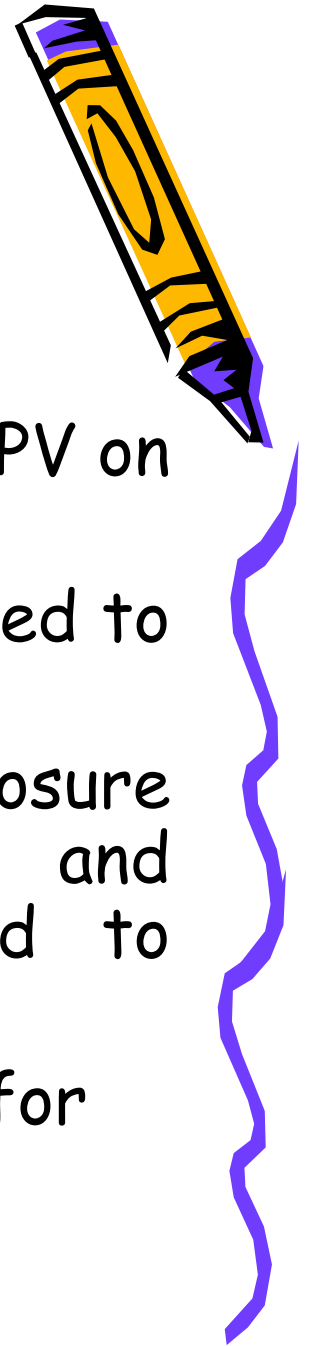


Child Exposure to  
Domestic/Interpersonal  
Violence:  
Current Research and  
Psychological Issues

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10/12/2018

# Objectives

1. To identify & describe the effects of IPV on children
2. To review recent research & data related to child exposure to IPV
3. To id possible symptoms of child exposure including physical, social, behavioral, and emotional realms and how to respond to disclosures
4. To understand treatment interventions for these children



# Definition of Interpersonal Violence (IPV):



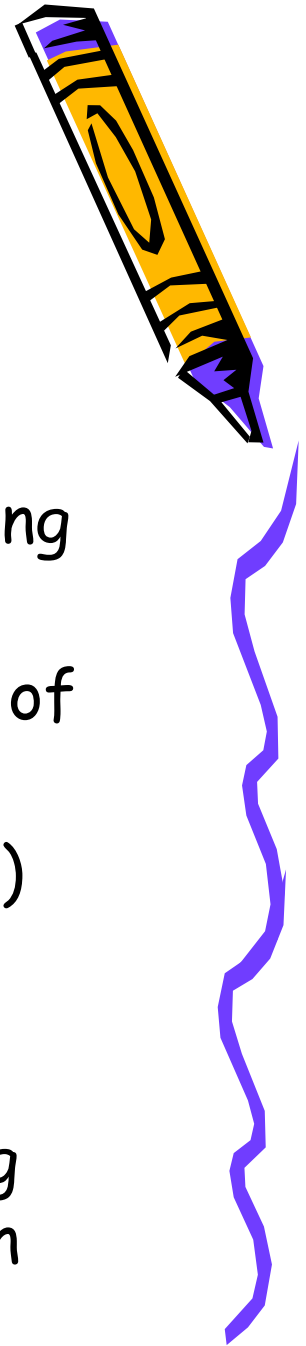
the intentional infliction of harm or injury by one intimate partner on another (current or former partner)

- \*physical, verbal, emotional, psychological, sexual
- \*exerting power and control over another within a relationship
- \*Three Phases= Tension, Violence, Honeymoon
- \*Child Exposure to IPV: can be observed directly or indirectly



# Definition of "Exposure"

- Exposure can include:
  - observing IPV (direct) or hearing/hearing about the violence (indirect)
  - direct involvement by getting in middle of fight or calling police
  - harm experienced by child (Child Maltx)
  - exposure to abuse of a sibling(s)
  - seeing police involvement
  - experiencing aftermath including seeing bruises, parent being sick, items thrown around



# Children's Reaction to IPV

- How do they perceive it?
- Their Feelings
  - Confused & Mixed feelings
  - Blame self
  - Angry, scared/afraid, helplessness, numb, denial, sad, upset
  - Miss abusive pa, lose respect for abused pa
  - Relief

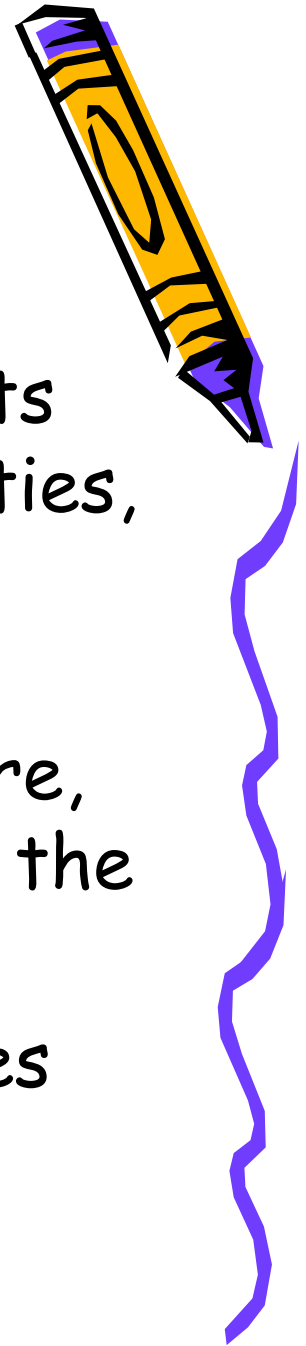
Impact/How they responded:

Try to intervene  
Retreat  
Hide  
Align with abusing Parent



# General Statistic

- Data from 4 large-scale surveys of adults and teens across school districts in 5 cities, estimate 10%-20% of U.S. children are exposed to adult IPV
- Recent US Census data (2007), therefore, would indicate 7 to 14 million children in the US, yearly, are exposed to IPV
- Recent data= children present in V homes more than twice the rate in comparable non-IV homes.



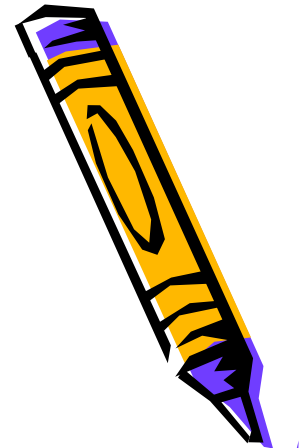
# Correlation Between Child Maltreatment and IPV

- Approximately 30-60% of children whose mothers are being abused (IPV) are themselves likely to be physically and/or sexually abused.
- Children in domestic violent homes are abused (physically and/or sexually) or seriously neglected at a rate 1500% higher than the national average in the general population.
- Children living with an abused mother have been found to be 12 to 14 times more likely to be sexually abused.



# Children Exposed to IPV and Maltreated

- Children exposed to IPV who also were physically or sexually abused were found to have **more behavioral problems** than non-maltreated child witnesses.
- Recent research suggests that without proper intervention, these problems will worsen rather than improve over time.





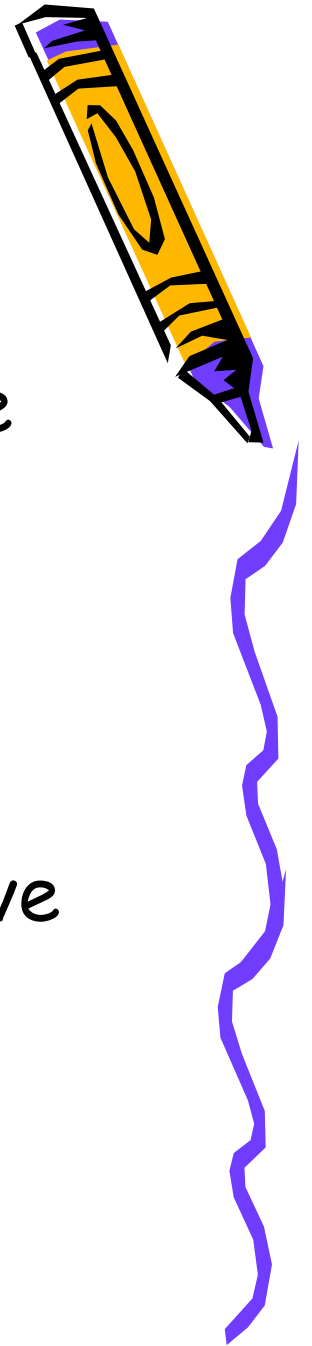
# Effects of IPV on Children

- Children living in violent homes grow-up using same behavior as their parents (Social Learning Theory)
  - 80% of batterers were either abused or witnessed abuse in their homes when they were children.
  - 85% of men in prison and 90% of rapists report they were raised in violent homes.
  - Exhibit same patterns for dealing with anger



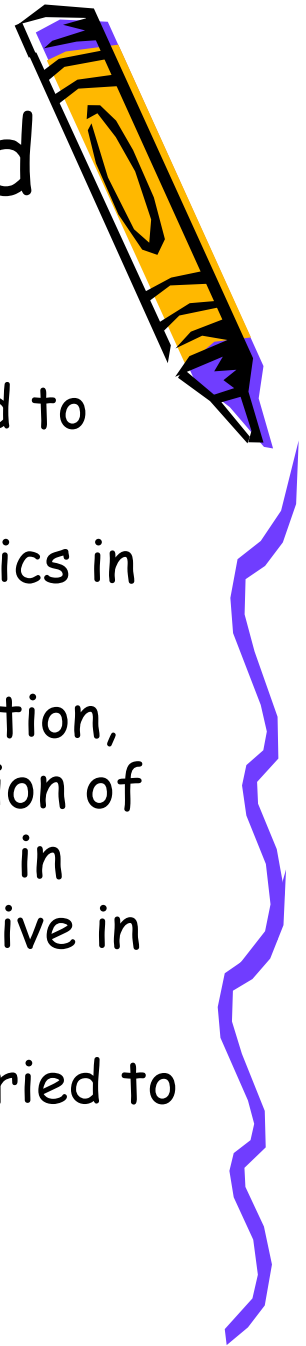
# Effects

- Children from these homes are more likely than other children to have stress-related physical symptoms
  - They may regress to earlier behaviors
- Note: Children are capable of positive outcomes and resiliency
  - Studies indicate 26%-37% of children exposed to IPV show no symptoms (asymptomatic)



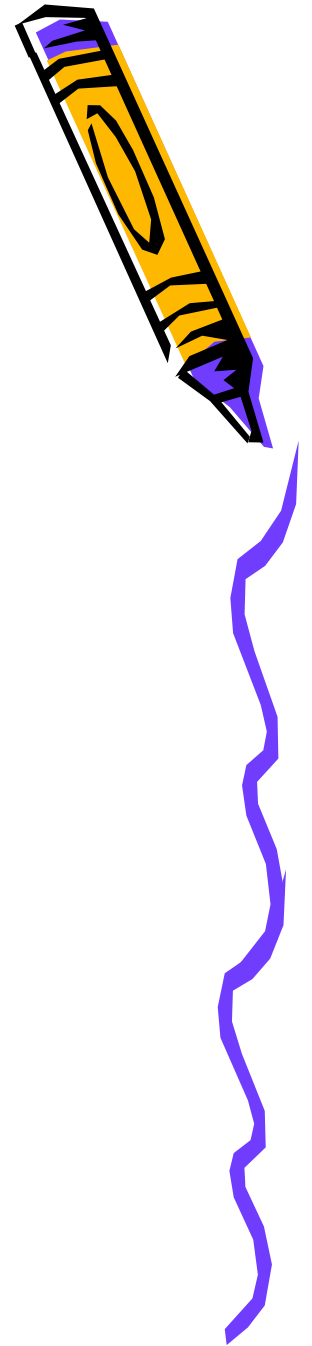
# Effects on Children Exposed to IPV

- Young children (0-5) more likely to be exposed to multiple incidents of IPV
- Boys have increased risk of using abusive tactics in teenage and young adult relationships (1995)
- 3-5 yr olds: increased sx of trauma & dissociation, less empathetic, difficulty regulating expression of negative emotions & more aggressive & violent in their play YET not less happy or less cooperative in play
- Children more likely to be abused when they tried to intervene and stop abuse



Children are faced with the overwhelming task of finding:

- a sense of trust with the untrustworthy
- safety in a situation which is unsafe
- control in a terrifying and unpredictable environment



# 3 Major Types of IPV

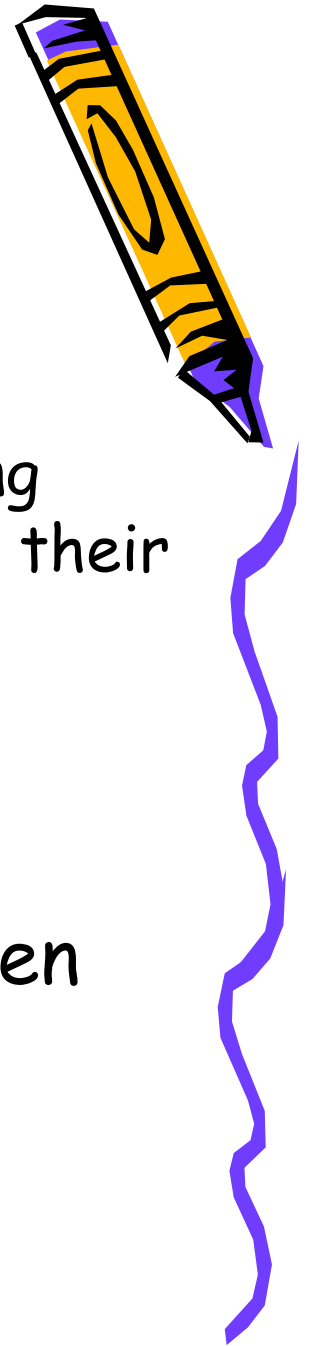


- Coercive Controlling Violence:
  - "intimate terrorism"; dominate their partner; more severe, frequent & injurious
- Violent Resistance:
  - violence in an attempt to stop coercive controller or to exact retribution
- Situational Couple Violence
  - Separation-instigated violence- conflict over the separation itself, occurs for 1<sup>st</sup> time in this context
  - Occurs when couple conflict escalates
  - Extremely variable in its patterns and causes



# Perpetration of These 3 Types

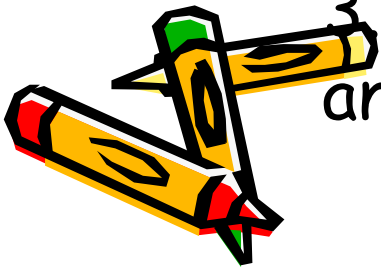
- Perpetrated more often by men against women in heterosexual relationships
- Perpetrated by both men and women and may be mutual
- Primarily among women against their male partner



# Why are these Types of IPV Important?

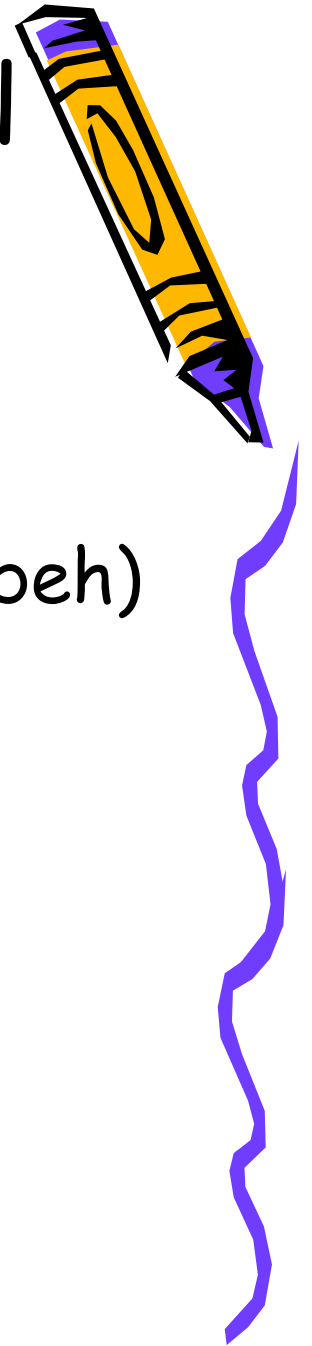


1. Explains contradictory findings regarding nature and prevalence of IPV
2. Different Sample effects:
  - agencies (DV Shelters, hospitals, police) usually related to Coercive Controlling
  - general community samples= more reports of situational couple violence
3. Possibly require different tx interventions and parenting plans in custody cases



# Emotional and Behavioral Symptoms

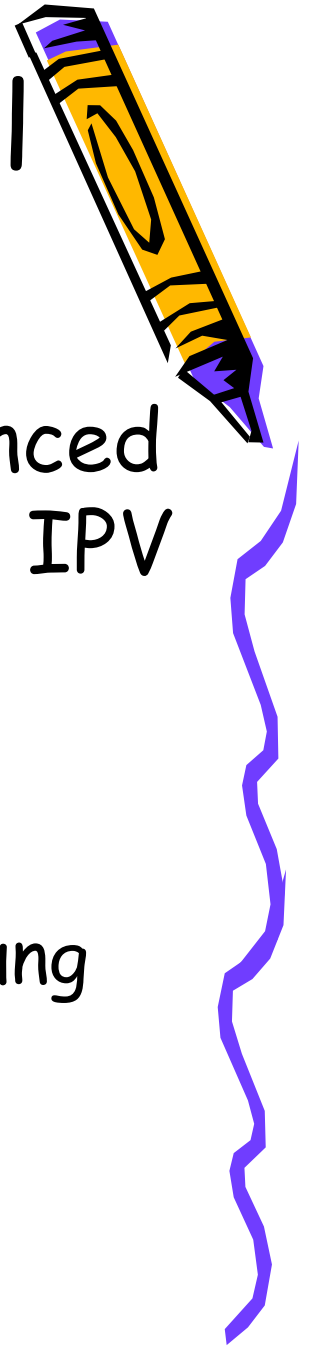
- Elevated levels of emotional and behavioral problems than non-exposed peers (internalizing and externalizing beh)
- Preschool-aged and older youth had elevated PTSD sx; adolescents also increased MDD & ADHD and avoidant attachment with higher levels of delinquency
- Less able to regulate their emotions





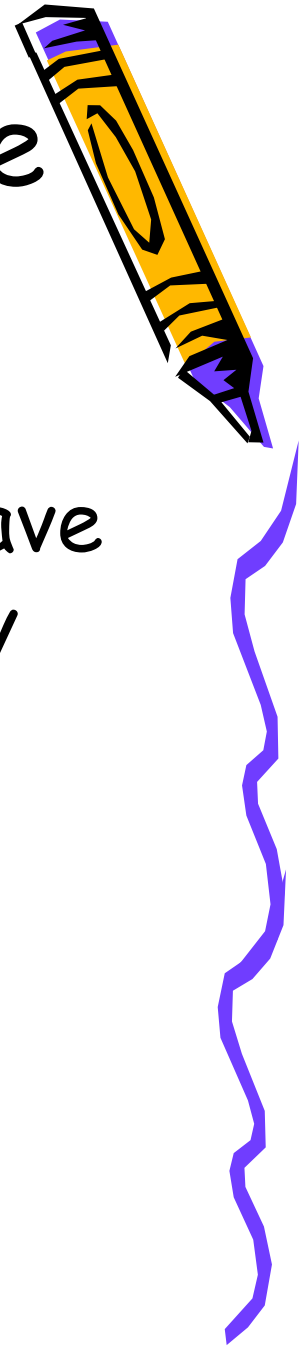
# Emotional and Behavioral Realms

- Negative effects more pronounced with severity and frequency of IPV in their homes
  - Increases likelihood of child difficulties
  - Increased risk of PTSD sx in young children
  - Increase in aggressive and antisocial/criminal behaviors



# Symptoms in the Cognitive Realm

- Preschool kids exposed to IPV have significantly poorer verbal ability
- Children exposed to the more coercive controlling abuse had more reading difficulties



# Social/Interpersonal Realm

- Lower levels of social competence
- Less positive and less effective interactions with peers
- If act more aggressive to peers (beh realm), may lead to peer rejection and isolation
- Lonelier, friendship problems
- Impact on dating relationships



Overall, child exposure to IPV has the potential to negatively impact these children.

Exposure to Coercive Controlling type/ more severe & frequent IPV increases the risk of these negative impacts versus situational couple violence/IPV.



# Characteristics of Psychological Trauma



## Traumatic stressor:

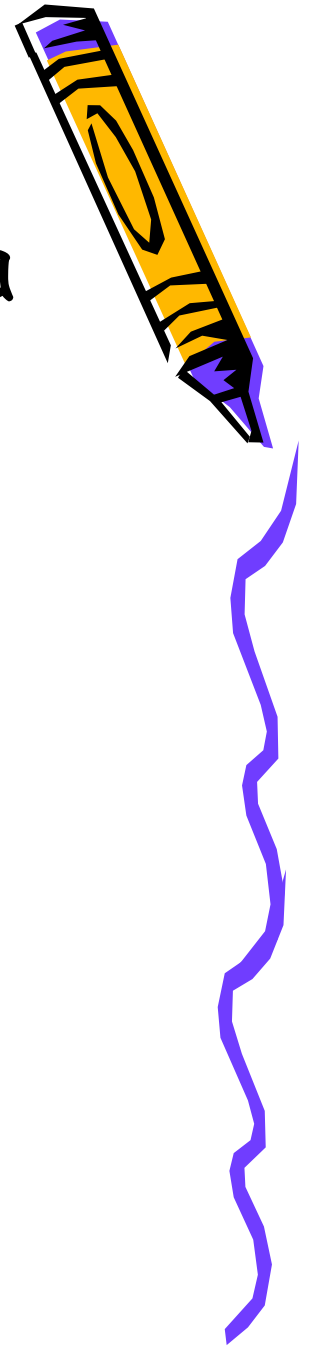
- Event or events that involve actual or threatened death or serious injury, or a threat to the physical integrity of self or others.
- Primary exposure: direct personal experience of an event.
- Secondary exposure: indirect experience of an event by witnessing or knowing of it.



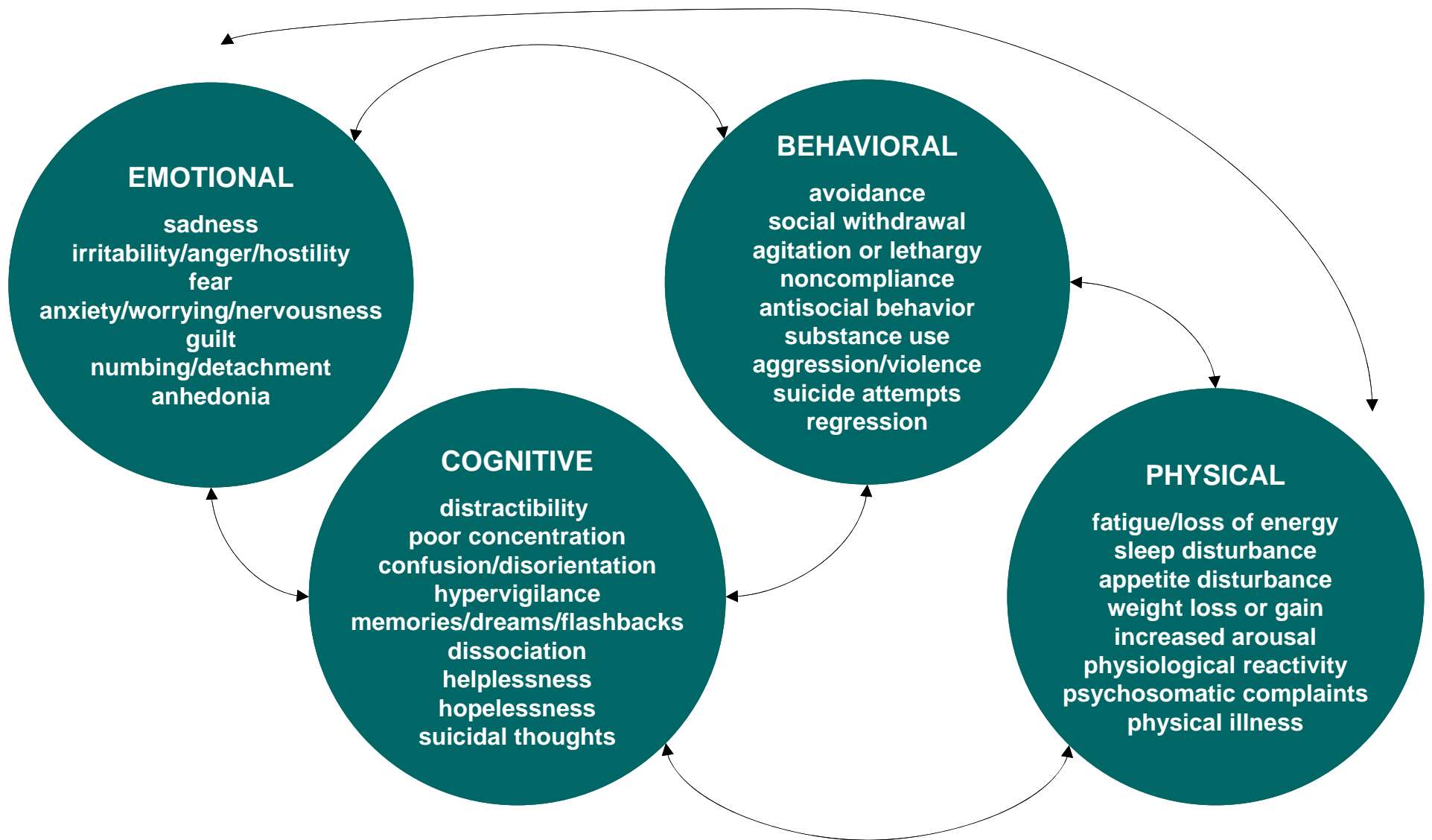
# Secondary Exposure to Trauma

Severity of reaction is related to:

- Proximity of the traumatic event
- Individual's relationship to the survivor
- Presence of supportive person to mediate the intensity of the event

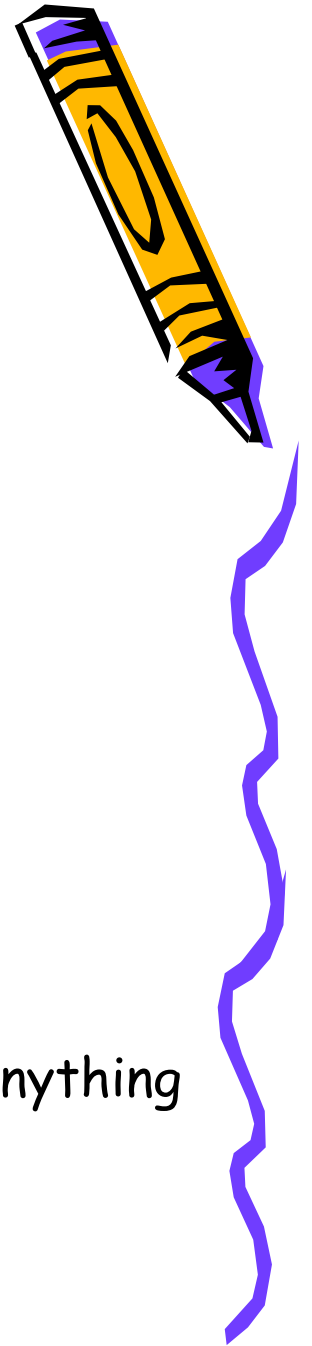


# Traumatic Stress Response



# General Indicators of Trauma Effects in Children and Adolescents

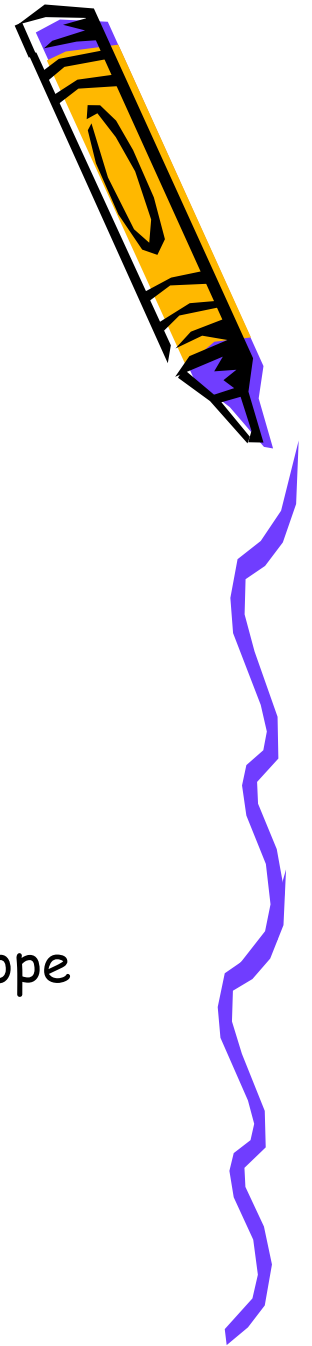
- Trouble sleeping
- Easily startled
- Hypervigilant
- Seek safety spots
- Irritable, aggressive, act tough, provoke fights
- Verbalize a desire for revenge
- Act as if they are no longer afraid of anyone or anything (fatalistic)





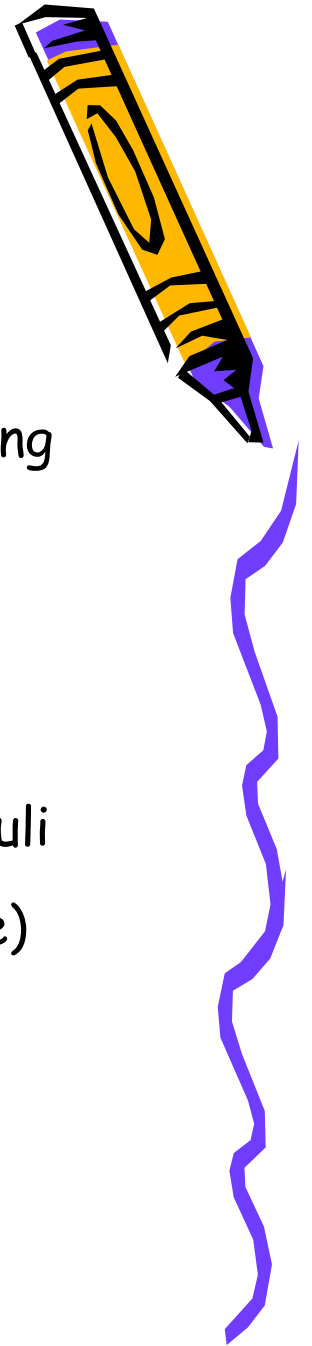
# General Indicators of Trauma Effects in Children and Adolescents

- Forget recently acquired skills
- Return to behaviors that had previously stopped
- Withdrawn
- Headaches, stomach pains, fatigue, etc.
- Become accident prone, taking risks
- Develop a pessimistic view of the future, losing hope



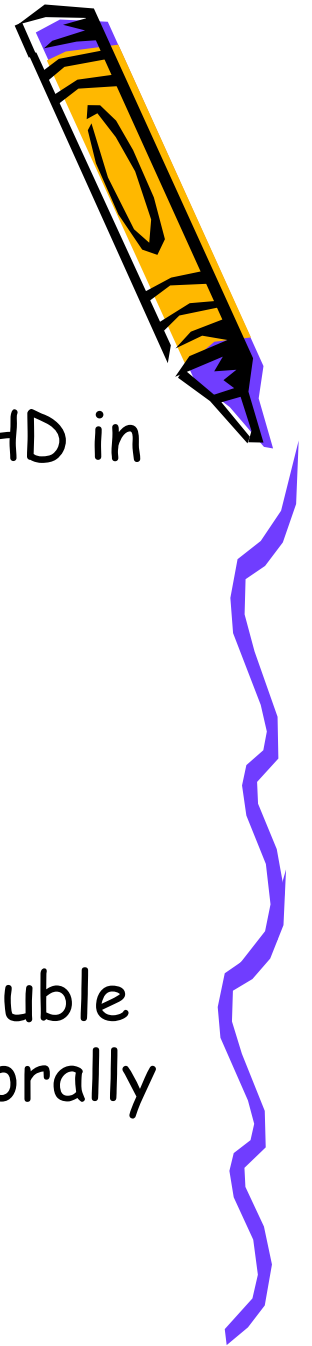
# Long-Term Effects of Trauma

- Generalized hyperarousal and difficulty in modulating arousal
- Alterations in neurobiological processes involved in stimulus discrimination (problems with attention, dissociation, somatization)
- Conditioned fear responses to trauma-related stimuli
- Shattered meaning propositions (loss of trust/hope)
- Social avoidance (loss of meaningful attachments)



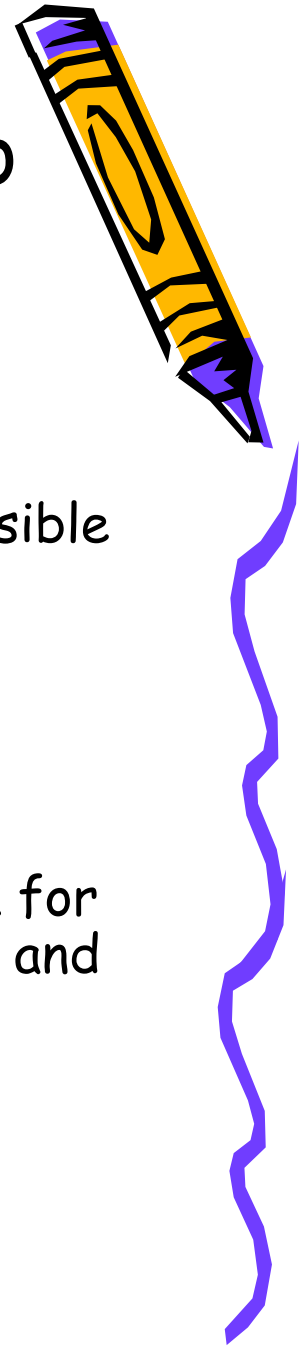
# Possible Diagnoses Related to Trauma/Exposure to IPV

- PTSD (sometimes misdiagnosed as ADHD in children)
- Depression and Anxiety Disorders
- Dissociative Disorders
- Adjustment Disorders
- Disruptive Behavioral Disorders
- Physical problems/Conversion D/O: trouble sleeping, eating, more illnesses, behaviorally delayed
- More risk for Substance Abuse



# General Guidelines for Response to Trauma/Exposure to IPV

- Create a safe environment
- Maintain routines and consistency as much as possible
- Acknowledge the traumatic event and its effects
- Normalize responses to the traumatic event
- Facilitate discussions and include positive outlook for future, BUT don't overwhelm child with questions and sympathy
- Moderate exposure to adult conversations



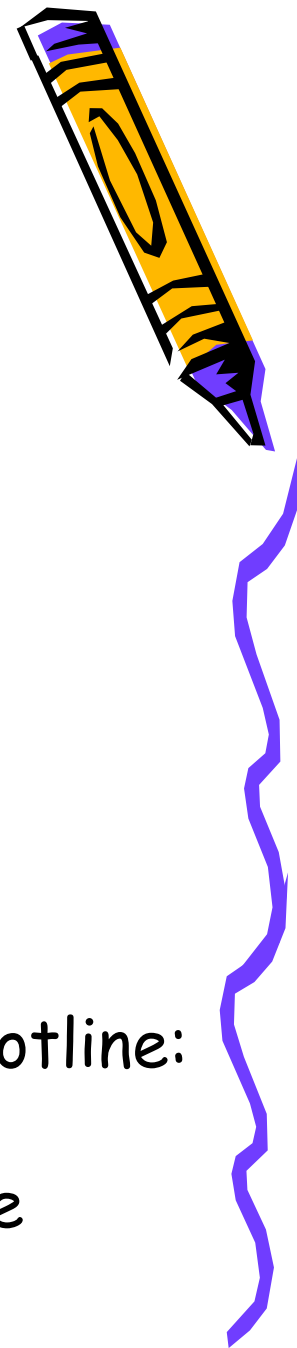
# General Guidelines for Response to Trauma/Exposure to IPV

- Encourage activities to reduce anxiety, enhance mastery and control
- Help children find ways to relax and calm themselves
- Monitor your own reactions and model appropriate behavior (both verbal and non-verbal)
- Monitor discussions and play
- Maintain communication with parents and other significant adults
- Make referrals when necessary and appropriate



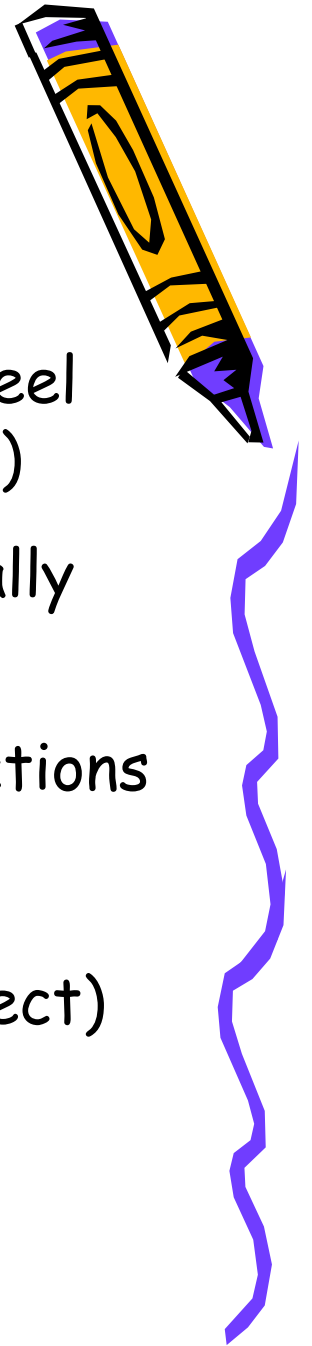
# Interventions

- If a child tells you about an abusive/traumatic incident
  - Remain calm
  - Believe and comfort
  - Assure it is not their fault
  - Consult with Colleagues
  - Discuss with Supervisor - You are a Mandated Reporter!
  - Report Child Maltx to Child Abuse Hotline: 1-800-482-5964
  - "Reasonable Cause to Suspect" Abuse



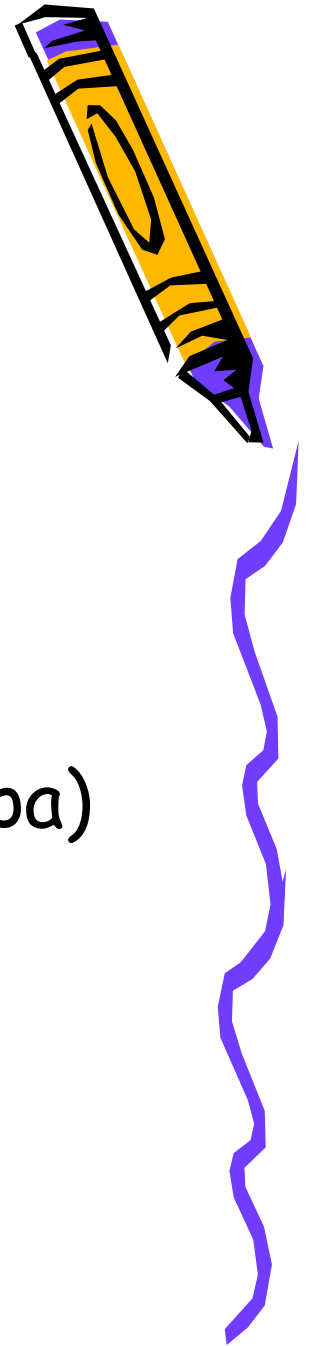
# How to Empower Children

- Get down on their level (how would you feel constantly having to look up to someone?)
- Give them choices (make sure they actually have a choice!)
- Let them take responsibility for their actions
- Actively listen to what they have to say
- Take them **SERIOUSLY** (give them respect)
- Validate their feelings



# Types of Interventions

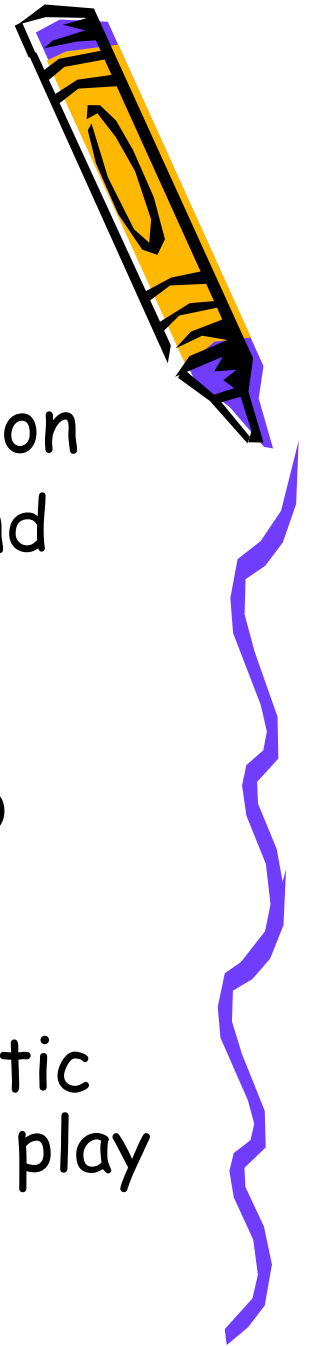
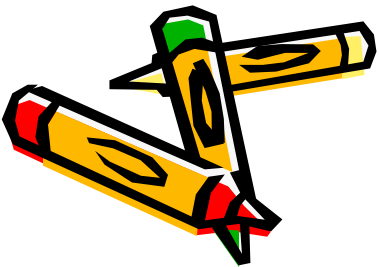
- Play Therapy: Directive vs. Non-directive
- CBT (Trauma-Focused CBT)
- Family Work (with non-offending pa)
- Group Therapy/Support Groups
- Crisis Work





# Play Therapy

- Child's natural medium for expression
- Vehicle for emotional processing and behavior change
- Directive vs. Non-directive
- Play material that will allow child to symbolize or recreate elements of trauma/exposure to IPV
- Reflective commenting or therapeutic questions to expand on narrative in play



# CBT

- Psychoeducation about IPV
- Exposure to Traumatic memory
- Cognitive rules/ Cognitive reframing/  
Cognitive restructuring
- Decision-making/ problem-solving skills
- Impulse control/Behavioral Regulation
- Stress Management Techniques: Breathing,  
Relaxation, and Imagery Work
- Behavioral Modification principles- positive  
reinforcement/reward structure
- Trauma-Focused CBT- for specific trauma



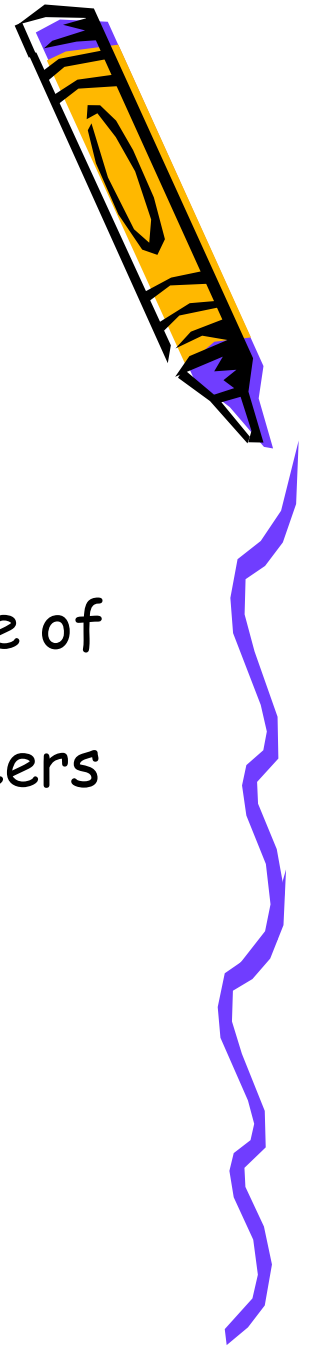
# Family Therapy Interventions

- Family therapy
- Parental training/ Parenting Skill Building
- Parent-Child Relationship/Interaction Training
- Structured Family Visitations/Therapeutic Supervised Visitations



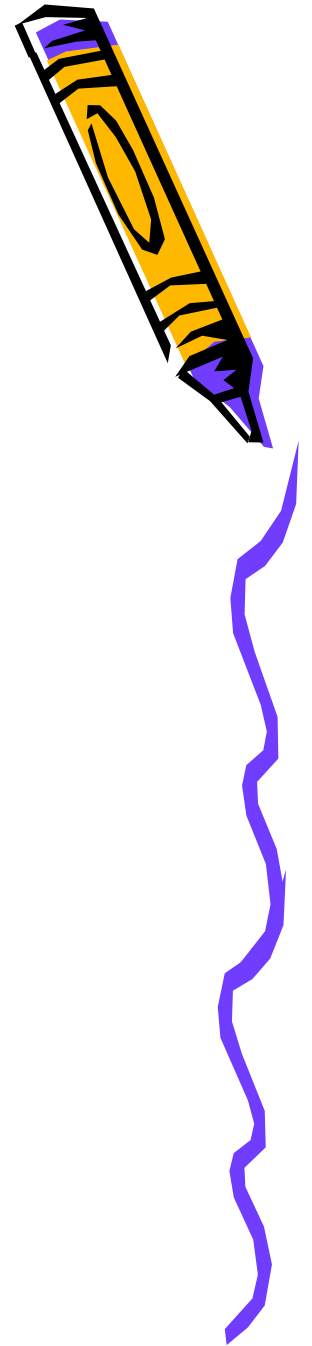
# Group Therapy

- Reasons for Group:
  - Provide information about DV/IPV
  - Normalize child's experience/validate range of reactions to DV/IPV
  - Receive support and understanding from peers
  - Learn coping strategies for managing feelings/thoughts/actions
  - Services to children a key to prevention of future DV/IPV



# Objectives for Kid's Support Group

- "Break the Secret" of DV/IPV
- Learn Safety Skills
- Provide emotional and ed support
- Develop new social support systems/increase social skills
- Increase positive coping skills
- Perspective Taking



# Therapy Resources

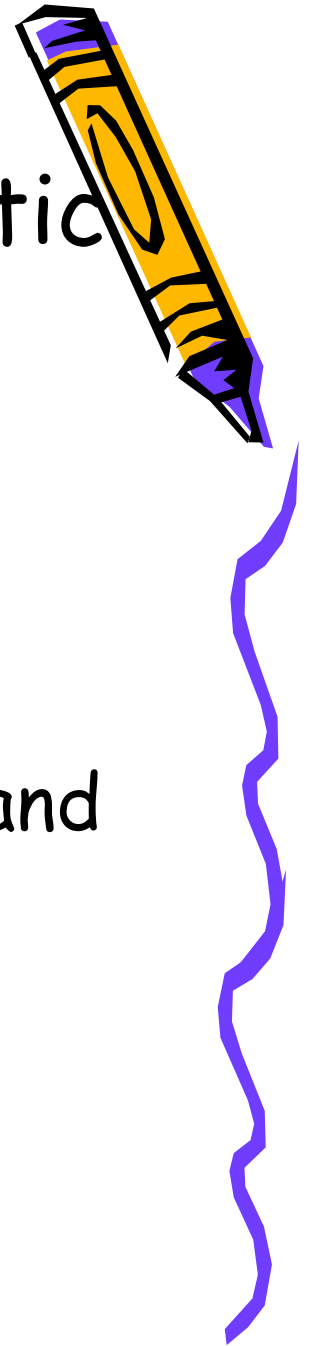


- *The Healing Power of Play: Therapy with Abused Children-* E. Gil
- *Breaking the Silence: Art Therapy with Children from Violent Homes-* C. Malchiodi
- *Working with Children from Violent Homes-* D. Davis
- *Windows to Our Children-* V. Oaklander
- *Play Therapy-* V. Aixline
- *Treating Traumatized Children-* Beverly James
- *Treating Trauma and Traumatic Grief-* J.A. Cohen, A.P. Mannarino, E. Deblinger
- TF-CBT Training: [tfcbt2.musc.edu](http://tfcbt2.musc.edu)
- ARBEST: [arbest.uams.edu](http://arbest.uams.edu)



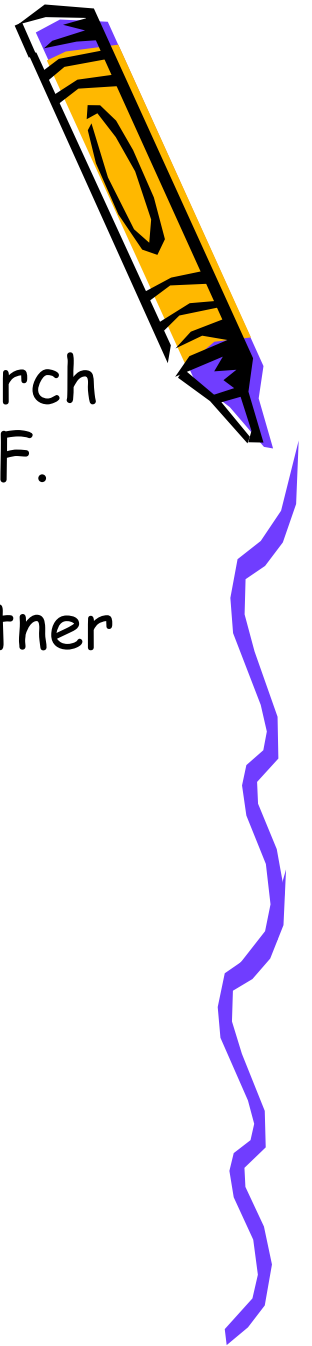
# Arkansas Coalition Against Domestic Violence (ACADV)

- [www.domesticpeace.com](http://www.domesticpeace.com)
- Resources for shelters in the state and educational materials



# Resources

- Parenting Plan Evaluations: Applied Research for the Family Court- Edited by Kathryn F. Kuehnle and Leslie M. Drozd
- From Research to Practice: Intimate Partner Violence: Presentation at the AFCC 12<sup>th</sup> Symposium on Child Custody Evaluations, November, 2016, Atlanta, GA
- AFCC- Guidelines for Examining Intimate Partner Violence: [www.afccnet.org](http://www.afccnet.org)
- Battered Women's Justice Project: [www.bwjp.org](http://www.bwjp.org)





# Questions

- Contact Information:

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