Children and Domestic Violence: Lessons Learned about Risk and Resilience

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Child Witness to Violence Project

- Provides counseling services to children age 8 & younger (and their families) who have witnessed significant violence
- Provides training/consultation to providers who work with children affected by violence.
- Member of the National Child Traumatic Stress Network/Early Trauma Treatment Network

Lessons Learned

1. Being the bystander to violence may be as psychologically traumatizing for a child as being the direct victim.
2. Domestic violence is a particularly toxic form of trauma for children.
3. There is no age at which a child is immune to the effects of trauma or violence exposure.
4. The child’s reaction to the trauma is closely related to the parent’s ability to cope with the trauma.
Children affected by domestic violence: Why should we care?

- As many as 15 million children will witness domestic violence each year (McDonald, Jouriles, et al, 2006).
- The majority of children who are exposed to domestic violence are under the age of eight (Fantuzzo et al, 1997; Atkins, & Marcus, 1997).
- National Child Traumatic Stress Network:
  - Data gathered from over 10,000 children seen in 72 sites across the country; exposure to domestic violence was the second most frequently mentioned type of traumatic experience.
Being the bystander to violence may be as psychologically traumatizing for a child as being the direct victim.

Trauma and Young Children

- Unanticipated finding: most potent trauma variable predicting PTSD symptoms was witnessing a threat to the caregiver.

Post-traumatic Stress Disorder in Child Witnesses to Domestic Violence

- Study by Kilpatrick, Litt, & Williams, 1998
- Interviewed children who had witnessed domestic violence:
  - Ages 6-12
  - Witnessing confirmed by mother and child
  - No other traumatic experiences in child’s history
- Used control group, matching for age, demographics, SES
• FINDINGS:
  – 85% of child witnesses had moderate or severe PTSD symptoms
  – 0% of control group had symptoms
• CONCLUSION:
  – Witnessing domestic violence is an experience sufficiently intense to precipitate PTSD in children

There is no age at which a child is immune to the effects of violence or trauma.

Early childhood trauma

• Infants as young as 3 months of age may show traumatic stress responses following direct exposure to trauma.
  • (Lieberman, 2004)
National Child Traumatic Stress Survey

Data on 1700 children across 25 sites of the NCTSN

Findings:
- Children averaged exposure to 3 trauma types
- Average age of onset: 5 years old
  - Cooke, Blaurestein, Van der Kolk, 2003)

Profile of Children Seen in the Child Witness to Violence Project

149 clinical charts reviewed
Age: 60% age 6 or under
Gender: 73% are boys
Age of first violence-exposure—61% exposed from birth

Most frequently reported symptoms found in CWVP referrals:

<table>
<thead>
<tr>
<th>Symptom</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Temper Tantrums/Angry Outbursts</td>
<td>60%</td>
</tr>
<tr>
<td>Aggressive with Peers</td>
<td>60%</td>
</tr>
<tr>
<td>Aggressive with Adults</td>
<td>56%</td>
</tr>
<tr>
<td>Demanding/Controlling</td>
<td>50%</td>
</tr>
<tr>
<td>Play re-enactment</td>
<td>41%</td>
</tr>
<tr>
<td>Nightmares/sleep disruptions</td>
<td>40%</td>
</tr>
</tbody>
</table>
Characteristics of the Violence

- Type of violence:
  - 57%—hitting, kicking
  - 16%—use of knife or gun
  - 17%—threats involving knife or gun

Trauma Affects Brain Development

- Early exposure to life stress associated with persistent changes in stress response systems, in particular, atypical patterns of cortisol production (Nemeroff, 2004; Dozier, 2006; Hart, Gunnar & Cicchetti, 1995)
- Traumatic experiences change the architecture of the brain (Shonkoff, 2005; Teicher, 2000; Perry, 1997)

Stress and the young child

Stressful events can be harmful, tolerable or beneficial, depending on:
- Whether the stressful experience is controllable
- How often and for how long the body’s stress system has been activated in the past
- Whether the affected child has safe and dependable relationships to turn to for support.

Shonkoff, 2006
PTSD in Very Young Children

- Presence of traumatic stress symptoms in very young children well documented (Scheeringa, 1995; 2001)
- Traumatic Stress Disorder – DC:0-3-R: Zero to Three, 1994
- Pre-school Post Traumatic Stress Disorder – Proposed diagnosis for the DSM V
- Trauma symptoms that are unique to early childhood: New aggression, separation anxiety, or fears and loss of previously acquired developmental skills

Domestic violence is a particularly toxic form of trauma for children.

Studies of Children Who Witness Domestic Violence

- 100+ studies
  Exposure to domestic violence impacts:
  - Social-emotional development
  - Cognitive/academic performance
  - Physical health/health-care utilization
  - Identification with social norms and values
  - Long term physical and psychological health
Not all children are equally affected by domestic violence
Some are strong at the broken places

Influences on a child’s response

• Characteristics of the child
  • Age
  • Gender
  • Temperament/personality

• Characteristics of the Family & Community
  • Quality of parenting
  • Characteristics of the community
  • Access to outside supports

• Characteristics of the Violence/trauma
  • Frequency
  • Severity
  • Proximity

Studies of child exposure to domestic violence and resilience

Three studies

• 1 with a community based sample (Graham-Bermann, Grothe, Howell, Haro, 2007)

Shelter-based Studies

Findings
26% doing well; 31% reporting no problems (mother and child report)

Limitations
• shelter based
• Small sample size
• Reporting bias
Resilience in a community-based sample of children exposed to domestic violence

- N=219 children, ages 6-12
- Assessed
  - Numbers of violent incidents witnessed
  - Child functioning
  - Quality of parenting
  - Family characteristics
  - Maternal trauma and depression

How are these children doing?

What factors/variables affected their resilience?

- Resilient children witnessed less violence
- The mothers of resilient children did not have a prior partner who was violent
- Mothers had increased ability to parent effectively and appropriately under stress
- Families more responsive and cohesive
- Mothers had lower rates of trauma and depression
Implications and Challenges for our work

It becomes curiouser and curiouser... (Alice in Wonderland)

It is complicated!

- One size (intervention, legal remedy) does not fit all

Supporting or repairing the parent-child relationship is an essential ingredient to helping children affected by domestic violence
Support for parents & children

• Safety
• Assistance with the concrete problems of daily living
• Education about the impact of trauma on children
• Supportive developmental guidance for parents
• Assistance for maternal trauma or depression
• Opportunities for the child to share his/her experience of domestic violence within a safe relationship

Resources

• Contact information: betsy.groves@bmc.org
• Child Witness to Violence Project Website: childwitnessstoviolence.org
• National Child Traumatic Stress Network: nctsn.org
  Go to the children and domestic violence webpage
• National Scientific Council on the Developing Child: http://developingchild.harvard.edu/initiatives/council/
• Family Violence Prevention Fund: endabuse.org
• Minnesota Center against Violence & Abuse: http://www.mincava.umn.edu/