

Queensland Centre for Domestic and Family Violence Research

Impact of the experience of domestic and family
violence on children – what does the literature have
to say?

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Review methodology

This literature review was undertaken in order to support an evaluation of a parent education programme and a children's therapy programme that was introduced in regional Queensland in 2018. It was planned as part of a co-design process with the service to help inform clinicians and researchers about key messages from existing research as to what has been found to work in supporting children who experience domestic violence and specifically on understanding the impact of experiencing domestic and family violence on children and young people. The narrative literature review methodology employed in this evaluation follows the suggestions of Green, Johnson and Adams (2006) and Ferrari (2015) and aims at synthesising multiple types of reports of empirical research in order to articulate dominant debates and diverse perspectives related to a phenomenon. Boolean operators were employed with the terms 'domestic violence', 'children', 'interventions', 'impact' and 'exposure' and 'responses' and applied using Google Scholar searches. The time period of focus was primarily 2010 onwards in order to build on the growing meta reviews of research and literature that have been undertaken in this field from the early 2000s onwards (see for example Graham-Bermann & Edleson, 2001; Kitzmann, Gaylord, Holt & Kenny, 2003) and to focus on more recent contributions to this field. It has been suggested that narrative literature reviews are useful tools for researchers who have extensive experience in both research and publication and who have a breadth of understanding of a particular area (Ferrari, 2015).

IMPACT OF EXPOSURE OF CHILDREN AND YOUNG PEOPLE TO DOMESTIC VIOLENCE

Summary of key findings from meta-reviews of the literature related to the impact of children's exposure to domestic violence

Researchers have learned about the impact of domestic violence on children and young people based primarily on interviews and assessments of children who have come to the attention of services and authorities – be this police, child protective or victims' services. Contemporary understandings of exposure of children to domestic violence prefer the term 'experience' of domestic violence rather than 'witnessing' as 'experience' communicates the level of impact on children in these situations (Lamb, Humphreys & Hegarty, 2018). There is wide recognition based on empirical research that there is correlation between child abuse and neglect and children experiencing domestic violence (Broady & Gray, 2018; Herrenkohl, Sousa, Tajima, Herrenkohl & Moylan, 2008; Yount, Di Girolamo & Ramkrishnan, 2011). It is important to bear in mind however, that many children and young people do not report their experiences of child abuse and neglect and retrospective studies have found that this number exceeds those who are known to support systems (Euser, Alink, Pannebakker, Bakermans-Kranenburg & Van Uzendoorn, 2013). What is known is therefore based on those children who may be reached through their, and their caregivers', contact with services. Based on this research population, the impact of domestic violence exposure on children can be understood in various ways including its physical health outcome effects, its psychological and behavioural effects and its consequences for socioeconomic (SES) outcomes. Increased utilisation of health care and costs of health care have been found for children of mothers who experience domestic violence Rivara, Anderson, Fishman, Bonomi, Reid, Carrell & Thompson, 2007). Whilst researchers in this field focus on specific areas of expertise and interest, it is also worth noting, that children's experience of exposure is varied and will reflect a unique combination of family and individual factors (Edleson,

Ellerton, Seagren, Kirchberg, Schmidt & Ambrose, 2007). Areas related to the effect of age, gender, ethnicity, disability and sexuality are, overall, under-explored in the wider literature.

In an extensive review of psychosocial outcomes related to 118 studies, Kitzmann, et al (2003) concluded that children exposed to intimate partner violence were impacted, compared with children who weren't exposed, but that there are also a significant number of children who show resilience and competency in the face of the violence. In the studies reviewed a range of adjustment issues was investigated. These included:

- externalising behaviours such as aggressive behaviour and conduct problems;
- internalising behaviours such as depression, anxiety, low-self-esteem and hyper-vigilance
- attachment issues
- various social competencies with peers such as withdrawal and difficulty relating to others
- impacts on physical health.

Similar to other reviewers in this field the authors point out that few of the studies they reviewed controlled for systemic issues such as low SES and stress or parental substance dependency (Kitzmann, et al, 2003).

In Holt, Buckley and Whelan's (2008) review of research published on widely used databases from 1995-2006 the increased risk of child abuse and sexual abuse among children and young people experiencing domestic violence was identified. The authors also proposed that in addition to the emotional and behavioural impacts that the exposure to violence increased the risk of experiencing other adversities in victims/survivors' lives such as poverty and lack of social support. Both resilience and individual competencies also have an influence on the degree of life long impact in that some

children and young people's social competency, resilience, strong self-concepts and educational achievement meant that they were able to escape their families' violence (Holt, et al 2008). In common with other meta-reviews the authors commented on the importance of parent/child attachment but also wider extended family and social and community support as strong protective factors. Methodological issues in relation to meta-reviews of empirical research were also raised in regards to distinguishing between individual as opposed to universal impacts and experience of other types of trauma in a child or young person's life.

Stanley's 2011 review from the UK, particularly focuses on the impact of domestic violence on mothering and the effects of living with paternal abuse. The risk of immediate physical injury to women and children is described in this review along with the effects of Post-Traumatic Stress Disorder symptoms for both mother and children as a result of the violence. Heightened fear and anxiety, sleep problems and difficulty concentrating have been identified as effects for both mother and children along with increased tension in households where violence may unpredictably erupt. It is not surprising that anger and increased aggression towards others has been identified as an effect on children and young people (Stanley, 2011). Population data widely reflect the gender disparity in relation to domestic violence perpetration (WHO, 2010) and it is therefore important that in investigating the impact of exposure that the effect of instrumental paternal violence on both the mother and her children is investigated. Mothers' parenting may be undermined by the abuse she experiences in terms of her self-esteem and confidence in the face of coercive control (Stanley, 2011). Abusive manipulation of children's loyalties is also likely to disrupt maternal attachment and reduce a mother's ability to manage her children's behaviour. The effects are likely to be particularly pernicious where paternal family members and friends are drawn into the abuse of the mother leading to further disempowerment of the mother's position (Stanley, 2011).

Stanley's (2011) work summarises the research on differential responses to exposure to domestic violence on children and young people related to developmental-stage. Pre-school children appear to experience the most problems and are likely to display at least one trauma symptom such as sleep disturbance, aggression, temper tantrums or anxiety and sadness (Stanley, 2011, p34). Continued exposure increases the risk of developmental impacts such as delay in developing verbal skills. Experiencing domestic violence at school age has been associated with the development of conduct disorders and emotional difficulties (Stanley, 2011, p.35). Stanley (2011) cited an Australian study which found that 75% of a sample of children in out-of-home care experienced domestic violence in their birth families and recommends that interventions for this group of children need to focus specifically on their safety and recovery (Stanley, 2011, p.35). In adolescence, the effects on young people include mental health issues such as depression along with increased labelling of delinquency (Stanley, 2011, p.35). Heightened aggression towards, not just their peers, but also their parent (usually their mother) has been found to be associated with their experience of violence.

Recent Australian-based meta-reviews

In 2011, Richards described how little is known about the extent of children and young people's exposure to domestic violence. Few Australian states and territories record the presence of children when police attend domestic violence incidents with the exception of Victoria. Data submitted to the Senate Inquiry into Domestic Violence in Australia, 2014 by Domestic Violence Victoria, indicated that children were present at 18,927 family violence incidents in 2012-2013. Enquiries with Queensland Police Service in the course of preparing this literature review revealed that the service is no longer required to record the presence of children in instances of domestic violence. Richards (2011, p.1) summarises previous reviews and identifies potential impacts on children and young people as:

- depression;
- anxiety;
- trauma symptoms;
- increased aggression;
- antisocial behaviour;
- lower social competence;
- temperament problems;
- low self-esteem;
- the presence of pervasive fear;
- mood problems;
- loneliness;
- school difficulties;
- peer conflict;
- impaired cognitive functioning; and/or
- increased likelihood of substance abuse.

Herrenkohl et al. (2008) are cited in Richards (2011) in regards to the longer term impacts in young people which are reported as an increased risk of: eating disorders, teenage pregnancy, early school leaving, suicide attempts, delinquency and violence. Unlike other studies, Richards (2011) also identifies a potential link between intergenerational transmission of domestic violence and re-victimisation. This is particularly related to the attitudes that young men may assume, attendant on their experience of exposure. In regards to resilience, Humphreys' (2007) research is referred to which demonstrated that by no means all children affected by domestic violence experience long lasting effects of trauma and in fact may do as well developmentally as comparison groups of children.

Among the key findings of Campo's (2015) wide reaching Australian review of research and writing related to children's exposure to domestic violence are the following:

- the link between domestic violence and children's experience of homelessness,
- the complexity of potential consequences in that not all children and young people go on to perpetrate violence in the future,
- that interventions to support children need to include carers in order to strengthen attachment and also be trauma-informed,
- that the intersecting policy responses involving domestic violence, criminal justice, child protection and family law all impact on the wellbeing and parenting of children and young people.

Physical Health impacts

There is a dearth of research on the physical sequelae for children who are exposed to domestic violence. Pre-natal experience of domestic violence has been found to be associated with low birth weight and dysregulated psycho-biological responses in relation to heart rate and nervous system development (Yount, Girolamo, & Ramakrishnan, 2011). Similarly, low birth weight, preterm births and small-for-gestational-age effects have been found in a recent review of 50 relevant hospital-based studies (Donovan, Spracklen, Schweizer, Ryckman & Saftlas, 2016). Some studies have found failure to thrive, difficulty in feeding and unsettled sleep patterns among infants who experience domestic violence (Harne & Radford, 2008). There is a growing body of recent work on the life course impacts of exposure to violence in relation to premature telomere degradation (related to human cellular ageing) (Shalev, Moffit, Sugden, Williams, Houts, Danese, Arseneault & Caspi, 2013), and also increased risk of a range of respiratory problems, cardiovascular disease and gastrointestinal disorders (Wegman & Stetler, 2009). Little is known about the general health of children exposed to domestic violence, about the use of health services, and infant development such as breast feeding or weight gain (Bair-Merritt, Blackstone, & Feudtner, 2006). However, Graham-Bermann and Seng (2005) have found that children from low SES homes who also experience violence and high levels of traumatic stress are at greater risk of experiencing health problems compared with other low SES children. Such health effects include increased incidence of asthma, allergies and Attention Deficit Hyperactivity Disorder (ADHD) among child victims (Graham-Bermann & Seng, 2005). There is some evidence that following exposure to domestic violence, there is an increased risk of substance abuse and dependence and depression in later life (Pineiro, 2006).

Psychological and behavioural impacts

Of particular relevance to this review much more is known concerning the emotional, psychological and behavioural impacts of childhood exposure to domestic violence. Indeed the weight of research and systematic reviews are concerned with these effects. However, studies vary in terms of methodological heterogeneity in that researchers control for other intervening factors to a lesser or greater degree when measuring the effects of exposure to intimate partner violence. In recent years there has been further exploration of the differential impacts of types of domestic violence (physical, sexual and psychological) on children and young people, on the maternal relationship and on the impact of response systems.

McDonald, Shin, Corona, Maternick, Graham-Bermann, Ascione & Williams (2016) found that among school age children exposed to domestic violence, post-traumatic and associated psychological symptoms were moderated by family environmental factors such as mothers' education level and individual coping levels of the children in the study. In a related study by Fusco (2017), mediating effects of strength of mother-child attachment, family functioning and the level of mothers' emotional support were found to moderate the impact of exposure to intimate partner violence.

In a retrospective study, the need to distinguish between exposure to psychological versus physical abuse was identified (Naughton, O'Donnell & Muldoon, 2017). Due to the fact that frequently physical abuse is the focus of identifying and prosecuting domestic violence, retrospective research with child victims reveals the negative impact of psychological abuse may be overlooked (Naughton, O'Donnell & Muldoon, 2017).

In a study on the likely impact of trauma on children and young people, Cook, Spinazzola, Ford, Lanktree, Blaustein, Cloitre, DeRosa, Hubbard, Kagan, Liautaud, Mallah, Olafson & van der Kolk (2017) reviewed data from twin studies, which demonstrated that the long term effects of complex trauma

(where children and young people may be exposed to a combination of domestic violence and child maltreatment), included a range of psychological and behavioural difficulties. These include: depression, ADHD, oppositional defiant disorder (ODD), conduct disorder, anxiety disorders, eating disorders, sleep disorders, communication disorders, separation anxiety disorder and reactive attachment disorder (Cook et al., 2017). The authors refer to three main ways in which children may disassociate including: automatising of behaviour (deficits in judgement, planning and organised goal-directed behaviour), compartmentalisation of painful memories and feelings and detachment from awareness of emotions and self. It is strongly recommended that interventions should be aimed at building children's strengths and reducing these dissociative symptoms as they are likely to impede developmental learning and processes (Cook et al., 2017).

In relation to the impact of domestic violence on maternal perception of infant temperament and resulting attachment difficulties, a Bangladeshi study (Edhborg, E-Nasreen & Kabir, 2017) distinguished between mothers' experiences of emotional, sexual and physical domestic violence and their impact on maternal depressive symptoms. All types of abuse were associated with increased risk of maternal depression and mothers' perceptions that their babies were unadaptable and unpredictable leading the authors to recommend screening and referral for all new mothers (Edhborg, E-Nasreen, & Kabir, 2017).

Parental relationship impacts

Increasingly, research on the impact of children's exposure to domestic violence is concerned with coercive control and impacts of this behaviour on mother-child functioning (Katz, 2016). Rather than perceiving children and young people as passive victims of domestic violence these studies highlight the gendered ways in which control may be exerted. These studies also address how children and young people may resist coercive control but also the ways in which this type of violence causes harm. Coercive control has been found to isolate children and prevent them from seeing their mothers and grandparents (Katz, 2016). Other social activities or outside of school activities may also be curtailed. Whilst some studies describe such actions as 'non-violent' the impact of such behaviour risks damaging children and young people's sense of self-worth, disempowering them, limiting their resistance and leading to emotional and behavioural problems (Katz, 2016). In other words the impact may be just as, if not more, harmful than other forms of violence. Coercion and control may also be exercised through perpetrator control of access to medical and psychological treatment as well as manipulation of child protection and family law systems.

Thiara and Humphreys (2017) found that child contact arrangements and ongoing harassment by the father led to interruptions in the mother-child dyad relationship. Eroded self-esteem, the continuing impact of trauma, fear and uncertainty contributed to attachment problems between mother and child/children. Rather than judging mothers experiencing such relationship difficulties, the authors urge child protection workers and other services to be mindful of possible covert influence of the father's behaviour and to focus on his actions and accountability for them (Thiara & Humphreys, 2017).

In an interesting study which adopts a feminist lens in order to understand the impact of exposure to domestic violence, the victims (mothers) were interviewed in regards to their perceptions of the

impact on their children (Stacy-Ann Louis & Johnson, 2017). In this study, mothers reported that children were used as a bargaining tool by them in order to *prevent* domestic violence and by perpetrators in order to *exercise control* over the victim. Mothers' observations of coping mechanisms utilised by the children included: listening to music, adopting care taking roles, and positioning themselves away from the violence (Stacy-Ann Louis & Johnson, 2017).

Namy et al., (2017) have explored the co-occurrence of domestic violence and child abuse and based on their interviews with mothers and children have explained how a cycle of emotional and physical abuse results in bystander trauma for the victims, negative role modelling, protection and further victimisation and displaced aggression. This study applies a feminist lens in order to understand how gender and power dynamics can contribute to intra-familial violence (Namy et al., 2017).

Impact of secondary victimisation

Other recent Australian research has further explored the influence of the Australian Family Law system where women are subjected to distressing adversarial court customs and practices and a court which promotes at times unquestioned contact with the father (Roberts, Chamberlain & Delfabbro, 2015). The women in this study reported experiencing ongoing violence, coercion, and control but that the court favoured mediated contact and co-parenting arrangements regardless (Roberts et al, 2015). The women in this study felt silenced, powerless, and an undermining of the mother-child relationship. The impact of the *dynamics* of domestic violence is increasingly evidenced through qualitative research. This research trend is redressing the difficulty with which quantitative research methods have been limited in demonstrating these more 'difficult to measure' impacts of domestic violence exposure on children. Secondary victimisation, in the form of the failure of protective systems to recognise the dynamics of domestic violence, risks children and young people losing their faith in caregivers and in systems to protect them, increasing their fear and amplifying the direct effects of the violence.

Recognising children and young people's experience and agency

In Lamb, Humphreys and Hegarty's 2018 research with children who have experienced domestic violence their voices are prioritised in regards to the messages they wish to impart to their fathers attending a men's behaviour change programme. This research emphasises children's agency, their right to be heard and the ways in which responses may empower them to contribute to their fathers' accountability (Lamb, Humphreys, & Hegarty, 2018).

In line with this child-informed strengths perspective, other recent research has chosen not to see children who experience domestic violence as necessarily emotionally incompetent and/ or dysregulated but rather as reflexive and agentic beings (Callaghan, Fellin, Alexander, Mavrou & Papathanasiou, 2017, Överlien, 2017). Increasingly research emanating from this perspective highlights the resilience and coping skills of children where they navigate complex sets of social relationships in order to achieve some comfort and self-soothing (Callaghan et al., 2017). Överlien's (2017) research describes how children between the age of eight and 20 years employ a range of strategies before, during and after a domestic violence episode. Such actions reflect the particular situation and context and their age-related responses. Older young people may use their physical strength to intervene in the violence when they judge this to be achievable, younger children used other means such as stepping between their mother and her abuser (Överlien, 2017). Överlien (2017) recommends focussing on the actions that children take and the assessments they make rather than solely focussing on their feelings and their vulnerability. In this way the author argues that rather than position children and young people as helpless and harmed, they can be understood as capable and coping (Överlien, 2017).

Conclusion

This literature review has traversed key findings from a selection of meta-reviews of empirical research including recent Australian meta-reviews which have investigated the impact of exposure to domestic violence by children and young people. A wide range of negative emotional, psychological and behavioural consequences have been identified which have potential implications for treatment and service responses. The review then moved to a selection of recent research and writing in the field which indicates a shift away from necessarily viewing children and young people as helpless and silent victims, towards recognising them as individuals with strengths in terms of some agency expressed through the skills and abilities they employ in order to survive and to respond to the violence. Both these 'harm' and 'strengths' approaches go on to be reflected in the design of this evaluation in that not only do the harmful effects of domestic violence constitute part of the evaluation methodology but also the skills and capabilities employed by children and young people and their carers.

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