

Examining the Relationship:
Fathers' Parenting Support and Parenting Stress on Family Violence

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Dedication

This dissertation is dedicated to Ben, Jaycie, and Maxwell

Abstract

Parenthood is a life-changing event that requires preparation and understanding of a child's needs. Since parenting skills are often acquired and not instinctual (Lamb, 1986), it is important to understand the process of how men learn to become parents. Men are often taught not to be caregivers (Parke & Beitel, 1986), resulting in a lack of experience in the role of caregiver and making them feel less skilled and less confident in their ability to parent (Lamb, 1986). Furthermore, men who were exposed to domestic violence as children may learn to use violence to solve conflict, deal with stress, and maintain control over another person (Straus, Gelles, & Smith, 1990). This may lead to an increased risk for perpetration of violence against women and children (Black, Sussman, & Unger, 2010; Margolin, Gordis, Medina, & Oliver, 2003; Stith et al., 2000; Wareham, Boots, & Chavez, 2009).

A review of literature provides the empirical underpinnings on the risks of parenting stress and child exposure to domestic violence and the benefits of social support. Using social learning theory and ecological systems theory as a guide, a conceptual model was developed that provided a testable model of the relationship between parenting support's and parenting stress on the subsequent associated risks for family violence. A national study of fathers was conducted to test this model. Participants were asked about their history of exposure to domestic violence in childhood and the type, amount and use of parenting support. They also completed three standardized measures on parenting stress, child abuse potential, and propensity for abusiveness.

The results of the study affirmed the protective nature of social support in reducing parenting stress and risks for family violence. There were significant differences

in parenting stress, child abuse potential, and propensity for abusiveness between fathers who reported exposure to domestic violence in childhood and those that did not report exposure. The results of the analysis indicate that social support—both access and use—has a relationship with parenting stress and potential and propensity for abuse. The access to and use of parenting support by men who were exposed to domestic violence did have a significant relationship on parenting stress and potential and propensity for abuse.

This research highlights the importance of assessing for and encouraging the use of parenting support in social work practice. Additionally, public policies need to be developed that actively encourage fathers beyond the focus on economic support. Finally, further research is needed to gain a better understanding of how exposure to domestic violence during childhood affects people throughout their lifespan.

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CHAPTER ONE

A small study by Rebecca Macy and colleagues (2007) found that women reported a significant increase in psychological and sexual violence in the first month post-partum. Macy et al. (2007) found that this was true even among women who had not reported domestic violence before or during their pregnancy. This startling finding indicates that the transition to parenthood may be a stressful time for new fathers which may place women and children at risk for family violence. Among the research, two risk factors commonly linked to violence against women and children (i.e. family violence) are: parenting stress (C. G. Moore, Probst, Tompkins, Cuffe, & Martin, 2007; Whipple & Webster-Stratton, 1991) and a history of violence such as exposure to domestic violence in childhood (Black et al., 2010; Margolin et al., 2003; Stith et al., 2000; Wareham et al., 2009). Child temperament, attachment, and substance abuse are also common risk factors for family violence.

In terms of protective factors, mental health, economic conditions (e.g. housing, employment, etc.), and social support are identified as helpful in reducing stress and risks for family violence (Belsky, 1984; Fagan, Bernd, & Whiteman, 2007; Lin & Ensel, 1989). Social support is often linked to improved mental health and economic conditions that in turn can reduce stress and risks for family violence. Yet, there is little research that connects the effects of parenting support on reducing parenting stress and risks for family violence among fathers.

To fill the gap in literature, a national survey of fathers was conducted to examine the relationship between parenting supports and parenting stress on subsequent risk for abuse among fathers of children under the age of 5 years old. The study also examined

the relationship between fathers' exposure to domestic violence in childhood and parenting stress, child abuse potential, and propensity for abusiveness. Throughout this paper, references to family violence are conceptualized as risk for child abuse and domestic violence. Participants were asked about their history of exposure to domestic violence in childhood and the type, amount, and use of social support. They also completed three standardized measures on parenting stress, child abuse potential, and propensity for abusiveness. Using social learning theory and ecological systems theory as a guide, a conceptual framework was developed that provided a testable model of the effects of parenting support on parenting stress and the risk for family violence.

The purpose of this research study was to gain a better understanding of the relationship between parenting support of men were exposed to domestic violence in childhood and parental stress experienced by fathers as well as the subsequent association this stress may have on potential child abuse and/or intimate partner violence. This research study examined:

1. The relationship between parenting support and parenting stress to reduce the risk for family violence.
2. The relationship between fathers' exposure to domestic violence in childhood and parental stress, child abuse potential, propensity for abusiveness, access to and use of parenting support.
3. The relationship between exposed fathers' parenting support on stress to reduce the risk for family violence.

The results of the analysis indicate that parenting support—both access and use—has a relationship with parenting stress and risks for family violence for the entire sample

of men. However, there is some complexity in how parenting supports affect stress to decrease the risk for family violence. While access to and use of parenting supports were associated with decreased parenting stress, they did not affect parenting stress in the same way. Lower scores in risk for domestic violence were associated with increased access to parenting supports and lower stress. In contrast, the interaction between use of parenting supports and parenting stress was not associated with reducing domestic violence risk. On the other hand, the interaction between the use of parenting supports and parenting stress were associated with decreased scores on the child abuse potential inventory while the interaction between access to parenting supports and stress was not associated with a reduction child abuse potential.

The results also show a relationship between exposure to domestic violence in childhood and risk for family violence. Specifically, men who were exposed to domestic violence had higher scores on family violence risk assessments. Additionally, the interaction between access to parenting support and parenting stress was associated with lower scores on the propensity for partner abuse measure. Lower scores on child abuse potential were associated with a significant interaction between the use of parenting support and parenting stress. However, small sample size, weak statistical power, and other limitations of the research may affect the interpretation of these results.

This research highlights the importance of assessing for and encouraging the use of parenting support in social work practice. Additionally, public policies may be developed that actively encourage fathers beyond the focus on economic support. Finally, further research is needed to gain a better understanding of how exposure to domestic violence during childhood affects people throughout their lifespan.

Outline of Dissertation

This dissertation is comprised of five chapters. The first chapter provides a review of literature along with the critical gaps in the literature that this research aims to fill. The second chapter provides the theoretical framework of understanding how parenting supports may be able to change parenting stress, potential for child abuse, and propensity of abuse using social learning and ecological systems theory. The chapter also includes a conceptual model with testable hypotheses. The conceptual model is divided into two parts: effects of parenting supports and the effects of exposure to domestic violence in childhood. Chapter three explains the research methods used to gather data from a national sample of fathers. It includes the hypotheses, variables, and data analysis plan. The analysis plan and design limitations are also included in this chapter. Chapter four provides the results of the conceptual model. The final chapter provides a discussion of the results. The results are discussed within the context of the literature, theoretical framework, and conceptual model. The chapter concludes with implications for practice, policy, and research in terms of parenting supports, fatherhood, and exposure to domestic violence in childhood.

Problem Statement

Domestic violence is a complex issue that can have lifelong effects on those who experience it. For the purposes of this paper, domestic violence is defined as a pattern of physical, sexual, and/or psychological abuse by a male partner in order to maintain power and control over another partner (Pence & Paymar, 1993). It is recognized that domestic violence can be defined in other ways including female perpetration of domestic violence. However, because this paper is focusing on men, fatherhood, and their potential and

propensity for abuse the definition of domestic violence is limited to male perpetration of violence against a partner.

Domestic violence affects nearly 12 million adults every year (Centers for Disease Control and Prevention, 2010). While prevalence rates may vary, women are disproportionately affected by domestic violence. Approximately 1.3 million women and 835,000 men experience physical violence by a partner every year (Tjaden & Thoennes, 2000). Women (39%) are more likely to be injured during a physical assault than men (25%; Tjaden & Thoennes, 2000). Since women are at elevated risk for domestic violence, a special emphasis is placed on the factors related to their victimization.

The risk for domestic violence is elevated during pregnancy and early childhood (Campbell, Garcia-Moreno, & Sharps, 2004; Gazmararian et al., 1996), yet the prevalence rates vary from 0.9-20.6% (Gazmararian et al., 1996; Taillieu & Brownridge, 2010). Research studies that limit the definition of domestic violence to only physical harm (e.g. kicking, slapping, punching) tend to report lower rates of violence during pregnancy, while broader definitions that include psychological and sexual violence report rates as high as 45% (Gazmararian et al., 1996; McFarlane, Parker, Soeken, & Bullock, 1992; Taillieu & Brownridge, 2010). Varying definitions are not the only thing affecting disclosure rates, frequency and timing of screening also play a role. Increased screening may lead to higher disclosure rates if women feel safe to report the abuse (Gazmararian et al., 1996; Keeling & Mason, 2011; McFarlane et al., 1992). Women in the immediate post-partum period (1-5 days after delivery) may be less likely to disclose domestic violence if they have not been previously screened than those in the first trimester, possibly because of pre-occupation with newborn or a hope that the abuse will

stop (Keeling & Mason, 2011). Overall, two meta-analyses from 1996 and 2010 indicate that the majority of research finds the prevalence of violence during pregnancy ranges from 3.9-8.3% (Gazmararian et al., 1996; Taillieu & Brownridge, 2010). Research also shows that even women who have not experienced violence in the past may be at risk for domestic violence after the birth of a child (Macy et al., 2007; Martin et al., 2004; Martin, Mackie, Kupper, Buescher, & Moracco, 2001).

Martin et al. (2004) studied changes in violence during pregnancy among low-income women in the U.S.. The study included 65 women of which 35 screened positively for domestic violence before the sixth month of pregnancy. There were significantly higher reports of psychological, physical, and sexual violence and an increase in violence-related injuries after delivery among the 35 women who initially screened positively for domestic violence (Martin et al., 2004). Women who did not initially screen positively for domestic violence reported an increase in psychological aggression and some reported incidents of physical and sexual violence after delivery (Martin et al., 2004). Interestingly, these women also reported increases in perpetrating psychological and physical violence on their male partners.

In addition to violence during pregnancy, there is evidence that suggests violence may increase during the first month post-partum. Macy et al. (2007) interviewed 76 U.S. women about their experiences of domestic violence before, during, and after pregnancy. The participants in this study were asked about various forms of violence including psychological, sexual, and physical. Macy et al. (2007) found that victimized women (i.e. women who disclosed violence in the first 6 months of pregnancy) were more likely to experience all forms of violence over the three time periods when compared to non-

victimized women (i.e. those who did not disclose violence in the first 6 months of pregnancy). Both groups of women experienced more psychological violence than physical or sexual violence. Finally, women in both groups (victimized and non-victimized women) experienced a significant increase in psychological and sexual violence during the first month post partum (Macy et al., 2007).

Literature Review

Childhood Exposure to Domestic Violence

Nearly half of all incidences of domestic violence occur in homes with children present, and children under the age of six are at higher risk for exposure to domestic violence than older children (Carpenter & Stacks, 2009). Child exposure to domestic violence is defined as seeing or hearing adult-to-adult violent interactions and the effects of violence (e.g. bruises or overturned furniture) including hearing stories about domestic violence (Kitzmann, Gaylord, Holt, & Kenny, 2003). Approximately 5 million U.S. children experience domestic violence every year and about 20 million children under 18 will have been exposed during the course of their young lives (U.S. Census Bureau, 2011b; Hamby, Finkelhor, Turner, & Ormrod, 2011).

Exposure to domestic violence does affect children's lifespan development. Children who are exposed are at an increased risk for depression, anxiety, and attachment disorders (Carpenter & Stacks, 2009; Cox, Kotch, & Everson, 2003; Edleson, 1999; Evanson, 2006). These children often demonstrate more behavioral issues including aggression, non-compliance, and delinquency (Cox et al., 2003; Edleson, 1999; Meltzer, Doos, Vostanis, Ford, & Goodman, 2009). In addition to behavioral and mental health issues, a meta-analysis by Kitzmann et al. (2003) found that children exposed to domestic

violence are also likely to have social and academic difficulties that could affect them into adulthood.

Nearly 65 million adults are likely to have been exposed to domestic violence over their lifetime (U.S. Census Bureau, 2011b; Hamby et al., 2011). For those adults exposed in childhood, the negative effects can be long-lasting. The social and academic difficulties experienced in childhood may affect adult relationships and economic potential. Symptoms of depression, anxiety, and post-traumatic stress disorder have been reported in adults who were exposed (K. M. Anderson & Bang, 2012; Diamond & Muller, 2004). Exposure also increases risks for future perpetration or victimization of violence in adulthood (Fergusson & Horwood, 1998; Turner, Finkelhor, Ormrod, & Hamby, 2010). While exposure is not a predictor of perpetration or victimization and many children grow up to have healthy adult relationships, it is important to understand how childhood exposure to domestic violence may influence fathers' reaction to parenting stress and potential and propensity for abuse.

Exposure to Domestic Violence in Childhood and Risk for Domestic Violence

There is evidence to support that children exposed to domestic violence are at increased risk of perpetration of violence in adulthood (Black et al., 2010; Margolin et al., 2003; Stith et al., 2000; Wareham et al., 2009). First, Skuja and Halford (2004) studied 60 Australian couples to assess the association of negative conflict management behavior. Couples were recruited into two categories—30 men who reported being exposed to violence as a child (exposed couples) and 30 men who did not report being exposed to violence (unexposed couples; Skuja & Halford, 2004). Using the Adapted Conflict Tactics Scale-Dating, this study found 19 of the 30 (63.3%) exposed couples reported

male violence in the last year, and 18 out of 30 (60%) exposed couples reported female violence in the last year (Skuja & Halford, 2004). The unexposed group 6 out of 20 men (20%) and 9 out of 30 (30%) women reported violence in the past year. Furthermore, the exposed couples were more dominating (both male and female), less validating, and showed more negative non-verbal behaviors (the definition of non-verbal behaviors was not provided; Skuja & Halford, 2004). This research shows that men who were exposed in childhood may have difficulty handling conflict, which may lead to the perpetration of domestic violence.

A relationship between exposure to domestic violence in childhood and perpetration of domestic violence is often referred to as the intergenerational transmission of violence (M. Ehrensaft et al., 2003; Straus, Gelles, & Steinmetz, 1980). It should be noted that a “cycle of violence” where children grow up to repeat the behaviors of their parents should be examined within the context of development that includes other risk factors (Belsky, 1993; M. K. Ehrensaft, 2008). As stated previously, experiences of domestic violence do not predict future perpetration of violence. However, a 20-year longitudinal study of 543 children by Ehrensaft et al. (2003) found that exposure to domestic violence tripled the odds of perpetrating violence towards a partner. Roberts, Gilman, Fitzmaurice, Decker, and Koenen (2010) analyzed the data of 14,564 men over the age of 20 from the 2004-2005 National Epidemiologic Survey on Alcohol and Related Conditions. They found an association between exposure to domestic violence and perpetration of intimate partner violence $RR = 2.6$ (95% CI = 2.1-32). A quantitative survey by Black, Sussman, and Unger (2010) of 292 U.S. undergraduates found that 58.3% of them reported witnessing parental psychological violence and also experiencing

it within their own intimate relationships. Additionally, 17.5% reported witnessing parental physical violence and experiencing physical violence within their own intimate relationships (Black et al., 2010).

In addition, Stith, Rosen, Middleton, Busch, Lundeberg, and Carlton (2000) found that males exposed to domestic violence in childhood were more likely to perpetrate violence than females who were exposed as children (men: mean $r = .21$, $p < .001$; women: mean $r = .11$, $p < .001$). They conducted a meta-analysis of published and unpublished research studies examining the relationship between child exposure to family violence and future perpetration of violence (2000). The results of the analysis found a statistically significant relationship between child exposure to domestic violence and perpetration of intimate partner violence. This includes both witnessing interparental violence (mean $r = .18$, $p < .001$) and child abuse (mean $r = .16$, $p < .001$; Stith et al., 2000).

Exposure to Domestic Violence in Childhood and Risk for Child Maltreatment

The co-occurrence of domestic violence and child abuse has been well established in the literature (Appel & Holden, 1998; Cox et al., 2003; Edleson, 1999; Finkelhor, Ormrod, Turner, & Holt, 2009; Hamby, Finkelhor, Turner, & Ormrod, 2010). Children who live in homes where their fathers batter their mothers are also at increased risk for child maltreatment (Mbilinyi, Edleson, Hagemester, & Beeman, 2007; Turner et al., 2010). Research by Mbilinyi et al. (2007) found nearly half the battered women surveyed reported being intentionally injured when trying to intervene to stop men's violence against their child.

Cox et al.'s (2003) longitudinal study of 219 high-risk families (e.g. low socioeconomic status, high family stress, low social resources) found that child abuse reports were 18 times more likely to come from families where domestic violence occurred than from families without domestic violence. Twenty-two percent of men in this study who were physically abusive to their partners also physically abused their children (Cox et al., 2003). Hamby et al. (2010) found that over half (56.8%) of the 4,549 children in their national survey who witnessed partner violence also experienced some form of child maltreatment (i.e. physical, psychological, or sexual abuse) during their lifetime and a third (33.9%) of the surveyed children who witnessed partner violence experienced some form of child maltreatment in the past year.

In addition to the relationship between exposure to domestic violence in childhood and adult perpetration of domestic violence, researchers have also found a relationship between childhood exposure to family violence (including child maltreatment) and child maltreatment in adulthood. The term family violence is used throughout this paper. In general, family violence refers to physical, sexual, psychological, emotional and financial abuse, neglect, and maltreatment within the family system including children, partners, and elders. In this paper, family violence is limited to child and partner physical abuse unless otherwise noted. Domestic violence and child maltreatment are referred to as such.

Multiple studies have been conducted with mothers that find similar risk patterns between domestic violence, child maltreatment, and exposure to domestic violence in childhood (e.g. Begle, Dumas, & Hanson, 2010; Chang, Theodore, Martin, & Runyan, 2008; Cox et al., 2003; Guterman, Lee, Lee, Waldfogel, & Rathouz, 2009). A cross-

sectional study of 204 adult male batterers found an association between the receiving of corporal punishment from a father figure and perpetration of minor intimate partner violence (e.g. shaking, threatening, slapping; Wareham et al., 2009).

Parenting Stress

So far, the literature shows a risk for domestic violence during pregnancy and early childhood for men in general. Additionally, exposure to domestic violence during childhood may pose an increased risk for violence perpetrated by men. Another risk factor for violence is parenting stress. Stressors related to parenting generally revolve around marital relationship, parent-child relationships, and environmental factors (Abidin, 1992; Belsky, 1984; Mash & Johnston, 1990). Examples of marital relationship stress include not sharing in care giving activities or disagreements in the way children should be raised. Stressors from parent-child interactions may include child temperament or a child that needs a higher level of care (e.g. a child with food allergies, a child with a disability, etc.). Stressors related to the environment include economic stress such as lack of employment or a position that require long hours.

Difficulty coping with these types of stressors may increase the risk for child maltreatment. Men who grew up in homes where domestic violence occurred may learn to use violence to solve conflict, deal with stress, and maintain control over another person (Straus et al., 1990). It is important to note that while stress may increase the risk for abuse, it is not a causal factor (Straus et al., 1980). Instead, men may learn to use violence to deal with stress (Straus et al., 1980).

Parenting stress has been linked to increased risk for child maltreatment. Analysis data from the National Survey of Children's Health (a telephone survey of the general

population) found that people with high parental stress (measured using *Parenting Stress Index and Parental Attitudes about Childrearing*) had higher odds (>3times) of reporting violent disagreements (i.e. disagreements involving hitting or throwing) than those reporting less stress (C. G. Moore et al., 2007). Those with higher parental stress also reported higher odds of disagreements that included shouting (C. G. Moore et al., 2007). Interestingly, the number of children and poverty levels were not significantly associated with parenting stress (C. G. Moore et al., 2007). As with many studies related to child maltreatment, fathers were a small percentage of respondents (15%), and they were not parsed out in the data presentation. Therefore, it is difficult to determine differences between mothers and fathers.

A 1991 study by Whipple and Webster-Stratton found a relationship between parental stress and child physical abuse. They conducted parental interviews, questionnaires, and home observations with 123 families recruited from a treatment program for children with conduct problems to study the relationship between parenting stress and physical child abuse (Whipple & Webster-Stratton, 1991). Stress was measured using *The Life Experiences Survey, Parenting Stress Index, Beck Depression Inventory*, an anxiety inventory, and the participants' identified social position was recorded (i.e. occupation and education). Physical abuse was measured using parent self reports and home observations (Whipple & Webster-Stratton, 1991). Twenty-nine families had Child Protection Services (CPS) involvement for child abuse; these families were labeled as abusive. Those without CPS involvement were labeled as non-abusive. Results of the study found mothers labeled as abusive reported more depression, higher anxiety, and higher stress than mothers labeled non-abusive and fathers labeled as

abusive (Whipple & Webster-Stratton, 1991). It is important to note that fathers were not factored into several of the statistical analyses due to missing information. While this study does show a relationship between parental stress and child abuse, the relationship of parental stress on fathers' abusive behavior is unclear.

Rodriguez and Green (1997) sampled 39 parents (28 mothers, 11 fathers) in New Zealand to study the effects of parenting stress and anger expression on risks for child maltreatment. They found a significant correlation between parenting stress and child abuse potential ($r = .67, p < .001$) as well as anger expression and child abuse potential ($r = .69, p < .001$), and parenting stress and anger expression ($r = .37, p < .05$; C. M. Rodriguez & Green, 1997). Similar results were found in a second study of 85 parents by Rodriguez and Green (1997): child abuse potential and parenting stress ($r = .53, p < .001$), anger expression and child abuse potential ($r = .44, p < .001$), and parenting stress and anger expression ($r = .27, p < .01$). The results of this study show the connection between parenting stress and risk for child maltreatment.

Finally, a study of a community sample of 115 families ($n = 86$ mothers, $n = 29$ fathers) by Rodriguez and Richardson (2007) found parenting stress along with anger expression were predictive of child abuse potential and physically abusive behavior. Parenting stress and anger were also predictive of psychological aggression as measured by the Conflict Tactics Scale-Parent Child (C. M. Rodriguez & Richardson, 2007). As noted previously, the low participation of men in this study and the lack of differentiation between mother and father make it difficult to determine factors that may be specific to men.

Transition to Fatherhood

Parenting stress may be exacerbated by the lack of information and support during the transition to parenthood. The transition to fatherhood is defined as the development of a new male identity, typically in the prenatal period through the first year of infancy (Habib & Lancaster, 2006). This is a life-changing event that requires preparation in understanding the needs of the child. Men's preparation during the transition to fatherhood is often neglected, which could increase stress and risk for abuse. Without an understanding of the needs of children, a father may resent a child's needs being met before his own, increasing the risk of family violence (Tyler, 1986). The recent research of men's needs as they transition to fatherhood indicate they are not feeling supported and have a desire for more information regarding parenting and partnering during the transition (Cowan, Cowan, Pruett, & Pruett, 2007; Deave & Johnson, 2008; Fagerskiold, 2008).

Findings from a qualitative study by Deave and Johnson (2008) found that first time fathers are in need of supports and information about the ways their relationship changes after the birth of a child. This cross-sectional study explored the needs of 20 first-time fathers in England who were interviewed during the last trimester of pregnancy and again 3-4 months after delivery. The men were purposefully recruited from diverse backgrounds. These first-time fathers reported feeling excluded from the medical appointments and antenatal classes. Male social support was also missing during the transition to fatherhood. Specifically, these men reported changes in their relationships with their partners and expressed a desire for information about these changes during the antenatal period. Overall, the men who participated in this study expressed a desire for more information about the transition to fatherhood in the antenatal period.

Father involvement

Father involvement may help in the transition to fatherhood. Increasing father involvement positively affects men's attitude toward the father role because it affects father-child interactions (Hawkins, Lovejoy, Holmes, Blanchard, & Fawcett, 2008). Father involvement is not isolated to individual characteristics; the type and level of father involvement is affected by internal and external factors. Internal factors include attitudes, behaviors, values, entry into fatherhood, and sex of the child (Parke, 1996). External factors include community relationships (e.g. church involvement), societal interactions, cultural influences, and familial relationships (Parke, 1996). Finally, father involvement seems to have a bi-directional relationship with partner satisfaction, meaning that father involvement is best predicted by intimate partner relationship satisfaction (Cowan et al., 2007), and intimate partner satisfaction during parenting is best predicted by father involvement (Hawkins et al., 2008).

Involvement in caregiving assists fathers in learning and understanding the needs of their children while increasing their confidence and competence in providing care (Parke, 1996). Fagan, Bernd, and Whiteman (2007) conducted a study of adolescent fathers' parenting stress, social support, and involvement in caregiving. They interviewed 84 teenage mothers and 57 teenage fathers about father involvement, parenting stress, and social supports. The results of the study found that fathers with lower parenting stress were more likely to be involved in care giving as reported by both fathers and mothers. Furthermore, the fathers' and mothers' family support moderated the association between parenting stress and perceptions of father involvement (Fagan et al., 2007).

A Solomon-Postman four group study design of *Information and Insight about Infant* (III) intervention program found that low income fathers who received the III intervention were more attuned to their infant's needs than the comparison group (Pfannenstiel & Honig, 1991). The III intervention provided expectant fathers with informational materials and modeled nurturing behaviors including feeding, comforting, and massaging the infant. The differences between the groups were more apparent in the hospital before discharge than at the one-month follow up. The results of Pfannenstiel and Honig's (1991) study suggest the possibility that time spent with the infant may help men become more attuned to their infant's needs.

Development of parenting skills

Since parenting skills are often acquired and not instinctual (Lamb, 1986), it is important to understand the process of how men learn to become parents. Women, unlike men in the U.S., are surrounded by messages on how to be a mother and given multiple opportunities to practice caregiving through toys (e.g. baby dolls), games (e.g. My Baby Girl for Nintendo DS), and babysitting. In contrast, men are often taught not to be caregivers (Parke & Beitel, 1986) resulting in a lack of experience in the role of caregiver, making them feel less skilled and less confident in their ability to parent (Lamb, 1986). While there has been more acceptance and opportunities for boys to learn and practice caregiving (e.g. babysitting training classes are open to boys), societal messages to boys frequently focus on action and adventure play versus caregiving activities.

Another way people learn to become parents is through the observation of their parents or other parents in their lives. However, men may not have access to positive parenting role models, and men who were exposed to domestic violence as children may

have even fewer positive parenting role models. In a phenomenological study of the meaning of fatherhood to young fathers (< 20 years old), Lemay, Cashamn, Elfenbein, and Felice (2010) found that 77% (N=30) would not raise their children as their fathers had raised them. In fact, men often identify their fathers as the antithesis of a positive parenting role models (Daly, 1995). The lack of positive parenting role models leads to men needing parenting information from other sources.

However, men receive very little information about caring for themselves or their baby before, during, and after pregnancy (Brage Hudson, Elek, & Ofe Fleck, 2001). A qualitative study of 20 first-time fathers in Sweden asked fathers to describe their views on the role of becoming a father (Fagerskiold, 2008). Men in the study frequently described the event as life changing. These changes affected their intimate relationships, amount of sleep, and increased their sense of responsibility. Fagerskiold (2008) found that men were not prepared for these life changes, and the antenatal midwives focused more on the needs of mother and technical aspects of delivery than the needs of new fathers.

Stigma

Another way men feel unsupported during the transition to fatherhood is the stigma attached to their role as a caregiver. A 2008 survey of fathers in England found that men struggled with the lack of formal “father-friendly” supports and society’s view of fatherhood as unimportant (National Society for the Prevention of Cruelty to Children, 2008). A national online survey of 207 men found that stay at home fathers (SAHF) who had lower social support reported more negative feelings about staying home than those SAHF who had more social support (Rochlen, McKelley, & Whittaker, 2010). Among

the men who reported stigmatizing experiences, 70% of the incidences were attached to stay at home mothers. This indicates that women may not be supporting men through the transition to fatherhood or at least these men were not feeling supported by stay at home mothers (Rochlen et al., 2010).

Fletcher and StGeorge's (2011) study of men who participated in an asynchronous online chatroom for new fathers shared many of the same concerns of the Rochelen et al. (2010) study. Men expressed frustrations with the lack of resources available to them during the transition to fatherhood and feelings of being left out (Fletcher & StGeorge, 2011). Fathers often participated in the online forum looking for additional resources on parenting and the birth process. Fletcher and StGeorge (2011) found that much of the discourse was on the topic of fatherhood. This included men talking about their expectations, emotions, responsibilities, and desires to be a good father. Notably, the men wrote about the negative social reactions they received from being involved fathers and taking on roles traditionally held by women (Fletcher & StGeorge, 2011). Some men discussed the negative reactions of their own family members and the looks they received while shopping with their children (Fletcher & StGeorge, 2011).

Fathers' Risk for Child Maltreatment

As a result of a lack of support and information, fathers may have an increased risk for perpetrating child maltreatment. In a 2010 report of child maltreatment, an estimated 1,560 U.S. children died from injuries attributed to abuse or neglect (U.S. Department of Health and Human Services, 2011). A vast majority (79.4%) of these deaths were children under the age of four, with nearly half (47.7%) among children aged

1 year or younger. Fathers were responsible for approximately 40% of the child fatalities (17% alone, 21.9% with mother, and 1.6% father with another person; U.S. Department of Health and Human Services, 2011). Women were often the target of child abuse prevention and intervention services, yet in the past several years, child fatality reports have shown that men are increasingly involved in cases of preventable child deaths. Male caregivers were reported as offenders in 67% of the reviewed cases in Minnesota's review of child deaths and near fatalities between 2005 and 2009, whereas mothers were listed as offenders in 19% of the reviewed cases (Minnesota Department of Human Services, 2011). A majority of these offenders were biological fathers (n=34) or the mother's male companion (n=11; Minnesota Department of Human Services, 2011).

Men are worried about their ability to adequately care for a child. A study of parenting expectations by Fox, Bruce, and Combs-Orme (2000) found that of the 75 fathers interviewed, 61% were concerned about their ability to “take good enough care” of the baby; 51% of the fathers reported worries about keeping their children safe and were concerned about their own ability to potentially harm their children (Fox et al., 2000).

There is some research available on men's risk factors for abuse of children. The Minnesota Child Mortality Review panel identified the most common risk factors for preventable child fatalities due to abuse or neglect (Minnesota Department of Human Services, 2011). Two of these risk factors are pertinent to this research study: parent or caretaker with a history of violence, which may include childhood exposure to domestic violence, and a male household member providing care when mother is not home (Minnesota Department of Human Services, 2011). While only a small percentage of men

who have been exposed to domestic violence as children go on to be violent with their partners or children, they are at an increased risk for perpetration of violence (Roberts et al., 2010).

Social Support

The stress men experience as they transition to fatherhood and risks for abuse may be reduced by the presence of parenting support (Fagan et al., 2007; Lin & Ensel, 1989; Maguire, 1991). Social support is defined as relationships in which people can seek and receive feedback that promote positive physical and mental well-being (Lin & Ensel, 1989). There are three main types of social support. Informational support is that in which social networks pass along education, directives, and advice (Lin, 2001). Social networks provide emotional support such as empathy, concern, caring, and love (Lin, 2001). Finally, concrete resources such as time, money, and in-kind assistance are types of instrumental support (Lin, 2001). Instrumental, emotional, and informational support provides direct and indirect parental support (Belsky, 1984). For the purpose of this paper, parenting support is defined as those social supports that are specific to the needs of parenting.

Parenting support can provide information and resources on parenting, access to economic and civic resources, and reinforce positive parenting and partnering practices while providing a buffer against social and psychological parenting stressors (Fagan et al., 2007; Lin & Ensel, 1989). An example of informational parenting support is parenting advice received from a friend. Emotional parenting support may be the empathy expressed over sleepless nights. Instrumental parenting supports are those concrete resources such as childcare or money to help with baby supplies. Parenting supports may

be offered individually (e.g. recommending a pediatrician) or in combination (e.g. expressing concern over sleepless nights and offering up childcare so a parent can get some sleep).

Parenting Support and Fatherhood

Unfortunately, male social support networks generally are not supportive and can be a discouraging factor in father involvement, especially for young fathers (Marsiglio & Cohan, 1997). A lack of support increases risks for marital discord and increases stress in families that can increase the potential and propensity for abuse (Whipple & Webster-Stratton, 1991; Zolotor & Runyan, 2006). Cox et al. (2003) found that a lack of social support (e.g. attachment to a religious community) compounded the risk for domestic violence.

Castillo and Fenzl-Crossman (2010) analyzed data from the Fragile Families and Child Well-being Study to look at the influence of social networks on father involvement of non-marital men. The analysis found that informal support (e.g. economic, housing, or childcare assistance from family and friends) networks were positively correlated with father involvement. However, fathers with lower incomes or less education had higher rates of involvement if they had positive relationships with their former partner (Castillo & Fenzl-Crossman, 2010).

Hudson, Campbell-Grossman, Fleck, Eleck, and Shipman (2003) tested the effects of an internet-based intervention with first-time fathers. The New Fathers Network offered first-time fathers access to a library of information on child development, infant health, and life changes related to partner and infant, discussion forums, and email access to an advance practice nurse (Hudson et al., 2003). Using a convenience sample of

34 first-time fathers, recruited from the hospital at delivery or at a primary care practice prior to delivery, 14 men were assigned to the New Fathers Network intervention. The results of the study reported higher self-efficacy scores and parenting satisfaction scores than fathers in the comparison group at the 4 and 8 week follow up points (Hudson et al., 2003). The intervention group's parenting self-efficacy significantly improved between 4 to 8 weeks after the infant's birth ($t[13] = -5.27, p < .001$), whereas the control group did not show a significant change ($t[19] = -1.16, p > .05$; Hudson et al., 2003). The same results were found with parenting satisfaction scores (intervention group ($t[13] = -2.63, p < .05$); control group: ($t[19] = .59, p > .05$; Hudson et al., 2003). While the New Fathers Network showed promising results, the sample was small and homogenous which may have skewed the results.

Parenting Support and Parenting Stress

Parenting support may help reduce parenting stress experienced by fathers as they transition to fatherhood. Unfortunately, there is limited research on benefits of parenting support on fathers' parenting stress. DeGarmo, Patras, and Eap (2008) analyzed data from 234 fathers who participated in the Divorced Fathers Study to test stress buffering on parenting. They found that fathers with higher social support had improved prosocial parenting practices. DeGarmo et al. (2008) also found that parenting support buffered against coercive parenting $\beta = -.12, p < .06$ (DeGarmo et al., 2008).

In addition, there is information based on maternal parenting supports and stress that can provide a starting point in understanding the potential benefits of parenting support. Marra, McCarthy, Lin, Ford, Rodis, and Frisman (2009) analyzed data from the Homeless Families Project (HFP). The HFP study examined programs available to

homeless women and their children. Two hundred and thirty four women were included in their analysis. Marra et al. (2009) found that homeless women who have high emotional and instrumental support also had a higher level of parenting consistency versus those who reported low levels of support ($B = .010$, $SE = .004$, $p < .02$; Marra et al., 2009). They also found that conflict within their social networks was related to harsh parenting practices ($B = .001$, $SE = .003$, $p < .01$; Marra et al., 2009). The results of this study indicate that positive social support can help in parenting practices, while conflict within social networks may actually increase harsh parenting.

In contrast, a study of 87 parents (64 mothers and 23 fathers) who were generally white and upper-middle-class by Respler-Herman, Mowder, Yasik, and Shamah (2012) did not find parenting support to moderate parenting stress ($r = -.13$). The homogeneity of the sample in terms of race and class may have had an effect on those results.

Parenting Support and Protection against Abuse

Research shows that parenting support can be a protective factor against the perpetration of violence against children (Belsky, 1993; Budde & Schene, 2004; Fagan et al., 2007) and may be related to its buffering effects of parenting stress (DeGarmo et al., 2008). As previously discussed, stress is a significant risk factor for child maltreatment (Belsky, 1984). Education and early intervention programs that provide parenting support for new mothers have been successful in reducing child maltreatment (Eckenrode et al., 2000; Olds et al., 2007). Social support networks have also been found to be protective against child maltreatment for new mothers (Brady & Guerin, 2010; Drentea & Moren-Cross, 2005; Dunham et al., 1998).

There is very little research that connects parenting support as a protective factor against domestic violence in terms of preventing perpetration against a partner. The research on social support and domestic violence tends to focus on helping women who are being abused (e.g. Gracia & Herrero, 2007; Guerrero Vasquez, 2009). However, one study by Litty, Kowalski, and Minor (1996) did find that perceived social support was linked to potential for abuse. In a study of about 300 undergraduate college students (173 female and 126 male), Litty et al. (1996) found that risk for potential abuse (both child abuse and relationship abuse) was reduced by social support. Participants with childhood histories of abuse and low levels of social support were more likely to show potential for abuse than those without histories of abuse and low levels of social support $t(287) = 4.38$, $p < .001$ (Litty et al., 1996). Furthermore, social support moderated the effects of childhood histories of abuse on risks for family violence. Those who reported high rates of social support did not show any difference in the potential for abuse $t(287) = .02$, $p > .98$ (Litty et al., 1996).

Critical Gaps in Research

Thirty years of research on fatherhood have provided a deeper understanding of the needs of fathers and the benefits of father involvement on children. There has been a call to include men in research pertaining to parenthood and family violence, yet little progress has been made to move from exploration to applying knowledge and developing programs and practices that encourage male involvement in parenting and reducing family violence. Researchers need to include men in family violence research. Interventions to prevent family violence continue to focus on the mother-child dyad (e.g. home visiting programs, parenting education programs, etc.) and rarely include fathers.

The entire family system should be considered in research on prevention of violence against women and children (Parke, 1996).

One possible reason for the lack of research to meeting the needs of fathers is that funding streams are mostly directed at mother programs. When funding is directed towards fathers, it is connected to the father's role as economic supporter. One example is President Barack Obama's Fatherhood Marriage and Family Innovation Fund. It has allocated \$500 million to programs that encourage father and marriage programs to work together, yet two of the three key goals of the program are focused on employment and child support payments (United States Department of Health and Human Services, 2010). The continued tethering of father involvement and economic support may not be sending a consistent message to fathers about the importance of their nurturing role. The lack of funding of father interventions may influence the types of programs developed and the research that comes from those programs.

Current research focused on fathers and violence is mainly centered on tertiary violence prevention. Interventions like *Caring Dads* have shown positive results in decreasing parental stress and aggression towards children among men who been abusive (Katreena & Claire, 2007). Primary family violence prevention programs rarely focus on fathers, and many leave them out completely (Parke, 1996). Duggan et al.'s (2004) evaluation of statewide home visiting programs that aim to reduce child maltreatment found that home visiting programs failed to engage fathers in service provision.

The review of literature shows men may be at increased risk for violence perpetration during the transition to fatherhood. Furthermore, men who were exposed to domestic violence in childhood may have even higher risks. Parenting support has been

successful in reducing parenting stress and risks for abuse among mothers, more research is needed to further understand the effects of parenting support on parental stress and a fathers' risk for family violence.

CHAPTER TWO

Theoretical Framework

The review of literature provides a context to help understand risk and protective factors for family violence. Risk factors include being a man, exposure to domestic violence in childhood, the transition to fatherhood, and parental stress. Among protective factors and the focus of this study, is parenting support. This chapter provides the theoretical framework and conceptual model of the dissertation project. Social learning theory and ecological systems theory provide a theoretical framework to understand the risk and protective factors. This theoretical framework informs the potential for parenting support to have an effect on parenting stress and potential for abuse. From this theoretical framework, a conceptual model was developed to test the interaction between parenting support and parenting stress and the subsequent relationship to reduce risk for family violence. It also examines the relationship of parenting support of men who were exposed to domestic violence risks in reducing parenting stress and risks for family violence.

Developmental Theory

Developmental theorists such as Erikson, Piaget, and Kohlberg categorize development into specific stages typically referred to as life span development (Hutchison, 2011). The developmental perspective focuses on accomplishing specific development tasks during specific life stages (Hutchison, 2011). Additionally, they viewed this development as universal (Hutchison, 2011). This perspective does not take into consideration any social factors that may influence life course development.

In contrast, other development theorists view human development as an individual experience with common markers of development (Hutchison, 2011). Often

referred to as life course development, this perspective is rooted in sociology and focuses on the external factors that influence human development (Hutchison, 2011). Individual development is unique to their historical and cultural experiences (Bronfenbrenner, 1979; Hutchison, 2011). Life course development provides context to understand the effects of social support on development (Hutchison, 2011). Ecological systems theory provides an explanation of this context by focusing on the systems within a person's life and how they interact to affect people (Bronfenbrenner, 1979).

Social Ecological Systems Theory

In terms of the conceptual framework, social ecological systems theory aids in understanding how parenting supports may moderate the effects of parenting stress on risks for family violence. Bronfenbrenner's (1979) theory of ecological systems (or social ecological system) stresses the importance of humans developing in context. Specifically, it considers the importance of social systems in human development.

The social system according to Bronfenbrenner is made up of micro, mezzo, exo, macro, and chrono systems (Bronfenbrenner, 1979, 1994). This is often referred to as the ecological model (Figure 1). The micro system includes the people and objects that have direct contact with the individual (e.g. father-child interaction; Bronfenbrenner, 1979, 1994). The mesosystem includes the links between people or networks in the microsystem (e.g. school system), and the exosystem is the linkage between the mesosystem and larger society (Bronfenbrenner, 1979, 1994). The person may not have direct contact with the exosystem, but actions within this system affect them (e.g. media; Bronfenbrenner, 1979, 1994). All the systems are influenced by the actions, values, and beliefs that occur in the macrosystem (e.g. culture; Bronfenbrenner, 1979, 1994). The

chronosystem is also used in the ecological model, and this system accounts for the historical influence on the systems (Bronfenbrenner, 1994).

The social ecological systems theory can be applied in this research study as follows. First, the chronosystem aids in understanding the effects of a history of exposure to domestic violence in childhood on the way a father may interact with a partner and child. It also provides knowledge about how a father may have learned certain behaviors in regards to parenting and intimate relationships. The macro system involves the values and beliefs about manhood and fatherhood. Specifically, this may affect the development or reject of traditional gender roles. The exosystem serves as the mediator between the macro- and meso- systems. The mesosystem is the parenting support system of the fathers. The microsystem is the father's interaction with the child and partner. All of these systems interact to affect human development and psychological growth (Bronfenbrenner, 1979).

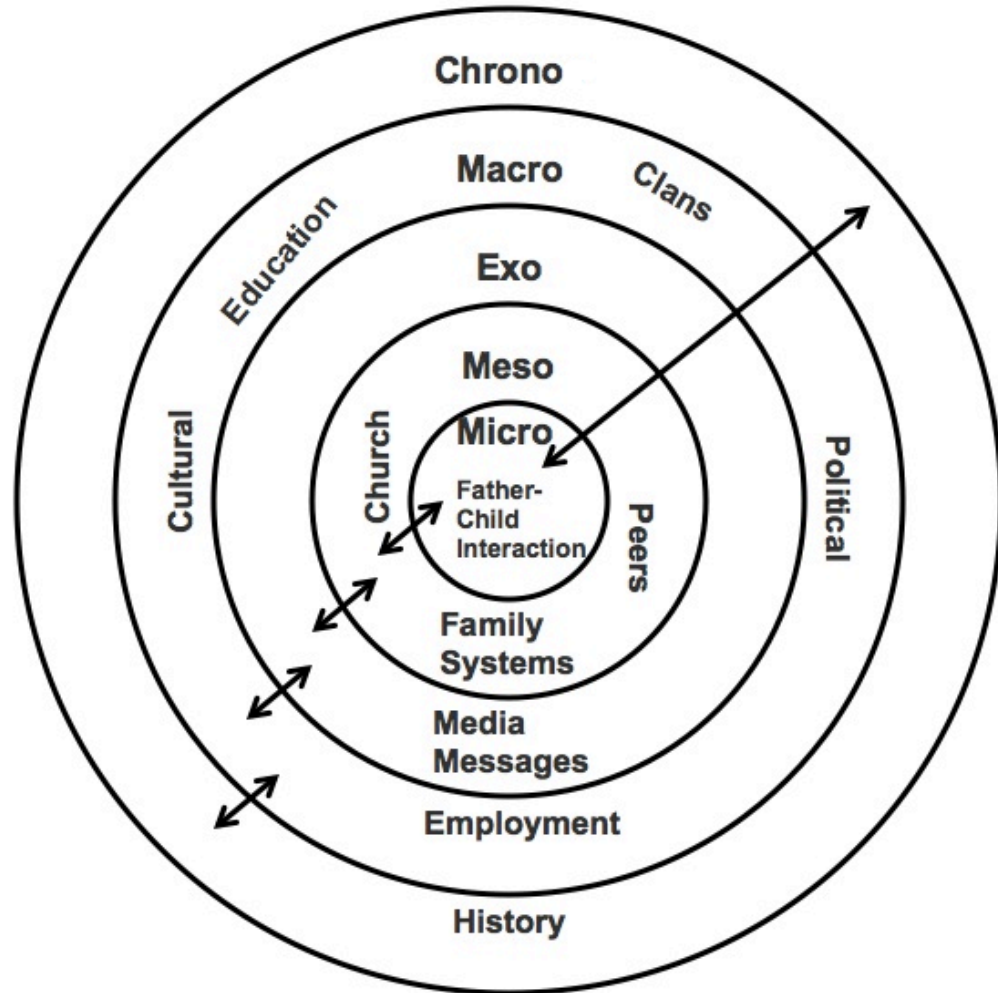


Figure 1. Ecological Model (Bronfenbrenner, 1994, 1979).

The emphasis of this model is the interaction and interconnectedness of all the systems. This means the interactions of connections within and between each of the systems. In terms of the conceptual model (Figure 2), the social ecological system is located within the parenting support system and the history of exposure to domestic violence and the interaction on parenting stress. Social learning theory informs the way a father responds to parenting stress in terms of risk for family violence.

Social Learning Theory

The ecological systems theory also helps describe how social support affects the learning of behaviors. In relation to the current research study, the way people learn behaviors is helpful in understanding the effects of exposure to domestic violence in childhood and the risks for family violence. Additionally, social learning and ecological systems theory provide some understanding of the benefits of parenting support in reducing parenting stress.

Behaviors shift and change through the life span (Hutchison, 2011). Behavioral theorists tend to focus on three main ways in which people learn behavior: classical conditioning, operant conditioning, and cognitive social learning (Hutchison, 2011). Classical conditioning theory is most commonly associated with Pavlov's dogs. This classic experiment conditioned Pavlov's dogs to salivate when they heard a bell ring. A conditioned response results from first attaching a meaningful association (e.g. meat powder) to naturally occurring behavior (e.g. salivating) through a conditioned stimulus (e.g. ringing bell; Hutchison, 2011). Eventually, the conditioned stimulus will activate the natural behavior without the meaningful association.

Along the same lines as classical conditioning is operant conditioning. Operant conditioning is frequently associated with B.F. Skinner's box (Hutchison, 2011). In this experiment, Skinner trained pigeons to get food by pressing a lever. Operant conditioning suggests that behavior is learned through risk and rewards. The pigeon presses the lever and is rewarded with a tasty treat. However, the reward is not provided every time which reinforces motivation for the behavior (Hutchison, 2011). Essentially desired behaviors

are rewarded with positivity and undesired behaviors are reward with a negative consequence (Hutchison, 2011).

The other way in which people learn behaviors, is through social learning or social cognitive learning. This type of learning is the underpinning of the current research project. Social learning theory posits that behaviors are learned through continuous social interactions (Bandura, 1977; Hutchison, 2011). These interactions serve to model and reinforce behavior. Beliefs and expectations also work to motivate behavior and learning (Hutchison, 2011).

A critical component of social learning is the availability of positive social support to teach prosocial behaviors. Knowledge, skills, and resources are provided through social support (Bandura, 1986; Maguire, 1991). In turn, social support networks play an important role in reinforcing behavior through social learning (Bandura, 1973, 1986). Through positive feedback, people learn and gain confidence in using new skills (Maguire, 1991). In addition, social support is a determinant of the role models in a person's environment (Bandura, 1986) and how they are socialized to understand gender and fatherhood. Since social learning is also a cognitive process, the level of connection (strength of relationship) to social support networks influences the imitated and ignored behaviors (Rosenthal & Zimmerman, 1978). The social control of the group allows for the weakening of non-acceptable behaviors and strengthening of desired behaviors, and the newly learned behaviors and actions can then serve as social prompts for others in the group (Bandura, 1973, 1977, 1986; Foshee, Bauman, & Linder, 1999; Rosenthal & Zimmerman, 1978).

As part of the learning process, Bandura (1977, 1986) notes that cognition—the mental process of attending, understanding, memory, and coding of information—plays an important role in learning behaviors. This cognitive process and the attention and value placed on certain behaviors affects the adoption of such behaviors (Bandura, 1977, 1986; Gauvain, 2001). That is, the more important and rewarding a behavior is, the more likely it is going to be retained and used by the learner (Bandura, 1986; Gauvain, 2001). In addition, the more important and interesting the social teacher is, the more likely the behavior will be adopted by the learning child (Gauvain, 2001). For many children, interactions with family and peers play an important role in teaching social skills and cultural and socioemotional messages (Gauvain, 2001).

Gender Roles

These messages passed along to children are often implicit. Through the social learning process influenced by ecological systems, children learn values, behaviors, and skills that are not necessarily intentionally taught to children but rather are a result of the larger macrosystem (Gauvain, 2001). These values and behaviors include the messages of traditional gender roles, normative or hegemonic masculinity, and fatherhood. The values and behaviors influence the transition to fatherhood and risks for domestic violence and parenting stress.

Gender role is defined as the normative thoughts, feelings, behaviors that are assigned to a specific gender by society (K. L. Anderson, 1997; Bandura, 1986; Rogers & White, 1998). It is important to note that gender roles change over time, and a person's acceptance, adherence, and adoption of traditional gender roles change over the life course (Bussey & Bandura, 1999). For example, a person may adhere and accept a

traditional gender role throughout childhood, but in adolescence, they may adopt a non-conforming gender identity that may follow them throughout adulthood. Widely held societal beliefs about male gender roles state that men should be active (e.g. adventurous, risk-taking), achievement oriented (e.g. respected and economic supporters), dominant, physically and emotionally strong (e.g. no interest in anything associated with femininity, no crying), and self-controlled (e.g. keep emotions contained) (Bettman, 2009; Thompson, Grisanti, & Pleck, 1985). In childhood, men are often discouraged from expressing emotions. For example, boys are often taught through gender specific reinforcement such as “boys don’t cry” and “only girls cry” (Good, Thomson, & Brathwaite, 2005). Men who adhere to the idea that men should not engage in any feminine activities (i.e. nurturing tasks) may be less likely to engage with their children. Furthermore, men who adhere to the ideas of traditional masculine gender roles may be more aggressive than those who do not (Hammock & Richardson, 1992; Reidy, Shirk, Sloan, & Zeichner, 2009).

Moreover, men who adhere to these ideas of traditional masculinity may be more likely to approve of traditional gender roles for women and aggress against any violation of those roles. For example, a man who adheres to a traditional view of motherhood may expect a woman to do all of the caregiving and become more aggressive if he is expected to assist with childcare. Additionally, he may feel more pressured to be a sole breadwinner, so the mother can stay home to care for the children.

The maintenance of traditional female gender roles includes cooking, cleaning, and being the primary caregiver for children (Reidy et al., 2009). In a 1980’s study of 223 male undergraduates in New England, Thompson et al. (1985) found an association

between approval of unilateral decision-making in relationship (with the men making the decision) and endorsement of traditional male sex roles for men. A study of 64 undergraduate males by Reidy et al. (2009) randomly assigned 32 men to compete against women who conformed to traditional gender roles and 32 men to compete against women who did not conform to traditional gender roles in a reaction time test that included a punishment for those who did not win the timed test (Reidy et al., 2009). The results found that men with higher scores on the Hypermasculinity Index (“an extreme form of adherence to masculine gender roles”) showed more aggression than men with lower scores (Reidy et al., 2009, pg 1). Furthermore, men with higher scores of hypermasculinity responded with greater aggression in response to gender role violations, whereas gender role violations had no effect on the aggression response of men with lower scores on the Hypermasculinity Index (Reidy et al., 2009).

Risks and Protection for Family Violence

This research provides an example of the way ecological systems and social learning influence risks of family violence. Ecological systems influence the risk for domestic violence through current patriarchal systems that influence hegemonic masculinity within a context of Western culture (e.g. United States, Northern Europe, New Zealand; Bettman, 2009; M. K. Ehrensaft, 2008; Hunnicutt, 2009). Patriarchy values and assigns power to men to allow for dominance over women (Hunnicutt, 2009). Again, domestic violence is defined as a pattern of behavior used by men to maintain power and control over a partner (Pence & Paymar, 1993). Men’s adherence or acceptance of ideas of dominance and control puts women at risk for domestic violence (Reidy et al., 2009).

Social learning of violence teaches both use and acceptance of violence as a method of dealing with stress as well as maintaining control (Straus et al., 1990). The intergenerational transmission of violence is often explained using social learning theory. Men may learn through exposure to domestic violence in childhood that a normal relationship involves violence and control. For example, a man may think that controlling external social interactions of a partner is a way to show love and caring. In addition, being exposed to domestic violence in childhood may teach children to associate violence with love. This exposure may also teach a moral rightness of using violence since children are witnessing a parent modeling such behavior (Straus et al., 1990). An example of this could be a father who was spanked as a child may learn that spanking is the only way to discipline a child.

Ecological systems and social learning also provide opportunities for social support to serve as protective factors. For example, men who were exposed to domestic violence as children may observe other couples in relationships where violence does not occur and may also learn from those couples ways to handle conflict that do not include violence. They may learn that it is not normal or acceptable to control the external social interactions of a partner. In addition, social support around parenting provides men with role models and alternative disciplinary methods. For example, a partner may be able to model positive parenting to demonstrate alternatives to spanking.

Transition to Fatherhood

Ecological transitions are the changes in roles that happen throughout the life span (Bronfenbrenner, 1979). The transition to fatherhood is one of these ecological transitions. This transition (and shift in roles) is marked by changes in behavior of the environment

(Bronfenbrenner, 1979). For example, people may start calling the man “Dad” or “Pops” which likely changes the way he thinks about himself and the way he interacts with others.

Social learning and ecological systems play an important role in understanding the ways males are socialized into fatherhood. The teaching and reinforcement of traditional gender roles as discussed earlier are key factors in the transition to fatherhood. As previously discussed, it is also important to emphasize that systems and dominant ideas change over time. Society’s view of fatherhood has transformed over the last fifty years, moving men from purely economic providers into important care providers (Lamb, 1986). Fathers are now expected to provide emotional support and assistance to their partners and children (Lamb, 1986). This may increase feelings of stress and frustration during the transition to fatherhood. On the positive side, it provides men with opportunities to engage in nurturing relationships with their children.

Parenting Stress

The changing roles of fathers necessitate the exploration of needs as they transition to fatherhood. Role overload refers to the stress related to multiple role demands. It is frequently attributed to women, but as expectations for father involvement expand, men are also at risk for role overload (Wille, 1995). Differences in the expectations, perceived helpfulness, and support of fathers during the transition to parenthood can affect concerns about parenting for mothers and fathers (Fox et al., 2000).

Social learning theory coupled with ecological systems theory helps to explain how parenting stress and the transition to fatherhood can be affected by social support. So far, there has been a focus on social learning of negative behaviors, but social learning

also teaches prosocial behaviors. Again, as previously discussed, people in a father's parenting support network can serve as parenting role models, offer advice, and provide education. They can also provide a place for parents to express frustration and stress related to parenting and received empathy in return. Finally, they can provide childcare, clothing exchanges, or other concrete resources. These types of support may help reduce parenting stress, ease the transition to fatherhood, and protect against risks for family violence.

Conceptual Model

Behaviors are influenced through the social learning process by the social supports in a person's ecological system. As Bronfenbrenner (1979) states, people develop in context to their environment. Therefore, in this research study, it is conceptualized that ecological systems theory informs how fathers may interact with their parenting support systems while social learning theory informs the response to parenting supports and parenting stress in terms of risk for family violence. Social support is a path of influence in parenting, and it is one of the contexts in which men may learn parenting skills that influence their response to parenting stress and family violence. They may learn parenting skills by observing their own parents or other parenting role models (i.e. through social learning). Exposure to domestic violence as children may also influence their parenting in ways that may increase parenting stress and family violence.

This research study examines the interaction effects of fathers' parenting support on parenting stress and the associated risk for family violence. It also studies the correlation between child exposure to domestic violence on parenting stress, child abuse potential, and propensity for abusiveness. The conceptual model (Figure 2) provides a

visual representation of the multiple hypotheses tested in this research study. Each piece of the model is discussed below along with the testable hypotheses.

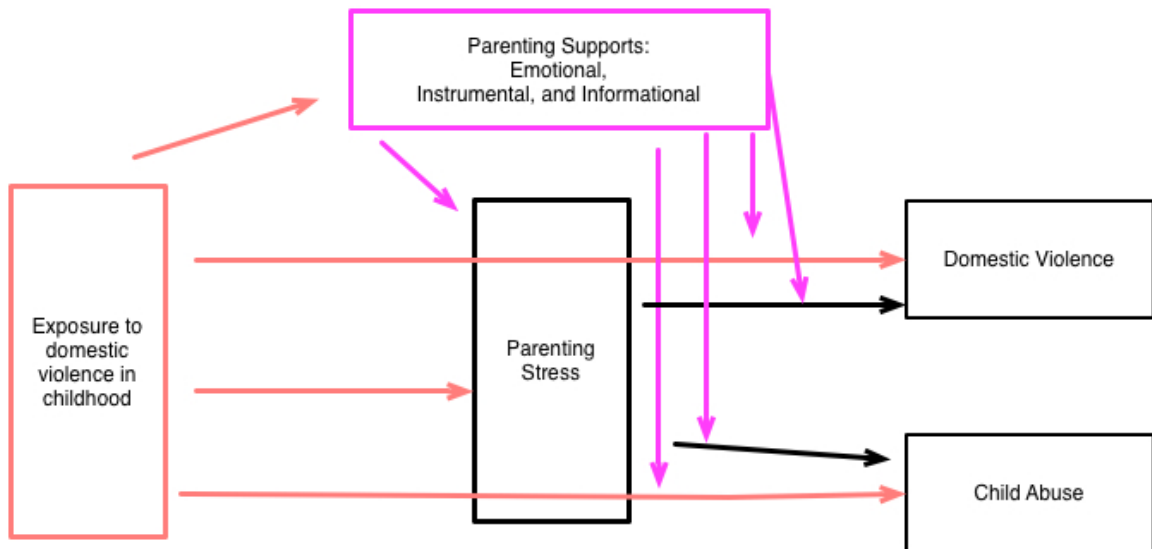


Figure 2. Kimball (2012) conceptual model examining the effects of fathers' parenting support on parenting stress.

The Contextual Risk Factor

First, the model examines the relationship between parental stress and the risk for family violence (in black, Figure 3).

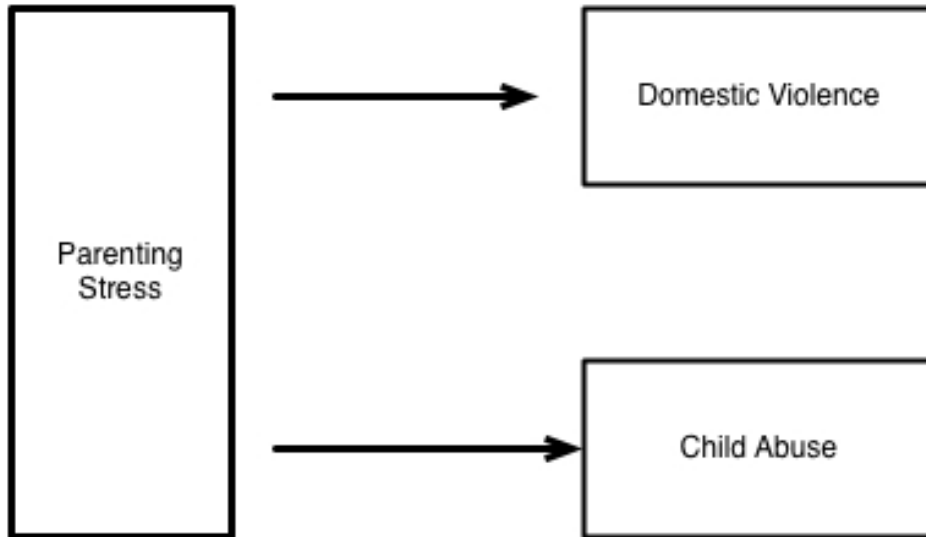


Figure 3. Contextual Factors. The model shows the relationship between parenting stress and propensity for abuse and potential for child abuse (Kimball, 2012).

Stress is often cited as a contextual risk factor for domestic violence (Bell & Naugle, 2008; Straus, Gelles, & Steinmetz, 2006) and child maltreatment (Belsky, 1984, 1993; C. M. Rodriguez & Richardson, 2007). There are many environmental stressors such as economic stress, relationship stress, work related stress, transition to a new role (fatherhood) that can increase risk for parenting stress and negative reactions to handling the stress (Abidin, 1992). Parenting stress may reduce the amount of caregiving provided by a father (Fagan et al., 2007) and increase the risk for potential child abuse because the father is not aware of the child's needs. Therefore, it is hypothesized higher scores of parenting stress will be associated with higher potential and propensity for abuse.

The Effects of Social Support

Next, the interaction effect between parenting support on parenting stress is examined (in purple, Figure 4).

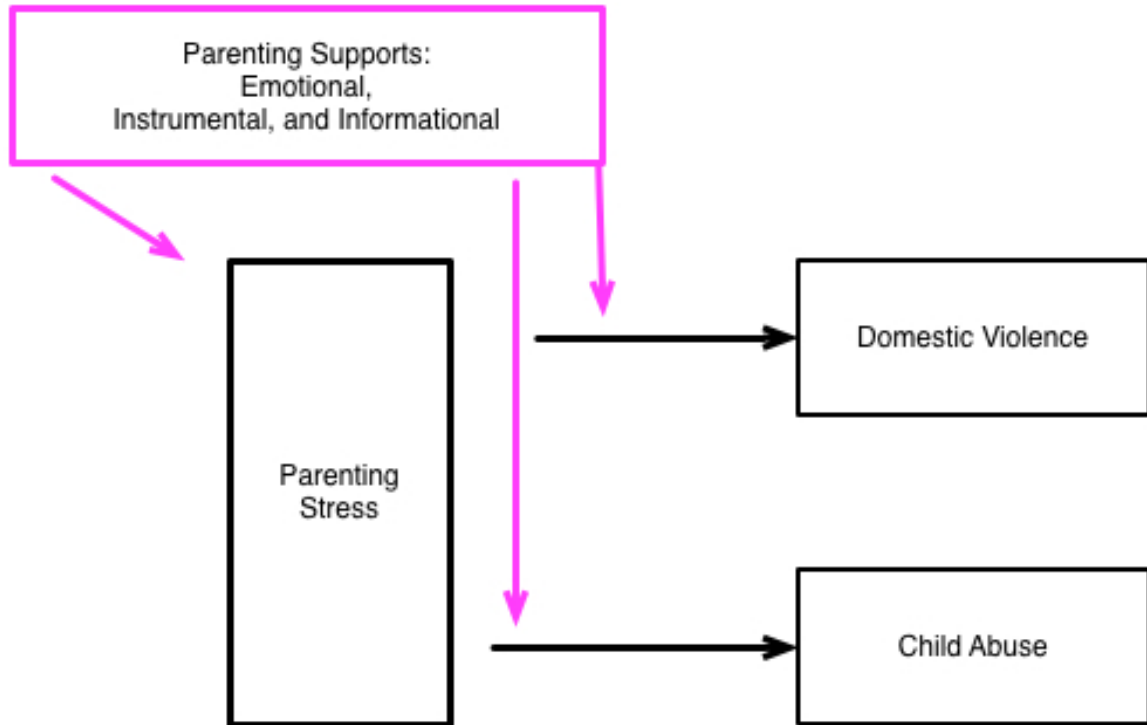


Figure 4. The interaction effects of social support. The model shows the relationship between parenting supports and parenting on the risk for family violence (Kimball, 2012).

Social support (perceived and received) is a protective factor against stress (Fagan et al., 2007; Lin & Ensel, 1989; Maguire, 1991). The support (i.e. informational, instrumental, and emotional support) provided in relationships promotes positive physical and mental well-being (Cohen & Wills, 1985; Lin & Ensel, 1989). The perception of social support is just as important as the actual utilization of it (Cohen & Wills, 1985; Thoits, 1995; Wethington & Kessler, 1986). Parenting support may moderate the effects of parental stress on risks for family violence by reducing isolation, helping with behavior regulation, providing new information, and increasing both self-esteem and a sense of belongingness (Belsky, 1984, 1993; Maguire, 1991; Thoits, 1995). Therefore, it is hypothesized the interaction between parenting stress and parenting support will be associated with a reduction in the risk for family violence.

The Effects of Child Exposure to Domestic Violence

Finally, the model examines the relationship between exposure to domestic violence in childhood, access and use of social supports, parenting stress, potential for child abuse, and propensity for abusiveness (in orange, Figure 5).

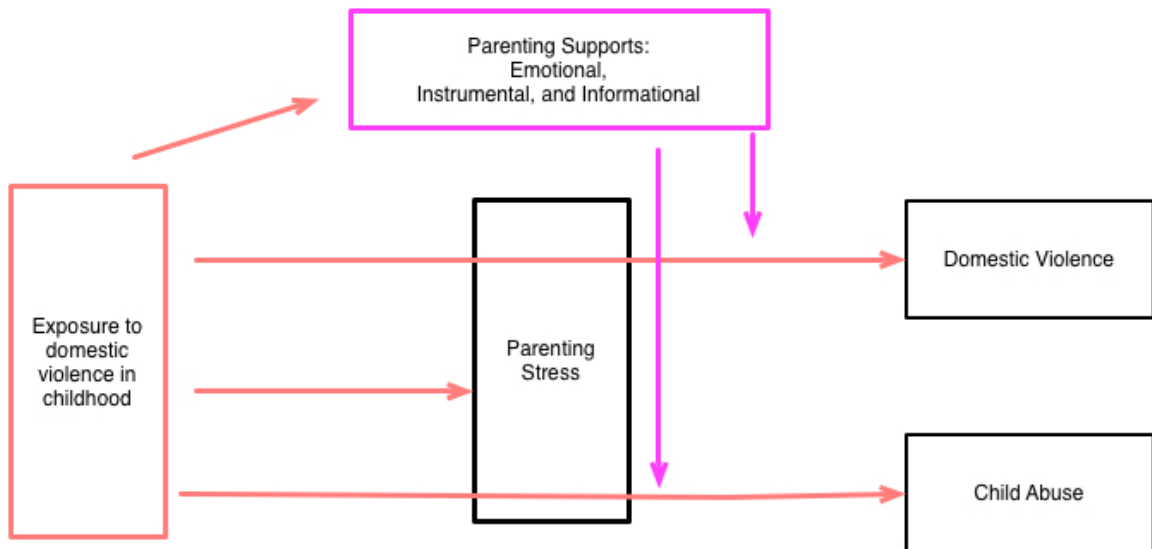


Figure 5. Examining the correlation between exposure to domestic violence in childhood on parenting supports, parenting stress, child abuse potential, and propensity for abusiveness (Kimball, 2012).

CEDV and parenting stress. Men who were exposed to domestic violence as children may have higher parenting stress because they may have been discouraged from nurturing roles in childhood (Parke, 1996; Parke & Beitel, 1986). Therefore, as children, these men may not have been able to practice caregiving or had opportunities to care for children. Consequently, it is hypothesized that exposure to domestic violence in childhood will be correlated with higher parenting stress.

CEDV and risk for family violence. As discussed previously, exposure to domestic violence in childhood places men at risk for future perpetration of violence (Black et al., 2010; Fergusson & Horwood, 1998; Margolin et al., 2003; Stith et al., 2000;

Turner et al., 2010; Wareham et al., 2009). Social learning relates to this risk in terms of men learning to use violence to solve conflict and handle stress (Straus et al., 1990).

Therefore, it is hypothesized exposure to domestic violence in childhood will be associated with an increased risk for family violence.

CEDV and parenting support. Access to and use of parenting supports relates to exposure to domestic violence in two ways. Men's available network of supports may be limited due to exposure to domestic violence in childhood. Perpetrators of domestic violence sometimes isolate their victims, so men who come from families where domestic violence occurred may have fewer social support providers available. Additionally, men may have social support providers available to them, but due to widely held societal beliefs that men should be strong (Bettman, 2009; Thompson et al., 1985), they may be discouraged from seeking help. For these reasons, it is hypothesized that men who were exposed to domestic violence will have less access and use of social supports than men who were not exposed to domestic violence. It is further hypothesized the interaction between parenting support and parenting stress among men who were exposed to domestic violence will be associated with reductions in child abuse potential and propensity for abusiveness.

Model with Hypotheses

Altogether, the model has nine testable hypotheses. Figure 6 shows the hypothesis of each variable with the corresponding hypothesis number and direction of influence. The interaction effects (purple arrows) are those influenced by social ecological systems theory whereas the response variables (orange and black arrows) are those influenced by social learning theory.

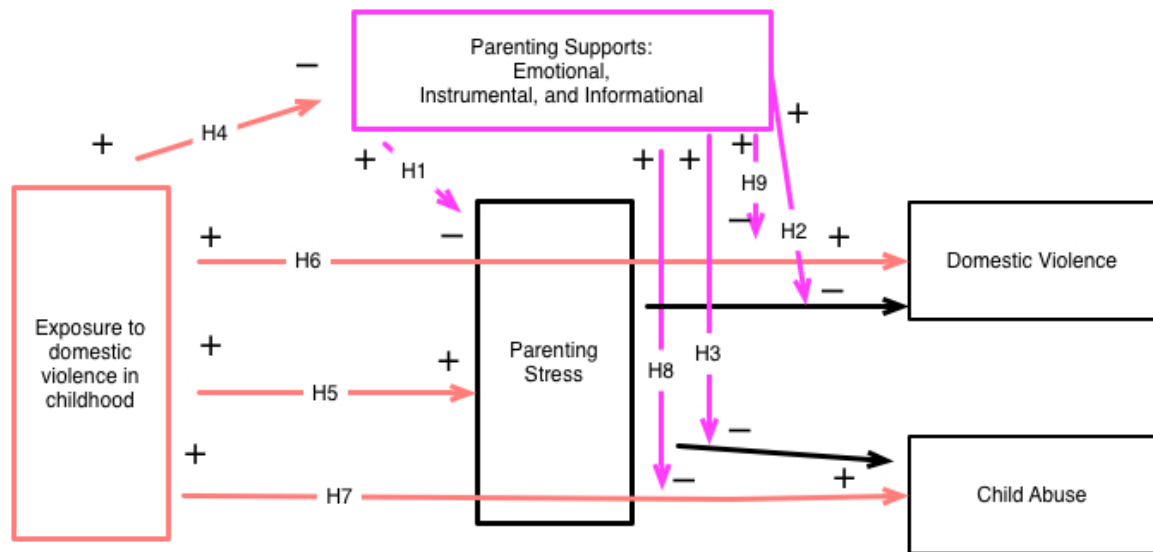


Figure 6. Conceptual Model with testable hypotheses (Kimball, 2012). The model shows the testable hypothesis for each relationship.

H₁ Parenting support will be associated with a reduction in parenting stress.

H₂ The interaction between parenting supports and parenting stress be associated with a reduction in risk for domestic violence.

H₃ The interaction between parenting supports and parenting stress will be associated with a decreased risk for child abuse.

H₄ Exposure to domestic violence in childhood will be correlated with a decreased in parenting support.

H₅ Exposure to domestic violence in childhood will be correlated with an increased in parenting stress.

H₆ Exposure to domestic violence in childhood will be correlated with an increased risk for domestic violence.

H₇ Exposure to domestic violence in childhood will be correlated with an increased risk of child abuse.

H₈ The interaction between parenting support and parenting stress among men exposed to domestic violence will be associated with a reduction in the risk for domestic violence.

H₉ The interaction between parenting support and parenting stress among men exposed to domestic violence will be associated with a reduction the risk of child abuse.

CHAPTER THREE

Methods

In order to gain a better understanding of the interaction effects of fathers' parenting supports and parental stress on the associated risk for family violence, a cross-sectional study of fathers was designed to examine those effects. This chapter explains the methods used to gather a data from a national sample of fathers. Data were collected from an online survey of fathers actively parenting a child under the age of five. Active parenting was defined as a minimum of weekly contact with the child. Using an online data collection tool (see Appendix A), fathers were asked about their experiences of domestic violence in childhood, emotional, informational, and instrumental parenting social supports, parental stress, potential for child abuse, and propensity for intimate partner violence.

Data Collection Process

Data were collected from December 2011 through April 2012 using the 35-item online questionnaire previously described. Participants were given the opportunity to provide their email address to be entered into a drawing for one of twelve \$25 Amazon gift cards. Potential participants were recruited through online message forums focused on fatherhood and parenting, Facebook groups and pages geared towards parents and fathers, and through Twitter using father specific hash tags (e.g. #dad, #fathers; see Appendix B). Groups and organizations with a focus on fatherhood also sent out recruitment announcements through their email lists (see Appendix B). Potential participants who were interested in participating in the study clicked a link included in the recruitment materials directing them to the survey. Potential participants were

screened for eligibility that included questions of age and parenting status prior to consent (see Appendix A). Consent was obtained prior to the start of the online questionnaire (see Appendix C).

Recruitment

Quantitative data was collected from a national sample of community-based fathers. At the risk of limiting the generalizability of the study results, non-probability sampling was used because fathers are often difficult to locate as a result of not receiving direct parenting services. A convenience sample of fathers were recruited by sending announcements about the survey through purposefully selected fatherhood organizations and posting recruitment materials on father and new parent online message boards, Twitter, and Facebook (see Appendix B). The sample of fathers was selected based on their age (over 18), active parenting, and age of their children. While the majority of partner violence is perpetrated by a male partner upon a female partner (Tjaden & Thoennes, 2000), the gender of a participants partner or sexual orientation was not a factor in the ability to participate because the focus of this study is on fathers' parenting supports, parenting stress, and potential and propensity for abuse, which are not specific to sexual orientation.

Inclusion and exclusion criteria. The inclusion and exclusion criteria were determined based on the review of literature that indicated children under the age of 5 were the most at-risk for victimization (Carpenter & Stacks, 2009). Furthermore, men who were actively parenting regardless of biological relationship were also at risk for parental stress and child maltreatment (Minnesota Department of Human Services, 2011).

Inclusion criteria. Men over the age of 18 years old and actively parenting a child under the age of 5 years old were eligible to participate in this study. These men must be actively parenting the child but did not need to be currently living with the mother of the child. Actively parenting the child means at least routine weekly or more contact with the child. Men who have partners with children (under the age of 5) fathered by another man were eligible for participation as long as the participant was actively parenting the child.

Exclusion criteria. Men who were not actively parenting a child aged 5 years old or younger were ineligible for participation. Since this study focuses on the experience of fathers, women were not eligible for participation. Finally, men under the age of 18 years old were not eligible for participation.

Participants

Ninety-nine respondents consented to participate in this research study. Table 1 provides the demographic information on the study participants. Fifteen respondents did not go on to complete the survey after completing the consent form. One respondent was removed due to extreme answers. In all, 84% (n = 83) completed the survey through the social support questions (i.e. leaving the CAP and PAS incomplete), one respondent completed all questions except the PAS, and 77% (n = 76) completed the entire survey. Only surveys that were entirely complete were included in the analysis.

Table 1. Demographics of the 76 survey respondents.

Characteristics	n	Percent	
Race	European-American	62	82%
	African-American	3	4%
	Asian/Pacific Islander	2	3%
	Latino	2	3%
	Prefer not to answer	6	8%
	No answer	1	1%

Language	English	72	95%
	Other	3	4%
	No Answer	1	1%
Age	31-35	28	37%
	40+	17	22%
	36-40	14	18%
	27-30	12	16%
	23-26	4	5%
	18-22	0	0%
	No Answer	1	1%
Relationship Status	Married	65	86%
	Partnered	3	4%
	Separated	3	4%
	Divorced	2	3%
	Widowed	1	1%
	Single	1	1%
	No Answer	1	1%
Number of children	1	36	47%
	2	28	37%
	3	7	9%
	4	5	7%
	More than 4	0	0%
Education	Bachelors	27	36%
	Masters	19	25%
	High School	12	16%
	Associates	9	12%
	Advanced	8	11%
	No Answer	1	1%
Income	\$100,000	24	32%
	\$50,000-74,000	18	24%
	\$75,000-99,000	15	20%
	\$30,000-49,000	8	11%
	\$10,000-29,000	5	7%
	Less than \$10,000	1	1%
	Prefer not to answer	4	5%
	No answer	1	1%

When compared with 2010 Census Data, all races but European Americans were under represented in this sample. According to the U.S. Census Bureau Quick Facts (2011c), the U.S. population is comprised of 62% White persons, 16% Latino persons, 13% African-American persons, 5% Asian/Pacific Islander persons, > 1% Native American persons, and approximately 3% of people identifying more than one race. The majority of respondents in this survey reported their race as European American (82%, n = 62). The remaining respondents were 4% (n = 3) African-American, 3% (n = 2) Asian/Pacific Islander, 3% (n = 2) Latino, 8% (n = 4) preferred not to indicate their race, and 1% (n = 1) did not answer the question. None of the men reported being bi- or multi-racial or Native American. None of the men reported being under the age of 22 years old, approximately 21% (n = 16) reported being between 23-30 years old, and the majority were over the age of 30 (78%, n = 59). The age distribution of the sample is comparable to U.S. Census data (2011a), which indicates the median age of the U.S. population to be 37 years. Again, the majority of men indicated they were married (86%, n = 65). Three (4%) indicated they were partnered, three (4%) reported being separated, two (3%) were divorced, one (1%) man was single, and one (1%) man was widowed. One father did not identify his relationship status.

In comparison to 2010 Census Data, education level was relatively high among the men completing the survey. Nationally, a men over 18 years old tend to have a high school degree (31%) and have completed some college (19%) with less completing post-secondary education (Bachelors = 18%, Associates = 8%, Masters = 6%, and Advanced = 3%; United States Census Bureau, 2011). Many of the men in this study held degrees above the High School level (16%, n = 12), with the remaining having an Associates

degree (12%, $n = 9$), Bachelors degree (36%, $n = 27$), Masters degree (25%, $n = 19$), and Advanced degree (11%, $n = 8$). Similarly, most of the men surveyed reported incomes greater than the U.S. median household income of \$51, 914 (75%, $n = 57$; U.S. Census Bureau, 2011c). The remaining men reported incomes between \$10,000-49,000 (17%, $n = 13$), one (1%) indicated an income below \$10,000, and five (7%) men did not report their income range.

National data estimates that approximately one-third of the population was exposed to domestic violence during their lifetimes (Hamby et al., 2011). In this study sample, this estimate holds true, with 33% ($n = 25$) of the respondents answering *yes* to at least one of the six-questions that would identify this person as exposed to domestic violence in childhood while 67% ($n = 51$) of respondents answered *no* to all six questions about exposure to domestic violence during childhood.

Data Collection Instrument

The data collection instrument (see Appendix A) was a combination of standardized measures and adapted measures. Table 2 provides an overview of the measure along with the corresponding variable and the potential score. Each individual measure is described in detail below, starting with the two adapted measures of parenting supports and exposure to domestic violence and ending with a review of the three standardized measures of parenting stress, potential for child abuse, and propensity for abusiveness.

Table 2. Overview of measure, variable name, type of variable, scoring procedure, and potential score.

Measure	Variable Name	Type of Variable	Scored	Potential Score
Access to Parenting Support—selection of access from the 9 questions on the parenting support measure	ACCESS	Continuous	Sum total of the different types of parenting support	Higher score, greater access to support
Use of Parenting Support—selection of support used within the last month from the 9 questions on the parenting support measure	USE	Continuous	Sum total of the different use of parenting support	Higher score, greater use of support
Child Exposure to Domestic Violence—six questions asking about history of exposure to domestic violence	CEDV	Discrete or Categorical	Yes answer to any one of the six questions	Yes or No
Child Abuse Potential—77-item abuse inventory	CAP	Continuous	Child Abuse Potential inventory score sheet	Range 0-485 Higher score, greater potential for child abuse
Parenting Stress—12-item Parental Distress subscale of Parenting Stress Index	STRESS	Continuous	PSI score sheet of the Parenting Distress subscale	Range 12-60 Higher score, greater stress
Propensity for Abusiveness—29-item propensity for abusiveness scale	PAS	Continuous	PAS score sheet	Range 22-109 Higher score, greater propensity for abusiveness

Independent and Dependent Variables

Independent variables. The independent and dependent variables change depending on the hypothesis being tested. Table 3 provides a quick guide to an individual hypothesis with its corresponding independent and dependent variables. The independent variables were access to parenting supports, use of parenting supports, parenting stress, and exposure to domestic violence in childhood.

Parenting supports. For this study, parenting support is defined as emotional, instrumental, and informational help with a focus on issues related to child rearing. Parenting supports were measured using an adapted version of the 9-item Arizona Social Support Inventory Survey (Barrera, 1981). The measure was adapted so questions focused specifically on parenting rather than general social support. Parenting support questions were focused on the three types of social support: informational, instrumental, and emotional (Lin, 2001). Informational support was measured using the following questions: Who are the people in your life that you identify as parenting role models? Who are the people in your life that you go to for parenting advice? Who are the people in your life that you go to for relationship advice? Instrumental support was measured using the following questions: Who are the people in your life who would lend you money if needed? Who are the people in your life who will help you with child care? Who are the people in your life who will help you with a ride to work, fix your car, etc? Emotional support was measured using the following questions: Who do you talk to when you want to talk about things that are personal and private? Who do you rely on to help you when you are feeling stressed or overwhelmed? When you have an argument with your partner, whom do you call for help?

Parenting support was operationalized into two variables—one to measure access to parenting support and the other to measure use of parenting support. Access to parenting support was conceptualized as the people in the respondents' life that they have entrée to in order to receive parenting support. Access to parenting support was measured by asking participants to select the person(s) who provides these types of support to them. Participants could select from a range of potential support providers such as a partner, biological parents, siblings, therapist, etc. The use of parenting support was conceptualized as a person the respondent has sought out for parenting support. The use of these supports were measured by asking participants to indicate which of the identified support providers they used within the last month. For example, a respondent may select a partner, mother, and brother as a person who they can go to talk about things that are personal and private, and in the last month, they talked to their partner and brother about those things. They would score a 3 for access and 2 for use for that particular question. Scores were calculated across all nine questions on social support to create the two variables to be used in testing the conceptual model. A type of potential support provider received one-point for being select, the total number of different types of support providers was summed to make up the access variable (ACCESS). Similarly, the number of identified providers used within the last month was summed to create the use variable (USE).

Parenting stress. Parenting stress was conceptualized as the capacity of a parent to handle the interacting demands of known stressors such as unemployment, depression, anxiety, and child temperament (Whipple & Webster-Stratton, 1991). Parenting stress (PSI) was operationalized using the *Parenting Stress Index/Short Form—Parental*

Distress subscale (Abidin, 1995). The Parent Distress subscale is a 12-item instrument measuring parental distress (e.g. “I feel trapped by my responsibilities as a parent”), difficult child (e.g. “My child gets upset easily over the smallest things”), and dysfunctional parent-child interaction (e.g. “My child rarely does things for me that make me feel good”) using a 5-point Likert scale (Abidin, 1995; PAR, 1995).

The PSI/SF was chosen because it has been used to assess parenting stress in relation to child maltreatment in a variety of settings and with fathers in particular (e.g. Fagan et al., 2007; Guterman et al., 2009; C. M. Rodriguez & Richardson, 2007; Whipple & Webster-Stratton, 1991). The California Evidence-Based Clearinghouse for Child Welfare (CEBC)—an advisory committee and scientific panel of California-based and national child welfare research and practice experts—has assigned the PSI/SF an ‘A’ grade in reliability and validity meaning that two or more peer reviewed articles have found the measure to be reliable and valid (CEBC, 2009b). The complete instrument has shown good internal consistency (Cronbach’s alpha 0.91) with the general population and test-retest reliability of 0.84 (Touliatos, Perlmutter, & Straus, 2001). The PD specific subscale has a reliability of 0.87, $r = .94$, $p < .001$ (Abidin, 1995).

In order to reduce the burden of a long survey but still capture the necessary information, only the 12-item Parental Distress subscale was used for this study. The parenting stress variable (STRESS) was created by calculating the sum score of the PD scale. Scores can range from 12 to 60 with a higher score indicating a higher level of stress. A score of 25 is the 50th percentile on the PD (Abidin, 1995). The parenting stress (STRESS) variable was used as an independent variable to test the potential and

propensity for abuse. It was used as a dependent variable to test the effects of parenting support and children exposure to domestic violence on parenting stress.

Exposure to domestic violence in childhood (CEDV). Exposure to domestic violence in childhood (CEDV) was measured using an adaptation of Edleson's (2007) *Child Exposure to Domestic Violence Scale*. Conceptually, childhood exposure to domestic violence is defined as "a child's observation of adult domestic violence between others and its aftermath" (Mbilinyi et al., 2007, p. 311). Since the study was interested in history of exposure to domestic violence in childhood, Edleson's (2007) CEDV scale was adapted for adults to use retrospectively. Participants were asked to identify indirect and direct exposure to domestic violence in childhood. In this study, childhood was defined as the period of time before the participant turned 18 years old. Participants were asked to select the two adults in their life to represent their parents in answering the questions on adult domestic violence.

For the purposes of this study, the CEDV variable was operationalized by answering "yes" to any of the following questions: As a child, did you ever see the aftermath (e.g. someone was hurt, broken furniture, police being called) of a fight between your parents? As a child, did you ever overhear your parents physically fight? As a child, did you ever see your parent punch a wall, rip a phone out of the wall, smash pictures, break furniture, etc.? As a child, did you ever see your parents physically fight? As a child, did you ever try to stop your parents from physically fighting? As a child, were you ever injured during a fight between your parents? Participants were divided into two groups: men who were exposed (those who answered "yes" to any of the six

questions above) and men who were not exposed (those who answered “no” to all of the six questions above).

Dependent variables. The dependent variables are also provided in Table 1. The dependent variables for this study are parenting stress, child abuse potential, and propensity for abusiveness. The same measure of parenting stress (STRESS) as described above was also used as a dependent variable when testing the effects of access and use of parenting supports as well as the differences between men who were exposed to domestic violence in childhood and those who were not. Child abuse risk variable (CAP) was measured using the Child Abuse Potential Inventory (Milner, 1986). The final dependent variable (PAS), risk for domestic violence was measured using the Propensity for Abusiveness Scale (Dutton, 1995).

Child abuse potential. Child abuse risk was conceptualized as the chance for intentional physical harm of a child. The 77-item physical abuse scale of the *Child Abuse Potential Inventory* (CAP) was used to operationalize the risk for physical child abuse. The CAP was developed by Milner in 1977, and the most current version is from 1986 (Milner & Wimberley, 1986). Within the CAP is a 77-item agree-disagree assessment of a parent's risk for physical child abuse. The inventory has six factor scales: distress (e.g. “I have many personal problems”), rigidity (e.g. “Everything in the home should always be in its place”), unhappiness (e.g. “I do not laugh very much”), problems with child and self (e.g. “I have a child who gets in trouble a lot”), problems with families (e.g. “My parents did not understand me”), and problems from others (e.g. “Other people do not understand how I feel”; Milner, 1986). The measure was selected because it is widely used in child maltreatment studies with both mothers and fathers (e.g. (Margolin et al.,

2003; Pittman & Buckley, 2006; C. M. Rodriguez & Richardson, 2007; Salisbury, Henning, & Holdford, 2009).

The CAP received an 'A' grade in reliability and validity from the California Evidence-Based Clearinghouse for Child Welfare, which means that two or more peer reviewed articles have found the measure to be reliable and valid (CEBC, 2009a).

Internal consistency for the CAP abuse scale is .92 for the general population and .98 for known abusive subjects (Milner & Wimberley, 1986) with a 3-month test-retest reliability of 0.75 (Milner, 1994).

The score using the scoring sheet that corresponds to the CAP measure was used to create the child abuse risk variable (CAP). The CAP score ranges from 0-485. The higher scores on the CAP indicate higher risks for potential child abuse. The clinical cut off for the CAP is 166 (215 is the conservative clinical cut off; Milner, 1994). The variable for child abuse risk was used as a dependent variable to test the effects of parenting supports and exposure to domestic violence in childhood and the potential for child abuse.

Risk for domestic violence. The risk for domestic violence is defined as the potential to commit acts of physical or psychological abuse of an intimate partner. The risk for domestic violence was using the *Propensity for Abusiveness Scale* (PAS) by Dutton (1995). The PAS is a 29-item tool that rates statements on a 5 point Likert Scale about anger (e.g. "I get so angry, I feel that I might lose control"), trauma (e.g. frequency of anxiety attacks), parental warmth and discipline (e.g. "As a child I was physically punished or scolded in the presence of others"), attachment (e.g. "I find it difficult to depend on other people"), and borderline personality disorder (e.g. "I tend to feel things

in a somewhat extreme way, experiencing either great joy or intense despair”) (Clift, Thomas, & Dutton, 2005; Dutton, 1995).

The instrument has shown good internal consistency (Cronbach’s alpha 0.92) and correlation coefficient ($r = .744$; Clift et al., 2005). This tool does not pose any specific questions about the personal violent behaviors, which reduces social desirability errors and ethical issues that may arise in research. This instrument was selected because it is recommended for use with men before violence occurs to predict possible psychological and physical abuse (Dutton & Kropp, 2000; Dutton, Landolt, Starzomski, & Bodnarchuk, 2001).

A variable (PAS) to test the risk for domestic violence was created using the sum score of the PAS measure. A score can range from 22-109; the higher the score on the PAS, the higher the risk for domestic violence. Nationally, men who were receiving treatment for domestic violence had a mean score of 59 (Dutton et al., 2001). The PAS variable was used to test the relationship between parenting support and exposure to domestic violence in childhood on propensity for abusiveness.

Validity testing. In order to verify the tool was collecting the information desired, two *think aloud* tests were conducted. The *think aloud* test allowed the researcher to understand what the participant is thinking while answering the questionnaire (Dillman, Smyth, & Christian, 2009). The purpose of the *think aloud* was to identify ambiguous language, unclear questions, overall flow of the questionnaire, and administration time (Dillman et al., 2009). It also provided valuable knowledge in the usability of the survey tool (Dillman et al., 2009). After the two think aloud tests, the data collection tool was slightly modified in terms of design but not content in order to improve usability.

Pilot testing. The data collection tool was pilot tested with five fathers to focus on the amount of time it took to complete the entire questionnaire. Additionally, the pilot test assisted in verifying the data were being collected properly in terms of the statistical analysis plan. No changes were made as a result of the pilot test. However, the collection tool was reorganized to help improve flow and provide encouraging language such as letting participants know how many sections were left to complete.

Table 3. A guide to each hypothesis and corresponding independent and dependent variable(s).

Hypothesis	Independent Variable	Dependent Variable
H ₁ Parenting support will be associated with a reduction in parenting stress.	ACCESS USE	STRESS
H ₂ The interaction between parenting supports and parenting stress be associated with a reduction in risk for domestic violence.	STRESS ACCESS USE	PAS
H ₃ The interaction between parenting supports and parenting stress will be associated with a decreased risk for child abuse.	STRESS ACCESS USE	CAP
H ₄ Exposure to domestic violence in childhood will be correlated with a decreased in parenting support.	CEDV	USE ACCESS
H ₅ Exposure to domestic violence in childhood will be correlated with an increased in parenting stress.	CEDV	STRESS
H ₆ Exposure to domestic violence in childhood will be correlated with an increased risk for domestic violence.	CEDV	PAS
H ₇ Exposure to domestic violence in childhood will be correlated with an increased risk of child abuse.	CEDV	CAP
H ₈ The interaction between parenting support and parenting stress among men exposed to domestic violence will be associated with a reduction in the risk for domestic violence.	CEDV*STRESS* ACCESS CEDV*STRESS*USE	PAS
H ₉ The interaction between parenting support	CEDV*STRESS*	CAP

and parenting stress among men exposed to domestic violence will be associated with a reduction the risk of child abuse.

ACCESS
CEDV*STRESS*USE

Statistical Procedures

Data Analysis Plan. The data were cleaned and coded in Excel to prepare for data analysis using SPSS 20. Cleaning and coding included creating the access and use variables as described previously, dichotomous variables were coded into 1 and 0. For example, exposure to domestic violence in childhood was coded as 1 for exposed and 0 for non-exposed. Respondents that did not complete all measures in the data collection tool were removed from analysis ($n=7$). First, descriptive statistics were explored to understand the sample population, the variation in their access to and use of parenting supports, risks for child abuse and domestic violence, and parenting stress. Descriptive statistics provide an understanding of the frequency and variation in the data and provides a good understanding of each of the individual variables (D. S. Moore, 2004).

The next step in the data analysis was to test for correlation using Pearson's r . Correlation "measures the direction and strength of a linear relationship," but it does not distinguish the difference between a response or explanatory variable (D. S. Moore, 2004).

To help explain the relationship between the correlated variables, the data were further analyzed using multiple linear regression. Multiple regression explains or predicts the effects of the independent variable on the dependent variable (D. S. Moore, 2004). First, interaction terms were created for the ACCESS, USE, and STRESS variable. Each variable was transformed using a centering technique before the interaction term was created. Centering involves subtracting the mean of the individual variable from the individual raw score of the variable (Jaccard, Wan, & Turrisi, 1990). Centering the

variable does not change the results of the multiple regression analysis but assists in improving interpretation of the results (Jaccard et al., 1990). Centering allows for a more meaningful interpretation of the interaction based on the average score rather than from a baseline of zero. These centered variables were created and labeled (XACCESS, XSUPPORT, and XSTRESS) to use in testing interaction effects. Multiple regression models were created to test the interaction effects of parenting support and parenting stress on the reduction in risk for family violence. The best fitting models are presented in this study. First, a model was created that tested the main and interaction effects of parenting support and parenting stress (Model A: $STRESS \sim XACCESS + XUSE + XACCESS * XUSE$). Model B tested the main and interaction effects of parenting supports and parenting stress on the risk for domestic violence (Model B: $PAS \sim XSTRESS + XACCESS + XSTRESS * XACCESS$). A third model tested the main and interaction effects of parenting supports and parenting stress on child abuse risk (Model C: $CAP \sim XSTRESS + XUSE + XSTRESS * XUSE$).

Finally, to explore the effects of exposure to domestic violence in childhood, an independent sample t-test was conducted to examine significant differences between men who were exposed to domestic violence and those who were not. The t-test was chosen because it allows for testing the difference in mean between two populations when the true mean is not known (D. S. Moore, 2004). A limitation of the t-test is the significance is affected by the size of the sample, a smaller sample may not show the significance that a larger sample would (D. S. Moore, 2004). Additionally, multiple regression was used to test for any significant interactions between parenting support and parenting stress on risks for family violence among men who were exposed to domestic violence.

Power analysis. A samples size of 77 was calculated using an a priori power analysis in G*Power 3.1 software with medium effect size of .15, an alpha of .05, power of .80, and 3 predictors for linear regression. The results of the power analysis indicate there is enough power to accurately reject the null hypothesis if it is not true (Moore, 2003).

Given the unbalanced sample of men exposed and non-exposed to domestic violence, a post-hoc achieved power analysis was conducted to calculate the level of statistical power. Using the G*Power 3.1 software, power of .32 ($f^2 = .30$, alpha = .05) was calculated for fixed effects, main effects, and interaction effects. The results indicate low power to accurately reject the null hypothesis if it is not true. Therefore, tests of difference between exposed and non-exposed men are interpreted conservatively in order not to inflate the level of significance or generalization of the results. Tests between exposed and non-exposed men are exploratory in nature and encourage further research.

Protections of Human Subjects

The sensitive nature of the study required care in the protection of human subjects. This study qualified for expedited review by the University of Minnesota Institutional Review Board. Prior to beginning the research study, approval from the University of Minnesota Institutional Review Board was obtained (study number 1110P06081, Appendix D). Confidentiality was protected by collecting information without identifiers with the exception of IP address that could not be avoided. There is very little risk of being able to easily link a survey participant through an IP address. Every effort was used to reduce the possible risks to human subjects. There was a slight risk that the questions regarding exposure to domestic violence may invoke an emotional reaction. In order to

minimize this risk, questions were posed generally and did not ask for specific experiences. The survey tool was password protected. Any potential identifiers (i.e. IP addresses) were removed prior to data analysis. All data were stored in a password-protected file.

Limitation of Design and Sampling

Limitations of design. There are several limitations to the study design. First, in terms of data collection, the validity of the standardized measures may change when used in an adapted form or with other measurement tools. Additionally, the research study relies on men to recall history of exposure to domestic violence and their perceptions of availability and use of social support, none of these self-report measures are guaranteed to be reliable or accurately represent these men. None of the statistical tests used were able to account for possible inaccuracies in reporting.

An electronically administered questionnaire was chosen because it reduced time and cost while increasing the ability to collect data from a broader pool of participants (Andrews, Nonnecke, & Preece, 2003; Cha Yeow, 2005). There are potential disadvantages to online survey methods. One concerns trust and confidentiality that may be compromised if respondents suspect they can be identified or the reverse by respondents assuming false identities (Andrews et al., 2003). However, the low sensitivity of the subject matter reduced the likelihood of such compromises. There is minimal advantage to faking an identity to complete this questionnaire. Computer “cookies” were used to reduce the ability of one individual having repeated access to the questionnaire.

Limitations of Sampling. Accessibility to the Internet is a weaknesses of this design (Jaeger & Bo, 2009). Specifically, unstable or slow Internet connections may have inhibited people from accessing the survey. To avoid slowing down Internet speeds, graphics were avoided. Finally, online surveys are still subject to biases because only those who have access to the Internet can use them. Specifically, those who have access to the Internet may have more connections and resources than those who do not have Internet access. Therefore, research studies using online technology need to account for sampling bias that is inherent in Internet access. The rapid adoption of smart phone technology has played an important role in breaking the digital divide. According to the U.S. Census Bureau (2009), 76% of households have access to the Internet in some location.

Additionally, those who belong to the online father groups, follow Twitter hash tags geared towards fathers, etc. may be people who are more likely to seek out and use parenting supports versus those who were not located within the recruitment area. The study of computer mediated support groups by Dunham et al. (1998) found that the lack of computer experience and education did not impede online participation.

CHAPTER FOUR

RESULTS

The purpose of this study was to test the interaction effects of parenting support and parenting stress on the risk for family violence. Furthermore, this study explored the interaction effects of parenting supports of men exposed to domestic violence and parenting stress and the subsequent relationship with the risk for family violence. This chapter provides the results of Pearson's r correlation test, multiple regression, and independent samples t -test analysis of the conceptual model.

The demographic data provided in Chapter Three shows that the population consisted mostly of highly education, upper-middle class, European-American males. Table 4 provides descriptive results of the total population and the five variables. The mean score on the Parental Distress Parenting Stress Index form was 27 ($SD = 8$) with a range of 12-49. For the Parenting Distress subscale, the 50th percentile score is 25 (Abidin, 1995). The Child Abuse Potential inventory had a mean score of 113 ($SD = 104$) with a range of 7-430. The clinical cut off for the CAP is 166 with the conservative cut off at 215 (Milner, 1994). The mean score of the Propensity for Abusiveness was 41 ($SD = 13$) with a range of 24-93. Again, the mean score for men receiving treatment for domestic violence is 59 (Dutton et al., 2001). The access to parenting supports mean was 6 ($SD = 2$, 2-11) and the use of parenting supports mean was 4 ($SD = 2$, 0-11).

Table 4. Descriptive results for the entire sample population including the mean, range, and standard deviation.

Variable	Mean	Min-Max	SD
Parenting Stress Index	27	12-49	8
Child Abuse Potential	113	7-430	104
Propensity for Abusiveness	41	24-93	13
Access to parenting support	6	2-11	2
Use of parenting support	4	0-11	2

As previously discussed, there were 9 hypotheses tested in the conceptual model.

Table 5 presents the two groups with the list of hypotheses in each group. The first group of three hypotheses focuses on the interaction effects of parenting support and parenting stress and the subsequent relationship with risk for family violence. The second group of hypotheses focuses on the relationship between fathers' exposure to domestic violence in childhood and parenting supports, parenting stress, and risks for family violence. The second group is more exploratory in nature due to the small sample size and limited power.

Table 5. Hypotheses divided into groups based on the conceptual model.

Parenting Support	Exposure to Domestic Violence in Childhood
H ₁ Parenting support will be associated with a reduction in parenting stress.	H ₄ Exposure to domestic violence in childhood will be correlated with a decreased in parenting support.
H ₂ The interaction between parenting supports and parenting stress be associated with a reduction in risk for domestic violence.	H ₅ Exposure to domestic violence in childhood will be correlated with an increased in parenting stress.
H ₃ The interaction between parenting supports and parenting stress will be associated with a decreased risk for child abuse.	H ₆ Exposure to domestic violence in childhood will be correlated with an increased risk for domestic violence.
	H ₇ Exposure to domestic violence in childhood will be correlated with an

increased risk of child abuse.

H₈ The interaction between parenting support and parenting stress among men exposed to domestic violence will be associated with a reduction in the risk for domestic violence.

H₉ The interaction between parenting support and parenting stress among men exposed to domestic violence will be associated with a reduction in the risk of child abuse.

The Effects of Parenting Support

The first part of the conceptual model focuses on the interaction effects of parenting support and parenting stress and its relationship to potential and propensity for abuse. Parenting support was divided into two variables—access to parenting support, which is the number of parenting supports the respondent identified as having access to and use of parenting support, which is the use of accessible parenting support in the last month. As Table 6 shows, a vast majority reported their partner has a person who is accessible to provide emotional (87%, n=66), instrumental, 74% (n=56), and informational 71% (n=54) supports. Figure 7 provides a visual display of the number of respondents reporting a specific support person as accessible to provide a type of parenting support. A majority of respondents identified their mother-in-law and father-in-law as people they could access for instrumental support (62%, n=47; 50%, n=38), but fewer respondents reported them as people they would go to for emotional (30%, n=23; 20%, n=15) or informational (26%, n=20; 14%, n=11) support.

Table 6. The frequency a respondent reported a specific support person as accessible to provide each type of parenting support (N=76).

Support Provider	Emotional	Instrumental	Informational
Partner	87% (n=66)	74% (n=56)	71% (n=54)
Friend	82% (n=62)	63% (n=48)	72%(n=55)
Sister	41% (n=31)	45% (n=34)	30% (n=23)
Brother	38% (n=29)	43% (n=33)	21% (n=16)
Biological Mother	67% (n=51)	74% (n=56)	58% (n=44)
Biological Father	47% (n=36)	53% (n=40)	41% (n=31)
Stepmother	8% (n=6)	4% (n=3)	5% (n=4)
Stepfather	4% (n=3)	9% (n=7)	1% (n=1)
Grandmother	7% (n=5)	11% (n=8)	5% (n=4)
Grandfather	3% (n=2)	5% (n=4)	3% (n=2)
Adoptive Mother	0% (n=0)	1% (n=1)	1% (n=1)
Adoptive Father	1% (n=1)	5% (n=1)	1% (n=1)
Mother-in-Law	30% (n=23)	62% (n=47)	26% (n=20)
Father-in-Law	20% (n=15)	50% (n=38)	14% (n=11)
Aunt	9% (n=7)	14% (n=11)	1% (n=1)
Uncle	11% (n=8)	13% (n=10)	3% (n=2)
Co-worker	32% (n=24)	24% (n=19)	28% (n=21)
Social worker	3% (n=2)	n/a	7% (n=5)
Therapist	16% (n=12)	n/a	14% (n=11)
Nurse	1% (n=1)	n/a	0% (n=0)
Doctor	14% (n=11)	n/a	13% (n=10)
Teacher	4% (n=3)	n/a	9% (n=7)

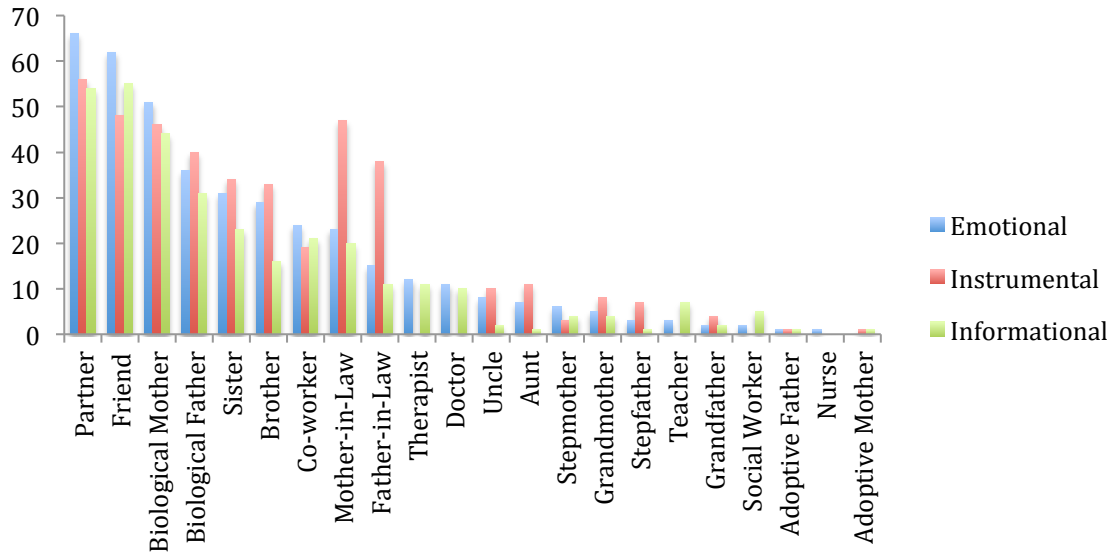


Figure 7. The number of respondents who reported a specific support provider as accessible to provide a type of parenting support.

The use of parenting supports varied somewhat from access to parenting support.

Table 7 shows that the majority of respondents identified their partner as a person they use for parenting support. Similar to the access results, more respondents reported using their mother-in-law and father-in-law for instrumental support (36%, n=37; 21%, n=16) than using them to provide emotional (13%, n=10; 9%, n=7) or information support (9%, n=7; 3%, n=2). Figure 8 provides a visual representation of the people who respondents utilized in the last month to provide the various types of parenting support. More respondents identified using a co-worker for emotional (30%, n=23) and instrumental support (16%, n=12) than using a parent-in-law or sibling.

Table 7. The frequency a respondent reported using a specific support person to provide each type of parenting support (N=76).

Support Provider	Emotional	Instrumental	Informational
Partner	88% (n=67)	54% (n=41)	55% (n=42)
Friend	67% (n=51)	32% (n=24)	49% (n=37)
Sister	25% (n=19)	12% (n=9)	13% (n=10)
Brother	18% (n=14)	5% (n=4)	9% (n=7)
Biological Mother	42% (n=32)	24% (n=18)	29% (n=22)

Biological Father	30% (n=23)	17% (n=13)	16% (n=12)
Stepmother	1% (n=1)	1% (n=1)	0% (n=0)
Stepfather	0% (n=0)	0% (n=0)	1% (n=1)
Grandmother	3% (n=2)	1% (n=1)	1% (n=1)
Grandfather	3% (n=2)	0% (n=0)	1% (n=1)
Adoptive Father	0% (n=0)	1% (n=1)	0% (n=0)
Mother-in-Law	13% (n=10)	36% (n=27)	9% (n=7)
Father-in-Law	9% (n=7)	21% (n=16)	3% (n=2)
Aunt	5% (n=4)	3% (n=2)	1% (n=1)
Uncle	8% (n=6)	0% (n=0)	0% (n=0)
Co-worker	30% (n=23)	8% (n=6)	16% (n=12)
Social worker	3% (n=2)	n/a	3% (n=2)
Therapist	12% (n=9)	n/a	9% (n=7)
Nurse	1% (n=1)	n/a	0% (n=0)
Doctor	9% (n=7)	n/a	5% (n=4)
Teacher	3% (n=2)	n/a	4% (n=3)

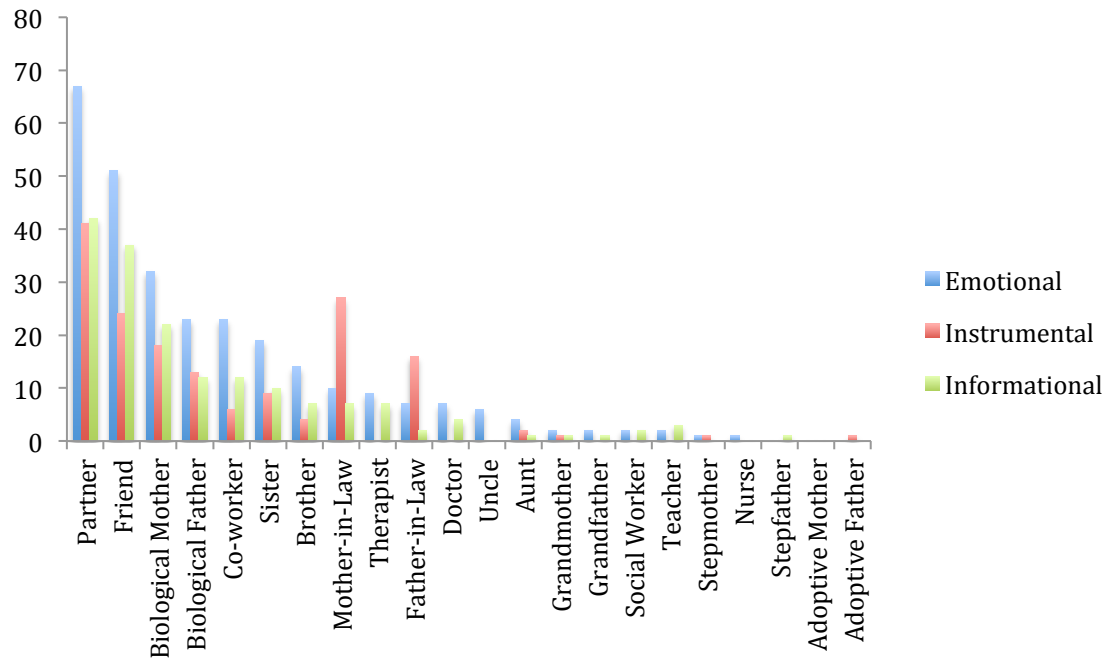


Figure 8. The number of respondents who reported utilizing a specific support provider to provide a type of parenting support.

H₁ Parenting support will be associated with a reduction in parenting stress.

[MODEL A: STRESS~XACCESS+XUSE+ XACCESS*XUSE]

To test the hypotheses that parenting supports will be associated with a reduction in parenting stress Pearson’s *r* and multiple regression analysis was conducted (Table 8).

The correlation tests showed that access to ($r = -.52$) and use of parenting supports ($r = -.42$) have a significant negative correlation with parenting stress. The negative correlation suggests that the fewer reported access to and use of parenting support the higher the parenting stress.

The multiple regression model with the two main effects and interaction effect produced $R^2 = .32$, $F(3, 72) = 11.50$, $p < .001$. Table 8 shows no interaction between access to and use of parenting support on parenting stress. However, access to parenting support had a significant association in the reduction of parenting stress. For every increase in access to parenting support, there was a 1-point decrease in parenting stress index score. The use of parenting supports also had a significant association in reducing parenting stress. For every increase in parenting supports, there was nearly a 1-point decrease in parenting stress score.

Table 8. Summary of Regression Model A Parenting Supports Relationship in Reducing Parenting Stress (N=76).

Predictor	Model A			CI 95%		
	B	SE	β	p-value	Lower	Upper
Intercept	27.63	.837		.000	25.96	29.30
Access	-1.44**	.375	-.426	.000	-2.20	-.70
Use	-.864	.417	-.231	.042	-1.70	-.03
Access*Use	.002	.002	.086	.387	-.003	.007

Notes: * $p < .05$, ** $p < .01$, *** $p < .001$

H₂ The interaction between parenting supports and parenting stress be associated with a reduction in risk for domestic violence. [MODEL B: PAS~XSTRESS+XACCESS+XSTRESS*XACCESS]

Multiple regression and Pearson's r analysis was used to test the interaction between parenting support and parenting stress and its relationship in reducing the risk for domestic violence as measured by the propensity for abusiveness scale (Table 9).

Pearson's r showed a moderate negative correlation between access to parenting supports

and risk for domestic violence ($r = -.35$) and the use of parenting supports and risk for domestic violence ($r = -.32$). There was a strong positive correlation between parenting stress and risk for domestic violence ($r = .63$). The regression model with the two main effects and one interaction effects produced $R^2 = .46$, $F(3, 72) = 20.28$, $p < .001$. Those who had higher access to social support also had lower parenting stress. The main effect of stress was also significant in the model. Additional statistical analysis, did not find a significant interaction between the use of parenting supports and stress.

Table 9. Summary of Regression Model B Parenting Supports and Parenting Stress Association in Reducing the Risk for Domestic Violence (N=76).

Predictor	Model B		β	p-value	CI 95%	
	B	SE			Lower	Upper
Intercept	39.43	1.25		.000	36.94	41.92
XStress	.932***	.167	.576	.000	.599	1.26
XAccess	-.375	.569	-.068	.512	-1.51	.760
XStress*XAccess	-.198**	.067	-.258	.004	-.332	-.063

Notes: * $p < .05$, ** $p < .01$, *** $p < .001$

H₃ The interaction between parenting supports and parenting stress will be associated with a decreased risk for child abuse. [MODEL C: CAP~XSTRESS+XUSE+XSTRESS*XUSE]

Pearson's r and multiple regression analysis was used to test the hypothesis, that the interaction between parenting supports and parenting stress will be associated with decreased child abuse potential (Table 10). There was a significant, strong positive relationship between stress and child abuse potential ($r = .68$, $p < .01$). Access to parenting support ($r = -.41$, $p < .01$), and the use of parenting support ($r = -.44$, $p < .01$) had moderate negative association with child abuse potential. The results show the entire model of two main effects and one interaction effects produced $R^2 = .58$, $F(3, 72) = 32.61$, $p < .001$. The use of parenting supports interacts with parenting stress for an average 2-point decrease in child abuse potential. Other statistical test, did not find a significant

interaction effect between access to parenting support, use of parenting support, and stress. Nor was there a significant interaction between access to parenting support and stress.

Table 10. Summary of Regression Model C Parenting Supports and Parenting Stress Association with Child Abuse Potential (N=76).

Predictor	Model C		β	p-value	CI 95%	
	B	SE			Lower	Upper
Intercept	96.08	8.88		.000	78.38	113.79
XStress	7.065***	1.17	.523	.000	4.72	9.40
XUse	-13.34**	4.38	-.264	.003	-22.08	-4.50
XStress*XUse	-2.28***	.606	-.300	.000	-3.49	-4.60

Notes: * $p < .05$, ** $p < .01$, *** $p < .001$

Overall, the results from this group of hypothesis testing demonstrate the complexity of relationship between parenting supports, stress, and the risk for family violence. While access to and use of parenting supports did have an association with a reduction in parenting stress scores, they did not necessarily have the same relationship with parenting stress. On one hand, access to parenting supports had an association with reducing the propensity for abusiveness while the use of parenting supports did not show a significant relationship. On the other hand, the use of parenting supports had an association in reducing child abuse potential while access to parenting supports did not show as significant relationship.

The Effects of Fathers' Exposure to Domestic Violence in Childhood

The final part of the conceptual model focuses on the interaction effects of parenting support and parenting stress among fathers exposed to domestic violence in childhood and family violence. Child exposure to domestic violence is a categorical variable of either exposed (N= 25) or non-exposed (N=51). Table 11 provides a summary of the descriptive statistics of each categorical variable.

Table 11. Descriptive statistics by exposure or non-exposure to domestic violence in childhood.

Factor	Variable	Mean	Min-Max	SD
Exposure N=25	Parenting Stress Index	30	12-49	9
	Child Abuse Potential	166	29-430	121
	Propensity for Abusiveness	47	31-93	15
	Access to parenting support	5	2-10	3
	Use of parenting support	3	0-8	2
Non-exposure N=51	Parenting Stress Index	26	14-45	7
	Child Abuse Potential	87	7-334	86
	Propensity for Abusiveness	39	24-68	10
	Access to parenting support	7	4-11	2
	Use of parenting support	4	1-11	2

H₄ Exposure to domestic violence in childhood will be correlated with a decreased in parenting support.

An independent samples t-test was conducted to compare the mean difference in parenting supports between men exposed and non-exposed to domestic violence in childhood. The results indicate that non-exposed men had significantly more access to (t(37) = -2.59, p < .01) and use of (t(74) = -2.71, p < .01) parenting supports than exposed men. Exposed men had approximately one less parenting support provider than non-exposed men. The results of this test indicate that there is a relationship between child exposure to domestic violence and fathers' access and use of parenting support.

H₅ Exposure to domestic violence in childhood will be correlated with an increased in parenting stress. H₆ Exposure to domestic violence in childhood will be correlated with an increased risk for domestic violence. H₇ Exposure to domestic violence in childhood will be correlated with an increased risk of child abuse.

While exposure to domestic violence in childhood did not have a relationship with parenting stress, the results of this study indicate that exposure to domestic violence is

associated with the propensity for abusiveness and child abuse potential. Specifically, the results of an independent samples t-test found that men who were exposed to domestic violence ($M=29$, $SD = 1.89$) did not have significantly different mean scores on the Parenting Stress Index-Parental Distress subscale than men who were not exposed ($M=26$, $SD = .92$; $t(36) = 1.762$, $p = .087$). However, men exposed to domestic violence ($M=47$, $SD 14.66$) did have significantly different means scores on the Propensity for Abusiveness scale than non-exposed men ($M=38$, $SD = 10.45$; $t(74) = 2.86$, $p < .01$). Finally, child abuse potential scores were significantly different between exposed men ($M= 166$, $SD = 120$) and non-exposed men ($M=87$, $SD = 85$; $t(36) = 2.95$, $p < .01$).

H₈ The interaction between parenting support and parenting stress among men exposed to domestic violence will be associated with a reduction in the risk for domestic violence.

To further examine parenting supports, a multiple regression analysis was conducted to examine the relationship between the interaction effects of parenting supports and parenting stress among men exposed to domestic violence in childhood and the risk for domestic violence ($N=25$; Table 12). The results of the multiple regression model with two main effects and one interaction effects produced $R^2 .45$, $F(3, 72) = 5.62$, $p < .05$. There was a significant interaction between access to parenting supports and stress in this model. Access to parenting supports was associated with a decrease in parenting stress among men exposed to domestic violence. The model shows that the main effects of stress and access to parenting supports did not significantly contribute to the model. Additional statistical testing did not find any statistical effects of the use of parenting support and parenting stress.

Table 12. Summary of Regression Model D Relationship Between Parenting Supports and Parenting Stress on Risk for Domestic Violence among Men Exposed to Domestic Violence (N=25).

Predictor	B	Model D		p-value	CI 95%	
		SE	β		Lower	Upper
Intercept	40.24	3.19		.000	22.61	46.86
XStress	.67	.34	.43	.061	-.04	1.38
XAccess	-.54	1.20	-.10	.66	-3.04	1.97
XStress*XAccess	-.28*	.13	-.37	.05	-.55	-.01

Notes: * $p < .05$, ** $p < .01$, *** $p < .001$

H₉ The interaction between parenting support and parenting stress among men exposed to domestic violence will be associated with a reduction the risk of child abuse.

The final hypothesis tested the interaction between parenting support and parenting stress among men exposed to domestic violence and the relationship with child abuse potential using multiple regression produced $R^2 = .62$, $F(3, 72) = 11.50$, $p < .001$ (Table 13). The results show a significant relationship between stress and use of parenting supports. The model found the interaction between the use of parenting support and parenting stress was associated with a decrease in child abuse potential. A father who used more parenting supports had lower scores on parenting stress scale and lower scores on child abuse potential. The main effect of stress was also significantly associated with reducing child abuse potential in the model. Additional statistical testing did not find child abuse potential reduction related to the interaction between access to parenting support and parenting stress.

Table 13. Summary of Regression Model E Relationship Between Parenting Supports and Parenting Stress on Risk for Child Abuse among Men Exposed to Domestic Violence (N=25).

Predictor	B	Model E		p-value	CI 95%	
		SE	β		Lower	Upper
Intercept	107.09	19.42		.000	66.71	147.47
XStress	5.68**	1.93	.45	.008	1.67	9.70
XUse	-12.21	9.27	-.20	.202	-31.50	7.07
XStress*XUse	-3.17**	.97	-.45	.004	-5.18	-1.16

Notes: * $p < .05$, ** $p < .01$, *** $p < .001$

Summary

The results of the analysis indicate that parenting support—both access and use—has a relationship with parenting stress and risks for family violence for the entire sample of men. The results also demonstrate that access to and use of parenting support by men who were exposed to domestic violence did not have a significant interaction with parenting stress in terms of risk for domestic violence. Use of parenting supports did have a significant interaction with parenting stress in the model testing the effects on child abuse potential. It is important to remember that small sample size, weak statistical power, and other limitations of the research may affect the interpretation of these results.

CHAPTER FIVE

Discussion

This research study set out to examine the relationship between fathers' exposure to domestic violence during childhood and parenting stress, the access to and use of social support, and risk for family violence. Moreover, this study also examined the relationship between fathers' access to and use of social support on their parenting stress and risks for family violence. This chapter discusses the findings of the research. Fathers with children under the age of five years old completed an online survey asking about their history of exposure to domestic violence, availability and use of social support, parenting stress, child abuse potential, and propensity of abusiveness. Parenting stress, child abuse potential, and risk for domestic violence were measured using validated standardized measures. Seventy-six fathers completed the entire online survey. Nine hypotheses were tested to examine the relationship and the interaction effects of parenting support, parenting stress, and risks for family violence, exposure to domestic violence and risks for family violence.

Overall, the results of this research study found that parenting stress is strongly correlated with child abuse potential and propensity for abusiveness. This means that higher parenting stress is associated with increases in risk for family violence. However, the accessibility to and use of parenting support are negatively correlated with parenting stress, child abuse potential, and propensity for abusiveness. These results show that parenting support is associated with a reduction in parenting stress and risk for family violence. Specifically, increased parenting support is associated with reductions in the risk for family violence. Finally, this study found significant differences in parenting

stress, child abuse potential, and propensity for abusiveness between fathers who reported exposure to domestic violence in childhood and those that did not report exposure.

The Contextual Factors

A few key findings need to be considered to add context to the discussion. First, this sample was overwhelmingly white, middle to upper-middle class, and well-educated in comparison to the national census data. The homogeneity of the sample and small sample size made it impossible to parse out meaningful statistics in terms of age, education, income, race, and the possible effects on parenting supports, parenting stress, and risks for family violence. This is important when considering the accessibility to and use of parenting supports since those with more resources may have more access to parenting supports, but less need to use some types of supports. For example, men with high incomes may never need to access a ride to work or borrow \$100 from a support provider, although they have access to a person or persons who could provide that type of support. It also might be expected that increases in age and education would broaden a person's social support network. These factors are important to providing a deeper understanding of the potential effects of parenting support on parenting stress to reduce the risk for domestic violence, but a larger and more representative sample is needed.

The Effects of Parenting Supports

As stated previously, the interaction between parenting supports and parenting stress and risk for family violence are complex. One important piece of this complexity is understanding the access to and use of different types of parenting supports. The sample of fathers showed a broad range of types of social support they could access and use. The vast majority of respondents identified their partner as a source for parenting support,

which is not surprising. These fathers also viewed their parent-in-laws as sources of instrumental support but not necessarily emotional support. Along these same lines, fathers frequently identified siblings and parents-in-law as people who were accessible to them for support, they reported seeking parenting support from co-workers more than siblings or co-workers.

This leads to further discussion about what it means to have parenting support accessible and usable. The results clearly show that just because a support is accessible, it does not mean that the men use it for support. Fathers likely choose who to seek out for support based on what is needed. For example, there may be many reasons that men choose to seek out a parent for emotional support and a social worker for informational support while relying on a partner for instrumental support. Proximity, comfort-level, and resources likely all influence the way men make decisions about who to use for what. For example, if a respondent was having trouble in his relationship, he may feel uncomfortable seeking advice from her parents because he may see them as having a stake in supporting their daughter over him. While he may identify them as people he could access for support, they may not be people he is willing to utilize. An example of the role of proximity is the higher identification of co-workers as parenting supports used. Most likely, men see their co-workers five days a week for 40+ hours, which may contribute to more opportunities for support seeking behaviors. In contrast, men might have less frequent contact with siblings or parent-in-laws, but have more comfort in asking them to babysit.

Although there is a substantial amount of literature available on perceived social support and its protective qualities in reducing risk for child maltreatment and fostering

resiliency (Fagan et al., 2007; Lin & Ensel, 1989; Maguire, 1991), there is very little on the utilization of parenting support. The first part of the conceptual model focused on the interaction between parenting support and parenting stress and the subsequent risk for family violence. It was hypothesized that parenting support would be associated with a reduction in risk for family violence.

The findings from this research study found that access to parenting supports may play an important role in reducing parenting stress and risk for domestic violence yet access to parenting support did not have a significant relationship on stress and child abuse potential among survey participants. However, the interaction between the use of parenting supports and parenting stress had a significant relationship in the reduction of child abuse potential, but no relationship on the risk for domestic violence. Among the men in this survey who were exposed to domestic violence, they had higher scores of parenting stress and risks for family violence than non-exposed men. Additionally, they had lower access to and use of parenting supports. Finally, the results found that like the entire sample, the interaction effects of parenting support on parenting stress vary by risk for family violence.

The results of this study highlight the benefits of parenting support. As established in the literature, the results of this research are supported by other empirical findings that suggest parenting support may be protective against parenting stress, child maltreatment, and potential for abuse. The results of the current study are consistent with the research on maternal parenting stress and risks for child maltreatment (Eckenrode et al., 2000; Olds et al., 2007).

These results advance current knowledge on the fathers' access to and use of parenting supports and the relationship in reducing parenting stress and risks for family violence. Current research has shown that fathers' parenting supports are protective against stress (DeGarmo et al., 2008), and this research advances the knowledge to understand the potential distal benefits of parenting support in relation to reducing stress to prevent family violence.

In terms of the conceptual model, the research results support the notion that parenting supports may be providing the specific knowledge, skills, and resources that are needed to teach and/or reinforce fathers' prosocial behaviors to reduce parenting stress and risks for family violence (Bandura, 1986; Maguire, 1991). These results are supported by ecological systems theory that emphasizes the interaction and interconnection of systems. The review of literature shows how parenting stress and risks for family violence are interconnected (Belsky, 1993; Fagan et al., 2007), and interactions between systems may increase or decrease stress and abuse risks.

One result worth further discussion is the non-significance of the relationship between the use of parenting support and reducing the risk for domestic violence. In contrast, the use of parenting supports had a significant relationship with stress in reducing child abuse potential. One explanation for this difference is the contributing factors to each type of family violence. Domestic violence is grounded in the idea of power and control. Specifically, domestic violence is often defined as a pattern of behaviors used by one partner to maintain power and control over another partner (Pence & Paymar, 1993). On the other hand, child abuse is often associated with emotional reactions (e.g. frustration, anger, hard discipline, etc.) as illustrated by many prevention

efforts. For example, respite and crisis care, home visiting, and shaken baby campaigns all work to provide parents with alternatives to frustration, anger, and physical punishment. As a result of the differences in contributing factors, it makes sense that using parenting support would contribute to a reduce risk for child abuse since this is what is often called for in prevention campaigns. Whereas, there is very little information available on successful domestic violence primary prevention efforts, and those that work with batterers focus on helping to change learned behaviors. In terms of secondary or tertiary prevention, the use of social support would likely help reduce the risk for perpetration, but it may not be a primary prevention tool.

Along those same lines, the interaction between access to parenting support and stress was associated with a reduction in risk for domestic violence. The nuances between the difference of access to and use of parenting support are more apparent in this model. Access to parenting support identifies the support providers in a father's social network who are not only identified as available to them, but the people a father reports as being able to approach for support. The number of accessible social supports may be able to influence parenting through modeling and social interaction the prosocial behaviors for these fathers. Therefore, fathers may be learning positive partner and parenting skills without realizing they are "using" these social supports.

For the most part, the conceptual model focuses on the microsystem interactions in terms of parenting support, but protective factors do extend all the way to the chronosystem (Bronfenbrenner, 1979, 1994). Since protective factors beyond the microsystem supports were not collected in this research study, fathers may be influenced by other factors within their ecological system that may have an effect on the propensity

for abusiveness. For example, a history of exposure to domestic violence could be located within the chronosystem. This history may frame and influence the way a father interacts with his partner (Swick & Williams, 2006). Rather than being abusive, he may have used his historical knowledge to not repeat the same pattern.

The Effects of Fathers' Exposure to Domestic Violence in Childhood

There has been very little research conducted on the long-term effects of exposure to domestic violence in childhood. There is even less on the effects on fathers who were exposed to domestic violence. The final portion of the conceptual model explores the relationship of fathers' exposure to domestic violence on parenting stress, child abuse potential, and propensity for abusiveness. The model also examined the potential relationship between parenting support and stress among fathers exposed to domestic violence in childhood and risks for family violence. Before interpreting this data further, it is important to remember that this portion of the study is exploratory in nature. The sample of men exposed to domestic violence was 25, so the findings are interpreted conservatively with the idea of informing future research.

Interestingly, the access to or use of parenting support varied between exposed and non-exposed men, indicating that childhood exposure to domestic violence may have a significant relationship with parenting support available to these fathers. This result is interesting in the sense that one effect of exposure to domestic violence is social difficulties (K. M. Anderson & Bang, 2012; Diamond & Muller, 2004), which would imply that men who were exposed to domestic violence may have a smaller parenting support system. These results indicate that social difficulties may persist into adulthood.

Another interesting interpretation of this finding is that, contrary to notions of traditional male gender roles which state that men should be physically and emotionally strong and self-controlled which may inhibit the use of parenting support (Bettman, 2009; Thompson et al., 1985), these fathers were using their parenting support systems. In fact, the use of parenting supports had a significant relationship with parenting stress even among men who were exposed to domestic violence. This indicates that even though men who are exposed to domestic violence in childhood has higher scores on child abuse potential than non-exposed men, the use of parenting supports had a similar relationship in reducing risk scores. This supports the continued shift in the macro systems of the changing notions of manhood and fatherhood (e.g. Daly, 1995; Marsiglio, Amato, Day, & Lamb, 2000; Pleck & Pleck, 1997).

The result of this research found that exposure to domestic violence in childhood was significantly associated with parenting stress, propensity for abusiveness, and child abuse potential. Men who were exposed to domestic violence had significantly higher scores of parenting stress, propensity for abusiveness, and child abuse potential than non-exposed men. The findings also indicate that access to and use of parenting support by men exposed to domestic violence did have a relationship with parenting stress and child abuse potential and propensity for abuse.

These results are supported by other research in terms of exposure to domestic violence increasing the risk for future perpetration (Black et al., 2010; Fergusson & Horwood, 1998; Margolin et al., 2003; Stith et al., 2000; Turner et al., 2010; Wareham et al., 2009). This is explained within the conceptual model both by social learning and ecological systems theory in terms of men learning to use violence by watching others

use violence (Straus et al., 1990). It also supports that men who were exposed to domestic violence may have some difficulty coping with stressors that increase their risk for abuse.

The findings are promising in identifying potential protective factors for men who were exposed to domestic violence. The results show that parenting support may be helpful in reducing stress and risks for family violence. As previously discussed, parenting supports for fathers and mothers have been found to protect against child maltreatment (Belsky, 1993; Eckenrode et al., 2000; Fagan et al., 2007). This study pushes the knowledge a little further by highlighting the protective factor of parenting supports for fathers, but a larger sample is needed to confirm the relationship of parenting support for men who were exposed to domestic violence.

The results of this study provide a confirmation of the potential protective factor of parenting support on parenting stress and risk for family violence. The conceptual model adds to the knowledge base on social support. It also provides new information in relation to fathers exposed to domestic violence. The results confirm violence exposure as a risk factor for future perpetration, but it also highlights the benefits of parenting support for men.

Implications

The findings from this study have several important implications. The implications are divided into two sections: parenting support and exposure to domestic violence in childhood. The implications provide recommendations in the area of social work practice, policy, and research with a focus on parenting support and exposure to domestic violence in childhood. This chapter ends with the limitations of the research findings.

Parenting Support

Implications for practice. As discussed above, the findings of this study emphasize the benefits of parenting support. For this reason, it might be useful for social workers to work with clients to help them assess their parenting supports. This could include an assessment to identify different support systems, providers, and the types of support available (i.e. emotional, instruments, or informational). These providers may include family, friends, teachers, social workers, doctors, or religious leaders. The use of an ecomap or ecogram may help clients identify the people in their life or the systems they interact with that may be available to provide support.

In addition to identifying these supports, social workers may work with clients to identify how and when to activate their parenting supports. It may be difficult for people to ask or to identify when they need help, so social workers could work with clients to help them recognize these moments. Based on the findings of this research, there was a difference between access to and use of social support. Fathers identified that coworkers are more often used for informational and emotional support over siblings or parents-in-laws. So, it may be helpful for social workers to discuss with parents the different types of social support. For example, using the information from this study, they may discuss with parents the three types of social support (i.e. information, instrumental, and emotional) and their comfort level with asking for support in these areas.

In addition to identifying support providers, it might also be useful to help parents identify situations that they may need to activate their parenting support. This may include identifying stressors or feelings they have when stress is increasing so that they can seek support when needed. There has been some work with this in the area of child

abuse prevention, specifically in the prevention of Shaken Baby Syndrome where one of the primary prevention tools is to encourage to parents to call family or friends when they are feeling overwhelmed (Centers for Disease Control and Prevention, n.d.). They may also want to make a regular plan to engage social supports without having to wait for a crisis.

Engaging fathers to develop father specific support groups may help fathers connect to additional parenting support networks. Social workers may also work with fathers to identify their own parenting support group, including father or parent role models. As a way of helping the transition to fatherhood, social workers might work with fathers to identify people in their lives who they think are good parents or who they would like to model in parenting. Talking about these things with fathers may assist them in thinking about parenting in a purposeful matter. These support groups might also be offered through early child education or father involvement programs. An online support group similar to the New Fathers Network that provides online peer-to-peer support as well as access to professional staff has been successful in promoting parenting satisfaction (Hudson et al., 2003). Support groups can work to broaden fathers' support networks and provide a space for them to focus on issues specific to fathers' needs.

This may be specifically helpful for fathers who were exposed to domestic violence as children. This study found a relationship between men exposed to domestic violence and less access to and use of parenting supports, but that when they did access or use their parenting supports it improved risk for family violence. Engaging men through these father support groups may help increase exposed men's access to and use of parenting supports.

Finally, social workers can work within the meso and macro systems to encourage social support providers to offer resources to parents proactively. In the same vein as bystander intervention programs, social workers may work in the community to educate and promote social supports for parents, helping family, friends, and medical providers, etc. identify parents in need and the types of resources that may be helpful to them.

Implications for Policy. Along the same lines as creating a community that is supportive of parents, social workers may want to develop programs and policies that promote parenting support. One way to do this is by extending home visiting program services to all parents. Current home visiting programs focus on parents at high risk for child maltreatment (Duggan et al., 2007; Eckenrode et al., 2000). These programs have been successful in improving mother's parenting (M. L. Rodriguez, Dumont, Mitchell-Herzfeld, Walden, & Greene, 2010) and reducing risks for child maltreatment (Duggan et al., 2004; Olds et al., 2007). Creating and extending home visiting programs to all new parents may help them expand their parenting support network, remove any potential stigma around home visiting that may inhibit parents from enrolling, and provide a proactive parenting support provider.

Another way to support parents is to support economic policies that can ease stressors for parents. The research results show that stress is a significant predictor for both child abuse and domestic violence. Promoting programs like the Women, Infants, and Children (WIC) nutrition program may help to reduce economic stressors by providing supplemental food support so parents' money can go to other needed resources. Over the last several years, much work has been done to promote WIC services and remove the stigma associated with it by expanding acceptance of WIC vouchers and

making it easier for people to use their benefits (IOM, 2011). Continued expansion and promotion of WIC and other economic policies that promote parenting support is recommended.

To go one step further in terms of promoting WIC and the expansion of programs that help support parents, is to recommend an examination of the use of language in promoting or deterring accessibility. For example, WIC is an example of program language that appears to exclude fathers. While WIC is actually the reference to the eligibility categories, it does not mention fathers specifically. As a result, men may be less likely to access this resource if it is needed for an infant or child. A shift in language such as Parents, Infants, and Children may help men feel more comfortable accessing the program and provide an additional parenting support.

Finally, programs and policies could be developed to address childcare issues. Childcare can be a costly stressor for parents, and childcare cooperatives or exchanges may be able to reduce this stress. A childcare cooperative or exchange is a group of families that share childcare responsibilities. The benefits of childcare cooperatives or exchanges are twofold. First, they may reduce the out-of-pocket expenses for parents to relieve the economic burden. Second, they may expand a parents social support network, which may provide additional supports in other areas.

Implications for Research. Social workers could continue to conduct research on the benefits of social support. For example, the development and testing of a parenting support assessment tool to use in social work practice may be useful in helping social workers assess for supports. The tool can include similar measures used in this research study but could be expanded to provide background information about the parenting

supports. Further research that examines the differences in access to and use of parenting supports is also recommended. It might be helpful to examine the role of physical proximity in the access to and use of parenting supports. The results of this study showed a slight difference in those who were identified as accessible and those who were identified as utilized. Physical proximity might be one reasonable explanation for the difference. Further research on the ways that men access and use their social supports may help to provide additional understanding of potential ways to promote social support.

Over the course of the last 30 years, fatherhood research has increased. However, more research is needed on the needs of men as they transition to fatherhood. There is little known on men's experiences of this transition. Qualitative research that explores the emotional and social process of transitioning to fatherhood could help to shed light on the potential needs of fathers and where parenting support may be most useful. The results of this research project highlight the beneficial relationship between parenting support and parenting stress and the subsequent relationship with risks for family violence. More research on how men use parenting supports, causes of parenting stress, and risks for family violence are needed. Exploratory research to understand the ways and reasons men access parenting support would be a good start in developing a deeper understanding of the needs of men in terms of the transition to fatherhood. By focusing on their current behaviors rather than perceived needs as done by much of the fatherhood research thus far, provides an opportunity to highlight areas of success while identifying gaps.

Childhood Exposure to Domestic Violence

Implications for practice. The findings from this research study underscore the life-long effects of exposure to domestic violence. First, young people exposed to

domestic violence may need supports well into adulthood. Due to many issues, services for children exposed to domestic violence may be limited and services for adults are virtually non-existent. Social workers might work to develop programs and services for adults. This may include the development of an online space that includes an area for peer-to-peer support and resources on exposure to domestic violence including the effects over the life course.

In addition, screening for childhood exposure to domestic violence during pregnancy might help social workers identify parents who may need additional support through the transition to parenthood. The research findings suggest a relationship between men who were exposed to domestic violence and an increase risk for parenting stress and family violence. In addition, parenting support was associated with a reduction in risks for family violence. Therefore, early identification may provide an early opportunity for prevention and intervention work. Specifically, social workers could discuss with parents the type of parenting they experienced in childhood versus what type of parent they would like to be. Social workers can also discuss available positive social supports and how to activate them. Finally, they can also provide support and resources that may be needed specific to processing their history of exposure (e.g. therapy).

As previously discussed, there are very few programs or resources focused on adults who were exposed to domestic violence during childhood to help them develop and transition into healthy partners and parents. This study shows there is a relationship between exposure to domestic violence in childhood and risks for family violence. An educational group for these adults focused on creating healthy relationships, and positive parenting may go a long way in preventing future perpetration of violence.

Implications for policy. A policy recommendation is to increase access to services for children exposed to domestic violence. Current budgetary restraints may limit the services provided to children (Edleson, Nguyen, & Kimball, 2011). However, the long-lasting effects of domestic violence emphasize the need for additional resources to provide services for children exposed to domestic violence. Social workers might analyze current policies to highlight effectiveness, gaps, and potential long-term economic impacts of child exposure to domestic violence in order to advocate for additional funding or program development in this area.

Implications for research. Currently, there is very little research available on the long-term effects of exposure to domestic violence in childhood. Research is needed in understanding the effects of exposure on the individual development, intimate relationships, and parenting. The negative effects of exposure to domestic violence are well documented in the research literature (for example: Brown et al., 2009; Carpenter & Stacks, 2009; Evans, Davies, & DiLillo, 2008), but there is very little the effects over the life course. Life course research methods could be used to help develop a better understanding of the long-lasting and far-reaching effects of exposure to domestic violence in childhood. This research may inform future development of programs and education materials for adults who were exposed to domestic violence in childhood. In the end, this knowledge may help to advance primary prevention efforts in domestic violence and child abuse.

Limitations

There are several limitations of this research study that affect the interpretation of the results. Although the respondents were recruited nationally across the United States,

the participants were overwhelmingly European-American and English-speaking, which limits the generalizability of the results to a broader population. On average, the participants were generally well educated and had incomes in higher income brackets. The results may be skewed since race, language, education, and income all may have an effect on the accessibility and use of supports (e.g. more education equals larger support network or higher income may be less likely to draw on informal supports). Recruiting techniques likely played a role in the type of participant. Given the fact that men were recruited from online resources with a father focus, they were likely already well connected and may not be representative of the larger population.

Another important limitation is that a respondent's sexual orientation was not accounted for, which limits the results in terms of propensity for abusiveness. The scale was developed and validated on men's propensity to abuse of women, so the results may only be confined to the abuse of women and not necessarily their male partners. Given that sexual orientation may be fluid, the results on these fathers' propensity of abusiveness should not be discounted.

Finally, this study did not identify the demographics or context of fathers' parenting supports. This is particularly important in understanding what a parenting support network can bring in terms of support. For example, a broad multicultural parenting support network may bring opportunities for alternative parenting styles versus a homogenous parenting support network.

Despite these limitations, the results of this research provide new understanding of the benefits of parenting support to help reduce parenting stress and risks for family

violence. They also highlight the protective nature of parenting support among fathers exposed to domestic violence in childhood.

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Appendix A

Data Collection Tool

Social Support for Fathers
Eligibility 1
<p>1. Are you currently parenting at least one child under the age of 1 year? Parenting is defined as at least weekly contact with your child.</p> <p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>2. Please select your sex</p> <p><input type="radio"/> Male</p> <p><input type="radio"/> Female</p>

Social Support for Fathers

Consent Statement

The Effects of Social Support on Parenting Among Fathers

You are invited to be in a research study of social support for fathers. You were selected as a possible participant because you identified as being a father of a child under the age of 12 months. We ask that you read this form and ask any questions you may have before agreeing to be in the study.

This study is being conducted by: Ericka Kimball at the University of Minnesota's School of Social Work.

Background Information

The purpose of this study is to look at how social supports effects parenting stress among fathers. This research will be used to identify areas for further development in supporting fathers in reducing parenting stress.

Procedures

If you agree to be in this study, you will be asked to complete a ONE time questionnaire asking about your social support, possible exposure to violence in your childhood, parenting stress, and interactions with your child. It will take about 25 minutes to complete the questionnaire but NO MORE than 60-minutes to complete.

Risks and Benefits of Being in the Study

There is a slight risk that the questions regarding exposure to violence may invoke an emotional reaction. In order to minimize this risk, questions are posed generally and do not ask for specific experiences.

While there are no direct benefits to participating in this study, an indirect benefit of participation is that the responses collected will provide better knowledge about social supports for fathers and the effect on parenting stress.

Compensation

There is no compensation for your participation. However, upon completion and submission of the online questionnaire, you will have the opportunity to submit your email address to enter into a drawing for 1 of 12 \$25 Amazon gift certificate as thank you for participating. At the conclusion of the research study (no later than April 16, 2012), 12 email addresses will be randomly selected to receive a \$25 Amazon gift certificate. This study is recruiting a maximum of 200 participants. If 200 participants enter their email address for the drawing, your odds of winning a \$25 Amazon gift certificate are 188:12.

Confidentiality

The records of this study will be kept private. Any report published will not include any information that will make it possible to identify you. Research records will be stored securely and only my advisor at the University of Minnesota, Jeffrey L. Edleson, and I will have access to the records.

Voluntary Nature of the Study

Participation in this study is voluntary. Your decision whether or not to participate will not affect your current or future relations with the University of Minnesota. If you decide to participate, you are free to withdraw at any time with out affecting those relationships.

Contacts and Questions

The researcher conducting this study is: Ericka Kimball. If you have questions, you are encouraged to contact me at 105 Peters Hall 1404 Gortner Ave, St. Paul, MN 55108, 612-624-8637, kimba053@umn.edu. My advisor for this project is Professor Jeffrey L. Edleson, PhD; 612-624-8795,

Social Support for Fathers

jedleson@umn.edu.

If you have any questions or concerns regarding this study and would like to talk to someone other than the researcher(s), you are encouraged to contact the Research Subjects' Advocate Line, D528 Mayo, 420 Delaware St. Southeast, Minneapolis, Minnesota 55455; (612) 625-1650.

You may print a copy of this information to keep for your records.

3. Statement of Consent:

By clicking on the "yes" button you are stating the following:

I have read the above information. I have asked questions and have received answers. I consent to participate in the study.

- Yes
- No

4. I am 18 year or older.

- Yes
- No

Social Support for Fathers

Eligibility 2

5. Please use the drop down menu to select the age range and sex of each of your children. If you have more than 4 children, please use space to provide age and sex of any additional children.

	Age	Sex
Child 1	<input type="text"/>	<input type="text"/>
Child 2	<input type="text"/>	<input type="text"/>
Child 3	<input type="text"/>	<input type="text"/>
Child 4	<input type="text"/>	<input type="text"/>

If more than 4 children, please provide age and sex for each additional child

<input type="text"/>	<input type="text"/>
----------------------	----------------------

Social Support for Fathers

Childhood experiences

The following questions are about your experiences during your childhood. For the purposes of this section, your childhood is defined as the time up until you turned 18 years old. When answering the following questions, your parents are defined as the MAIN adults in your childhood who took care of you. A parent may be a mother, father, stepmother, stepfather, grandparent(s), foster parent(s), adoptive parent(s), aunt, or uncle.

6. Please identify the TWO main adults in your childhood that you are using to represent your parents for the following questions.

<input type="checkbox"/> Biological Mother	<input type="checkbox"/> Foster mother
<input type="checkbox"/> Biological Father	<input type="checkbox"/> Foster father
<input type="checkbox"/> Stepmother	<input type="checkbox"/> Adoptive mother
<input type="checkbox"/> Stepfather	<input type="checkbox"/> Adoptive father
<input type="checkbox"/> Grandmother	<input type="checkbox"/> Aunt
<input type="checkbox"/> Grandfather	<input type="checkbox"/> Uncle

Other (please specify)

7. As a child, did you ever over hear your parents yell at each other?

Yes

No

Social Support for Fathers**Childhood experiences 2**

8. As a child, did you ever hear your parents physically fight (e.g. hitting, kicking, slapping)?

- Yes
 No

9. As a child, did you ever see the aftermath (e.g. someone was hurt, broken furniture, police being called) of a fight between your parents?

- Yes
 No

10. As a child, did you ever see your parent punch a wall, rip a phone out of the wall, smash pictures, break furniture, etc.?

- Yes
 No

11. As a child, did you ever see your parents physically fight (e.g. hitting, kicking, slapping)?

- Yes
 No

12. As a child, did you ever try to stop your parents from physically fighting?

- Yes
 No

13. As a child, were you ever injured during a fight between your parents?

- Yes
 No

Social Support for Fathers

Parenting Stress

14. The following include a series of statements that may be applied to you. Read each statement and determine if you AGREE or DISAGREE with the statement.

	Strongly Agree	Agree	Not Sure	Disagree	Strongly Disagree
I often have the feeling that I cannot handle things very well.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I find myself giving up more of my life to meet my children's needs than I ever expected.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel trapped by my responsibilities as a parent.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Since having this child, I have been unable to do new and different things.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Since having a child, I feel that I am almost never able to do things that I like to do.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am unhappy with the last purchase of clothing I made for myself.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
There are quite a few things that bother me about my life.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having a child has caused more problems than I expected in my relationship with my partner.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel alone without friends.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am not as interested in people as I used to be.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I don't enjoy things as I used to.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Social Support for Fathers

Social Support

The following includes a series of questions, which may be applied to the people and types of support you currently receive. Please select all of the people who are available to you as support. You may use the same people for each question or they may vary by the type of support provide.

Social Support for Fathers

Social Support 1

15. Please check the box of ANY and ALL the people you can talk to about things that are PERSONAL AND PRIVATE. Then check the box if during the last MONTH, you have talked to them about things that were personal and private.

	Select	In the last month
Partner	<input type="checkbox"/>	<input type="checkbox"/>
Friend	<input type="checkbox"/>	<input type="checkbox"/>
Sister	<input type="checkbox"/>	<input type="checkbox"/>
Brother	<input type="checkbox"/>	<input type="checkbox"/>
Biological Mother	<input type="checkbox"/>	<input type="checkbox"/>
Biological Father	<input type="checkbox"/>	<input type="checkbox"/>
Stepmother	<input type="checkbox"/>	<input type="checkbox"/>
Stepfather	<input type="checkbox"/>	<input type="checkbox"/>
Grandmother	<input type="checkbox"/>	<input type="checkbox"/>
Grandfather	<input type="checkbox"/>	<input type="checkbox"/>
Foster mother	<input type="checkbox"/>	<input type="checkbox"/>
Foster father	<input type="checkbox"/>	<input type="checkbox"/>
Adoptive mother	<input type="checkbox"/>	<input type="checkbox"/>
Adoptive father	<input type="checkbox"/>	<input type="checkbox"/>
Mother-in-law	<input type="checkbox"/>	<input type="checkbox"/>
Father-in-law	<input type="checkbox"/>	<input type="checkbox"/>
Aunt	<input type="checkbox"/>	<input type="checkbox"/>
Uncle	<input type="checkbox"/>	<input type="checkbox"/>
Co-worker	<input type="checkbox"/>	<input type="checkbox"/>
Social worker	<input type="checkbox"/>	<input type="checkbox"/>
Therapist	<input type="checkbox"/>	<input type="checkbox"/>
Nurse	<input type="checkbox"/>	<input type="checkbox"/>
Doctor	<input type="checkbox"/>	<input type="checkbox"/>
Teacher	<input type="checkbox"/>	<input type="checkbox"/>
No need	<input type="checkbox"/>	<input type="checkbox"/>
None	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify)	<input type="text"/>	

Social Support for Fathers

Social Support 2

16. Please check the box of ANY and ALL people you rely on to help you when you are feeling STRESSED OR OVERWHELMED. Then select the box if in the past MONTH you have relied on them to help you when you were feeling stressed or overwhelmed.

	Select	In the last month
Partner	<input type="checkbox"/>	<input type="checkbox"/>
Friend	<input type="checkbox"/>	<input type="checkbox"/>
Sister	<input type="checkbox"/>	<input type="checkbox"/>
Brother	<input type="checkbox"/>	<input type="checkbox"/>
Biological Mother	<input type="checkbox"/>	<input type="checkbox"/>
Biological Father	<input type="checkbox"/>	<input type="checkbox"/>
Stepmother	<input type="checkbox"/>	<input type="checkbox"/>
Stepfather	<input type="checkbox"/>	<input type="checkbox"/>
Grandmother	<input type="checkbox"/>	<input type="checkbox"/>
Grandfather	<input type="checkbox"/>	<input type="checkbox"/>
Foster mother	<input type="checkbox"/>	<input type="checkbox"/>
Foster father	<input type="checkbox"/>	<input type="checkbox"/>
Adoptive mother	<input type="checkbox"/>	<input type="checkbox"/>
Adoptive father	<input type="checkbox"/>	<input type="checkbox"/>
Mother-in-law	<input type="checkbox"/>	<input type="checkbox"/>
Father-in-law	<input type="checkbox"/>	<input type="checkbox"/>
Aunt	<input type="checkbox"/>	<input type="checkbox"/>
Uncle	<input type="checkbox"/>	<input type="checkbox"/>
Co-worker	<input type="checkbox"/>	<input type="checkbox"/>
Social worker	<input type="checkbox"/>	<input type="checkbox"/>
Therapist	<input type="checkbox"/>	<input type="checkbox"/>
Nurse	<input type="checkbox"/>	<input type="checkbox"/>
Doctor	<input type="checkbox"/>	<input type="checkbox"/>
Teacher	<input type="checkbox"/>	<input type="checkbox"/>
No need	<input type="checkbox"/>	<input type="checkbox"/>
None	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify)	<input type="text"/>	

Social Support for Fathers

Social Support 3

17. Please select ANY and ALL people who you can go to if you have an ARGUMENT with your partner. Then select the box if in the past MONTH you have relied on them to help you when you had an argument with your partner.

	Select	In the last month
Partner	<input type="checkbox"/>	<input type="checkbox"/>
Friend	<input type="checkbox"/>	<input type="checkbox"/>
Sister	<input type="checkbox"/>	<input type="checkbox"/>
Brother	<input type="checkbox"/>	<input type="checkbox"/>
Biological Mother	<input type="checkbox"/>	<input type="checkbox"/>
Biological Father	<input type="checkbox"/>	<input type="checkbox"/>
Stepmother	<input type="checkbox"/>	<input type="checkbox"/>
Stepfather	<input type="checkbox"/>	<input type="checkbox"/>
Grandmother	<input type="checkbox"/>	<input type="checkbox"/>
Grandfather	<input type="checkbox"/>	<input type="checkbox"/>
Foster mother	<input type="checkbox"/>	<input type="checkbox"/>
Foster father	<input type="checkbox"/>	<input type="checkbox"/>
Adoptive mother	<input type="checkbox"/>	<input type="checkbox"/>
Adoptive father	<input type="checkbox"/>	<input type="checkbox"/>
Mother-in-law	<input type="checkbox"/>	<input type="checkbox"/>
Father-in-law	<input type="checkbox"/>	<input type="checkbox"/>
Aunt	<input type="checkbox"/>	<input type="checkbox"/>
Uncle	<input type="checkbox"/>	<input type="checkbox"/>
Co-worker	<input type="checkbox"/>	<input type="checkbox"/>
Social worker	<input type="checkbox"/>	<input type="checkbox"/>
Therapist	<input type="checkbox"/>	<input type="checkbox"/>
Nurse	<input type="checkbox"/>	<input type="checkbox"/>
Doctor	<input type="checkbox"/>	<input type="checkbox"/>
Teacher	<input type="checkbox"/>	<input type="checkbox"/>
No need	<input type="checkbox"/>	<input type="checkbox"/>
None	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify)	<input type="text"/>	

Social Support for Fathers

Social Support 4

The following include a series of questions, which may be applied to the people and types of support you receive now that you have become a parent. Please select all of the people who are available to you as support. You may use the same people for each question or they may vary by the type of support provide.

18. Please select ANY and ALL of the people in your life that you identify as PARENTING ROLE MODELS. That is the people who you look up to as a "good parent."

- | | | |
|--|--|--|
| <input type="checkbox"/> Partner | <input type="checkbox"/> Stepfather | <input type="checkbox"/> Mother-in-law |
| <input type="checkbox"/> Friend | <input type="checkbox"/> Grandmother | <input type="checkbox"/> Father-in-law |
| <input type="checkbox"/> Sister | <input type="checkbox"/> Grandfather | <input type="checkbox"/> Aunt |
| <input type="checkbox"/> Brother | <input type="checkbox"/> Foster mother | <input type="checkbox"/> Uncle |
| <input type="checkbox"/> Biological Mother | <input type="checkbox"/> Foster father | <input type="checkbox"/> Co-worker |
| <input type="checkbox"/> Biological Father | <input type="checkbox"/> Adoptive mother | <input type="checkbox"/> No need |
| <input type="checkbox"/> Stepmother | <input type="checkbox"/> Adoptive father | <input type="checkbox"/> None |

Other (please specify)

Social Support for Fathers

Social Support 5

19. Please select ANY and ALL of the people in your life that you go to for PARENTING ADVICE. Then select the box if in the past MONTH you have asked for parenting advice.

	Select	In the last month
Partner	<input type="checkbox"/>	<input type="checkbox"/>
Friend	<input type="checkbox"/>	<input type="checkbox"/>
Sister	<input type="checkbox"/>	<input type="checkbox"/>
Brother	<input type="checkbox"/>	<input type="checkbox"/>
Biological Mother	<input type="checkbox"/>	<input type="checkbox"/>
Biological Father	<input type="checkbox"/>	<input type="checkbox"/>
Stepmother	<input type="checkbox"/>	<input type="checkbox"/>
Stepfather	<input type="checkbox"/>	<input type="checkbox"/>
Grandmother	<input type="checkbox"/>	<input type="checkbox"/>
Grandfather	<input type="checkbox"/>	<input type="checkbox"/>
Foster mother	<input type="checkbox"/>	<input type="checkbox"/>
Foster father	<input type="checkbox"/>	<input type="checkbox"/>
Adoptive mother	<input type="checkbox"/>	<input type="checkbox"/>
Adoptive father	<input type="checkbox"/>	<input type="checkbox"/>
Mother-in-law	<input type="checkbox"/>	<input type="checkbox"/>
Father-in-law	<input type="checkbox"/>	<input type="checkbox"/>
Aunt	<input type="checkbox"/>	<input type="checkbox"/>
Uncle	<input type="checkbox"/>	<input type="checkbox"/>
Co-worker	<input type="checkbox"/>	<input type="checkbox"/>
Social worker	<input type="checkbox"/>	<input type="checkbox"/>
Therapist	<input type="checkbox"/>	<input type="checkbox"/>
Nurse	<input type="checkbox"/>	<input type="checkbox"/>
Doctor	<input type="checkbox"/>	<input type="checkbox"/>
Teacher	<input type="checkbox"/>	<input type="checkbox"/>
No need	<input type="checkbox"/>	<input type="checkbox"/>
None	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify)	<input type="text"/>	

Social Support for Fathers

Social Support 6

20. Please select ANY and ALL of the the people in your life that you go to for RELATIONSHIP ADVICE. Then select the box if in the past MONTH you have asked for relationship advice.

	Select	In the last month
Partner	<input type="checkbox"/>	<input type="checkbox"/>
Friend	<input type="checkbox"/>	<input type="checkbox"/>
Sister	<input type="checkbox"/>	<input type="checkbox"/>
Brother	<input type="checkbox"/>	<input type="checkbox"/>
Biological Mother	<input type="checkbox"/>	<input type="checkbox"/>
Biological Father	<input type="checkbox"/>	<input type="checkbox"/>
Stepmother	<input type="checkbox"/>	<input type="checkbox"/>
Stepfather	<input type="checkbox"/>	<input type="checkbox"/>
Grandmother	<input type="checkbox"/>	<input type="checkbox"/>
Grandfather	<input type="checkbox"/>	<input type="checkbox"/>
Foster mother	<input type="checkbox"/>	<input type="checkbox"/>
Foster father	<input type="checkbox"/>	<input type="checkbox"/>
Adoptive mother	<input type="checkbox"/>	<input type="checkbox"/>
Adoptive father	<input type="checkbox"/>	<input type="checkbox"/>
Mother-in-law	<input type="checkbox"/>	<input type="checkbox"/>
Father-in-law	<input type="checkbox"/>	<input type="checkbox"/>
Aunt	<input type="checkbox"/>	<input type="checkbox"/>
Uncle	<input type="checkbox"/>	<input type="checkbox"/>
Co-worker	<input type="checkbox"/>	<input type="checkbox"/>
Social worker	<input type="checkbox"/>	<input type="checkbox"/>
Therapist	<input type="checkbox"/>	<input type="checkbox"/>
Nurse	<input type="checkbox"/>	<input type="checkbox"/>
Doctor	<input type="checkbox"/>	<input type="checkbox"/>
Teacher	<input type="checkbox"/>	<input type="checkbox"/>
No need	<input type="checkbox"/>	<input type="checkbox"/>
None	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify)	<input type="text"/>	

Social Support for Fathers

Social Support 7

The following include a series of questions, which may be applied to the people and types of support you receive now that you have become a parent. Please select all of the people who are available to you as support. You may use the same people for each question or they may vary by the type of support provide.

21. Please select ANY and ALL of the people in your life who would LEND YOU MONEY if needed. Then select the box if in the past MONTH that person has lent you money.

	Select	In the last month
Partner	<input type="checkbox"/>	<input type="checkbox"/>
Friend	<input type="checkbox"/>	<input type="checkbox"/>
Sister	<input type="checkbox"/>	<input type="checkbox"/>
Brother	<input type="checkbox"/>	<input type="checkbox"/>
Biological Mother	<input type="checkbox"/>	<input type="checkbox"/>
Biological Father	<input type="checkbox"/>	<input type="checkbox"/>
Stepmother	<input type="checkbox"/>	<input type="checkbox"/>
Stepfather	<input type="checkbox"/>	<input type="checkbox"/>
Grandmother	<input type="checkbox"/>	<input type="checkbox"/>
Grandfather	<input type="checkbox"/>	<input type="checkbox"/>
Foster mother	<input type="checkbox"/>	<input type="checkbox"/>
Foster father	<input type="checkbox"/>	<input type="checkbox"/>
Adoptive mother	<input type="checkbox"/>	<input type="checkbox"/>
Adoptive father	<input type="checkbox"/>	<input type="checkbox"/>
Mother-in-law	<input type="checkbox"/>	<input type="checkbox"/>
Father-in-law	<input type="checkbox"/>	<input type="checkbox"/>
Aunt	<input type="checkbox"/>	<input type="checkbox"/>
Uncle	<input type="checkbox"/>	<input type="checkbox"/>
Co-worker	<input type="checkbox"/>	<input type="checkbox"/>
No need	<input type="checkbox"/>	<input type="checkbox"/>
None	<input type="checkbox"/>	<input type="checkbox"/>

Other (please specify)

Social Support for Fathers

Social Support 8

22. Please select ANY and ALL people in your life who will help you with CHILD CARE. Then select the box if in the past MONTH this person has helped you with child care.

	Select	In the last month
Partner	<input type="checkbox"/>	<input type="checkbox"/>
Friend	<input type="checkbox"/>	<input type="checkbox"/>
Sister	<input type="checkbox"/>	<input type="checkbox"/>
Brother	<input type="checkbox"/>	<input type="checkbox"/>
Biological Mother	<input type="checkbox"/>	<input type="checkbox"/>
Biological Father	<input type="checkbox"/>	<input type="checkbox"/>
Stepmother	<input type="checkbox"/>	<input type="checkbox"/>
Stepfather	<input type="checkbox"/>	<input type="checkbox"/>
Grandmother	<input type="checkbox"/>	<input type="checkbox"/>
Grandfather	<input type="checkbox"/>	<input type="checkbox"/>
Foster mother	<input type="checkbox"/>	<input type="checkbox"/>
Foster father	<input type="checkbox"/>	<input type="checkbox"/>
Adoptive mother	<input type="checkbox"/>	<input type="checkbox"/>
Adoptive father	<input type="checkbox"/>	<input type="checkbox"/>
Mother-in-law	<input type="checkbox"/>	<input type="checkbox"/>
Father-in-law	<input type="checkbox"/>	<input type="checkbox"/>
Aunt	<input type="checkbox"/>	<input type="checkbox"/>
Uncle	<input type="checkbox"/>	<input type="checkbox"/>
Co-worker	<input type="checkbox"/>	<input type="checkbox"/>
No need	<input type="checkbox"/>	<input type="checkbox"/>
None	<input type="checkbox"/>	<input type="checkbox"/>

Other (please specify)

Social Support for Fathers

Social Support 9

23. Please select all of the people in your life who will help you with a RIDE TO WORK, FIX YOUR CAR, ETC. Then select the box if in the past MONTH you have relied on them to help you with a ride to work, fix your car, etc..

	Select	In the last month
Partner	<input type="checkbox"/>	<input type="checkbox"/>
Friend	<input type="checkbox"/>	<input type="checkbox"/>
Sister	<input type="checkbox"/>	<input type="checkbox"/>
Brother	<input type="checkbox"/>	<input type="checkbox"/>
Biological Mother	<input type="checkbox"/>	<input type="checkbox"/>
Biological Father	<input type="checkbox"/>	<input type="checkbox"/>
Stepmother	<input type="checkbox"/>	<input type="checkbox"/>
Stepfather	<input type="checkbox"/>	<input type="checkbox"/>
Grandmother	<input type="checkbox"/>	<input type="checkbox"/>
Grandfather	<input type="checkbox"/>	<input type="checkbox"/>
Foster mother	<input type="checkbox"/>	<input type="checkbox"/>
Foster father	<input type="checkbox"/>	<input type="checkbox"/>
Adoptive mother	<input type="checkbox"/>	<input type="checkbox"/>
Adoptive father	<input type="checkbox"/>	<input type="checkbox"/>
Mother-in-law	<input type="checkbox"/>	<input type="checkbox"/>
Father-in-law	<input type="checkbox"/>	<input type="checkbox"/>
Aunt	<input type="checkbox"/>	<input type="checkbox"/>
Uncle	<input type="checkbox"/>	<input type="checkbox"/>
Co-worker	<input type="checkbox"/>	<input type="checkbox"/>
No need	<input type="checkbox"/>	<input type="checkbox"/>
None	<input type="checkbox"/>	<input type="checkbox"/>

Other (please specify)

Social Support for Fathers

Child interactions

24. Read each statement and determine if you AGREE or DISAGREE with the statement. If you agree with a statement, check Agree. If you disagree with a statement, check Disagree. Be honest when giving your answers. Remember to read each statement; it is important not to skip any statement.

	Agree	Disagree
I have always been strong and healthy.	<input type="radio"/>	<input type="radio"/>
I am a confused person.	<input type="radio"/>	<input type="radio"/>
I do not trust most people.	<input type="radio"/>	<input type="radio"/>
People expect too much from me.	<input type="radio"/>	<input type="radio"/>
I am often mixed up.	<input type="radio"/>	<input type="radio"/>
You cannot depend on others.	<input type="radio"/>	<input type="radio"/>
I am a happy person.	<input type="radio"/>	<input type="radio"/>
I am often angry inside.	<input type="radio"/>	<input type="radio"/>
Sometimes I feel all alone in the world.	<input type="radio"/>	<input type="radio"/>
Everything in a home should always be in its place.	<input type="radio"/>	<input type="radio"/>
I often feel rejected.	<input type="radio"/>	<input type="radio"/>
I am often lonely inside.	<input type="radio"/>	<input type="radio"/>
Little boys should never learn sissy games.	<input type="radio"/>	<input type="radio"/>
I often feel very frustrated.	<input type="radio"/>	<input type="radio"/>
Children should never disobey.	<input type="radio"/>	<input type="radio"/>
Sometimes I fear that I will lose control of myself.	<input type="radio"/>	<input type="radio"/>
I sometimes wish my father would have loved me more.	<input type="radio"/>	<input type="radio"/>
My telephone number is unlisted.	<input type="radio"/>	<input type="radio"/>
I sometime worry that I will not have enough to eat.	<input type="radio"/>	<input type="radio"/>
I have never wanted to hurt someone else.	<input type="radio"/>	<input type="radio"/>
I am an unlucky person.	<input type="radio"/>	<input type="radio"/>
I am usually a quiet person.	<input type="radio"/>	<input type="radio"/>
Things have usually gone against me in my life.	<input type="radio"/>	<input type="radio"/>
I have a child who is bad.	<input type="radio"/>	<input type="radio"/>
I sometimes think of myself first.	<input type="radio"/>	<input type="radio"/>
I sometimes feel worthless.	<input type="radio"/>	<input type="radio"/>
I am sometimes very sad.	<input type="radio"/>	<input type="radio"/>
I often feel worried.	<input type="radio"/>	<input type="radio"/>
A child should never talk back.	<input type="radio"/>	<input type="radio"/>

Social Support for Fathers

I am often easily upset.	<input type="radio"/>	<input type="radio"/>
I am often worried inside.	<input type="radio"/>	<input type="radio"/>
Sometimes I do not like the way I act.	<input type="radio"/>	<input type="radio"/>
People have caused me a lot of pain.	<input type="radio"/>	<input type="radio"/>
Children should stay clean.	<input type="radio"/>	<input type="radio"/>
I have a child who gets into trouble a lot.	<input type="radio"/>	<input type="radio"/>
I find it hard to relax	<input type="radio"/>	<input type="radio"/>
These days a person doesn't really know on whom one can count.	<input type="radio"/>	<input type="radio"/>
My life is happy.	<input type="radio"/>	<input type="radio"/>
I have a physical handicap.	<input type="radio"/>	<input type="radio"/>
Children should have play clothes and good clothes.	<input type="radio"/>	<input type="radio"/>
Other people do not understand how I feel.	<input type="radio"/>	<input type="radio"/>
Children should be quiet and listen.	<input type="radio"/>	<input type="radio"/>
I have several close friends in my neighborhood.	<input type="radio"/>	<input type="radio"/>
My family fights a lot.	<input type="radio"/>	<input type="radio"/>
I have headaches.	<input type="radio"/>	<input type="radio"/>
I do not like to be touched by others.	<input type="radio"/>	<input type="radio"/>
I do not laugh very much.	<input type="radio"/>	<input type="radio"/>

Social Support for Fathers

Child interactions 2

25. Read each statement and determine if you AGREE or DISAGREE with the statement. If you agree with a statement, check Agree. If you disagree with a statement, check Disagree. Be honest when giving your answers. Remember to read each statement; it is important not to skip any statement

	Agree	Disagree
I have fears no one knows about.	<input type="radio"/>	<input type="radio"/>
My family has problems getting along.	<input type="radio"/>	<input type="radio"/>
Life often seems useless to me.	<input type="radio"/>	<input type="radio"/>
People do not understand me.	<input type="radio"/>	<input type="radio"/>
I often feel worthless.	<input type="radio"/>	<input type="radio"/>
Other people have made my life unhappy.	<input type="radio"/>	<input type="radio"/>
Sometimes I do not know why I act as I do.	<input type="radio"/>	<input type="radio"/>
I have many personal problems.	<input type="radio"/>	<input type="radio"/>
I often feel very upset.	<input type="radio"/>	<input type="radio"/>
My life is good.	<input type="radio"/>	<input type="radio"/>
A home should be spotless.	<input type="radio"/>	<input type="radio"/>
I am easily upset by my problems.	<input type="radio"/>	<input type="radio"/>
My parents did not understand me.	<input type="radio"/>	<input type="radio"/>
Many things in life make me angry.	<input type="radio"/>	<input type="radio"/>
My child has special problems.	<input type="radio"/>	<input type="radio"/>
Children should be seen and not heard.	<input type="radio"/>	<input type="radio"/>
I am often depressed.	<input type="radio"/>	<input type="radio"/>
I am often upset.	<input type="radio"/>	<input type="radio"/>
A good child keeps his toys and clothes neat and orderly.	<input type="radio"/>	<input type="radio"/>
Children should always be neat.	<input type="radio"/>	<input type="radio"/>
I have a child who is slow.	<input type="radio"/>	<input type="radio"/>
A parent must use punishment if he wants to control a child's behavior.	<input type="radio"/>	<input type="radio"/>
Children should never cause trouble.	<input type="radio"/>	<input type="radio"/>
A child needs very strict rules.	<input type="radio"/>	<input type="radio"/>
I often feel better than others.	<input type="radio"/>	<input type="radio"/>
As child I was often afraid.	<input type="radio"/>	<input type="radio"/>
I am often upset and do not know why.	<input type="radio"/>	<input type="radio"/>
I sometimes fear that my child will not love me.	<input type="radio"/>	<input type="radio"/>

Social Support for Fathers		
I have a good sex life.	<input type="radio"/>	<input type="radio"/>
I often feel very alone.	<input type="radio"/>	<input type="radio"/>
I often feel alone.	<input type="radio"/>	<input type="radio"/>
Right now, I am deeply in love.	<input type="radio"/>	<input type="radio"/>
My family has many problems.	<input type="radio"/>	<input type="radio"/>
Other people have made my life hard.	<input type="radio"/>	<input type="radio"/>
I laugh some almost every day.	<input type="radio"/>	<input type="radio"/>
I sometimes worry that my needs will not be met.	<input type="radio"/>	<input type="radio"/>
I often feel afraid.	<input type="radio"/>	<input type="radio"/>

Social Support for Fathers

Feelings

26. For the following set of statements please rate how well they describe you.

	Completely not descriptive of you	Mostly not descriptive of you	Mostly descriptive of you	Completely descriptive of you
I can make myself angry about something in the past just by thinking about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I get so angry, I feel that I might lose control.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If I let people see the way I feel, I'd be considered a hard person to get along with.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I see myself in totally different ways at different times.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel empty inside.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I tend to feel things in a somewhat extreme way, experiencing either great joy or intense despair.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
It is hard for me to be sure about what others will think of me, even people who have known me very well.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel people don't give me the respect I deserve unless I put pressure on them.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Somehow, I never know quite how to conduct myself with people.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I find it difficult to depend on other people.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I worry that I will be hurt if I allow myself to become too close to others.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am somewhat uncomfortable being close to others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Social Support for Fathers

27. Please select the rate that best describes how often the experience happened to you.

	Never occurred	Occasionally occurred	Often occurred	Always occurred
My parent punished me even for small offenses.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
As a child, I was physically punished or scolded in the presence of others.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My parent gave me more corporal punishment than I deserved.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt my parent thought it was my fault when he/she was unhappy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I think my parent was mean and grudging toward me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I was punished by my parent without having done anything.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My parent criticized me and told me how lazy and useless I was in front of others.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My parent would punch me hard, even for trifles.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My parent treated me in such a way that I felt ashamed.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I was beaten by my parent.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

28. How often have you experienced each of the following in the last TWO MONTHS? Please check the appropriate number.

	Never	Occasionally	Fairly often	Very often
Insomnia (trouble getting to sleep)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Restless sleep	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Nightmares	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Anxiety attacks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fear of women	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling tense all the time	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having trouble breathing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Social Support for Fathers**Demographics****29. Please select your current age**

- 18-22 years old
- 23-26 years old
- 27-30 years old
- 30-35 years old
- 36-40 years old
- over 40 years old

30. What is your first language? (Please select one)

- English
- Prefer not to answer

Non-English (please specify)

31. How do you identify your race/ethnicity?

- Alaska Native or American Indian
- Asian or Pacific Islander
- African-American
- Biracial/Multiracial
- European-American/Caucasian
- Latino/Hispanic
- Prefer not to answer

Other (please specify)

Social Support for Fathers**32. What is your current relationship status? (Please select one)**

- Married
- Partnered/Committed Relationship
- Single
- Divorced
- Separated
- Widowed
- Prefer not to answer

Other (please specify)

33. What is your highest level of education completed?

- Less than high school
- High school diploma/GED
- Associates degree (Technical or Community College)
- Bachelor's degree
- Master's degree
- Advanced graduate degree

34. What is your annual household income? (Please select one)

- \$10,000 or less
- \$10,001-29,999
- \$30,000-49,999
- \$50,000-74,999
- \$75,000-99,999
- \$100,000 or more
- Don't know
- Prefer not to answer

Social Support for Fathers

35. Please select all of the following ways you connect to your family and friends for support:

- In-person
- Phone—voice calls
- Phone—text messages
- Instant messaging online (Google Chat, AIM, Facebook chat, Yahoo, etc)
- Email
- Facebook or Google+
- Twitter
- Skype or Facetime
- No answer

Other (please specify)

If you need additional support or counseling after completing this survey, please contact 1-888-7HELPLINE for domestic violence counseling and referral information.

Appendix B

Recruitment Materials

For Twitter:

Help shed light on the needs of fathers. Dads needed for 20 minute survey of social support and parenting www.surveymonkey.com/support4dads

OR

Dads needed for U of MN survey on fathers and social support
www.surveymonkey.com/support4dads

OR

Fathers needed for 20 minute survey of social support and parenting
www.surveymonkey.com/support4dads

For Facebook, website, or newsletter postings:

Are you a father of a child 5 years old or younger?

Researchers from the University of Minnesota are looking for fathers to participate in a one-time survey about social support and parenting stress.

To be eligible for this study, you must be a father 18 years or older with a child under the age of 5. Your participation will about 20 minutes. Upon completion and submission of the survey, you will have the opportunity to enter your email address in a drawing for a \$25 Amazon gift certificate.

Additional information about the study can be found by clicking this link:

<http://www.surveymonkey.com/support4dads>

You can also contact that researcher at kimba053 [at] umn.edu

Dear [Potential Participant],

We are a team of researchers from the University of Minnesota conducting a survey of fathers to examine the effects of social support and parenting stress. We are wondering if we could post a survey link to our survey in your newsletter or on your website.

To be eligible for this study, you must be a father 18 years or older with a child 5 years old or younger. Participation will take less than 1 hour probably about 20 minutes. Upon

completion and submission of the survey, participants will have the opportunity to enter their email address in a drawing for a \$25 Amazon gift certificate.

The purpose of this research study is to examine the effects of social support on parenting among fathers. We will use the responses to gain an understanding of how social support affects fathering and identify the support needs of fathers.

Participation in this study is voluntary. Your decision whether or not to participate will not affect your current or future relations with the University of Minnesota. Participants you are free not to answer any questions or withdraw at any time without affecting those relationships.

If you are interested in participating in this research study, you can follow this link <http://www.surveymonkey.com/support4dads>. If you have any questions, please contact Ericka at 612-624-8637 or kimba053@umn.edu

Thank you for your time

Appendix C

Consent Statement

The Effects of Social Support on Parenting Among Fathers

You are invited to be in a research study of social support for fathers. You were selected as a possible participant because you identified as being a father of a child with a child 5 years old or younger. We ask that you read this form and ask any questions you may have before agreeing to be in the study.

This study is being conducted by: Ericka Kimball at the University of Minnesota's School of Social Work.

Background Information

The purpose of this study is to look at how social supports effects parenting stress among fathers. This research will be used to identify areas for further development in supporting fathers in reducing parenting stress.

Procedures

If you agree to be in this study, you will be asked to complete a ONE time questionnaire asking about your social support, possible exposure to violence in your childhood, parenting stress, and interactions with your child. It will take about 25 minutes to complete the questionnaire but NO MORE than 60-minutes to complete.

Risks and Benefits of being in the Study

There is a slight risk that the questions regarding exposure to violence may invoke an emotional reaction. In order to minimize this risk, questions are posed generally and do not ask for specific experiences.

While there are no direct benefits to participating in this study, an indirect benefit of participation is that the responses collected will provide better knowledge about social supports for fathers and the effect on parenting stress.

Compensation

There is no compensation for your participation. However, upon completion and submission of the online questionnaire, you will have the opportunity to submit your email address to enter into a drawing for 1 of 12 \$25 Amazon gift certificate as thank you for participating. At the conclusion of the research study (no later than April 16, 2012), 12 email addresses will be randomly selected to receive a \$25 Amazon gift certificate. This study is recruiting a maximum of 200 participants. If 200 participants enter their email address for the drawing, your odds of winning a \$25 Amazon gift certificate are 188:12.

Confidentiality

The records of this study will be kept private. Any report published will not include any information that will make it possible to identify you. Research records will be stored securely and only my advisor at the University of Minnesota, Jeffrey L. Edleson, and I will have access to the records.

Voluntary Nature of the Study

Participation in this study is voluntary. Your decision whether or not to participate will not affect your current or future relations with the University of Minnesota. If you decide to participate, you are free to withdraw at any time with out affecting those relationships.

Contacts and Questions

The researcher conducting this study is: Ericka Kimball. If you have questions, you are encouraged to contact me at 105 Peters Hall 1404 Gortner Ave, St. Paul, MN 55108, 612-624-8637, kimba053@umn.edu. My advisor for this project is Professor Jeffrey L. Edleson, PhD; 612-624-8795, jedleson@umn.edu.

If you have any questions or concerns regarding this study and would like to talk to someone other than the researcher(s), you are encouraged to contact the Research Subjects' Advocate Line, D528 Mayo, 420 Delaware St. Southeast, Minneapolis, Minnesota 55455; (612) 625-1650.

You may print a copy of this information to keep for your records.

Statement of Consent:

By clicking on the "yes" button you are stating the following:

I have read the above information. I have asked questions and have received answers. I consent to participate in the study.

Yes No

I am 18 years or older

Yes No

Appendix D

UNIVERSITY OF MINNESOTA

*Twin Cities Campus**Human Research Protection Program
Office of the Vice President for Research**D528 Mayo Memorial Building
420 Delaware Street S.E.
MMC 820
Minneapolis, MN 55455**Office: 612-626-5654
Fax: 612-626-6061
E-mail: irb@umn.edu or ibc@umn.edu
Website: <http://research.umn.edu/subjects/>*

November 16, 2011

Ericka L Kimball
140 Peters Hall
1404 Gortner Avenue
St. Paul, MN 55108RE: "Examining the effects of social support on parenting among fathers"
IRB Code Number: **1110P06081**

Dear Ms. Kimball

The Institutional Review Board (IRB) received your response to its stipulations. Since this information satisfies the federal criteria for approval at 45CFR46.111 and the requirements set by the IRB, final approval for the project is noted in our files. Upon receipt of this letter, you may begin your research.

IRB approval of this study includes the consent form received November 15, 2011 and recruitment materials received October 25, 2011.

The IRB would like to stress that subjects who go through the consent process are considered enrolled participants and are counted toward the total number of subjects, even if they have no further participation in the study. Please keep this in mind when calculating the number of subjects you request. This study is currently approved for 200 subjects. If you desire an increase in the number of approved subjects, you will need to make a formal request to the IRB.

For your records and for grant certification purposes, the approval date for the referenced project is November 11, 2011 and the Assurance of Compliance number is FWA00000312 (Fairview Health Systems Research FWA00000325, Gillette Children's Specialty Healthcare FWA00004003). Research projects are subject to continuing review and renewal; approval will expire one year from that date. You will receive a report form two months before the expiration date. If you would like us to send certification of approval to a funding agency, please tell us the name and address of your contact person at the agency.

As Principal Investigator of this project, you are required by federal regulations to:

*Inform the IRB of any proposed changes in your research that will affect human subjects, changes should not be initiated until written IRB approval is received.

*Report to the IRB subject complaints and unanticipated problems involving risks to subjects or others as they occur.

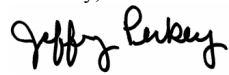
Driven to DiscoverSM

- *Inform the IRB immediately of results of inspections by any external regulatory agency (i.e. FDA).
- *Respond to notices for continuing review prior to the study's expiration date.
- *Cooperate with post-approval monitoring activities.

Information on the IRB process is available in the form of a guide for researchers entitled, What Every Researcher Needs to Know, found at <http://www.research.umn.edu/irb/WERNK/index.cfm>

The IRB wishes you success with this research. If you have questions, please call the IRB office at 612-626-5654.

Sincerely,



Jeffery Perkey, MLS, CIP
Research Compliance Supervisor
JP/bw

CC: Jeffrey Edleson