developers, domestic violence advocates and the community at large because it sheds light on the impact of successful implementation on program outcomes. The information may inform the modification of the program for future cohorts.
Bibliography


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APPENDIX A: CURRICULUM DEVELOPERS INTERVIEW PROTOCOL

Program History

1. How did the program get started?
   a. Who were the key players?
   b. What were their motivations and intentions?
   c. Who designed, developed the program/curriculum?

2. What problems, if any, were encountered in gaining acceptance of the program by partners, staff or community? How were these solved?

3. Was a formal or informal needs assessment conducted prior to beginning the program? If so, who conducted the needs assessment, what was its starting point? If not, how were needs determined?
   a. Who determined the needs? Program developers? Local citizens? How and why did they become involved?
   b. How were the needs of the participants identified? Survey? Focus Groups? Disturbing event?
   c. Were the opinions of experts solicited?
   d. What specific needs guided program development? What priorities were determined? By whom and how? How were these needs translated into goals or objectives for the program?

Program Goals and Objectives

1. Why do you think the various program materials and activities of the Strong Fathers Program (SFP) will lead to the achievement of program goals? Are the facilitators aware of this rationale?

2. What generally was the program designed to accomplish?

3. What are the objectives of the program? How were they selected? By whom?
   a. Were the established needs or priorities used as a basis for developing objectives?
   b. What was the review process for the objectives before their inclusion in the program? Are the objectives realistic?
   c. Do the objectives on the program activities (what the program will do), on intended outcomes (what participants will learn), or on both?

4. Are specific evaluation activities in the objectives?

Program Facilitators

1. Are facilitators required to have special backgrounds? If yes, what background or credentials?
2. What process was used for selecting the facilitators?

3. What procedures were used for training facilitators? Was the training adequate? How did you determine that?

4. Why a male and female facilitator?

**Program Participants**
1. For what participants was the program designed for?

2. On what basis are the participants selected?

3. How does the selection process work?

4. What is successful completion of the program?

5. In what ways are the participants grouped?

6. How many participants per cohort?

7. What are the recruitment strategies?
   a. Why did you choose these methods of recruitment?

8. What are the retention strategies?
   a. Why did you choose these methods of motivating the participants?

9. How participants screened for domestic violence?

10. How are participants monitored once they are in the program?

**Program Characteristics**
1. What is the program suppose to look like?
   a. How highly prescribed is the program implementation?
   b. How much is the program allowed to vary?

2. Are there periodic reviews to ensure the program is being implemented as planned?
   a. Are these reviews done internally or do they include outside assistance?
   b. What techniques are used to monitor or modify program operations on a day-to-day basis?
   c. What reports must be submitted and to whom?

3. What program materials were developed? Are program materials available?
4. What are the program delivery methods?

5. How is the program assessed?
   a. Facilitators
   b. Participants

6. What are the influences on the curriculum?

7. What is the program/curriculum model?
   a. What theories underline the Strong Fathers Program?

8. Did your program adopt any specific curriculum models?
   a. Did you adopt the entire model?
   b. Why did you leave those parts/sections out?

9. How did you design the curriculum sections and activities?

10. What is the reason behind the order of the sections?

11. What materials are used and how?

12. Where special materials developed or adapted for the program, who this, and when?

13. Why is the curriculum 12 sessions?

**Program Activities**

1. How do the activities fit the program’s state goals and objectives?

2. What are the critical activities that make up the program?

3. Are sources of information available on these activities?

4. What procedures were prescribed for the facilitators?

5. What does the comparison group look like?
   a. What are the eligibility criteria?
   b. How are the participants recruited?
   c. What curriculum is used?
   d. What are the activities?
   e. Are the comparison participants grouped in the same way as the program participants?
   f. What are the important differences in the activities of the comparison group and the activities of the program group? Materials, Facilitators and Facilities?
6. How do participants receive feedback about their individual progress?

7. How often do participants have to meet?

8. How do you define successful completion of the Strong Fathers Program?
   a. Do you have to complete all the sessions?

Works Cited
APPENDIX B: INTERVIEW QUESTIONS: FACILITATORS

Curriculum Implementation

The next questions are about the implementing the Strong Fathers Program.

1. Were there challenges in implementing the curriculum at your site? If yes, what were the challenges in implementing the curriculum at your site?

2. How did you overcome these challenges?

3. Which curriculum sessions and/or curriculum activities were most valuable to the participants?

4. Were any of the curriculum sessions and/or curriculum activities difficult for the participants to relate to?

5. What was the general feedback from participants?

6. What are the differences in the implementation of the Strong Fathers Program vs. the Time-Out program?

7. Are there differences between the type of participants in the Strong Fathers Program vs the Time-Out program?

Recruitment

1. Did you have challenges recruiting the participants?

2. What were the challenges?

3. How did you address the challenges?

4. Did recruitment improve?

Retention

1. What barriers prevented curriculum participants from attending/completing curriculum session?

2. Did you provide any assistance to help the participants overcome these barriers to participation?
Support for Participants

The next questions inquire about any referrals or support/assistance that was provided to participants while enrolled in the Strong Fathers Program. E.g. Childcare, Transportation, Job Assistance

1. What kinds of referrals or assistance did you provide or make to participants?

2. Did you provide incentives?

The next few questions will ask you to think about the Strong Fathers Program more generally.

1. Is there anything you would like to change about the curriculum structure?

2. Are there any topics/sessions you would like to see added to the curriculum?

3. Are there any topics/sessions you would like taken out?

4. Is there anything else about the Strong Fathers Program, you would like to share?
APPENDIX C: FOCUS GROUP PROTOCOL

The focus group will be conducted at the end of one of session (TBD) and will be facilitated by Nanette Antwi-Donkor and a Family Service Inc. employee who is not a facilitator of the Strong Fathers Program. The focus group will be recorded for later analysis. The audio recording of the focus group will be saved on secured data encrypted server at the Center for Family and Community Engagement. All results of the analysis will be shown in an aggregate format.

- Welcome the participants
- Introduce the facilitators
- Explain the purpose of the focus group
  - Read confidentiality agreement
- Conduct focus group discussion
- Thank participants
Focus Group Script

Date: ____________________________

Time: ____________________________

Location: ________________________

Number of men: __________________

Introduction

Welcome and thank you for coming today. I am Nanette, Today I will be running a focus group with you to determine in the Strong Fathers Program is being carried out the way that it was intended. The results from this focus group will be used to make general recommendations about improving the Strong Fathers Program for future participants. <Co-Facilitator>, from Family Services, will be assisting me tonight during our discussion.

I am handing out some information, for you to keep, to give you some more details about this focus group. Your participation is voluntary. If you do not wish to participate, you are excused from this group meeting. If you decide later that you do not wish to participate, you may stop at any time without penalty. By participating in the focus group you are agreeing to participate in this study. The focus group should take approximately 1 hour. First, you will be asked to complete a short 5-10 minute survey. Second, you and the other participants will be asked to answer some questions. The focus group will be audio recorded to have a record of your comments. The audio recording of the focus group will be stored on a secure computer that is accessible only to the research team at the Center for Family and Community Engagement (CFFACE) at North Carolina State University.

Ground Rules

- As part of your participation in this focus group you are asked to respect the privacy of all of the group members and to not repeat any comments outside of the focus group.
- There are no right or wrong answers. People may disagree, and that’s OK. We want to hear both positive and negative comments—whatever you want to share. Please try not to talk over each other so we can hear all opinions clearly on the recording.
First, I would like you to fill out a short survey. When it is completed please return it to me. Once this is completed I will ask you some questions.

To start, please tell me your first name.

Recruitment

Let’s start by talking about how you found out about the Strong Fathers Program

- Who first suggested that you come to the program and why did they want you to go to it?
- Did you feel coming to this program was something you had to go to?
- What is your main reason for attending this program?
- What did you know about the program before you attended?
- Is the program meeting your expectations? What were you expecting?
- Are there any programs like the Strong Fathers Program you could have gone to instead?

Facilitators

Let’s talk about your experiences with the facilitators up to this point

- How has your experience with the facilitators been so far?
- Do you feel the facilitators care about you as a person?
- What specifically stands out in your mind about the facilitators?
- What has it been like for you having a male and a female as the facilitators?

Program

Now let’s talk about the Strong Fathers Program. (Hand out the list of sessions)

- Which topics or sessions did you find the most useful? (with your children/with their mother)
- Did the subject of alcohol or drugs ever come up during the program? How was it talked about when/if it did?
- In the future, how much should a group on fathering focus on alcohol and drugs? (e.g. one session, throughout the program as it comes up)
- What else would you have wanted to be covered in the group?
- Do you have any suggestions on how to improve the Strong Fathers Program?
- What has it been like for you being in a group with other fathers?
- Based on your experience thus far will you recommend this program to another father/friend?
- Is there anything else you would like to add?
Thank you for taking the time to share your experience and opinions with us.
APPENDIX D: PARTICIPANT SURVEY

Your opinion is very important to help improve the Strong Fathers program. We ask you to complete this survey honestly.

The survey should take approximately 15 minutes to complete.

Getting to Meetings

1. Family Services Inc.’s location is easy for me to get to. (Please circle your answer)

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Mildly Agree</th>
<th>Mildly Disagree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
</table>

2. I was aware that Family Services Inc. provided rides to the meetings.  
☐ Yes  ☐ No

3. I received free rides from Family Services Inc. to the meeting.  
☐ Yes  ☐ No

4. I was aware that Family Services Inc. provided money for gas/bus fare to the meetings.  
☐ Yes  ☐ No

5. I received money from Family Services Inc for gas/bus fare to the meeting.  
☐ Yes  ☐ No

Timing

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Mildly Agree</th>
<th>Mildly Disagree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
</table>

1. The timing of the meetings is convenient for me.

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
</tr>
</thead>
</table>

2. I would prefer to meet on a weekday.

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
</tr>
</thead>
</table>

3. I would prefer to meet on a weekend.

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
</tr>
</thead>
</table>

4. I prefer meeting once a week.

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
</tr>
</thead>
</table>

5. I would prefer to meet more than once a week.

| 1 | 2 | 3 | 4 | 5 | 6 |
6. I would prefer to meet at a different time. (Please circle your answer)

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Mildly Agree</th>
<th>Mildly Disagree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
</table>

(If you agree, please check which time)

- Early morning
- Late morning
- Early afternoon
- Late afternoon
- Early evening
- Late evening

7. The meetings are too long.
   - Yes
   - No

8. The meetings are too short.
   - Yes
   - No

9. The meetings are just right.
   - Yes
   - No

Attendance

1. The environment at Family Services is comfortable. (Please circle your answer)

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Mildly Agree</th>
<th>Mildly Disagree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
</table>

2. I have missed a meeting.
   - Yes
   - No (If no, please skip to next section: Program Staff)

3. The facilitators contacted me when I missed a meeting
   - Yes
   - No

4. The facilitators offered/referred me to get assistance so I could attend the next meeting
   - Yes
   - No
5. The facilitator went over what I missed with me
   □ Yes  □ No

**Program Staff**

*(Please check one answer per question)*

<table>
<thead>
<tr>
<th></th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Mildly Agree</th>
<th>Mildly Disagree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The facilitators treated me with respect</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>2. The facilitators respected my privacy</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>3. I have a good relationship with the facilitators</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>4. Facilitators spoke with me in a way I understood</td>
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<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>5. Facilitators were sensitive to my cultural/ethnic background</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>6. Facilitators were able to find services that addressed my needs</td>
<td>1</td>
<td>2</td>
<td>3</td>
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<tr>
<td>7. I was satisfied with the number of times I had to attend the meetings</td>
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<td>2</td>
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<tr>
<td>8. The handouts and other materials that I was given were easy to read and understand</td>
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<td>6</td>
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<tr>
<td>9. The handouts and other materials were useful</td>
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<td>6</td>
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<tr>
<td>10. The facilitators used practical examples during our meetings</td>
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</table>
APPENDIX E: OBSERVATION PROTOCOL

Background

Date: ____________________  Length: ____________________

Location: ____________________  Number of men: ____________________

Session objectives

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Session activities

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Major activities observed

☐ Facilitator introduction, instructions, statement of objectives

☐ Review of previous session

☐ Recap of session

☐ Wrap up of session
Observations

To what extent did most or all participants in session do the following?

Three point scale: 1 (not at all), 2 (to some extent) and 3 (to a great extent)

<table>
<thead>
<tr>
<th>Engagement of Group Participants</th>
<th>3</th>
<th>2</th>
<th>1</th>
<th>N/A</th>
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</thead>
<tbody>
<tr>
<td>1. Engaged in activities</td>
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<td>2. Engaged in group discussions</td>
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<tr>
<td>3. Treated each other respectfully</td>
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<td>4. Stayed on task during the session</td>
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<td>5. Posed questions relevant to the session</td>
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<tr>
<td>6. Identified anything unclear to them</td>
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<tr>
<td>7. Exchanged ideas related to session with peers and facilitators</td>
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<tr>
<td>8. Discussed/Challenged others’ explanations</td>
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<td>9. Made connections between content and personal life</td>
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<tr>
<td>10. Appeared to be engaged with lesson content</td>
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</table>

Facilitators

<table>
<thead>
<tr>
<th>Facilitators</th>
<th>3</th>
<th>2</th>
<th>1</th>
<th>N/A</th>
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</thead>
<tbody>
<tr>
<td>1. Conducted/facilitated activities as planned</td>
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<tr>
<td>2. Achieved objectives as stated</td>
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<tr>
<td>3. Treated participants respectfully</td>
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<tr>
<td>4. Engaged all participants</td>
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<tr>
<td>5. Made sure that participants stayed on task during the session</td>
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<tr>
<td>6. Provided opportunities for questions</td>
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<tr>
<td>7. Encouraged participants to explain their understanding of concepts</td>
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<tr>
<td>8.</td>
<td>Encouraged participants to explain in their own words both what and how they learned</td>
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<tr>
<td>9.</td>
<td>Routinely asked for participant input and questions</td>
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<tr>
<td>10.</td>
<td>Encouraged input and challenged participants’ ideas</td>
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<tr>
<td>11.</td>
<td>Was non-judgmental of participant opinions</td>
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<td>12.</td>
<td>Confrontational with participants</td>
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<td>13.</td>
<td>Helped participants confront and/or build on their ideas</td>
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<td>14.</td>
<td>Refocused lesson based on participant ideas to meet needs</td>
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<tr>
<td>15.</td>
<td>Provided examples</td>
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<tr>
<td>16.</td>
<td>Applied content to real-world situations</td>
<td></td>
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<tr>
<td>17.</td>
<td>Was able to field participant questions in a way that encouraged more questions</td>
<td></td>
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<tr>
<td>18.</td>
<td>Recognized participants’ ideas even when vaguely articulated</td>
<td></td>
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</tbody>
</table>

Adapted from [www.neirtec.org/evaluation](http://www.neirtec.org/evaluation)
### APPENDIX F: THE CURRICULUM

<table>
<thead>
<tr>
<th>Session Number</th>
<th>Session Name</th>
<th>Objectives</th>
<th>Modules</th>
<th>Materials</th>
<th>Duration</th>
</tr>
</thead>
</table>
| 1              | Introduction To The Program | 1. To understand the goals of the program and the process they will be undertaking for the next 20 weeks, including research activities.  
2. To establish baseline knowledge and attitudes.  
3. To develop group norms for good group interactions.  
4. To share information about current family composition and family of origin. | 1: Overview of the Strong Fathers Program  
2: Development of Group Norms  
3: Strong Fathers Pretest  
4: Family Make-up: Past and Present  
5: Contact with Children Questionnaire  
6: Something My Father Would Do! Video  
7: Check Out: Cheerleader PSA | • Something My Father Would Do! Video (15 minutes)  
• Public Service Announcement: —Cheerleader (2 minutes)  
• Flip Charts and Markers  
• Strong Fathers Pretest  
• List of Class Dates  
• Contact with Children Questionnaire  
• Family Tree Handout | 20 min  
15mins  
15mins  
20mins  
10mins  
20mins  
10mins |
<table>
<thead>
<tr>
<th>Session Number</th>
<th>Session Name</th>
<th>Objectives</th>
<th>Modules</th>
<th>Materials</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Generational Patterns</td>
<td>1. To gain a basic understanding of how participants' experiences as children can influence their current parenting practices 2. To assess the extent to which participants have made an effort to emulate their parents’ parenting practices or how much they have purposefully tried to avoid them 3. To identify three or four goals that will be revisited throughout the program 4. To gain a basic understanding of the rationale and use of the <em>Weekly Parenting Log.</em></td>
<td>1: Check In &amp; Review Session 1 2: Discussion Of Parenting Questions 3: Development Of Goals 4: Orientation to Weekly Parenting Log 5: Check out &amp; homework</td>
<td>• <em>Goal Setting Worksheet</em> • <em>Sample Goals Handout</em> • <em>Weekly Parenting Log</em></td>
<td>5mins 55mins 35mins 10mins 5mins</td>
</tr>
<tr>
<td>Session Number</td>
<td>Session Name</td>
<td>Objectives</td>
<td>Modules</td>
<td>Materials</td>
<td>Duration</td>
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</tbody>
</table>
| 3              | How Do I Parent My Children Now? | 1. Describe how their feelings toward their own fathers are similar or different from their children’s feelings toward them  
2. Describe four different parenting styles  
3. Identify which of the four parenting styles best describes their current method of parenting  
4. Explain how different parenting styles may impact children’s behavior, mental health, and future outcomes | 1: Check In, Complete Parenting Log, Review Session #2  
2: Fathering Circles  
3: Parenting Styles  
4: Check Out & Homework (Assign Weekly Parenting Log) | • Fathering Circles handouts (3 different handouts)  
• Weekly Parenting Log  
• Parenting Styles Matrix Handout  
• Parenting Styles Examples Handout | 15mins  
30mins  
60mins  
10mins |
<table>
<thead>
<tr>
<th>Session Number</th>
<th>Session Name</th>
<th>Objectives</th>
<th>Modules</th>
<th>Materials</th>
<th>Duration</th>
</tr>
</thead>
</table>
| 4              | Introduction to child development                | 1. To gain a basic understanding of normative child development  
2. To identify at least three age-appropriate expectations for their children                                                                                                                                                                                                                                   | 1: Check In, Complete Parenting Log & Review Session 3  
2: Pretest on Child Development  
3: Didactic on developmental stages and expectations  
4: Check out & homework                                                                                                           | • Flip Chart and Markers  
• Pretest on Child Development  
• Weekly Parenting Log  
• Audio CD of Crying Baby and Cooing Baby  
• Handouts:  
  ○ Bonding with your Baby  
  ○ Troubleshooter’s Guide to Crying Babies  
  ○ Tips for Dads: Playing with Children  
  ○ Ten Ways to be a Better Dad  
  ○ Health Check Birth-to-Six Activities Wheel                                                                                       | 15mins  
15mins  
70mins  
10mins |
| 5              | Parenting skills: How to use praise as a parent   | 1. To identify at least one behavior they can praise in their children  
2. To describe how praise can change child behavior                                                                                                                                                                                                                              | 1: Check In, Complete Parenting Log & Review Session 4  
2: Review child development  
3: Learning to Praise  
4: Check out & homework                                                                                                           | • Flip Chart and Markers  
• Parenting Log  
• Handouts:  
  ○ Praise Can Be Powerful  
  ○ Examples of Praisable Behaviors                                                                                                                                                                                                 | 15mins  
20mins  
60mins  
15mins |
<table>
<thead>
<tr>
<th>Session Number</th>
<th>Session Name</th>
<th>Objectives</th>
<th>Modules</th>
<th>Materials</th>
<th>Duration</th>
</tr>
</thead>
</table>
| 6              | The impact of violence       | 1. To review Session #4 material on normative child development.  
2. To gain an understanding of how the developmental tasks that were described during Session #4 are impacted by domestic violence.  
3. To understand the impact that domestic violence can have on both partners’ ability to parent.  
4. To define child maltreatment.  
5. To increase empathy for children exposed to domestic violence. | 1: Check In, Complete Parenting Log & Review Session 5  
2: Review child development  
3: Impact of Domestic Violence on Child Development  
4: How Parenting is Affected  
5: Check out & homework | • Parenting Log  
• Handouts:  
  o Post Test Child Development, Facilitator's Copy  
  o Common Beliefs and Myths  
  o Age-Specific Tasks and Impact of DV  
  o Impact on Parenting Handout | 15mins |
|                |                               |                                                                                                                                                                                                            |                                                                         |                                                                           | 35mins   |
|                |                               |                                                                                                                                                                                                            |                                                                         |                                                                           | 25mins   |
|                |                               |                                                                                                                                                                                                            |                                                                         |                                                                           | 30mins   |
|                |                               |                                                                                                                                                                                                            |                                                                         |                                                                           | 5mins    |
| 7              | The Impact Of Violence,      | 1. To develop empathy for children affected                                                                                                                                                               | 1: Check In, Complete Parenting Log & Review Session 6                 | • Crayons and Drawing Paper for each participant                          | 5mins    |
|                |                               |                                                                                                                                                                                                            |                                                                         |                                                                           |          |

52
| Part II | by domestic violence. | 2: Empathy Exercise | • Goal Setting Handout  
• 2 sets of 5 Laminated Children’s Drawings (one with text and one without)  
• Parenting Log |
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td></td>
<td>2. To understand the impact of domestic violence on children.</td>
<td>3: Goal Setting</td>
<td>75mins</td>
</tr>
<tr>
<td></td>
<td>3. To review their progress towards established goals and consider revising and adding goals.</td>
<td>4: Check out &amp; homework</td>
<td>10mins</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>5mins</td>
</tr>
</tbody>
</table>
| 8 | Parenting Skills: How To Give Good Directions And Use Positive Attention And Ignoring | 1. To gain a basic understanding of giving good directions to children | • Parenting Log  
• Handouts:  
  o Giving Good Directions  
  o Time Out |
<p>|  | 2. To identify at least three age-appropriate directions to try giving their children at home | 1: Check In, Complete Parenting Log &amp; Review Session 7 | 20mins |
|  | 3. To observe and describe how active ignoring can change a child’s behavior | 2: Discussion Of Parenting Questions | 45mins |
|  | 4. To identify appropriate limits to set with children according to their developmental age | 3: Development Of Goals | 45mins |
|  |  | 4: Orientation to Weekly Parenting Log | 5mins |
|  |  | 5: Check out &amp; homework | 5mins |</p>
<table>
<thead>
<tr>
<th>Session Number</th>
<th>Session Name</th>
<th>Objectives</th>
<th>Modules</th>
<th>Materials</th>
<th>Duration</th>
</tr>
</thead>
</table>
| 9             | GETTING SUPPORT   | 1. To understand how violence leads to isolation and alienation in relationships and decreases support 2. To begin to understand how violence has impaired the formation of trust in their relationships with their children and children’s mothers 3. To define and describe different types of support 4. To learn the importance of and how to seek support from others | 1: Check In, Complete Parenting Log & Review Session 8 2: Violence & Trust 3: Trust & Relationships 4: Types of Support 5: Seeking Support/Community Resources 6: Check out & homework | • Whiteboard/flipchart  
• Markers, pens, pencils  
• Parenting Log  
• Handouts:  
  - Where Can I Get Support?  
  - Child and Family Teams  
  - Nurturing Children Wheel | 15mins  
20mins  
15mins  
20mins  
15mins  
10mins |
<table>
<thead>
<tr>
<th>Session Number</th>
<th>Session Name</th>
<th>Objectives</th>
<th>Modules</th>
<th>Materials</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td>PARENTING WITH YOUR CHILDREN‘S MOTHER(S)</td>
<td>1. To explain the importance of cooperating with their children’s mothers. 2. To acknowledge and become accountable for the ways participants have used their children to control their partners. 3. To examine the impact of these behaviors. 4. To identify ways they can develop a positive and collaborative relationship with their children’s mothers. 5. To review their progress toward established goals and consider revising and adding goals.</td>
<td>1: Check In, Complete Parenting Log &amp; Review Session 9 2: Why Cooperative Parenting is Important to Children 3: Acknowledging and Naming Undermining Tactics and Use of Children 4: Defining and Practicing Ways to Support Your Child’s Mother 5: Goal Setting Exercise 6: Check out &amp; homework</td>
<td>• Flip Charts and Markers  • <em>Parenting Log</em>  • Handouts: o <em>Tips for Dads: Advice to Fathers Who Are Out of the Home</em> o <em>Goal Setting Handout</em></td>
<td>15mins</td>
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<td>15mins</td>
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<td>Modules</td>
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<td>Duration</td>
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| 11            | PARENTING SKILLS: PRACTICING PRAISE | 1. To observe and identify key strategies for changing a child’s behavior through praise  
  2. To identify several behaviors participants can praise their children for at home  
  3. To discuss ways group members will try strategies to increase praise at home | 1: Check In, Complete Parenting Log & Review Session 10  
  2: Review of Praise Skills and Facilitator Role Plays on Praise  
  3: Small Group Discussion  
  4: Group Praise Practice  
  5: Check out & homework | • *Parenting Log*#11  
  • *Examples of Praisable Behaviors* Handout | 20mins  
  40mins  
  25mins  
  20mins  
  5mins |
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<th>Session Number</th>
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</table>
| 12             | BUILDING TRUST & TALKING TO YOUR CHILDREN ABOUT VIOLENCE | 1. To identify relationship-building behaviors that fathers find challenging to perform  
2. To draw comparisons between —Michael’s Story‖ and their own experiences as victims and perpetrators of violence  
3. To identify 2-3 changes they will begin making in their behavior in order to rebuild trust with their children  
4. To explain how they can discuss their violent behavior with children of different ages | 1: Check In, Complete Parenting Log & Review Session 11  
2: Relationship-Building Challenges  
3: Michael’s Story  
4: Age-Appropriate Conversations about Domestic Violence  
5: Group Discussion  
6: Check out & homework | • Blackboard & chalk or newsprint & markers  
• Recording and transcript of Michael’s Story (included with this guide)  
• CD player (if using CD)  
• Handout: Relationship-Building Challenges Pretest  
• Handout: Age Appropriate Conversations about Domestic Violence  
• Parenting Log #12 | 10mins  
10mins  
40mins  
40mins  
5mins |
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| 13             | Parenting Skills: What Should You Ignore And When? Using Attention And Praise Together | 1. To observe and identify key strategies for decreasing a child’s negative behavior through active ignoring  
2. To identify several behaviors participants can ignore and to define which behaviors are ignorable  
3. To discuss ways group members will use active ignoring in conjunction with praise to change behavior at home | 1: Check In, Complete Parenting Log & Review Session 12  
2: Review of Active Ignoring Skills  
3: Active Ignoring Skills Game  
4: Small Group Discussion  
5: Group Active Ignoring Practice  
6: Check out & homework | *Parenting Log #13* | 20mins  
15mins  
25mins  
25mins  
20mins  
5mins |
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| 14             | BEING A ROLE MODEL                   | 1. To identify negative and positive types of modeling for young men and women.  
2. To begin thinking through ways to reverse the impact of participants‘ abusive behavior and negative modeling with children. | 1: Check In, Complete Parenting Log & Review Session 13  
2: Jack’s Story  
3: Effects of Domestic Violence on Young Women  
4: Being a Role Model  
5: Check out & homework | • Tape and markers  
• Newsprint with questions for Jack’s Story  
• Jack’s Story handout  
• Questions for Jack’s Story handout  
• Tips for Dads handout: It’s a Matter of Pride – Being a Good Role Model  
• Parenting Log #14 | 10mins  
50mins  
20mins  
20mins  
10mins |
| 15             | WHAT MAKES A RELATIONSHIP ABUSIVE?    | 1. To gain a basic understanding of how power and control dynamics can impact different relationships  
2. To identify one time in which participants felt powerless (in order to have a better understanding of the victim’s feelings)  
3. To gain a basic understanding of the definitions of | 1: Check In, Complete Parenting Log & Review Session 14  
2: Powerlessness  
3: All About Power and Control  
4: How Does This Impact Children?  
5: Check out & homework | • Parenting Log #15  
• Power and Control Wheel Handout | 15mins  
30mins  
25mins  
25mins  
5mins |
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<tbody>
<tr>
<td>16</td>
<td>Stress Management</td>
<td>1. To explain how stress can affect a father's ability to effectively and appropriately parent his child.</td>
<td>1: Check In, Complete Parenting Log &amp; Review Session 15</td>
<td>• 2 identical bottles filled with club soda/seltzer water</td>
<td>5mins</td>
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<td>2. To explain ways that all children experience stress in their day-to-day lives.</td>
<td>2: What’s Stressing You?</td>
<td>• 1 identical bottle filled with plain water</td>
<td>30mins</td>
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<td>3. To explain how witnessing domestic violence might impact a child’s ability to deal with stressful situations and cope with stress.</td>
<td>3: What’s Stressing Your Child?</td>
<td>• Small, soft balls or stuffed animals suitable for tossing (enough to have one for every two participants)</td>
<td>15mins</td>
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<td>4. To demonstrate three different</td>
<td>4: Stress Management/Relaxation Techniques</td>
<td>• Paper towels</td>
<td>55mins</td>
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<td>5: Check out &amp; homework</td>
<td>• Marker board or flip chart</td>
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<td>• Handout: STRESS MANAGEMENT &amp; RELAXATION Cheat Sheet</td>
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<td>• Parenting Log #16</td>
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<td>17</td>
<td>COMMUNITY RESOURCES: WHERE TO GET HELP</td>
<td>1. To review the importance of seeking support 2. To learn how to utilize Child and Family Teams for support 3. To identify and practice accessing community resources</td>
<td>1: Check In, Complete Parenting Log &amp; Review Session 16 2: Child and Family Teams? 3: Planning For and Using Community Resources 4: Check out</td>
<td>• Weekly Parenting Log • Child and Family Teams Handout • Support Groups and Community Resources Handout • Family Services, Inc. brochure • Referrals for Me or My Family Handout • Whiteboard/flip chart • Markers, pens, pencils</td>
<td>15mins 35mins 45mins 15mins</td>
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| 18            | PARENTING SKILLS: PRACTICING GIVING GOOD DIRECTIONS | 1. To observe and identify key strategies for changing children’s behavior through giving effective directions  
2. To identify several problem areas participants would like to address through giving good directions to their children at home  
3. To discuss ways group members will give effective directions at home to change their behavior  
4. To practice giving good directions to change their children’s behavior | 1: Check In, Complete Parenting Log & Review Session 17  
2: Review of Giving Effective Directions and Facilitator Role Plays on Giving Directions  
3: Small Group Discussion  
4: Group Practice  
5: Check out & homework | • Parenting Log #18  
- Goal Setting Worksheets from Previous Sessions                                                                                      | 20mins  
40mins  
25mins  
20mins  
5mins |
| 19            | Parenting Skills: Practicing Giving Good          | 1. To review current goals and progress.                                                                                                         | 1: Check In, Complete Parenting Log & Review Session 18 | • Goal Setting Worksheets from Previous Sessions                                                                                                                                         | 20mins   |
Directions

2. To establish future goals to work towards after the program has ended.
3. To understand the context of the current intervention as one in a series of steps towards improved parenting and partnering.

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<tr>
<td>2: Revisit Relationship-Building Challenges Questionnaire (from Session #12)</td>
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<td>3: Review Goals from Past Sessions</td>
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<td>4: Goal-setting for the Future &amp; Check Out</td>
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- Clean (uncompleted) Relationship-Building Challenges Handout
- Relationship-Building Challenges (completed by participants in Session #12)
- Short- and Long-Term Goals Handout
- Completed Parenting Logs from 3 Previous Sessions (#3, #8 and #16)
- Weekly Parenting Log #19

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| 20             | Parenting Skills: Practicing Giving Good Directions | 1. To provide information about the knowledge, skills, and opinions they have gained or developed as a result of the Strong Fathers Program.  
2. To demonstrate their willingness to generalize skills learned in the group to other settings.  
3. To demonstrate praise.  
4. To provide feedback about the Strong Fathers Program. | 1: Check In, Complete Parenting Log & Review Session 19  
2: Completion of (3) Evaluation Measures  
3: Incentives and Graduation Certificates  
4: Check out | • Parenting Log #20  
• Relationship With Children Questionnaire  
• Post Test of Developmental Knowledge  
• Strong Fathers Post Test  
• Cheerleader Public Service Announcement from Session #1  
• Incentives  
• Graduation Certificates  
• Children's Photos Provided by Participants | 15mins  
45mins  
20mins  
15mins |