



Child protection fathers' experiences of childhood, intimate partner violence and parenting



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ABSTRACT

Research on mothers in child protection families has revealed that they often have a history of childhood abuse. Research has also shown that a considerable proportion of child maltreatment co-occurs with intimate partner violence (IPV) towards the mother. However, there is a dearth of research on the childhood histories and IPV victimization experiences of fathers in child protection families. To address these gaps in the literature this exploratory mixed method study of 35 men associated with a parenting program in Australia investigated fathers' childhood experiences, exposure to IPV and concern for their children's safety. Although this study was conducted with a specific group of fathers screened for serious personal problems, the findings suggest that, similar to mothers in child protection families, there are some fathers within typical child protection populations who have histories of childhood abuse and IPV victimization. In addition, many of the fathers in this study tried to protect their children from maltreatment related to the other parent. The main implication of the findings is that child protection fathers who have histories of abuse and IPV victimization should be afforded the same support and assistance as mothers in similar situations.

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1. Introduction

A mother's history of childhood maltreatment and Intimate Partner Violence (IPV) victimization are factors known to increase the risk of her children being maltreated (Hartley, 2002, 2004; Ross, 1996; Sidebotham & Golding, 2001; Stith et al., 2009). However, little research has investigated if these same associations exist for fathers. There is a dearth of knowledge about fathers with children who are involved in Child Protection Services (CPS), as fathers have tended to be overlooked by both child protection practitioners and researchers, and these fathers themselves have proven difficult to reach by both services and studies (Zanoni, Warburton, Bussey, & McMaugh, 2013). Although in some studies fathers have been interviewed about their experiences of being involved with CPS (Coady, Hoy, & Cameron, 2013; Ferguson & Hogan, 2004; Smithers, 2012; Storhaug & Øien, 2012; Strega, Brown, Callahan, Dominelli, & Walmsley, 2009), few studies have sought to investigate fathers' childhood experiences, exposure to IPV, or concerns for their children's safety relating to the other parent. The aim of the present study was to address these gaps in the literature by exploring the life stories of a small group of fathers whose children had been involved with CPS in Australia. A review of the scant existing literature suggests that a small percentage of fathers may have similar life experiences to many women in child protection families, having suffered

maltreatment themselves as children, having endured IPV victimization, and wanting to protect their children from harm by the other parent. The association between IPV victimization and child maltreatment needs to be addressed within the larger body of knowledge on men as victims of IPV in general. Furthermore, the literature on fathers in general suggests that just as mothers can play a protective, positive role in the lives of at-risk children, so too can fathers. The extant literature also suggests that the benefit of father involvement may be transmitted to the next generation.

1.1. Fathers' Life Stories and Childhoods

A limited number of studies have investigated the life stories of fathers involved with CPS. One such study was conducted with 18 fathers in Canada, and themes such as children being a motivation for positive life changes, fathers rescuing their children from unsafe situations with their mothers, and fathers' concerns about the effect of parental conflict on children, were reported (Cameron, Coady, & Hoy, 2014). Other studies focusing on fathers' experience of CPS rather than their life stories have noted a history of childhood trauma, incidents of alleged false allegations of child sexual abuse, and disclosures of IPV perpetration as well as victimization (Ferguson & Hogan, 2004; Smithers, 2012; Storhaug & Øien, 2012; Strega et al., 2009). However, these findings have mostly pertained to only one or two individuals in each study. Some larger scale studies have also noted CPS fathers' frequent history of childhood maltreatment. For example, a study of 1266 families identified for child neglect in Canada found that 21% of

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the fathers had been maltreated as children, according to the case social workers (Dufour, Lavergne, Larrivée, & Trocmé, 2008). In a study of 162 parents with allegations of child maltreatment in the UK, forensic psychologists determined that between 22–56% of fathers believed to be the perpetrators of child maltreatment had been physically and/or sexually abused as children (Dixon, Hamilton-Giachritsis, Browne, & Ostapuik, 2007). However, the number of non-perpetrating fathers with childhood histories of abuse was not reported. The “Children of the Nineties” longitudinal study of parental risk factors for 162 maltreated children in the UK, found that 34–36% of fathers reported in a postal questionnaire that their childhood was not really happy or unhappy, 11–14% said their parents had been physically cruel, and 1–4% said they had been sexually abused in childhood (Sidebotham & Golding, 2001). While many CPS fathers report similar childhood experiences to CPS mothers, fathers' life stories also appear to contain unique features, such as confessions of IPV perpetration, and being falsely accused of sexually abusing their children.

1.2. Fathers as victims of IPV

The topic of male victims of IPV is contentious, with some researchers asserting that IPV is symmetrical (i.e. perpetrated equally by men and women) (Dutton, 2008; Straus, 2008, 2011). However, the majority of researchers in the domestic violence field contend that IPV is not symmetrical, as most perpetrators of serious IPV are men, and those women who are violent usually act in self-defense (Dobash & Dobash, 2004; Johnson, 2006, 2011). Both research perspectives claim that the other is motivated by political agendas (i.e. feminism or men's rights) and that the other's studies contain methodological and sampling flaws (Dutton, 2012; Dutton & Corvo, 2006; Johnson, 2011). In an attempt to resolve this debate, Johnson (2006) proposed that there are four different types of IPV. Of most relevance are two very distinct types of IPV, ‘situational’ or ‘common’ couple violence, and ‘patriarchal’ or ‘intimate’ terrorism. According to these paradigms, most IPV is situational couple violence and is symmetrical, whereas a small proportion of IPV is intimate terrorism and is almost exclusively male perpetrated (Johnson, 2006). Large-scale, nationally representative studies conducted by the governments of the UK, US and Australia have supported the gender asymmetric view by demonstrating that women report significantly more violence and injuries from their partner than do men, and the majority of victims of sexual violence are women (Australian Bureau of Statistics, 2013; Smith, Osborne, Lau, & Britton, 2012; Tjaden & Thoennes, 2000). The rate of male IPV victimization in the community according to these studies is 5–11%, compared to 17–24% of women (Australian Bureau of Statistics, 2013; Coker et al., 2002; Office for National Statistics, 2014; Tjaden & Thoennes, 2000). Interestingly, a nationally representative study of 703 young adults in Sweden who reported exposure to IPV in childhood found that 5% of participants had witnessed unidirectional mother-to-father violence, 22% had witnessed unidirectional father-to-mother violence, and 71% reported bidirectional violence (Miller, Cater, Howell, & Graham-Bermann, 2014).

Although there are significantly less male, compared to female, victims of IPV, even 5% of the total population of a country equates to a substantial number of male victims. Additionally, there is now evidence, from self-report and third party sources, that some of these men experience severe and non-mutual IPV (Dixon et al., 2007; Dufour et al., 2008; Hines, Brown, & Dunning, 2007; Hines & Douglas, 2010). Male victims can experience physical and psychological abuse that is as damaging as the intimate terrorism experienced by some women (Allen-Collinson, 2009; Coker et al., 2002; Douglas & Hines, 2011; Dutton, 2007; Hines & Douglas, 2010; Migliaccio, 2002). Studies also show that female perpetrators use strategies similar to those of male perpetrators to control and diminish their victims. However, female perpetrators are more likely to compensate for their lesser

physical strength by using an object, such as a bat or knife, to injure their partner (Capaldi et al., 2009). Additionally, male victims are less likely to report the abuse and seek help. This appears to reflect an unwillingness to acknowledge their victimization, the shame and stigma of being abused by and afraid of a woman, the fear that they will not be believed, and the fear of being accused of being a perpetrator and arrested (Allen-Collinson, 2009; Douglas & Hines, 2011; Hines & Douglas, 2010; Hogan, Hegarty, Ward, & Dodd, 2011; Migliaccio, 2002; Tsui, Cheung, & Leung, 2010). Research suggests these fears may be well-founded. A study of 190 male callers to a domestic abuse helpline for men in the US showed that men who did call the police or standard domestic violence helplines reported being disbelieved or accused of being a batterer, and were often referred to batterer programs (Hines et al., 2007). The 2012 Personal Safety survey of 17,201 Australians found that 58% of women never contacted police regarding their experience of past partner violence, whereas 80% of men never contacted police (Australian Bureau of Statistics, 2013). This Australian survey also found that 39% of women currently experiencing partner violence never sought advice or support, whereas 70% of men in this situation never sought advice or support. Another difference between male and female victims of IPV is that male victims are more vulnerable to false allegations of partner and child abuse due to the common stereotype that men are predisposed to aggression and violence. For example, a study of 302 men who reported severe IPV from their female partners found that 67% of participants reported being falsely accused of IPV against their partner, 49% of those with children were falsely accused of physically abusing their children, and 15% were falsely accused of sexually abusing their children (Hines & Douglas, 2010).

A further difficulty with the issue of men as victims of IPV is that it is well recognized by those who work with male perpetrators of IPV that these men often claim to be the IPV victim, blame their partner, and refuse to take responsibility for their own abusive behavior (Bancroft, 2002; Morris, 2009; No to Violence, 2011). This has likely contributed to the widespread cynicism towards men who claim to be victims of IPV and deny being the primary perpetrators of IPV. A study conducted on the Men's Advice Line, a telephone service dedicated to supporting male victims of IPV in the UK, reveals some relevant statistics. It found that of 2903 men who initially identified themselves as victims of IPV, the trained helpline workers determined that 51% were actual victims of abuse, 16% were the primary perpetrators of abuse, 1.4% were engaged in mutual domestic violence, 13% were in unhappy but not abusive relationships, and in 17% of cases the final domestic violence category was unknown or uncategorized (Respect, 2013). Additionally, 15% of the callers initially identifying themselves as the victims of abuse shifted their identification by the end of the call, with 3% finally identifying themselves as perpetrators (Respect, 2013). Therefore, although there is evidence that some men do make false claims of being victims when in reality they are the primary aggressors, it appears that the majority do not. Given the controversial nature of this issue, it is pertinent to highlight that the organization managing this helpline (Respect) was created by an informal group of practitioners working with male perpetrators of domestic violence (Respect, 2014). After seven years of focusing solely on perpetrators, they expanded to include services to male victims of domestic violence.

Another factor to note is that abused men display similar characteristics to abused women, usually exhibiting low self-esteem and depression, accepting the blame for the abuse, minimizing or excusing the perpetrator's behaviors, and minimizing or denying the extent of injuries they have incurred at the hands of their partner (Allen-Collinson, 2009; Hogan et al., 2011; Migliaccio, 2002). Furthermore, female perpetrators of intimate terrorism appear to use similar strategies of blaming their victim, denying responsibility, and falsely accusing their victim of abusing them (Hines et al., 2007). It is of critical importance, therefore, that practitioners are able to distinguish between genuine victims of non-mutual IPV and primary perpetrators of IPV, regardless of gender.

1.3. Co-occurrence of intimate partner violence and child maltreatment

In addition to the body of research on male victims of IPV, there is emerging evidence that child maltreatment can be present in families where the father is the victim of IPV. The rate of co-occurrence between the IPV victimization of mothers and child maltreatment has been estimated to be between 30–60%, with a median co-occurrence rate of 40% (Appel & Holden, 1998; Edleson, 1999). In some studies the co-occurrence rate is as high as 75% (Cavanagh, Dobash, & Dobash, 2007; Fusco, 2013). Most research on children exposed to domestic violence has been informed by mothers' reports (Øverlien, 2010) or has only included cases where mothers were the victims of IPV (Hartley, 2002, 2004). However, the co-occurrence of IPV and child maltreatment in families where the mother is the perpetrator of both has received little attention, even though studies have identified this phenomena (Ross, 1996). For example, a study of 1266 families identified for child neglect in Canada indicated that 40% of mothers and 11% of fathers were victims of domestic violence, as assessed by the investigating social workers (Dufour et al., 2008). While the authors commented on the need to focus on spousal violence against mothers in neglectful families and provide appropriate support to help mothers protect their children, there was no comment on the 11% of fathers ($n = 63$) in similar situations.

Two studies investigating the co-occurrence of child maltreatment and IPV explicitly acknowledged that women can be perpetrators of both partner and child maltreatment (Dixon et al., 2007; Ross, 1996). The first study found that of a total of 162 parents with allegations of child maltreatment made against them, the mother was the perpetrator of both child maltreatment and IPV in 14% of cases ($n = 23$), as determined by case forensic psychologists (Dixon et al., 2007). The authors concluded that while fathers were significantly more likely to commit both IPV and child maltreatment, a more holistic perspective in both research and practice is needed, rather than focusing exclusively on violent men (Dixon et al., 2007). The second study was conducted with a nationally representative sample of 3363 American parents, using the self-report Conflict Tactics Scale to measure violence towards one's children and partner (Ross, 1996). Controlling for age of the child, age of the parent, SES of the family, race, and gender of the child, it was found that violence by the wife towards the husband was a statistically significant predictor of the mother's physical abuse towards her child. For both husbands and wives it was found that the greater the amount of violence towards a spouse, the greater the probability of physical abuse towards the child. Although this relationship was stronger for husbands, when the wife was violent towards her husband, there was a 38% probability that she would also physically abuse her male child (Ross, 1996). Therefore, even though there is a greater likelihood of men perpetrating both partner and child abuse, there is evidence that some women also engage in both forms of violence.

1.4. The protective benefits of fathers

Since a small proportion of mothers maltreat both their partners and their children, it is important that child protection workers can accurately distinguish between parents who are and are not a risk to their children, regardless of gender. It is not the case that all child protection fathers are a threat and/or negative influence in the lives of their children. Rather, fathers in general have been found to confer protective benefits to vulnerable children (Zanoni et al., 2013). For example, a study of 1480 families from the Fragile Families study in the US, demonstrated an association between positive father involvement with a child and lower maternal child physical abuse risk (Guterman, Lee, Lee, Waldfogel, & Rathouz, 2009). Another study examining child welfare record data from 1969 child welfare cases in the US found that children in cases where a father had been identified by child welfare spent less time in foster care and were more often reunified with a parent than those children in cases where no father was identified

(Burrus, Green, Worcel, Finigan, & Furrer, 2012). A further study conducted with 141 community participants, almost half of whom had been maltreated as children, found that the quality of care from their father during childhood, and the current severity of depressive symptoms, were better predictors of adult quality of life than childhood maltreatment (Rikhye et al., 2008). Maternal care was not a unique predictor of quality of life.

1.5. Intergenerational transmission of protective benefits

There is some indication that the protective benefits that fathers in general confer on their children may extend to the next generation. As the co-occurrence of IPV and child maltreatment is well-acknowledged, so is the intergenerational transmission of child maltreatment. However, although there is a substantial body of research reporting the statistical associations between childhood experiences of abuse and increased risk of maltreating one's own child, the intergenerational transmission of child maltreatment is not inevitable and the cycle of abuse is not perpetuated in most families (de Paúl, Milner, & Múgica, 1995; Jaffee et al., 2013; Newcomb & Locke, 2001; Widom, 1989). Key factors in breaking the cycle of abuse tend to be related to the quality of interpersonal relationships (Jaffee et al., 2013). Fathers have been found to play an important role in halting the continuation of child maltreatment between generations. For example, using a measure of child abuse potential to indicate possible future child maltreatment of their own children, a study of 403 Basque university students found that those with a history of childhood abuse and high levels of father support during their childhood had the lowest levels of child abuse potential, and those with a history of abuse and low levels of father support had the highest levels of abuse potential (de Paúl et al., 1995). In fact, father support was a more important predictor of abuse potential than the presence of a childhood history of abuse. Similarly, a US study of 78 mothers found that father support during childhood was the factor most strongly associated with decreased child abuse potential scores (Caliso & Milner, 1994). In addition, a longitudinal study of 14,138 children in the UK found that one of six factors that predicted if a mother had a child registered with Child Protection was her own father being absent during her childhood (Sidebotham & Golding, 2001). Therefore, in parallel with the concept of the intergenerational transmission of child maltreatment, these studies suggest there may also be an intergenerational transmission of protective factors, with fathers making a unique and important contribution.

1.6. Aim of this study

As shown in the preceding literature review, there is evidence suggesting that some fathers in child protection families may have similar life stories to those of many mothers in these families. Practitioners have identified that some fathers have suffered from childhood abuse and that a small proportion of child protection cases involve primarily female-perpetrated maltreatment against both their children and their male partner. However, little research has specifically examined fathers' self-reported childhood experiences or the co-occurrence of father-victim IPV and child maltreatment. In addition, there has been almost no research on child protection fathers' parenting concerns for their children. To address these gaps in the child protection literature, the current study explored the question of whether or not some fathers in child protection families have similar childhood, IPV and parenting experiences as those common to many child protection mothers.

2. Method

Both quantitative and qualitative methods were employed to provide complementary data. This approach allowed for the examination of both objective measures and more detailed aspects of participants' experiences, and has been recommended for the study of fathers (Øverlien, 2010; Roggman, Fitzgerald, Bradley, & Raikes, 2002).

2.1. Participants and procedure

Participants were 35 men associated with a fathers' parenting intervention program in Sydney, NSW, Australia. All men were, or had been, engaged in the program, except for three men who were receiving assistance from the staff but chose not to participate in the program. The two primary aims of the program are to break patterns of destructive family behavior and facilitate the restoration of children from out-of-home care to their father's care (King & Houston, 2008). Men convicted of child sexual assault are refused entry into the program. Men with current substance abuse and/or acute mental illness problems, or men who have been violent towards any family member in the past six months, are also not accepted into the program unless they are being closely monitored by health care professionals (King & Houston, 2008).

Thirty four participants completed a set of quantitative measures during a face-to-face interview. In addition, a sub-sample of nine fathers shared their life stories in a separate, audio-recorded interview. One father gave a life story interview but did not complete the quantitative measures. The life story interviews were semi-structured and conversational, and began with the researcher asking participants to describe their childhood. Field notes supplemented the life story interview data since ten additional fathers volunteered personal information about their childhood and/or IPV situation during the quantitative interviews.

These data were collected as part of a larger study examining the demographic, family, and psychological profiles of participants (Zanoni, Warburton, Bussey, & McMaugh, 2014). Five questions on IPV were included because program staff had alluded to IPV concerns in their work with these men. This research was approved by the human ethics committee of Macquarie University, Sydney, and by the partner organization who runs the fathers' program. After the study had been explained participants gave written consent to be interviewed. The questions regarding intimate partner violence received particular ethical consideration and were prefaced by the interviewer stating, "The next few questions ask about your experience of violence in your home. You can choose not to answer any of these questions."

2.2. Measures

2.2.1. Childhood variables

2.2.1.1. Own father's involvement. Participants were asked, 'How involved was your own father in your upbringing?' (Bronte-Tinkew & Horowitz, 2010) and responses were either 2 = very involved, 1 = a little involved or 0 = not at all involved.

2.2.1.2. Role models. Participants were asked 'Are there any role models who have influenced you as a parent? If so, who are they?' (Masciadrelli, Pleck, & Stueve, 2006). Participants were coded as having a positive father role model if they said their father or both parents were a positive role model. Participants were coded as having no positive family role model if they said either they had no role model, program staff were their only role model, or they did not want to be like their own father (i.e. he was a negative role model).

2.2.1.3. Abusive childhood. This was coded based on qualitative data from the life story interviews and field notes. Those participants who described any type of abuse or neglect were coded as having an abusive childhood. In addition to the nine life story interviews, four other fathers volunteered information about their childhood during the quantitative interviews. Therefore, a total of 13 participants provided data regarding their childhood.

2.2.2. Intimate partner violence (IPV)

2.2.2.1. IPV victimization. An abbreviated and modified version of the Conflict Tactics Scale (Straus, 1979) was used to assess increasing severity of couple conflict and IPV. Participants were asked to respond with either 'yes' or 'no' to the following three questions: 'Have you ever had a partner or ex-partner push or shove you, or throw things at you?', 'Have you ever had a partner or ex-partner kick, bite, slap or punch you?', and 'Have you ever had a partner or ex-partner hit you with a hard object or stab you?'. From these three questions one variable was created measuring IPV severity on a 4-point Likert scale, where 0 = no IPV, 1 = mild IPV, 2 = moderate IPV and 3 = severe IPV. Participants who answered 'no' to all three questions were categorized as having no IPV, those who said 'yes' to being pushed or shoved were categorized as having experienced mild IPV, those who said 'yes' to having been kicked, bitten, slapped or punched were categorized as having experienced moderate IPV, and those who said they had been hit with a hard object or stabbed were considered to have experienced severe IPV. In all but one case, those who said they had been hit with a hard object or stabbed also said they had been kicked, bitten, slapped or punched, so this variable represents the highest level of IPV victimization reported by a participant. The questions deliberately used the phrase 'partner or ex-partner' so the perpetrator could not be identified.

2.2.2.2. IPV perpetration. Due to ethical considerations, it was not possible to ask participants if they had aggressed against their partners by using the same adapted Conflict Tactics Scale questions as used to measure IPV victimization. Instead, participants were asked, 'Have you ever been charged for hurting a partner or ex-partner?'. They were also asked if those charges were subsequently dropped. Since information about charges for IPV are on public record in Australia, asking these questions did not risk the researcher being obliged to report participants to the authorities if they admitted to violence against a partner. From these two questions, a single dichotomous variable was created to indicate likelihood of IPV perpetration, where 0 = never charged (i.e. less likely to be a perpetrator of IPV) and 1 = charged and the charges were not dropped (i.e. more likely to be a perpetrator of IPV). Due to the ambiguity of the situation where participants had been charged but those charges were later dropped ($n = 5$), this category was not included in the analysis.

2.2.3. Child protection issues for participants' children

2.2.3.1. Children in out-of-home care initially. It was determined whether or not participants' children were in out-of-home care when they first contacted the fathers' program by asking the fathers if they had ever been separated from their children, and if so, for how long. It was considered by the program host organization to be unethical to ask participants directly why their children were involved in CPS and/or removed from their home.

2.2.3.2. Restoration occurred or imminent. Participants were asked if their children were currently living with them, and if not, who they were living with, revealing current out-of-home placement.

2.3. Data analysis

Analyses of the quantitative data were conducted with the SPSS 20 statistical package. Descriptive statistics of the variables were examined, and Pearson's correlations were used to explore the associations between variables. A thematic analytic approach was used for the qualitative data as this method offers the flexibility to explore selected themes without being constrained by either existing theories, or the need to create a theory (Braun & Clarke, 2006). Although frequently subsumed within other methods of qualitative analyses, thematic analysis can be considered a method in its own right, and is particularly

useful within the field of psychology (Braun & Clarke, 2006). The qualitative data were searched for the broad themes of childhood experiences, IPV experiences, and participants' parenting concerns for their children.

3. Results

3.1. Quantitative results

3.1.1. Descriptive statistics

Descriptive statistics for fathers' childhood and IPV factors, and their children's out-of-home care status, are given in Table 1.

3.1.2. Childhood

Almost two-thirds of the study participants reported that they did not have very involved fathers (65%) or positive father role models (62%) during their childhood. Half the participants reported no positive family role model, suggesting difficulties with both parents and the absence of any other family member to provide positive parenting role models. Apart from biological parents, other family role models were brothers, grandmothers, and in one case, a foster father. Almost a quarter of the participants (24%) explicitly stated that they did not want to be like their father or wanted to parent differently to their own parents. Of the 13 participants who provided qualitative data concerning their childhood, almost two-thirds (62%) described abusive childhoods.

3.1.3. IPV

Twenty-six men (77%) said they had experienced a partner or ex-partner push, shove or throw things at them. Twenty men (59%) said they had a partner or ex-partner kick, bite, slap or punch them, and 14 (41%) had a partner or ex-partner hit them with a hard object or stab them. In total, 21 men (62%) reported moderate to severe IPV victimization. Most study participants (65%) reported never having been charged for IPV. Seven men (20%) reported they had been charged for IPV and those charges had not been dropped.

3.1.4. Child's out-of-home care status

Of the 20 fathers whose children had been in out-of-home care when they initially contacted the fathers' program, half already had

their children restored to them or the restoration process was already in progress.

3.1.5. Correlations between childhood, IPV and out-of-home care variables

Associations between participants' childhood, IPV factors and out-of-home care status are given in Table 2. There was a positive correlation between the participant's father being involved in their upbringing and having a positive father role model. Having a father involved in the participant's upbringing and having a positive father role model were both negatively correlated with having experienced an abusive childhood. Having no positive family role model was positively associated with having an abusive childhood. It is worth noting that the correlation between IPV victimization and IPV perpetration was weak and non-significant ($r = .15$).

Having their father involved in their upbringing and having a positive father role model were both correlated with participants having their child already restored from out-of-home care. Having no positive family role model was correlated with not having their children restored. No childhood or IPV factors were significantly correlated with initially having a child in out-of-home care.

3.2. Qualitative results

A thematic analysis of the qualitative data was conducted in order to explore the three themes of childhood experiences, IPV experiences, and child protection concerns for their own children. All participants and their family members were assigned pseudonyms to protect their identity. Suburb and city locations have also been replaced with fictional names to further ensure the anonymity of participants.

3.3. Childhood

3.3.1. Abusive childhoods

Of the 13 participants who discussed their childhood, five men (38%) described happy, or at least not unhappy, childhoods. However, 8 study participants described unhappy childhoods, with some having experienced extreme and long term maltreatment. Five men recounted being abused by their fathers. Ben recalled, "Dad used to severely beat me up for not going to school. He actually had a 20 minute conversation with me while he was hitting on my chest, pounding me through the floor of the house one night." Alistair said, "I don't remember much of it [his childhood] because the bits I do remember is just being abused a lot. I know my dad was an alcoholic and he used to abuse me and my mum a lot... I think because when I was younger, I was old enough and used to try and stand up when he used to abuse my mum. So then [he'd] take it out on me." Stanley disclosed that at the age of 8 his father threw him against the edge of a table and broke his back. He is now unable to find employment because even a minor back injury could cause paraplegia. During his childhood Stanley also witnessed his father raping his two younger sisters. He used to cook for and take care of his younger sisters, until they were placed in out-of-home care.

Three men voluntarily revealed that they had been sexually abused as children, two by their own father and one by his grandmother's partner. Bernard disclosed that during his childhood his father sexually abused his sister. After his sister was placed in out-of-home care, his father began to sexually abuse him. Edward said he was raped by his grandmother's partner when he was a young child and that it continued for several years.

For three study participants, however, it was their mother rather than their father who maltreated them during their childhood. Interestingly, in each of these cases the participant's biological father was absent from the home due to the parents' divorce or the fathers' job commitments. Simon recalled his childhood in this way:

"It's a bit hard when I was growing up young because I didn't have a father around... I used to come home from school and my mum was

Table 1
Descriptive statistics.

Variable (range)	N	M	(SD)				
Childhood factors				Not at all	A little	Very much	
Father involved in upbringing (0–2)	34	.94	(.89)	14 (41%)	8 (24%)	12 (35%)	
Positive father role model	34			Yes	No		
No positive family role model	34			13 (38%)	21 (62%)		
Abusive childhood	13			17 (50%)	17 (50%)		
IPV factors				None	Mild	Moderate	Severe
IPV victimization (0–3)	34	1.82	(1.19)	7 (21%)	6 (17%)	7 (21%)	14 (41%)
IPV perpetration	29			Never charged	Charges upheld		
				22 (65%)	7 (20%)		
Child's Out-of-home care status				Yes	No		
Child ever in OOHHC	34			20 (59%)	14 (41%)		
Child restored	20			10 (50%)	10 (50%)		

Table 2
Pearson's correlations between childhood, IPV and child out-of-home care status.

	Own father involved	Positive father role model	No positive family role model	Abusive childhood	IPV Victimization	IPV Perpetration
Own father involved in childhood	–					
Positive father role model	.33*	–				
No positive family role model	–.14	–.79***	–			
Abusive childhood	–.55**	–.85***	.63**	–		
IPV victimization	–.01	–.14	.20	.08	–	
IPV perpetration	–.16	–.11	.26	.41	.15	–
Child Ever in OOHC	–.19	–.08	.24	–.18	.03	–.10
Child restored	.57***	.52**	–.41*	–.30	–.29	–.47*

Note. * $p < .10$. ** $p < .05$. *** $p < .01$.

Abusive childhood $n = 13$. IPV perpetration $n = 29$. All other variables $n = 34$.

drunk. Asleep while cooking. You know then took drugs. Just an alcoholic she was and popped pills. I saw things I shouldn't have seen. Lying back with another man.... I've been through a lot when I was young. I even tried to kill myself when I was young [7 years old]... I used to get beaten by a broom, jug cord, a stick... My own mother. She used to hit me for no reason sometimes ... I used to get good hidings where I was black and blue".

Edward recounted the following:

"My mum and dad divorced when I was three...A lot of fights outside the house, police were called all the time. We had to change doctors when I was 7 because my mum broke into the doctor's surgery to get all medications. So we were barred from four medical centers in Blackwall. Very hard for us that when we got sick to try to find a doctor... My mum abandoned us in Margoryton...That was a big ordeal because we were left standing on the street for about 12 hours until dad got there [Edward was 4 years old at the time]".

3.3.2. Delinquent boys' homes and out-of-home care

Some of the study fathers were in and out of boys' juvenile homes or foster homes. For example, Ben spent a large part of his teenage years in various juvenile delinquent boys' homes because he began truanting from school at the age of 12. He said he learnt drugs from his stay in one of these homes, and how to steal cars from another home. Alistair recalled, "I was always running away from home when I was old enough to do it.... Maybe 13? In and out of boys' homes." After Bernard told his sister that their father was sexually abusing him, he was placed in a boys' home. However, he was sexually abused by one of the staff there, so was moved to another home. Bernard couldn't remember when he left school because he was moved so often. He fathered his first child at the age of 15. Dennis's mother was addicted to drugs and his father had schizophrenia and was in prison for many years when he was a child. Dennis had been in foster care since the age of three. Stanley was also in and out of foster homes throughout his childhood. Roland lived with his grandmother until he was 13, then he moved in with his parents.

3.4. Intimate partner violence (IPV)

3.4.1. Victims of IPV

Four of the nine men (44%) who agreed to give their life stories reported being victims of IPV. An additional four men mentioned having been stabbed by their ex-partners during the quantitative interviews. Therefore, a total of 8 of the 19 participants who provided qualitative data (42%) described being physically abused by an ex-partner. For example, Bruce said his ex-partner stabbed him twice, once in the neck and once in the shoulder. Tim said he received 33 stitches where his partner had stabbed him, and he was very proud of the fact that at no time did he ever hit her back. Bernard said his partner had stabbed him in the chest with a screwdriver while he was driving. Adam said his ex-partner had stabbed him with a knife. In a separate incident,

Adam recounted that one day when he walked through the front door of their home his ex-partner began hitting him with a cricket bat. His daughter came out to greet him, so he bent over her to protect her and consequently received bruising all down his side and back.

Colin said that his ex-partner was abusive to both him and their children:

"She was calling him [his son] a spastic and stuff like that. I said you don't dare do that because - I knew there was something wrong with him but you don't call him names and you don't put him down... she'd end up calling me a spastic and then she'd hit him and she'd attack me and hit me, just defending my children... We used to have a metal bar, it was ...pretty heavy. She tried to smack me over the head with it actually and I've put me arm up and she's hit me arm....She would bite and sometimes tried to pull my hair...One day because my son was asking for a juice, he wanted juice. He brought out the juice bottle because she had to get him juice, she was that upset, she'd turn around and threw it at my head, split my eye open."

3.4.2. IPV victims not helped

Two fathers who disclosed being victims of constant IPV described how their victimization had not been believed or had been minimized by the police and child protection workers. These participants did not receive the help and support they needed. Roy's story is an example:

"I remember them [the police] coming out and I'd have cuts on my forearms...and there was an acoustic guitar just in splinters all over the place. They just didn't really seem to want to take it seriously at all, they just said, look we're not relationship counsellors, you sort it out.... I remember one occasion where we were on our way to a marriage counsellor because DOCS [child protection services] had suggested we do this...[His partner was] getting really upset and started hitting me at the bus stop and a bystander called the police and when the police turned up, they straightway just made straight for me, grabbed me, put me on the ground, cuffed me. Went to her, are you all right? You okay, did he hurt you?... But even then they - when I said, look I didn't lay a finger on her, she's been hitting me over and over again, she's been hitting me, I haven't touched her, I haven't even raised my voice at her. They needed to hear that from her, which they did, and then they came back over, so why was she hitting you? What were you doing?... They ended up saying 'you're lucky this time, next time we'll get you'."

Colin wanted help to leave his partner since both he and his children were being abused, but instead child protection workers repeatedly suggested they have relationship counselling:

"It was on several occasions I told her, I said, I don't want to be with this woman and she [the child protection worker] just kept trying to push for family counselling and trying to get us help... I just wanted some advice, guidance or - I just wanted to know what I could do, what my options I wanted to leave her on many occasions... I wanted to take the kids with me... Where am I supposed to go with three children?..."

I didn't have anywhere to go... Being the way they were I've only got two arms. I could carry the girls but Josh and the way he was [autistic], he could have just run off. I was scared that he'd just run off, run on to the road, get hit by a car. I thought it would have been very hard to try and leave with bags and the kids on my back".

3.4.3. False allegations

Ten of the 35 fathers (28%) claimed that they had been falsely accused of either IPV or child abuse. For example, Ben said,

"So I got the shits one day and picked my daughter up, locked the screen door and climbed in my car and drove off. She then rang the police and said that I kicked the front door in, abducted my daughter after beating the shit out of her... and all this sort of stuff.... Anyway, Mum had to take my daughter to the nearest police station where she lived so that they could just investigate, check her body out. The minute that they did all of that [and saw that his daughter was unharmed], the desk sergeant came over and let me go home."

Perry recounted that his partner left him not long after becoming pregnant with their child. After the birth, his baby son was removed from his mother and placed in out-of-home care as there were concerns about the baby's safety. When Perry asked for custody of his son, his ex-partner claimed that during an ultrasound appointment he threatened to kill her and her baby. However, her brother was present at the ultrasound and he testified in court against his sister saying that Perry did not make those threats. Perry has since been given custody of his son. Adam was accused by his children's mother of physically abusing his children. However, when they were in court, the judge ordered one-on-one consultation with Adam's children and his children confirmed that it was in fact their mother's new boyfriend who had beaten them, not their father. The children were subsequently given into Adam's care.

In four cases, fathers reported that it was their mother-in-law making false accusations against them. For example, Alistair said, *"It's hard when - because the mother-in-law - she's got the baby at the moment, and she keeps going in there and telling - saying stories. We've never really talked, or been around each other, and they just seem to believe what she says anyway."* Bernard reported that his mother-in-law told his eldest daughter to lie and say he had been sexually abusing her. When they went to court his daughter told the court her father had never done what she said but that she was afraid of her grandmother. All charges against Bernard were dropped. However, the child protection authorities still had in their records that he sexually abused his daughter. He was told by the child protection workers that being acquitted in court did not change their opinion that he was a child molester. Consequently, he is still not allowed to see his children. He has also been told that his case is closed, giving him no chance to clear his name. The fathers' program does not admit men convicted of child sexual abuse, so it is reasonable to assume that program staff had verified Bernard's acquittal of this charge by the court.

3.4.4. Perpetrating IPV

A few participants admitted to arguing with and yelling at their partners. Two men described incidents of assaulting their partners, and one father, Chad, admitted to having been violent in the past. Chad said he didn't know what empathy was until he joined the fathers' program.

Roy described being charged with assault:

"Yeah so I was holding Caroline [his daughter] and Janet [his ex-partner] was in the bedroom, she started shouting about something, I don't even know what it was. She came running out of the doorway at me and - because I was holding Caroline so I widened my stance a bit and turned my back to her. I had dreadlocks down to my bum at the time, she grabbed me by the hair and just pulled me off my feet... She seemed oblivious to the fact that I was holding a baby and she was just - so I threw a punch at her. The police got involved in that incident and I was charged..."

Cliff also disclosed that he had been charged for assaulting his wife:

"I've got one assault on my record... We had a big argument. It was out in the middle of the driveway and she was affected on [benzodiazepines] - so I've dragged her inside. She wouldn't come inside, she's yelling and screaming... Because of the fact I grabbed her by the arms - and she sat down on the ground. I didn't drag her along the ground, I picked her up and dragged her inside. It wasn't as if I dragged her by the hair into the house or anything, I just didn't want everything happening out in the middle of - because we live in a complex."

Three fathers acknowledged that there was a lot of arguing between them and their partners and that they would yell in frustration, often over the way their partner was treating their children. Colin said,

"I couldn't handle it, we argued a lot and I used to threaten her, make death threats and stuff like that... I just couldn't understand the way she treated the kids sometimes especially being a mother... I was like, you're f---ing crazy... I don't hit women, I don't beat women and stuff like that. But there were times I wanted to actually kill her sort of thing because this is my children. Every time I try and pull her up and explain to her what she was doing was wrong, it's like a brick wall would come up and she wouldn't [have] a bar of it, she wouldn't listen. I'd get so frustrated with her..."

Similarly, Alistair said, *"Because I usually yell and scream at her [his partner] a lot, the way she used to treat Nathalie [his daughter] - be sitting in the lounge watching TV, and Nathalie would go up to her and she'd push her away with her feet. So I'd yell at her for it. You don't treat a little - she was only two when she was doing that to her."*

3.5. Fathers' parenting concerns for their own children

3.5.1. Fathers as protectors when mothers are a risk

From this study there is evidence of fathers trying to protect their children by continuing to live with the mother, by offering to care for their children to release the mother from her caregiving responsibilities, and by removing their children from the mother. Colin described his situation in this way, *"To take me out of the home and leave Pam [the mother] alone with the kids, it's putting the kids in danger... I said [to the child protection worker], I can't do that, I can't leave the kids alone with Pam by themselves."* Colin also offered to take care of the children, *"Because I'd say to Pam all the time, look if you can't do it, let me do it. Just go move out, live somewhere else, let me look after the kids. That's what I wanted and she didn't want any bar of that. She'd just say, oh if I can't have the kids, you're not having them."* Ben also offered to take care of his children, *"She rang me up crying, all upset, blah, blah, blah, don't know what to do with the kids. I said to her how about if you let James and Holly come and live with me, I've got a school at the end of my street, they can go there... The next day she rang me, her answer was Michael [her boyfriend] said no because we will lose too much money. Two weeks later they [his children] were taken [into out-of-home care]".* Ben also allowed his ex-partner to live with him when she needed somewhere to stay, for the sake of his children, *"She flitted here, flitted there, moved around, different houses all the time. Used to ring me on a regular basis - we've got nowhere to stay. For the simple fact of having my kids in my house I used to let her come back so that my kids weren't living on the street."*

Two fathers were so concerned about their children's safety that they took matters into their own hands and removed their children from their mother. Adam described how, about a year after he and the mother of his three children separated, she rang him late one night crying. He could also hear his children crying in the background so he immediately drove to her place. He found her with two black eyes and his children with bruises over their backs and arms. His children said that their mother's new boyfriend had hit them all. So, Adam took his children on the spot. *"Just took them to Newpenny and stayed up there a*

bit just to try and get their spirits back up and I done all that.” This was not easy for him, as Adam recounts, “I did it very hard the first couple of months. I was financially stressed, I had nothing. All the kids came with was the clothes on their back... I just wish us men got more things like women. You know what I mean like refuge, help, support.” There was a court case, and he was granted full care of his three children.

Graham recounted, “[I] took my daughter when she was six months old, due to the mother just putting her in a lot of danger, and didn't really care about Katie... So I took her and took off for two weeks, come back to a notice saying I had to go to court... Then, we went to court and the judge basically looked at her and laughed at her, and said you're not getting her back - that she stays with the father - he could clearly see everything that was going on...”

Some fathers believed that both police and child protection authorities did not do enough to protect their children from their ex-partners. For example, Colin said that his children's mother used to verbally abuse his three children, lock them in their bedrooms for hours, hit them over the head, had slammed the door in their daughter's face resulting in her nose bleeding, and had kicked their son in the stomach. He called the police numerous times, but, in his words, “They [the police] weren't harsh enough on her... She'd recently been charged for assaulting my son and stuff so she has to go to court for that. But a lot of the times she was taken away... Always a couple of hours later she'd be back in the house and I thought that was wrong. Because if that was me the police would make sure I was gone and I wasn't allowed to return to the home because of the threat to the mother and the children.”

Similarly, Perry described how his six week old son was removed from his mother and placed in out-of-home care due to the mother's severe post natal depression. Not long after removal, child protection authorities decided to return his son to Perry's ex-partner, despite a report from the psychiatrist stating that he had fears for the baby's safety if he was given back to his mother. Only after Perry's lawyer intervened did child protection authorities change their decision.

3.5.2. Wanting to parent differently to their own parents

Eight of the 19 study participants who provided qualitative data (42%) expressed their desire to parent differently to their own parents and give their children a better childhood than they had experienced. Ben explained, “I'm not going to be like the way my father was when he found out I was on pot and all this other stuff and go ballistic and beat the shit out of him [his son], try and beat it out of him. I will sit him down and tell him what the outcome of it will be.” Edward said, “That's why I'm staying with my wife, I want to make sure we stay together so the kids get a stable upbringing... As long as my kids don't go through the same thing. The trauma.” Adam, whose own father had been severely abused as a child, explained; “The older I got I realized that myself because my father ...couldn't show love because he didn't have any love from his parents when he was young... So me with my children a hug and I love you mean the world... I didn't have that when I was young... Yeah giving them [his children] a good future which I didn't have.” Colin described his attitude in this way, “Because a lot of the things that I put up with as a child she [his partner] was doing to my children and I'm totally against it. Like flogging my kids or calling them names, I'm just totally against that. I was treated like that as a child and I didn't like it”

4. Discussion

This mixed method exploratory study of 35 fathers associated with a fathers' parenting program in Sydney, Australia, explored the question of whether or not some fathers have similar childhood, IPV and parenting concerns as those of many mothers in child protection families. The findings indicated that many of the fathers in the study had experienced abusive childhoods, IPV victimization and concerns for their children's well-being, similar to the experiences of many child protection mothers. When drawing conclusions from this study, however, it should be noted that the study participants were drawn from a parenting program

which screens out men with serious personal problems, such as current drug and alcohol abuse, and violence issues. It is therefore possible that these results only apply to a subgroup of fathers within the broader child protection population. Nonetheless, the fact that this subgroup of fathers exists is important for child protection policy and practice.

4.1. Fathers' childhood

Of the study participants who discussed their childhood, many had experienced maltreatment from either their father or their mother. In the quantitative data, half of the respondents reported that they did not have any positive family role model for good parenting. In the qualitative data some participants described being “beaten” and “flogged” as children. Three participants disclosed having been sexually abused by male family members, and one was also sexually abused by staff at a boys' home. Some participants had grown up with alcohol and drug abusing parents, some had witnessed domestic violence between their parents, and one had witnessed the raping of his sisters by his father. Therefore, many men in this study experienced very difficult, even abusive, childhoods, similar to those experienced by many child protection mothers.

Despite the high rate of childhood maltreatment histories, the present study found a generally positive effect of participants' own fathers if they had been involved parents. Almost two-thirds of participants did not have a father who had been very involved in their upbringing or who was a positive role model. However, when participants did have a very involved father, this was associated with having a positive father role model, indicating that, in most cases, very involved fathers were a positive influence in their sons' lives. In addition, those participants who did have an involved father or a positive father role model, were less likely to report having an abusive childhood. Although this is only an association and therefore is not indicative of a causal relationship, this finding does suggest that the positive involvement of a father in his child's life may confer protective benefits, which is consistent with emerging evidence on the importance of fathers in their children's lives (see Zanoni et al., 2013 for a review). However, it is necessary to place this quantitative data beside the qualitative data describing the severe physical, and even sexual, abuse some participants endured at the hands of their own fathers. Together, these quantitative and qualitative data suggest that even though some individual fathers are extremely abusive, fathers who are very involved in their children's upbringing are typically a positive influence in their children's lives, even in child protection families.

4.2. Intimate partner violence

In the present study, more than 40% of the participants who provided qualitative data mentioned being physically abused by an intimate partner. Some of the reported acts of violence were quite severe, such as being struck by metal bars, cricket bats and guitars, and being stabbed with knives and screwdrivers. This qualitative finding was supported by the quantitative data where approximately 40% reported that they had been hit with a hard object or stabbed. More than half this sample reported experiencing moderate to severe physical abuse by a female partner. Given that most study participants had some form of involvement with CPS (see Zanoni et al., 2014, for details), these results suggest that there may be a subgroup of fathers within the CPS system whose partners are abusing both their children and themselves. The high co-occurrence rate of IPV and child maltreatment found in the present study (approx. 40%) is similar to that typically found for child protection mothers (Appel & Holden, 1998; Edleson, 1999). The co-occurrence of IPV victimization and child maltreatment was illustrated by Colin's story in particular, where he described his ex-partner's physical abuse towards his children and himself. His account was similar to that of an Irish child welfare father who reported 14 years of severe physical abuse by his wife (Ferguson & Hogan, 2004). The Irish father's three

teenage children separately described how their mother had regularly beaten them and their father during their childhood. However, due to his tattoos and muscular physique, no one believed the Irish father was a victim of IPV. In the present study, Roy's story highlighted that even if there is clear physical evidence that a man has been assaulted by his female partner, and even if she admits to the assault, the violence against a man is often minimized or assumed to be justified. This is consistent with other studies that have also reported incidents where men are not believed to be the victims of IPV, even if their partner admits to being the aggressor (Hines et al., 2007; Migliaccio, 2002).

It was surprising that the current study found no association between experiencing an abusive childhood and IPV victimization, since the 2012 Australian Personal Safety survey demonstrated that men who had been physically and/or sexually abused before the age of 15 were more than three times more likely to have experienced partner violence than those without an abusive childhood (13.8% vs. 4.1%) (Australian Bureau of Statistics, 2013). It is possible, however, that the sample size of those who discussed their childhood in the current study was insufficient to detect this association.

While there is justifiable cynicism towards men who say they are victims of IPV, given the propensity of some abusive men to claim to be victims when they are in fact the primary perpetrator of the violence (Bancroft, 2002; Morris, 2009; No to Violence, 2011), there is consistent evidence that a small proportion of victims of severe IPV are men (Australian Bureau of Statistics, 2013; Coker et al., 2002; Hines et al., 2007). There was no apparent motivation for the men in this study to make false claims of IPV victimization, since the focus of this study, as well as the focus of the fathers' program, was *not* IPV. Furthermore, due to the ubiquitous belief in Western society that only women can be victims of IPV, those men who claim to be victims of IPV risk being viewed as weak and feminine (Hines & Douglas, 2010; Hines et al., 2007; Hogan et al., 2011; Migliaccio, 2002; Tsui et al., 2010). In addition, the same methodology (i.e. allowing victims to tell their stories) has been employed with female victims of IPV for decades, and this has been considered a valid and useful approach (Hines et al., 2007).

The present study found that approximately a third of participants claimed to have been falsely accused of either domestic violence or child abuse. In at least three of these cases, the fathers reported having been cleared of these charges in court. One father was found not guilty of sexually abusing his daughter, yet the child protection authorities still had in his record that he was a child sexual offender and determined that he should not be allowed to see his children. This is similar to an account of a child welfare father in Scotland who had been falsely accused of sexually abusing his step-daughter (Smithers, 2012). Even though the Scottish father was cleared of all charges in the criminal and civil courts, he was still treated as guilty by the child protection authorities and not allowed to live in his family home. Similar stories of false accusations of child sexual abuse against child welfare fathers have been found in studies in Norway and Canada (Storhaug & Øien, 2012; Strega et al., 2009). In addition, false allegations and 'using the system' against men has been reported in studies of male victims of IPV, indicating that female perpetrators sometimes use false accusations as another instrument of abuse (Hines & Douglas, 2010; Hines et al., 2007).

Regarding IPV perpetration, almost two-thirds of participants said they had never been charged for IPV, and only a fifth of participants reported sustained IPV charges. However, due to social desirability, some actual perpetrators of IPV may not have disclosed sustained IPV charges. In addition, almost 60% of IPV is not reported to the police by women (Australian Bureau of Statistics, 2013), so the current measure could be an under-estimate. It is worth noting, though, that the fathers' program from which these participants were drawn does not admit men with current domestic violence issues into the program, so it is reasonable to accept that most study participants were not chronically violent men. Furthermore, some study fathers mentioned in passing that they do not believe in hitting women, regardless of how they

were being treated or how frustrated they were with their partner. Men's determination not to retaliate and hit a woman has been referred to as "chivalric masculinity" and has been found in other studies (Allen-Collinson, 2009; Migliaccio, 2002). Although a few of the fathers in the present study admitted to verbally abusing their partners and threatening them, their belief in this chivalric masculinity was consistent with the majority not reporting physical assault.

There is little evidence that the IPV occurring in these families was mutual situational couple violence. Rather, there was evidence of unidirectional female-to-male IPV, and a smaller amount of male-to-female IPV. If the IPV was mutual, a significant association would be expected between reported IPV victimization and IPV perpetration. However, no association was found.

It is important to situate the present study findings within the context of the broader IPV literature. Two studies that have accounted for male victims of IPV in their investigation of the co-occurrence of IPV and child maltreatment have demonstrated that mothers were the perpetrators of both child maltreatment and IPV in 11–14% of families (Dixon et al., 2007; Dufour et al., 2008). Therefore, it is probable that the present study's finding that approximately 40% of fathers reported being victims of severe IPV is higher than in the general child protection population. Participants in this study were a specific group of fathers who may represent a subgroup within the CPS system. Most were sufficiently motivated and committed to attend a parenting intervention program. None had been convicted of child sexual abuse, and they had been screened for unresolved IPV, substance abuse and untreated mental health problems (King & Houston, 2008). However, this is an important subgroup to understand as they do not fit typical negative stereotypes of child protection fathers (Zanoni et al., 2014) and may bring substantial benefits to their children.

Most of the debate regarding men as victims of IPV has focused on prevalence rates in comparison to women. However, perhaps this focus on proportions detracts from the real issue that male victims of severe IPV do exist and need support. IPV is both a human issue and a gendered issue (Migliaccio, 2002). It is a human issue because all people, regardless of gender, can be perpetrators and/or victims of abuse (Archer, 2002; Hines & Douglas, 2010). It is gendered because IPV is not the same between genders (Ansara & Hindin, 2011; Archer, 2002; Capaldi et al., 2009; Hamel, 2009; Johnson, 2006; Tjaden & Thoennes, 2000; Warner, 2010; Weston, Temple, & Marshall, 2005). Acknowledging that gender is an important factor in IPV should not diminish the significance of the fact that some men are victims of severe IPV, and suffer in similar, if not identical, ways to women (Coker et al., 2002; Migliaccio, 2002).

4.3. Fathers' parenting concerns

Like many mothers in child protection families, many fathers in this study had been very concerned about the safety of their children and often acted as protectors of their children. Some study participants offered to care for their children, others removed their children from the mother, and some stayed with their children's mother in order to protect them, even if it meant remaining in an abusive relationship. This finding of men remaining in abusive relationships for the sake of their children is consistent with the findings of the Hines and Douglas (2010) study of men reporting severe IPV from their female partner.

Of the 20 participants who had children in out-of-home care when they initially contacted the fathers' program, half already had their children restored to them or else the process of restoration had begun. Participants who said their own fathers had been involved in their life, and that they had a positive father role model, were significantly more likely to have had their children already restored. Even though the reason for this association is unclear, these findings suggest that the benefits of having a positively involved father may extend to the next generation, which is consistent with previous research (Caliso & Milner, 1994; de Paúl et al., 1995; Sidebotham & Golding, 2001).

Although there was a suggestion of a possible intergenerational transmission of protective benefits in the current study, there was little evidence for the intergenerational transmission of child maltreatment, with generally non-significant and mixed results in the associations between fathers' childhood factors and having children in out-of-home care. One possible explanation for this finding is that the child maltreatment was perpetrated by the children's mother, not father, in the majority of cases in this sample of CPS fathers. If this was the case, then a failure to find an association between fathers' childhood factors and their children's entry into out-of-home care would be expected. Another possible explanation is that some of the fathers who had experienced abuse and neglect themselves as children wanted to parent their own children differently and give them a better childhood than their own. That is, they were committed to breaking the cycle of abuse they had experienced. There is some evidence to support both of these explanations in the qualitative data where fathers described the ways in which their ex-partners had abused their children and their desire to parent differently to their own parents. It is also possible that the intergenerational transmission of child maltreatment is not as pervasive as is sometimes implied. Although parents who were themselves maltreated as children are statistically more likely to mistreat their own children compared to the general community, nonetheless, the majority (between 66–98%) of parents who were abused in their childhood do *not* go on to maltreat their own children (Lamont, 2010; Sidebotham & Golding, 2001). Furthermore, the rate of intergenerational transmission of child maltreatment is thought to be less for fathers than for mothers (Dufour et al., 2008).

4.4. Implications

There are several implications for policy and practice from the present study. First, some fathers can be valuable resources and protectors for their children when children are at risk of harm from their mother. Therefore, all father figures in a child's life should be thoroughly assessed to determine if they are a viable placement option for children at risk of harm from their mother (Zanoni et al., 2013, 2014). In addition, fathers may have experienced severe childhood trauma, including sexual abuse and therefore may require counselling and support services to the same extent as child protection mothers, so they can best fulfil their parenting role. It is also important to recognize that boys are at risk of sexual abuse as well as girls, especially in families where a father is known to have sexually abused his daughter. In families with a violent father, boys may also be at increased risk if they believe their role is to protect their mother and/or care for their younger siblings. These boys may need particular support. Furthermore, fathers may be victims of IPV, particularly if it is known that a mother is physically abusing her children. Even though it is likely that the proportion of fathers in this situation is small compared to mothers, it is important for practitioners to recognize that genuine male victims of IPV do exist within child protection families. These fathers may need assistance in protecting their children and keeping themselves safe. To suggest that male victims of IPV should receive support does not need to detract from, or compete with, the support of female victims of IPV (Archer, 2002). Both female and male victims of IPV should be emotionally supported and practically assisted. The most critical issue is how to distinguish between genuine victims of IPV and perpetrators who use false accusations as another vehicle of abuse, regardless of gender (No to Violence, 2011).

4.5. Limitations and further research

It is important to note that the study participants were not representative of all child protection fathers, since they were drawn from a single parenting program which screens out men with serious personal issues. However, demographically and psychologically these participants were typical of child protection parents (Zanoni et al., 2014), and remarkable

similarities were found between many of the findings in this study and those of studies involving child welfare fathers in other countries. Together these suggest that within any child protection population, a subgroup of fathers similar to those interviewed here may be found.

There is a further issue with the self-reported data used in this study. Self-report bias (whereby participants answer questions in a socially desirable manner) can be problematic with such populations and confirmatory data from other sources would be ideal. However, it was not possible to gain access to third party information for this sample due to ethical constraints on the types of data that could be collected. Nevertheless, fathers' voices have been relatively absent from the child protection and domestic violence literature, so it is important to add the accounts of fathers to the existing mother-focused literature.

Another limitation is that psychological abuse was not included in this study, and future research would do well to include it. Finally, the life story interviews were semi-structured and conversational, and neither childhood abuse, IPV victimization and perpetration, nor their own children's child protection involvement was directly questioned. The field notes qualitative data was also based on unsolicited information voluntarily provided by participants. Therefore, the qualitative data was not a systematic exploration of predetermined study themes, but was rather a reflection of the issues the participants chose to disclose to the researcher.

An additional limitation of the study was the small sample size of the quantitative data. Outliers can overly influence correlation statistics in small sample sizes. In the present study, however, the data provide a consistent picture of this group of child protection fathers. Given the small sample size, screening of program participants, and the substantial need for more research on fathers in child protection families, it would be worthwhile to replicate the present study using a larger and more representative sample. A mixed method approach is recommended since quantitative and qualitative data together create a richer and more balanced picture than either method alone. In addition, participants' self-reported data concerning their IPV experiences and their children's child protection involvement should be systematically verified from other sources, such as worker case notes and public prosecution records, if ethics approval can be gained. Determining if the participant was implicated in his child's maltreatment would also be very useful information to include in future research. Finally, future life story interviews should be more structured to ensure that all relevant topics are discussed by all participants. However, the importance of the researcher having the opportunity to build rapport with, and gain the trust of, participants should not be underestimated when the topics are as deeply personal and emotionally charged as childhood physical and sexual abuse, and IPV victimization and perpetration.

5. Conclusion

The present study suggests that a subgroup of fathers within the child protection system who are not chronically violent nor drug and alcohol abusing, have similar childhood, IPV and parenting experiences as many mothers. The qualitative and quantitative results together paint a coherent picture of unhappy and, in some cases, extremely abusive, childhoods. However, this study suggests that, although some participants had fathers who had been abusive, in general, very involved fathers seemed to confer protective benefits to their sons. Additionally, the study participants themselves often acted as direct protectors of their children. This theme of fathers being either risks or resources, perpetrators or protectors, or occasionally both, has been noted previously (Zanoni et al., 2013). Furthermore, approximately half the participants reported they had been victims of IPV. In some cases at least, it appeared that the IPV was predominantly uni-directional female-to-male. This study adds to the growing literature reporting that a small percentage of victims of severe IPV are men. Therefore, since some fathers have experienced similar traumatic childhoods and IPV victimization, and have similar parenting concerns as some mothers

in child protection families, fathers in these situations should be given similar levels of support as mothers.

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