

A Guide for Father Involvement in Systems of Care

**TECHNICAL ASSISTANCE PARTNERSHIP
for Child and Family Mental Health**



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Introduction

“Of all the rocks upon which we build our lives, we are reminded today that family is the most important. And we are called to recognize and honor how critical every father is to that foundation. They are teachers and coaches. They are mentors and role models. They are examples of success and the men who constantly push us toward it.”

— Barack Obama,¹ Father’s Day Speech, Chicago, Illinois, June 15, 2008

Fathers are important. Over the course of time, we have learned more about the essential roles of both mothers and fathers in the healthy development of their children. Contemporary studies consistently show that children with involved, loving fathers are much more likely to do well in school; have healthy self-esteem; exhibit empathy and pro-social behavior; and avoid high-risk behaviors such as drug use, truancy, and delinquent activity, than children who have uninvolved fathers (Horn & Sylvester, 2002, p. 15).

Often, however, child-serving systems seem to discount the importance of fathers’ involvement. They often seem to treat payment of child support as the fathers’ only critical responsibility to their children. Financial support *is* important, but data show that outcomes for children will improve not by virtue of financial support alone, but also through high-quality interactions between fathers and their children. Despite popular opinion, most non-custodial fathers *do* pay child support; and when they do not, most often it is due to an inability—not an unwillingness—to pay (U.S. Census Bureau, 2006; U.S. General Accounting Office, 1992).

In the behavioral health field, sometimes we assume that fathers (and especially fathers of color) *don’t care* when they are not present at their children’s appointments. As a group, fathers *are* less likely to attend meetings than mothers. A father who is absent from an appointment, however, is often assumed to be an “absent father,” while similar judgment is rarely expressed about a mother in the same circumstance. In fact, most fathers are *not* absent fathers. Both systemic and historical factors help us to understand why fathers may sometimes be—or appear to be—less involved in the lives of their children than mothers are.

This guide shares information about the importance of fathers in the lives of their children, and it identifies potential consequences if they are not involved. It also offers strategies for systems and families, especially those who are involved in systems of care, to help fathers become more involved. Section I discusses statistics about the presence and absence of fathers in families. Section II describes effects of fathers’ absence or presence in the lives of their children, and explains why children need an active father in their lives. Section III outlines ways in which systems of care can best support the involvement of fathers in individual and family service plans. Section IV explains how systems of care can involve fathers in all core dimensions of development (including family-driven, youth-guided services/supports, cultural and linguistic competence, clinical services and structure, governance, social marketing, evaluation, logic model development, strategic planning, the technical assistance plan, and continuous quality improvement). Section V discusses three different

¹ Then-candidate Barack Obama’s full 24-minute address can be viewed at <http://www.youtube.com/watch?v=Hj1hCDJwG6M>

cultural perspectives of fatherhood. Section VI focuses on the important role of young fathers in the growth and development of their children. Section VII, recognizing the increasing number of grandparents raising grandchildren, considers how best to involve grandfathers; and Section VIII explores the important role of fathers in the child welfare system. The Guide concludes in Section IX with a collection of national, state, and other resources, gathered to help readers learn more about the critical role of fathers in the lives of their children.

Authors' Note: *The Technical Assistance Partnership for Child and Family Mental Health's (TA Partnership) "A Guide for Father Involvement in Systems of Care" is a work in progress. Since launching our Fatherhood Learning Community in 2009, we have been continuously impressed by the commitment of communities around the country to enhance efforts to apply the gifts of fathers and male caregivers to the development and improvement of their systems of care. We would like to acknowledge the contributions of our community partners to this Guide, including Robert Clanagan, LaRone Greer, Kurt Moore, Esteban Zubia, John Cruz and the New Jersey Alliance of Family Support Organizations. The TA Partnership welcomes your suggestions in continuing to build this body of expertise. For more information, please contact Ken Martinez, Psy.D., at kmartinez@air.org.*

SECTION I: Where Are the Dads?



Fathers who live with their children are more likely to have close, enduring relationships with their children than those who do not. For many decades, however, the stability of family relationships within which children are raised has significantly eroded. The following statistics from the National Fatherhood Initiative's *Father Facts* (Horn and Sylvester, 2002) sketch a profile of the changing demographics of American families in which today's children are developing:

- Forty-three percent of first marriages dissolve within 15 years, and approximately 60 percent of divorcing couples have children. Roughly one million children each year experience the divorces of their parents.
- Nearly 20 million American children (27 percent) live in single-parent homes. Eighteen percent of the single parents who currently live with their children are men, while 82 percent are women. (Of the single parents who are fathers, 8 percent are raising three or more children under 18 years of age.)
- The number of single fathers in the U.S.—now 2.5 million—has increased more than six-fold from 400,000 in 1970.
 - Forty-two percent of single fathers are divorced, 38 percent have never married, 16 percent are separated, and 4 percent are widowed; and
 - Seventy-three percent have an annual family income of \$50,000 or less.
- Compared to children born to married parents, children born to cohabiting parents are three times as likely to experience eventual father absence; and children born to unmarried, non-cohabiting parents are four times as likely to live in a father-absent home.
- From 1995 to 2000, the proportion of children living in single-parent homes slightly declined, while the proportion of children living with two married parents remained stable.
- Still, 24 million children (34 percent) today do not live with their biological fathers.
 - Approximately 26 percent of absent fathers live in a different state than their children.
 - Approximately 40 percent of children in father-absent homes have not seen their fathers even once during the past year; and
 - Approximately 50 percent of children not living with their fathers have never set foot in their fathers' homes.

“ *It is easier for a father to have children than for children to have a real father.* ”

— Pope John XXIII

SECTION II: How Does a Father's Presence or Absence Affect His Children?



The presence and active involvement of a father makes his children more likely to do well in school, have healthy self-esteem, exhibit pro-social behavior, and avoid high-risk behaviors, compared with children who are raised without a father (reference).

Conversely, boys and young men growing up without a father face enormous risks compared with males who are raised with their fathers. The below statistics from the Urban Leadership Institute's *Dare To Be King curriculum* (2006) document those risks for children and youth.

Children/Youth from Fatherless Homes	Children/Youth from Homes with Fathers
63 percent of youth suicides	37 percent of youth suicides
90 percent of homeless and runaway youth	10 percent of homeless and runaway youth
85 percent of youth who exhibit behavioral disorders	15 percent of youth who exhibit behavioral disorders
71 percent of all high school dropouts	29 percent of all high school dropouts
75 percent of all youth in chemical abuse centers	25 percent of all youth in chemical abuse centers
70 percent of youth in state-operated institutions	30 percent of youth in state-operated institutions

What accounts for these differences between fatherless homes and homes with fathers? Dr. Stephen D. Green's research focused on the dynamics between fathers and their children, and provides some insight through these "20 reasons why a child needs an active father in her/his life" (Green, 2000):

20 Reasons Why Your Child Needs You to be an Active Father
1. Lets a child know that he/she is loved. Love involves more than saying the words "I love you." Fathers who love their children demonstrate their love by spending quality and quantity time with their children. Children who feel loved are more likely to develop strong emotional bonds with their fathers and develop healthy self-esteem.
2. Provides a child with greater financial resources. Research indicates that families with an active father are "better off" financially. This means that children with active fathers are more likely to have access to resources that facilitate healthy development (e.g., food, clothing, shelter, quality medical care).

20 Reasons Why Your Child Needs You to be an Active Father (continued)

- 3. Provides a child with a positive male role model.** Children, regardless of gender, need positive male and female role models. Children tend to model behavior (positive and negative) that they witness on a consistent basis. Active fathers can promote positive behaviors by setting a proper example for their children.
- 4. Provides a child with emotional support.** In addition to financial support, children also need emotional support from their parents. Active fathers listen and support their children when they experience joy, sadness, anger, fear, and frustration. Fathers who support their children emotionally tend to raise children who are more in tune with the needs of others.
- 5. Enhances a child's self-esteem.** Self-esteem refers to how a person feels about himself. Children with high self-esteem tend to be happier and more confident than children with low self-esteem. Active fathers promote their children's self-esteem by being fully involved in their lives and letting them know that they are highly valued.
- 6. Enhances a child's intellectual development.** Children who are raised with actively involved fathers tend to score higher on measures of verbal and mathematical ability and also demonstrate greater problem-solving and social skills.
- 7. Provides a child with guidance and discipline.** From infancy, children need proper guidance and discipline. Active fathers play an important role in teaching their children proper behavior by setting and enforcing healthy limits.
- 8. Gives a child someone to play with.** One of the primary ways that fathers bond with their children is through play. According to researchers, there are differences in the ways fathers and mothers play with their children. Fathers tend to use a more physical style of play (e.g., wrestling) that offers a number of benefits to children, including enhanced cognitive ability.
- 9. Provides a child with someone to talk to when he/she has questions.** Young children are full of questions. This natural curiosity helps them learn about their environment. Active fathers can be a valuable source of information for children who are seeking answers to life's important questions.
- 10. Increases a child's chances for academic success.** Children whose fathers are actively involved in their lives are more likely to achieve academic success than children whose fathers are not actively involved. These academic benefits appear to extend into adulthood.
- 11. Provides a child with an alternative perspective on life.** Research indicates that men and women often differ in their parenting styles; however, one style is not necessarily better than the other. Instead, it can be healthy for children to be exposed to different perspectives on life, such as a father's.

20 Reasons Why Your Child Needs You to be an Active Father (continued)

- 12. Lowers a child's chances for early sexual activity.** Children with actively involved fathers are less likely to engage in early sexual activity, thus reducing their chances for teen pregnancy and sexually transmitted diseases.
- 13. Lowers a child's chances for school failure.** Children with actively involved fathers are less likely to drop out of school than children with uninvolved fathers.
- 14. Lowers a child's chances for youth suicide.** Children with actively involved fathers are less likely to commit suicide than children with uninvolved fathers.
- 15. Lowers a child's chances for juvenile delinquency.** The benefits of having an active father throughout a child's early years extend into the teen years as well. Children with active fathers are less likely to commit juvenile crimes than children with inactive fathers.
- 16. Lowers a child's chances for adult criminality.** The chances that a child will commit crimes as an adult also diminish when he grows up with an actively involved father.
- 17. Provides a child with a sense of physical and emotional security.** One of the major benefits that fathers can provide to their children by being actively involved is a sense of security (physical and emotional). By being actively involved in a child's life, a father promotes a trusting relationship. The child does not have to worry about being abandoned.
- 18. Facilitates a child's moral development.** Children need a moral compass to guide them when they face difficult moral choices. Fathers, like mothers, help children to develop a sense of right and wrong that serves as a foundation for establishing moral character.
- 19. Promotes a healthy gender identity in a child.** Boys and girls benefit from having healthy role models from both sexes. Research points to the fact that mothers and fathers socialize their children in different ways. Fathers can help their children, especially boys, to develop a healthy sense of what it means to be a male.
- 20. Helps a child learn important life skills.** Most of the essential life skills that children need to survive are learned within the home. Fathers have a unique opportunity to teach their children valuable skills that will enable them to grow up to be healthy and productive adults.

From *20 Reasons Why Your Child Needs You to Be an Active Father*, by S. D. Green (2000).

SECTION III: Why Is Inclusion of Fathers Important in Systems of Care?



Fathers are an integral part of their families and communities. They are part of the solutions needed to address challenges. While sometimes not valued as much as they deserve to be, fathers bring a rich perspective to systems that have historically focused primarily on mothers or female caregivers.

When fathers are involved in their children's lives, the children they care for enter formal systems less frequently, less deeply, and for shorter periods of time. Because the majority of enrolled children in systems of care are male, inclusion of male caregivers in systems of care is especially critical. Building systems of care is hard work, and we need *everyone* involved.

How Can Systems of Care Best Support the Involvement of Fathers in Individual and Family Service Plans?

Over time, system of care communities have learned and shared successful strategies about working with fathers and male caregivers. Strategies have been identified at both the individual (child, family) level, as well as at the system level. (System-level strategies will be described in Section IV.)

The Individual Planning Team Should...

- Ensure that fathers have access, voice, and choice in the development, implementation, and revision of service plans.
- Make a conscious effort to recognize and understand the cultural implications of being a male caregiver.
- Be in the habit of asking caregivers, "Will Dad be a part of the meeting?" When setting appointments, ask the mother, "Can Dad be sent an invitation if he is not part of the household?"
- Make efforts to understand fathers' work schedules, and try to schedule meetings at times that are convenient for fathers.
- Ensure that professionals speak with and to fathers (eye-to-eye contact)—not about or over them in ways that can serve to exclude and eventually alienate them.
- Engage Dad by asking for his opinion/insight if he is not saying anything during a meeting.
- Seek fathers' input/ideas/concerns in advance of meetings they are unable to attend.
- Follow up with fathers when they must be absent from meetings (e.g. due to work, immigration, military service, incarceration status, etc.) to ensure they understand what has been discussed; to elicit their input, feedback, and suggestions; and to incorporate their ideas into their children's plans. Work with the custodial mother or legal guardian to include the father even when he is not the custodial parent or legal guardian, within the parameters the court sets forth during the process of divorce and after the divorce is final.

- Ensure that service plans are culturally and linguistically competent. They should meet the diverse needs of fathers by ensuring that cultural preferences, practices, and mores are learned, understood, and honored.
- Make every effort to discover fathers' strengths, needs, and key cultural considerations that are relevant to addressing the needs of their children in order to develop truly effective individualized plans.

“ *My father didn't tell me how to live; he lived, and let me watch him do it.* ”

— Clarence B. Kelland

SECTION IV: Systems of Care Should Infuse Fathers' Involvement in All Core Dimensions



Earnest efforts in dozens of communities are aiming to attract and optimize the many valuable contributions that fathers can bring to the development and refinement of systems of care in which their children with mental health and related challenges can succeed and thrive. During the past two years the authors' conversations with many at the forefront of those community efforts have yielded a lengthy list of suggestions and recommendations about infusing father's involvement. We hope many of these strategies can help your community to attract the positive "power of dads" to key

dimensions of system development and implementation including family-driven, youth-guided services/supports, cultural and linguistic competence, clinical services and structure, governance, social marketing, evaluation, logic model development, strategic planning, the technical assistance plan, and continuous quality improvement.

ORGANIZATIONAL

- Ensure that you hire those who embrace the power of positive contributions and participation by fathers when recruiting individuals for influential and decision-making positions within your system of care or organization.
- Understand and respect men in our society. Provide training to staff on the "culture of fathers" (innate characteristics and socialization of men), which is different from the culture of mothers.
- Link with local, state, and national fatherhood initiatives to share information and develop partnerships that are mutually beneficial.
- Find out what fathers need and want to be actively involved in the lives of their children that may be particular to your specific population of focus, system of care, cultural group, geographic region, and community; make accommodations to meet their needs and requests.
- Create father-friendly programs that focus specifically on fathers. Make sure initiatives are welcoming and engaging to males.
- Ensure that all forms (registration, intake, evaluation) used for interviews, screenings, clinical assessments and evaluations, service and supports, system evaluation (methodology, data fields chosen, analysis of data), surveys, and literature speak about and include fathers in the information and interventions.

OUTREACH AND ENGAGEMENT

- Be creative with outreach and recruitment efforts. Go where the fathers are (e.g., houses of worship, barbershops, cultural gatherings). Recognize that male-to-male outreach, engagement, and partnering is critical for success.
- Individualize outreach to, and engagement with, fathers (effective methods often differ from those for mothers), using methods that appeal to fathers, including gay, bisexual, transgender and questioning fathers, and provide opportunities that involve more doing than talking.

- Provide leadership in engagement from within the system of care, by actively seeking out fathers of the children involved in the system(s) through individual phone calls, home visits, and face-to-face relationship building.
- Focus outreach and other social marketing efforts on reaching fathers in ways that are inviting and non-judgmental, and that promote their unique world view and focus on de-stigmatizing their involvement.
- Send Dad invitations to meetings/activities if he is not in the household.
- Acknowledge and respect fathers' input, perspectives, and communication styles, although these may be different from mothers'. Fathers have feelings.

PROGRAMMING AND TRAINING

- Focus on action so men don't feel threatened by having to talk about their concerns, especially at the beginning. Males typically prioritize fixing problems over talking about them.
- Develop father- and child-centered activities, such as sporting activities, camping, video games, etc.
- Arrange opportunities for fathers to lead projects for which they can recruit other males.
- Collaborate with other existing community activities that focus on fathers, so that fathers can become, or can remain, connected to their own communities and influence the direction and focus of other programs to be father friendly.
- Provide training focused on the social-emotional development of children, on practical parenting skills, and on the essential contributions of fathers to their children's development. This training is as important for mothers as for fathers.
- Develop and provide training/coaching/mentoring geared specifically for fathers, by fathers, including unique populations such as teen fathers or fathers who are gay, bisexual, transgender, or questioning. Identify/create opportunities to encourage fathers' mentoring of children.
- Ensure the inclusion and participation of fathers in family support groups and family leadership teams.
- Look for father groups/organizations that fathers in your community can be directed to that may help them with their needs as males and/or dads, whether your site has a fathers' group or not.
- Make purposeful efforts to retain and challenge fathers and male caregivers in positive ways. Retention is imperative!
- Ensure that children of gay, bisexual, and transgender individuals and individuals questioning their sexual identity know that they and their families are supported. They are fathers, too. Sexual identity is not determined by whether one fathers a child. This is an especially vulnerable population that may be forcibly alienated from their children. Create environments that are welcoming and inclusive.
- Always let fathers know that they are not alone; that they are valued; that they will be supported through various means, including peer mentoring, support groups, and specialized or focused training; and that they will always be treated with respect.

SECTION V: Fatherhood and Culture



While “ethnic families and fathers do not deviate much from Anglo-American families and fathers, they still should not be judged by white middle-class standards. Ethnic minority families are diverse, and there is no single monolithic ethnic family structure among or within them. Internal variation within major ethnic groups prohibits generalization” (Fatherhood, 2003).

New generations of fathers, including those from different ethnic/racial groups, are engaging in a “new fathering” paradigm that takes the best from what they were taught and combines it with what they strive to be as fathers, so that they develop a style that is comfortable and “generative” for their children and future generations.

“*Fatherhood is pretending the present you love most is “soap-on-a-rope.”*”

— Bill Cosby

HISPANIC/LATINO FATHERHOOD

Hispanic/Latino men, as with other men of color, are frequently and incorrectly stereotyped. They are portrayed as being authoritarian, distant, not emotionally connected, averse to family intimacy, and machista husbands and fathers. Contrary to popular myth, Hispanic/Latino fathers do not conform to stereotypes or media portrayals. There is growing evidence that deficit models to describe fathers of color do not accurately describe the care they feel and show for their children (Fitzpatrick et al., 1999; Toth & Xu, 1999).

A recent study (Taylor & Behnke, 2005) found that “a transformation is taking place among Latino fathers on both sides of the border. Many fathers exhibit contemporary views and feelings that reflect the trend of ‘new fathering.’ They are redefining machismo through their attitudes and fathering practices. Although many fathers on both sides of the border are involved and aware of their children’s needs and aspirations, to those on the outside these fathers may still show signs of traditionality.” The report notes that the Latino men in this study were “profoundly affected by their relationships with their fathers, who ranged from involved dads to absent dads.” This is similar to other findings that fathers’ own fathers’ models of parenting, whether positive or negative, influenced how they interacted with their children (Daly, 1995).

Taylor and Behnke also state that the most prominent value that Latino fathers want to transmit to the next generation is the importance of a good education; they also want to instill a strong work ethic in their children. The fathers want to see their children in better jobs but, at the same time, don’t want them to lose the satisfaction of working hard. The authors conclude that their findings support the idea of “generative fathering” (meeting the needs of the next generation instead of current societal expectations [Hawkins & Dollahite, 1997]) to describe the resiliency of Latino fathers and the contributions they make to families, communities, and future generations.

Although many Latino fathers are significantly affected by poverty and economic hardship, they have strong family values and belong to tight-knit communities that increase their resiliency (Vega et al., 1986). Latino fathers are complex individuals with family values that facilitate their involvement in the lives of their families (Coltrane, Parke, & Adams, 2004). These studies seem to indicate that Hispanic/Latino fathers defy the stereotypes ascribed to them and instead define their own style of parenting that combines the best of what they learned from their fathers and their own styles of what they think is right.

AFRICAN-AMERICAN FATHERHOOD

African-American fathers are often characterized as absent, violent, and uninvolved in their children's lives. "Policy discussions, while they do not always identify African-American males as a source of the problem, repeatedly suggest that African-American males are inherently irresponsible, erratic in behavior and unable to assume the responsibility of employment or fatherhood" (Gadsden & Smith, 1994).

Father absence in most western cultures does have a significant impact on children, including higher rates of violence, substance abuse, gang-related activities, poorer school performance, higher dropout rates, and lower occupational attainment. Many societal factors serve as barriers and affect fathers' involvement, including education and economic and legal issues.

Contrary to the false negative descriptions characterizing African-American males, Yeung et al.'s research indicates that "African-American fathers are neither absent nor uninvolved in family life, but play essential roles within families" (as cited in Fatherhood, 2003). They emphasize "family unity, stability, and adaptability. Middle-class African-American fathers are involved in the rearing of their children; maintain warm, interpersonal relations with them; and their children are well-adjusted and motivated" (Fatherhood, 2003).

White and Connor (2007) state that "traditional definitions of fatherhood underestimate the role of black fathers and do not adequately capture the cultural nuances that surround the fathering role in the African-American experience." "Social fatherhood" is a term used by Rebekah Coley (2001) and others that encapsulates the role of the community in raising a child, including the biological father and others. The term includes men who assume some or all of the roles fathers are expected to perform in a child's life, regardless of whether or not they are biological fathers. These social fathers provide a significant degree of nurturance, moral and ethical guidance, companionship, emotional support, and financial responsibility in the lives of children.

When all in the community, including fathers, take responsibility for the care of their children, the likelihood of success is greater. African-American fathers can and do play important roles in their children's lives, especially when there are educational and employment opportunities for them.

NATIVE AMERICAN FATHERHOOD

Advising Native men from a strength-based approach, Pooley (2010) reminds them that “fatherhood is leadership—the most important kind of leadership in the entire world...The father’s primary job is to bring happiness and safety to his family...You lead your family with kindness, dignity and humility.” His message is that fathers are not sick or bad, but that some fathers have been “misled, misguided, misdirected, and misinformed.” Therefore fathers (and mothers) need to be forward-thinking, feeling, and acting people.

Pooley refers to the historical trauma that is a real part of Native peoples’ history and psyche. He says that sometimes those who teach this history are affected by historical trauma and are left only with anger, which can be destructive. The teaching of historical trauma should inspire people to do better, especially in future generations.

Spirituality is important in being and in fathering. To Pooley, “greatness is not in the person. Greatness comes from the Creator and flows through a person...The Creator is who men can ask for guidance and direction...Two of the most sacred things on earth are fatherhood and motherhood...Families are the most important institution. Our other institutions must all exist to support the institution of the family.”

Native American fatherhood has always been important, but the stresses of western society have “misguided” Native fathers. The task, according to Pooley, is not to preach to fathers about their wrongs, because they know these already, but to uplift and encourage them, strengthen their existing hope, and inspire and assist them. Only then will they be ready to listen so that they can learn.

“Native men make great husbands, make great fathers and make great leaders...You came from greatness. Now as a father it is your responsibility to lead your family back to the greatness from which you came.”

— Al Pooley, President of the Native American
Fatherhood and Families Association

SECTION VI: Young Fathers



Father involvement is vital to the health of a quality system of care community, and this value is not lost in reference to young fathers. Young teenage and transition-aged (those ages 17 to 25) fathers do, however, require strategic and thoughtful approaches to engagement, not only because of their age but because of various limitations associated with their age (Schwartz, 1999). For example, fatherhood is commonly associated with the ability to financially provide for the child and the mother. There are often limited employment opportunities and strict employment laws for hiring individuals under the age of 18.

When seeking the involvement of this population, it is important to recognize the differences between the two main subgroups: (1) youth who are receiving services and who are fathers, (2) fathers of children receiving services who are young adults.

These two groups may require different methods of engagement and expect different levels of support for their engagement. Many approaches used for engaging youth in both groupings may be similar, but with subtle differences.

Communities also need to recognize that young fathers come from various socio-economic, ethnic, cultural, and linguistic backgrounds. In addition, their age impacts interactions with the system. Promising and model programs for young fathers often have a component focusing on relationships between the youth and program staff, peers, and/or mentors.

Research suggests, and practice confirms, that one major element of a successful young fatherhood program is the presence of a one-on-one relationship between the young father and program staff (Bronte-Tinkew, Burkhauser, & Metz, 2008). This relationship building must include the teen, staff, and partners. It is also critical to explore the relationship between the young father and the mother and consider her role in the relationship-building process as well. Building a relationship shows teen fathers that the system can be compassionate and committed to them and their families.

Although relationship-building is important to young fathers, other issues may become more pressing in their lives, and, if not addressed, may ultimately prevent young fathers from becoming involved or maintaining their involvement. When engaging young fathers, be sure that you listen to the needs that they express, and be sure to develop opportunities for these youth to fill their needs. In some cases, the need is as simple as providing a platform for having their voices heard and their struggles identified. For others, there may be more pressing needs related to housing, food, and employment. Quality involvement tactics will benefit the youth as a father and as a person through his participation.

Think about building tailored training and employment opportunities into your engagement practices that emphasize youth and fatherhood. More specific needs will arise if young fathers are involved in helping develop the engagement programs with the program organizers.

MORE INFORMATION AND TIPS ABOUT YOUNG FATHERS

Keep in mind that young fathers:

- Want to be good parents;
- Can be good parents, with appropriate supports;
- Are still adolescents developmentally, although they are parents; and
- Have adult parenting needs.

Consider these programmatic tips:

- Change language in all written documents from “teen parents” to “young mothers and fathers.”
- Send a letter of engagement directly to the fathers rather than, or in addition to, their parents/caregivers.
- Provide childcare for events designed for youth who are not parents to encourage young mothers and fathers to participate.
- Encourage gatherings of young fathers to foster father/child play time.
- Place father- and youth-friendly messages, pictures, and reading materials in your lobby, mailings, and promotional materials.
- Consider ways to encourage the parents/caregivers of young fathers to become engaged as mentors and coaches rather than “parents.” Young fathers may have legal needs related to custody of their children, in addition to seeking their own independence. Consider provisions for helping them to understand and navigate the judicial system.

SECTION VII: Grandfathers



Grandfathers are critical to the lives of grandchildren, serving as supports and mentors. In addition, over recent years, they have increasingly become primary caregivers. AARP (formerly known as the American Association of Retired Persons) notes that 31 percent of the U.S. population is grandparents. Of that group, 8 percent provides consistent childcare for their grandchildren. According to the 2000 U.S. Census, 6.3 percent, or 4.5 million children/youth under the age of 18, lived in grandparent-headed households. More than one-third of these youth had no interaction with their biological parents. It is estimated that this number has increased over the last decade (Mader, 2008).

Considering this information, it is important to engage grandfathers in systems of care. It is necessary to understand that, similar to teen fathers, grandfathers have unique needs associated with their age. When working with this population, it is critical that we understand and address these needs. Grandparents often rely on Medicare and Social Security, and they often have physical and mental health needs associated with aging and older adults. For many child-serving systems, there is limited knowledge, access, information, and expertise related to serving older adults. To achieve authentic engagement, system of care communities may need to consider building relationships with older adult serving systems and supports as a way of being responsive, respectful, and engaging. Additionally, considering the societal role of fathers as financial supporters of the family, grandfathers may struggle because they are retired, unable to work, or lack availability of gainful employment.

Consider the following tips:

- Create parenting opportunities, activities, and supports for grandfathers. Typically, grandparents seek support from other grandparents before seeking the assistance of traditional parents.
- Diversify staff, partners, and volunteers to reflect older adults and grandparents.
- Partner with the adult mental health and social service systems.
- Provide mentoring, skill-building, and information specifically identified for grandparents. Often, grandparents have not parented a child for a long time and now need to re-acclimate themselves to current supports and services.
- Be cautious of your language and mannerisms. Grandfathers are capable of being viable and good parents.
- Recognize the strengths, wisdom, and experience grandfathers bring to the parenting experience. They possess “lessons learned” and a unique perspective on their families and communities.
- Include grandparent-friendly language, pictures, and signs in your literature and office settings.
- Understand that grandfathers may have legal needs related to guardianship that may either promote or challenge their engagement.

SECTION VIII: Fathers in Families with Child Welfare Involvement



Families come to the attention of the child welfare system to prevent the abuse or neglect of children, protect children from abuse or neglect, and/or find permanent families for those who cannot safely return to their families. Fathers can play a critical role in strengthening families to successfully care for their children and ensuring their safety and fostering their well-being.

A study commissioned by the U.S. Department of Health and Human Services, *“What About the Dads? Child Welfare Agencies’ Efforts to Identify, Locate and Involve Non-resident Fathers,”* found only limited involvement of fathers in many child welfare cases (Malm, Murray, & Geen, 2006). The study reviewed 1,958 cases of children who were removed by child welfare agencies from a home where their biological father did not reside. Among the study’s findings about father involvement in child welfare cases:

- Most children in foster care were not living with their fathers at the time they were removed from their homes.
- Non-resident fathers were identified in the case file 88 percent of the time when the child welfare case was opened; but the child welfare agency contacted the non-resident fathers only about half of the time (55 percent) during the child’s stay in foster care.
- Non-resident fathers of children in foster care were often not involved in case planning efforts. Fewer than a third (30 percent) of fathers visited their children, and even fewer (28 percent) expressed interest in the child living with them.
- Child welfare caseworkers were between 3 and 15 times more likely to answer “don’t know” to questions about the fathers than to questions about the mothers.

The *What about the Dads?* study also identified some key factors that can positively impact child welfare practice. Seventy percent of caseworkers had received training on engaging fathers, for example; and those who had were more likely to report having located fathers than those who had not. Further, the study found that the earlier a father is identified and located, the greater chance he will be contacted by the agency.

As a result of this research, the Federal government funded the National Quality Improvement Center on Non-Resident Fathers and the Child Welfare System (QIC-NRF) in 2006 to examine how the involvement of non-resident fathers in the public child welfare system impacts child safety, permanence, and well-being. The QIC-NRF objectives were to learn how the engagement of non-resident fathers’ impacts the outcomes for their children in the system, better understand the gaps and barriers related to father involvement, and identify best practices for involving non-resident fathers and paternal kin in their children’s lives.

Best practice with families should be based on a holistic approach, supporting and facilitating the engagement of *all* family members and individuals who play significant roles in the family and with the child. Federal child welfare laws support preserving families and engaging parents in reunification efforts, and states are required to provide services that will assist families in remedying the conditions that brought them into the child welfare system.

We understand that involving fathers in case planning and services can often be challenging, especially for those with children in the child welfare system and those who have been removed from their homes and placed in out-of-home treatment or foster care. The QIC-NRF offers extensive resources to support successful approaches for engaging fathers whose children are involved in child welfare (see Section XII: Resources). Those resources can help to increase engagement of fathers in the lives of their children, which in turn may significantly improve their children's well-being and likelihood of future success.

ENGAGING FATHERS IN CHILD WELFARE PRACTICE IS IMPORTANT

A good father is critical to the optimal development and well-being of a child. A father's role is more than that of economic provider and includes nurturing, caregiving and emotional support. Successful fatherhood correlates with strongly positive outcomes. They can be part of the solutions to meet their children's needs for safety, stability/permanence, and well-being.

Fathers' involvement can positively support their children's safety and well-being in many other ways, too. Dads can offer additional perspectives about the needs and strengths of their children, and resources within the community and family. Fathers and paternal relatives may offer social or financial resources (e.g., health insurance, survivor benefits, child support funds) that can support a plan of reunification. In foster care situations, permanency for the child can be expedited by placing children with their non-resident fathers or with paternal kin, or through early relinquishment or termination of the father's parental rights.

Personal Stories

This story illustrates the importance of engaging fathers—Ray's story:
<http://vimeo.com/38528538>

An assortment of challenges can contribute to relatively low involvement by fathers in child welfare practice. Among them:

- Fathers are generally much less immediately available to child welfare systems than are mothers. Most children who are removed and placed in protective foster care come from homes where their fathers are not living; it takes time, effort, and resources to locate those fathers.
- According to the U.S. Department of Health and Human Services' "What about the Dads?" study, child welfare workers clearly know that the mother is the biological parent of the child; but only DNA testing or other time-consuming processes can establish paternity. Unless paternity has been established, a named father is not considered to be legally related to the child and cannot participate in court proceedings about the child.
- Mothers are often the gatekeepers to the father's participation and sometimes provide false information about the father, or request that the father have no contact with the child, making it difficult to know the truth about either parent, and difficult to balance the mother's wishes with the best interest of the child.
- Child welfare agency culture often focuses on the needs of mothers and their children, while attention to fathers is often viewed as "punitive" in tone, typically related to child support enforcement. Some child welfare workers admit that the obligation to report fathers to child support undermines engaging them in the child welfare process.

- Many fathers work long hours and need services to be provided during non-traditional work hours, and fathers' situations may pose a barrier to contact (e.g., homeless or transient, live out of state, or lack reliable transportation).
- Few services and resources are designed to "fit" fathers' needs. Parenting classes and support groups are typically designed for mothers, and service providers usually focus on the primary relationship between the mother and the child.
- When faced with these challenges, as well as high caseloads, child welfare workers often put less effort into engaging fathers in the case process because it is just "more difficult."

Unfortunately, persistent myths about "absent fathers" can tend to discourage efforts to engage those fathers in child welfare. Two of these myths are debunked below by findings of the U.S. Department of Health and Human Services' *What about the Dads?* study:

Personal Stories

A father shares his story about going through the welfare system—Dave's story:
<http://vimeo.com/38528532>

Myth 1: Non-resident fathers don't want to be involved. Fifty-three percent of the caseworkers believed that non-resident fathers wanted to be a part of the decision-making process for their children. Once fathers were identified and located, however, 90 percent demonstrated interest in the child's case plan, placement, and future.

Myth 2: Mothers and fathers of children in foster care present different challenges. In 58 percent of the cases in which the child welfare agency had been in contact with the father, there were problems identified with substance abuse; in 53 percent of the cases, the father had criminal justice system involvement. Forty percent of these fathers had at least four of the potential problems reported in the study. *The mothers had similar problem profiles.* Sixty-five percent had alcohol or drug problems, 38 percent were involved with the criminal justice system, and 60 percent had four or more problems identified. Of all potential problems listed in the study, only the levels of criminal justice system involvement were lower for the mothers than for the fathers.

We recommend attention to several key considerations in efforts to effectively engage fathers involved with the child welfare system. First, programs should utilize different approaches for engaging fathers than those used for engaging mothers, taking into account sensitivity to gender and cultural assumptions about gender roles and the benefits of fathers working with fathers. In addition, fathers should be recognized as equal to mothers in their parental roles and rights; and agencies need to invest as much effort in finding fathers and paternal kin as they do in finding mothers and maternal kin. Third, agency practices should require that both parents (not just the custodial parent) are contacted when problems and the need for decisions about the child arise. In fact agencies should intentionally examine any biases and assumptions they may hold regarding fathers' willingness to participate in the parenting process.

These considerations about engagement impact agency policy, protocols, collaboration with other community agencies, workload, training, funding, and the identification and location of fathers.

Effective inclusion of fathers can be achieved throughout the full child welfare process in systems that are truly family-centered. Here are some specific suggestions at each stage:

1. Identification

- Encourage mothers to identify fathers early in the child welfare case.
- Teach caseworkers to use alternative means to identify and locate fathers, including interviewing relatives and family friends; accessing TANF, child support, and other public databases; and using the authority of the court as needed.

2. Initial Contact

- The first contact between the agency and father is a unique opportunity to establish the basis for a positive, strengths-based relationship free from commonly identified negative assumptions about the father's interest in the relationship with the child.
- Engage fathers in ways that “fit” their particular situations and circumstances, with sensitivity to key cultural considerations.
- Make every effort to gain support of mothers, and reduce any barriers the mother has established that prevent or interfere with a father's engagement, including negotiation and mediation.
- Build trust by providing clear explanation to fathers of the current situation of the case, the father's role, the caseworker's role, agency expectations, and all policies that are relevant to his case.
- Continually state and emphasize the desire to establish and maintain the father-child relationship.

3. Family Conferencing

- Bring all of the adults who are interested and committed to the child into a planned network of support for safety, stability/permanence, and well-being. Don't get sidetracked in picking “the right model” (e.g., “family-group decision-making” versus “wraparound,” “team decision-making” versus the “family unity” family conferencing approach).
- Use training, policies, contracts, and other mechanisms to embed family conferencing team processes in child welfare and cross-system practice.

4. Assessment

- Include all family members in comprehensive assessments (including fathers and paternal family members).
- Assess the strengths, needs, resources/assets, and supports of the father and the paternal family; identify services and supports needed by the father.
- Explore fathers' and paternal family members' willingness and ability to ensure the safety, permanence, and well-being of the child.

5. Safety Planning

- Actively involve fathers and paternal family members in developing safety plans.

- Consider how fathers might contribute (e.g., as informal service providers in the safety plan, as relative/kinship placement providers, or to supervise visits between the child and his/her parents).

6. Out-of-Home Placement

- Before placing a child in an unrelated home, first assess fathers' and paternal family members' homes as potential placements.
- Include fathers in determining the best placement for the child. Encourage and support foster parents, group home staff, residential treatment staff, hospital staff, kinship providers, and adoptive parents to build and maintain partnerships with birth or adoptive fathers.
- Provide services and supports to establish and maintain father-child relationships through telephone and mail contact, visitation, and case planning activities.

7. Service Delivery

- Actively involve fathers in setting goals, expressing concerns, and asking questions about service needs.
- Create/design services to meet the individual needs of the father and/or paternal family members. Services must be accessible to working fathers.
- Offer peer-led father support groups that address issues related to fatherhood, such as empowering men to take an active role in parenting, child development, and emotional issues; and developing key skills like active listening, positive discipline/behavior building, anger management, and basic parenting techniques.
- Ensure that service providers emphasize the importance of child relationships with both mothers and fathers.
- Expect and enable fathers to help monitor service provision and provide continuous feedback so that progress on the child's case plan is optimized.

8. Permanency Planning

- Involve fathers in all reviews of the service plan/case plan, and in developing the child's permanency plan.
- Ensure that fathers understand the permanency plan, and their role in it.
- Arrange for fathers to receive court notices regarding permanency hearings, and discuss with them the child welfare agency's recommendations to the court.
- Encourage and enable fathers to attend all court hearings.

The authors would like to acknowledge Kim Pawley Helfgott, Senior Child Welfare Advisor, Technical Assistance Partnership for Child and Family Mental Health for assisting in developing this section and thank Sonia C. Velazquez, Project Director, National Quality Improvement Center on Non Resident Fathers and the Child Welfare System at the American Humane Association and Dr. Hershel Swinger, Director of Project Fatherhood at the Children's Institute, Los Angeles, California for their contributions and perspectives.

SECTION IX: Dads Involved with Substance Abuse



Healthy families function to protect and nurture children, and to provide guidance that will enable their children to join society as contributing members. The Substance Abuse and Mental Health Services Administration (SAMHSA) has reported that more than 8.3 million children—more than 1 in 10 children—live in families in which at least one parent is a substance abuser (SAMHSA, 2009). Healthy family functioning is a goal for dads who struggle with substance use disorders, and represents a compelling aim in systems of care.

When parents who are supposed to nurture the family become physically and emotionally unable to do so, significant negative consequences arise for their children's social, emotional, and behavioral well-being. Fathers who consider the best interests of their children to be of highest priority ideally will want to begin their recovery because parental substance abuse negatively affects the development of their children, and can damage their lifelong relationships with their children (Child Welfare Information Gateway, 2008).

In particular, parental substance abuse interrupts normal child development to the extent that children of substance-abusing parents are at greater risk for physical, emotional, and mental health issues. Children's primary health is adversely impacted by stress-related health problems, such as gastrointestinal disorders, headaches, migraines, and asthma (causing them to miss school). Parents who abuse alcohol or drugs might neglect their children to the point of injury, such as failing to child-proof the house, provide adequate supervision, or even secure immunizations and other routine well-child care (Center on Addiction and the Family, 2010). These children may also experience low self-esteem, anxiety, behavior problems, and depression (National Association for Children of Alcoholics, n.d.).

Moreover, traumatic experiences related to parental addiction may hinder children's social, emotional, and behavioral development (Administration for Children and Families Children's Bureau, Office on Child Abuse and Neglect and ICF International, 2009). The children are often frightened, and frequently witness domestic violence associated with alcohol and drug abuse. They may even be direct victims of physical violence or incest. As a result, these children may suffer from post-traumatic stress disorder symptoms including sleep disturbances, flashbacks, anxiety, and depression, just like those experienced by victims of war. Children affected by drug and alcohol abuse at home not only are frightened for their own well-being, but also harbor palpable concern that their parent may get sick and even die as a result of drinking or drug use, for example, by driving while intoxicated (American Academy of Experts on Traumatic Stress, 2012).

Parental substance abuse is also strongly associated with poor academic performance in children, who may be preoccupied or tired because of circumstances at home, become unable to concentrate in school, or lose interest. Numerous studies show that children living in

substance-abusing families are more likely to have learning disabilities, be truant, receive failing grades, repeat grades, attend more schools, and drop out of school because of pregnancy, expulsion, or institutionalization (American Academy of Experts on Traumatic Stress, 2012).

It is not surprising that the negative effects of parental drug abuse often continue as children reach adulthood. Just as children with addicted and abusive parents find it difficult to maintain transparent and honest relationships, and tend to separate themselves from both parents and peers, so might adult children have challenges coping with adulthood and establishing healthy relationships. For example, a son might imitate the behaviors he has seen in his father, including physical abuse and neglect of his own children, as well as engaging in substance abuse. Fathers should set a family standard for the prevention of substance abuse to secure the best future possible for their children.

A “Whole Family” Approach

Community systems of care should address the needs of the whole family that affect children’s health, safety, and emotional well-being. This is best accomplished when all involved agencies and systems (e.g. drug treatment, court, child welfare, children’s mental health, primary healthcare) work collaboratively through a unified service planning process, such as a child and family team or a wraparound process. Collaborative service planning invites the particular expertise of many different sectors—both formal and informal—in an integrated approach that also offers an efficient process for typically busy families. Expect whole-family approaches to require the development of close partnerships among a variety of child- and adult-serving systems to ensure that dads who have struggled with substance use disorders can provide the healthy parental functioning their children need.

Collaborative teams must be open to “begin with the end in mind,” inviting the unique assets and needs of each child and family to drive tailored plans of service and support, instead of expecting children and their dads to fit into predetermined programs. Although the children might be the official “clients” or “patients” of a particular agency or system, a whole-family approach allows the dads to be primary recipients of behavioral health treatment and support that directly reduce risks to their children. Examples of appropriate service approaches follow:

- Parenting can be stressful under normal circumstances, and rearing children who have severe emotional disturbances can be particularly so. Stress reduction approaches can help reduce fathers’ propensities to abuse intoxicating substances in such circumstances.
- Some dads might self-medicate with substances to try to alleviate symptoms of their own behavioral health problems. In such cases, fathers should be offered services to address their own behavioral health treatment needs.

Collaborative teams should be willing to facilitate separate enrollment of fathers for behavioral health services. A key challenge for many dads will be their need to advance their own recovery while being reliably attentive and responsive to the needs of their children. Behavioral health services provided to fathers should be designed to impart skills and confidence about their two roles: as a parent/caregiver, and as a person entering/in recovery.

Motivational Interviewing

We can expect fathers who need to make changes in their lives and recover from addiction to express a wide range of readiness to change behaviors that often represent deeply entrenched patterns. Some dads may have already thought about, but not yet taken, steps to change those patterns. Other dads might seek counseling or treatment voluntarily and might be actively trying to change their behavior already, but have so far been unsuccessful at doing so. Still others may have a history of recovery and multiple relapses.

It is difficult to overstate the importance of an intentional, effective engagement approach to help dads commit to the life-changing decision to recover from substance abuse. Motivational interviewing constitutes one such approach (See <http://www.motivationalinterview.org>, and <http://www.motivationalinterview.net>).

Motivational interviewing recognizes and accepts that fathers who need to make changes in their lives are at different levels of readiness to do so (Levinsky, Forcehimes, O'Donohue, & Beitz, 2007). Miller and Rollnick (2002) describe motivational interviewing as “a semi-directive, client-centered counseling style for eliciting behavior change by helping clients to explore and resolve ambivalence.” It is a method to facilitate and reinforce intrinsic motivation within individuals to change their behavior. An examination of ambivalence or hesitation is part of this process.

Motivational interviewing is an evidence-supported engagement approach that can be mastered by a wide array of professional and para-professional helpers within a system of care workforce. For more than 20 years, motivational interviewing has been adapted across a full range of cultural populations as an effective adjunct to substance abuse treatment and recovery. It equips personnel and service providers to develop skills for enhancing fathers' intrinsic motivation to change/recover from addiction.

A substantial set of resources about motivational interviewing is located in Appendix A to this guide.

ADDITIONAL RECOMMENDATIONS

Family support, systems navigation, and collaborative team facilitation personnel should all be well versed about local resources (e.g., 12-Step groups, substance abuse treatment services, and healthcare coverage/insurance resources, including new opportunities becoming available beginning in 2014 through the Affordable Care Act), and able to support fathers in accessing needed resources. They should consult with qualified clinicians to help identify which evidence-based substance abuse treatment programs in the community best fit the specific needs and circumstances of each father. You can locate local treatment options through the SAMHSA substance abuse treatment facilitator locator, at <http://findtreatment.samhsa.gov/>.

Understand that when dads enter recovery, their children might not be ready to forgive, and might not feel like their friend. Family work requires an awareness of the existing scars and the needed healing support.

Fathers can receive support through respite, family therapy, peer support, living skills training, and other services/supports that can be included in the individualized plan to address their child's needs. A whole-family approach insists that siblings and other family members also be incorporated in service planning and delivery. With clear vision, the child's team should craft approaches that will address the mental health and substance abuse needs of fathers and other family members that obviate any need to remove the child from the home.

Ongoing Vigilance

When parental substance abuse threatens or compromises the well-being of a child, service providers involved with the child's family should ensure that informed surveillance can detect signs of emotional responses that indicate a need for behavioral health support. (See Box 1 for a list of children's common emotional responses to parental substance abuse.) Signs like these might also indicate a potential need for intervention from primary health care, child welfare, juvenile justice, special education, and developmental disabilities systems. In addition, the collaborative team should consider strategies to develop or strengthen the child's supportive relationships with family members and others.

Box 1. Common Emotional Responses to Parental Substance Abuse

When parental substance abuse threatens or compromises a child's well-being, then service providers involved with the family should increase their surveillance to detect signs of emotional responses that might indicate a need for behavioral health support. Common emotional responses can include:

- Disturbed parent-child and child-sibling relationships
- Disrupted capacity for trust and attachments
- Anxiety
- Developmental delays or compromised learning
- Dysfunctional coping skills
- Behavioral disturbances
- Post-traumatic stress disorder
- Mood disturbances, and/or physical complaints or symptoms like headaches, abdominal pain, or bedwetting.

Source: Arizona Division of Behavioral Health Services (2006), Addressing the unique behavioral health needs of children, youth and families involved with CPS. Practice Improvement Protocol #15. (Phoenix, AZ)

Because a dad's substance abuse represents a considerable risk to his children's psychological health and overall well-being, it is incumbent on systems of care to develop

strategies to engage that dad and support him on a path toward recovery. The whole-family approach will typically require the involvement of new partners in service delivery and planning. Clinicians, care coordinators, and support workers should also be proficient with effective engagement techniques such as motivational interviewing, and should be readily able to identify recovery supports and treatment services for the father, as part of the overall plan for the child and family.¹

Personal Stories

Learn about two fathers who recovered after receiving support:

Rich's Story:

<http://vimeo.com/38528540>

Thomas's Story:

<http://vimeo.com/38528966>

“ *When we love, we always strive to become better than we are. When we strive to become better than we are, everything around us becomes better too.* ”

— Paulo Coelho, *The Alchemist*

SECTION X: Incarcerated Dads



I was arrested at the precious age of 5 for burglary. At age 10, boys came through my sister's window and tried to rape her. I remember thinking, I'll be damned if I'll let it happen to my sister. So I ripped the whole closet apart to find it and I did. I found it! I waved the gun at them would-be violators and scared them away. Didn't even shoot the gun, just scared them a little... Someone called the cops, and the judge sent me away for three years. Do you think they cared about why I had the gun or where I got it from?

— Gerard, a father

A total of 2,266,800 adults were incarcerated in U.S. federal and state prisons and county jails at the end of 2010 (U.S. Bureau of Statistics, 2010). The United States is the leading “jailer” in the world, incarcerating 774 of every 10,000 citizens (World Prison Brief, 2010). Within this population, people of color are significantly overrepresented. Of the entire prison population, 39.4% are black, although blacks make up only 12.6% of the U.S. population. Hispanics/Latinos make up 20.6% of the prisoner population and make up only 16% of the U.S. population (U.S. Bureau of Statistics, 2010).

Men are 15 times more likely to be arrested than women, and black men are 6 times more likely to go to prison than white men. One in three black men will be imprisoned at some point in his lifetime.

Approximately 7.4 million children have a parent in prison, in jail, or under correctional supervision (U.S. Department of Health and Human Services, 2008).

Over his 37 years of life, Gerard has spent a total of 22 years incarcerated in both the juvenile and adult correctional systems. By the age of 16, Gerard had been charged as an adult for theft and sent to prison. At the age of 20, he had three children and was on the run and soon to be an incarcerated father once again.

*Now that they caught up with me, knowing that they eventually would, I'm back in the same predicament. Only thing changed is that I have three children growing up without a father, **more time in jail to do this time around**, no more money, still no one to love me, and my baby's mother not coming to see me or bring my children to see me. I never loved myself, but no matter what anyone says, I love my children.*

— Gerard, a father

Barriers exist even before a father becomes incarcerated—barriers to success. While fathers are incarcerated, it is important to consider the following strategies to engage them:

- Motivate the father. Support linkages to his family, friends, and community to keep him optimistic about his future, which will also help the father be present in his child's life. If the father has a distant or strained relationship with his child, this is an optimal opportunity to strengthen that relationship.
- Invite the father to participate in meetings. Move child and family team meetings to the jail. Contact jail administrators to discuss the opportunity to have such meetings during visitation hours. Consider holding meetings during times when the father has access to the phone.
- Send the father copies of individual service plans, meeting notes, and other pertinent information about his child's care. Do not assume that because the father is not physically present he cannot or does not want to participate in his child's care.
- Create opportunities to discuss the father's needs to care for his child while incarcerated. Collect calls from prisons are expensive and unaffordable for many families. Consider providing calling cards for weekly calls.
- Meeting the child's needs can include meeting the needs of the family. In addition to parenting classes, are there additional supports the family could benefit from, such as counseling to help with the loss of the father's presence, gym memberships, book clubs, or bowling leagues to provide positive outlets for the additional stress of raising a child without a father, and assistance with transportation for visiting?
- Even if the parents are not in a relationship, they will always have a relationship because they are parents to a common child or children. Consider using technology such as video-conferencing to engage the father, even if briefly, in the family treatment process.

When fathers return home from incarceration, the occasion is supposed to be a happy one, but in some cases it is not. Often jails and prisons either do not have transition plans or have plans that are inadequate to support the fathers' reentry into their homes, communities, and society. The lack of preparation and transitional services has a further negative impact on the ability of fathers to reunite with their families and engage in their children's care. Consider the following recommendations when engaging fathers in this transitional stage:

- Work with the social worker who is employed by the jail, prison, and half-way house. Connect with the social worker *before* the transition period to discuss preparation for discharge. Offer your support and knowledge about resources. Consider employment, vocational, and educational opportunities, because these are often a father's first goals. Employment and vocational opportunities may be limited for a father with a criminal record, but they do exist. Consider yourself an advocate for that child and for successful relationship rebuilding between the child and the father.
- Discuss and include transitional support in the individual service plan. Linking to systems of care is an inclusive process, and supporting a father is appropriate and can be linked to the child's or youth's goals. Example of supports are bringing the family to pick up the father rather than have him use the one-way, one-stop bus pass often given to those being

released. Discuss the father's involvement in counseling sessions with the therapist and include a goal of strengthening the father-child relationship.

Basic needs are a priority for many fathers transitioning from incarceration. Meeting these needs competes with nurturing their mental health and sometimes even reconnecting with their children. If fathers do not have a place to live and food to eat, it will be hard for them to nurture their relationship with their children. Even if they are able to reconnect with their children, they may be overwhelmed with shame, which alone can influence this relationship. Prepare in advance information on housing, food banks, and clothing. Provide this information to the social worker and the fathers so that they can feel supported and prepared for returning to the community.

Depending on the state, fathers with criminal records can be excluded from various social service programs. Investigate whether this is applicable in your state and if it is, consider alternate options. If fathers with criminal records can access social services, inform them. Many may mistakenly assume that their records preclude them from obtaining assistance.

Support fathers just like you would mothers. Social service systems are already overburdened and not necessarily family friendly. Men are often dismissed or have their role minimized more than women do when attempting to involve themselves in the lives of their children. They may even be ridiculed for seeking social service assistance. Provide all the supports and assistance you would for mothers, such as completing applications, identifying resources, and being a liaison to representatives from the social service systems. It may require more effort because some fathers may not know the system well and can feel stigmatized, overwhelmed, and ashamed. Guess what? Despite popular belief, in many states, those with felony convictions can still vote!

Regardless of the crime or the time spent incarcerated, many fathers feel embarrassed. Even in communities where incarceration may be considered a rite of passage, fathers can still harbor internalized feelings of despair and hopelessness, especially upon release. Consider clinical and non-clinical supports, such as individual and family therapy, bowling leagues, and other positive social connecting networks, as well as linkages to a fathers' group.

Fathers often return to families that have suffered greatly as a result of their absence. Support and encourage the families to heal from the incarceration experience regardless of how engaged the fathers were or are before and after the incarceration. Without support, the loss of a parent for children and the stigma associated with incarceration for fathers can have lifelong effects. At age 37, Gerard reflects on his lifelong battle to heal himself.

Bad enough I was a child of circumstance. I had to fend for my siblings at the precious age of 5, finding a way to support them too. What do I mean about being a child of circumstance? I was born to a crack-addicted mother and a father that was already married with his "own" children as he would say. And then... life happens, systems take your parents and then if you weren't alone before, you are really alone now.

Systems of care are about transforming beliefs, policies, and practices through a value-based approach. They may also create new services and supports. Fathers are essential, important, and valuable contributors to their own children's lives as well as to their families and communities. Systems of care can implement changes to include incarcerated fathers so that they are allowed and encouraged to be supportive, encouraging, and loving parents. With specific outreach, engagement, support, and sustainability strategies, fathers have an opportunity to make changes if needed and, for some, to break a well-entrenched familial cycle and prevent a negative predetermined destiny. Here is an example:

Personal Stories

This story shows that certain child welfare programs can benefit incarcerated dads—Rosalio's story: <http://vimeo.com/38528967>

*When you get home, you are required to get a job or go to school. But once there, I ran into the holes that I've dug while on the run or living in what they call "the life of crime." I had holds (or warrants) on me for traffic tickets and driving without a license. Then I had to get my birth certificate, social security card, and ID. After all of that I applied for a grant to go to school, but was shot down because I am a criminal. I tried to get a job but no one would hire me because of my criminal jacket... Mother still getting high and who knows where my father is, plus they say I am too old anyway; I got my own kids, **realized that I need my family**. So where do I start? What else can I do? How do I go on from here? Being homeless, hungry and angry ain't good. Someone please help me or just send me back to the pen.*

—Gerard, a father

If you are an incarcerated father, know that there are people who believe in you and need you, especially your children. No matter how old they are, it is never too late to build or repair your relationship with them, even if this process does not start off easily. Do not give up. You are strong enough to endure your experience, which indicates your resilience and commitment to improving your life and your relationship with your child. Educate yourself. Libraries are an awesome place for assistance. With technology, they offer more than you can believe. The Long Branch Public Library in Monmouth County, New Jersey, for example, offers English as a second language classes, free legal services, and computer classes. It even has a career center (<http://www.longbranchlib.org/#!technology/cuvv>). This library also has a FreshStart Program for fathers just like you (<http://www.ilovenjlibraries.org/content/fresh-start-re-entry-program-long-branch-public-library>). Libraries, especially those in urban communities, are nonjudgmental places that want you to succeed!

“Fathers, I recognize that you actively support and pursue your children from behind bars. If you don’t, it’s not because you don’t want to. It’s because you are vulnerable, hardened, or maybe even ashamed. So you hope.... Waiting patiently but eagerly to start a new relationship or strengthen an old one.... Good and best of luck with your journeys. I hope they lead you far away from prison and straight into a healthy loving relationship with your children. Some of you will ignore this cry for change, this cry for help, out of misplaced anger and confusion, selfishness or shame. Do not worry because I understand, too many of us do. Just know that for me and many others in this world, your struggle is our concern. Your work as a father and my work as your supporter are far from over. You have a “second chance” not only at fatherhood but at life... Let us break the cycle if not for ourselves then for our children.”

— William, a father and a son

SECTION XI: Dads Who Are Gay and Fathers of Lesbian, Gay, Bisexual, or Transgender (LGBT) Children



INTRODUCTION

Why should this guide include information about gay fathers? Gay men are sometimes stereotyped as being uninterested in parenting or as leading highly sexual lifestyles that make them ill-equipped to be good parents (Ariel & McPherson, 2000; Forssell, Farr, & Patterson, 2009; Huebner, Mandic, Mackaronis, Beougher, & Hoff, 2012; Mallon, 2004). Many people also believe that few gay men actually are parents.

In fact, many gay men are parents. According to the 2002 National Survey of Family Growth, one in six gay men reported having a child (Gates, 2012). Additionally, in the 2000 U.S. census, one in five male couples reported currently raising a child (Gates, Ost, & Birch, 2004). Further, the most recent data from the 2010 U.S. census showed that 17% of same-sex-headed households had a child under the age of 18 living in the home (Gates & Cooke, 2011). Although data reported in the 2010 census are not broken down by gender, same-sex male households constitute approximately 49% of U.S. same-sex couples (Gates, 2012). Parenting by gay men will continue. In a study of diverse gay youth in New York, for instance, over half of young gay men indicated that they would likely or very likely become fathers in the future (D'Augelli, Rendina, Sinclair, & Grossman, 2005).

Some people wonder whether gay men can be good parents or whether children raised in same-sex households will be well adjusted and healthy. Most research shows that gay dads are just as competent at parenting as their heterosexual counterparts (Bozett, 1989; Patterson, 2004). The literature also shows that children raised in same-sex-headed households grow up to be psychologically well adjusted, behaviorally normal, and socially competent children and young adults (Tasker, 2005). Other common stereotypes of gay men are that they are overly interested in sex and thus not suitable as parents or that they are more likely to raise children who are themselves gay or confused about their gender. However, research does not support these stereotypes. Recent studies indicate that gay dads are not as sexually active as their nonparenting counterparts and that their commitment to their relationship increases with the addition of a child to the family (Forssell et al., 2009; Huebner et al., 2012). Further, no evidence suggests that the children of gay fathers are more likely to be LGB or uncertain about gender and gender roles (Anderssen, Amlie, & Ytterøy, 2002; Bailey, Bobrow, Wolfe, & Mikach, 1995).

How Do Gay Men Become Parents?

Children living in same-sex-parented households are most often the result of different-sex relationships that occurred before the gay parent was aware of or open about his or her same-sex orientation (Gates, 2012). Gay men who have children when they are young often retain either sole or joint custody of their children when they divorce or split with their female

partners and when they enter same-sex relationships (Patterson, 2009). The mode of becoming a gay parent through a previous heterosexual relationship may be on the decline, however. Studies show that more same-sex-headed households are raising children through adoption, while the proportion of children who enter LGB-headed households through a previous heterosexual relationship is declining (Gates, 2012). Gay men also become parents through other means, such as surrogacy, foster parenting, and coparenting with other individuals or couples. The increase in parenting by gay men through these various means may be due in part to reduced stigma and greater acceptance of LGB persons and their roles as parents (Gates, 2012).

What Meaning May Fatherhood Have for Gay Men?

Same-sex couples rarely become parents by accident. A recent study of 35 preadoptive gay male couples showed that parenthood was highly intentional and that their “motivations to parent echo normative life course decision-making processes, but also reflect concerns that are uniquely informed by their sexual minority status” (Goldberg, Downing, & Moyer, 2012, p. 157). For example, many of these couples believed that it would be personally fulfilling and wanted to give a child a good home. Financial and relationship stability were some of the reasons the study participants gave for the timing of their decision to become parents.

Although the study of gay dads has been limited, some researchers have written about this growing area of interest. Based on interviews with 10 gay men who became fathers, one study proposed a six-stage model of understanding how gay men develop an identity as parents (Brinamen & Mitchell, 2007). This model includes:

1. Assuming gay men cannot be parents during the coming out process.
2. Expanding one’s self-awareness and confidence as a gay man.
3. Recognizing that gay families can be as strong and are as valid as families with heterosexual parents.
4. Considering the possibility of parenthood, observing gay families, and worrying about social responses to their status as parents.
5. Valuing the strengths gay men can offer as fathers and deciding to parent.
6. Integrating the gay and father components of identity, including changes to support networks.

Becoming a gay parent involves planning, considerable effort and expense, and may be met with resistance by family, friends, and others. Further, gay parenting has only recently become a more socially acceptable practice. Gay men who thought parenting was not possible for them are considering becoming dads for the first time. Legal and social support for same-sex marriage is also helping make parenting among gay adults more acceptable and attainable. All of these factors—including how gay men experience the process of identifying as a father—may make becoming a father an especially significant and different experience for gay dads.

Challenges and Barriers

Importantly, there is no evidence to suggest that gay men are unfit to be parents and not a single study has found children of gay parents to be disadvantaged in any key aspect relative to children of heterosexual parents (APA, 2005). Unfortunately, though, gay males still face many barriers to being a father. Stigma and discrimination can still be found throughout the country. Like other same-sex families, gay dads experience unwelcoming health care environments as well as health coverage disparities and unequal access to health insurance (Movement Advancement Project, Family Equality Council, & Center for American Progress, 2011). Stigma can be especially pronounced in more rural or conservative communities. Parents must face these challenges in multiple contexts, including with daycare providers; in schools with teachers, administrators, and parents of other children; with pediatricians and other health care providers; and with their own extended families. These experiences may require that gay dads come out and not only share their gay identity many times, but also address and cope with any related stigma across these diverse settings (Brinamen & Mitchell). This may create individual and family stress and lead to related challenges.

Some gay dads who became fathers through previous heterosexual relationships may experience rejection from their children's mothers who may not accept the fathers' gay identity. When this results in litigation, gay fathers can be at a disadvantage. Many states have laws that favor heterosexual parents in divorce or other relationship dissolution situations. Would-be gay foster and adoptive fathers may also have to confront state laws that restrict adoptions to heterosexual couples or that forbid adoption by single gay parents (Human Rights Campaign, 2012; Lambda Legal, 2012; Tavernise, 2011).

Although some school staff are supportive of gay parents, some are not. In one study conducted in a large northeastern university, more than half of students training to become elementary school teachers thought that male gay identity should be condemned (Maney & Cain, 1997). Also, a Gay, Lesbian and Straight Education Network (GLSEN) survey of 588 LGBT parents with a child in a K–12 school found that 26% reported mistreatment because they were LGBT parents from other parents at the school teachers, 6% from principals, 7% from teachers, and 9% from other school staff—and 45% of the respondents had looked into how the school treated LGBT issues before even enrolling their child in it (Kosciw & Diaz, 2008). Stigma and discrimination aside, single gay fathers experience the same challenges that single parents, regardless of sex or sexual orientation, experience, including balancing work and parenting as well as finding affordable daycare.

Experiences of Gay Dads of Color

Demographic studies of gay parenting have shown that gay parents are a racially and ethnically diverse group (Gates, 2012). Some studies have reported that gay dads are more likely than heterosexual fathers to be in multiracial relationships and to adopt children across racial lines (e.g., Farr, Forsell, & Patterson, 2010). Unfortunately, gay fathers from populations of color often face stigma and discrimination on two fronts: their racial/ethnic identity and their sexual identity. Some racial or ethnic minority cultures are believed to be less accepting or even hostile to LGB persons (Battle & Lemelle, 2002). Parenting as a gay man in these communities may heighten this negativity. Not surprisingly, many gay men of color report hiding their sexual orientation from their communities of origin (Wilson & Miller, 2002). This can present challenges to parenting, with less access to extended family backing

for emotional support as well as other assistance, such as childcare and financial resources. Contrary to many media images and public perceptions about the socioeconomic status of gay men, many LGB people are low income or are otherwise economically disadvantaged (Billies, Johnson, Murungi, & Pugh, 2009). This is especially the case for gay men of color. When a child is included in the family picture, financial resources can be particularly strained.

Heterosexual Fathers of LGBT Children

Adjusting to the news that a son or a daughter is LGB or transgender can be a challenging experience for many fathers. Often they know very little about LGBT people or identity. Reactions to a child's announcing that he or she is gay, also known as "coming out," can vary from highly supportive to rejecting. Negative reactions to coming out commonly include confusion over why their child is LGBT; fear that the child will be discriminated against, harassed, or bullied; disappointment that the child did not express his or her identity sooner; betrayal that a child has "chosen" to go against a religious or moral norm; a sense of loss of the child they "thought they had"; or anxiety over how other family members will react, how to tell other family members, or alternately how to hide it from others. Positive reactions can also occur. Some families express immediate support and acceptance. Others express some reservations or questions while reaffirming the child's identity. In some cases, fathers and mothers had a sense or knew that their child was gay early in childhood. Recent research has clearly shown far better outcomes for LGB children when their parents are more accepting and less rejecting. Greater acceptance is related to lower depression and suicidal thoughts and decreased likelihood of drug or alcohol abuse (D'Augelli, 2006a; Ryan, 2009).

Whatever a parent's reaction, coming out usually forces a change of status and a period of adjustment in families (D'Augelli, 2006b). Fathers who are adjusting to a child's coming out will need information and resources to support them in their period of adjustment. For example, see the resources information at the end of this section of the guide.

Recommended Practices for Dads Who Are Gay or Fathers of LGBT Children

The American Psychological Association (APA) recently released a revised list of 21 guidelines for working with LGBT clients, which are available in full online (APA, 2011). Box 1 shows four of these guidelines related to families and relationships. Many of the practices, which are recommended to mental health practitioners, are particularly relevant to gay men who are fathers because they address family issues for LGBT persons. The first of the APA guidelines is to strive to understand the challenges faced by LGB people. The stress inherent in the barriers to becoming a gay parent, notably discrimination and stigma from less accepting members of the community including teachers, other parents, and family, must be considered when working with gay fathers.

The changes that accompany becoming a parent can create stress. It could be that the added stigma and discrimination of being gay may magnify that stress. The guidelines encourage mental health professionals to recognize that families parented by gay males may include non-biologically or legally related members. Because many states still do not recognize same-sex marriage or legal adoption by gay men or same-sex couples, and because gay men often become dads through adoption, surrogacy, fostering, and coparenting, the family structure of many gay fathers is nontraditional. This situation may present challenges to

typically held assumptions about how gay male–parented families function and to the availability of and access to social services, benefits, and legal protections.

Box 1. American Psychological Association’s Guidelines for Psychological Practice with Lesbian, Gay, and Bisexual Clients (2011)

Guideline 7. Psychologists strive to be knowledgeable about and respect the importance of lesbian, gay, and bisexual relationships.

Guideline 8. Psychologists strive to understand the experiences and challenges faced by lesbian, gay, and bisexual parents.

Guideline 9. Psychologists recognize that the families of lesbian, gay, and bisexual people may include people who are not legally or biologically related.

Guideline 10. Psychologists strive to understand the ways in which a person’s lesbian, gay, or bisexual orientation may have an impact on his or her family of origin and the relationship with that family of origin.

As noted in the APA recommendations, mental health professionals must also strive to understand the impact that an LGB orientation may have on relationships with families of origin. As described above, parents, grandparents, and other relatives of a gay father may not be accepting of either the parent’s sexual orientation or of his decision to parent or both. Similarly, it is also important to strive to recognize the challenges related to the multiple and often conflicting norms, values, and beliefs that LGB members of particular racial and ethnic minority groups experience. Some cultural and ethnic traditions are less accepting of same-sex orientation or of parenting by gay men. The socially embedded contexts for framing same-sex orientation, both positive and negative, must be considered when working with gay men who are navigating the process of becoming and being fathers.

Religion and spirituality may also play an important role in the lives of LGB persons. Although many gay men seek out religious affiliations that are accepting of their sexual identity, many gay parents grew up in more conservative religious traditions that were not as accepting of gay identity (Kocet, Sanabria, & Smith, 2011). Navigating a shift from a rejecting religious tradition to an accepting environment may be fraught with challenges and mixed emotions, particularly if the family of origin disapproves of the transition. Therefore, it is important to be sensitive to the religious background, experiences, and beliefs of gay parents. The guidelines also remind care providers that cohort and age differences may exist. Older gay fathers will more likely have been exposed to more negative opinions toward gay male parenting over their lifetimes than younger gay men. Therefore, obstacles to overcoming stigma and discrimination may vary as a function of age.

The guidelines also address economic issues for gay dads. They encourage providers to consider the impact of socioeconomic status on the psychological well-being of LGB clients. Generally speaking, lower-income families experience more stress and barriers to well-being than higher-income families. Further, same-sex parents with a 10-year-old child lose an average of \$250,000 in survivor benefits from Social Security if they are unable to serve as legal parents of the child (Human Rights Campaign, 2012). For gay fathers with lower incomes, navigating the challenges of parenting and providing for a child may be particularly difficult.

Resources for Gay Fathers and Children of Gay Parents

To access relevant resources, including websites, documents, and archived webinars, please visit the TA Partnership's LGBT, Questioning, Intersex, and Two-Spirit (LGBTQI2-S) Learning Community Web page at <http://tapartnership.org/COP/CLC/lgbtqi2s.php>. In particular, we recommend the following resources:

- *COLAGE: People with a Lesbian, Gay, Bisexual, Transgender or Queer Parent* (www.colage.org)
COLAGE unites people with LGBT and (or) queer parents into a network of peers and supports them as they nurture and empower each other to be skilled, self-confident, and just leaders in their communities.
- *Family Acceptance Project* (<http://familyproject.sfsu.edu>)
The Family Acceptance Project (FAP) is a community research, intervention, and education initiative to study the impact of family acceptance and rejection on the health, mental health, and well-being of youth who are LGBT. The project's results are the basis for resources to help families support youth who are LGBT. In addition, FAP is developing appropriate interventions, programs, and policies and will train providers to improve the quality of services and care that youth who are LGBT receive.
- *Family Equality Council* (www.familyequality.org)
The Family Equality Council works to change attitudes and policies to ensure that all families are respected, loved, and celebrated, especially families with parents who are LGBT.
- *Parents, Families, & Friends of Lesbians and Gays* (PFLAG; www.pflag.org)
PFLAG promotes the health and well-being of individuals who are LGBT, their families, and friends through (1) support, to cope with a society that presents challenges to individuals who are LGBT; (2) education, to enlighten those lacking information about individuals who are LGBT; and (3) advocacy, to end discrimination and to secure equal civil rights. PFLAG offers opportunity for dialogue about sexual orientation and gender identity and acts to create a society that is healthy and respectful of human diversity.

SECTION XII: Resources

NATIONAL OR FEDERAL RESOURCES:

All Pro Dad: <http://www.allprodad.com/nflspokesmen/index.php>

Annie E. Casey Foundation, Responsible Fatherhood & Healthy Marriage Resources:
<http://www.aecf.org/KnowledgeCenter/SpecialInterestAreas/ResponsibleFatherhoodMarriage.aspx>

National Center for Fathering: <http://www.fathers.com/>

National Center for Fathers and Families: <http://www.ncoff.gse.upenn.edu/>

National Fatherhood Initiative: <http://www.fatherhood.org/>

National Fatherhood Leadership Group: <http://www.nflgonline.org>

National Quality Improvement Center on Non-Resident Fathers and the Child Welfare System:
<http://www.fatherhoodqic.org/>

Native American Fatherhood and Families Association:
123 North Centennial Way, Mesa, Arizona 85201
(480) 833-5007, info@aznaffa.org

NFL Dads' Group: <http://www.allprodad.com/nflspokesmen/index.php>

Supporting Father Involvement: <http://supportingfatherinvolvement.org/>

The US Office of Adolescent Health has developed an on-line training course designed to help service agencies and systems to more effectively engage and involve fathers. The 60-minute training module can be accessed at: <http://www.hhs.gov/ash/oah/resources-and-publications/learning/fatherhood/index.html>

U.S. Department of Health and Human Services, Promoting Responsible Fatherhood:
<http://www.fatherhood.hhs.gov/>

RESOURCES ABOUT NATIVE AMERICAN FATHERS:

Native American Fatherhood and Families Association: <http://aznaffa.org/>

RESOURCES ABOUT YOUNG FATHERS:

American Pregnancy Helpline, Guy's Corner: <http://www.thehelpline.org/guys-corner/>

Minnesota Fathers & Family Network (2004), InfoSheet 4: Young Fathers:
<http://www.mnfathers.org/Resources/Documents/InfoSheetYoungDads.pdf>

Pregnant and Parenting Teen Initiative, Teen Father Services:
<http://www.center-school.org/education/ppt/pptfather.htm>

The Zero Collective, Teenage and Young Adult Parents Resources:
http://www.vachss.com/help_text/teen_parents.html

RESOURCES ABOUT GRANDFATHERS:

AARP, Grandparenting Tips & Resources: <http://www.aarp.org/relationships/friends-family/info-08-2011/grandfamilies-guide-getting-started.html>

Grandparents Raising Grandchildren: <http://www.raisingyourgrandchildren.com/>

The Foundation for Grandparenting: <http://www.grandparenting.org/>

USA.gov, Grandparents Raising Grandchildren: <http://www.usa.gov/Topics/Grandparents.shtml>

RESOURCES ABOUT FATHERS AND CHILD WELFARE:

American Humane Association (2011), *Bringing Back the Dads: Changing Practices in Child Welfare Systems*: <http://www.americanhumane.org/assets/pdfs/children/fatherhood/pc262.pdf>

American Humane Association – Fatherhood Initiative webpage at:
<http://www.americanhumane.org/children/programs/fatherhood-initiative/>

- Quality Improvement Center Fatherhood Toolkit: <http://www.americanhumane.org/children/programs/fatherhood-initiative/qic-fatherhood-toolkit/>
- Nine Step Developmental Model: <http://www.americanhumane.org/children/programs/fatherhood-initiative/qic-fatherhood-toolkit/qic-9-steps.html>

California Social Worker Education Center, Father Engagement and Father Involvement Toolkit: <http://calswec.berkeley.edu/toolkits/father-engagement-and-father-involvement-toolkit-guide-implementing-monitoring-and-sustaining/other-websites-interest>

Horn, Wade F., & Sylvester, Tom. (2002). *Father facts* (4th ed.). Gaithersburg, MD: National Fatherhood Initiative.

National Child Welfare Resource Center for Family-Centered Practice, *Best Practice/Next Practice, Summer 2002, Father Involvement in Child Welfare: Estrangement and Reconciliation*: <http://www.hunter.cuny.edu/socwork/nrcfcpp/downloads/newsletter/BNPNSummer02.pdf>

National Technical Assistance and Evaluation Center (2008), *A Closer Look: Family Involvement in Public Child Welfare Driven Systems of Care*: <http://www.childwelfare.gov/pubs/acloserlook/familyinvolvement/familyinvolvement.pdf>

Office on Child Abuse and Neglect, U.S. Children's Bureau (2006), *Fathers and Their Impact on Children's Wellbeing*: <http://www.childwelfare.gov/pubs/usermanuals/fatherhood/index.cfm>

U.S. Department of Health and Human Services, Father Involvement in Child Welfare: <http://fatherhood.hhs.gov/Parenting/welfare.shtml>

U.S. Department of Health and Human Services (2008), *More About the Dads: Exploring Associations between Nonresident Father Involvement and Child Welfare Case Outcomes*: <http://aspe.hhs.gov/hsp/08/moreaboutdads/report.pdf>

U.S. Department of Health and Human Services (2006), *What About the Dads? Child Welfare Agencies' Efforts to Identify, Locate, and Involve Nonresident Fathers*

- Research Summary: <http://aspe.hhs.gov/hsp/06/cw-involve-dads/rs.pdf>
- Full Report: <http://aspe.hhs.gov/hsp/06/CW-involve-dads/report.pdf>

RESOURCES ABOUT INCARCERATED FATHERS:

General Resources

Fortune Society

<http://www.fortunesociety.org/>

Educating the public about prisons, criminal justice issues, and the root causes of crime is the Fortune Society's main goal. It also works directly with "former prisoners and at-risk youth [to] break the cycle of crime and incarceration through a broad range of services."

National Re-entry Resource Center

<http://www.nationalreentryresourcecenter.org/library>

This center offers information specifically for those transitioning to home and the organizations that serve them.

Offender Aid and Restoration (OAR/USA)

<http://www.oaronline.org>

This organization is aimed at assisting offenders with reentry issues. Originally founded in Virginia, it now has affiliated offices in four states.

Reentry National Media Outreach Campaign

<http://www.reentrymediaoutreach.org>

The aim of this organization is to heighten awareness and foster discussion of prisoner reentry issues through use of the media.

Vera Institute of Justice

<http://www.vera.org>

"The Vera Institute of Justice works closely with leaders in government and civil society to improve the services people rely on for safety and justice. Vera ... studies social problems and current responses, and provides practical advice and assistance to government officials in New York and around the world."

Women's Prison Association & Home, Inc.

<http://www.wpaonline.org/>

"WPA is a service and advocacy organization committed to helping women with criminal justice histories realize new possibilities for themselves and their families."

Faith-Based Organizations That Work in Prisons and With Ex-Convicts

Good News Jail & Prison Ministry

<http://goodnewsjail.org/default.asp>

Justice Fellowship

<http://www.justicefellowship.org>

Re-entry and After-Care Programs

http://www.reentry.net/library/folder.163967-Reentry_Aftercare_Programs

We Care

<http://www.wecareprogram.org>

Advocacy Resources and Programs

About the Children

This parent advocacy group also advocates for fathers' rights.

http://www.reentry.net/library/folder.163967-Reentry_Aftercare_Programs

Family Advocacy for Incarcerated Parents

<http://www.clsphila.org/Content.aspx?id=258>

Information and Tips: Family and Corrections Network: Fathers Behind Bars and on the Streets

<http://www.fcnetwork.org/fathersconf2002/proceedings/johnston-carlin.html>

Legal Services for Incarcerated Parents: Prisoners with Children.

<http://www.prisonerswithchildren.org/>

Manual of Incarcerated Parents Rights

<http://www.prisonerswithchildren.org/pubs/ipm.pdf>

STATEHOOD INITIATIVES:

Colorado Dads, Be There for Your Kids

www.coloradodads.com

Florida Commission on Responsible Fatherhood

111 North Gadsden Street, Suite 200

Tallahassee, FL 32301-1507

Phone: 850-488-4952

<http://www.floridafathers.org>

Georgia Fatherhood Program

Johnathan R. Ward, Coordinator

1800 Century Place, Suite 400

Atlanta, Georgia 30345-4304

Phone: 404-679-0511

Fax: 404-679-1675

jward@dtae.org

<http://ocss.dhs.georgia.gov/fatherhood-program?vnextoid=b59a10ad92000010VgnVCM100000bf01010aRCRD>

Illinois Fatherhood Initiative

208 S. LaSalle, Suite #1900

Chicago, IL 60606

Phone: 800-996-DADS/312-795-8631

Fax: 312-795-8839

4fathersifi@sbcglobal.net

www.4fathers.org

Indiana Fathers & Families

IMPACT Program – FSSA/Div. C&F

402 W. Washington St., Rm W363

Indianapolis, IN 46204

Phone: 317-232-4924

<http://www.in.gov/fssa/fathers>

Indiana: The Family Connection of St. Joseph County, Inc.

Sue Christensen and Ann Rosen, Co-Directors

132 N. Lafayette Blvd.

South Bend, IN 46601

Phone: 574-237-9740

Fax: 574-237-1071

famconn@michiana.org

<http://www.facebook.com/pages/The-Family-Connection/90554528000>

Maryland Department of Human Resources: Fatherhood Programs

311 West Saratoga St.

Baltimore, MD 21201

Phone: 800-322-6347

http://dhr.maryland.gov/blog/?page_id=2408

Pennsylvania Fatherhood Initiative

Center for Schools and Communities

275 Grandview Ave., Suite 200

Camp Hill, PA 17011

Phone: 717-763-1661

csc@csc.csiu.org

www.center-school.org

Pennsylvania Fatherhood Initiative Program

Community Action Development Commission

113 East Main Street

Norristown, PA 19401

Phone: 610-277-6363

Fax: 610-277-7399

info@cadcom.org

<http://www.cadcom.org/Programs-Services/Program-Service-Category/Service-Detail/43/catid-92/serviceid-75/>

South Carolina – Sisters of Charity Foundation

2601 Laurel Street, Suite 250

Columbia, SC 29204-2035

Phone: 803-254-0230

Fax: 803-748-0444

scfsc@sistersofcharitysc.com

http://www.sistersofcharitysc.com/resources/fatherhood_initiative_links/

The South Carolina Center for Father and Families

2711 Middleburg Dr., Suite 115

Columbia, SC 29204

Phone: 803-254-0230

Fax: 803-748-0444

<http://www.scfathersandfamilies.com>

Texas: North Texas Fatherhood Initiative

Bill J. Priest Institute
1402 Corinth Street #123
Dallas, Texas 75215
Phone: 214-517-4622
staff@northtexasfathers.org
<http://www.northtexasfathers.org/>

Virginia Fatherhood Campaign

Ron J. Clark, Director of Fatherhood Programs, Main Street Station
1500 East Main Street
Richmond, VA 23219
Phone: 804-692-0400

Washington State Fathers Network

Greg Schell
Kindering Center
16120 N.E. Eighth Street
Bellevue, WA 98008-3937
Phone: 425-653-4286
Fax: 425-747-1069
<http://fathersnetwork.org>

Washington State Dads

WADADS
<http://www.washingtondads.com/>

Appendix A

Motivational Interviewing Information Resources

- Barnett, E., Spruijt-Metz, D., Unger, J. B., Sun, P., Rohrbach, L. A., & Sussman, S. (2012). Boosting a teen substance use prevention program with motivational interviewing. *Substance Use & Misuse*, 47, 418–428. doi: 10.3109/10826084.2011.641057
- Bjerregaard, L., Rubak, S., Host, A., & Wagner, L. (2012). Alcohol consumption patterns among parents of hospitalized children: Findings from a brief intervention study. *International Nursing Review*, 59, 132–138.
- Cox, W. M., & Klinger, E. (2011). *Handbook of motivational counseling: Goal-based approaches to assessment and intervention with addiction and other problems* (2nd ed.). Hoboken, NJ: Wiley-Blackwell.
- Duncan, B., Miller, S., & Sparks, J. (2004). *The heroic client: A revolutionary way to improve effectiveness through client-directed, outcome-informed therapy*. Hoboken, NJ: Jossey-Bass.
- Haddock, G., Beardmore, R. M., Earnshaw, P., Fitzsimmons, M., Nothard, S., Butler, R., Eisner, E., & Barrowclough, C. (2012). Assessing fidelity to integrated motivational interviewing and CBT therapy for psychosis and substance use: The MI-CBT fidelity scale (MI-CTS). *Journal of Mental Health*, 21(1), 38–48. doi: 10.3109/09638237.2011.621470
- Hohman, M. (2012). *Motivational interviewing in social work practice*. New York: The Guildford Press.
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