How Domestic Violence Affects Children: Effective Intervention Strategies

by

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ABSTRACT

Witnessing domestic violence has a negative impact on children, even if they are not the ones being abused (Monahan & Ornduff, 1999). Most violence that children witness occurs in their own homes and involves their parent or caregivers. The risk of child abuse rises when there is violence in the adult relationship (Carlson & Chemtob, 2002). Children who witness domestic violence are at risk for maltreatment, including physical abuse, neglect, sexual abuse, and also emotional abuse (English, Marshall, & Stewart, 2003).

The impact of children witnessing domestic violence is a growing concern for the public and school professionals (Monahan & Ornduff, 1999). According to Bavolek (1994), school professionals are in an ideal position to notice if children may be witnessing domestic violence or being abused themselves. Schools have a responsibility to help the children who witness violence and should be more involved in family violence
preventive measures. It is also the community’s responsibility to provide services to these families.

The purpose of this literature review was to research the effects of domestic violence on children in the United States. This review also suggests interventions educators and communities can use to help these children succeed in school and life. In addition, this literature review included how domestic violence affects children and effective interventions strategies.
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# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>ABSTRACT</td>
<td>ii</td>
</tr>
<tr>
<td>Chapter I: Introduction</td>
<td>1</td>
</tr>
<tr>
<td>Statement of the Problem</td>
<td>4</td>
</tr>
<tr>
<td>Research Questions</td>
<td>5</td>
</tr>
<tr>
<td>Definition of Terms</td>
<td>5</td>
</tr>
<tr>
<td>Assumptions of the Study</td>
<td>5</td>
</tr>
<tr>
<td>Limitations of the Study</td>
<td>6</td>
</tr>
<tr>
<td>Chapter II: Literature Review</td>
<td>7</td>
</tr>
<tr>
<td>Introduction</td>
<td>7</td>
</tr>
<tr>
<td>Prevalence</td>
<td>7</td>
</tr>
<tr>
<td>Consequences of Witnessing Domestic Violence</td>
<td>9</td>
</tr>
<tr>
<td>Reasons for Abuse</td>
<td>13</td>
</tr>
<tr>
<td>Assessments</td>
<td>14</td>
</tr>
<tr>
<td>Effective Intervention Strategies</td>
<td>16</td>
</tr>
<tr>
<td>Chapter III: Summary, Critical Analysis, and Recommendations</td>
<td>22</td>
</tr>
<tr>
<td>Introduction</td>
<td>22</td>
</tr>
<tr>
<td>Summary</td>
<td>22</td>
</tr>
<tr>
<td>Critical Analysis</td>
<td>23</td>
</tr>
<tr>
<td>Recommendations</td>
<td>26</td>
</tr>
<tr>
<td>References</td>
<td>29</td>
</tr>
</tbody>
</table>
Chapter I: Introduction

Researchers estimate in the United States that 3.3 million children see incidents of domestic violence in their homes (Carlson & Chemtob, 2002). Witnessing domestic violence has a negative impact on children, even if they are not the ones being abused. Most violence that children witness occurs in their home and involves their parent or caregivers (Monahan & Ornduff, 1999). Current research on domestic violence focuses on the cognitive, behavioral, and emotional effects for the children who witness violence in their homes (Stiles, 2002).

There are three types of violence that children may observe: violence in society, accidents and the violence between intimate relationships. Children may either hear and/or see these acts of violence throughout their childhood (Behan, Blodgett, Erp, Harrington, & Souers, 2008). Children may experience violence in the home, schools, and their community (Unicef, 2007). Violence in the home could include physical, psychological, and sexual abuse. In the schools, children may experience violence due to bullying, fighting and sexual violence. Depending on the community, some children may encounter violence. Children may experience gang violence or could experience violence from coaches, religious authorities, or other adults responsible for supervising them. Children may also witness or encounter violence through the media. They may see violent acts on television or see violent images in video games.

There is an increased risk of child abuse when there is violence in the adult relationship (Carlson & Chemtob, 2002). Fifty percent of the men who assault their wives also abuse their child (English, Marshall, & Stewart, 2003). It is twice as likely that the child will be abused by the mother or the father in homes where there is domestic
violence than with children who live in non-violent homes. Male batterers tend to physically abuse the child, but it has been reported that women who are victims may also abuse their children. Children who live in homes of domestic violence are at a higher risk for maltreatment, including physical abuse, neglect, sexual abuse, and also emotional abuse.

Children may experience physical abuse because they could be trying to protect the partner being abused (State of New York, Office for the Prevention of Domestic Violence, 2000). The abuser could make threats towards the children or hurt the children in order to control the victim. In some cases the violence is less severe than what the partner might experience. However, as the violence against the partner becomes more severe, the abuse towards the children may become worse.

Infants, school aged children, and adolescents are affected by witnessing domestic violence but show different effects depending on their developmental level (Fritz, 2000). Young children could show irritability, sleep disturbances, and regressive behavior. Anxiety, depression, lower self esteem, and decrease in their academic performance may be seen in older children who witness violence at home. Adolescents affected by domestic violence could have the most severe reactions and may include high levels of aggression, conduct disorder, truancy, and revenge seeking. In the most severe exposure to domestic violence, children may experience post traumatic stress disorder.

More negative effects of witnessing domestic violence for children may include behavior problems, impaired problem solving skills, and poor social skills. These children may also at higher risk for violent behavior, delinquency, and adult criminal activity (English et al., 2003). They may also display withdrawal, nightmares, and self
blame. Boys usually are more aggressive and have acting out behaviors when they witness violence at home; girls could possibly be more passive and withdrawn.

Witnessing domestic violence may have negative effects on the child’s school performance (Stiles, 2002). The child has a greater risk for fighting, bullying, lying, cheating, and being disobedient at school. It is important for educators to be aware of the different signs that children exhibit when they witness domestic violence so children receive the help they need to succeed in school. It is important children verbally express their feelings because they may feel guilty or blame themselves (Children and Domestic Violence, 2007). Interventions that educators may implement may help the child’s school performance. Educators could possibly provide children a safe space to talk about what happens in their family. It is important for children to know it is not his/her fault and give the child time to open up.

A child from a traumatic environment is not as emotionally able to function in school compared to a child from a non-violent home (Post, 2004). This could cause stress for the child that may lead to fear, hyperactivity, defiance, and anger. Educators can work as a team to provide a safe and supportive environment for the child. Providing the child with high structure may help the child’s success in the educational learning environment. Mentoring and counseling for the traumatic events may be beneficial for these children witnessing domestic violence.

Assessments may be used to identify children that may witness violence. The assessment results may detect symptoms of witnessing abuse and the administrator may make referrals for these children (Baker, Cunningham, & Jaffe 2004). Assessments could identify the trauma these children witnessed for early interventions. Assessments of
infants and toddlers require information from many sources and many aspects of a child’s behavior and their life.

Services may help children who witness domestic violence such as child protection services, shelters, and the police. Services find safety for the children and the caregiver being abused. Shelters may provide screening and an advocate (Feerick & Silverman, 2006). Therapeutic services are an effective treatment for children who witness family violence (Monahan & Ornduff, 1999). Children of family violence may feel confused about why the violence occurred and unsure about the future. Therapeutic services may be provided to the children in the shelter setting.

According to Bavolek (1994), school professionals are in an ideal position to notice if children may be witnessing domestic violence or being abused themselves. The impact of children witnessing domestic violence is a growing concern for the public and professionals (Monahan & Ornduff, 1999). Schools have responsibility to help the children who witness violence. Schools should look at becoming more involved in preventive measure when it comes to violence in the families. It is the community’s responsibility to provide services to these families.

Statement of the Problem

This literature review has been conducted to identify the effects of domestic violence on children in the United States and find interventions educators and communities can use to help these children succeed in school and life. A literature review was conducted about how domestic violence affects children and effective intervention strategies in the fall of 2008.
Research Questions

There are two questions this study will attempt to answer.

1. What effects does domestic violence have on the children who are witnesses?

2. How can educators intervene with a child who witnesses domestic violence?

Definition of Terms

For clarity of this study, the following terms are defined:

*Children who witness domestic violence*: Children who see or hear the violence between the primary caregivers and are aware of the effects of the aftermath of violence (Carlson & Chemtob, 2002).

*Domestic violence*: Physical, emotional, or sexual abuse that occurs between intimate partners (Carlson & Chemtob, 2002).

*Educators*: Professionals in schools including teachers, counselors, school psychologists, and principals (Monahan & Ornduff, 1999).

*Interventions*: Programs or treatments that help children who are witnessing domestic violence (Monahan & Ornduff, 1999).

Assumptions of the Study

An assumption of this study will be that research will show many negative effects for children who witness violence in their homes. It also is assumed that there will be many effective interventions for educators and communities to use when working with children who witnessed domestic violence.
Limitations of the Study

Limitations of the study include finding enough recent studies to show the negative effects of domestic violence on children. Another limitation is finding recent research about effective interventions for these children who are witnesses.
Chapter II: Literature Review

This chapter will examine existing literature, which includes the prevalence of children exposed to domestic violence, the consequences for these children, assessments, and the reasons for domestic violence. The chapter will conclude with effective intervention strategies for children who witnessed domestic violence.

Prevalence

The forms of abuse children may witness include emotional, mental, sexual, economic, physical and maltreatment, and neglect (Haeseler, 2006). It is difficult to measure the exact prevalence of domestic violence due to underreporting. It is estimated that 8%-12% of women experience abuse by their intimate partner (Feerick & Silverman, 2006). According to Rosenbaum and O'Leary, abuse occurs in 20-30% of all marriages (cited in Monahan & Ornduff, 1999). Women living in the United States have a 50% chance of being battered at some point in their life (Bavolek, 1994). One third of all reported homicides are actually women who are victims of their spouse's actions.

According to Edleson (as cited in Feerick & Silverman, 2006), it is estimated between 3.3 million and 10 million children per year are exposed to domestic violence. Child abuse is 15 times more likely to happen in families where domestic violence is present (Haeseler, 2006). According to Widom, 20% of children who witness parental violence report later violence in their own relationship with a partner (as cited in Monahan & Ornduff, 1999).

If there is violence in the adult relationship the chance of the child being abused increases (Carlson & Chemtob, 2002). Fifty percent of men who assault their wives may also abuse their own children. Male batterers tend to physically abuse the child, but it has
been reported that women who are victims may also abuse their children (English et al., 2003). It is twice as likely that the child will be abused by either parent in homes where there is domestic violence than with children who live in non-violent homes. Children who live in homes of domestic violence are at a higher risk for maltreatment, including physical abuse, neglect, sexual abuse, and also emotional abuse.

In the United States, mothers in certain ethnic minority groups have greater rates of domestic violence exposure than other groups. The highest rates of family violence occur in African Americans and Latina families (Feerick & Silverman, 2006). Minority females are more likely to stay in an abusive relationship (Haeseler, 2006). Patterns of abuse are influenced by a range of cultural backgrounds and there is a possible connection between domestic violence and race, class, and ethnicity. Some victims do not leave because of cultural and religious beliefs of promoting family unity and may be embarrassed to leave the abuser.

African women tend to be more likely to experience violence in their relationship compared to Caucasian woman (Marshall, Temple, & Weston, 2005). Violence towards Mexican American women appears more severe compared to violence toward Caucasian women. A reason for this may be that diverse women could view violence differently. Some cultures accept violence and may believe it is a way to resolve conflict (Unicef, 2000). There are many social and cultural factors that could be the reason of domestic violence. Men have had unequal power over women throughout history. Some cultures still have the belief of males’ superiority. This may lead to a lack of economic resources for the women so they depend on the male even though domestic violence is occurring.
Consequences of Witnessing Domestic Abuse

Children who witness domestic violence exhibit more difficulties compared to children who do not witness domestic violence. Living with high levels of conflict and aggression is harmful to children (Monahan & Ornduff, 1999). The degree of difficulty these children may face depends on many factors (Baker et al., 2004). These factors include the level of violence in the family, degree of the exposure to the violence, other stressors, and how resilient they are to the exposure.

Exposure to domestic violence can have many distressing psychological symptoms and maladaptive behaviors, acting out behaviors, and low self esteem (Monahan & Ornduff, 1999). High levels of conflict and aggression in the home can cause many problem behaviors, psychopathology, and interpersonal and attachment relationship difficulties. According to Perry, children who witness violence may have lifetime effects and it can have a negative impact on their cognitive and developmental processes (cited in Heyde, Kracke, and Lamb, 2008).

According to Parker and Rossman, children may have a higher risk for mental health or alcohol and drug problems when exposed to domestic violence (cited in Feerick & Silverman, 2006). In a study by Goodwin, Gazmatrian, Johnson, Gilbert, and Saltzman (cited in Feerick & Silverman), mothers who reported being abused had children who were affected by their abuse. Some symptoms included child distress, sleep disturbances, aggressive behaviors, school problems, and issues with the abuser. Distress refers to mental or physical suffering. Sleep disturbances that children could face would include night terrors, which are emotional outbursts during sleep. They could also have sleep anxiety due their fear and worries of their loved one being abused. Children that
witness domestic violence may show aggressive behavior and act upon impulse. They could act out physically or verbally with their aggression. Children from homes with violence could display aggression at schools towards students or teachers. According to Edleson (as cited in Feerick & Silverman), children who witnessed domestic violence exhibited more behavioral and emotional problems. Witnessing the violence in the family could cause irreparable psychological damage to the children (Haeseler, 2006). Putting children in the position to witness domestic violence may cause psychological trauma.

Children who witness domestic violence may display externalizing behaviors including aggression, delinquency, antisocial behaviors, hyperactivity, conduct problems, and anger problems (Feerick & Silverman, 2006). Some internalizing behaviors seen in children who witness violence include anxiety, depression, low self-esteem, and social withdrawal. O'Keefe found that witnessing violence was associated with externalizing problems and this behavior is predicted more in boys than girls (cited in Feerick & Silverman, 2006). Children who witness domestic violence may also adopt the attitude that violence is acceptable and may become an abuser in future relationships.

Infants, school aged children, and adolescents who are affected by witnessing domestic violence may show different effects depending on their developmental level (Fritz, 2000). Infants from homes of partner abuse show that the need for attachment may be disrupted because of the abuse in the home (Stiles, 2002). Infants from a home with violence may display eating and sleeping problems and they also may cry excessively. These infants are also at an increased risk for physical injury.
Preschool and school aged children may show irritability, sleep disturbances, and regressive behavior. Anxiety, depression, lower self esteem, and decrease in their academic performance can be seen in older children who witness violence at home (Fritz, 2000). Children from homes of partner abuse may develop psychosomatic complaints including headaches and abdominal pain (Stiles, 2002). Young children who witness abuse may also show regressive behaviors including enuresis and thumb sucking. These children may also have increased anxiety around strangers and lack the feeling of safety. Children this age might blame themselves and feel shame or guilt about the abuse occurring at home.

Factors that may impact the children's school progress include being absent, transitional housing, moving to a new school, kidnapping, child abduction, or custody battles due to family violence (Haeseler, 2006). Young children may not appear to be affected by witnessing domestic violence or it may be assumed by others that the trauma had no effect on these children. However, they might be processing it in their own way and appear to block out the family violence. Children who show no response to witnessing domestic violence may have more serious effects.

Children that show no response to domestic violence may show delayed behaviors (Fischer, 1999). They may show behaviors because they are unable to deal with the emotional trauma during their childhood. Children that come from homes with violence may grow up and start having trouble with drugs and alcohol. They could become antisocial later in life or become perpetrators when they become older. Even if the child does not appear to be affected by the violence, it is still important for early intervention so the effects do not appear later in life.
Adolescents affected by domestic violence have the most severe symptoms and include high levels of aggression, conduct disorder, truancy, and revenge seeking. In the most severe exposure to domestic violence, children may experience post traumatic stress disorder (Fritz, 2000). The risk of oppositional and conduct disorder rises with the presence of family violence (Leisring & Rosenbaum, 2003). These disorders may increase aggressive behavior and levels anger levels. Post traumatic stress disorder and other anxiety disorders that may be caused by domestic violence may cause the children from family violence to feel hopeless and their self esteem could be impaired. Children this age may also have early sexual activity and substance abuse (Stiles, 2002). They might have a fatalistic view of the future and may have an increased rate of risk taking and anti-social behavior.

Different factors may lessen the effects of witnessing violence. Factors include female gender, intellectual ability, higher levels of socioeconomic status, and social support for the children (Stiles, 2002). Resiliency plays a part on how severe the effects are on the child witnessing the domestic violence. The level of resiliency of the child may determine if the child has the ability to deal with stressful situations. Children need to feel valued and accepted; this can enhance the level of resiliency. According to Finkelstein, Garmezy, Weinreb, and Werner, a strong support system and strength building with children can develop resiliency (as cited in Brown et al., 2007).

Male caregivers in some cases may use harmful threats and emotional intimidation that may lure the female back into the abusive situation (Haeseler, 2006). In some cases, children may be ordered out of the home into foster care. This may cause
the mother and child to suffer loss or disruption of their social support network, which would lead to increased stress and worry about school arrangements and economic plans.

Foster homes can be very stressful on the children that are taken from homes with violence (Bagwell, 2001). Children who witness domestic violence may blame themselves for being taken from their home or they may feel helpless. Attachment disorder could occur for children placed in foster care and they have difficulty trusting people, including their foster parents. However, foster care is not always a safer place and child abuse is 10 times more likely to occur in foster homes than in non-foster family homes. Children may display more effects from being in foster home including defiance, lack of impulse control, learning disorders, and manipulative behavior.

**Reasons for Abuse**

Alcohol and/or other drug use have been present in 92% of reported domestic violence assaults (Buddy T., 2006). There is a clear relationship between alcohol abuse and domestic violence in families across the United States (Bavolek, 1994). Not only is the abuser using alcohol but in many cases the victim of abuse is also using alcohol prior to the abuse occurrence. Usually the violence occurs due to some argument, this may lead to the women being punched, kicked, struck with objects, and even threatened with guns or knives.

Another reason a person may become an abuser would be due to mental illness (Bavolek, 1994). They may have been abused themselves or have low self-esteem and use violence to strengthen their image. In many cases, the abuser is projecting blame. The abuser may have anger due to lack of money and power, may feel inferior to their co-workers or even neighbors, so they take it out on their spouse to be compensated. They
make themselves believe that hitting the victim will get them to do as they are told (Bavolek, 1994). Abusers are usually drop outs from school and do not feel adequate about themselves. They may even be drug abusers and do not know how to express their own feelings. In some cases, the male might just be trying to act out the stereotyped male role.

Victims may stay in an abusive relationship for many reasons (Bavolek, 1994). They too may have low self-esteem and not be strong enough to leave. The victim is often belittled which could make them feel emotionally unable to be alone. They could have traditional views about their role in the family and believe in family unity. The victim might take responsibility for the abuse and have guilt about leaving the situation. They may believe they deserved it because they were not meeting their partner's expectations. The one being battered could depend financially on the one doing the abuse; the abuser is usually the one that controls the material assets and has a higher income. They may also have no support and believe the abuser will change. However, in most cases the incident of abuse will escalate in severity and the frequency. The victim may make excuses for the abuse and not realize there is a pattern of abuse.

Assessments

Research based assessments may identify treatment needed and referrals which can test children exposed to domestic violence (Baker et al., 2004). Assessment is important for early interventions in order to identify the trauma these children witnessed. Assessments of infants and toddlers require using information from many sources and many aspects of their behavior.
A screening test example includes the Diagnostic Inventory for Screening Children-4 used for children ages 0-5. According to Amdur, Mainland, and Parker (cited in Baker et al., 2004), this test screens for fine motor skills, gross motor skills, receptive language, auditory and visual attention, memory, personal-social, and adaptive functioning. This assessment is used for evaluating at-risk children and looking for developmental delays. The test can also monitor interventions used for the children that could be at-risk. The Child Behavior Checklist assesses problem behaviors in children ages 2-5. This checklist screens for anxiety, depression, withdrawal, somatic problems, aggressive problems, and destructive behavior. This assessment is used to screen for children's behavior problems and should be used with parent reports.

The Teacher Report Form is used for children ages 6-11 and measures the child’s academic performance. This assessment is self administered by the child’s teachers using three scales including internalizing, externalizing, and total problems (Achenbach, 2002). There is also a Child Behavior Checklist for children 4-18 years old. Another assessment includes the Adult-Adolescent Parenting Inventory (AAPI-2), which is designed for adolescents age 13-19 (The Adult-Adolescent Parenting Inventory, 2008). The AAPI-2 assesses the adolescent’s attitude towards parenting and child rearing. Responses collected from the inventory may identify abusive parenting behavior and non abusive parenting behavior. However, these tests do not guarantee that the symptoms reported are caused by witnessing domestic violence (Baker et al., 2004).

Meeting all the criteria is difficult when assessing children who witness violence (Arteaga & Lamb, 2008). The person assessing the child will determine the appropriate screening tool. For instance, a police officer will not use the same assessment that a
mental health professional will use because they are trying to find out different information. When professionals use assessment tools it is important to know why they are collecting the information and know what is being evaluated.

Effective Intervention Strategies

Children who witness domestic abuse, whether living in the situation or transitioning out of the situation, have many safety-related issues and they need urgent attention (Monahan & Ornduff, 1999). Services for children affected by domestic violence have the following goals: identifying the children at risk, increasing safety and protection of children and families, and providing therapeutic intervention for the emotional and behavioral problems that children exposed to violence may face (Feerick & Silverman, 2006). Everyone needs to have increased awareness about family violence so perceptions can continue to change (Bavolek, 1994).

The main goal of courts, child protection services, shelters, and police is to find safety for the children and the caregiver being abused (Arteaga & Lamb, 2008). Law enforcement should be educated and learn how to identify children that may have witnessed violence in their home. They must know how to address this issue and be properly trained to refer the families to the appropriate services. The family and the intensity of the violence will determine what types of services are required. Every family has different situations and some may need a variety of services.

Groves believes therapeutic interventions are used to promote an open discussion about the violence that was witnessed by the child. Talking about the events can begin the healing and help the child understand the situation. The practitioner can help the children realize that the violence was not their fault (cited in Schewe, 2008). According to Peled
and Edleson, children could also learn how to identify their feelings so they can express their reaction to the violence. Some children may express a lot of anger about the situation; in this case anger management strategies can be used to reduce aggressive behavior (as cited in Schewe, 2008).

Some shelters will provide screening and an advocate (Feerick & Silverman, 2006). Program evaluation is recommended to find if the program is achieving realistic goals (Monahan & Ornduff, 1999). Evaluation of the program can also secure funds for continued existence of the program and future development of these services provided to families of domestic violence. It is important that therapeutic services are provided to the children in the shelter setting because they could be confused about violence that has occurred and unsure about the future. A positive therapeutic experience for the children provided by the shelter might increase the chances of the mothers and children continuing to seek services after leaving the shelter.

The children in the battered women's shelters could have been exposed to significant degrees to trauma (Haeseler, 2006). It is important to get the victims to a safe place right away because the risk of being murdered by a partner due to separation is the highest in the first six months. While in the shelter, these children may display symptoms caused by stress as well as behavior and adjustment difficulties (Feerick & Silverman, 2006). The shelters are able to provide the children with screening for developmental, cognitive, emotional, and behavioral problems.

However, shelters sometimes may have to restrict services due to the short stay of the family and the lack of funding resources (Feerick & Silverman, 2006). Along with these programs, a variety of other services are provided by communities including
advocacy services, structured activity programs, and parent education. These programs can help address the needs of children from violent homes (Monahan & Ornduff, 1999). There are also hot lines and support groups that communities should provide to the victims (Bavolek, 1994). Not only should there be programs for the victims but also programs for the abuser. Treatment programs for the abuser are important because in many cases the victim will not leave the relationship permanently, so these programs can prevent the violence from resurfacing.

A family-based intervention is the best approach when dealing with families of domestic violence. This is a stressful situation for the whole family and they need community based services to improve family dynamics (Beauchemin, Burcu-Kaniskan, & Ortega, 2008). Family-based intervention is important because parenting patterns are learned in childhood and may be repeated later in life (Bavolek, 2005). Parent educators believe the main reason for domestic violence may be the generational cycle. Professionals working with families believe that a child may have two types of experience: positive or negative. People that express a positive experience during their childhood may have parents with a nurturing parenting style. However, negative experiences during childhood may be because the parents were abusive or neglectful.

Stephan Bavolek developed a program for families of domestic violence and alcohol abuse (Family Development Resources Inc., 2007). The first session discusses the relationship between alcohol, anger and abuse. This session will help the families express and find new ways to handle their anger. In the next session, the participants discuss the relationship between child abuse and alcohol abuse, and then the following session discusses sexual abuse. The fourth session explores why people abuse their partner and
abuse alcohol. Finally, emotional abuse is discussed and the family learns the effects of emotional abuse. This program helps the family explain how alcohol, anger and abuse are related so families can start rebuilding their relationships.

Bavolek believes that parenting is learned and his programs can teach parents to become more nurturing (Bavolek, 2005). A family must work as a system to make changes and build positive interactions in the family. Balvolek’s Nurturing Parenting Program builds self esteem and self concepts so children are more likely to become nurturing when they become parents. This program may also empower the family so they make wise choices. Bavolek’s Family Nurturing Program has parents and professionals working together in the home setting to meet the needs of the family. Lessons for this program can also be taught in a group setting.

Children who witness family violence do not have very stable or secure situations outside of school (Haeseler, 2006). That is why school leaders can play an important role in helping these children as they cope with the traumatic situation. School professionals should realize that the children who witness abuse are struggling with home life challenges and are trying to maintain their own daily developmental needs including physical safety and emotional well being, along with attempting academic progress.

Schools have been involved in violence prevention because many youth are exposed to violence in their family. According to Jaffe, Sudermann, and Schieck (as cited in Bakcr et al., 2004), in an average classroom there may be three to five school age children dealing with witnessing domestic violence. Educators should work as a team to provide a safe and supportive environment for these children (Haeseler, 2006).
School professionals play an important role in referring for services and advocate for families of abuse.

School leaders should maintain confidentiality in carrying out procedural obligations and adhering to the state and federal laws when dealing with students witnessing violence at home (Haeseler, 2006). Schools should be observant to recognize and deal with abuse issues. All school professionals play a role in helping children of family violence including teachers, counselors, teacher aides, coaches, and principals. School professionals can also refer the proper resources for the victims and provide a holistic service delivery to help families affected by family violence. Schools can provide community referrals, prevention handbooks, district wide intervention workshops, and family seminars. By providing these services to children and their families who experienced domestic violence, they can help improve these children's academic progress and live healthier lives.

Providing the children with high structure can help children's success in the educational learning environment. Maintaining reasonable rules and limits may provide children with a sense of order and stability (Monahan & Ornduff, 1999). Also mentoring and counseling for the traumatic events they may have faced can help children who have witnessed family violence (Post, 2004). Counselors may provide support groups for children who have witnessed domestic violence.

Educators should be aware of the different signs that children might be witnessing domestic violence so children can get the help they need to succeed in school (Stiles, 2002). Getting these children to verbally express their feelings may help these students feel less guilt and learn it is not their fault ways (Children and Domestic Violence, 2007).
There are many interventions that educators can use to help the child’s performance.

Educators can provide children a safe space to talk about what happens in their family. It is important for children to know it is not their fault and give children time to open up. If the children who witnessed domestic violence display violence, it is important to take the position against violence and allow them to express their anger in non-threatening ways.
Chapter III: Summary, Critical Analysis, and Recommendations

This chapter serves to examine the research done on the effects of children who witness domestic violence and effective intervention strategies. This chapter will summarize the key points of the literature review. In addition, a critical analysis of the literature review will be done. The chapter will conclude with recommendations from the analysis.

Summary

The purpose of this literature review was to examine children the issues for who witness domestic violence at home and the intervention strategies to help these children. This researcher found that there has been a lot of research performed on this topic. The information from this study was obtained from a variety of sources.

The findings from this literary review found community services and school interventions can help these children succeed in school and life (Post, 2004). It is important to have a team approach with teachers, counselors, and other community professionals when supporting these children (Stiles, 2002). It is essential for these professionals to know the warning signs of family violence and know what resources and services can help them through this traumatic time.

There are many negative effects for children who witness domestic violence (Fritz, 2000). Different age levels also display different negative effects. Children who live in homes of domestic violence are at a higher risk for maltreatment, including physical abuse, neglect, sexual abuse, and also emotional abuse (English et al., 2003).

It is difficult to measure how many children witness domestic violence due to underreporting (Fritz, 2000). However, children who witnessed domestic violence exhibit
more behavioral and emotional problems. These children display externalizing behaviors and internalizing behaviors. If schools and the community have awareness of these problems, these children can then get treatment to lead a more productive and healthy life.

Intervention strategies and services can help these children improve their lives (Children and Domestic Violence, 2007). The family, school, and community can work together to help children who witness domestic violence. There are different intervention strategies and services for the different age levels experiencing the abuse. Early intervention is important to prevent serious problems in the future.

Analysis of Literature

This researcher found the authors in this literature review were concerned, empathetic, and considerate of children who witnessed domestic violence in their homes (Stiles, 2002). This researcher also discovered from the literature that witnessing domestic violence has a negative impact on children, even if they are not the one being abused. The negative impacts include cognitive, behavioral, and emotional effects for children who witnessed violence in their homes.

The literature indicated infants, school aged children, and adolescents are affected by witnessing domestic violence, but show different effects depending on their developmental level (Fritz, 2000). Young children will show irritability, sleep disturbances, and regressive behavior. Anxiety, depression, lower self-esteem, and a decrease in academic performance can be seen in older children who witnessed violence at home. Adolescents affected by domestic violence are most severe in their reactions, which can include high levels of aggression, conduct disorder, truancy, and revenge...
seeking. In the most severe exposure to domestic violence, children may experience post traumatic stress disorder (Fritz, 2000). When working with different age levels, it is important to know these negative effects to recognize the possibility of family violence in their home.

It is critical for early identification of students who witness domestic violence for successful interventions (Baker et al., 2004). Earlier effects from witnessing violence is detected, the better the chance of preventing more negative effects from developing later. The research found that there are helpful assessments that can test children exposed to domestic violence for treatment needed and referrals.

Assessment can be useful to identify the trauma these children witnessed in order for early interventions to be effective. An assessment of infants and toddlers requires using information from many sources and many aspects of children’s behavior and their life (Baker et al., 2004). Assessments may be used to help identify children who have witnessed home violence, however these tests do not guarantee that the symptoms reported are caused by witnessing domestic violence. Assessment tools found in the research varied depending on the student’s age.

Once screening has occurred, it is important that a number of people work together for an effective intervention program. “Children of domestic abuse, whether living in the situation or transitioning out of the situation, have several safety related needs that urgently require attention from school professionals” (Haeseler, 2006, p. 534). The research reviewed indicated that teachers and school counselors can play an important role in the lives of these children (Haeseler, 2006). The teachers and school
counselors can earn the student’s trust, be a positive role model, and keep track of
children’s progress in school.

According to Bavolek (1994), school professionals are in an ideal position to
notice if children may be witnessing domestic violence or being abused themselves
because they spend so much time with the children. It is important that educators can
work as a team to provide a safe and supportive environment at school for children. By
providing children with a high structured environment, it will help children’s success in
the educational learning environment when their life at home is so unstable. Also
mentoring and counseling can be beneficial for those children who have had traumatic
experiences (Post, 2004).

The literature review also indicated other services for children of family violence.
The main goal for courts, child protection services, shelters, and police is to find safety
for the children and the caregiver being abused. Some shelters will provide screening and
an advocate for children (Feerick & Silverman, 2006). After the screening, children can
be referred for therapeutic intervention services to ease the trauma-related symptoms the
children may display. These programs not only help stabilize the children, but also the
non-abusing parent.

Throughout this literature review, the authors discussed the importance of early
identification, interventions, and the team approach to help promote success in life and
school for these children (Post, 2004). There are many different intervention strategies
that this review explored for families that experience violence.
Recommendations

Given the body of research, it is important to acknowledge the problem in order to find a solution to family violence. It is recommended that educating students, families, schools, and the community about family violence will create awareness of this problem. This can help provide more intervention strategies and services for these families. A variety of interventions and services should be used to help children who witness domestic violence.

People need to realize witnessing domestic violence has a negative impact on children, even if they are not the one being abused. As a result of witnessing family violence, children may display negative cognitive, behavioral, and emotional effects. These children can suffer their whole lives due to the effects of witnessing family violence. It is very important for educators and other professionals know the warning signs and the services that can help these children through this traumatic time.

Intervention strategies include encouraging children to verbally express their feelings because they may feel guilty or blame themselves (Children and Domestic Violence, 2007.) Allowing children to express their feelings will help them realize that violence in the family is not their fault. There are many other interventions that educators and community services can use to help the children’s academic and social performance. It is important to provide children a safe space to talk about what happens in their family. It is very crucial for children to know it is not their fault and give children time to open up. Outcomes are more successful when a team approach is used when helping these families. Schools and community services should work together to reduce domestic violence. Courts, child protection services, shelters, and police are community services
that may provide safety for the children and the caregiver being abused (Arteaga & Lamb, 2008). School professionals and community services should be knowledgeable about domestic violence and learn how to identify children that may have witnessed violence in their home. Every family has different situations and some may need a variety of services.

Therapeutic interventions may be recommended to promote discussion about the violence that was witnessed by the child (Schewe, 2008). Children from homes of violence should talk about the events; this may begin the healing by helping the child understand the situation. Therapeutic approaches may help children express their feelings about the violent situations that were scene in their homes.

Shelters are recommended for victims of domestic violence, this allows the victim and their children to leave the violent situations (Monahan & Ornduff, 1999). Therapeutic services should also be offered in the shelters for the children because they could be confused about what is happening with their family. If the child has a positive therapeutic experience in the shelter, chances increase that mothers and their children may continue to seek services after leaving the shelter.

Along with these community services, a variety of other services are provided by communities including advocacy services, structured activity programs, and parent education. These programs may help address the needs of the victim and their children from violent homes (Monahan & Ornduff, 1999). Hot lines and support groups are also recommended to provide support for victims of domestic violence (Bavolek, 1994). Treatment programs are also for the victims and treatment programs are offered by the community to the abuser. Victims are not the only one recommended for treatment
programs, abusers may also benefit from treatment programs to prevent violence from resurfacing.

A family-based intervention is the best approach and is recommended when working with families of domestic violence (Bavolek, 2005). Everyone in the family is affected by the violence and need community-based services to rebuild family relationships (Beauchemin et al., 2008). Family-based intervention is important because parenting patterns are learned in childhood and may be repeated later in life.

The educator's responsibility includes being aware of warning signs of violence in the student's home (Stiles, 2002). Educators are encouraged to be of assistance to children from homes with domestic violence and allow them to verbally express their feelings (Children and Domestic Violence, 2007). There are many interventions that educators can use to improve the child's performance in school. Schools are recommended to provide their students with a safe environment and offer their students stability because their lives at home are very unstable. Community services and school interventions can help children who witness domestic violence succeed in school and life. Recommendations to provide families of domestic violence with a strong support system are based on the needs of the family.
References


