

Coordinated Community Response Pilot Project

in conjunction with

Partners in Parenting

Thursday 7 September 2000

Domestic Violence As Child Abuse

[Slide 1 – Introduction]

Thank you for inviting me to your community awareness event on this fifth day of Child Protection Week.

I notice that today's event is organised by the *Coordinated Community Response Pilot Project* in conjunction with *Partners in Parenting*. I am always impressed when I see organisations working collaboratively as I believe that collaboration and coordination are essential ingredients in the human services area and have advocated for them both in my former life as an educator and currently as Children's Commissioner.

I understand that the Coordinated Community Response Pilot Project was established for, as its name suggests, the purpose of coordinating existing domestic violence services in Wynnum and was initiated, and primarily funded by the Brisbane City Council.

I congratulate the Brisbane City Council for its recognition of the importance of coordinated service delivery by its support of this project and also those of you in the Wynnum community who support it, and *Partners in Parenting*. I know that no project or organisation survives without those community members who remain committed long after the sod turning and the first flush of enthusiasm has past, and stay doing what they do because they know it is worthwhile and needs to be done.

I am pleased to be able to address you today, because it allows me to talk to you about something that I feel needs greater public recognition than it generally receives and that is the effect that domestic violence has on children.

The theme of Child Protection Week this year is *Family: Australia's Most Important Team*. I think this is a particularly appropriate theme at this time when our national focus is on the upcoming Olympic Games. The metaphor of the family as a team is powerful in its ability to reframe our image of the family in a context that most Australian's are comfortable with, sport.

Teams are generally characterised by such things as team spirit, and doing things for the good of the team, and sportsmanship and fair play. In well functioning teams, each member has an identified role that combines with the different roles of other members so that in the end, the team can be greater than the sum of its parts. Team members are supportive of each other with no place for personal self interest at the expense of the team as being a team member implies a willingness to act as a member of a group rather than as an individual.

Many families are able to operate in such a way that makes the team analogy appropriate, but some are not.

In families where domestic violence occurs, by either male or female, the needs and expectations of the perpetrator take precedence. The results of one survey¹ suggest that in up to 12 percent of cases, spousal violence victims are male.

However, as chronic domestic violence is characterised by a male perpetrator and a female victim, for the sake of editorial simplicity, in some places I use the term 'mother' as synonymous with victim.

In families where domestic violence occurs, the family does not operate on the basis of cooperation but coercion and fear. Family members are conditioned to respond to the slightest change in tone or body language and control frequently becoming the name of the game. The team becomes fragmented and dysfunctional and the whole ends up being less than the sum of its parts, as the parts are fractured and diminished in the process.

When those parts are young, and developing, and uncertain of whom they are, and where they are going, and needing an environment exactly the opposite of what they are experiencing, this fracturing and diminution is magnified.

When people talk about child protection they usually are referring to protecting children from the four forms of harm that are seen to constitute child abuse. That is physical, emotional, and sexual abuse, and neglect. The issue that I feel needs more public recognition is that children who experience domestic violence, whether that violence is directed at the child or not, are also abused children.

The following are some of the ways in which I suggest that children living with domestic violence are abused.

Children who witness domestic violence are abused by:

[Slide 2 - Ways in which children are abused by living with domestic violence]

- being denied a safe and supportive environment in which to grow and develop;
- witnessing their mother being abused;
- hearing and seeing ongoing verbal and or emotional abuse and degradation and isolation of their mother;
- being physically, verbally or emotionally abused when they attempt to stop their mother being assaulted;

[Slide 3 - Ways in which children are abused by living with domestic violence]

- being denied extended family, peer and broader social supports and connections as a result of the social isolation imposed by the perpetrator;
- being denied the emotional resources of their mother required for their emotional, physical and social wellbeing and development²;

[Slide 4 – Ways in children are abused by living with domestic violence]

- feeling responsible for the violence or else blaming their siblings or mother;
- having to assume a parental role over younger siblings if the mother is rendered physically or emotionally incapable, or to protect them from harm during explosive outbursts;

[Slide 5 - Ways in children are abused by living with domestic violence]

- feeling guilt, shame and embarrassment;
- being pressured to maintain the family secret; and

- being subjected to death threats against either themselves or their mother³.

Children experiencing domestic violence are also unable to predict or control their environment or the consequences of their behaviour or the behaviour of others. This is an essential element for making sense of the world and developing an understanding of cause and effect. Without this, psychological organisation and integration is threatened.

These children also miss out on being exposed to appropriate role models and effective forms of communication and problem solving techniques. They have to be constantly on guard and are frequently unable to laugh or joke or have fun. They are deprived of unconditional love and support and suffer diminished confidence and self esteem.

So it is not only the immediate grief and trauma and stress the child experiences, there is the tragedy of their lost potential. The attitudes and behaviours they don't learn. The things they can't do. And the people they can't become.

Until relatively recently, children were the silent and forgotten victims of domestic violence. There was a failure to recognise that secondary victimisation occurs when a person is witness to domestic violence, or is affected by its consequences. When support was provided, it was almost invariably directed exclusively toward the mother with the assumption that the child would be alright once the mother's situation was resolved.

When the literature first started to report on the effects of domestic violence on children it was mainly limited to clinical descriptions of the behavioural and emotional problems demonstrated by children in women's shelters⁴. As the effects of domestic violence on children started to become a study in its own right, research methodology began to improve and now generally incorporates standardised measures that look at a wider range of children's dysfunctional and adaptive behaviours. These include their cognitive and social problem-solving skills, their coping and emotional functioning and their generalised behaviour⁵.

It must be remembered, however, as with any situation, individuals will show a greater or lesser degree of resilience depending on the interaction of a range of personality, dispositional, gender and environmental factors. The same applies with children who witness or are the victims of domestic violence. Nevertheless, there are characteristic effects on children of different ages and the more intense and acute the discord, and the fewer mediating factors, the greater the negative effects are likely to be⁶.

For example, recent neurological research has been able to demonstrate that chronic stress and trauma can impact on the basic neurological organisation of a young child's brain. When the stressful or traumatic states are sufficiently intense or prolonged they can induce a stress state that is similar to the post-traumatic stress disorder seen in children who are victims of inescapable war or abduction⁷.

It is thought that even in utero infants respond to maternal stress with their own stress states and by six weeks of age an infant's disturbances in response to spousal violence can be clearly observed⁸.

[Slide 6 – Infants]

In addition, infants exposed to domestic violence are more likely to exhibit, poorer health, poorer sleeping habits, excessive crying⁹, and are dramatically more at risk

for disturbed attachment with their mother¹⁰, which in itself, is associated with a wide range of symptomatology, than infants in non-violent situations.

[Slide 7 – Toddlers]

Toddlers growing up in the presence of spousal violence experience an increased frequency: of illness, extreme shyness, low self-esteem, and social problems such as hitting and biting¹¹. Boys demonstrate greater rates of aggressive behaviour while girls tend to demonstrate more withdrawn, passive, clinging and anxious behaviour¹².

[Slide 8 – Pre-schoolers]

Pre-schoolers exhibit similar effects as toddlers with the addition of: increased physical symptoms that are not the result of an underlying medical condition; and a tendency to assume personal blame for the violence. They also experience increased levels of anxiety and social isolation¹³.

[Slide 9 - Primary aged children]

In addition to the effects experienced by the younger age groups, primary school aged children have greater difficulty with school work and concentration and have poorer school attendance. They are more rebellious against authority and more aggressive, have greater difficulty with peer relationships, and are more depressed. Primary aged girls are more anxious and withdrawn¹⁴.

[Slide 10 – Adolescents]

For adolescents, living with domestic violence is a strong predictor of severe problems including depression, aggression and violent delinquency¹⁵. By adolescence, some children have learned to use violence as an acceptable way of solving problems and so form the next link in the chain of intergenerational violence. It has been suggested¹⁶ that observing parental aggression and violence is more strongly related to future involvement in severe marital violence than is being the victim of abuse. By this age some boys start to model the perpetrator's behaviour and begin assaulting their mother or siblings¹⁷.

National research conducted in 1999 on the attitudes and experiences of young people, aged between 12 and 20 years of age, of domestic violence¹⁸, demonstrated that exposure to parental domestic violence influences young people's attitudes, either making them more accepting of domestic violence or highly intolerant of it, having experienced its damaging effects. The study demonstrated the prevalence of relationship violence even in the early years of dating with the following statistics:

[Slide 11 - Prevalence of dating violence against girls]

- 26% of girls had been pushed, grabbed or shoved by a boyfriend;
- 19% had been physically threatened by a boyfriend; and
- 14% had boyfriends try to force them to have sex.

The results for boys were equally as worrying:

[Slide 12 – Prevalence of dating violence against boys]

- 21% had been slapped by a girlfriend;
- 19% had been pushed, grabbed or shoved by their girlfriend; and
- 13% had been bitten, hit or kicked by their girlfriend.

As there is an overlap between violence toward women and violence toward children, estimated by a several studies to be at least 40 per cent¹⁹, some children who witness domestic violence are also victims of the abusive behaviour²⁰. There is also

evidence that children are up to eight times more likely to be hurt by their mothers while the mother is living in a violent relationship than when the mother is safe from violence²¹. This means that some children are witness to the spousal violence and are also subjected to violence from both parents.

How does anyone survive that, let alone a child?

Whether children are the subject of the abusive behaviour or a witness to another's abuse, it is essential for them to be treated as the victims they are. Their heightened risk on a range of factors, but particularly psychopathology, which they are four times more likely to exhibit than children from non-violent homes²², requires they be helped in their own right. It is not sufficient to focus on the mother's need and assume that her long term recovery will correlate with that of her child.

When a child has been damaged, neurologically, emotionally, socially, and psychologically, it is unrealistic to expect that, even when the mother's capacity to protect her child has been restored, she can be the source of therapeutic intervention the child requires.

The deficits in functioning and the dysfunctional and maladaptive behaviours require outside professional support and understanding. Just as a sporting team does not exist in isolation but is supported by its various professionals such as coaches and physiotherapists and nutritionists and the team doctor, the family recovering from domestic violence also needs outside professional support to help its members recover from the damage and injury - but particularly the children.

Meeting the needs of traumatised children requires an understanding of the extent of the effects of the trauma over time, including the violent commissions and omissions the child has experienced. Without appropriate professional support that is sensitive to the child's need and experiences, the system inadvertently replicates the original insensitivity shown to the child's needs by being exposed to violence in their own home. It is only by developing an awareness of these children as the abuse victims they are, and their need for support that is multi-disciplinary and responsive to their individual needs, will we be able to ensure a better future for children who live with domestic violence.

[Slide 13 – Commission contact details]

¹ Bagshaw, D., Chung, D., Couch, M., Lilburn, S., & Wadham, B., 2000, *Reshaping responses to domestic violence: Volume 2 : Appendices*, Adelaide: University of South Australia, South Australia Department of Human Services, Partnerships Against Domestic Violence.

² As described by the Centre for Women's Health, at the Benevolent Society of NSW, as cited in Leslie Gevers Community Management Services, 1999, *Practice standards for working with children and young people who have lived with domestic violence: Kids and DV*, first published 1999 by Commonwealth of Australia, Reprinted by Families, Youth and Community Care, Queensland, Partnerships Against Domestic Violence.

³ Domestic Violence Resource Centre, 1998, *Domestic Violence Resource Centre Factsheet: Not just another statistic, Violence against women is widespread*, Brisbane: Domestic Violence Resource Centre.

⁴ James, M., 1994, Domestic violence as a form of child abuse: Identification and prevention, *Issues in Child Abuse Prevention*, 2, July 1994, <http://www.aifs.org.au/nch/issues2.html> extracted 16.9.99.

⁵ James, M., 1994, Domestic violence as a form of child abuse: Identification and prevention, *Issues in Child Abuse Prevention*, 2, July 1994, <http://www.aifs.org.au/nch/issues2.html> extracted 16.9.99.

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- ⁶ McIntosh, J., 2000, *Thought in the face of violence: a child's need*, keynote address to the National Forum on Children, Young People and Domestic Violence: The Way Forward, Carlton Crest Hotel, Melbourne, 26-27 April 2000.
- ⁷ Davies, W., & Flannery, D., 1998, Post-traumatic stress disorder in children and adolescents exposed to violence, *Paediatric Clinics of North America*, 45, 2.
- ⁸ Zeanah 1998 cited in McIntosh, J., 2000, *Thought in the face of violence: a child's need*, keynote address to the National Forum on Children, Young People and Domestic Violence: The Way Forward, Carlton Crest Hotel, Melbourne, 26-27 April 2000.
- ⁹ Leslie Gevers Community Management Services, 1999, *Practice standards for working with children and young people who have lived with domestic violence: Kids and DV*, first published 1999 by Commonwealth of Australia, Reprinted by Families, Youth and Community Care, Queensland, Partnerships Against Domestic Violence.
- ¹⁰ Zeanah 1998 cited in McIntosh, J., 2000, *Thought in the face of violence: a child's need*, keynote address to the National Forum on Children, Young People and Domestic Violence: The Way Forward, Carlton Crest Hotel, Melbourne, 26-27 April 2000.
- ¹¹ Leslie Gevers Community Management Services, 1999, *Practice standards for working with children and young people who have lived with domestic violence: Kids and DV*, first published 1999 by Commonwealth of Australia, Reprinted by Families, Youth and Community Care, Queensland, Partnerships Against Domestic Violence, p. 16.
- ¹² *Ibid.*
- ¹³ *Ibid*, p. 16-17.
- ¹⁴ *Ibid*, p 17.
- ¹⁵ *Ibid.*
- ¹⁶ Kalmuss, D., 1984, The intergenerational transmission of marital aggression, *Journal of Marriage and the Family*, 46, 11-19, cited in James, M., 1994, Domestic violence as a form of child abuse: Identification and prevention, *Issues in Child Abuse Prevention*, 2, July 1994, <http://www.aifs.org.au/nch/issues2.html> extracted 16.9.99.
- ¹⁷ Leslie Gevers Community Management Services, 1999, *Practice standards for working with children and young people who have lived with domestic violence: Kids and DV*, first published 1999 by Commonwealth of Australia, Reprinted by Families, Youth and Community Care, Queensland, Partnerships Against Domestic Violence, p 17.
- ¹⁸ Department of Education, Training and Youth Affairs, Partnerships against Domestic Violence, National Crime Prevention, 2000, *Young people and domestic violence: National research on young people's attitudes and experiences of domestic violence*, Fact Sheet, Department of Education, Training and Youth Affairs.
- ¹⁹ Straus, M., Gelles, R., & Steinmetz, S., 1980, *Behind Closed Doors*, Anchor Books, New York; and Hughes, 1986, Research with children in shelter: implications for clinical services, *Children Today*, 15, (2), 21-25, cited in James, M., 1994, Domestic violence as a form of child abuse: Identification and prevention, *Issues in Child Abuse Prevention*, 2, July 1994, <http://www.aifs.org.au/nch/issues2.html> extracted 16.9.99.
- ²⁰ James, M., 1994, Domestic violence as a form of child abuse: Identification and prevention, *Issues in Child Abuse Prevention*, 2, July 1994, <http://www.aifs.org.au/nch/issues2.html> extracted 16.9.99.
- ²¹ Walker, 1987, L., 1984, *The battered wife syndrome*, Springer Publishing Company: New York, cited in James, M., 1994, Domestic violence as a form of child abuse: Identification and prevention, *Issues in Child Abuse Prevention*, 2, July 1994, <http://www.aifs.org.au/nch/issues2.html> extracted 16.9.99.
- ²² McIntosh, J., 2000, *Thought in the face of violence: a child's need*, keynote address to the National Forum on Children, Young People and Domestic Violence: The Way Forward, Carlton Crest Hotel, Melbourne, 26-27 April 2000.