

Intimate Partner/Domestic Violence Co-Occurring with Child Maltreatment

A Bibliography



February 2021

***Local Service.
Global Leadership.***



210 Pratt Avenue, Huntsville, AL 35801
256-533-(KIDS) 5437 • nationalcac.org



© 2014, 2016, 2017, 2018, 2021 National Children’s Advocacy Center. All rights reserved.

Preferred citation: National Children’s Advocacy Center. (2021). Intimate Partner/Domestic Violence Co-Occurring with Child Maltreatment: A Bibliography. Huntsville, AL: Author.

This project was supported by a grant awarded by the Office of Juvenile Justice and Delinquency Prevention, Office of Justice Programs, U.S. Department of Justice. Points of view or opinions in this document are those of the author and do not necessarily represent the official position or policies of the U.S. Department of Justice.

Scope

This bibliography covers literature significant to the study of child maltreatment that co-occurs with witnessing domestic violence/intimate partner violence. Some publications listed also cover community violence and poly-victimization. Included are English language articles and book chapters. Numerous international publications are included. This bibliography is not comprehensive.

Organization

Publications are divided into two sections. Publications covering *Intimate Partner Violence Co-Occurring with Child Maltreatment* are listed in date-descending order beginning on page 3. Publications covering *How Children Talk about Their Experiences* begin on page 53. Publications in each section are listed in date descending order. Links are provided to unrestricted access publications when possible. Author abstracts are provided except where otherwise noted.

Disclaimer

This bibliography was prepared by the Digital Information Librarian of the National Children's Advocacy Center (NCAC) for the purpose of research and education, and for the convenience of our readers. The NCAC is not responsible for the availability or content of cited resources. The NCAC does not endorse, warrant or guarantee the information, products, or services described or offered by the authors or organizations whose publications are cited in this bibliography. The NCAC does not warrant or assume any legal liability or responsibility for the accuracy, completeness, or usefulness of any information, apparatus, product, or process disclosed in documents cited here. Points of view presented in cited resources are those of the authors, and do not necessarily coincide with those of the National Children's Advocacy Center.

Intimate Partner/Domestic Violence Co-Occurring with Child Maltreatment

A Bibliography

Intimate Partner/Domestic Violence Co-Occurring with Child Maltreatment

Lawson, M., Speidel, R., Fondren, K., Cummings, E. M., & Valentino, K. (2020). Intimate partner violence and maltreated preschoolers' internal representations of conflict. *Journal of Family Psychology, 34*(4), 425–435. <https://doi.org/10.1037/fam0000627>

Family violence, including intimate partner violence (IPV) and child maltreatment, has detrimental consequences across the life span. Robust evidence from families experiencing relatively normative conflict demonstrates the central role of children's internal representations, or beliefs and expectations of relationships, on children's adjustment. The current investigation examines children's implicit internal representations of interadult conflict among families experiencing IPV and child maltreatment. Maltreated ($n = 132$) and nonmaltreated ($n = 82$) preschoolers ($M_{age} = 4.93$ years, $SD = 1.11$) completed a narrative story-stem completion task in which they were asked to generate narrative endings to interadult conflicts. Narratives were coded for constructive conflict resolutions, dysregulated destructive behaviors, and the proliferation of interadult aggression toward the child. Mothers reported the frequency of IPV and constructive conflict between themselves and their partners within the past year. The potential additive and interactive effects of IPV, constructive conflict, and child maltreatment on children's internal representations of conflict behaviors were examined. The narratives of maltreated children depicted more constructively resolved conflict as interadult constructive conflict tactics increased. Maltreated and nonmaltreated children did not differ in their representations of conflict resolution at high levels of constructive conflict tactics. Maltreatment was positively associated with representations of dysregulated destructive behaviors and conflict spread to the parent–child relationship. IPV was positively associated with representations of conflict spread. Constructive conflict, in turn, was negatively associated with conflict spread. The findings highlight the importance of the multiple expressions of family conflict and violence on children's implicit internal representations of conflict. (PsycInfo Database Record © 2020 APA, all rights reserved)

Sijtsema, J. J., Stolz, E. A., & Bogaerts, S. (2020). Unique risk factors of the co-occurrence between child maltreatment and intimate partner violence perpetration. *European Psychologist*. <https://doi.org/10.1027/1016-9040/a000396>.

Recent studies found that there is considerable overlap between perpetrators of intimate partner violence (IPV) and child maltreatment (CM), suggesting that both types of domestic violence can co-occur. However, there is a lack of consistency about the prevalence of co-occurrence, what unique risk factors and outcomes of co-occurrence are, and whether co-occurrence differs between Europe and other world regions. The aim is thus to review existing evidence and provide a framework for the study of IPV and CM co-occurrence by identifying unique risk factors and outcomes. In total, 12 European studies were identified that examined risk factors of co-occurrence between IPV and CM. Risk factors were distinguished at the individual, dyadic, and broader contextual levels, and compared between Europe and other regions of the world. Despite significant variation between studies, several general patterns were discerned, both globally and region-specific. These insights were used to develop a framework for the explanation of IPV and CM co-occurrence, which has implications for prevention and treatment. Importantly, more awareness and early signaling of risk for co-occurrence may counteract the spill-over from one type of domestic violence into the other to the benefit of children's safety and well-being.

Rancher, C., Jouriles, E. N., Johnson, E., Cook, K., & McDonald, R. (2019). Self-blame for interparental conflict among female adolescents who have been sexually abused. *Journal of Family Psychology*, 33(8), 982-987. <https://doi.org/10.1037/fam0000539>

This study evaluated whether self-blame appraisals for interparental conflict relate to conduct problems among female adolescents who have been sexually abused. Participants included female adolescents who had experienced sexual abuse and a current, primary nonabusing caregiver. Families presented for services at a children's advocacy center. Female adolescents (N = 263, Age 11–17 years, M = 13.68, SD = 1.74) reported on conduct problems, self-blame appraisals for interparental conflict, self-blame appraisals for their sexual abuse, perceptions of the frequency and severity of interparental conflict, and whether the sexual abuse involved coercion. Caregivers reported on adolescent conduct problems and their contact with a romantic partner. Adolescent relationship to the alleged abuser and the severity and duration of the sexual abuse were coded from forensic interviews and case records. Adolescent self-blame appraisals for interparental

conflict were positively associated with adolescent and caregiver reports of adolescent conduct problems. These relations emerged even after controlling for other theoretically important variables, such as self-blame appraisals for sexual abuse. Adolescent appraisals for interparental conflict may be an important target for assessment and intervention for female adolescents who have been sexually abused. (PsycInfo Database Record © 2020 APA, all rights reserved)

Victor, B. G., Henry, C., Gilbert, T. T., Ryan, J. P., & Perron, B. E. (2019). [Child protective service referrals involving exposure to domestic violence: Prevalence, associated maltreatment types, and likelihood of formal case openings](https://doi.org/10.1177/1077559519843605). *Child Maltreatment*, 24(3), 299-309. <https://doi.org/10.1177/1077559519843605>

Childhood exposure to domestic violence (CEDV) is widely understood as potentially harmful to children. Accordingly, many child welfare systems in the United States construe CEDV as maltreatment when the exposure results in harm or threatened harm to the child. The purpose of the current study was to investigate substantiated child welfare referrals directly related to CEDV to better understand the prevalence and patterns of CEDV-related maltreatment and how child welfare workers respond under the “harm or threatened harm” standard. Data were drawn from 23,704 substantiated referrals between 2009 and 2013 in a large Midwestern child welfare system. Approximately 20% of substantiated referrals were CEDV related. A plurality of CEDV-related referrals included both a male caregiver and female caregiver who were co-substantiated for maltreatment. The most common maltreatment types substantiated for these referrals were neglect based rather than abuse based, and just under a quarter (23%) of CEDV-related referrals were formally opened for services. Referrals involving co-occurring substance abuse were most likely to be opened for services based on predicted probabilities derived from multilevel modeling. Implications for policy and practice are considered.

Ahmadabadi, Z., Najman, J. M., Williams, G. M., Clavarino, A. M., d'Abbs, P., & Abajobir, A. A. (2018). Maternal intimate partner violence victimization and child maltreatment. *Child Abuse & Neglect*, 82, 23-33.

There is some limited evidence of an association between maternal intimate partner victimization (IPV) and children’s experience of maltreatment. Using data from a longitudinal study, we examine whether this relationship is independent of range of potential confounders including

socio-economic, familial and psychological factors. Data were taken from the 14 and 30-year follow-ups of the Mater-University of Queensland Study of Pregnancy (MUSP) in Australia. A subsample of 2064 mothers and children (59.0% female) whose data on maternal IPV and child maltreatment was available, were analysed. In families with maternal IPV, two in five children reported being maltreated, compared to one in five children maltreated in families without maternal IPV. Except for sexual maltreatment which was consistently higher in female offspring, there was no gender differences in experiencing different types of maltreatment in families manifesting maternal IPV. Although both males and females were at increased risk of child maltreatment in families where mothers were victimized by their male partners, male children were more likely to be emotionally maltreated. The main associations were substantially independent of measured confounders, except for father's history of mental health problems which attenuated the association of maternal IPV victimization and male offspring's physical abuse. Our findings confirm that there is a robust association between maternal IPV and child maltreatment. Both maternal IPV victimization and child maltreatment co-occur in a household characterized by conflict and violence. Consequences of IPV go beyond the incident and influence all family members. Efforts to reduce child maltreatment may need to address the greater level of IPV associated with the cycle of family violence.

Broady, T. R., & Gray, R. M. (2018). The intersection of domestic violence and child protection in Australia: Program participant accounts. *Australian Social Work, 71*(2), 189-201.

Domestic and family violence (DFV) and child maltreatment have been widely identified as co-occurring social phenomena. It has been well established that children living in an environment of DFV are at significant risk of either directly experiencing violence themselves, or being neglected due to their parents' reduced caregiving capacity. In order to effectively address clients' presenting concerns, intervention responses must account for the overlap between these social issues. This article describes the experience of DFV and child protection involvement as experienced by clients attending two different interventions at Relationships Australia NSW; group programs for DFV perpetration or victimisation; and a parenting program in the context of statutory child removal. Findings provide evidence of overlap between these issues and highlight how a supportive and

non-judgemental group environment can allow parents to make behavioural changes and equip themselves to provide a safe and nurturing environment in which to raise their children.

Gracia, E., López-Quílez, A., Marco, M., & Lila, M. (2018). [Neighborhood characteristics and violence behind closed doors: The spatial overlap of child maltreatment and intimate partner violence](#). *PLoS one*, 13(6), e0198684.

In this study, we analyze first whether there is a common spatial distribution of child maltreatment (CM) and intimate partner violence (IPV), and second, whether the risks of CM and IPV are influenced by the same neighborhood characteristics, and if these risks spatially overlap. To this end we used geocoded data of CM referrals (N = 588) and IPV incidents (N = 1450) in the city of Valencia (Spain). As neighborhood proxies, we used 552 census block groups. Neighborhood characteristics analyzed at the aggregated level (census block groups) were: Neighborhood concentrated disadvantage (neighborhood economic status, neighborhood education level, and policing activity), immigrant concentration, and residential instability. A Bayesian joint modeling approach was used to examine the spatial distribution of CM and IPV, and a Bayesian random-effects modeling approach was used to analyze the influence of neighborhood-level characteristics on small-area variations of CM and IPV risks. For CM, 98% of the total between-area variation in risk was captured by a shared spatial component, while for IPV the shared component was 77%. The risks of CM and IPV were higher in neighborhoods characterized by lower levels of economic status and education, and higher levels of policing activity, immigrant concentration, and residential instability. The correlation between the log relative risk of CM and IPV was .85. Most census block groups had either low or high risks in both outcomes (with only 10.5% of the areas with mismatched risks). These results show that certain neighborhood characteristics are associated with an increase in the risk of family violence, regardless of whether this violence is against children or against intimate partners. Identifying these high-risk areas can inform a more integrated community-level response to both types of family violence. Future research should consider a community-level approach to address both types of family violence, as opposed to individual-level intervention addressing each type of violence separately.

Rizo, C. F., O'Brien, J., Macy, R., Ermentrout, D., & Lanier, P. (2018). Reporting maltreatment to child protective services in the context of intimate partner violence research. *Violence Against Women, 25*(2), 131-147.

Given the overlap between intimate partner violence (IPV) and child maltreatment, IPV-exposed child participants in research might disclose instances of child maltreatment. Such disclosures might require researchers to report the maltreatment to child protective services (CPS). However, the literature provides minimal guidance on how to navigate the complex challenges and ethical dilemmas around reporting in the context of research. To help address this gap and stimulate discussion regarding protocols and policies for reporting child maltreatment, this article presents a CPS reporting protocol developed as part of a community-engaged research project evaluating a parenting intervention for system-involved mothers experiencing IPV.

Tiyyagura, G., Christian, C., Berger, R., & Lindberg, D. (2018). Occult abusive injuries in children brought for care after intimate partner violence: An exploratory study. *Child Abuse & Neglect, 79*, 136-143.

Children in homes with intimate partner violence (IPV) are at increased risk for physical abuse. We determined the frequency and injury patterns in children who underwent child abuse consultation after IPV exposure by retrospectively analyzing the "Examination of Siblings to Recognize Abuse" cohort of children referred for physical abuse. Children were selected who presented after IPV exposure. Among 2890 children evaluated by child abuse pediatricians, 61 (2.1%) patients presented after IPV exposure. Of the 61, 11 (18.0%) were exposed to IPV, but had no direct involvement in the IPV event, 36 (59.0%) sustained inadvertent trauma during IPV, and 14 (23.0%) were directly assaulted during IPV. Thirty-six patients (59.0%) had an injury: 31 (51.0%) had cutaneous injuries and 15 (24.6%) had internal injuries including fracture(s), intracranial or intra-abdominal injury. Of the 15 patients with internal injuries, 14 (93.3%) were less than 12 months old. Among the 36 patients with injuries, 16 (44.4%) had no report of direct injury, a report of a mechanism that did not explain the identified injuries, or a report of trauma without a specific mechanism. Five (13.9%) did not have physical examination findings to suggest the extent of their internal injuries. Injuries are present in a significant proportion of children presenting to Emergency Departments after IPV exposure. History and physical examination alone are insufficient to detect internal injuries especially in infants. These preliminary results support the need for future, prospective studies of occult injury in children exposed to IPV.

Victor, B. G., Grogan-Kaylor, A., Ryan, J. P., Perron, B. E., & Gilbert, T. T. (2018). Domestic violence, parental substance misuse and the decision to substantiate child maltreatment. *Child Abuse & Neglect*, 79, 31-41.

Families that experience domestic violence and parental substance misuse are disproportionately involved with the child welfare system. Prior research suggests that child protective services (CPS) caseworkers are more likely to substantiate maltreatment allegations when domestic violence and parental substance misuse are identified during the investigation, pointing to one possible mechanism for this disproportionate involvement. While previous studies have relied on nationally representative data sets, the current study used administrative records from a large Midwestern child welfare agency that accounts for state-level variation in child welfare policy and practice. A total of 501,060 substantiation decisions made between 2009 and 2013 were examined to assess the influence of caseworker-perceived domestic violence and parental substance misuse on the decision to substantiate reported maltreatment. Results from multilevel modeling suggest that the identification of domestic violence and parental substance misuse during an investigation significantly increased the probability that an allegation would be substantiated. The implication of these findings for child welfare practice are considered in light of the fact that many child welfare agencies do not consider exposure to domestic violence and parental substance misuse in and of themselves to constitute child maltreatment.

Brown, E. (2017). [Native American tribal child social workers' experiences on co-occurrences of domestic violence and child maltreatment](#). California State University at San Bernardino. Electronic Theses, Projects, and Dissertations. 472.

Native American women and children suffer from domestic violence at an alarming rate on and off Indian reservations in the United States. Often these families that are impacted by domestic violence are involved in the state/county child welfare system. This study was to gain knowledge about Native American tribal child social workers experiences and challenges with co-occurrences of domestic violence and child maltreatment cases. This study used an exploratory, qualitative design with a phenomenological approach by collecting data through face-to-face and over the phone interviews with four Native American tribal child social workers from four different tribes across the nation. This design allowed participants the opportunity to provide a more in-depth explanation from their own personal experiences regarding their experiences and challenges

working with domestic violence and child maltreatment cases. The study found that there is a need for state/county social workers to have a better understanding of the historic and current experiences of Native people from a cultural, spiritual, and socioeconomic perspective through effective and consistent training on the Indian Child Welfare Act (ICWA). The study also found, that there is a need for state/county administration and social workers to build relationships with tribal child social workers in order to provide culturally competent and effective policies and services to serve Native American communities.

Gracia, E., Rodriguez, C. M., Martín-Fernández, M., & Lila, M. (2017). Acceptability of family violence: Underlying ties between intimate partner violence and child abuse. *Journal of Interpersonal Violence*, 0886260517707310.

Intimate partner violence (IPV) and child abuse (CA) are two forms of family violence with shared qualities and risk factors, and are forms of violence that tend to overlap. Acceptability of violence in partner relationships is a known risk factor in IPV just as acceptability of parent–child aggression is a risk factor in CA. We hypothesized that these acceptability attitudes may be linked and represent the expression of a general, underlying nonspecific acceptance of violence in close family relationships. The sample involved 164 male IPV offenders participating in a batterer intervention program. Implicit measures, which assess constructs covertly to minimize response distortions, were administered to assess acceptability of partner violence against women and acceptability of parent–child aggression. To determine whether acceptability attitudes regarding both forms of violence were related to a higher order construct tapping general acceptance of family violence, Bayesian confirmatory factor analyses were conducted. Findings supported a hierarchical (bifactor) model with a general factor expressing a nonspecific acceptance of family violence, and two specific factors reflecting acceptability of violence in intimate partner and parent–child relationships, respectively. This hierarchical model supporting a general acceptance of violence in close family relationships can inform future research aiming to better understand the connections between IPV and CA.

Jaffe, P., Campbell, M., Reif, K., Fairbairn, J., & David, R. (2017). Children killed in the context of domestic violence: International perspectives from death review committees. In *Domestic Homicides and Death Reviews* (pp. 317-343). Palgrave Macmillan, London.

Maneta, E. K., White, M., & Mezzacappa, E. (2017). Parent-child aggression, adult-partner violence, and child outcomes: A prospective, population-based study. *Child Abuse & Neglect*, 68, 1-10.

Parent-child physical aggression (PCPA) and adult intimate partner violence (IPV) are common forms of family violence that often co-occur. Their deleterious effects on children and adolescents have been well documented. However, important questions remain regarding whether the type of violence exposure, the experience of one or both forms, the chronicity of violent experiences, and the age, gender, and SES of the child, differentially influence developmental outcomes. Data on 2810 children from the Project on Human Development in Chicago Neighborhoods were analyzed. Children aged 3–9 at the outset were assessed three times, at 3-year intervals. Primary caregivers reported on IPV, PCPA, and children’s externalizing and internalizing symptoms. Children’s externalizing and internalizing symptoms were examined as a function of time, age, gender, socioeconomic status (SES), and the time-varying effects of cumulative IPV and PCPA exposure. Cumulative experiences of IPV and PCPA each adversely affected the developmental trajectories of both externalizing and internalizing symptoms, but in different ways; and they did so independently of participants’ age, gender, or SES, which all functioned as significant, independent predictors of child outcomes. PCPA was by far the more potent of the two forms of violence; and when both forms occurred, they worked additively to affect outcomes. Important questions remain regarding the reasons for the differential potency of these two forms of family violence on childhood symptoms, and related implications for interventions, as well as for later adult behavior. © 2017 Elsevier Ltd. All rights reserved.

Namy, S., Carlson, C., O'Hara, K., Nakuti, J., Bukuluki, P., Lwanyaaga, J., ... & Michau, L. (2017). Towards a feminist understanding of intersecting violence against women and children in the family. *Social Science & Medicine*, 184, 40-48.

While intimate partner violence (IPV) against women and violence against children (VAC) have emerged as distinct fields of research and programming, a growing number of studies demonstrate

the extent to which these forms of violence overlap in the same households. However, existing knowledge of how and why such co-occurrence takes place is limited, particularly in the Global South. The current study aims to advance empirical and conceptual understanding of intersecting IPV and VAC within families in order to inform potential programming. We explore shared perceptions and experiences of IPV and VAC using qualitative data collected in December 2015 from adults and children in Kampala, Uganda (n = 106). We find that the patriarchal family structure creates an environment that normalizes many forms of violence, simultaneously infantilizing women and reinforcing their subordination (alongside children). Based on participant experiences, we identify four potential patterns that suggest how IPV and VAC not only co-occur, but more profoundly intersect within the family, triggering cycles of emotional and physical abuse: bystander trauma, negative role modeling, protection and further victimization, and displaced aggression. The discussion is situated within a feminist analysis, including careful consideration of maternal violence and an emphasis on the ways in which gender and power dynamics can coalesce and contribute to intra-family violence.

Turner, W., Hester, M., Broad, J., Szilassy, E., Feder, G., Drinkwater, J., ... & Stanley, N. (2017). [Interventions to improve the response of professionals to children exposed to domestic violence and abuse: A systematic review](#). *Child Abuse Review*, 26(1), 19-39.

Exposure of children to domestic violence and abuse (DVA) is a form of child maltreatment with short- and long-term behavioural and mental health impact. Health care professionals are generally uncertain about how to respond to domestic violence and are particularly unclear about best practice with regards to children's exposure and their role in a multiagency response. In this systematic review, we report educational and structural or whole-system interventions that aim to improve professionals' understanding of, and response to, DVA survivors and their children. We searched 22 bibliographic databases and contacted topic experts for studies reporting quantitative outcomes for any type of intervention aiming to improve professional responses to disclosure of DVA with child involvement. We included interventions for physicians, nurses, social workers and teachers. Twenty-one studies met the inclusion criteria: three randomised controlled trials (RCTs), 18 pre-post intervention surveys. There were 18 training and three system-level interventions. Training interventions generally had positive effects on participants' knowledge,

attitudes towards DVA and clinical competence. The results from the RCTs were consistent with the before-after surveys. Results from system-level interventions aimed to change organisational practice and inter-organisational collaboration demonstrates the benefit of coordinating system change in child welfare agencies with primary health care and other organisations. Implications for policy and research are discussed. © 2015 The Authors. Child Abuse Review published by John Wiley & Sons Ltd.

Bidarra, Z. S., Lessard, G., & Dumont, A. (2016). Co-occurrence of intimate partner violence and child sexual abuse: Prevalence, risk factors and related issues. *Child Abuse & Neglect*, 55, 10-21.

This article proposes a review of the scientific literature on the cooccurrence of intimate partner violence and intrafamilial child sexual abuse. The review of these two types of violence has evolved in distinct research fields and their cooccurrence has rarely been examined. The objective of this article is to examine the existing knowledge about this cooccurrence. A systematic examination of the scientific literature in several relevant databases was conducted using combinations of 20 keywords so as to identify scientific articles, published between 2003 and 2013, that investigated this cooccurrence. The final sample comprised 10 studies. These studies revealed the presence of much heterogeneity regarding the prevalence of the cooccurrence for intimate partner violence with sexual abuse and other maltreatment (from 12% to 70%). The review also highlighted a greater risk for children to be victims of sexual abuse or other maltreatment when exposed to intimate partner violence. The implications of these results and the ensuing recommendations for practice and future research are considered in the discussion section.

Bottoms, B. L., Peter-Hagene, L. C., Epstein, M. A., Wiley, T. R., Reynolds, C. E., & Rudnicki, A. G. (2016). Abuse characteristics and individual differences related to disclosing childhood sexual, physical, and emotional abuse and witnessed domestic violence. *Journal of Interpersonal Violence*, 31(7), 1308-1339.

Many adult survivors of childhood abuse hide their victimization, avoiding disclosure that could identify perpetrators, end the abuse, and bring help to the victim. We surveyed 1,679 women undergraduates to understand disclosure of childhood sexual, physical, and emotional abuse, and, for the first time, witnessed domestic violence, which many consider to be emotionally abusive. A

substantial minority of victims failed to ever disclose their sexual abuse (23%), physical abuse (34%), emotional abuse (20%), and witnessed domestic violence (29%). Overall, abuse-specific factors were better predictors of disclosure than individual-level characteristics. Disclosure of sexual abuse was related to experiencing more frequent abuse (by the same and by multiple perpetrators), being more worried about injury and more upset at the time of the abuse, and self-labeling as a victim of abuse. Disclosure of physical abuse was related to experiencing more frequent abuse (by the same and multiple perpetrators), being less emotionally close to the perpetrator, being older when the abuse ended, being more worried and upset, and self-labeling as a victim. Disclosure of emotional abuse was associated with being older when the abuse ended, and being more worried and upset. Disclosure was unrelated to victim demographic characteristics or defensive reactions (dissociative proneness, fantasy proneness, repressive coping style, and temporary forgetting), except that among physical and emotional abuse victims, repressors were less likely to disclose than nonrepressors. Disclosure of witnessing domestic violence was not significantly related to any factors measured.

Guedes, A., Bott, S., Garcia-Moreno, C., & Colombini, M. (2016). Bridging the gaps: A global review of intersections of violence against women and violence against children. *Global Health Action*, 9(1), 31516.

The international community recognises violence against women (VAW) and violence against children (VAC) as global human rights and public health problems. Historically, research, programmes, and policies on these forms of violence followed parallel but distinct trajectories. Some have called for efforts to bridge these gaps, based in part on evidence that individuals and families often experience multiple forms of violence that may be difficult to address in isolation, and that violence in childhood elevates the risk of violence against women.

Kiesel, L. R., Piescher, K. N., & Edleson, J. L. (2016). The relationship between child maltreatment, intimate partner violence exposure, and academic performance. *Journal of Public Child Welfare*, 10(4), 434-456.

This article presents a longitudinal examination of the association between children's experiences of child maltreatment (CM) and intimate partner violence (IPV), alone and in combination, with

children's academic performance. Integrated, administrative data from the Minnesota Departments of Education and Human Services were used to obtain a sample of 2,914 children. Data provided an opportunity to study comparisons of single (CM or IPV) and combined experiences (CM-IPV), longitudinally observe the impact of these experiences on academic functioning, and make comparisons to the general population. Results revealed significant differences in school attendance and math and reading performance by adverse experience. Children exposed to CM and IPV, individually or in combination, underperformed at school. IPV-exposed children had the poorest outcomes. Findings highlight the need for dedicated screening for adverse childhood experiences, particularly IPV exposure, and devoting greater educational and social service resources as a means of promoting future school achievement and adult functioning.

Roark, J., Knight, K. E., Olson, H., & DeSandre, H. (2016). Predictors of child abuse charges within the context of domestic violence arrests. *Crime & Delinquency*, 63(13), 1777-1803.

This article investigates how different factors of a domestic violence incident impact the likelihood of a child abuse charge within the context of domestic violence arrests. Data from 5,148 domestic violence arrests were used to test whether domestic violence-, incident-, and child-based predictors increased the likelihood of a child abuse charge. Logistic regression models of gender-stratified samples were employed to test for gender differences among domestic violence arrestees. The results demonstrated predictors affected men's odds of a child abuse charge when compared with women. For men and women, children witnessing the domestic violence incident had the largest impact on a child abuse charge. These results contribute to the underdeveloped area of police response to child abuse in domestic violence cases.

Rodriguez, C. M., Gracia, E., & Lila, M. (2016). Multimethod prediction of child abuse risk in an at-risk sample of male intimate partner violence offenders. *Child Abuse & Neglect*, 60, 27-35.

The vast majority of research on child abuse potential has concentrated on women demonstrating varying levels of risk of perpetrating physical child abuse. In contrast, the current study considered factors predictive of physical child abuse potential in a group of 70 male intimate partner violence

offenders, a group that would represent a likely high risk group. Elements of Social Information Processing theory were evaluated, including pre-existing schemas of empathy, anger, and attitudes approving of parent-child aggression considered as potential moderators of negative attributions of child behavior. To lend methodological rigor, the study also utilized multiple measures and multiple methods, including analog tasks, to predict child abuse risk. Contrary to expectations, findings did not support the role of anger independently predicting child abuse risk in this sample of men. However, preexisting beliefs approving of parent-child aggression, lower empathy, and more negative child behavior attributions independently predicted abuse potential; in addition, greater anger, poorer empathy, and more favorable attitudes toward parent-child aggression also exacerbated men's negative child attributions to further elevate their child abuse risk. Future work is encouraged to consider how factors commonly considered in women parallel or diverge from those observed to elevate child abuse risk in men of varying levels of risk.

Coulter, M. L., & Mercado-Crespo, M. C. (2015). Co-occurrence of intimate partner violence and child maltreatment: Service providers' perceptions. *Journal of Family Violence, 30*(2), 255-262.

Intimate partner violence (IPV) places children at risk for maltreatment (CM). It is critical for both IPV and CM professionals to assess the possibility of the co-occurrence of both of these types of family violence, whose risk factors are nearly identical. However, little is known about the attitudes and perceptions of child welfare (CW), IPV, child protection, or other related professionals when serving families where both of these circumstances may occur. This study examined the perceptions of service providers in Hillsborough County, Florida on the co-occurrence of CM and IPV. Findings demonstrate the inequitable knowledge, training, and perceived ability to deal with the co-occurrence of IPV and CM among professionals from different employment areas. These discrepancies serve as opportunities for different agencies to collaborate in reducing knowledge gaps and increasing respondent's capacity to effectively identify and intervene with victims.

Jenney, A., Mishna, F., Alaggia, R., & Scott, K. (2014). Doing the right thing? Considering risk assessment and safety planning in child protection work with domestic violence cases. *Children and Youth Services Review*, 47, 92-101.

The concepts of risk and safety are central to social work practice with survivors of violence against women. Little is known, however, about the interaction between child protection workers and the women with whom they are working, in terms of their understanding of these concepts or how discrepancies between client and worker perceptions may create barriers to developing effective intervention strategies. Employing grounded theory methodology, focus group and interview data were used to explore how both worker and client experiences of the process of risk assessment and safety planning influenced the course of the intervention. Emergent findings reveal that workers and clients held a similar set of beliefs about the social construction/collective representation of woman abuse and the work of child protection. Specifically, for both, the concept of ‘doing the right thing’ was an over-arching theme for understanding how risk and safety are assessed, and determining how cases are opened or closed. Findings illustrate how narrative structures shape interactions that take place within the context of care and prevention, manifesting themselves in complex ways that can lead to risks for both clients and workers, in managing multiple risks, recognizing the complexity of the concept of safety, misunderstanding the impact on children, and the role of men in addressing DV in the lives of their children. © 2014 Elsevier Ltd. All rights reserved.

Widom, C. S., Czaja, S., & Dutton, M. A. (2014). Child abuse and neglect and intimate partner violence victimization and perpetration: A prospective investigation. *Child Abuse & Neglect*, 38(4), 650-663.

This paper describes the extent to which abused and neglected children report intimate partner violence (IPV) victimization and perpetration when followed up into middle adulthood. Using data from a prospective cohort design study, children (ages 0-11) with documented histories of physical and sexual abuse and/or neglect ($n = 497$) were matched with children without such histories ($n = 395$) and assessed in adulthood ($M_{\text{age}} = 39.5$). Prevalence, number, and variety of four types of IPV (psychological abuse, physical violence, sexual violence, and injury) were measured. Over 80% of both groups - childhood abuse and neglect (CAN) and controls - reported some form of IPV victimization during the past year (most commonly psychological abuse) and about 75% of

both groups reported perpetration of IPV toward their partner. Controlling for age, sex, and race, overall CAN [adjusted odds ratio (AOR) = 1.60, 95% CI [1.03, 2.49]], physical abuse (AOR = 2.52, 95% CI [1.17, 5.40]), and neglect (AOR = 1.64, 95% CI [1.04, 2.59]) predicted increased risk for being victimized by a partner via physical injury. CAN and neglect also predicted being victimized by a greater number and variety of IPV acts. CAN and control groups did not differ in reports of perpetration of IPV, although neglect predicted greater likelihood of perpetrating physical injury to a partner, compared to controls. Abused/neglected females were more likely to report being injured by their partner, whereas maltreated males did not. This study found that child maltreatment increases risk for the most serious form of IPV involving physical injury. Increased attention should be paid to IPV (victimization and perpetration) in individuals with histories of neglect.

Hamilton, L. (2013). Assessing children's risk for homicide in the context of domestic violence. *Journal of Family Violence, 28*(2), 179-189.

Increasing evidence indicates that children are at risk of homicide in the context of domestic violence. Using a retrospective case analysis of 84 domestic homicide cases, this study sought to identify the unique factors that place a child at risk of homicide. Three groups of domestic homicide cases in which there were no children in the home (No Child in the Home, n=44), a child was targeted (Child Target, n=13), and a child was present, but not targeted (No Child Target, n=27) were compared. Overall, there were no significant differences amongst cases involving children (targeted or not) on major factors except for the higher number of agencies involved with couples with children. Few cases had risk assessment or safety plans completed. Despite the study limitations, the findings speak to the need for professionals to assess child risk and include children in safety planning in all cases of domestic violence.

Holmes, M. R. (2013). Aggressive behavior of children exposed to intimate partner violence: An examination of maternal mental health, maternal warmth and child maltreatment. *Child Abuse & Neglect, 37*(8), 520-530.

Over 4.5 million children each year are exposed to intimate partner violence (IPV). Furthermore, IPV rarely occurs without other forms of violence and aggression in the home. IPV is associated with mental health and parenting problems in mothers, and children experience a wide variety of

short-term social adjustment and emotional difficulties, including behavioral problems. The current study investigated the influence of IPV exposure on children's aggressive behavior, and tested if this relation was mediated by poor maternal mental health, and, in turn, by maternal warmth and child maltreatment, and moderated by children's age and gender. Study findings highlight the indirect consequences of IPV in the home on children's aggressive behavior. Secondary data analysis using structural equation modeling (SEM) was conducted with the National Survey of Child and Adolescent Well-Being (NSCAW). Children were between the ages of 3-8 ($n = 1,161$). Mothers reported past year frequency of physical assault by their partner, frequency of child psychological and physical abuse, maternal mental health, and children's aggressive behavior problems. Maternal warmth was measured by observation. IPV was significantly related to poor maternal mental health. Poor maternal mental health was associated with more child aggressive behavior, lower maternal warmth, and more frequent child physical and psychological abuse. Psychological abuse and low maternal warmth were directly related to more aggressive behavior while IPV exposure and physical abuse were not directly associated with aggressive behavior. Neither age nor gender moderated the modeled paths. Expanding knowledge about child outcomes is especially critical for children who were involved in investigations of child maltreatment by child protective services (CPS) in order to identify relevant risk factors that can lead to interventions. The results identified maternal mental health as an important variable in mediating the relationship between IPV exposure and aggressive behavior. One implication is for multicomponent family interventions that could be tailored toward helping the mother cope with such mental health issues while also addressing deficits in children's social behavior development.

Nicklas, E., & Mackenzie, M. J. (2013). Intimate partner violence and risk for child neglect during early childhood in a community sample of fragile families. *Journal of Family Violence, 28*(1), 17-29.

The current study explores the relationship between child neglect and intimate partner violence (IPV) in a longitudinal community sample of 1,740 families with young children, with a special focus on the association between specific typologies of both neglect behaviors and IPV. We focused on families followed across early childhood, because infants and toddlers are at the greatest risk of exposure to neglect (the most prevalent type of child maltreatment), and this period

spanning the transition to parenthood presents heightened risk for IPV. We found evidence that coercive IPV is an important driver of the connections between IPV and subsequent neglect through affecting the mother's well-being and ability to provide basic care and nurturance. Implications for intervention and future work addressing definitions and pathways to neglect are discussed.

Voisin, D. R., & Elsaesser, C. M. (2013). [Pathways from polyvictimization to youth problem behaviors: The critical role of school engagement.](#) *International Journal of Higher Education*, 2(4), 15-30.

School engagement has a powerful influence on youth development. Youth who fail in school are at significant risk for a host of subsequent psychosocial outcomes, including substance use, risky sexual behaviors, gang involvement, and increased contact with juvenile justice authorities. Although school engagement is an important determinant of key developmental outcomes, few studies have adequately considered how polyvictimization may not only compromise school engagement but also negatively impact psychological functioning, lead to negative peer affiliations with gangs, thereby subsequently increasing the risk for drug use and subsequent juvenile justice involvement. In addition, no studies have considered how key factors such as age, gender, race/ethnicity and parenting styles may moderate those risk relationships. Based on the existing empirical literature and several unifying theories, we present a conceptual model that documents pathways from poly-victimization to multiple youth problem behaviors, with school engagement as a key mediator. This review is intended to help guide future research in these areas. We conclude with recommendations for school-based interventions and future research based on this innovative model.

Jaffe, P. G., Campbell, M., Hamilton, L. H., & Juodis, M. (2012). Children in danger of domestic homicide. *Child Abuse & Neglect*, 36(1), 71-74.

Child maltreatment and domestic violence were once considered separate topics both in research and in clinical practice. This brief communication attempts to shed light on the lethal risk posed to children living with domestic violence. It is hoped that the acknowledgment of these risks will better inform research and clinical practice to protect children in these circumstances.

MacDonell, K. W. (2012). The combined and independent impact of witnessed intimate partner violence and child maltreatment. *Partner Abuse*, 3(3), 358-378.

Intimate partner violence (IPV) is a pervasive issue, generating startling facts regarding its detrimental societal effects. There is also considerable overlap between witnessing IPV and experiencing childhood maltreatment. The current article reviews the state of the knowledge about the short- and long-term impact of witnessing IPV as well as a review of the literature exploring the unique impact of experiencing both IPV and maltreatment compared to witnessing only. Seventy-three articles were included in the present review. Negative outcomes in youth have been reported in both the internalizing and externalizing domains of functioning, in health and cognitive domains, as well as in youth's relationships with family, peers, and romantic partners. The current literature suggests that these negative impacts persist into adulthood. Mixed results, whether there are significant additive effects of witnessing IPV and child maltreatment compared to witnessing IPV only, were found in youth and again into adulthood. Policy implications and recommendations for future research are suggested.

Chan, K. (2011). [Children exposed to child maltreatment and intimate partner violence: A study of co-occurrence among Hong Kong Chinese families.](#) *Child Abuse & Neglect*, 35(7), 532-542.

This study assessed the co-occurrence of child maltreatment and intimate partner violence (IPV) and examined the association between them. The cross-sectional study recruited a population-based sample of 1,094 children aged 12-17 years in Hong Kong. Structured questionnaires were used to collect data from the children. The prevalence of occurrence of child abuse and neglect by parents and exposure to IPV in both the past year and lifetime was examined, and their correlates were assessed using univariate and multivariate logistic regression. The results show that 26% and 14.6% of child participants had been exposed to IPV physical assault, and 44.4% and 22.6% had been subjected to a parent's corporal punishment or to physical maltreatment from a parent in their lifetime and the year preceding the study, respectively. Among those families characterized by IPV, 54.4% and 46.5% were involved in child physical maltreatment over the child's lifetime and in the preceding year, respectively. Multivariate logistic regression analyses revealed that children exposed to IPV were at higher risk of being victims of neglect, corporal punishment, and physical

maltreatment or severe physical maltreatment by their parents than children who were not exposed to IPV, even when child and parent demographic factors were controlled for.

Finkelhor, D., Turner, H., Hamby, S., & Ormrod, R. (2011). Polyvictimization: Children's exposure to multiple types of violence, crime, and abuse. *Juvenile Justice Bulletin*. U.S. Department of Justice, Office of Justice Programs.

Hamby, S., Finkelhor, D., Turner, H., & Ormrod, R. (2011). Children's exposure to intimate partner violence and other family violence. *Juvenile Justice Bulletin*. U.S. Department of Justice, Office of Justice Programs.

McDonald, R., Jouriles, E. N., Rosenfield, D., & Corbitt-Shindler, D. (2011). Predictors of domestically violent men's aggression toward children: A prospective study. *Journal of Family Psychology*, 25(1), 11-18.

This research examines predictors of domestically violent men's aggression toward children after the children and their mothers sought help at an emergency shelter for domestic violence victims. Participants were 62 women who had sought refuge at a domestic violence shelter and who had at least one child between 4 and 9 years old. During their shelter stay, women provided data on partner– child aggression that occurred before shelter entry. After leaving the shelter, they also provided data on postshelter partner–mother intimate partner violence (IPV), children's postshelter contacts with their mothers' partners, and postshelter partner– child aggression on 5 occasions after their shelter departure (4, 8, 12, 16, and 20 months postshelter). Consistent with our hypotheses, the level of partner– child aggression before the family entered the shelter, the level of partner–mother IPV after shelter departure, and the frequency of children's contacts with the partners after shelter departure each predicted postshelter partner– child aggression. Clinical and policy implications are discussed.

Sousa, C., Herrenkohl, T. I., Moylan, C. A., Tajima, E. A., Klika, J. B., Herrenkohl, R. C., & Russo, M. J. (2011). [Longitudinal study on the effects of child abuse and children's exposure to domestic violence, parent-child attachments, and antisocial behavior in adolescence.](#) *Journal of Interpersonal Violence*, 26(1), 111-136.

This study examined the unique and combined effects of child abuse and children's exposure to domestic violence on later attachment to parents and antisocial behavior during adolescence. Analyses also investigated whether the interaction of exposure and low attachment predicted youth outcomes. Findings suggest that, while youth dually exposed to abuse and domestic violence were less attached to parents in adolescence than those who were not exposed, those who were abused only, and those who were exposed only to domestic violence, the relationship between exposure types and youth outcomes did not differ by level of attachment to parents. However, stronger bonds of attachment to parents in adolescence did appear to predict a lower risk of antisocial behavior independent of exposure status. Preventing child abuse and children's exposure to domestic violence could lessen the risk of antisocial behavior during adolescence, as could strengthening parent-child attachments in adolescence. However, strengthening attachments between parents and children after exposure may not be sufficient to counter the negative impact of earlier violence trauma in children.

Goddard, C., & Bedi, G. (2010). Intimate partner violence and child abuse: A child-centred perspective. *Child Abuse Review*, 19(1), 5-20.

A substantial body of literature assessing the impact of intimate partner violence on children and associations between intimate partner violence and child abuse now exists. Central to knowledge about these areas of practice and research is a robust, child-centred consideration of some of the more challenging conceptual issues they give rise to. In this paper, we aim to stimulate debate by presenting a critical, child-centred perspective on the intersection between intimate partner violence and child abuse. Initially, we provide the context for the review by presenting a brief overview of the literature. We then consider three central issues from a child-centred perspective. We discuss the language used to describe children forced to live with intimate partner violence, and the importance of hearing children's perspectives on their experiences of such conflict. Finally, we consider similarities and differences between the intimate partner violence and child abuse fields from a child-centred viewpoint. We conclude that increasing conceptual clarity around these

issues will enhance research in the field, and ultimately improve interventions designed to protect children forced to live with intimate partner violence. Copyright © 2009 John Wiley & Sons, Ltd.

Hamby, S., Finkelhor, D., Turner, H., & Ormrod, R. (2010). [The overlap of witnessing partner violence with child maltreatment and other victimizations in a nationally representative survey of youth](#). *Child Abuse & Neglect*, 34(10), 734-741.

Objective: To examine the co-occurrence of witnessing partner violence with child maltreatment and other forms of victimization. Data are from the National Survey of Children's Exposure to Violence (NatSCEV), a nationally representative telephone survey of the victimization experiences of 4,549 youth aged 0–17. Witnessing partner violence (WPV) is very closely associated with several forms of maltreatment and exposure to other forms of family violence in this sample, with adjusted OR ranging from 3.88 to 9.15. WPV is also significantly associated with a wide variety of other forms of victimization, with OR ranging from 1.43 to 7.32. More than 1/3 (33.9%) of youth who witnessed partner violence had also been maltreated in the past year, compared with 8.6% of non-witnesses. For lifetime data, more than half (56.8%) of WPV youth had also been maltreated. Neglect and custodial interference were most closely associated with WPV. These data support the poly-victimization model, indicating that many youth experience multiple forms of victimization. They also indicate that the various forms of family violence are especially closely linked. Practice implications: These results provide new urgency to calls to better integrate services to adult and child victims of family violence. For example, screening to identify the needs of child witnesses could be done in domestic violence shelters, and screening to identify the needs of adult victims could be done in child protective service settings.

Moylan, C. A., Herrenkohl, T. I., Sousa, C., Tajima, E. A., Herrenkohl, R. C., & Russo, M. J. (2010). [The effects of child abuse and exposure to domestic violence on adolescent internalizing and externalizing behavior problems](#). *Journal of Family Violence*, 25(1), 53-63.

This study examines the effects of child abuse and domestic violence exposure in childhood on adolescent internalizing and externalizing behaviors. Data for this analysis are from the Lehigh Longitudinal Study, a prospective study of 457 youth addressing outcomes of family violence and resilience in individuals and families. Results show that child abuse, domestic violence, and both

in combination (i.e., dual exposure) increase a child's risk for internalizing and externalizing outcomes in adolescence. When accounting for risk factors associated with additional stressors in the family and surrounding environment, only those children with dual exposure had an elevated risk of the tested outcomes compared to non-exposed youth. However, while there were some observable differences in the prediction of outcomes for children with dual exposure compared to those with single exposure (i.e., abuse only or exposure to domestic violence only), these differences were not statistically significant. Analyses showed that the effects of exposure for boys and girls are statistically comparable.

Murphy, R. A. (2010). Multi-system responses in the context of child maltreatment and intimate partner violence. *Child Abuse & Neglect*, 34(8), 555-557.

Thackeray, J. D., Scribano, P. V., & Rhoda, D. (2010). Domestic violence assessments in the child advocacy center. *Child Abuse & Neglect*, 34(3), 172-182.

This study was designed to identify the frequency, methods, and practices of universal assessments for domestic violence (DV) within child advocacy centers (CACs) and determine which factors are associated with CACs that conduct universal DV assessments. The study design was a cross-sectional, web-based survey distributed to executive directors of National Children's Alliance accredited or accreditation-eligible CACs. Responses were received from 323 of 376 eligible CACs (86%). Twenty-nine percent of CAC directors report familiarity with current DV recommendations and 29% require annual education for staff regarding DV. Twenty-nine percent of CACs conduct "universal assessments" (defined as a CAC that assesses female caregivers for DV more than 75% of the time). The majority of CACs use face-to-face interviews to conduct assessments, often with children, family or friends present. The presence of on-site DV resources (OR = 2.85, CI 1.25-6.50) and an annual DV educational requirement (OR = 2.88, CI 1.31-6.32) are associated with assessment of female caregivers. The presence of on-site DV resources (OR = 3.97, CI 2.21-7.14) is associated with universal assessments. Many CAC directors are not aware of current DV recommendations and do not require annual DV training for staff. Less than one-third of CACs practice universal assessments and those that do often conduct DV assessments

with methods and environments shown to be less comforting for the patient and less effective in victim identification. CACs are more likely to assess female caregivers if they have co-located DV resources and they require DV training of their staff. CACs are more likely to universally screen for DV if they have co-located DV resources. The presence of DV in the home has significant potential to negatively impact a child's physical and mental health as well as the ability of the caregiver to adequately protect the child. Current practice in CACs suggests a knowledge gap in this area and this study identifies an opportunity to improve the services offered to these high-risk families.

Casanueva, C., Martin, S. L., & Runyan, D. K. (2009). Repeated reports for child maltreatment among intimate partner violence victims: Findings from the National Survey of Child and Adolescent Well-Being. *Child Abuse & Neglect*, 33(2), 84-93.

Objectives: To determine the prevalence of intimate partner violence (defined as any physical violence during the last 12 months or previously) among mothers who maltreat their children, and to examine whether mothers' experiences of intimate partner violence (IPV) are associated with repeated reports (rereports) of children to Child Protective Services (CPS) during the following 18 months. Data for the analyses were from the National Survey of Child and Adolescent Well-Being (NSCAW), a national probability study of children investigated for child maltreatment. The sample of 5,501 children (ages 0-14) was randomly selected from the families who entered the US child welfare system between October 1999 and December 2000. The analysis sample was restricted to 1,236 families in which caregivers were: (1) the alleged perpetrators of the child maltreatment at baseline (independently of substantiation status) and (2) the biological mothers ($n = 1,212$ or 98.6%), adoptive mothers ($n = 17$ or 1%), or stepmothers ($n = 7$ or 0.3%) of children not placed in out-of-home care. Children of mothers physically abused by an intimate partner during the last 12 months or previously at the intake interview (44%) were twice as likely as children of mothers who had not experienced such violence to be rereported to CPS (29% vs. 14%, Odds Ratio = 2.0, 95% Confidence Interval = 1.1-3.4). Rereports occurred almost twice as quickly for children of mothers who experienced IPV compared to children of mothers who had not experienced IPV (Hazard Ratio = 1.9, 95% Confidence Interval = 1.1-3.0). The higher risk and speedier rereports of child maltreatment associated with intimate partner violence highlights the

need for universal assessment and provision of services for IPV among families that are investigated by CPS.

Taylor, C. A., Guterman, N. B., Lee, S. J., & Rathouz, P. J. (2009). [Intimate partner violence, maternal stress, nativity, and risk for maternal maltreatment of young children](#). *American Journal of Public Health, 99*(1), 175-183.

We examined the associations of intimate partner violence (IPV) and maternal risk factors with maternal child maltreatment risk within a diverse sample of mothers. We derived the study sample (N = 2508) from the Fragile Families and Child Well-Being Study. We conducted regression analyses to examine associations between IPV, parenting stress, major depression, key covariates, and 4 proxy variables for maternal child maltreatment. Mothers reported an average of 25 acts of psychological aggression and 17 acts of physical aggression against their 3-year-old children in the year before the study, 11% reported some act of neglect toward their children during the same period, and 55% had spanked their children during the previous month. About 40% of mothers had experienced IPV by their current partner. IPV and maternal parenting stress were both consistent risk factors for all 4 maltreatment proxy variables. Although foreign-born mothers reported fewer incidents of child maltreatment, the IPV relative risk for child maltreatment was greater for foreign-born than for US-born mothers. Further integration of IPV and child maltreatment prevention and intervention efforts is warranted; such efforts must carefully balance the needs of adult and child victims.

Banks, D., Dutch, N., & Wang, K. (2008). Collaborative efforts to improve system response to families who are experiencing child maltreatment and domestic violence. *Journal of Interpersonal Violence, 23*(7), 876-902.

The *Greenbook* demonstration initiative provided federal funding and other support to six communities to establish collaborations to plan and implement policy and practice changes in systems that serve families who are experiencing domestic violence and child maltreatment or child exposure to domestic violence. The demonstration sites established and organized collaborative groups in accordance with the *Greenbook* foundational principles and recommendations, including representation from multiple levels within the primary partner systems and other organizations, as well as the community. The sites struggled with how to engage

consumers of the primary systems, however, and devoted a great deal of time to understanding and addressing organizational differences among the partners. Other salient collaborative influences included leadership, resources, trust, and commitment. The stakeholders noted that the collaborative relationships required a great deal of work but were ultimately one of the main successes of the initiative.

Bourassa, C., Lavergne, C., Damant, D., Lessard, G., & Turcotte, P. (2008). Child welfare workers' practice in cases involving domestic violence. *Child Abuse Review, 17*(3), 174-190.

This paper reports the findings of an exploratory and qualitative study of child welfare workers' practice in cases involving domestic violence. The research aimed to focus on child welfare workers' interventions with families experiencing domestic violence, elements influencing the child welfare workers' decisions, and the factors facilitating and creating obstacles for intervention. An analysis of the qualitative data showed that child welfare workers have different ways of intervening in cases involving domestic violence. Also, the interventions were especially centred on women victims of violence and they were held responsible for protecting their children. Finally, the dilemmas and difficulties which child welfare workers face in these cases are discussed. Copyright © 2008 John Wiley & Sons, Ltd.

Campbell, R., Greeson, M. R., Bybee, D., & Raja, S. (2008). The co-occurrence of childhood sexual abuse, adult sexual assault, intimate partner violence, and sexual harassment: A mediational model of posttraumatic stress disorder and physical health outcomes. *Journal of Consulting and Clinical Psychology, 76*(2), 194-207.

This study examined the co-occurrence of childhood sexual abuse, adult sexual assault, intimate partner violence, and sexual harassment in a predominantly African American sample of 268 female veterans, randomly sampled from an urban Veterans Affairs hospital women's clinic. A combination of hierarchical and iterative cluster analysis was used to identify 4 patterns of women's lifetime experiences of violence co-occurrence. The 1st cluster experienced relatively low levels of all 4 forms of violence; the 2nd group, high levels of all 4 forms; the 3rd, sexual revictimization across the lifespan with adult sexual harassment; and the 4th, high intimate partner violence with sexual harassment. This cluster solution was validated in a theoretically driven

model that examined the role of posttraumatic stress disorder (PTSD) as a mediator of physical health symptomatology. Structural equation modeling analyses revealed that PTSD fully mediated the relationship between violence and physical health symptomatology. Consistent with a bio-psycho-immunologic theoretical model, PTSD levels more strongly predicted pain-related physical health symptoms compared to nonpain health problems. Implications for clinical interventions to prevent PTSD and to screen women for histories of violence in health care settings are discussed. (PsycINFO Database Record © 2012 APA, all rights reserved)

Herrenkohl, T. I., Sousa, C., Tajima, E. A., Herrenkohl, R. C., & Moylan, C. A. (2008). Intersection of child abuse and children's exposure to domestic violence. *Trauma, Violence, & Abuse, 9*(2), 84-99.

This review addresses research on the overlap in physical child abuse and domestic violence, the prediction of child outcomes, and resilience in children exposed to family violence. The authors explore current findings on the intersection of physical child abuse and domestic violence within the context of other risk factors, including community violence and related family and environmental stressors. Evidence from the studies reviewed suggests considerable overlap, compounding effects, and possible gender differences in outcomes of violence exposure. The data indicate a need to apply a broad conceptualization of risk to the study of family violence and its effects on children. Further testing of competing theoretical models will advance understanding of the pathways through which exposure leads to later problems in youth, as well as protective factors and processes through which resilience unfolds.

Holt, S., Buckley, H., & Whelan, S. (2008). The impact of exposure to domestic violence on children and young people: A review of the literature. *Child Abuse & Neglect, 32*(8), 797-810.

This article reviews the literature concerning the impact of exposure to domestic violence on the health and developmental well-being of children and young people. Impact is explored across four separate yet inter-related domains (domestic violence exposure and child abuse; impact on parental capacity; impact on child and adolescent development; and exposure to additional adversities), with potential outcomes and key messages concerning best practice responses to children's needs

highlighted. Method: A comprehensive search of identified databases was conducted within an 11-year framework (1995–2006). This yielded a vast literature which was selectively organized and analyzed according to the four domains identified above. Results: This review finds that children and adolescents living with domestic violence are at increased risk of experiencing emotional, physical and sexual abuse, of developing emotional and behavioral problems and of increased exposure to the presence of other adversities in their lives. It also highlights a range of protective factors that can mitigate against this impact, in particular a strong relationship with and attachment to a caring adult, usually the mother. Conclusion: Children and young people may be significantly affected by living with domestic violence, and impact can endure even after measures have been taken to secure their safety. It also concludes that there is rarely a direct causal pathway leading to a particular outcome and that children are active in constructing their own social world. Implications for interventions suggest that timely, appropriate and individually tailored responses need to build on the resilient blocks in the child's life. Practice implications: This study illustrates the links between exposure to domestic violence, various forms of child abuse and other related adversities, concluding that such exposure may have a differential yet potentially deleterious impact for children and young people. From a resilient perspective this review also highlights a range of protective factors that influence the extent of the impact of exposure and the subsequent outcomes for the child. This review advocates for a holistic and child-centered approach to service delivery, derived from an informed assessment, designed to capture a picture of the individual child's experience, and responsive to their individual needs.

Jouriles, E. N., McDonald, R., Smith Slep, A. M., Heyman, R. E., & Garrido, E. (2008). Child abuse in the context of domestic violence: Prevalence, explanations, and practice implications. *Violence and Victims, 23*(2), 221-235.

This article addresses the following questions: (a) How common is child abuse among domestically violent families? (b) Are there specific patterns of child abuse among domestically violent families? (c) What may explain occurrences of child abuse in domestically violent families? (d) How might domestic violence affect treatment for child abuse? We review research on child abuse in the context of domestic violence. We discuss implications of this research for service-delivery programs for domestically violent families.

Kaslow, N. J., & Thompson, M. P. (2008). Associations of child maltreatment and intimate partner violence with psychological adjustment among low SES, African American children. *Child Abuse & Neglect*, 32(9), 888-896.

This study assessed the unique and interactive effects of child maltreatment and mothers' physical intimate partner violence (IPV) status on low-SES African American children's psychological functioning. Mothers were recruited from a large, inner-city hospital, and those who met eligibility criteria were asked to complete a lengthy face-to-face interview while their child was assessed separately but concurrently. The sample included 152 mother-child dyads. The children's mean age was 10 years, and 45% were male. Multivariate linear regression analyses tested the main and interactive effects of child maltreatment and mothers' exposure to physical IPV on children's psychological functioning (internalizing and externalizing symptoms, traumatic stress symptoms), while controlling for covariates. Children who experienced child maltreatment and children whose mothers experienced physical IPV had higher levels of psychological distress than their respective counterparts. Post hoc analysis of significant interaction effects indicated that child maltreatment was associated with internalizing and externalizing problems and traumatic stress only when mothers reported higher levels of physical IPV. This finding did not hold true for youth whose mothers did not acknowledge elevated rates of physical IPV. African American youth from low-SES backgrounds who are maltreated and whose mothers experience physical IPV are at particularly high risk for psychological distress. Targeted prevention and intervention programs are needed for these poly-victimized youth.

Bourassa, C. (2007). Co-occurrence of interparental violence and child physical abuse and its effect on the adolescents' behavior. *Journal of Family Violence*, 22(8), 691-701.

This study analyzed the impact of the co-occurrence of parental and interparental violence on the behavior of adolescents. Results reveal that the co-occurrence of interparental violence and child physical abuse has a significantly greater negative impact on behavior than does exposure to interparental violence only. Moreover, participants, who are both abused and exposed to interparental violence, exhibit internalized and externalized symptoms falling within the clinical range more frequently. Exposure exclusively to interparental violence also has definite impact; for example, teens who are only exposed to interparental violence exhibit internalized and externalized

symptoms more frequently than do those who have been neither subject to physical abuse from a parent nor exposed to interparental violence. Implications of the findings are discussed.

Dixon, L., Hamilton-Giachritsis, C., Browne, K., & Ostapuik, E. (2007). The co-occurrence of child and intimate partner maltreatment in the family: Characteristics of the violent perpetrators. *Journal of Family Violence, 22*(8), 675-689.

This study considers the characteristics associated with mothers and fathers who maltreat their child and each other in comparison to parents who only maltreat their child. One hundred and sixty-two parents who had allegations of child maltreatment made against them were considered. The sample consisted of 43 fathers (Paternal Family—PF) and 23 mothers (Maternal Family—MF) who perpetrated both *partner and child maltreatment*, together with 23 fathers (Paternal Child—PC) and 26 mothers (Maternal Child—MC) who perpetrated *child maltreatment only*. In addition, 2 fathers (Paternal Victim—PV) and 23 mothers (Maternal Victim—MV) were *victims of intimate partner maltreatment and perpetrators of child maltreatment* and 7 fathers (Paternal Non-abusive Carer—PNC) and 15 mothers (Maternal Non-abusive Carer—MNC) *did not maltreat the child but lived with an individual who did*. Within their family unit, 40.7% of parents perpetrated both intimate partner and child maltreatment. However, fathers were significantly more likely to maltreat both their partner and child than mothers and mothers were significantly more likely to be victims of intimate partner violence than fathers. PF fathers conducted the highest amount of physical and/or sexual child maltreatment while MC and MV mothers perpetrated the highest amount of child neglect. Few significant differences between mothers were found. PF fathers had significantly more factors associated with development of a criminogenic lifestyle than PC fathers. Marked sex differences were demonstrated with PF fathers demonstrating significantly more antisocial characteristics, less mental health problems and fewer feelings of isolation than MF mothers. MC mothers had significantly more childhood abuse, mental health problems, parenting risk factors and were significantly more likely to be biologically related to the child than PC fathers. This study suggests that violent families should be assessed and treated in a holistic manner, considering the effects of partner violence upon all family members, rather than exclusively intervening with the violent man.

Knickerbocker, L., Heyman, R. E., Smith Slep, A. M., Jouriles, E. N., & McDonald, R. (2007). Co-occurrence of child and partner maltreatment. *European Psychologist, 12*(1), 36-44.

This paper addresses issues in the literature regarding the co-occurrence of partner and child physical maltreatment in the United States and in Europe. Design issues including operationalizations, representativeness of samples, data collection methods, and reference periods are discussed in the context of prevalence studies. Next, possible explanations for the pervasiveness of co-occurring maltreatment are explored with an emphasis on theoretical models and mechanisms of co-occurrence. Finally, we offer assessment implications for clinicians and agencies dealing with partner and child maltreatment.

Landsman, M. J., & Hartley, C. C. (2007). Attributing responsibility for child maltreatment when domestic violence is present. *Child Abuse & Neglect, 31*(4), 445-461.

The purpose of this study was to examine factors that influence how child welfare workers attribute responsibility for child maltreatment and child safety in cases involving domestic violence. The study used a factorial survey approach, combining elements of survey research with an experimental design. Case vignettes were constructed by randomly assigning characteristics to vignettes believed to be related to assessments about responsibility for child maltreatment. Public child welfare workers were systematically sampled and asked to rate vignettes on male and female caregivers' responsibility for child maltreatment and concerns for safety. The presence of domestic violence significantly affected workers' assessments of the attribution of responsibility and concern for child safety, more so than variables related to child maltreatment. Responsibility for exposing a child to domestic violence differed for males and females, with more factors explaining female responsibility. Substance use by either caregiver was significant in attributing responsibility for physical harm, not watching the child closely enough, and concern for child safety, but not for exposure to domestic violence. Domestic violence appeared to heighten workers' assessments of responsibility for child maltreatment and concerns about child safety, taking precedence over the characteristics of the child maltreatment itself. Battering tends to work against the domestic violence victim in terms of the attribution of responsibility. A greater number of factors affect female responsibility for exposing a child to domestic violence than male responsibility, even though in every case the male was the designated domestic violence batterer.

Zolotor, A. J., Theodore, A. D., Coyne-Beasley, T., & Runyan, D. K. (2007). [Intimate partner violence and child maltreatment: Overlapping risk](#). *Brief Treatment and Crisis Intervention*, 7(4), 305-321.

Jaffe, P. G., & Juodis, M. (2006). Children as victims and witnesses of domestic homicide: Lessons learned from domestic violence death review committees. *Juvenile and Family Court Journal*, 57(3), 13-28.

Domestic Violence Death Review Committees (DVDRCs) are interdisciplinary teams dedicated to examining domestic homicide and recommending how to prevent future tragedies by comprehensively examining individual cases. This article summarizes the findings of 15 DVDRCs concerning children as victims and witnesses. The findings reflect that an alarming number of children are victimized by domestic violence. Themes in the recommendations are grouped in relationship to: (1) training and policy development; (2) resource development; (3) coordination of services; (4) legislative reform; and (5) prevention programs. The recommendations are critical for criminal and civil courts as well as enhancing collaboration between the justice system and community partners in preventing domestic homicide.

Kellerher, K., Gardner, W., Coben, J., Barth, R., Edleson, J., & Hanen, A. (2006). [Co-occurring intimate partner violence and child maltreatment: Local policies/practices and relationships to child placement, family services and residence](#). Washington, DC: U. S. Department of Justice.

Renner, L. M., & Slack, K. S. (2006). Intimate partner violence and child maltreatment: Understanding intra-and intergenerational connections. *Child Abuse & Neglect*, 30(6), 599-617.

The purpose of this study is to assess the extent to which intimate partner violence and different forms of child maltreatment occur within and across childhood and adulthood for a high-risk group of women. Low-income adult women were interviewed, retrospectively, regarding their experiences with intimate partner violence and child maltreatment in childhood and adulthood, and intra- and intergenerational relationships between multiple forms of family violence were identified. Analyses demonstrated weak to moderate associations between various forms of violence within generations. Only weak support was found for the transmission of violence

hypothesis that maltreated children are more likely to grow up to maltreat their own children. Stronger support was found for the theory of learned helplessness, whereby children maltreated or witness to violence during childhood are more likely to be victimized as an adult. The results from this study suggest that interventions with children who are identified for one form of victimization should be assessed for other forms of victimization, and interventions should also address learned behaviors or beliefs associated with continued or future victimization.

Rivett, M., & Kelly, S. (2006). 'From awareness to practice': Children, domestic violence and child welfare. *Child Abuse Review*, 15(4), 224-242.

This paper traces the development of social care practice in relation to child witnesses of domestic violence. It suggests that this development has been dominated by subsuming the needs of these children into a child protection process. The paper outlines how this has led to significant (but often unclear) legal and policy initiatives which have failed, as yet, to be translated into practice. The paper argues that there are a number of important reasons why child witnesses of domestic violence should not always be assumed to need the response of a child protection system and that a future practice, legal and policy response should be based on a wider understanding of their needs. Copyright © 2006 John Wiley & Sons, Ltd.

Coohey, C. (2004). Battered mothers who physically abuse their children. *Journal of Interpersonal Violence*, 19(8), 943-952.

The purpose of this study is to understand why some battered mothers physically abuse their children. Mothers who were battered and physically abused their children (the co-occurrence group) were compared with mothers who were neither battered nor physically abused, who were only battered, and who only abused (N = 184). The mothers in the co-occurrence group were more likely than the mothers who did not physically abuse their children to have been severely assaulted by their own mothers as children, have had poorer quality relationships with and receive less support from their mothers, have more stressors, and have known their partners for less time. These differences were not found between the mothers in the co-occurrence and abuse-only groups. In the multivariate analysis, having been assaulted by one's own mother as a child—not being

battered by one's partner—was the most potent predictor for whether a mother physically abused her child.

Dong, M., Anda, R. F., Felitti, V. J., Dube, S. R., Williamson, D. F., Thompson, T. J., Loo, C. M., & Giles, W. H. (2004). The interrelatedness of multiple forms of childhood abuse, neglect, and household dysfunction. *Child Abuse & Neglect*, 28(7), 771-784.

Childhood abuse and other adverse childhood experiences (ACEs) have historically been studied individually, and relatively little is known about the co-occurrence of these events. The purpose of this study is to examine the degree to which ACEs co-occur as well as the nature of their co-occurrence. We used data from 8,629 adult members of a health plan who completed a survey about 10 ACEs which included: childhood abuse (emotional, physical, and sexual), neglect (emotional and physical), witnessing domestic violence, parental marital discord, and living with substance abusing, mentally ill, or criminal household members. The bivariate relationship between each of these 10 ACEs was assessed, and multivariate linear regression models were used to describe the interrelatedness of ACEs after adjusting for demographic factors. Two-thirds of participants reported at least one ACE; 81%–98% of respondents who had experienced one ACE reported at least one additional ACE (median: 87%). The presence of one ACE significantly increased the prevalence of having additional ACEs, elevating the adjusted odds by 2 to 17.7 times (median: 2.8). The observed number of respondents with high ACE scores was notably higher than the expected number under the assumption of independence of ACEs ($p < .0001$), confirming the statistical interrelatedness of ACEs. The study provides strong evidence that ACEs are interrelated rather than occurring independently. Therefore, collecting information about exposure to other ACEs is advisable for studies that focus on the consequences of a specific ACE. Assessment of multiple ACEs allows for the potential assessment of a graded relationship between these childhood exposures and health and social outcomes. © 2004 Elsevier Ltd. All rights reserved.

Edleson, J. L. (2004). [Should childhood exposure to adult domestic violence be defined as child maltreatment under the law](#). In P. G. Jaffe, L.L. Baker, & A. Cunningham (Eds.), *Protecting children from domestic violence: Strategies for community intervention* (pp. 8-29). New York: Guilford Press.

A growing body of research has revealed that many children are affected by exposure to adult domestic violence. Increased public attention to this issue has led at least one state to define childhood exposure to domestic violence as a form of child maltreatment and to respond to it as such. This article reviews the research on childhood exposure to domestic violence and emerging laws aimed at protecting these children. Greater caution and more creative thinking is needed as public agencies and programs attempt to develop public policy for children exposed to domestic violence. The author concludes with an argument against assuming that childhood exposure to violence is automatically a form of child maltreatment and suggests the need to modify child protection services and the expansion of primarily voluntary community-based responses to these children and their families.

Hazen, A. L., Connelly, C. D., Kelleher, K., Landsverk, J., & Barth, R. (2004). Intimate partner violence among female caregivers of children reported for child maltreatment. *Child Abuse & Neglect*, 28(3), 301-319.

The purpose of this study was to determine the prevalence and correlates of intimate partner violence among female caregivers of children reported to child protective services. Data were derived from the National Survey of Child and Adolescent Well-Being, a national probability study of children investigated for child abuse and neglect in the United States. Caregivers were interviewed about demographic characteristics, mental health, substance use, and physical violence by a partner. The lifetime and past year prevalence of intimate partner violence was 44.8 and 29.0%, respectively. Caregiver major depression and history of prior reports of child maltreatment were strongly associated with violence against women. The findings highlight the need for effective screening and identification of intimate partner violence in families in which child maltreatment has occurred.

Cox, C. E., Kotch, J. B., & Everson, M. D. (2003). A longitudinal study of modifying influences in the relationship between domestic violence and child maltreatment. *Journal of Family Violence, 18*(1), 5-17.

The increased risk of child maltreatment in the presence of domestic violence is well documented, but much remains unknown about factors that modify this relationship. This study investigates the roles of risk and protective factors in the relationship between domestic violence and being reported to the Department of Social Services for child maltreatment. Consistent with the literature, we find a significant overlap between domestic violence and maltreatment. Young maternal age, low education, low income, and lack of involvement in a religious community add to the risk for maltreatment associated with domestic violence. Separation between the maternal caregiver and her partner significantly reduces the risk for maltreatment when domestic violence is reported. A significant reduction in the risk for maltreatment is also found with higher levels of support from the maternal caregiver reported by the child in the context of domestic violence.

Edleson, J. L., Mbilinyi, L. F., Beeman, S. K., & Hagemester, A. K. (2003). [How children are involved in adult domestic violence results from a four-city telephone survey](#). *Journal of Interpersonal Violence, 18*(1), 18-32.

There is limited research available on children's involvement in incidents of adult domestic violence. This study collected direct reports on real-life events and went beyond earlier research by eliciting information on a larger array of family and contextual factors that may account for variation in children's responses. Anonymous telephone interviews with 114 battered mothers in four metropolitan areas elicited detailed information from women on their children's responses to the violence being committed against the mothers. One quarter of the mothers reported that their children were physically involved in the events. In addition, mothers with less stable financial, social, and living situations at the time of the interview reported their children to have intervened more during the past violent incidents. The article concludes with recommendations for a greater emphasis on careful assessment of children's involvement in domestic violence incidents and on assisting mothers to achieve economic stability as well as safety.

Folsom, W. S., Christensen, M. L., Avery, L., & Moore, C. (2003). The co-occurrence of child abuse and domestic violence: An issue of service delivery for social service professionals. *Child and Adolescent Social Work Journal*, 20(5), 375-387.

In order to add to the growing literature on intergenerational rates of family violence, data were collected from a community-based child abuse agency. The study's purpose was to compare the co-occurrence of child abuse/neglect (CAN) and domestic violence (DV), and the prevalence of CAN and parent's childhood history of abuse. Data were collected from 537 families through intake and subsequent interviews in an attempt to determine the relationship among CAN and DV, and CAN and parent's childhood history of abuse. A chi-square analysis indicated significant relationships among these variables. Of the participants in this sample, 48.9% had experienced both CAN and DV. These results also indicated that 66.3% of participants had a childhood history of CAN and were currently experiencing issues of CAN with their own children. Logistic regression was utilized to examine whether families involved with Child Protective Services (CPS) were at higher risk for DV and/or parental childhood history of CAN. The results indicate that CPS-involved families were approximately three times as likely to have a parent reporting a childhood history of CAN but were not at significantly higher odds for DV. Implications for service delivery are discussed.

Holden, G. W. (2003). Children exposed to domestic violence and child abuse: Terminology and taxonomy. *Clinical Child and Family Psychology Review*, 6(3), 151-160.

Three definitional issues regarding children exposed to domestic violence are examined. First, the multiple ways in which a child can be exposed to violence is discussed. A taxonomy of 10 types of exposure is proposed. Nine key characteristics of domestic violence, as they relate to children and children's exposure, are then outlined. The third issue addressed concerns why children who are exposed to domestic violence can be considered victims of child maltreatment. These children, by nature of their experience in the home, are psychologically maltreated and are also at high risk for physical abuse and some risk for sexual abuse. Empirical questions concerning these definitions and taxonomies and their interrelations are discussed.

Kantor, G. K., & Little, L. (2003). [Defining the boundaries of child neglect: When does domestic violence equate with parental failure to protect?](#) *Journal of Interpersonal Violence, 18*(4), 338-355.

Child maltreatment does not exist in isolation from other forms of family violence. Notably, research supports the connection between wife abuse and child maltreatment, and research on the possible consequences to children exposed to domestic violence has influenced a redefinition of child maltreatment legislation and policy. Recently, some states have considered and passed legislation making witnessing of domestic violence, per se, a form of criminal child abuse. This article explores conceptual discontinuities in official definitions of child maltreatment in relation to domestic violence failure to protect matters by drawing on data from legislative reviews, child protective services, and individual-level definitions. Implications for policy, practice, and research are addressed.

Office on Child Abuse and Neglect, Children's Bureau, Caliber Associates, & Bragg, H. L. (2003). The overlap between child maltreatment and domestic violence. Child Welfare Information Gateway.

Osofsky, J. D. (2003). Prevalence of children's exposure to domestic violence and child maltreatment: Implications for prevention and intervention. *Clinical Child and Family Psychology Review, 6*(3), 161-170.

The purpose of this paper is to review research on the prevalence of children's exposure to domestic violence, to consider the available literature on the co-occurrence of domestic violence and child maltreatment, and to gain more understanding about the impact of exposure on children. There is clear evidence indicating that both severe and moderate violence occurs frequently in homes among family members and that children are exposed to this violence. However, because of differing definitions of what constitutes domestic violence and variability in research methodologies for collecting the data, there are significant discrepancies in prevalence reports across studies. Of great concern is the immediate impact on the children and the long-term consequences for their later relationships. Fewer studies have been done on the co-occurrence of domestic violence and child maltreatment. However, it is likely that children who live in homes where domestic violence occurs are more likely to be abused and neglected. On the basis of

available research, there is little doubt that vast numbers of children are exposed to domestic violence and that children's responses vary widely depending on their risk and vulnerability, as well as the structure of their environments. A developmental risk and protective factors framework will be used to integrate the information on children's exposure to violence.

Saunders, B. E. (2003). Understanding children exposed to violence: Toward an integration of overlapping fields. *Journal of Interpersonal Violence, 18*(4), 356-376.

Although comprehensive studies examining a variety of violence types and potential outcomes are becoming more common, there continues to be an overreliance on relatively simple, single violence type, criterion group comparisons. Unfortunately, the sheer volume of what is known about different forms of childhood violence, the many potential outcomes that have been shown to be related to a history of violence in childhood, and emerging research on mediators and moderators makes conducting comprehensive research a significant theoretical and technical challenge. Complicating this situation is that vertically organized and isolated professional fields of study and practice have emerged around specific types of childhood violence and outcomes, making cross-fertilization of ideas and methods difficult. Suggestions concerning theory, methods, and professional integration are offered to promote more integration of the field of childhood violence.

Avery, L., Hutchinson, K. D., & Whitaker, K. (2002). Domestic violence and intergenerational rates of child sexual abuse: a case record analysis. *Child and Adolescent Social Work Journal, 19*(1), 77-90.

Using case review at a shelter for battered women and their children, this exploratory study investigated the association between physical abuse, exposure to domestic violence and intergenerational occurrence of child sexual abuse. The charts of 570 children were reviewed in an attempt to explore the relationship between the children's experiences with sexual abuse and their nonoffending parent's own history of having been sexually abused. Results indicated that a significant percentage of nonoffending parents who reported a history of child sexual abuse also had children who were sexually abused. Additionally, we found that most (93%) of the children studied had been exposed to domestic violence, and while the base rate of sexual abuse was relatively low (11%), the rate of physical abuse of the children was substantial (41%). Logistic

regression results indicated that children of sexually abused nonoffending parents may be at heightened risk for sexual abuse. Implications for treatment and intervention are discussed.

Bevan, E., & Higgins, D. J. (2002). Is domestic violence learned? The contribution of five forms of child maltreatment to men's violence and adjustment. *Journal of Family Violence, 17*(3), 223-245.

On the basis of a learning-theory approach to the intergenerational transmission of violence, researchers have focused almost exclusively on violent men's childhood experiences of physical abuse and witnessing family violence. Little consideration has been given to the coexistence of other forms of child maltreatment or the role of family dysfunction in contributing to violence. This study shows the relationships between the level of child maltreatment (physical abuse, psychological maltreatment, sexual abuse, neglect, and witnessing family violence), childhood family characteristics, current alcohol abuse, trauma symptomatology, and the level of physical and psychological spouse abuse perpetrated by 36 men with a history of perpetrating domestic violence who had attended counseling. As hypothesized, a high degree of overlap between risk factors was found. Child maltreatment, low family cohesion and adaptability, and alcohol abuse was significantly associated with frequency of physical spouse abuse and trauma symptomatology scores, but not psychological spouse abuse. Rather than physical abuse or witnessing family violence, childhood neglect uniquely predicted the level of physical spouse abuse. Witnessing family violence (but not physical abuse) was found to have a unique association with psychological spouse abuse and trauma symptomatology. These results present a challenge to the understanding of domestic violence obtained from learning theory.

Hartley, C. C. (2002). The co-occurrence of child maltreatment and domestic violence: Examining both neglect and child physical abuse. *Child Maltreatment, 7*(4), 349-358.

Research supports a substantial overlap between domestic violence and child maltreatment. However, few studies examine the characteristics of families in which both domestic violence and child maltreatment are present, with most studies exploring only child physical abuse. This study examined differences in demographic characteristics, parental problems, and maltreatment characteristics for families involving physical abuse or neglect and woman battering compared to

families with the same type of maltreatment but no known woman battering present. Descriptive analyses found more differences between families with domestic violence and neglect and neglect-only than between co-occurring physical abuse and physical abuse-only families. Analyses looking at the association or interaction between the type of maltreatment and presence of domestic violence found a significant association between marital status, father's biological relationship to the child, mother-as-perpetrator, and age of the children with co-occurrence of domestic violence for neglect but not for physical abuse.

McGuigan, W. M., & Pratt, C. C. (2001). The predictive impact of domestic violence on three types of child maltreatment. *Child Abuse & Neglect, 25*(7), 869-883.

This exploratory study investigated the co-occurrence of domestic violence and three types of child maltreatment: physical child abuse, psychological child abuse, and child neglect. A sample of 2544 at-risk mothers with first-born children participated in a home-visiting child abuse prevention program. A longitudinal design using multiple data collection methods investigated the effect of domestic violence during the first 6 months of child rearing on confirmed physical child abuse, psychological child abuse, and child neglect up to the child's first 5 years. Logistic regressions revealed significant relationships between domestic violence and physical child abuse, psychological child abuse, and child neglect. These effects were significant beyond the significant effects of known risks of maltreatment, as measured by the Kempe Family Stress Inventory (KFSI). Domestic violence occurred in 59 (38%) of the 155 cases of confirmed maltreatment. Domestic violence preceded child maltreatment in 46 (78%) of the 59 cases of co-occurrence, as indicated by independent home observations and child protective service records. The findings indicate that domestic violence during the first 6 months of child rearing is significantly related to all three types of child maltreatment up to the child's fifth year. Domestic violence and risks factors measured on the KFSI continue to contribute to all three types of maltreatment up to the child's fifth year. Prevention programs would be wise to provide services to at-risk families until the child is at least 5 years old. Addressing concurrent problems during treatment may enhance intervention.

Eckenrode, J., Ganzel, B., Henderson Jr, C. R., Smith, E., Olds, D. L., Powers, J., ... & Sidora, K. (2000). [Preventing child abuse and neglect with a program of nurse home visitation: The limiting effects of domestic violence.](#) *JAMA*, 284(11), 1385-1391.

Context: Home visitation to families with young children has been promoted as an effective way to prevent child maltreatment, but few studies have examined the conditions under which such programs meet this goal. Objective: To investigate whether the presence of domestic violence limits the effects of nurse home visitation interventions in reducing substantiated reports of child abuse and neglect. Design: Fifteen-year follow-up study of a randomized trial. Setting: Semirural community in upstate New York. Participants: Of 400 socially disadvantaged pregnant women with no previous live births enrolled consecutively between April 1978 and September 1980, 324 mothers and their children participated in the follow-up study. Interventions: Families were randomly assigned to receive routine perinatal care (control group; n = 184 participated in follow-up), routine care plus nurse home visits during pregnancy only (n = 100), or routine care plus nurse home visits during pregnancy and through the child's second birthday (n = 116). Main Outcome Measures: Number of substantiated reports over the entire 15-year period involving the study child as subject regardless of the identity of the perpetrator or involving the mother as perpetrator regardless of the identity of the child abstracted from state records and analyzed by treatment group and level of domestic violence in the home as measured by the Conflict Tactics Scale. Results: Families receiving home visitation during pregnancy and infancy had significantly fewer child maltreatment reports involving the mother as perpetrator (P = .01) or the study child as subject (P = .04) than families not receiving home visitation. The number of maltreatment reports for mothers who received home visitation during pregnancy only was not different from the control group. For mothers who received visits through the child's second birthday, the treatment effect decreased as the level of domestic violence increased. Of women who reported 28 or fewer incidents of domestic violence (79% of sample), home-visited mothers had significantly fewer child maltreatment reports during the 15-year period than mothers not receiving the longer-term intervention (P = .01). However, this intervention did not significantly reduce child maltreatment among mothers reporting more than 28 incidents of domestic violence (21% of sample). Conclusions: The presence of domestic violence may limit the effectiveness of interventions to reduce incidence of child abuse and neglect.

McGuigan, W. M., Vuchinich, S., & Pratt, C. C. (2000). Domestic violence, parents' view of their infant, and risk for child abuse. *Journal of Family Psychology, 14*(4), 613-624.

This investigation used longitudinal data from 181 couples with firstborn infants to test the hypothesis that parents' negative cognitions about the child mediate the effect of domestic violence on risk of child abuse. Analysis of covariance showed that mothers and fathers who experienced domestic violence during the 1st year of their child's life developed a significantly more negative view of their child. Hierarchical regressions showed that the effect of domestic violence on the family's risk of child abuse was mediated by the mother's and father's negative views of the child. Intervention and prevention applications are discussed. (PsycINFO Database Record © 2012 APA, all rights reserved)

Tomison, A. M. (2000). [Exploring family violence: Links between child maltreatment and domestic violence](#). Melbourne, Australia: Australian Institute of Family Studies.

There is a growing body of evidence that suggests that different types of violence may occur simultaneously in the same family, and that the presence of one form of violence may be a strong predictor of the other. Yet until recently, policy, research and practice dealing with family violence has been fragmented, with the various types of violence that may occur between family members usually managed independently of one another. In this paper the relationship between child maltreatment and domestic violence is explored, in particular, the relationship between child sexual abuse and domestic violence, and the 'forgotten' victims of family violence - children who witness domestic violence. It is contended that to adequately prevent family violence requires a shift in policy and practice to ensure that the 'totality of violence' present in families is addressed. Specifically recommended are greater cross-sectoral acknowledgment of the various forms of family violence, and the development of an overarching National Framework and a National Roundtable of Violence Prevention, encompassing the prevention of all violence.

Edleson, J. L. (1999). The overlap between child maltreatment and woman battering. *Violence against Women, 5*(2), 134-154.

Societal responses to child maltreatment and to woman battering have developed in separate and sometimes conflicting ways. It is only in recent years that greater attention has been devoted to the

possible overlap between child maltreatment and woman battering in the same families. Thirty-five studies conducted over the past 2½ decades that mentioned an overlap between child maltreatment and adult domestic violence in the same families were identified. These studies are reviewed and their strengths and weaknesses identified. The article concludes with a discussion of the implications these findings have for practice, policy, and research.

Fantuzzo, J. W., & Mohr, W. K. (1999). Prevalence and effects of child exposure to domestic violence. *The Future of Children*, 9(3), 21-32.

In recent years, researchers have focused attention on children who are exposed to domestic violence. Although presently there are no scientifically credible estimates of the national prevalence of children exposed to domestic violence, existing data suggest that large numbers of American children are affected. This article discusses the limitations of current databases and describes a promising model for the collection of reliable and valid prevalence data, the Spousal Assault Replication Program, which uses data collected through collaboration between police and university researchers. Research examining the effects of childhood exposure to domestic violence is also limited by a range of methodological problems. Despite this, however, sufficient evidence from the body of studies exists to conclude that such exposure has adverse effects. The specific effects may differ depending on a host of variables, such as the children's ages, the nature and severity of the violence, the existence of other risk factors in the children's lives (for example, poverty, parental substance abuse), and whether the children are also directly physically abused. In general, childhood exposure to domestic violence can be associated with increased display of aggressive behavior, increased emotional problems such as depression and/or anxiety, lower levels of social competence, and poorer academic functioning. A scientifically credible body of research on the prevalence and effects of childhood exposure to domestic violence is necessary to promote the development of effective interventions and to permit the proper channeling of public and private funds. This article identifies some of the steps that can be taken to build the research capacity necessary to obtain the needed data.

Findlater, J. E., & Kelly, S. (1999). Child protective services and domestic violence. *The Future of Children*, 9(3), 84-96.

Studies estimate that domestic violence is present in at least one-third of the families involved in child protective services (CPS). Yet, until recently, CPS has not directly addressed domestic violence in its handling of child abuse and neglect cases. By the same token, domestic violence programs have historically emphasized services for battered women, with limited understanding of the child safety goals of CPS. Despite these historical differences, collaborative efforts between CPS and domestic violence service programs are emerging based on a common goal of safety from violence for all family members. Innovative strategies include the use of domestic violence specialists in a variety of child protection settings for case consultation and for support to the battered women, direct referrals of battered women from domestic violence programs to family preservation services, and cross-training of CPS workers and domestic violence service providers. A survey of state CPS administrators and domestic violence coalition directors conducted for this article revealed that although there is mutual interest in greater collaboration, such efforts remain limited. New forums, such as CPS citizen review panels and community-based CPS partnerships, hold promise for further collaboration. Critical to successful strategies are supportive agency leadership, greater trust and understanding across systems, a recognition of common goals, and a willingness to change policies and practice.

Groves, B. M. (1999). Mental health services for children who witness domestic violence. *The Future of Children*, 9(3), 122-132.

Exposure to domestic violence has significant negative repercussions for children's social, emotional, and academic functioning. In the past decade, mental health professionals have developed treatment programs and approaches aimed at mitigating these deleterious effects. Their efforts, however, are often hampered by difficulty identifying and gaining access to the target population because the occurrence of domestic violence remains a family secret in many households. Clinicians and researchers have published descriptions of group and individual therapy approaches for children who witness domestic violence. These approaches share several goals: promoting open discussion about children's experiences with domestic violence, helping children to deal with the emotions and consequences that follow such exposure, reducing the

problematic symptoms children experience, strengthening children's relationships with their nonabusive caregivers, and helping children and their families to create and maintain relationships and living situations that are free from violence and abuse. One limitation of the literature describing these interventions is the absence of controlled outcome studies demonstrating the effects of these programs, in the short and long terms. Thus, development of such evaluative components is an important future direction for this field. Some of the other challenges that confront clinicians include working with children's families, addressing children's complex and intense emotional experiences, and determining whether children have themselves been victims of abuse or neglect (and then interfacing with child protective services).

Lemon, N. K. (1999). The legal system's response to children exposed to domestic violence. *The Future of Children*, 9(3), 67-83.

Historically, the legal system has not responded adequately, if at all, to cases involving domestic violence. In the past two decades, U.S. courts and law enforcement agencies have increasingly acknowledged the seriousness of domestic violence and have developed responses to it. Unfortunately, the legal system has been slower to recognize the impact of domestic violence on children. This article highlights four key areas of case law in which the courts have begun, in varying degrees, to examine the effects of domestic violence on children: child custody and visitation, restraining orders, failure to protect a child from harm, and termination of parental rights. A survey of appellate cases since 1990, though not representative of all cases, shows an ongoing need for mandatory judicial training on domestic violence and its effects on children, greater clarity about how to interpret relevant laws, changes in the laws to better serve children, and the renewal of national funding for legal aid programs. Courts and law enforcement agencies in some locales have implemented innovative programs to improve their interventions with children exposed to domestic violence. These programs include coordinated court responses, child development training for police officers, multidisciplinary team approaches, and supervised visitation centers. However, few of these programs have been evaluated for overall effectiveness in improving outcomes for children. Better evaluation is needed, as is ongoing funding for the replication of successful programs nationwide. A companion article by Matthews in this journal

issue examines federal laws and policies with regard to domestic violence and children, and reviews many of the state statutes on which the court decisions discussed here are based.

Matthews, M. A. (1999). The impact of federal and state laws on children exposed to domestic violence. *The Future of Children*, 9(3), 50-66.

Until recently, few federal and state laws specifically addressed the needs of children in families in which there is domestic violence. Yet, many laws, particularly in the areas of domestic violence, family law, child welfare, welfare reform, and immigration, can have profound effects on the well-being of these children. The growing understanding by legislators and policymakers of the potential harms of domestic violence to children has resulted in recent years in statutory changes, particularly at the state level. However, laws that are enacted and implemented with inadequate knowledge of the complex dynamics of domestic violence and the unique issues battered parents and their children face may have unintended negative consequences for the children these laws are designed to protect. Collaboration across public and private social service agencies and domestic violence training for court personnel are examples of efforts that can bridge this knowledge gap and increase the likelihood that the protective intent of the laws is carried out in practice. This article analyzes current and proposed federal and state civil laws to better understand their potential impact on children affected by domestic violence. A companion article by Lemon in this journal issue examines court decisions related to these laws.

Appel, A. E., & Holden, G. W. (1998). The co-occurrence of spouse and physical child abuse: A review and appraisal. *Journal of Family Psychology*, 12(4), 578-599.

For more than 20 years, there have been periodic reports in the research literature about the co-occurrence of spouse abuse and physical child abuse. This review compiles and evaluates those reports. Forty-two studies were found that provided some data concerning co-occurrence; 31 of the studies included sufficient detail to be used in this review. The different types of studies are classified and methodological issues are discussed. The base rate of co-occurrence found in representative community samples was about 6%. In clinical samples of either battered women or physically abused children, the percentage of overlap ranged from 20% to 100%. When a

conservative definition of child abuse was used, a median co-occurrence rate of 40% was found. Five models depicting the directionality of abuse in violent families are proposed and discussed in relation to the data and theories of violence. Recommendations for methodological improvements and theory-driven studies are presented. (PsycINFO Database Record © 2012 APA, all rights reserved)

Stanley, N. (1997). Domestic violence and child abuse: Developing social work practice. *Child & Family Social Work, 2*(3), 135-145.

This paper takes as its starting point the report produced by the Social Services Inspectorate (1995), entitled *Domestic Violence and Social Care*, which seeks to alert social workers to the links between domestic violence and child abuse and urges the profession to respond more effectively to these two interconnected forms of violence. Having examined the research findings which provide evidence for these links, the theoretical and service delivery contexts in which these two forms of violence have been studied and conceptualized by the social work profession, both in the United Kingdom and in the United States, are identified. Studies of the social work response to domestic violence are discussed and some of the difficulties experienced by social workers in responding effectively to the needs of families where both forms of violence are experienced are considered. In particular, the issues of ‘invisible’ men and ‘trapped’ women and children are explored. It is argued that effective social work intervention which challenges these stereotypes will require additional resources and the article concludes with a consideration of whether the *Messages from Research* report might herald a shift in the approach to child protection that would promote the allocation of resources to this area of work.

McCloskey, L. A., Figueredo, A. J., & Koss, M. P. (1995). The effects of systemic family violence on children's mental health. *Child Development, 66*(5), 1239-1261.

This study examines the link between different forms of family aggression and children's symptoms of psychopathology. The goal of the study was to understand what forms children's problems might take in violent homes and whether close ties within the family (to the mother or a sibling) buffered children. Interviews with 365 mothers and 1 of their children between the ages

of 6 and 12 about abuse in the home, support and closeness within the nuclear family, and mother's and children's mental health formed the basis of this study. Families were recruited from battered women's shelters and the community. We found that different forms of abuse in the home were highly interrelated and that children of battered women were at risk for child abuse. Domestic violence predicted children's general psychopathology, but we uncovered little evidence for the presence of specific sorts of disorders as a result of family dysfunction. Although mothers experiencing conjugal violence were more likely to have mental health problems, their mental health did not mediate the children's response to family conflict. Finally, there was less sibling and parental warmth in families marked by aggression, although when it was present, family social support failed to buffer children. Although the general pattern of results was consistent across respondents (mother and child), there was low agreement on symptoms of child psychopathology.

Sternberg, K. J., Lamb, M. E., Greenbaum, C., Cicchetti, D., Dawud, S., Cortes, R. M., ... & Lorey, F. (1993). Effects of domestic violence on children's behavior problems and depression. *Developmental Psychology*, 29(1), 44-52.

The Children's Depression Inventory, Child Behavior Checklist, and Youth Self-Report were completed by mothers, fathers, and their 8–12 year old children to assess the effects of various types of domestic violence on children's behavior problems and depression. 110 Israeli children from lower-class families were identified through social service records. 33 of the children had been physically abused by their parents within the last 6 months, 16 had witnessed spouse abuse, 30 had been both victims and witnesses of domestic violence, and 31 had experienced no known domestic violence. Overall, domestic violence had effects on child development that varied in magnitude and nature depending on the type of domestic violence and who reported the information about the child's adjustment.

Children Talk about Their Experiences

Figge, C. J., Martinez-Torteya, C., Bogat, G. A., & Levendosky, A. A. (2018). Child appraisals of interparental conflict: The effects of intimate partner violence and parent–child relationship quality. *Journal of Interpersonal Violence*. DOI: 10.1177/0886260518794509

Children’s appraisals of interparental violence, including appraisals of high threat and low coping efficacy, are robust predictors of behavioral and emotional problems. However, few studies have examined the factors that account for children’s use of these maladaptive appraisals, particularly among children exposed to more severe forms of interparental conflict. The current study examines parent–child relationship quality as a mediator of the effect of intimate partner violence (IPV) exposure on children’s appraisals of conflict. Participants were 118 mother–child dyads (54 girls and 64 boys), recruited from three Midwestern counties. Consistent with previous reports, child exposure to IPV, as reported by children’s mothers, predicted higher threat and lower coping efficacy appraisals. In addition, mediation analyses showed child reports of parent–child relationship quality mediated the association between IPV and coping efficacy, but not the effects of IPV on threat appraisals. The role of parent–child relationships in shaping cognitive appraisals in the context of IPV exposure can have implications for prevention and intervention efforts as well as public policy.

Grogan-Kaylor, A., Howell, K. H., Miller-Graff, L. E., Galano, M., & Graham-Bermann, S. (2018). Trajectories of children’s attitudes and beliefs about violence in families exposed to intimate partner violence. *Violence and Victims*, 33(3), 504-518.

Intimate partner violence (IPV) poses serious risks to the health of women. Numerous studies link children’s IPV exposure to various forms of developmental psychopathology. One possible explanatory factor appears to be children’s beliefs and attitudes about the violence they have witnessed. Little research has investigated how these beliefs may change over time. The sample consisted of 109 mother–child pairs where the mother experienced IPV in the past 2 years. Multilevel modeling was used to examine change in children’s attitudes and beliefs over time. Maternal depression and corporal punishment were associated with higher initial levels of maladaptive beliefs about family violence. Children’s beliefs about violence improved over time.

Findings indicate that while cognitive treatments may offer some utility for intervening with children, providing intervention support for the broader family system (i.e., around maternal depression and use of corporal punishment) may also be important pathways to supporting families exposed to IPV.

Izaguirre, A., & Cater, Å. (2018). Child witnesses to intimate partner violence: Their descriptions of talking to people about the violence. *Journal of Interpersonal Violence*, 33(24), 3711-3731.

Witnessing intimate partner violence (IPV) may have damaging effects on children's well-being and development. How children understand IPV affects the risk of their developing negative outcomes. Talking with children about the violent episodes they have experienced can change their beliefs regarding their parents' IPV, and therefore may also be a way to help them deal with these adverse experiences. The purpose of the current study was to use the children's narratives to explore the relationship between how IPV was perceived by the children and their experience of talking about it. Interviews with 31 children between 9 and 13 years of age were analyzed using a thematic method. Two main groups of children were identified: children who described the violence as a horrifying experience and children who preferred not to think about the violence. The findings showed that children who described the violence as a horrifying experience perceived talking about the violence as a positive, yet sometimes distressing, experience that made a real difference in their lives; whereas, children who preferred not to think about the violence did not see much need to talk about it and benefit.

Callaghan, J. E., Alexander, J. H., Sixsmith, J., & Fellin, L. C. (2015). Beyond "witnessing" children's experiences of coercive control in domestic violence and abuse. *Journal of Interpersonal Violence*, 33(10), 1551-1581.

Children's experiences and voices are underrepresented in academic literature and professional practice around domestic violence and abuse. The project "Understanding Agency and Resistance Strategies" (UNARS) addresses this absence, through direct engagement with children. We present an analysis from interviews with 21 children in the United Kingdom (12 girls and 9 boys, aged 8-18 years), about their experiences of domestic violence and abuse, and their responses to this violence. These interviews were analyzed using interpretive interactionism. Three themes from

this analysis are presented: (a) “Children’s experiences of abusive control,” which explores children’s awareness of controlling behavior by the adult perpetrator, their experience of that control, and its impact on them; (b) “Constraint,” which explores how children experience the constraint associated with coercive control in situations of domestic violence; and (c) “Children as agents,” which explores children’s strategies for managing controlling behavior in their home and in family relationships. The article argues that, in situations where violence and abuse occur between adult intimate partners, children are significantly affected, and can be reasonably described as victims of abusive control. Recognizing children as direct victims of domestic violence and abuse would produce significant changes in the way professionals respond to them, by (a) recognizing children’s experience of the impact of domestic violence and abuse; (b) recognizing children’s agency, undermining the perception of them as passive “witnesses” or “collateral damage” in adult abusive encounters; and (c) strengthening professional responses to them *as direct victims*, not as passive witnesses to violence.

Katz, C. (2014). The dead end of domestic violence: Spotlight on children's narratives during forensic investigations following domestic homicide. *Child Abuse & Neglect*, 38(12), 1976-1984.

The current study provides an in-depth exploration of the narratives of children who witnessed their father killing their mother. This exploration was conducted using a thematic analysis of the children's forensic interviews based on seven investigative interviews that were conducted with children following the domestic homicide. Investigative interviews were selected for study only for substantiated cases and only if the children disclosed the domestic homicide. All of the investigative interviews were conducted within 24h of the domestic homicide. Thematic analysis revealed the following four key categories: the domestic homicide as the dead end of domestic violence, what I did when daddy killed mommy, that one time that daddy killed mommy, and mommy will feel better and will go back home. The discussion examines the multiple layers of this phenomenon as revealed in the children's narratives and its consequences for professionals within the legal and clinical contexts.

McWilliams, K., Narr, R., Goodman, G. S., Ruiz, S., & Mendoza, M. (2013). Children's memory for their mother's murder: Accuracy, suggestibility, and resistance to suggestion. *Memory, 21*(5), 591-598.

From its inception, child eyewitness memory research has been guided by dramatic legal cases that turn on the testimony of children. Decades of scientific research reveal that, under many conditions, children can provide veracious accounts of traumatic experiences. Scientific studies also document factors that lead children to make false statements. In this paper we describe a legal case in which children testified about their mother's murder. We discuss factors that may have influenced the accuracy of the children's eyewitness memory. Children's suggestibility and resistance to suggestion are illustrated. Expert testimony, based on scientific research, can aid the trier of fact when children provide crucial evidence in criminal investigations and courtroom trials about tragic events.

Georgsson, A., Almqvist, K., & Broberg, A. G. (2011). Naming the unmentionable: How children exposed to intimate partner violence articulate their experiences. *Journal of Family Violence, 26*(2), 117-129.

Witnessing intimate partner violence (IPV) is a frightening experience that affects children's development and well-being. This study examines experiences of IPV from the perspective of children. Interviews with 14 children between 8 and 12 years of age were analyzed using a thematic method. Three main themes were identified: how children talked about abuse of their mother, described their own actions, and related to or handled memories of violence. Most children confirmed that their mother had been the victim of abuse, but had difficulties describing these experiences. Narratives were often incoherent and difficult to fully understand. In contrast, most of the children seemed to find it easier to describe their own actions during violence and conflicts. Not thinking about IPV was a strategy that aimed at reducing unwanted memories; it is also a strategy that may obstruct creating a narrative.

Knutson, J. F., Lawrence, E., Taber, S. M., Bank, L., & DeGarmo, D. S. (2009). Assessing children's exposure to intimate partner violence. *Clinical Child and Family Psychology Review, 12*(2), 157-173.

Child exposure to intimate partner violence (IPV) is widely acknowledged as a threat to the psycho-social and academic well-being of children. Unfortunately, as reflected in the literature, the specific link between such exposure and childhood outcomes is ambiguous. Based on a review of the literature, this article suggests that this state of affairs is due, in part, to the manner with which *exposure* to IPV is operationally defined. After reviewing the dominant strategies for operationally defining exposure to IPV and the problems associated with those strategies, this article reports original data contrasting three measures derived from maternal reports, three measures derived from child reports, and the limited concordance among those different indices of exposure to IPV. The implications of these findings for research on child outcomes and the clinical assessment of children who might have been exposed to IPV are discussed.

Faller, K. C. (2003). Research and practice in child interviewing: Implications for children exposed to domestic violence. *Journal of Interpersonal Violence, 18*(4), 377-389.

Recent research documents the comorbidity of child maltreatment and domestic violence as well as the detrimental impact of exposure to domestic violence on children. Domestic violence and child interviewing also share the distinction of being contested social issues. This article argues that methods employed in interviewing children about child maltreatment can be applied to interviewing children about exposure to domestic violence. The article describes how cognitive interviewing, narrative elaboration, and event segmentation can be employed when talking to children about domestic violence. In addition, the article discusses how focused questions related to child maltreatment and child endangerment can be used to elicit information from children about domestic violence.