

## Centacare Catholic Community Services submission – working with fathers.

### Introduction

This submission is being made by Centacare Catholic Community Services (Centacare). We have utilised insights from Centacare's Children's Service Unit (CSU) to suggest that using father inclusive practice, where appropriate, can improve outcomes for families and children intersecting with child protection services and impacted by Domestic, Family and Sexual Violence (DFSV) (Haines et al, 2022).

Centacare's RESTORE program is an intensive family support (IFS) service that uses an evidence informed model to address child safety concerns within in a family unit. A multi-disciplinary team therapeutically engage families in their homes over a 6-to-9-month period. The team includes dads and fatherhood workers, which have been critical in providing a holistic service to families and supporting men to increase their parenting capacity and build positive relationships with their children and families. Among RESTORE families, DFSV is often a child safety risk factor, however despite this, many of these families have not intersected with formal DFSV services. There is a clear need for better support and additional resourcing for whole of family, father inclusive practice to address the gap between IFS and frontline DFSV services.

We draw on the article [‘Men Working with Men in Intensive Family Services: Reflections on Violence, Trauma Lifeworlds and Organic Interventions’ \(2022\)](#), authored by Centacare staff, to provide learnings and key recommendations arising from our trauma responsive and holistic approach to working with fathers who have used violence, to bringing about safety for the whole family in the home.

### Problem Statement

To break the cycles of violence within families and across generations, it is essential to drive cultural and societal shifts that disrupt the perpetuation of intergenerational trauma and abuse. In order to be effective, this shift requires a reimagining of service design and delivery across the broader community services spectrum to prioritise fathers who perpetrate violence for targeted intervention and support.

### Key Recommendations

#### **1. Strengthening Intensive Family Services: Enhancing Clinical Governance and Targeted Interventions to Address Domestic and Family Violence Perpetrators**

Intensive Family Services (IFS) need to be adequately funded, to support the clinical governance and frameworks required for highly skilled staff to be able to intervene effectively with the increasingly high number of families experiencing domestic and family violence. As a cohort, men who perpetrate domestic and family violence, are unlikely to ever have contact with support systems. IFS have become an inadvertent entry point for many fathers, who perpetrate violence, into the social services system. This positions IFS well to meet the challenge of reaching and connecting with men who use violence against intimate partners and family, providing them with the opportunity to understand their behaviour and therapeutically address why they choose to use violence. It would be a relatively simple and cost-effective process to establish specialist domestic

and family violence workers or DFWs into existing IFS programs, to play a key role in the broader government plan to meaningfully change the trajectory of men's violence against women.

## **2. Promoting Safer Families: A Father-Inclusive, Whole-of-Family Approach to early Intervention, Reducing Domestic Violence and Addressing Comorbidities**

To effectively reduce domestic violence and its associated harms, it is crucial that intensive family services adopt a whole of family, father-inclusive practice model that engages fathers who have used violence in a holistic manner. This approach should focus on harnessing men's paternal identities as an intrinsic motivator/catalyst for change while also addressing underlying comorbidities such as substance abuse, financial distress, and intergenerational trauma. By working with fathers to recognise and change harmful behaviours while simultaneously providing support for their broader needs, we can work to promote safer family environments, break cycles of violence, and support the long-term wellbeing of all family members.

## **3. Enhancing Early Intervention: Building Capacity in Community Services to Support Fathers and Families Impacted by Violence**

To prevent the escalation of domestic violence and reduce the burden on specialist DFSV services, the Child Protection and the criminal justice system, it is essential to build the capacity of wider service systems and community services to work holistically with fathers and families impacted by violence. This includes providing targeted training, resources, and support to equip generalist service providers with the skills needed to identify early signs of violence, engage fathers in meaningful interventions, and address related issues such as mental health, substance abuse, and financial stress. By intervening earlier and more effectively, we can support families before violence becomes entrenched and reduce the need for more intensive and punitive responses.

## **Efficacy of behaviour change programs**

Research indicates that generalist interventions designed to address domestic abuse have a small effect on reducing recidivism and both the Cognitive Behavioural approach and Duluth models are equal in their small impact with little empirical basis for promoting the use of one over the other (Babcock et al., 2004). One review of 30 studies of the effectiveness of perpetrator intervention programs concluded, for example, that most studies reveal that traditional psychoeducational or cognitive behavioural programs demonstrated limited effectiveness when compared to a no-treatment control group (Eckhardt et al., 2013: 221).

A key issue is that men who perpetrate violence are a heterogeneous group, and abuse has a myriad of psychological, psychiatric, bio-physiological and sociological causes (Begun et al., 2001) with the most harmful, prolific offending attributable to a small minority (Bland and Ariel, 2015; Sherman, 2007). It is therefore not surprising that the 'one size fits all' approach of many behaviour change programs has been shown to have little impact. The need to develop a more tailored, holistic approach to working with men is further supported by a well-established body of literature, which indicates that domestic abuse offending behaviours can be classified into different typologies or sub-types. Holtzworth-Munroe & Stuart (1994) identified three main groups that differ according to the severity and generality of their violence and their level of psychopathology: the 'family only' abuser, the 'dysphoric/borderline' abuser and the 'generally violent/anti-social' abuser. Expanding on this work, Johnson (2008) conceptualised domestic abuse as falling into three types: 'intimate terrorism', namely perpetration of a pattern of controlling and coercive behaviours; 'situational couple violence', defined as that arising following escalation of arguments; and 'violent resistance', which occurs when a victim uses violence to defend herself.

Taken together, all of these studies point to the importance of developing targeted and tailored perpetrator focused interventions to effectively break the cycle of abuse (Robinson and Clancy, 2020). As noted by Day et al. (2009a) 'matching treatments to individual needs is not well established in the domestic violence sector' (2009a:207).

## Working holistically with fathers and families using a strengths-based approach

Service responses have traditionally focused on separating mothers and children from the male perpetrator. While this has often been necessary to ensure their safety, it is not always a sustainable solution (Mandel & Wright, 2019) and fails to address serial or repeat perpetration, as many fathers who use violence continue to live with or maintain regular contact with their partner and/or their children (Gatfield et al., 2022; Scott et al., 2021).

There is emerging recognition of the positive contribution and importance of including fathers in family interventions and father inclusive interventions can be highly effective (Haines et al., 2022; Laracuenta, 2017; Lechowicz et al., 2019; Perez-Vaisvidovsky et al., 2021).

Centacare has developed a therapeutic framework (STEP) which underpins interventions and is based on the adaptations that children and young infants make to traumatising attachment relationships and how this affects capacity for effective parenting and intimacy in adulthood (Haines et al, 2022). RESTORE utilises this evidence-informed model across the multi-disciplinary team as does Centacare's Dad's Business, a program that provides dads with a safe space to seek parenting guidance, referrals to services, parenting education, advocacy, counselling, and support for alcohol and other drug use. It is important to note that safety is at the heart of both programs (including pre and post engagement), with risk and safety assessments embedded throughout.

Our research (Haines et al., 2022) centred on examining the extent that father-inclusive practice generates opportunities for positive change and what strategies work best to sustain environments that change in an intensive family service program. Early intervention and prevention must include supporting men who have been violent to develop other ways of coping.

Our analysis (Haines et al., 2022) identified **key themes** that reflect the experiences of men who access our intensive family service:

**Theme 1: Repressive Confines of Hegemonic Masculinity:** The way young boys are raised within their families and the broader community to be a 'man,' a father and member of society, rarely supports them to develop coping mechanisms needed for healthy partner relationships or manage the responsibilities and challenges of being an emotionally available father.

**Theme 2: Marginalisation, Exclusion, and Systemic Barriers:** While it is not common to refer to a cohort of cis white men as marginalised, the men we work with often report a pervasive sense of marginalisation and exclusion, a finding echoed elsewhere (Critchley, 2021). They tend towards mistrust of professionals feeling misheard and unacknowledged by services.

**Theme 3: Everyday Inadequacy, Stigma, and Shame:** As well as feeling shamed, undervalued and excluded from parenting, fathers within the program feel that they are not *effective* parents. Compounding stigma around mental health and AOD difficulties often discourages men from accessing any services.

**Theme 4: Living Trauma Lifeworlds:** Almost all the men in the program had a history of emotional abuse and neglect, intensive violence from their fathers and/or abusive control from their mothers. This intergenerational trauma impacts multiple life domains.

Our article (Haines et al., 2022) also detailed another 2 themes, which outline how the Dads and Fatherhood Workers support fathers in not defaulting to violence and anger:

**Theme 5: Organic Intervention through a Child-and Family-Focused Lens:** Our thematic analysis revealed the emergence of a dynamic and responsive client-led approach to multi-disciplinary collaborative practice. The Dads and Fatherhood Workers' interventions are undertaken within a family context, always bringing the fathers' attention back to his role as intimate partner and father to his children. This provides a powerful motivation for a father to make changes for his children, rather than attempting to elicit change by focusing on his deficits. This process requires:

- Transparency,
- Building rapport and developing trust,
- Curiosity, storytelling, and emotional awareness, leading to reflection and responsibility,
- Challenging narratives, creating emotional availability, and
- Support networks.

The next step is to investigate ways of safely including fathers in healing conversations with their families, as they attempt to re-integrate in new ways. Changing vicious cycles of violence and control into moments of connection and being valued can set troubled families on a new trajectory (Haines et al., 2022).

#### **Theme 6: Empathetic Opportunities and Growth**

Fatherhood can act as a driving motivator for change. Workers bring a strength-based focus into the interventions, focusing on supporting fathers to be present (physically, and emotionally) and contributing to a home environment that is safe and nurturing. Working with fathers who are able to recognise that they want to do their best allows for the possibility of healing, including in scenarios where violence had been present previously. Without condoning violent behaviours, it is possible to acknowledge past trauma, shame, and feelings of inadequacy, and explore counter narratives where vulnerability and redemptive possibilities intersect. Vulnerability and positive change have been and continue to be achieved for some of the men in the program, even given the brevity of the intervention. We continue to witness the tentative development of many of the participants to form an understanding about their potential to be a powerful and positive influence in their family.

This reduction in the need for extrinsic levers has the potential to inform wider and much needed cultural change. However, while important for a program of this nature to align outcomes with system-level change, it is not a realistic expectation for a single program to achieve in isolation. Instead, programs such as this should be viewed as vanguard whole of society innovative responses.

## **Additional Recommendations**

To work effectively with men while simultaneously safeguarding women and children, we must take a holistic view of the family and understand the underlying reasons why men perpetrate violence, including the role of trauma. This understanding allows for more effective responses. Our innovative approach has revealed several key lessons to enhance the design and delivery of intensive family services programs:

1. **Recalibrate Opportunities for Engagement:** Develop a clear framework for working with men who have used violence, including well-defined processes for ongoing assessments that determine when it is safe to engage and continue this work.
2. **Expand Services that work with whole family:** Increase the availability of services for men and their families, ensuring that workers are skilled and confident in addressing trauma and attachment issues at the heart of these struggles. This also involves increasing the number of male workers where appropriate.
3. **Enhance Educational Curricula:** Address gaps in training programs across various qualifications to better equip workers to work with families impacted by violence and therapeutically address underlying trauma and attachment difficulties.
4. **Avoid Compounding Shame Dynamics:** Ensure that service responses to family violence do not replicate or exacerbate shame dynamics, which can hinder effective intervention.
5. **Develop Best Practice Models:** Build on existing research to develop best practice models that incorporate understandings at the individual, societal, and cultural levels to guide work in this area.

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