

**Offenders as fathers: Building capacity for fathering.
Observations from a pilot program on fathering at OCI.**

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Introduction and rationale for developing a fathering program

This article reports on our experience of running a fathering program for men at the Ontario Correctional Institute (OCI), a 220 bed, medium security provincial prison for adult male offenders in Brampton, Ontario. The program came about as a result of an awareness that many offenders come from backgrounds of childhood victimization and a number of them sadly go on to perpetrate the cycle of violence that they themselves have endured. Research and writing in this area supports this observation.

Prevalence of victimization in male offender population

In offender populations, childhood victimization rates range from 40% (Fondacaro, Holt & Powell, 1999) to 59% (Johnson et al., 2006) or higher. Weeks and Widom (1998) found that 68% of offenders reported physical abuse, sexual abuse or neglect before the age of 12. Stirpe and Stermac (2003) found that 60% of sexual offenders against children reported childhood sexual abuse and 91% reported physical abuse as children. Blanchette, Robinson, Alksnis, and Serin (1997) found that 68% of family violence offenders had witnessed or experienced violence in their family of origin

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and 47% had been physically abused themselves. Although the focus of this paper is males, rates of victimization in the female offender population are also extremely high (Browne, Miller & Maguin, 1999; Owen & Bloom, 1995; Tyagi 2006); significantly higher than those found in clinical and community populations (Wyatt, Burns Loeb, Solis, Carmona & Romero, 1999; Vogeltanz et al., 1999).

Relationship between early victimization and criminal offending

Prospective research investigations have repeatedly demonstrated a strong link between childhood victimization and adult violence (Maxfield & Widom, 1996; Smith & Thornberry, 1995; Stouthamer-Loeber, Loeber, Homish & Wei, 2001) supporting Widom's (1989) 'violence begets violence'. Widom (1995), in one of the few notable prospective studies in the field, found that individuals who had experienced childhood abuse were significantly more likely to be arrested for criminal activity in adulthood. She found a strong correlation between childhood abuse and neglect and, drug related offences and sex crimes later in life. She also noted that among children who had been sexually abused, the odds were three and a half times higher for being arrested for prostitution. Re-analyzing Widom's (1989) longitudinal data, Grogan-Taylor and Otis (2003) reported that neglect, more than any other type of maltreatment, was a significant predictor of arrests for criminal behaviour in adulthood. Messina and Grella (2006) found similar results among women, with women who experienced five or more childhood traumatic events reporting the earliest involvement in drugs and crime (i.e., age at first arrest for drug-related crimes, property crimes, violent crimes, and sex related crimes).

Amongst violent offenders, Alksnis and Robinson (1995) found that those who had been exposed to any kind of violence in childhood were more likely to assault partners, children and non-family members as adults. As well, Raskin & Widom (2003) found that children who experienced neglect and abuse perpetrated intimate partner violence at higher rates than those who had not. Similarly, Dutton and Hart (1994) found that any type of childhood violence not only increased the risk of all types of violent offending, but those who had suffered childhood victimization were three times more likely than their non-abused counterparts to commit violence in adulthood.

Rationale for a fathering program

Research and clinical observations show that the impact of childhood victimization on personality development, deviancy, criminal behaviour, maladjustment (and recidivism) has deleterious consequences in offender populations. In correctional populations we have also seen that childhood maltreatment often accompanies severe and intractable deprivation including poverty, hunger, poor housing, substance use and parental unemployment. As such, it is of little surprise that offenders who have undergone these experiences frequently have little familiarity with healthy parenting, and in turn, subject children in their care to neglect, parental absenteeism, violence and abuse. Thus, for us there was little doubt that interrupting the cycle of victimization constituted a worthy and necessary goal of treatment.

While many treatment programs (e.g. domestic violence, sexual offending and substance abuse) often include sessions on the impact of adult perpetrated childhood maltreatment, the focus is usually very narrow in scope and discussed only briefly. A

program specifically related to fathering would go well beyond these limitations and actually teach men effective parenting strategies which they could use in all aspects of their lives (e.g. healthy relationships, prosocial attitudes, etc.). Moreover, experience has shown that a number of offenders who have child-related court or CAS orders are often hard pressed to find community services to help them with parenting skills. Thus, many of these men would benefit from an in-custody program.

Lastly, a needs assessment at OCI found that 83% offenders had expressed an interest in taking a fathering program and more than half (56%) had said that they were going to be involved in a fathering role with biological as well as non-biological children immediately upon release (Tyagi, 2007). Some of the areas identified by offenders as topics of learning included: parenting skills, child development, skills in building (or re-building) better relationship with their estranged children, improve communication with their children, as well as ways to stop the cycle of unhealthy lifestyles and violence being passed on to their children (Tyagi, 2007). In the same study 22% offenders indicated that they had current CAS involvement (or other legal conditions in their lives) and would be required to demonstrate behaviour that would convince the authorities that they would not be a risk to their children upon release.

Although, it could be argued that offenders' motivations to attend such a program are questionable because of secondary gain (e.g., men have to show CAS or their partner that they have changed), this is no different than offenders who apply to participate in any other treatment program. It is agreed that offender motivations for attending treatment programs may be wide-ranging even suspect. However, there is a plethora of research in the correctional literature (Bonta & Andrews, 2007; Bourgon & Armstrong, 2005) which

convincingly demonstrates that offenders who participate and complete programs are shown to make beneficial life changes and re-offend at lower rates than those who do not. As clinicians, we also see in our practice that even when motivations are questionable, offenders still learn, they learn in spite of themselves! The need to break the cycle of violence, as well as the interest and demands of the men themselves, led to the implementation of this fathering program.

What program did we run?

‘Caring Dads’ is a group program that helps fathers take responsibility for their use of unhealthy or abusive parenting strategies. In this program, men learn about child-centred parenting, learn to recognize and prioritize children’s needs based on their developmental stage, develop an awareness of the impact of child maltreatment and domestic violence on children, and learn ways in which they can interrupt the cycle of abuse. Fathers learn to develop concrete problem solving skills for improving their relationships with their children, their children’s mothers, and/or their children’s caregivers (Scott & Crooks, 2004). The program consists of 17 group sessions and homework assignments. We ran the program twice weekly with sessions lasting 2.5 hours per session for a total of 14 sessions. We eliminated the first 3 motivational enhancement sessions as our client group was already quite motivated and eager to participate in the program.

The ‘Caring Dads’ program was chosen because it is an evidence-based program that has shown promising results in promoting change amongst male perpetrators of domestic abuse (Scott & Crooks, 2007; Scott & Lishak, 2011). Although ‘Caring Dads’

was primarily designed for men who have been abusive to partners and/or their children, its target group was most similar to our client group in that offenders have directly or indirectly perpetrated childhood maltreatment through neglect, being absent fathers, being abusive to children's mothers/caregivers, or exposing children to abusive or violent behaviours. The manualized program also covered content that was relevant to our client population and was graciously offered to us at no cost by the developers of the program.

Where was the program run? Who ran the program?

The program was run at OCI in Brampton, Ontario which is built on the principles of therapeutic milieu. It has 6 living units with dorm style living. Each unit has a social worker, affiliated psychologist and correctional officers who work as case managers. Offenders participate in different types of clinical and volunteer run programs during the day and are permitted to have open access visits with children and families. The program was co-facilitated by Dr. Smita Tyagi a staff psychologist at OCI, and Ms. Maggie Clarke, a doctoral practicum student at the University of Toronto.

What inclusion criteria were used? Who took part in the program and how many completed it?

As soon as the program was announced, we received a large number of requests, from offenders directly as well as social workers on the units. We would have liked to offer the program to everyone interested but it was necessary to shortlist participants because we only had one group. Our short list criteria included but was not limited to the following: time left in sentence to complete program; functional literacy in spoken and

written English, borderline or higher on intellectual functioning and information from unit staff indicating there were no evident barriers to group participation. Priority was given to men who were going to be involved in an active parenting role upon release. All other concerns were dealt with on a case by case basis. Questions were asked about the inclusion of sex offenders in the program, especially those that had child victims. Our position was that most offenders regardless of type of crime (and victims) were going to be involved in some kind of parenting role, either direct or indirect with children upon release. It was our belief that even if they did not have access to children at this time, they could potentially have access at some point, and would benefit from this kind of education and awareness. Hence, it was our decision to include them in the program.

A total of 14 men attended the program and 12 completed the program in its entirety. Three individuals completed only 9-10 sessions as they left OCI prior to their discharge date for reasons not connected to the program. Ten participants completed the evaluation form. Participant's index offences included property offences (6), Drugs or alcohol related offences (2), Sexual offences against minors (3), against adults (1), Domestic violence (1) and Accessory to Murder (1). At least 3/14 had prior domestic violence offences on their record and at least 10/14 reported serious problems with drugs or alcohol. Thirteen of 14 participants reported a history of childhood victimization which ranged from physical violence, neglect, emotional abuse, sexual abuse and witnessing violence. Ten of 14 participants reported that children had witnessed or been subject to childhood maltreatment (neglect, emotional or physical abuse, verbal abuse, being absentee fathers, etc.) when they were in a fathering role towards them. Their

children's ages ranged from 16 months to 18 years and 9 of 14 men reported CAS involvement prior to coming into custody.

What did we do?

As facilitators, we made a conscious attempt to balance three things (1) address key parenting issues that have been identified in the literature as being relevant for offenders (2) address some of the needs identified in the needs assessment and (3) address unique problems (related to children) brought up by participants in the program. The selection of the program and its content addressed the first two needs. In delivering the program, we built a problem-solving and skill building component into each session which seemed to address the third need. Our goal was to help men develop prosocial parenting skills, change cognitions and beliefs around parenting, develop self-monitoring skills in relation to parenting choices, and rehearse healthy parenting responses. The sessions covered topics ranging from child centred parenting and 'being a great dad' to boundary setting, discipline, child development, impact of childhood maltreatment and ways to stop the cycle of abuse.

As facilitators, we also wanted to ensure that we delivered the program in a way that was based on sound pedagogical principles of adult learning. So we consciously included strategies such as real-life examples and metaphors relevant to participants, Socratic questioning, problem-solving, role-plays, art, self disclosure, small group work (practice exercises in triads), practice exercises on the unit, as well as didactic education. As facilitators, we found the group was attentive, participatory, engaged and remembered

what they had learned as the group progressed. Below is an example of an art project where participants presented their interpretation of their family situations.



Notice the placement of the children in this home. Two children from a current partner are huddled together with their mother while an older child from another partner is by herself peering from a window above, isolated and angry. For this individual who has a history of aggression and substance use the challenge was integrating his older child into his new family and, using healthy parenting with all three children.

What did the participants say?

At the end of the program, a confidential and anonymous evaluation form was completed by participants. Men were asked to rate the program on a number of criteria using a Likert scale of 1 to 5 (strongly agree to strongly disagree), as well as provide feedback in an open-ended question format. *Below is a sample of participant comments when asked 'What did you learn from taking part in this program?'*

- I learned what it takes to be a great Dad and I will use it also it was very helpful.
- I learned a lot. I learned how to discipline my child and that the punishment must be age appropriate.
- How I've really needed to change the way I raise my children. I didn't realize some of my errors that I can change very easily if I just stop and think is this good for me or my child (child centred).

-To be a better listener; To be a child centred dad; To be respectful to my child's mother and caregiver; That all the ideas and concepts that were presented to us I can apply to all aspects of my life.

-I had a lot to learn about being a Great Dad. One step at a time I'm on my way.

-I have to be respectful through my kid's mom and listen to what they have to say.

-I am more tuned to what my kids are saying. I learned to put my kids first.

While client satisfaction is only one of many dimensions of program evaluation, we note that all the participants in the program emphasized the need for a fathering program and expressed a need for more learning in this area. Although 3/10 participants had attended some kind of parenting program prior to this current program, most stated that they had not. Most (9/10) participants said they found the hand-outs 'Very Useful' and 8/10 men found the role plays, practice exercises 'Very Useful'. In response to the question 'What would you like to see covered that was not discussed or covered in enough detail, participants identified the following: Discipline, alternatives to punishment, more on problem solving, more on teenagers, and how to discuss procreation with your child. Nine of the ten participants rated the quality of the program as 'Excellent' while 1 rated it as 'Good'. Similarly, 9/10 said they would benefit from another parenting program and 8/10 'Strongly Agreed' that they would look for a parenting program upon release. All 10 participants stated that they found the discussions 'Very Helpful' and would recommend this program to other offenders in the institution.

In response to the question 'Do you have any suggestions to improve the Caring Dads program?' Here is a sample of their comments.

-We should have more of them here in this institution more often.

-More time, longer course; More role playing; More handouts; More arts and crafts

-More time in group instead of cramming it all together

-Would like to see it offered more; Longer program

-Longer classes; Maybe 20 or more

-More sessions; More time to put skills into practice; Thank for offering this program and letting me be a part of it. I enjoyed it, and I am going to look for another group upon my release.

Anecdotal data from units indicate that staff were very pleased about the program and reported that participants would often discuss what they were learning with case managers and were also seen to be discussing it with their peers on the living unit.

What are some things to consider in running a program like this in the institution?

The following are 10 key observations we have from running this program:

1. It is important not to exclude sex offenders because some still have access to their children and play a parental role to either their biological or their partner's children.
2. It is important to implement multimodal learning strategies (visuals, hands-on exercises, reading materials, written assignments, etc). This is very helpful given that participants invariably have diverse learning styles. It is not only a responsiveness issue that we need to consciously address in a treatment program but is generally good pedagogical practice in any learning environment.
3. It is important to include participants from each unit of the institution for several reasons. Including too many participants from one unit encourages the risk of bringing unit politics into the program which is not helpful to the group environment. Having participants from different units encourages openness to ideas and stimulates learning. However, it is also important to have at least two participants from each unit so that they do not feel isolated and, have a buddy who can help or support them as they work on homework assignments.

4. It is important to do more consulting with case managers and social workers on each unit to assess the impact of the program or to discuss issues and concerns related to the individual's family. This type of consultation is a structural piece of the program that needs to be instituted formally as a desired process. The program also needs a formalized system that allows for information to be shared with case management teams and vice-versa.

5. In the pilot program, we did not have the opportunity to review individual participant's homework except through brief check-in questions during group sessions. We believe that the program should include at least two individual sessions where individual progress on goals and homework can be reviewed and feedback given on individual change.

6. Participants were given practice exercises to use with their children and partners and those who had contact with their families (via visits and phone calls) were able to do the practice. Those who did not were encouraged to practice with other offenders on their living unit where possible (e.g., how to give feedback, active listening, etc.) This worked well when participants actually did the exercises on the unit, less so when they did not!

7. It is important to expand content related to stages of child development and spend more time on specific issues such as discipline, boundaries, dealing with children's mothers and caregivers. It would also be helpful to introduce modules on impact of substance abuse on children and healthy nutrition. As well, it would be important to extend the number of sessions so there is adequate time for practice in problem solving and skill building.

8. It is helpful to compile a list of other reading materials and handouts for participants to read between sessions. Participants were given reading materials on research related to

impact of childhood maltreatment, domestic violence, parenting styles, and child development. The facilitators also compiled a package of brochures and books (Region of Peel publications) on child development, preparing children for school, teen parties and drinking etc. that was given to each participant. This was additional information that supplemented what was being discussed in the program and was both practical and informative.

9. It is important for participants to have support in the community. Towards this end participants were given an individualized list of researched resources for parenting support in the community which offenders could use upon release.

10. Although we were not able to offer this service, facilitation of family meetings (partners, caregivers and children) could potentially become an integral part of the program, particularly where there are problematic issues related to family re-integration.

Concluding comments

We ran an in-custody fathering program on a pilot basis which was well received by both participants and staff. It had its challenges and we acknowledge that further development is needed in both content and structure, and that the program has yet to be subject to research on a systematic basis. We also recognize that staffing and program sustainability are issues that merit serious consideration. Lastly, we acknowledge that OCI was very supportive of this initiative and we know that institutional support is a key component to the success of a new program. If there is institutional support there is always the potential for creative possibilities in developing ideas around long-term

sustainability. Going forward, we will be continuing to work on all of the issues discussed above.

We noted in our introduction the reasons that a program like this is important for fathers who are offenders. However, we believe that it is also essential to have programs such as these for mothers in custody, developed with a view to their unique needs and circumstances. Their parenting issues and concerns are equally worthy of our consideration given that it is they who often bear the primary role for caregiving of children. In conclusion, we ask, does a program such as this offer a value added service to society? Can it enhance and supplement work done in other treatment programs? Can it help offenders strengthen their role in taking care of children? Can it help men break the cycle of victimization that results in maladjusted children who go on to become the maladjusted adults who are filling our prisons? If the answer to any one of these questions is yes, it is a worthwhile endeavour. Pardon, our bias is showing!

References

- Alksnis, C., & Robinson, D. (1995). *Childhood victimization and violent behaviour among adult offenders*. Ottawa: Correctional Service Canada.
- Blanchette, K., Robinson, D., Alksnis, C., & Serin, R. (1997). Assessing treatment change among family violence offenders: Reliability and validity of a family violence assessment battery. Ottawa; Correctional Service Canada. Retrieved from www.csc-scc.gc.ca/text/rsrch/reports/r72/r72_e.pdf
- Bonta, J., & Andrews, D. (2007). Risk-need-responsivity model for offender assessment and rehabilitation. User report No.2007-06. Ottawa; Correctional Service Canada.
- Bourgon, G., & Armstrong, B. (2005). Transferring the principles of effective treatment into a “real world” prison setting. *Criminal Justice and Behaviour*, 32, 3-25.
- Browne, A., Miller, B., & Maguin, E. (1999). Prevalence and severity of lifetime physical and sexual victimization among incarcerated women. *International Journal of Law and Psychiatry*, 22, 301-322.
- Dutton, D. G., & Hart, D. S. (1994). Evidence for long-term, specific effects of childhood abuse and neglect on criminal behaviour in men. *International Journal of Offender Therapy and Comparative Criminology*, 36, 129-137.
- Fondacaro, K. M., Holt, J. C., & Powell, T. A. (1999). Psychological impact of childhood sexual abuse on male inmates: The importance of perception. *Child Abuse & Neglect*, 23, 361-369.
- Grogan-Taylor, A., & Otis, M. S. (2003). The effect of childhood maltreatment on adult criminality: A Tobit regression analysis. *Child Maltreatment*, 8, 129-137.

- Johnson, J. R., Ross, M. W., Taylor, W. C., Williams, M. L., Carvajal, R. I., & Peters, R. J. (2006). Prevalence of childhood sexual abuse among incarcerated males in a county jail. *Child Abuse & Neglect, 30*, 75-86.
- Maxfield, M. G., & Widom, C. S. (1996). The cycle of violence: Revisited six years later. *Archives of Pediatrics and Adolescent Medicine, 150*, 390-395.
- Messina, N., & Grella, C. (2006). Childhood trauma and women's health outcomes in a California prison. *American Journal of Public Health, 96*, 1842-1848.
- Owen, B., & Bloom, B. (1995): Profiling women prisoners: Findings from national surveys and a California sample. *The Prison Journal, 75*, 165-185.
- Raskin, H. S., & Widom, C. S. (2003): Intimate partner violence among abused and neglected children in young adulthood: The mediating effects of early aggression, anti-social personality, hostility and alcohol problems. *Aggressive Behavior, 29*, 332-345.
- Scott, K. L., & Lishak, V. (2011). *Intervention for maltreating fathers: Statistically and clinically significant change*. Manuscript submitted for publication.
- Scott, K. L., & Crooks, C. V. (2004). Effecting change in maltreating fathers. *Clinical Psychology: Science & Practice, 11*, 95-111.
- Scott, K. L., & Crooks, C. V. (2007). Preliminary evaluation of an intervention program for maltreating fathers. *Brief Treatment and Crisis Intervention, 7*, 224-238.
- Smith, C., & Thornberry, T. P. (1995). The relationship between childhood maltreatment and adolescent involvement in delinquency. *Criminology, 33*, 451-481.

- Stirpe, T. S., & Stermac, L. E. (2003). An exploration of childhood victimization and family-of-origin characteristics of sexual offenders against children. *International Journal of Offender Therapy and Comparative Criminology*, 47, 542-555.
- Stouthamer-Loeber, M., Loeber, R., Homish, D. L., & Wei, E. (2001). Maltreatment of boys and the development of disruptive and delinquent behaviour. *Development and Psychopathology*, 13, 941-955.
- Tyagi, S. V. (2006). Victimization, adversity and survival in the lives of women offenders: Implications for social policy and correctional practice. *Canadian Woman Studies*, 25, 133-138.
- Tyagi, S. V. (2006). Victimization, adversity and survival in the lives of women offenders: Implications for social policy and correctional practice. *Canadian Woman Studies*, 25, 133-138.
- Tyagi, S. V. (2007). *Fathering Program Needs Assessment Brief*. Brampton: Department of Psychology, Ontario Correctional Institute.
- Vogeltanz, D. N., Wilsnack, C. S., Harris, R. T., Wilsnack, W. R., Wonderlich, A. S. & Kristjanson, F.A (1999). Prevalence and risk factors for childhood sexual abuse in women: National Survey Finding. *Child Abuse and Neglect*, 23, 579-592.
- Weeks, R., & Widom, C. S. (1998). Self-reports of early childhood victimization among incarcerated felons. *Journal of Interpersonal Violence*, 13, 346-361.
- Widom, C. S. (1989). Child abuse, neglect and violent criminal behavior. *Criminology*, 27, 251-271.

Widom, C. S. (1995). Childhood sexual abuse and its criminal consequences. *Research in Brief: National Institute of Justice*. Retrieved from

<http://www.ncjrs.gov/textfiles/abuse.text>

Wyatt, G. E., Burns Loeb, T., Solis, B., Carmona Vargas, J., & Romero, G. (1999): The prevalence and circumstances of child sexual abuse: Changes across a decade. *Child Abuse and Neglect*, 23, 45-60.