



Promoting Informed Action

SUBJECT: CHILDREN EXPOSED TO DOMESTIC VIOLENCE

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Note: The following text is based for the most part on three reference documents. Individual bibliographic references are given only for certain specific information derived from these documents or from other publications in the list of references.

Introduction

Exposure of children to domestic violence...

...a neglected problem

It is only fairly recently that action has begun to be taken with regard to children exposed to domestic violence. To date, most interventions have focused on abused women and little assistance has been offered to children exposed to this type of violence. However, such children are direct victims of domestic violence just as abused women are. The exposure of children to domestic violence is a problem in its own right that must not be ignored or considered of lesser importance. Exposure to such violence is a form of psychological abuse and some of its manifestations are included in typologies of mistreatment. It may even be considered a form of terrorism (children experience intense fear), corruption (children are socialized to inadequate interpersonal interaction models) and isolation (children are likely to withdraw from their family or peers through fear of violence or shame).

Children exposed to domestic violence grow up in a climate marked by a repetitive cycle of tension, friction and fear that affects the entire family. Living in this violent climate has repercussions on children over the short, medium and long term. They develop emotional and behavioural problems that are just as serious as those that affect abused children. Exposure to

domestic violence leaves deep permanent scars, as well as indelible memories of the violent events observed.

... a hidden reality

Children exposed to domestic violence must be offered services and interventions tailored to their particular needs. However, it is often difficult to identify the children concerned mainly because of certain family and social factors. Although mentalities have evolved, domestic violence is still considered private and taboo. Many families caught up in this cycle of violence try to hide the situation. Mothers remain silent because they are threatened with violence or reprisals, are blind to their status of victim or are worried that others will judge them negatively or not understand them. Children remain silent because they are confused, think that they are exaggerating the situation or that it is none of their business. As for fathers and spouses, they remain silent because they do not acknowledge the fact that they are subjecting others to violent acts or because they fear they will be denounced. Lastly, many parents tend to underestimate their children's exposure to domestic violence.²

Apart from these social and family factors, another reason this problem is often overlooked by interveners is that the physical and/or psychological signs of the exposure of children to domestic violence are not exclusive to this phenomenon and may be confused with other problems. Moreover, some interveners find it difficult, for various reasons, to deal with the question of domestic violence: for example, they lack the proper tools, feel uncomfortable about this issue, are unsure of what steps to take once violence has been detected, minimize its effects on children, and so forth.

... a government priority

Despite the difficulties associated with identifying children exposed to domestic violence, such children have specific needs that interventions must address. Indeed, the various levels of government recognize that they must support communities if they are to prioritize actions targeting these children. In 1995, the Québec government decided to focus attention on this issue in its domestic violence intervention policy *Politique d'intervention en matière de violence conjugale: Prévenir, dépister, contrer la violence conjugale*.³ One of the nine guiding principles of this policy is that interventions should give priority to protecting and ensuring the safety of women who are victims of domestic violence and their children. The policy also states that all interventions must take the effects of domestic violence on children into account and strive to mitigate them. The ministerial priorities laid out in the *Government Action Plan 2004-2009 on Domestic Violence* consolidate actions intended for children exposed to this type of violence.¹⁸

Definition of domestic violence

Domestic violence "includes psychological, verbal, physical and sexual abuse as well as acts of financial domination. It is not the result of a loss of control, but, on the contrary, it is a means chosen to dominate others and exercise power over them. Domestic violence can be experienced in a marital, extramarital or dating relationship at any stage in life."³ [Translation] In most instances, men are the abusers while women are the victims.

Definition of exposure to domestic violence

When we talk about children being exposed to domestic violence, we mean that they are direct or indirect witnesses of such violence and live in an environment where it is pervasive. Children may be exposed to domestic violence in various ways: they may see or overhear the acts of violence as they occur or they may see the victim's distress or the consequences of these acts.

Sometimes, children are more than simply neutral witnesses or spectators of domestic violence. They may take sides with their mother or father and thus find themselves in an uncomfortable situation. In addition, the care they receive and their safety can be compromised by such violence. For example, children may be physically injured during incidents of domestic violence. Older ones may get hurt as they try to protect their mother, while younger ones may be injured if they are in their mother's arms when she is being abused.

Children can be exposed to domestic violence at all stages of their childhood. According to Statistics Canada's Violence Against Women Survey, 21% of women who have been victims of domestic violence were assaulted during pregnancy; in 40% of these cases, this marked the beginning of a cycle of physical violence.⁷ Children can thus be exposed to domestic violence as of the foetal stage and may continue to be so right up to adolescence. It is important to note that domestic violence tends to become more serious when couples separate; therefore, separated women and their children are not less at risk. Contacts between custodial and non-custodial parents as they exchange children for visits and outings provide ex-spouses with opportunities for perpetuating the dynamics of domestic violence even though the parents are separated.

Scope of the problem in Québec and Canada

The scope of the problem of children's exposure to domestic violence stems from the scope of the violence itself. According to the Violence Against Women Survey by Statistics Canada, nearly 30% of Canadian women have been subjected to physical or psychological abuse by

their current or previous partner on at least one occasion since they were 16 years of age.⁷ Of this group, 39% reported that their children had witnessed or overheard the acts of violence;⁷ the percentage reaches 78% among women in shelters.⁸ According to other worrisome statistics, from 11% to 23% of all Canadian children, i.e. between two and six children in every school classroom, are exposed to domestic violence.⁵ It should also be noted that the acts of violence to which they are exposed are often very serious. Statistics Canada's Violence Against Women Survey found that 52% of victims whose children were exposed to such violence feared for their life, while 61% were injured by their partner.⁷

Even though it is reassuring to note that women are more inclined to report incidents of domestic violence and to leave their spouse when they realize their children are exposed to this type of violence, the problem of children's exposure to domestic violence is still hidden to a fair extent in Québec despite its prevalence.

Scope of the problem elsewhere

On the basis of 48 population surveys conducted in various parts of the world, the World Health Organization (WHO) asserts that from 10% to 69% of women have been physically assaulted by an intimate male partner at some time in their life.¹⁷ As far as the exposure of children to domestic violence is concerned, WHO reports that 64% of abused women who took part in a study in Ireland declared that their children often witnessed the violence; 50% of abused women involved in a study in Monterrey, Mexico, said the same thing.¹⁷

In the United States, it is estimated that 20% to 30% of women have already been victims of domestic violence during their marriage.⁹ In addition, estimates from the 1980s suggest that roughly 3.3 million U.S. children are exposed to this type of violence every year.¹⁰

Risk factors and protective factors

Risk factors are factors which increase the likelihood that adaptation problems will appear or persist after a child has been exposed to domestic violence, while protective factors are factors that change or improve the way a child reacts in difficult situations.

Since few studies have looked specifically at risk and protective factors for children exposed to domestic violence, we can only refer to factors identified during research on similar problems, particularly the exposure of children to violence within their community and child abuse. The following table presents the main risk and protective factors.

Types of factors	Risk factors	Protective factors
Characteristics of the child	<p>Difficult temperament (e.g. solitary, jealous, anxious, overly dependent on adults, prone to bearing grudges)</p> <p>Perinatal complications, prolonged institutionalization, developmental delays or chronic illnesses</p> <p>Communication problems or poor social and intellectual skills</p>	<p>Strength of character or easy-going temperament (reflective and non-impulsive cognitive style, positive attitude, flexible)</p> <p>Autonomy (self-esteem, self-confidence, self-control, internal locus of control[†])</p> <p>High degree of maturity. Age and level of development when the violence began (memory of a violence-free period)</p> <p>Ability to distance oneself from one's emotions, thoughts and actions in difficult situations and to not intervene in situations of domestic violence.</p> <p>Ability to manage stress, react quickly to threatening events, adapt to change and seek support</p> <p>Optimism, hope for the future</p> <p>Social competence (altruism, empathy, communication and problem-solving skills, sense of humour, participation in activities)</p> <p>Good cognitive skills and academic success</p> <p>Ability to identify only with the abuser's positive characteristics</p>
Characteristics of the family	<p>Parents with precarious socioeconomic status and little education</p> <p>Many stressful events or changes in the child's life (moving to a new home or school and having to make new friends or adapt to a new financial situation)</p> <p>Frequency and intensity of the violence to which the child is subjected or exposed</p> <p>Conflicts^{**} between parents or siblings</p> <p>Neglect/abuse of the child</p> <p>Mother with mental health problems</p> <p>Parents involved in crime or addicted to drugs</p> <p>History of abuse in the case of one of the parents</p>	<p>Single parent family^{***}</p> <p>Good adaptation by the custodial parent</p> <p>Good mother-child attachment</p> <p>Good parental supervision, balanced discipline and clear rules</p> <p>Awareness on the part of the parent of the child's suffering</p> <p>Ability on the part of the parent to offer the child understanding, affection, support and appropriate care</p> <p>Positive conflict-resolution strategies among at least some family members</p> <p>Good communication, warmth and positive interactions in the family</p> <p>Degree of privacy among family members that respects each one's autonomy</p>

	Mother experiencing stress, hostility towards or conflicts with a child that lead to frequent punishments and discipline problems Parent-child attachment problems	
Characteristics of the environment	Weak social support network	Numerous resources and opportunities in the community Good social support network Meaningful emotional relationship with at least one adult from outside the family (need to love and to be loved) Identification on the part of the child with his or her community and participation in community and recreational activities

Source: Table reproduced in full from Lessard and Paradis (2003), with the authors' permission. [Translation]

* Feeling of being able to exert a certain control over events that one is involved in.

** Conflicts over children are particularly damaging.

*** As a rule, single parent families are a risk factor. However, in situations of domestic violence, "*women who leave an abusive spouse and live alone not only improve their own mental health but ensure that the mental health of their children will also improve.*" [Translation]

It should be stressed that domestic violence is a risk factor in itself, regardless of whether children are actually subjected to verbal, psychological, physical or sexual abuse themselves. It is estimated that between 30% and 87% of children exposed to domestic violence are also victims of mistreatment. According to a study of a sample of 320 families affected by serious domestic violence, the proportion reaches 91%.¹² The toxic life setting created by exposure to domestic violence during childhood is a major risk factor for aggressive behaviour among brothers and sisters in the family concerned and for becoming an abused woman or an abusive man in adulthood.

Consequences of exposure to domestic violence

The seriousness of the consequences of children's exposure to domestic violence depends on the dynamics of the violence in each couple. Effects vary according to the frequency, duration and degree of violence to which the children are exposed. They can also vary depending on the child's personality and gender and can change as the child ages. In general, however, the problems that affect children exposed to this type of violence are physical, psychological,

behavioural, sociofunctional, cognitive and academic in nature. The following table shows the various ways in which children or adolescents exposed to domestic violence are affected.

Types of consequences	Consequences
Physical and psychological problems	<ul style="list-style-type: none"> • Headaches, stomach aches, weight loss, allergies or skin problems, asthma, bed-wetting, loss of appetite, sleeping problems • Fear, confusion, anxiety, insecurity, sadness, depression, anger, timidity, irritability, low self-esteem, guilt • Symptoms of post-traumatic stress disorder (difficulty concentrating, low participation and interest in important activities, memory gaps about the violence, sleeping problems, overly fearful reactions, etc.)
Behavioural problems	<ul style="list-style-type: none"> • Aggressivity, hyperactivity, attention problems, agitated behaviour, self-effacement, low participation, fabrication, antisocial and destructive behaviour, verbal abuse, sexist remarks, discipline problems, use of seduction, manipulation and/or conflict in relations with others • Antisocial and delinquent behaviour, dropping out of school, drug or alcohol abuse, running away from home, suicide attempts, unwanted pregnancies, crimes and acts of violence against others
Social problems	<ul style="list-style-type: none"> • Social isolation, lack of empathy, deficient social, communication and conflict-resolution skills
Cognitive and academic problems	<ul style="list-style-type: none"> • Deficient verbal, intellectual or motor skills, learning problems and falling behind at school • Skipping or dropping out of school

Coping strategies of children exposed to domestic violence

Many children exposed to domestic violence adopt a range of coping strategies in an effort to adapt to the situation and minimize its negative consequences. However, several of these strategies, which are listed below, do not achieve the desired results:

- Entertaining erroneous beliefs (e.g. feeling responsible or guilty for domestic violence, thinking that violence is the only way to manage anger or resolve problems, etc.)
- Dismissing feelings of fear and anxiety because of an inability to deal with them
- Seeing the world as dangerous and developing feelings of powerlessness and sadness as a result

However, some children manage to cope with domestic violence. Instead of using protection strategies that will only worsen their plight, they try to resolve their problems, seek help and reassess the situation positively. Once they have found ways of coping, these children are less likely to reproduce the violent behaviour and will probably be less affected by their exposure to domestic violence.

Effective strategies for preventing the exposure of children to domestic violence or promoting solutions

Obviously, it is necessary to prevent domestic violence if we are to prevent children from being exposed to it. The main strategies for reducing this type of violence and children's exposure are as follows:

1. Providing training and awareness-raising for interveners
2. Identifying cases where children are exposed to domestic violence
3. Ensuring early intervention with victims
4. Reinforcing protective factors and reducing risk factors

Providing training and awareness-raising

Providing training and awareness-raising activities for interveners affected directly or indirectly by the problem of children's exposure to domestic violence makes them feel better equipped to deal with the problem and enhances their knowledge and skills in a range of areas. Not only do they become more fully acquainted with the problem, but they learn how to identify the children involved, evaluate their needs and protect them (by reporting cases to the Direction de la protection de la jeunesse, if necessary, and providing mothers with support: e.g. information, accompaniment and encouragement so that they can protect themselves and their children).

Identifying cases

Once interveners have been sensitized and trained, they can more readily identify families affected by domestic violence. Those who work in health and social services centres (CSSSs) and other health care facilities use home visits to identify children under 5 exposed to domestic violence. When it comes to identifying school-age children who are faced with this situation, it is preferable to rely on teachers or other front-line interveners in the school setting.

Ensuring early intervention

Early intervention is necessary once cases are suspected or detected. Providing individuals affected by domestic violence with accompaniment and support eventually allows them to express their emotions and break free of the isolation often imposed on them by this violence. To that end, interveners must create a climate of trust and win the confidence of the individuals concerned, be it the child or his or her mother. Respecting the pace of the child and the mother and maintaining confidentiality help to create a climate of trust. Intervenors must also be reassuring and guarantee the child's safety at all times. They should adopt an attitude of openness toward the child or the abused woman, show that they believe his or her description

of events and listen without making judgments. At the same time, they must also take a stand against violence by denouncing violent acts and behaviours.

The services offered must take into account children's age and gender as well as the severity of the violence to which they have been exposed. Personal aptitudes must be encouraged in order to increase the likelihood that the children will become more resilient.* In addition, steps must be taken to meet their specific needs by ensuring that the children develop normally on physical, cognitive, emotional and social levels and can live their childhood in a safe environment. It is also necessary to help them obtain a better grasp of the situation and reassure them about their mother's circumstances.

If an intervener suspects that a young child is being exposed to domestic violence, they should meet with the mother and talk to her about the situation. However, it is important to exercise caution under these circumstances. Making a mother aware of the impact domestic violence has on her child can sometimes have the detrimental effect of making her feel guilty. The difficulty she has in seeing the effects of domestic violence on her child is related to the many barriers that prevent her from breaking free of the violence herself (cycle of violence, values, religious beliefs, etc.). Intervening with the mother must take these barriers into account. By helping her to understand them, she will be more able to recognize why she finds it difficult to understand the impact of domestic violence on her child. When older children or adolescents are involved, it is recommended that interveners discuss the problem with them directly.

Different intervention methods can be employed, depending on what is best suited to the child concerned:¹

- *Group intervention.* This is the method of choice for children in general and for those moderately affected by domestic violence in particular. It helps to break their isolation and develop their social skills. Group intervention can be completed by individual intervention.
- *Individual intervention.* When children are seriously affected by domestic violence, it is preferable to intervene with them individually over the long term. Group intervention, while breaking a child's isolation, can entail the risk of stigmatization. Individual intervention is also more appropriate for dealing with certain types of trauma specific to each child.
- *Intervention with mother-child dyads.* This approach is appropriate for preschool children. It must support rather than criticize the mother and teach her how to foster her child's

* Able to develop positively in a difficult situation.

¹ A tool has been developed to determine whether it is preferable to opt for group or individual intervention.¹⁴

development. It must enable mothers to feel capable of fulfilling their parental role and recognize their parenting skills. A "protection scenario" must be developed with the mother's agreement and in cooperation with the child exposed to domestic violence. This will help the child clarify his or her perception of the violent incidents and may enable him or her to better cope with future episodes. Intervening with mother-child dyads is also appropriate for school-age children, mainly to clarify their loyalty conflicts, self-blame and guilt. It is very difficult to deal with such feelings effectively without the mother's support.

Reinforcing protective factors and reducing risk factors

To mitigate the consequences of exposure to domestic violence among children, it is also necessary to reinforce protective factors and reduce risk factors. Both the family and the school setting are excellent places for taking such action.

- *Family setting.* The quality of mother-child and father-child relationships is the main protective factor for children exposed to domestic violence. A parent who is aware of the effects of domestic violence on her child, is concerned about the child's well-being, is determined to provide him or her with appropriate care and knows about appropriate educational approaches will help to protect the child.
- *School setting.* As a place where children learn and develop, the school setting can act as a protective factor. It can help children develop a feeling of empowerment and bolster their self-esteem. They can benefit from positive relationships they build with a teacher or other adult with special meaning in their life. Action taken in school helps to enhance children's learning skills, participation opportunities and social support.

Intersectoral joint action strategy

Since none of the services offered to women victims of domestic violence and their children meet *all* of the needs of these clientele and *all* intervention objectives, it is important to implement an intersectoral joint action strategy.

Since 2000, the Québec government has made joint action a prime focus of its intervention strategy for children who are victims of sexual abuse or assault, physical mistreatment or neglect that threatens their physical health. Although children exposed to domestic violence are not targeted directly by this strategy, it can be hoped that this government initiative will eventually lead to the development of a joint strategy for cases where children are exposed to this type of violence.

Eight strategies may be implemented to foster intersectoral cooperation:¹⁶

1. Convince each organization that intersectoral cooperation will respect the various bodies involved and be centred on solutions
2. Take the time to inform each organization about the mission of the others
3. Publicize laws and social policies on domestic violence and child protection
4. Discuss the obstacles related to the jargon of each organization or to the presence of stereotypes
5. Encourage participation in training activities offered by other organizations
6. Train as many interveners as possible from various organizations
7. Ensure that successful collaboration efforts are publicized (in the media, for example)
8. Establish relations between organizations by taking advantage of relationships between individuals that belong to them

The expression intersectoral joint action strategy means a strategy that mobilizes and enlists the participation of several partners regarding the problem of exposure to domestic violence: court system, police services, child protection services, public physical and mental health services (hospitals, medical clinics, CSSSs, public health branches), community-based support groups (shelters, women's centres, services for cultural and Native communities, services for abusive spouses, youth centres, family centres), schools and day care services. These actors are expected to harmonize their policy directions, intervention strategies and actions. By coordinating their activities, they ensure that a centralized system will be able to address the needs of both women and children by guaranteeing the continuity of services. They also prevent organizations from interfering with one another and see that children already faced with difficult situations are not subjected to a multiple protocols and interviews.

The following intervention strategies may be adopted by the various partners within the framework of intersectoral joint action to prevent children from being exposed to domestic violence or to promote solutions.

Legal system. In this sector, the safety of victims must always be considered a priority. Steps must be taken to facilitate the issuance of effective protection orders, apply probation conditions rigorously and impose appropriate penalties in cases of domestic violence. In situations where couples separate, the safety of children exposed to domestic violence must also be taken into account in decisions about their custody. Rehabilitating young people who commit offences as a result of being exposed to domestic violence should be given preference over incarceration. Caution is called for in regard to certain protection strategies often used in this sector, such as arresting spouses and forcing abused women to testify in court, as these strategies may increase the risk of revictimization.

Police services. Although police officers are often the first witnesses of the effects of violence on children, the literature on this subject is limited. And even though they may intervene in an

effective, convincing manner, their actions may also increase children's fear, stress, guilt and confusion. For police intervention to be effective, officers must be familiar with the effects of exposure to domestic violence, know what the signs are, be trained to ensure children's immediate safety, be aware of existing shelters and other aid agencies, be able to recognize victims' medical assistance needs, and so forth. In many communities, police are offered training on how to reassure children and explain to them that they are not responsible for the violence.

Child protection services. Youth centre workers must also be sensitized to the problem of domestic violence. Under the *Youth Protection Act*, the Direction de la protection de la jeunesse (DPJ) is obliged to intervene when domestic violence compromises the safety and well-being of children and no request for assistance is made by the parents to remedy the situation. An intervener who has reasonable grounds to believe that the safety or development of a child exposed to domestic violence is compromised must report the situation to the DPJ or at least consult this body.

Public health services network. Professionals in the health and social services network, and particularly CSSS interveners, can play a determining role in the detection of domestic violence. These interveners must therefore be trained and equipped for this purpose. According to certain studies, domestic violence is not detected often enough because of obstacles faced by professionals in their work. To overcome these obstacles, steps should be taken to create situations that encourage people to report this type of abuse (e.g. by placing posters and folders on the subject in waiting rooms and meeting with women individually). In short, as well as treating and intervening with victims of domestic violence, health care professionals must practice primary and secondary prevention.

Community-based support groups. Efforts in this sector must focus on promotional education within communities. Such education fosters better recognition of the problem within society and its effects on children while spreading the idea that domestic violence is unacceptable. Programs designed specifically for children exposed to domestic violence must be created within these support groups. Such programs should strive to foster dialogue with the children concerned, help them to understand and manage their reactions to this type of violence by promoting positive behaviours, reduce their symptoms and help families to create a safe, stable and warm environment.

School and day care services. Between two and six children in every school classroom are exposed to domestic violence. It is essential, therefore, to establish primary violence-prevention programs in schools and day care centres. With a view to secondary prevention, it is also necessary to establish detection and assistance protocols in schools for children exposed to domestic violence. All school staff members, be they school principals, social workers,

counsellors, teachers, supervisors or secretaries, can play a role in preventing, detecting and/or intervening in regard to the exposure of children to this type of violence.

To facilitate the restructuring of the network of interveners who come into contact with children exposed to domestic violence, it is important to **set up a coordinating committee** consisting of representatives of the various organizations involved. All partners must be included in the process and assigned responsibilities in order to maintain the quality of prevention, detection and intervention services.

Specific prevention and intervention tools

Links to **prevention and intervention tools concerned with the exposure of children to domestic violence.**

Interesting Web sites and aid resources

Links to **interesting Web sites on the exposure of children to domestic violence and to domestic violence aid resources.**

Suggested reading

Reference documents

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