

Effects of Domestic Violence/Intimate Partner Violence upon Children

A Bibliography



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Scope

This bibliography provides citations and abstracts to English language books, chapters, and articles covering the topic of effects of domestic violence on children. This bibliography is not comprehensive.

Organization

This bibliography lists publications in date descending order. Links are provided to full text publications when possible.

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Effects of Domestic Violence/Intimate Partner Violence upon Children

A Bibliography

Akpunne, B. C., Opadere, A. A., Babatunde, S. I., Ogunsemi, J. O., & Ndubisi, D. C. (2020). Associations between exposure to domestic violence, depression and cyberbullying among secondary school adolescents. *European Journal of Medical and Health Sciences*, 2(4). <https://doi.org/10.24018/ejmed.2020.2.4.376>

Literatures on high prevalence of domestic violence are well documented. There is however paucity of research on exposure to domestic violence relates to cyber bullying behavior among Nigerian adolescents. The focus of this study was to determine the correlation between Exposure to Domestic Violence (EDV), depression and cyber bullying behavior among secondary school adolescents. A total of 300 purposively selected secondary school adolescents in Oshodi Isolo, Lagos metropolis Nigeria responded to Child Exposure to Domestic Violence Scale (CEDV), Centre for Epidemiological Studies Depression Scale for Children (CES-DC) and Online Victimization Scale for Adolescents (OVSA). Data was analyzed using the Statistical Package for Social Sciences (SPSS). Data was analyzed using the descriptive (frequency count) and Inferential statistics (Pearson moment correlation analysis). A high prevalence of EDV, depression and involvement of cyber bullying was reported. Patterns of the factors of cyberbullying ranged from 26.7% individual online racial discrimination to 37% vicarious online racial discrimination. EDV significantly positively related to depression and involvement in cyber bullying. Significant gender influence was observed on depressing and cyber bullying. Age categories significantly influenced cyber bullying. Authors conclude that a high prevalence of depression and involvement in cyber bullying exists among secondary school adolescents. EDV is a significant positive correlate of depression and cyber bullying. There is gender difference on depression and cyber bullying. Age categories influence cyber bullying among the adolescents.

Carter, B., Paranjothy, S., Davies, A., & Kemp, A. (2020). [Mediators and effect modifiers of the causal pathway between child exposure to domestic violence and internalizing behaviors among children and adolescents: A systematic literature review](https://doi.org/10.1177/1524838020965964). *Trauma, Violence, & Abuse*. <https://doi.org/10.1177/1524838020965964>

Childhood exposure to domestic violence (DV) can lead to mental health problems including internalizing symptoms. This systematic literature review aimed to identify individual-, familial-,

and community-level factors that mediate or modify the effect of DV exposure on internalizing symptoms among children and adolescents. This systematic literature review was registered with PROSPERO, registration number: CRD42019127012. MEDLINE, EMBASE, and PsycINFO were searched between 1990 and 2018 for peer-reviewed, quantitative, longitudinal studies published in English. Backreferencing and key journal hand searches were conducted. Twelve longitudinal studies were included. These investigated how factors amenable to change either mediate or modify the effect of exposure to DV on internalizing symptoms (using validated measures) in children and adolescents up to 18 years within a general population. Study quality was assessed using the Newcastle–Ottawa risk of bias tool, and a sample of studies were second reviewed by authors. One individual-level mediator was identified, namely emotional intelligence, and two effect modifiers were identified: relational victimization and participation in extracurricular activities. Familial mediators included maladaptive parenting and parenting stress, while effect modifiers included positive parenting (maternal warmth and availability) and family social support. No community-level factors were identified. All research was conducted in the United States, most focused on risk, and the majority measured outcomes in middle childhood. Nevertheless, these findings suggest that interventions provided to families exposed to intimate partner violence need to target both child and familial factors in order to successfully reduce children’s internalizing symptoms.

Davies, P. T., Thompson, M. J., Martin, M. J., & Cummings, E. M. (2020). The vestiges of childhood interparental conflict: Adolescent sensitization to recent interparental conflict. *Child Development*. <https://doi.org/10.1111/cdev.13451>

This study examined whether childhood interparental conflict moderated the mediational pathway involving adolescent exposure to interparental conflict, their negative emotional reactivity to family conflict, and their psychological problems in a sample of 235 children (Mage = 6 years). Significant moderated-mediation findings indicated that the mediational path among Wave 4 interparental conflict during adolescence, change in youth negative reactivity (Waves 4–5), and their psychological problems (Waves 4–6) was significant for teens who experienced low, rather than high, levels of childhood interparental conflict (Waves 1–3). Supporting the stress sensitization model, analyses showed that adolescents exposed to high interparental conflict during

childhood evidenced greater increases in negative reactivity than their peers when recent parental conflicts were mild.

Jouriles, E. N., Rancher, C., Vu, N. L., & McDonald, R. (2020). Police involvement in intimate partner violence and children's anxiety symptoms. *Journal of interpersonal violence*, 35(19-20), 3791-3805. <https://doi.org/10.1177/0886260517710487>

This study examined whether police involvement in intimate partner violence (IPV) is associated with children's anxiety symptoms and threat appraisals. Participants were 117 mothers and their children (7-10 years) recruited from domestic violence shelters and followed for 6 months. Mothers reported on IPV and police involvement in the past 6 months; children reported their own anxiety symptoms and threat appraisals. Police involvement in IPV incidents at Time 1 was positively related to children's anxiety symptoms at both the Time 1 and Time 2 assessments, even after controlling for the severity of the IPV. Police involvement was not associated with children's threat appraisals. Police involvement in IPV may inadvertently contribute to an increase in children's anxiety symptoms. Efforts to mitigate adverse outcomes should be investigated.

Naughton, C. M., O'Donnell, A. T., & Muldoon, O. T. (2020). Exposure to domestic violence and abuse: Evidence of distinct physical and psychological dimensions. *Journal of Interpersonal Violence*, 35(15-16), 3102-3123. <https://doi.org/10.1177/0886260517706763>

Recent literature on exposure to domestic violence (DV) highlights the need for increased understanding of the dynamics of domestic violence and abuse (DVA). The current aims were to explore whether two separate dimensions, physical and psychological DVA, were evident in adult children's reports of their exposure to DVA in their family of origin, and whether these dimensions affected psychological well-being and perceived satisfaction with emotional support (hereafter referred to as social support satisfaction). Young adults (N = 465, aged 17-25, 70% female) reported their experiences of DVA as perpetrated by their parents/caregivers, as well as psychological well-being and social support satisfaction, in an online survey. Using confirmatory factor analysis (CFA), we verified the presence of a two-factor model (physical and psychological DVA). Hierarchical linear regression analysis demonstrated the differing impact of these two factors: Specifically, although exposure to psychological DVA (domestic abuse [DA]) was related to reduced psychological well-being, there was no significant effect of exposure to physical DVA

(DV). However, mediation analysis suggested the presence of a suppression effect; there was a magnification of the negative relationship between exposure to psychological DA and social support satisfaction when exposure to physical DV was accounted for. Although findings are preliminary, they provide strong evidence to support theoretical arguments regarding the need for future research to conceptualize exposure to DVA in terms of both physical and psychological dimensions. Our findings also highlight that to improve service response and provide effective interventions, it is essential to include exposure to psychological DA in risk assessments of such young adults.

Noonan, C. B., & Pilkington, P. D. (2020). Intimate partner violence and child attachment: A systematic review and meta-analysis. *Child Abuse & Neglect, 109*.
<https://doi.org/10.1016/j.chiabu.2020.104765>

Intimate Partner Violence (IPV) is associated with increased risk of impairment to a child's emotional, behavioural, and psychological functioning. Further, the presence of IPV is negatively associated with a child's attachment to their primary caregivers, which is an additional risk factor for social, emotional, and psychological impairment. The aim of this systematic review and meta-analysis was to synthesise the evidence on the association between IPV and the attachment of infants, children, and adolescents to their primary caregiver/s. A systematic review was completed, in accordance with the PRISMA statement, on IPV and the parent-child attachment of infants, children, and adolescents (18 years and younger). Meta-analyses were conducted to estimate the magnitude of these associations. A total of 15 studies were included. IPV was significantly associated with less secure child attachment. The pooled effect sizes (Pearson's r) for both longitudinal studies ($n = 5$) and cross-sectional and retrospective studies combined ($n = 10$) were small ($r = -.22$, 95 % CI $[-.32, -.12]$, $p < .001$; $r = -.10$, 95 % CI $[-.203, -.001]$, $p = .048$). Subgroup analyses identified that the effect size was larger when IPV and attachment were measured during infancy compared to childhood, and when attachment was measured via observational methods compared to self-report. While the current literature base is limited, findings can inform further research alongside clinical assessment and intervention. It can also help guide attachment- and family-based intervention for families impacted by IPV.

Orr, C., Fisher, C. M., Preen, D. B., Glauert, R. A., & O'Donnell, M. (2020). [Exposure to family and domestic violence is associated with increased childhood hospitalisations](https://doi.org/10.1371/journal.pone.0237251). *PLoS One*, *15*(8), e0237251. <https://doi.org/10.1371/journal.pone.0237251>

Children's exposure to family and domestic violence (FDV) is a global public health concern and is considered one of the most common and severe stressors children can experience. While it is acknowledged that children who are exposed to FDV have poorer general health, there is a lack of data on the outcomes of children exposed to FDV. The use of longitudinal data has been suggested as a way to gain an understanding of the impact on children's long-term outcomes. Our cohort study used deidentified individual-level linked administrative data of children born 1987–2010, in Western Australia, who were exposed to FDV in the prenatal period (12 months prior to birth) to five years of age (early years). Children exposed to FDV are more likely to be hospitalised than non-exposed children. Children exposed to FDV in both the prenatal and early childhood period had a threefold increased odds of mental health hospitalisation. We found a significant increase in odds of pregnancy-related hospitalisation in FDV exposed children. When stratified by Aboriginal status, Aboriginal children had a higher proportion of hospitalisations than non-Aboriginal children. Exposed children have an increased likelihood for hospitalisation than non-exposed children. Within the exposed cohort differences were apparent between Aboriginal and non-Aboriginal children. Aboriginal children had greater odds for hospitalisation in most of the diagnostic groups compared to their non-Aboriginal counterparts. Our findings represent an important advance in the literature with respect to the burden of disease of children exposed to FDV.

Pang, L. H. G., & Thomas, S. J. (2020). Exposure to domestic violence during adolescence: Coping strategies and attachment styles as early moderators and their relationship to functioning during adulthood. *Journal of Child & Adolescent Trauma*, *13*(2), 185-198. <https://doi.org/10.1007/s40653-019-00279-9>

The present study aimed to investigate the impact of exposure to domestic violence during adolescence on an individual's psychological health, ability to regulate emotions, and sense of satisfaction with life, during adulthood. Additionally, it aimed to investigate the long-term role of different coping strategies and attachment with primary caregiver, during adolescence, as potential moderators in the relationship between severity of domestic violence exposure during adolescence and an individual's functioning during adulthood. A total of 218 adult participants completed

measures regarding exposure to domestic violence, engagement in coping strategies, and attachment with primary caregiver, during adolescence, and psychological health, ability to regulate emotions, and sense of satisfaction with life, during adulthood. Ninety-two participants reported domestic violence exposure during adolescence. Two-way analyses of variance indicated that participants who were exposed to domestic violence during adolescence were more likely to report negative functioning during adulthood. Correlational analysis indicated that severity of domestic violence exposure during adolescence was positively correlated with engagement in avoidance-focused coping strategies and insecure attachment, during adolescence, and negative functioning during adulthood. Moderation analyses indicated that engagement in avoidance-focused coping strategies and insecure attachment with primary caregiver, during adolescence, moderated the relationship between severity of domestic violence exposure during adolescence and functioning during adulthood, but only in low-moderate severity of exposure to domestic violence. These findings confirm the long-term impact of domestic violence exposure during adolescence on an individual's functioning during adulthood, and provide new information that certain coping strategies and attachment with primary caregiver during adolescence may buffer against the impact.

Ravi, K. E., & Black, B. M. (2020). The relationship between children's exposure to intimate partner violence and an emotional-behavioral disability: A scoping review. *Trauma, Violence, & Abuse*. <https://doi.org/10.1177/1524838020979846>

Children's exposure to intimate partner violence (IPV) is an adverse childhood experience that often results in academic, behavior, and mental health difficulties. This study reviewed the empirical studies examining the relationship between children's exposure to IPV and an emotional-behavioral disability (EBD). Studies were included in the review if they examined the relationship between exposure to IPV and EBD among children under 18. This research identified three empirical studies that analyzed the relationship between exposure to IPV and EBD. The review demonstrated that few studies had been conducted that explored the relationship between children's exposure to IPV and EBD and that most of the extant studies are dated. Findings from this review showed that children exposed to IPV were more likely to have EBD compared to other disabilities such as a learning disability, hearing disability, speech and language disability, and an intellectual disability. Higher frequency of violence exposure was associated with EBD. Practice

implications include assessing children's functioning at school and discussing with families or caregivers the option of requesting an evaluation for EBD for children with severe emotional or behavioral difficulties. Special education evaluators assessing children for EBD should consider screening for children's exposure to IPV and providing resources for IPV. Future research should conceptualize the full range of IPV experiences and collect exposure data from children directly using a validated measure.

Rizo, C. F., Kim, I., Dababnah, S., & Garbarino, N. (2020). The intersection of intellectual and developmental disabilities with child exposure to intimate partner violence: Implications for research and practice. *Journal of Family Violence*, 35, 899-909.
<https://doi.org/10.1007/s10896-020-00138-4>

Each year, millions of children in the United States are exposed to intimate partner violence. Although the body of research on these children and factors that enhance their resiliency is growing, little is known about children with intellectual and developmental disabilities who have also been exposed to intimate partner violence. This knowledge gap is notable given the prevalence of intellectual and development disabilities among children, as well as the numerous challenges facing these children and their families (e.g., medical and behavioral challenges, parenting stress, and financial burden). Informed by prior research and our practice experience, this commentary highlights information for service providers working with families experiencing both intimate partner violence and intellectual and developmental disabilities. In addition to providing an overview of children's exposure to intimate partner violence and an overview of intellectual and developmental disabilities, the commentary summarizes the limited research exploring the intersection between these two issues and offers recommendations for enhancing research and practice. Recommendations center on the importance of training, wrap-around and tailored services, community partnerships, and intervention research focused on survivors and their children with intellectual and developmental disabilities.

Sharp, C., Vanwoerden, S., Jouriles, E. N., Godfrey, D. A., Babcock, J., McLaren, V., ... & Temple, J. R. (2020). Exposure to interparental intimate partner violence and the development of borderline features in adolescents. *Child Abuse & Neglect, 103*. <https://doi.org/10.1016/j.chiabu.2020.104448>

Due to associated trauma, exposure to intimate partner violence (IPV) is considered a form of child maltreatment, and is associated with heightened risk for mental health problems. The objective of this study was to evaluate associations between exposure to interparental IPV and the prospective development of borderline features in adolescents. A diverse sample of 1,042 adolescents were recruited from public high schools throughout southeastern United States and followed annually for 5 years. Baseline mean age was 15.09 (SD = .79; range 13–18), and 56 % of the sample was female; 31.4 % (n = 327) were Hispanic, 29.4 % (n = 306) were White/not Hispanic, 27.9 % (n = 291) were African American, 3.6 % (n = 38) were Asian or Pacific Islander, and 7.7 % (n = 80) were mixed or another race. Exposure to interparental IPV and the quality of the parent-child relationship were assessed at baseline. Borderline features were assessed annually for the each of the five follow-up timepoints. Latent growth curve modeling was used to estimate the course of change of BPD features over time. Consistent with expectations, and controlling for quality of parent-child relationships and sociodemographic confounds, findings demonstrated that IPV exposure related to both cross-sectional association between interparental IPV and adolescents' borderline features and change in borderline features over a 5-year period. Adolescents who had witnessed interparental IPV were more likely to have higher levels of BPD features at baseline and to deviate from the typically observed normative decline in BPD features over the 4-year follow-up period.

Supol, M., Satyen, L., Ghayour-Minaie, M., & Toumbourou, J. W. (2020). Effects of family violence exposure on adolescent academic achievement: A systematic review. *Trauma, Violence, & Abuse*. <https://doi.org/10.1177/1524838019899486>

Millions of children are exposed to family violence around the world; however, the effects on adolescent academic achievement are poorly understood. Using a systematic search and review methodology, we synthesized studies that quantitatively examined the effects of exposure to family violence on academic achievement among adolescents. We searched for peer-reviewed, English-language articles in nine online databases. Thirteen studies that examined adolescents were included, where family violence exposure was the independent variable and academic achievement

was the dependent variable. Of those, nine studies identified significant, direct, and negative effects of family violence exposure on adolescent academic achievement, and a further two identified significant, indirect, and negative effects. We found reasonable evidence showing that adolescents' academic achievement is negatively affected by exposure to family violence. Our review findings indicate the importance of implementing prevention strategies to reduce children's exposure to family violence, and intervention for those who have been exposed to it. Future research should further examine the moderating and mediating mechanisms by which family violence exposure affects academic achievement.

Vaughan-Jensen, J., Smith, D. M., Blake, J. J., Keith, V. M., & Willson, V. K. (2020). Breaking the cycle of child maltreatment and intimate partner violence: The effects of student gender and caring relationships with teachers. *Journal of Aggression, Maltreatment & Trauma*, 29(2), 223-241. <https://doi.org/10.1080/10926771.2018.1522407>

The prevalence of child maltreatment and its association with future violence makes identifying ways to intervene with victims and prevent subsequent violence increasingly important. Child maltreatment is any form of child abuse or child neglect resulting in actual or potential harm to a child's health, survival, development or dignity. Self-reported data from the National Longitudinal Study of Adolescent Health were used to further understanding of a commonly described cycle of interpersonal violence where the experience of childhood maltreatment predicts victimization and perpetration of youth violence in adolescence and intimate partner violence in adulthood. Using a nationally representative sample, we examine how both gender and the experience of caring relationships with teachers could affect the cycle. Physical abuse was associated with youth violence victimization and perpetration, and neglect was associated with youth violence victimization. Youth violence victimization was related to IPV perpetration and victimization. For males, youth violence perpetration was associated with only IPV victimization, while for females, youth violence perpetration was associated with IPV perpetration and victimization. For males with low perceptions of having a caring teacher, youth violence victimization and perpetration were strongly correlated. Implications are discussed.

Arai, L., Heawood, A., Feder, G., Howarth, E., MacMillan, H., Moore, T. H., ... & Gregory, A. (2019). [Hope, agency, and the lived experience of violence: A qualitative systematic review of children's perspectives on domestic violence and abuse](https://doi.org/10.1177/1524838019849582). *Trauma, Violence, & Abuse*. <https://doi.org/10.1177/1524838019849582>

There is a large body of research on the impact of domestic violence and abuse (DVA) on children, mostly reporting survey data and focusing largely on psychological outcomes. Qualitative research on the views of children has the potential to enable a child-centered understanding of their experience of DVA, so their needs can be better met by professionals. This systematic review reports general findings from the ViOlence: Impact on Children Evidence Synthesis (VOICES) project that synthesized published qualitative research on the experiences of DVA from the perspective of children and young people. A thematic synthesis of 33 reports identified six themes: lived experience of DVA, children's agency and coping, turning points and transitions, managing relationships postseparation, impact of DVA on children, and children's expressions of hope for the future. We conclude that professionals working with children affected by DVA should be mindful of the diversity in children's experiences and listen carefully to children's own accounts.

Fogarty, A., Woolhouse, H., Giallo, R., Wood, C., Kaufman, J., & Brown, S. (2019). Promoting resilience and wellbeing in children exposed to intimate partner violence: A qualitative study with mothers. *Child Abuse & Neglect*, 95. <https://doi.org/10.1016/j.chiabu.2019.104039>

Children exposed to intimate partner violence (IPV) are at increased risk of disruptions to their health and development. Few studies have explored mothers' perceptions of what helps their children cope throughout this experience. The aim of the study was to explore mothers' perceptions of their children's resilience and coping following IPV exposure, and the strategies they have used to support their children and promote resilience. In depth semi-structured interviews were conducted with nine women from the Maternal Health Study (MHS), a prospective study of women during pregnancy and following the birth of their first child. All women involved in the qualitative interviews reported experiencing IPV during their involvement in the MHS. Transcribed interviews were analysed using interpretative phenomenological analysis which has a focus on how individuals make meaning of their experience. Women discussed parenting strategies such as role modelling, stable and consistent parenting, and talking with their children about healthy relationships to promote their children's resilience. Mothers also spoke about the ways

they tried to reduce their child’s direct exposure to IPV, as well as reflecting on the difficulty of attending to their child emotionally when they were experiencing distress. This study highlights that there are many strategies used by mothers who experience IPV to promote resilience and wellbeing in their children. Understanding what mothers see as useful for their children is essential in providing appropriate services to families following experiences of family violence.

Forke, C. M., Catalozzi, M., Localio, A. R., Grisso, J. A., Wiebe, D. J., & Fein, J. A. (2019). [Intergenerational effects of witnessing domestic violence: Health of the witnesses and their children](https://doi.org/10.1016/j.pmedr.2019.100942). *Preventive Medicine Reports*, 15. <https://doi.org/10.1016/j.pmedr.2019.100942>

Studies that explore intergenerational effects of witnessing domestic violence during childhood (“witnessing”) are lacking. We examined effects of witnessing on general health status for adults who witnessed domestic violence during childhood and their children. Cross-sectional data from population-based phone interviews conducted in Philadelphia during 2012–2013 provided health information for 329 parents and children, and parent's witnessing exposure. We used propensity scores to predict parent's witnessing status using childhood confounders; response models included inverse probability of treatment weighting and population weights for standardization. Separate standardized multivariate logistic regression models provided average treatment effects and 95% CIs for associations between childhood witnessing and below average health for: 1) adults who witnessed and 2) their children. Sensitivity analyses guided interpretation. Standardized models showed no differences in average treatment effects for below average adult health for witnesses vs. non-witnesses [0.04 (–0.12, 0.19)]. Conversely, children whose parents witnessed had considerably higher probability of having below average health than children whose parents did not witness [0.15 (0.02, 0.28)]. An unmeasured confounder would need 3.0-fold associations with both exposure and outcome to completely remove observed effects, indicating a moderate relationship. However, the lower confidence bound could cross 1.0 in the presence of a weaker unmeasured confounder having 1.2-fold associations with both exposure and outcome, while controlling for our same measured confounders. Witnessing during childhood did not affect adult health in our population, but we found moderate evidence supporting harmful intergenerational effects of witnessing on health, with parent's witnessing exposure affecting their child's health.

Hawkins, R. D., McDonald, S. E., O'Connor, K., Matijczak, A., Ascione, F. R., & Williams, J. H. (2019). Exposure to intimate partner violence and internalizing symptoms: The moderating effects of positive relationships with pets and animal cruelty exposure. *Child Abuse & Neglect*, 98. <https://doi.org/10.1016/j.chiabu.2019.104166>

It is estimated that more than half of children living in households where intimate partner violence (IPV) occurs are also exposed to animal cruelty (AC). Although prior research links bonds with pets with higher levels of socioemotional competence among school-age children, exposure to AC may negate the protective effects of pet ownership and/or exacerbate the potentially deleterious effect of IPV on children's mental health. The current study evaluates whether and to what extent the associations between exposure to IPV and several indicators of children's mental health vary as a function of children's positive engagement with pets and exposure to AC. Participants included 204 children (aged 7–12 years; 47% female; 57% Latinx) and their maternal caregiver who were recruited from domestic violence agencies in a western U.S. state. Multiple moderation analysis evaluated whether the association between children's exposure to IPV and internalizing and posttraumatic stress symptoms vary as a function of children's positive engagement with pets and exposure to AC. Analyses revealed several moderation effects for positive engagement with pets (e.g., internalizing problems: [$b = -.15$, $t(195) = -2.66$, $p = .008$]; posttraumatic stress symptoms: [$b = -.13$, $t(195) = -2.24$, $p = .026$]), whereas exposure to AC only moderated the association between IPV and anxious/depressed symptoms ($b = .32$, $t(195) = -2.41$, $p = .017$). These findings highlight the potential protective effects of positive engagement with pets and importance of screening for exposure to AC when engaging in trauma-informed work with children exposed to IPV.

Meijer, L., Finkenauer, C., Tierolf, B., Lünemann, M., & Steketee, M. (2019). [Trajectories of traumatic stress reactions in children exposed to intimate partner violence](https://doi.org/10.1016/j.chiabu.2019.04.017). *Child Abuse & Neglect*, 93, 170-181. <https://doi.org/10.1016/j.chiabu.2019.04.017>

Understanding different longitudinal patterns of traumatic stress reactions in children exposed to intimate partner violence (IPV) can promote early identification of at-risk children. Our study aims to explore trajectories of traumatic stress reactions following childhood IPV exposure, and their relation with parental traumatic stress and child emotional security in the interparental subsystem. The sample comprised 303 children (age 3–10, $M = 6.20$) from families referred to institutions for IPV. Data were collected at home. Three waves of parent-reported questionnaire data were

analyzed using latent class growth analysis and linear regression. Five trajectories were identified: ‘resilient’, ‘moderate stable’, ‘struggling’, ‘improving’, and ‘elevated adjusting’. Only the ‘struggling’ trajectory had dysfunctional symptom levels at the final wave. Higher parental traumatic stress predicted ‘improving’ trajectory membership ($\beta = 0.17, p = .033$), whereas lower parental traumatic stress ($\beta = -0.20, p = .003$) and child emotional insecurity ($\beta = -0.45, p < .001$) predicted ‘resilient’ trajectory membership. Higher child emotional insecurity predicted membership in trajectories with higher initial traumatic stress (improving: $\beta = 0.26, p < .001$; struggling: $\beta = 0.31, p < .001$; elevated adjusting: $\beta = 0.27, p < .001$). Child emotional security did not buffer the effect of parental traumatic stress on likelihood of dysfunctional trajectory membership ($\beta = 0.04, p = .380$). Children exposed to IPV show different trajectories of traumatic stress reactions, partly corresponding to trajectories identified in other populations. Child emotional security and parental traumatic stress predict trajectory membership.

Paul, O. (2019). Perceptions of family relationships and post-traumatic stress symptoms of children exposed to domestic violence. *Journal of Family Violence, 34*(4), 331-343. <https://doi.org/10.1007/s10896-018-00033-z>

This study examines the association between exposure to domestic violence, children’s perceptions of family relationships, and symptoms of post-traumatic stress disorder, and explores the moderating role of children’s perceptions of family relationships. The sample consists of 46 children exposed to domestic violence (26 girls and 20 boys), aged 6 to 12 years, staying at housing shelters for victims of domestic violence. Children completed several questionnaires and the SAGA, a systemic tool, enabling us to examine their perceptions and family relationships. The results indicate that exposure to domestic violence is related to symptoms of anxiety and depression and to the child’s perception of father-mother and father-child relationships in both conflictual and typical situations. Perceptions of father-mother and father-child relationships in typical situations are both associated with anxiety and post-traumatic stress symptoms. In contrast, the mother-child relationship was found to have a moderating role on the relation between the duration of domestic violence exposure and the symptom of anger. This study attests to the value of continuing research on the role of the child’s perception of family relationships, but above all to better regulate the visiting and accommodation rights of fathers who perpetrate domestic violence in order to protect children, especially when they show symptoms of post-traumatic stress.

Etherington, N., & Baker, L. (2018). From “buzzword” to best practice: Applying intersectionality to children exposed to intimate partner violence. *Trauma, Violence, & Abuse, 19*(1), 58-75.

Empirical studies on the impact of intimate partner violence (IPV) on children have burgeoned over the last three decades. Notably absent from existing approaches to studying children exposed to IPV, however, is attention to how various positionalities intersect to impact the experiences of children and their families. In fact, while the importance of an intersectional framework for understanding IPV has been discussed for over two decades, little or no attention has been given to issues of children’s exposure to IPV. In this article, we examine the current state of the literature on children exposed to IPV through an exploratory meta-analysis, finding limited application of intersectionality and a focus on discrete categories of difference. We then demonstrate why and how an intersectional framework should be applied to children exposed to IPV, with specific strategies for research and policy. We suggest a child-centered approach that recognizes diversity among children exposed to IPV, extending the challenge to traditional “one-size-fits-all” models to include an intersectionality-informed stance.

Forke, C. M., Myers, R. K., Fein, J. A., Catalozzi, M., Localio, A. R., Wiebe, D. J., & Grisso, J. A. (2018). Witnessing intimate partner violence as a child: How boys and girls model their parents’ behaviors in adolescence. *Child Abuse & Neglect, 84*, 241-252.

Childhood witnesses of adult violence at home are at risk for future violence. It is unclear how gender of the child and adult perpetrator are related to adolescent relationship violence. We explore how childhood witnessing of same-gender, opposite-gender, and bidirectional violence perpetrated by adults is associated with adolescent relationship violence victimization only, perpetration only, and combined victimization/perpetration for male and female undergraduates. We gathered cross-sectional data from 907 undergraduates attending 67 randomly selected classes at three distinct East-Coast colleges using pencil-and-paper surveys administered at the end of class time. Multiple imputation with chained equations was used to impute missing data. Multinomial regression models controlling for gender, age, race, school, and community violence predicted adolescent outcomes for each witnessing exposure; relative risk ratios and average adjusted probabilities with 95% confidence intervals are presented. Adolescent relationship violence outcomes vary based on gender of the child witness and adult perpetrator. Witnessing adult males perpetrate is associated

with higher perpetration for boys and higher combined victimization/perpetration for girls. Witnessing adult females perpetrate – either as the sole perpetrator or in a mutually violent relationship with an adult male – increases risk for combined victimization/perpetration for boys and girls during adolescence.

Greene, C. A., Chan, G., McCarthy, K. J., Wakschlag, L. S., & Briggs-Gowan, M. J. (2018). Psychological and physical intimate partner violence and young children's mental health: The role of maternal posttraumatic stress symptoms and parenting behaviors. *Child Abuse & Neglect*, 77, 168-179.

Young children are at significant risk of exposure to intimate partner violence (IPV), and vulnerable to exposure-related psychopathology, yet few studies investigate the effects of exposure to IPV on children under the age of 5 years. The current study investigated the role of maternal PTSD symptoms and parenting strategies in the relationship between mothers' IPV experiences and psychopathology in their young children, ages 3–6 years in a community-based cohort of 308 mother-child dyads at high risk for family violence. Data were collected from 2011 to 2014. IPV history and maternal PTSD symptoms were assessed by self-report questionnaires. Children's symptoms were assessed with a developmentally-sensitive psychiatric interview administered to mothers. Punitive/restrictive parenting was independently-coded from in-depth interviews with mothers about their disciplinary practices. Hypothesized direct and indirect pathways between physical and psychological IPV, maternal PTSD, maternal parenting style, and children's internalizing and externalizing symptoms were examined with mediation models. Results indicated that neither physical nor psychological IPV experienced by mothers was directly associated with children's symptoms. However, both types of victimization were associated with maternal PTSD symptoms. Examination of indirect pathways suggested that maternal PTSD symptoms mediated the relationship between mothers' psychological and physical IPV experiences and children's internalizing and externalizing symptoms and mothers' restrictive/punitive parenting mediated the relationship between mothers' psychological IPV and children's externalizing symptoms. In addition, there was a path from maternal physical IPV to child externalizing symptoms through both maternal PTSD symptoms and restrictive/punitive parenting. Findings highlight the importance of supporting parents in recovering from the sequelae of their own traumatic experiences, as their ensuing mental health symptoms and parenting behaviors may have a significant impact on their children's emotional health.

Henry, C. (2018). Exposure to domestic violence as abuse and neglect: Constructions of child maltreatment in daily practice. *Child Abuse & Neglect*, 86, 79-88.
<https://doi.org/10.1016/j.chiabu.2018.08.018>

Research finds that exposure to domestic violence can adversely affect the emotional, behavioral, and physical health of children. These effects have led some child advocates and policymakers in the United States to conclude that child exposure to domestic violence (CEDV) is a type of child maltreatment warranting state intervention. However, few states have defined CEDV as a type of maltreatment in statute and little is known about how child welfare agencies respond to allegations of CEDV in the absence of other safety threats. This study considers that CEDV itself might prompt an initial child welfare referral and may be construed by workers as a type of statutory maltreatment. Using a random sample (n = 295) of case records, this study analyzed one large child welfare agency's response to referrals alleging CEDV between 2011 and 2012. Findings indicate that CEDV itself did trigger investigation. At time of referral, workers used statutory maltreatment typologies to construe alleged CEDV as a type of maltreatment; however, CEDV was not consistently construed as a safety threat and few allegations were substantiated. Instead, most families were referred to community-based domestic violence services. Findings indicate that CEDV was not consistently construed as a type of statutory maltreatment and infrequently resulted in ongoing child welfare services. Findings suggest that training is needed to help workers better assess CEDV-related safety threats. Findings also raise questions about what types of interventions are needed to protect children from domestic violence and which types of agencies are best positioned to deliver those interventions.

Jouriles, E. N., Rosenfield, D., McDonald, R., Vu, N. L., Rancher, C., & Mueller, V. (2018). Children exposed to intimate partner violence: Conduct problems, interventions, and partner contact with the child. *Journal of Clinical Child & Adolescent Psychology*, 47(3), 397-409.

Children's contact with their mother's violent partner is a potentially important variable for understanding conduct problems among children exposed to intimate partner violence (IPV). Within the context of a treatment study evaluating a parenting intervention (Project Support) for families exiting a domestic violence shelter, this study tested four hypotheses regarding children's postshelter contact with their mother's violent partner: (1) participation in Project Support decreases the frequency of children's contact with their mother's violent partner; (2) postshelter

contact is positively associated with children's conduct problems and is associated more strongly for girls than boys; (3) frequency of contact mediates Project Support's effects on children's conduct problems; and (4) frequency of contact is positively associated with IPV and partner-child aggression, and these latter associations help explain effects of contact on children's conduct problems. Participants were 66 women (26 White) with a child (32 girls) between 4 and 9 years. Families were assessed every 4 months for 20 months after departure from a domestic violence shelter. Project Support reduced the extent of partner-child contact. In addition, within-subject changes in contact over time were associated with girls', but not boys', conduct problems, and it partially mediated effects of Project Support on girls' conduct problems. Higher average levels of contact over time were also positively associated with further incidents of IPV and partner-child aggression, and partner-child aggression helped explain effects of contact on children's conduct problems. Children's postshelter contact with the mother's violent partner relates positively to several negative family outcomes.

Neamah, H. H., Sudfeld, C., McCoy, D. C., Fink, G., Fawzi, W. W., Masanja, H., ... & Fawzi, M. C. S. (2018). Intimate partner violence, depression, and child growth and development. *Pediatrics*, e20173457.

Evidence on the relationship between maternal depression and exposure to intimate partner violence (IPV) with child physical growth and development is equivocal. Our aim in the current study is to examine these relationships among women and their children in Tanzania. The Bayley Scales of Infant Development and anthropometric measures were used to assess children 18 to 36 months of age ($n = 1031$). Maternal exposure to IPV and depression were assessed using the Tanzania Demographic and Health Survey questionnaire and the Patient Health Questionnaire-9, respectively. We used linear regression models to calculate standardized mean differences (SMDs) for developmental outcomes and generalized linear models to estimate the associations with nutritional status. Mild depressive symptoms in mothers (Patient Health Questionnaire-9 ≥ 5) and exposure to physical and sexual IPV were associated with lower SMDs for motor skills (-0.14 [$P = .023$] and -0.23 [$P < .01$], respectively), expressive communication (-0.13 [$P = .187$] and -0.23 [$P < .01$], respectively), receptive communication (-0.19 [$P < .009$] and -0.16 [$P = .03$], respectively), and cognitive development (-0.08 [$P = .245$] and -0.12 [$P = .07$], respectively). Exposure to physical and sexual IPV was associated with higher risk for stunting (relative risk =

1.6; $P < .001$). This study reveals that maternal depressive symptoms and IPV are associated with adverse child nutritional and developmental outcomes. Further research is needed to develop programs to address IPV and depression among women and enhance the growth and development of their children.

Ragavan, M. I., Fikre, T., Millner, U., & Bair-Merritt, M. (2018). The impact of domestic violence exposure on South Asian children in the United States: Perspectives of domestic violence agency staff. *Child Abuse & Neglect*, 76, 250-260.

The South Asian community is the fastest growing ethnic group in the United States, and past research suggests that South Asian domestic violence (DV) survivors may require culturally-specific resources. Similarly, South Asian children in the US exposed to DV may have unique responses and needs, but this has not been explored to date. The objective of this study was to examine the specific needs of South Asian children exposed to DV from the vantage point of staff from South Asian DV agencies across the United States. Thirty interviews were conducted, with data coded and consolidated into larger themes using thematic analysis. Participants described several factors important to understanding the impact of DV on South Asian children including the role of the extended family, identifying with two cultures, fear about what the South Asian community will think, gender differences, and the importance of projecting an image of perfection. Participants also discussed development of culturally-tailored resources. This study suggests the importance of framing South Asian children's experiences within the context of interweaving South Asian and American cultural values, with careful attention paid to how potential culture clashes between parents and children may impact the way children process trauma. Further work should triangulate these themes with children, parents, and extended family, as well as collaborate with South Asian DV agencies to design child-focused programs.

Thomas, K. A., Mederos, F., & Rodriguez, G. (2018). 'It shakes you for the rest of your life': Low-income fathers' understanding of domestic violence and its impact on children. *Psychology of Violence*, 9(5), 564.

Responsible fatherhood groups (RFGs) are evidence-informed parenting interventions for low-income, system-involved fathers that provide education and support (Bronte-Tinkew et al., 2007; Children's Bureau, 2010; Wakabayashi, Guskin, & Watson, 2011). Although some RFGs include domestic violence (DV) education, it is not often a substantial focus (Bronte-Tinkew et al., 2007;

Dion, Zaveri, & Holcomb, 2015; Roulet, 2003). Instead, in-depth DV content and discussions are reserved for the subset of fatherhood groups that serve men with substantiated DV perpetration (Pennell, Rikard, & Sanders-Rice, 2014). This is a missed opportunity for DV prevention, as RFGs have immense potential for engaging low-income fathers as allies and mentors. First, RFGs cultivate atmospheres of safety, honest dialogue, self-growth, and connection, making them one of the few spaces where low-income men feel comfortable discussing sensitive topics (Anderson, Kohler, & Letiecq, 2002; Holcomb et al., 2015; Wakabayashi et al., 2011). Second, research demonstrates that childhood exposure to DV is prevalent among RFG participants (Holcomb et al., 2015) and that these experiences can serve as an important catalyst for engagement in antiviolence work (Casey, Tolman, Carlson, Allen, & Storer, 2017). The purpose of this study was to explore RFG participants' thoughts on DV, what constitutes DV, and the impact it has on children. In doing so, this study is an important step toward understanding how programs for these men can incorporate DV content in a way that accurately reflects their educational needs and life experiences.

Boeckel, M. G., Wagner, A., & Grassi-Oliveira, R. (2017). The effects of intimate partner violence exposure on the maternal bond and PTSD symptoms of children. *Journal of Interpersonal Violence, 32*(7), 1127-1142.

The quality of the maternal bond can be disrupted in women exposed to intimate partner violence (IPV), causing them to be less available to their children. The aim of this study was to examine difficulties in emotional regulation in women exposed to IPV and the impact of IPV on both the maternal bond and posttraumatic symptoms among children. A cross-sectional study was carried out with two groups: IPV dyads ($n = 36$) comprising mothers who had been exposed to IPV and their children, and control dyads ($n = 27$) comprising non-abused mothers and their children. Information was obtained via structured interviews including scales regarding IPV, posttraumatic stress disorder (PTSD) symptoms, maternal bond, and difficulties in emotional regulation. Correlation analyses showed a positive association between the severity of IPV, PTSD symptom severity in children, and difficulties of emotional regulation in mothers. They also showed a negative association between IPV and the quality of the maternal bond. Regression models demonstrated that exposure to sexual IPV, maternal difficulties in emotion regulation, and younger age of the mother are important predictors of lower quality of the maternal bond. Difficulties in

emotional regulation and sexual IPV disrupted the quality of the maternal bond among women and their children. In addition, lower quality of maternal bond was associated with higher PTSD symptoms among children.

Clark, H., & Graham-Bermann, S. A. (2017). The impact of intimate partner violence on children. In P. Dolan & N. Frost (Eds.), *The Routledge Handbook of Global Child Welfare* (p. 199-210). New York: Routledge.

Dargis, M., & Koenigs, M. (2017). [Witnessing domestic violence during childhood is associated with psychopathic traits in adult male criminal offenders.](#) *Law and Human Behavior*, *41*(2), 173.

While there is growing evidence that suffering physical abuse during childhood is subsequently associated with psychopathic traits in both juvenile and adult offenders, there is considerably less research on whether exposure to domestic violence as a witness, rather than as a direct victim, influences the subsequent presentation of psychopathic traits in adulthood. Accordingly, the current study examined the relationship between witnessing domestic violence during childhood (i.e., witnessing, hearing, or intervening in abuse against a parent/sibling) and psychopathic traits in adulthood in a sample of $n = 127$ incarcerated male offenders. As predicted, witnessing domestic violence was significantly associated with overall level of psychopathy, with a particularly strong relationship to the interpersonal/affective features of psychopathy. Importantly, this relationship held when controlling for the experience of domestic violence as a direct victim. These results add to the growing body of literature linking adverse and traumatic events during childhood with psychopathic traits later in life, and suggest that domestic violence exposure may be one factor contributing to the manipulative, interpersonal style exhibited by individuals high in psychopathy.

Folger, A. T., Putnam, K. T., Putnam, F. W., Peugh, J. L., Eismann, E. A., Sa, T., ... & Ammerman, R. T. (2017). Maternal interpersonal trauma and child social-emotional development: An intergenerational effect. *Paediatric and Perinatal Epidemiology*, *31*(2), 99-107.

Evidence suggests that maternal interpersonal trauma can adversely affect offspring health, but little is known about potential transmission pathways. We investigated whether interpersonal trauma exposure had direct and indirect associations with offspring social-emotional development

at 12-months of age in an at-risk, home visited population. Methods: A retrospective cohort study was conducted of 1172 mother-child dyads who participated in a multi-site, early childhood home visiting program. Children were born January 2007 to June 2010 and data were collected at enrolment (prenatal/birth) through 12-months of age. Multivariable path analyses were used to examine the relationship between maternal interpersonal trauma, subsequent psychosocial mediators (maternal depressive symptoms, social support, and home environment), and the outcome of child social-emotional development measured with the Ages and Stages Questionnaire: Social-Emotional (ASQ:SE). Maternal interpersonal trauma was characterized as any previous exposure, the level of exposure, and type (e.g. abuse) of exposure. Results: The prevalence of maternal interpersonal trauma exposure was 69.1%, and exposures ranged from 1 type (19.3%) to 7 types (2.3%). Interpersonal trauma was associated with a 3.6 point (95% confidence interval 1.8, 5.4) higher ASQ:SE score among offspring and indicated greater developmental risk. An estimated 23.4% of the total effect was mediated by increased maternal depressive symptoms and lower social support. Differential effects were observed by the level and type of interpersonal trauma exposure. Conclusion: Maternal interpersonal trauma exposures can negatively impact child social-emotional development, acting in part through maternal psychosocial factors. Future research is needed to further elucidate the mechanisms of intergenerational risk.

Fong, V. C., Hawes, D., & Allen, J. L. (2017). [A systematic review of risk and protective factors for externalizing problems in children exposed to intimate partner violence](#). *Trauma, Violence, & Abuse*, 20(2), 149-167.

Intimate partner violence (IPV) is a serious public health issue with innumerable costs to the victims, children, and families affected as well as society at large. The evidence is conclusive regarding a strong association between exposure to IPV and children's externalizing problems. Moving forward, the next step is to enhance our understanding of risk and protective factors associated with these outcomes in order to tailor treatments to meet the needs of both parents and children. The databases Medline, PubMed, and PsycINFO were searched combining variations of the keywords parent*, child*, mother, partner abuse, domestic abuse, spousal abuse, interpersonal violence, domestic violence or intimate partner violence. This search were combined with child externalizing behaviors specifically conduct*, oppositional defiant disorder, externaliz*, aggress*, hyperactivity, and ADHD. A total of 31 studies from all three databases were reviewed following

application of inclusion and exclusion criteria. The main findings were that child age and gender, callous-unemotional traits, cognitive appraisals, maternal mental health, and quality of parenting emerged as key mediating and moderating factors of the relationship between IPV exposure and child externalizing problems. These findings suggest that interventions provided to families exposed to IPV need to target both maternal and child risk factors in order to successfully reduce child externalizing problems.

Fusco, R. A. (2017). Socioemotional problems in children exposed to intimate partner violence: Mediating effects of attachment and family supports. *Journal of Interpersonal Violence, 32*(16), 2515-2532.

Given the high likelihood of women remaining with their partner when intimate partner violence (IPV) is present, it is important to work with existing family strengths and social supports to minimize emotional harm to the children of these couples. The current study involved interviews with mothers of young children in the child welfare system across a state in the northeast ($n = 336$). Roughly one third of these women reported IPV in the past year. The relationship between IPV and child socioemotional problems was explored, along with supports that might mediate this relationship. Study results showed that child exposure to IPV was directly related to socioemotional problems. This was mediated by three family and social factors: strength of mother-child attachment, overall family functioning, and level of mothers' emotional support. Findings revealed the heterogeneity among families with IPV and highlight the need for interventions focused on the ecological context in which women are parenting.

Graham-Bermann, S. A., Cater, Å. K., Miller-Graff, L. E., & Howell, K. H. (2017). Adults' explanations for intimate partner violence during childhood and associated effects. *Journal of Clinical Psychology, 73*(6), 652-668.

Exposure to intimate partner violence (IPV) is known to challenge children's optimal development. This study sought to associate participants' beliefs about IPV held during childhood with their adjustment as adults, and to compare their beliefs from childhood to their beliefs in early adulthood. A nationally representative sample of 703 Swedish young adults reported on their past and present beliefs about the causes of their parents' IPV. Standardized measures assessed their mental health (anxiety, depression, and traumatic stress symptoms) and the quality of their relationships as adults. The most common explanations for IPV were that the perpetrator suffered

from physical or mental illness, had relationship problems, or was distressed. Participants were less likely to blame themselves for IPV or to believe that the perpetrator was cruel when they were adults, compared to their reports of themselves as children. Women were more likely to attribute mental or physical illness as the cause of the perpetrator's IPV. Childhood beliefs that the perpetrator was debilitated (from mental illness or substance abuse) and cruel (took pleasure in violence and/or despised the child) were associated with greater mental health problems and poorer relationship quality in adulthood. Evaluation of children's harmful beliefs about IPV could be useful in adapting intervention services aimed at ameliorating negative personal causal attributions.

Holt, S. (2017). The impact of exposure to domestic abuse on children and young people. In P. Dolan & N. Frost (Eds.), *The Routledge Handbook of Global Child Welfare* (p. 211-224). New York: Routledge.

Icheku, V., & Graham, R. (2017). [What social impact does exposure to domestic violence have on adolescent males? A systemic review of literature.](#) *Journal of Healthcare Communications*, 2(1).

This systemic review focuses on the exposure of male adolescents to domestic violence and the impact of domestic violence on them. The review highlights that there were a number of disparate ways in which domestic violence impacted on adolescent males. This ranged from animal cruelty, drug taking, violence and aggression, through to feelings of depression, suicidal ideations, and feelings of sadness and ambivalence. However, the results suggest that while the exposure to domestic violence does indeed have an impact on adolescent males, there appears to be no agreement on any single way in which this impact may be experienced. However, we recommend that combating the scourge of domestic violence requires skilled practitioners to intervene at any given stage. As such, practice educators must ensure that staff under their remit are adequately equipped with the necessary knowledge and skills of detection, to impact on the root causes of domestic violence. This must include increasing awareness among staff of the knowledge of the latest legislation and policies. In addition, training should emphasise the need to maintain liaison with external agencies in developing pathways into services, and timely responses by stakeholder and associate institutions to adequately address this issue that is impacting negatively on male adolescents.

López-Soler, C., Alcántara-López, M., Castro, M., Sánchez-Meca, J., & Fernández, V. (2017). The association between maternal exposure to intimate partner violence and emotional and behavioral problems in Spanish children and adolescents. *Journal of Family Violence*, 32(2), 135-144.

This correlational cross-sectional study was designed to investigate whether the intimate partner violence (IPV) suffered by mothers (physical and psychological maltreatment), the neglect suffered by children, and the maltreatment (physical and psychological) directly suffered by children are statistically associated with an increase in the probability of the child's suffering psychopathological problems. The sample consisted of 189 Spanish children aged 6 to 17 and their mothers, recruited from Centers of Specialized Assistance for Women Victims of IPV. The results of a canonical correlation analysis showed that the most significant problems suffered by the children were both externalizing and internalizing ones. In girls, the maltreatment suffered by their mothers was directly related to a larger frequency of somatic complaints than in boys. In addition, physical maltreatment to the mother and emotional maltreatment suffered by the child exhibited a statistically significant relationship with aggressive behaviour, thought problems, rule-breaking behaviour, attention problems, and withdrawn-depressed.

Madruca, C. S., Viana, M. C., Abdalla, R. R., Caetano, R., & Laranjeira, R. (2017). Pathways from witnessing parental violence during childhood to involvement in intimate partner violence in adult life: The roles of depression and substance use. *Drug and Alcohol Review*, 36(1), 107-114.

The aims of this study were to determine the prevalence of witnessing parental violence (WPV) during childhood and of current intimate partner violence (IPV) victimisation and aggression in a Brazilian sample, in order to verify pathways between WPV and involvement in IPV as an adult. The mediating roles of substance use and depression were investigated. Data came from the Second Brazilian National Alcohol and Drugs Survey, a multi-cluster probabilistic household survey, which gathered information on the use of psychoactive substances, current depressive disorder, history of childhood direct and indirect exposure to domestic violence and IPV in a nationally representative sample. A subsample of 2120 individuals aged 14 years or older was analysed. Weighted prevalence rates, adjusted odds ratio and conditional path models were performed. Being a victim of IPV was reported by 6% of the sample. Thus being, 4.1% reported being IPV perpetrators; these rates were 16.6% and 7.3%, respectively, among those who reported

WPV (13%). WPV was associated with being a victim of IPV in adult life, but not with becoming a perpetrator, regardless of being a victim of physical violence during childhood. There was a direct effect of WPV on IPV mediated by depressive symptoms. Alcohol and cocaine consumption and age of drinking initiation mediated only when combined with depressive symptoms. Intergenerational transmission models of IPV through exposure during childhood can help to explain the high rates of domestic violence in Brazil. Our findings provide evidence to implement targeted prevention strategies where they are needed most: the victims of premature adverse experiences.

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.

Mukiba, S. L., & Johnson, E. J. (2017). How mothers perceive their own domestic violence victimization and how it impacts their children. *Journal of Child Custody, 14*(1), 34-48.

Children's exposure to domestic violence has been associated with various negative outcomes. This study explores the effects of children's exposure to domestic violence through the lenses of the primary victims of abuse. Specifically, the consequences associated with their children's exposure to domestic violence, the coping mechanisms employed, and identified preventative measures to address this social problem. Semistructured interviews were conducted to obtain the mother's perspective. Participants for this study were randomly obtained from the database of the Legal Aid and Advisory Authority. Findings revealed that children are used as a bargaining tool by both mothers (to prevent DV) and perpetrators (to exert control). The coping mechanisms that mothers believed their children used included listening to music, adopting care taking roles, and positioning themselves away from the violence.

van Heugten, K., & Wilson, E. (2017). Witnessing intimate partner violence: Review of the literature on coping in young persons. *Aotearoa New Zealand Social Work, 20*(3), 52-62.

Since the mid 1980s, there has been increasing concern about the impact that witnessing intimate partner violence (also commonly known as domestic violence or spouse abuse) has on children and young persons. In an article published in *Social Work Review* in 1994, Pamela Millen reviewed the international literature on children who witness such abuse and reported on strategies for intervening to ameliorate the negative consequences. This article updates her literature review, attending in particular to strengths-based and ecological perspectives that have emerged over the ensuing 15 years. Social work research and literature on dealing with trauma has come to increasingly emphasise resilience (the capacity to bounce back from adversity), protective factors (buffers against the effects of trauma) and coping (managing difficulties). This focus on resilience is also encouraging a closer look at the perspectives of survivors, including survivors of childhood abuse. In-depth qualitative research has been undertaken with children and young people in order to gain a better understanding of their perspectives and coping strategies for dealing with the challenges of living with intimate partner violence, including their use of resources in the environment. Meanwhile, quantitative research has looked at relationships between a wider array of variables, raising questions about previous simple 'cause and effect' conclusions about the

impact of intimate partner violence on children and young people. Research and literature that specifically address issues for young persons as differentiated from children remains scant.

Åkerlund, N., & Sandberg, L. J. (2016). Children and violence interactions: Exploring intimate partner violence and children's experiences of responses. *Child Abuse Review, 26*(1), 51-62.

While there is a growing research interest in the experiences of children exposed to intimate partner violence (IPV), the role of children's social networks, other than the role of mothers, has been little discussed. The aim of this article is to study older children's stories of how they, and the adults in their social networks, respond to IPV. More specifically, we are interested in how older children describe both their own responses when exposed to IPV and responses from adults. This article focuses on the narratives of older children since they are often in a liminal position between adulthood and childhood, which may be consequential for their and others' responses to violence. The article shows that responses are interactional and that children's responses affect how adults respond. Our analysis suggests that adults are positioning children as either adult-like and competent or vulnerable, and this impacts significantly on the support that they receive. In our data, there are, however, also examples of middle ways where children are positioned as vulnerable yet capable. This seems linked to children's abilities to communicate their own needs. Although the study sample is limited, our results point to the significance of gender for how children respond. Copyright © 2016 John Wiley & Sons, Ltd.

Howell, K. H., Barnes, S. E., Miller, L. E., & Graham-Bermann, S. A. (2016). [Developmental variations in the impact of intimate partner violence exposure during childhood](#). *Journal of Injury and Violence Research, 8*(1), 43-57.

Intimate partner violence (IPV) is a pervasive problem impacting individuals around the globe. The consequences of IPV extend beyond the adults in the relationship, as children witness a significant proportion of such violence. Exposure to IPV during childhood has devastating effects across multiple domains of functioning. This article reviews empirical studies of the effects of exposure to IPV by developmental stage. The psychological, social, physical, and cognitive consequences of witnessing IPV are examined across development; from the impact of prenatal exposure to effects in infancy and toddlerhood, the preschool years, school-aged children, and

adolescence. The review concludes by providing suggestions for future research based on the identified developmental variations, recommendations for developmentally-sensitive interventions for children who have witnessed IPV, and directions for policy to address the issue of violence exposure early in the lives of children.

Izaguirre, A., & Cater, Å. (2016). 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 from talking about it. The study confirms previous research indicating that talking about IPV experiences sometimes leads to feelings of relief in children. Thereby, professionals play an important role by providing an appropriate setting to help children reduce their distressing feelings.

McDonald, S. E., Shin, S., Corona, R., Maternick, A., Graham-Bermann, S. A., Ascione, F. R., & Williams, J. H. (2016). [Children exposed to intimate partner violence: Identifying differential effects of family environment on children's trauma and psychopathology symptoms through regression mixture models](#). *Child Abuse & Neglect*, 58, 1-11.

The majority of analytic approaches aimed at understanding the influence of environmental context on children's socioemotional adjustment assume comparable effects of contextual risk and protective factors for all children. Using self-reported data from 289 maternal caregiver-child dyads, we examined the degree to which there are differential effects of severity of intimate partner violence (IPV) exposure, yearly household income, and number of children in the family on posttraumatic stress symptoms (PTS) and psychopathology symptoms (i.e., internalizing and externalizing problems) among school-age children between the ages of 7–12 years. A regression mixture model identified three latent classes that were primarily distinguished by differential effects of IPV exposure severity on PTS and psychopathology symptoms: (1) asymptomatic with low sensitivity to environmental factors (66% of children), (2) maladjusted with moderate sensitivity (24%), and (3) highly maladjusted with high sensitivity (10%). Children with mothers who had higher levels of education were more likely to be in the maladjusted with moderate sensitivity group than the asymptomatic with low sensitivity group. Latino children were less likely to be in both maladjusted groups compared to the asymptomatic group. Overall, the findings suggest differential effects of family environmental factors on PTS and psychopathology symptoms among children exposed to IPV. Implications for research and practice are discussed.

Vu, N. L., Jouriles, E. N., McDonald, R., & Rosenfield, D. (2016). Children's exposure to intimate partner violence: A meta-analysis of longitudinal associations with child adjustment problems. *Clinical Psychology Review*, 46, 25-33.

This meta-analysis reviewed 74 studies that examined longitudinal associations between children's exposure to intimate partner violence (IPV) and their adjustment problems. Results indicated that children's exposure to IPV is linked prospectively with child externalizing, internalizing, and total adjustment problems. Moreover, the magnitude of the association between IPV exposure and child externalizing and internalizing problems strengthens over time. In addition, associations are stronger between IPV exposure and child externalizing and internalizing problems when IPV is conceptualized broadly rather than narrowly (physical IPV + psychological and/or sexual IPV versus physical IPV only), and when information on IPV and child adjustment problems is

obtained from the same source, rather than independent sources. When IPV exposure is measured at younger ages, compared to older ages, the association between IPV and child externalizing problems is greater. However, when child adjustment problems are measured at older ages, compared to younger ages, the association between IPV and child internalizing problems is greater. Child sex, sample type, and whether only the male partner's violence or both partners' violence was measured did not predict the association between children's exposure to IPV and later adjustment problems. The findings have both research and clinical implications regarding the long-term adjustment of children exposed to IPV and the conceptualization and measurement of resilience subsequent to IPV. © 2016 Elsevier Ltd. All rights reserved.

Yalch, M. M., Black, J. A., Martin, L. F., & Levendosky, A. A. (2016). Effects of prenatal and postbirth intimate partner violence on preschool-age children's dissociative symptoms. *Journal of Aggression, Maltreatment & Trauma, 25*(7), 741-752.

Studies on the effects of intimate partner violence (IPV) on children have typically focused on IPV to which children were exposed after their birth. However, research has also demonstrated the effect of prenatal IPV on children's psychological functioning, although this has not yet been studied with respect to dissociation. In this study, we examined the association between prenatal and postbirth IPV and dissociative symptoms among preschool-age children using a Bayesian approach to multiple regression. Results indicated that prenatal IPV predicts child dissociative symptoms over and above postbirth IPV and other negative life events that the child has experienced. These results provide further evidence for the role prenatal IPV plays in the development of child psychopathology and suggest directions for future research and intervention.

Young, H. L., Lehman, L. D., Faherty, E., & Sandefer, K. N. (2016). Examining the long-term effects of a domestic violence training for educators. *Journal of Aggression, Maltreatment & Trauma, 25*(7), 671-685.

Domestic violence affects not only the victims and perpetrators, but also children living in these households. This study examined the long-term effects of a training presented to all employees working in 22 different rural school districts (N = 556). Quantitative and qualitative data were collected to determine the long-term impact of the training. After approximately 4 years, the staff who had received the training reported that they had significantly more confidence in handling

families dealing with domestic violence; however, both groups reported similar levels of general knowledge of the topic. Recommendations for training school personnel are provided along with key elements for replicating the training.

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.

Huang, C. C., Vikse, J. H., Lu, S., & Yi, S. (2015). Children’s exposure to intimate partner violence and early delinquency. *Journal of Family Violence, 30*(8), 953-965.

Children who experience trauma due to exposure to intimate partner violence (IPV) have been shown to exhibit higher than average rates of cognitive, psychological, and emotional impairments.

Our research uses the first five waves of the Fragile Families and Child Well-being Study to examine the effects of exposure to intimate partner violence in early childhood (as measured by their mothers' experiences with physical violence and economic abuse) on delinquency at age nine. It also investigates whether these effects are mediated by parental involvement and exposure to child neglect and physical punishment. Results indicate that children's exposure to IPV at Year 1 and Year 3 had direct effects on their tendency toward delinquent behavior at Year 9, and that parental involvement, child neglect, and physical punishment also had significant mediating effects. Given the importance of early delinquency to later achievement, the findings may provide implications for early intervention.

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 24 hours 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.

MacMillan, H. L., & Wathen, C. N. (2014). Children's exposure to intimate partner violence. *Child and Adolescent Psychiatric Clinics of North America*, 23(2), 295-308.

Children's exposure to intimate partner violence (IPV) is now recognized as a form of child maltreatment associated with significant mental health impairment. This article provides an overview of the epidemiology of children's exposure to IPV, including prevalence, risk, and protective factors and associated impairment, and a summary of assessment and interventions

aimed at preventing its occurrence and responding to children and families. Information about evidence-based approaches to responding to children who present with impairment after exposure to IPV, such as posttraumatic-stress disorder symptoms, is discussed. Some of the challenges in understanding children's needs with regard to safety and protection are outlined with recommendations for future directions.

Piotrowski, C. C., Taylor, K., & Cormier, D. C. (2014). Siblings exposed to intimate partner violence: Linking sibling relationship quality & child adjustment problems. *Child Abuse & Neglect*, 38(1), 123-134.

Although the majority of families that experience intimate partner violence (IPV) have more than one child, most research to date has focused upon a single child within these families. A significant body of research has indicated siblings play an important role in children's adjustment and well-being. To address this gap, the three main goals of the present study were to compare the adjustment of older and younger siblings exposed to IPV, to describe and compare the quality of these sibling relationships from multiple perspectives, and to investigate how sibling adjustment and relationship quality influence children's adjustment. Forty-seven sibling pairs and their mothers were recruited from the community. Mothers self-reported on their violent experiences using the Conflict Tactics Scale, and also estimated the length of time their children were exposed to IPV. Mothers and children completed assessments of child adjustment and the quality of sibling relationships. Observers also assessed the quality of sibling interaction. Results indicated that adjustment between siblings was highly inter-related. On average, mothers reported sibling relationships as less positive but also as less hostile than did siblings themselves. Higher levels of sibling hostility, lower levels of sibling warmth and higher levels of disengagement each significantly predicted child adjustment; however, these effects were predicated upon the adjustment of the other sibling. The sibling relationships of children exposed to IPV made a difference in their individual adjustment, and their adjustment issues influenced how they feel about and interacted with their sibling. Sibling hostility played a stronger role in adjustment issues than sibling warmth. The nature of sibling influences and the direction of future research were discussed.

Schiff, M., Plotnikova, M., Dingle, K., Williams, G. M., Najman, J., & Clavarino, A. (2014). Does adolescent's exposure to parental intimate partner conflict and violence predict psychological distress and substance use in young adulthood? A longitudinal study. *Child Abuse & Neglect*, 38(12), 1945-1954.

Little is known about the extent to which parental conflict and violence differentially impact on offspring mental health and substance use. Using data from a longitudinal birth cohort study this paper examines: whether offspring exposure to parental intimate partner violence (involving physical violence which may include conflicts and/or disagreements) or parental intimate partner conflict (conflicting interactions and disagreements only) are associated with offspring depression, anxiety and substance use in early adulthood (at age 21); and whether these associations are independent of maternal background, depression and anxiety and substance use. Data (n = 2,126 women and children) were taken from a large-scale Australian birth-cohort study, the Mater University of Queensland Study of Pregnancy (MUSP). IPC and IPV were measured at the 14-year follow-up. Offspring mental health outcomes – depression, anxiety and substance use were assessed at the 21-year follow-up using the Composite International Diagnostic Interview (CIDI). Offspring of women experiencing IPV at the 14-year follow-up were more likely to manifest anxiety, nicotine, alcohol and cannabis disorders by the 21-year follow-up. These associations remained after adjustment for maternal anxiety, depression, and other potential confounders. Unlike males who experience anxiety disorders after exposure to IPV, females experience depressive and alcohol use disorders. IPV predicts offspring increased levels of substance abuse and dependence in young adulthood. Gender differences suggest differential impact. © 2014 Elsevier Ltd. All rights reserved.

Thornton, V. (2014). [Understanding the emotional impact of domestic violence on young children](#). *Educational & Child Psychology*, 31(1), 91-100.

Young children who live with domestic violence represent a significantly disempowered group. Developmentally, young children have relatively limited verbal skills and emotional literacy. In addition, the context created by domestic violence frequently involves an atmosphere of secrecy and intimidation, as well as reduced emotional availability from children's main caregivers. Taken together, these factors severely restrict these young children's capacity and opportunities to make their voices and needs heard. This qualitative study gave children who had lived with domestic

violence, the opportunity to share their emotional worlds through projective play and drawing assessments. Eight children aged between 5 and 9-years-old, took part together with their mothers. Transcripts of semi-structured interviews with the mothers and projective play assessments with the children were analysed using abbreviated, social constructionist grounded theory. Interpretations from the children's drawings served to elaborate and validate themes found in the transcript data. Themes were then linked and mapped into an initial theoretical model of how domestic violence impacts emotionally on young children. The data gathered shows that domestic violence generates a range of negative and overwhelming emotions for young children. There is also a concurrent disrupting impact on the dynamics in the family which undermines the security and containment young children need to manage and process their emotions. The presence of an attuned adult and age-appropriate means to communicate is argued to be important in supporting young and traumatised children to share their emotions. Implications for service planning, clinical practice and educational professionals are discussed.

Gilbert, A. L., Bauer, N. S., Carroll, A. E., & Downs, S. M. (2013). Child exposure to parental violence and psychological distress associated with delayed milestones. *Pediatrics*, *132*(6), e1577-e1583.

The study objective was to examine the association between parental report of intimate partner violence (IPV) and parental psychological distress (PPD) with child attainment of developmental milestones. By using data collected from a large cohort of primary care patients, this cross-sectional study examined the relationship between parental report of IPV and/or PPD and the attainment of developmental milestones within the first 72 months of a child's life. Multivariate logistic regression analyses were used to adjust for parental report of child abuse concern and sociodemographic characteristics. Our study population included 16 595 subjects. Children of parents reporting both IPV and PPD ($n = 88$; 0.5%) were more likely to fail at least 1 milestone across the following developmental domains: language (adjusted odds ratio [aOR] 2.1; 95% confidence interval [CI] 1.3–3.3), personal-social (aOR 1.9; 95% CI 1.2–2.9), and gross motor (aOR 3.0; 95% CI 1.8–5.0). Significant associations for those reporting IPV-only ($n = 331$; 2.0%) were found for language (aOR 1.4; 95% CI 1.1–1.9), personal-social (aOR 1.7; 95% CI 1.4–2.2), and fine motor-adaptive (aOR 1.7; 95% CI 1.0–2.7). Significant associations for those reporting PPD-only ($n = 1920$; 11.6%) were found for: language (aOR 1.5; 95% CI 1.3–1.7), personal-social

(aOR 1.6; 95% CI 1.5–1.8), gross motor (aOR 1.6; 95% CI 1.4–1.8), and fine-motor adaptive (aOR 1.6; 95% CI 1.3–2.0). Screening children for IPV and PPD helps identify those at risk for poor developmental outcomes who may benefit from early intervention.

Hornsby, T. E. (2012). Do judges adequately address the causes and impact of violence in children's lives in deciding contested child custody cases? *Family & Intimate Partner Violence Quarterly*, 4(3), 209-246.

Retired circuit court judge Thomas Hornsby, J.D., takes the unusual step of training a critical eye on the decision-making processes and outcomes used by his fellow jurists in adjudicating cases involving domestic violence. Rather than claim flawlessness in his own rulings, Judge Hornsby begins by citing a case that revealed to him his own biases, misunderstandings, and misperceptions about batterers and their victims. He then goes on to illuminate the pertinent factors that lead so many judges to make decisions resulting in potentially disastrous outcomes. Judge Hornsby goes on to outline typical fact patterns found in custody cases involving DV. Finally, he offers numerous well-founded recommendations for improving the ethical practices and the accuracy of decision-making by judges and other legal officials.

Keeshin, B. R., Cronholm, P. F., & Strawn, J. R. (2012). Physiologic changes associated with violence and abuse exposure: An examination of related medical conditions. *Trauma, Violence, & Abuse*, 13(1), 41-56.

Although the extant evidence is replete with data supporting linkages between exposure to violence or abuse and the subsequent development of medical illnesses, the underlying mechanisms of these relationships are poorly defined and understood. Physiologic changes occurring in violence- or abuse-exposed individuals point to potentially common biological pathways connecting traumatic exposures with medical outcomes. Herein, the evidence describing the long-term physiologic changes in abuse and violence-exposed populations and associated medical illnesses are reviewed. Current data support that (a) specific neurobiochemical changes are associated with exposure to violence and abuse; (b) several biological pathways have the potential to lead to the development of future illness; and (c) common physiologic mechanisms may moderate the severity, phenomenology, or clinical course of medical illnesses in individuals with histories of exposure to violence or abuse. Importantly, additional work is needed to advance our emerging understanding

of the biological mechanisms connecting exposure to violence and abuse and negative health outcomes.

Shalev, I., Moffitt, T. E., Sugden, K., Williams, B., Houts, R. M., Danese, A., ... & Caspi, A. (2012). [Exposure to violence during childhood is associated with telomere erosion from 5 to 10 years of age: A longitudinal study](#). *Molecular Psychiatry*, 18(5), 576-581.

There is increasing interest in discovering mechanisms that mediate the effects of childhood stress on late-life disease morbidity and mortality. Previous studies have suggested one potential mechanism linking stress to cellular aging, disease and mortality in humans: telomere erosion. We examined telomere erosion in relation to children's exposure to violence, a salient early-life stressor, which has known long-term consequences for well-being and is a major public-health and social-welfare problem. In the first prospective-longitudinal study with repeated telomere measurements in children while they experienced stress, we tested the hypothesis that childhood violence exposure would accelerate telomere erosion from age 5 to age 10 years. Violence was assessed as exposure to maternal domestic violence, frequent bullying victimization and physical maltreatment by an adult. Participants were 236 children (49% females; 42% with one or more violence exposures) recruited from the Environmental-Risk Longitudinal Twin Study, a nationally representative 1994–1995 birth cohort. Each child's mean relative telomere length was measured simultaneously in baseline and follow-up DNA samples, using the quantitative PCR method for *T/S* ratio (the ratio of telomere repeat copy numbers to single-copy gene numbers). Compared with their counterparts, the children who experienced two or more kinds of violence exposure showed significantly more telomere erosion between age-5 baseline and age-10 follow-up measurements, even after adjusting for sex, socioeconomic status and body mass index ($B = -0.052$, $s.e. = 0.021$, $P = 0.015$). This finding provides support for a mechanism linking cumulative childhood stress to telomere maintenance, observed already at a young age, with potential impact for life-long health.

Cohen, J. A., Mannarino, A. P., & Iyengar, S. (2011). [Community treatment of posttraumatic stress disorder for children exposed to intimate partner violence: A randomized controlled trial](#). *Archives of Pediatrics & Adolescent Medicine*, 165(1), 16-21.

To evaluate community-provided trauma-focused cognitive behavior therapy (TF-CBT) compared with usual community treatment for children with intimate partner violence (IPV)-related

posttraumatic stress disorder (PTSD) symptoms. Randomized controlled trial conducted using blinded evaluators. Recruitment, screening, and treatment were conducted at a community IPV center between September 1, 2004, and June 30, 2009. Of 140 consecutively referred 7- to 14-year-old children, 124 participated. Children and mothers were randomly assigned to receive 8 sessions of TF-CBT or usual care (child-centered therapy). Total child PTSD symptoms assessed using child and parent structured interview (Kiddie Schedule for Affective Disorders and Schizophrenia, Present and Lifetime Version [K-SADS-PL]) and self-report (University of California at Los Angeles PTSD Reaction Index [RI]). Secondary child outcomes were scores on the K-SADS-PL (PTSD symptom clusters), Screen for Child Anxiety Related Emotional Disorders (SCARED) (anxiety), Children's Depression Inventory (depression), Kaufman Brief Intelligence Test (cognitive functioning), and Child Behavior Checklist (total behavior problems). Intent-to-treat analysis using last observation carried forward showed superior outcomes for TF-CBT on the total K-SADS-PL (mean difference, 1.63; 95% confidence interval [CI], 0.44-2.82), RI (mean difference, 5.5; 95% CI, 1.37-9.63), K-SADS-PL hyperarousal (mean difference, 0.71; 95% CI, 0.22-1.20), K-SADS-PL avoidance (0.55; 0.07-1.03), and SCARED (mean difference, 5.13; 95% CI, 1.31-8.96). Multiple imputation analyses confirmed most of these findings. The TF-CBT completers experienced significantly greater PTSD diagnostic remission ($\chi^2 = 4.67, P = .03$) and had significantly fewer serious adverse events. Community TF-CBT effectively improves children's IPV-related PTSD and anxiety.

Emery, C. R. (2011). Controlling for selection effects in the relationship between child behavior problems and exposure to intimate partner violence. *Journal of Interpersonal Violence, 26*(8), 1541-1558.

This article used the Project on Human Development in Chicago Neighborhoods (PHDCN) data to examine the relationship between exposure to intimate partner violence (IPV) and child behavior problems (externalizing and internalizing), truancy, grade repetition, smoking, drinking, and use of marijuana. Longitudinal data analysis was conducted on 1,816 primary caregivers and their children. Fixed-effects regression models were employed to address concerns with selection bias. IPV was associated with significantly greater internalizing behavior, externalizing behavior, and truancy. Findings from age interaction models suggested that the relationship between IPV and child behavior problems may attenuate as the age of the child at time of exposure increases.

Jirapramukpitak, T. M. (2011). Family violence and its 'adversity package': A community survey of family violence and adverse mental outcomes among young people. *Social Psychiatry & Psychiatric Epidemiology*, 46(9), 825-831.

Background: Limited research has examined the relationship between common forms of family violence and their impacts. We (1) examine the co-occurrence of exposure to domestic violence (EDV) and physical abuse (PA) in childhood and their relations to intimate partner violence (IPV) in adulthood among the young Thai people, and (2) describe their associations with common adverse mental outcomes. **Methods:** A population-based cross-sectional survey was conducted in a community in Bangkok on a representative sample of 1,052 young residents, aged 16-25 years. Measurements were as follows: (1) exposures-the Conflict Tactics Scales were used to assess EDV and PA in childhood and IPV in adulthood, and (2) outcomes-common mental disorder and suicidal ideation were assessed with Clinical Interview Schedule-Revised, illicit drug use with Diagnostic Interview Schedule, and problem drinking with Alcohol Use Disorder Identification Test. **Results:** Those who reported EDV and PA were highly likely to report IPV (OR 9.3, 95% CI 4.4-19.4). In general, strong associations were found between exposure to each form of the violent experiences and all the adverse outcomes (adjusted odds ratios ranged from 1.7 to 5.7). Those who had been exposed to the three types of violence, compared to none, were most likely to report all the adverse outcomes (odds ratios ranged from 4.3 to 17.3). **Conclusion:** Those who had experienced both kinds of the childhood violence were particularly likely to get re-victimised later in their life. A dose-response relationship was observed between the extent of exposure to violence and the adverse outcomes. There is a need to identify and prevent these experiences and their impact on children and young people.

Margolin, G., & Vickerman, K. A. (2011). [Posttraumatic stress in children and adolescents exposed to family violence: I. Overview and issues](#). *Professional Psychology, Research and Practice*, 38(6), 613-619.

Exposure to child physical abuse and parents' domestic violence can subject youth to pervasive traumatic stress and lead to Post-traumatic Stress Disorder (PTSD). The often repeating and ongoing nature of family violence exposure may result in youth exhibiting problems in multiple domains of functioning and meeting criteria for multiple disorders in addition to PTSD. These characteristics as well as unique factors related to children's developmental level and symptom presentation complicate a PTSD diagnosis. This paper describes evolving conceptualizations in

the burgeoning field of trauma related to family violence exposure, and reviews considerations that inform assessment and treatment planning for this population.

Souza, 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. *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, although youth dually exposed to abuse and domestic violence were less attached to parents in adolescence than those who were not exposed, for 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.

Tajima, E. A., Herrenkohl, T. I., Moylan, C. A., & Derr, A. S. (2011). [Moderating the effects of childhood exposure to intimate partner violence: The roles of parenting characteristics and adolescent peer support](#). *Journal of Research on Adolescence, 21*(2), 376-394.

We investigate parenting characteristics and adolescent peer support as potential moderators of the effects of childhood exposure to intimate partner violence (IPV) on adolescent outcomes. Lehigh Longitudinal Study (N=416) data include parent and adolescent reports of childhood IPV exposure. Exposure to IPV predicted nearly all adverse outcomes examined, however after accounting for co-occurring child abuse and early child behavior problems, IPV predicted only one outcome. Several moderator effects were identified. Parental "acceptance" of the child moderated the effects of IPV exposure on the likelihood of teenage pregnancy and running away from home. Both peer communication and peer trust moderated the relationship between exposure

to IPV and depression and running from home. Peer communication also moderated the effects of IPV exposure on high school dropout. Interventions that influence parenting practices and strengthen peer support for youth exposed to IPV may increase protection and decrease risk of several tested outcomes.

Yount, K. M., DiGirolamo, A. M., & Ramakrishnan, U. (2011). Impacts of domestic violence on child growth and nutrition: A conceptual review of the pathways of influence. *Social Science & Medicine*, 72(9), 1534-1554.

Domestic violence against women is a global problem, and young children are disproportionate witnesses. Children's exposure to domestic violence (CEDV) predicts poorer health and development, but its effects on nutrition and growth are understudied. We propose a conceptual framework for the pathways by which domestic violence against mothers may impair child growth and nutrition, prenatally and during the first 36 months of life. We synthesize literatures from multiple disciplines and critically review the evidence for each pathway. Our review exposes gaps in knowledge and opportunities for research. The framework also identifies interim strategies to mitigate the effects of CEDV on child growth and nutrition. Given the global burden of child malnutrition and its long-term effects on human-capital formation, improving child growth and nutrition may be another reason to prevent domestic violence and its cascading after-effects.

Goddard, C., & Bedi, G. (2010). Intimate partner violence and child abuse: A child-centered 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-centered 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-centered 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-centered 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-centered 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.

Graham-Bermann, S.A., Perkins S. (2010). Effects of early exposure and lifetime exposure to intimate partner violence (IPV) on child adjustment. *Violence and Victims, 25*(4), 427-439.

Children exposed to overwhelming and potentially traumatic events early in their lives are considered at-risk for problems in adjustment. Yet it is not known whether it is the age of first exposure (AFE) to violence or the amount of violence that the child witnessed in their lifetime that has the greatest impact on adjustment. For a sample of 190 children ages 6 to 12 exposed to intimate partner violence, their mothers reported that the average length of their abusive relationship was 10 years. The majority of children were first exposed to family violence as infants (64%), with only 12% first exposed when school-aged. Both the AFE and an estimate of the cumulative amount of violence were significantly and negatively related to children's behavioral problems. However, in regression analyses controlling for child sex, ethnicity, age, and family environment variables, cumulative violence exposure accounted for greater variance in adjustment than did AFE. Furthermore, cumulative violence exposure mediated the relationship between AFE and externalizing behavior problems, indicating that the cumulative exposure to IPV outweighed the AFE in its effect on child adjustment.

C. C., Wang, L. R., & Warrener, C. (2010). Effects of domestic violence on behavior problems of preschool-aged children: Do maternal mental health and parenting mediate the effects? *Children and Youth Services Review, 32*(10), 1317-1323.

Using the first four waves of the Fragile Families and Child Wellbeing Study, this article examined the effects of mothers who experienced domestic violence at Year 1 on the externalizing and internalizing behavior problems of children at Year 5 and investigated whether maternal mental health and parenting at Year 3 mediated those effects. Findings from structural equation modeling showed partial support for the hypothesized mediation effects. Consistent with the spillover hypothesis, domestic violence at Year 1 had a direct effect on maternal mental health at Year 3, which had direct effects on children's externalizing behavior problems at Year 5. Likewise, domestic violence at Year 1 had direct effects on parenting behavior and spanking at Year 3, and

both parenting behavior and spanking then had direct effects on children's externalizing and internalizing behavior problems at Year 5. Domestic violence at Year 1 had direct effects on children's externalizing and internalizing behavior problems at Year 5. These results suggest that there are long-term effects of domestic violence on the behavior problems of preschool-aged children and that early interventions are needed to prevent later problems among children in families experiencing domestic violence.

Kennedy, A. C., Bybee, D, Sullivan, C. M., & Greeson, M. (2010). The impact of family and community violence on children's depression trajectories: Examining the interactions of violence exposure, family social support, and gender. *Journal of Family Psychology*, 24(2), 197-207.

This longitudinal study used multilevel modeling to examine the relationships between witnessing intimate partner violence (IPV), community and school violence exposure (CSVE), family social support, gender, and depression over 2 years within a sample of 100 school-aged children. We found significant between-child differences in both the initial levels of depression and the trajectories of depression; depression over time was positively associated with change in witnessing IPV and CSVE and negatively associated with change in support. Two significant 3-way interactions were found: Gender and initial support, as well as gender and initial witnessing IPV, both significantly moderated the effect of change in witnessing IPV on the children's depression over time.

Lewin, L., Abdrbo, A., & Burant, C. (2010). Domestic violence in women with serious mental illness involved with child protective services. *Issues in Mental Health Nursing*, 31(2), 128-136.

The purpose of this study is to describe mothers with serious mental illness who have experienced domestic violence and are involved with child protective services. One hundred twenty-two files from the Department of Child and Family Services were reviewed. According to this retrospective review, the majority of the mothers and children had been exposed to domestic violence (62.6%). Mothers with the diagnoses of major depression-single episode and major depression-recurrent were most likely to have disclosed domestic violence exposure, compared to mothers with other

serious mental illnesses. Our findings, and that of other cited studies, support the practice of routine assessment of domestic violence in women with serious mental illnesses, identification of safe havens for mothers and children, and access to continuing parenting support for these vulnerable family groups.

Øverlien, C. (2010). Children exposed to domestic violence conclusions from the literature and challenges ahead. *Journal of Social Work, 10*(1), 80-97.

This article examines and discusses the research field of children exposed to domestic violence, a field which has greatly expanded during the last 10 years. The author presents an overview of this research, discusses its implications, and describes future challenges and contemporary knowledge gaps. The author argues that the field is dominated by studies that a) are quantitative, b) use the mothers as the informant and c) are represented by traditional psychology and social medicine, rather than social work. These studies have found substantial support for the negative emotional and behavioral consequences that children exposed to domestic violence suffer. However, many questions and problems remain unanswered. These questions include both the research field itself and the need for new approaches such as qualitative research including the voice of the child, longitudinal studies, and questions regarding methodology and research ethics. The author argues that there is a need for more qualitative research in general and social work research in particular. The implications for social work practice and policy are discussed.

Rigterink, T., Katz, L. F., & Hessler, D. M. (2010). Domestic violence and longitudinal associations with children's physiological regulation abilities. *Journal of Interpersonal Violence, 25*(9), 1669-1683.

The present study examined the impact of domestic violence (DV) on children's emotion regulation abilities measured via baseline vagal tone (VT). Specifically, the authors examined the relationship between DV exposure and children's regulatory functioning over time, investigating whether DV exposure was related to the trajectory of children's physiological regulatory abilities from the preschool period to middle childhood. Covariates, including marital dissatisfaction and conduct-problem status, along with potential gender differences, were examined. Though all children increased in baseline VT from Time 1 to Time 2, children exposed to DV displayed less increase in baseline VT over time as compared to nonexposed children. Results in terms of the

long-term outcomes of DV on children and implications for interventions were taken into consideration and discussed in the article.

Rhodes, K., Cerulli, C., Dichter, M., Kothari, C., & Barg, F. (2010). "I didn't want to put them through that": The influence of children on victim decision-making in intimate partner violence cases. *Journal of Family Violence*, 25(5), 485-493.

For mothers, intimate partner violence (IPV) presents a concern not only for their own well-being but also for that of their children who are exposed to the violence and its aftermath. In focus groups with adult women ($N=39$) across three jurisdictions who had experienced legal system intervention for IPV victimization, mothers raised unsolicited concerns about the negative effects of IPV exposure on their children. These comments were not prompted by the facilitator but were raised by women in all seven of the focus groups during discussions about motivations and barriers to participation in prosecution of their abusive partners. The overall message was that victims with children felt very conflicted. Children both facilitate and inhibit leaving the abusive relationship. Mothers wanted to spare their children from harmful effects of violence but also wanted to keep their families together and protect their children from potential agitation and instability caused by legal system involvement. Participants described how fears and threats of involvement from child protective services inhibited help-seeking while simultaneously voicing a desire for services that would help their children. More research is needed to help service providers understand the quagmire mothers who are victims of IPV encounter regarding their children's wellbeing.

Russell, D., Springer, K. W., & Greenfield, E. A. (2010). [Witnessing domestic abuse in childhood as an independent risk factor for depressive symptoms in young adulthood](#). *Child Abuse & Neglect*, 34(6), 448-453.

This study addresses the relationship between retrospective reports of witnessing domestic abuse in childhood and levels of depressive symptoms in young adulthood. We examine whether the association between having witnessed violence in childhood and depression is independent of having been the direct target of sexual and/or physical abuse, as well as other characteristics and experiences linked with family violence. We used two waves of data collected from a sample of 1,175 young adults (ages 20 to 24) in Miami, Florida. Retrospective self-reports of witnessed abuse and measures of family context and adversities were obtained in 1998–2000. The respondents' level of depressive symptoms was assessed two years later in 2000–2002. Multivariate results

indicate that frequently having witnessed domestic abuse predicts higher levels of depressive symptoms in young adulthood, independently of other risk factors for depression and family violence. Results provide preliminary evidence that frequent exposure to domestic abuse is an independent risk factor for depressive symptoms in young adulthood. Results support a renewed call for (a) increased attention to depression among children exposed to adults' interpersonal violence, and (b) greater efforts to bridge prevention and intervention efforts regarding domestic violence and child maltreatment.

Smith, C. A., Elwyn, L. J., Ireland, T. O., & Thornberry, T. P. (2010). [Impact of adolescent exposure to intimate partner violence on substance use in early adulthood](#). *Journal of Studies on Alcohol and Drugs*, 71(2), 219-230.

Youth exposure to intimate partner violence has been theorized to increase the risk of adverse outcomes in adulthood including substance-use problems. However, the limited research on the association between early exposure to intimate partner violence and later alcohol- or drug-use problems is inconclusive. Using a prospective design, this study investigates whether adolescent exposure to intimate partner violence increases the risk for problem substance use in early adulthood and whether this relationship differs by gender. The study uses a subsample ($n = 508$) of participants from the Rochester Youth Development Study, a longitudinal study of urban, largely minority adolescents that oversampled youth at high risk for antisocial behavior and drug use. Logistic regression analyses were conducted to assess whether adolescent exposure to intimate partner violence predicted increased odds of four indicators of problem substance use in early adulthood, controlling for parental substance use, adolescent maltreatment, and sociodemographic risk factors. Exposure to severe intimate partner violence as an adolescent significantly increased the odds of alcohol-use problems in early adulthood for young women (odds ratio = 5.63, $p < .05$) but not for young men. Exposure to intimate partner violence did not increase the odds of other substance-use indicators for either gender. Girls exposed to intimate partner violence may be at increased risk for problems with alcohol use in adulthood and should be a target for prevention and intervention efforts. Overall, however, the association between exposure to intimate partner violence and later substance-use problems is less than anticipated in this high-risk community sample.

Graham-Bermann S. A., Gruber, G., Howell, K. H., & Girz, L. (2009). Factor discriminating among profiles of resilience and psychopathology in children exposed to intimate partner violence (IPV). *Child Abuse & Neglect*, 33(9), 648-660.

To evaluate the social and emotional adjustment of 219 children in families with varying levels of intimate partner violence (IPV) using a model of risk and protection. To explore factors that differentiate children with poor adjustment from those with resilience. Mothers who experienced IPV in the past year and their children ages 6–12 were interviewed. Standardized measures assessed family violence, parenting, family functioning, maternal mental health, and children's adjustment and beliefs. Using cluster analysis, all cases with valid data on the Child Behavior Checklist, Child Depression Inventory, General Self-Worth and Social Self-Competence measures were described by four profiles of children's adjustment: Severe Adjustment Problems (24%); children who were Struggling (45%); those with Depression Only (11%); and Resilient (20%) with high competence and low adjustment problems. Multinomial logistic regression analyses showed children in the Severe Problems cluster witnessed more family violence and had mothers higher in depression and trauma symptoms than other children. Resilient and Struggling children had mothers with better parenting, more family strengths and no past violent partner. Parents of children with Severe Problems were lacking these attributes. The Depressed profile children witnessed less violence but had greater fears and worries about mother's safety. Factors related to the child, to the mother and to the family distinguish different profiles of adjustment for children exposed to IPV who are living in the community. Resilient children have less violence exposure, fewer fears and worries, and mothers with better mental health and parenting skills, suggesting avenues for intervention with this population. Findings suggest that child adjustment is largely influenced by parent functioning. Thus, services should be targeted at both the child and the parent. Clinical interventions shaped to the unique needs of the child might also be tested with this population.

Chan, Y., & Yeung, J. (2009). Children living with violence within the family and its sequel: A meta-analysis from 1995–2006. *Aggression & Violent Behavior*, 14(5), 313-322.

Based on 37 articles published in international refereed journals between 1995 and 2006, this meta-analytical review attempted to study the sequel of children living with family violence. It specifically attempted to identify the overall effect size of family violence on children's adjustment

outcomes. Moderators that exerted their effects on the relationship were also studied. The overall effect size generated from the 353 study-level effect sizes was rather small ($Z_r = .201$). Moderating analysis on study designs, sample sources, child developmental stages and gender did not show significant heterogeneity in effect sizes, while there was significant dispersion in effect sizes among different types of child adjustment outcomes. Results of this study are basically resonant with the meta-analyses of Kitzmann et al. [Kitzmann, K. M., Gaylord, N. K., Holt, A. R., & Kenny, E. D., (2003). Child witnesses to domestic violence: A meta-analytic review. *Journal of Consulting and Clinical Psychology*, 71, 339–352] and Wolfe et al. [Wolfe, D. A., Crooks, C. V., Lee, V., McIntyre-Smith, A., & Jaffe, P. G., (2003). The effects of children's exposure to domestic violence: A meta-analysis and critique. *Clinical Child and Family Psychology Review*, 6, 171–187], but add new information in that the report source of family violence was not a significant moderator, while that of child adjustment outcomes was.

Humphreys, C., Lowe, P., & Williams, S. (2009). Sleep disruption and domestic violence: Exploring the interconnections between mothers and children. *Child & Family Social Work*, 14(1), 6-14.

This paper argues that sleep disruption is both a strategy and an effect of violence and abuse which profoundly affects the lives of women and children. This paper traces the interconnections between the patterns of sleeping (not sleeping) for women and children living with and recovering from the effects of violence and abuse. It highlights the threat to the emotional and physical well-being of children and women and provides a non-pathologizing route into an exploration of one of the symptoms of trauma. It is based on a pilot study which interviewed 17 women, 14 of whom were mothers to 28 children. Mothers reported that many of their children experienced nightmares, bed-wetting, night panics and disrupted sleep patterns. Recovery of the ability to sleep was often slow and uneven with interactive effects between women and children slowing progress.

Evans, S., Davies, C., & DiLillo, D. (2008). Exposure to domestic violence: A meta-analysis of child and adolescent outcomes. *Aggression & Violent Behavior*, 13(2), 131-140.

This study used meta-analysis to examine the relationship between childhood exposure to domestic violence and children's internalizing, externalizing, and trauma symptoms. Results from 60 reviewed studies revealed mean weighted effect size d -values of .48 and .47 for the relationship between exposure to domestic violence and childhood internalizing and externalizing symptoms,

respectively, indicating moderate effects. A larger mean weighted effect size *d*-value of 1.54 was obtained for the relationship between exposure to domestic violence and childhood trauma symptoms, though this figure was based on only six studies. Moderator analyses for gender showed that the relationship between exposure to domestic violence and externalizing symptoms was significantly stronger for boys than for girls. Further analyses examining age, age by gender, and recruitment setting variables revealed no significant effects. Descriptive information obtained from this meta-analytic review suggests that more recent research within this area is beginning to address some of the significant methodological limitations of past research. Recommendations for future research in the area are discussed.

Herrenkohl, T., Sousa, C., Tajima, E., Herrenkohl, R., & Moylan, C. (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. 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. 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. 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. 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.

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 centered 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.

Byrne, D., & Taylor, B. (2007). Children at risk from domestic violence and their educational attainment: Perspectives of education welfare officers, social workers and teachers. *Child Care in Practice, 13*(3), 185-201.

Children who witness domestic violence may have impaired educational attainment as well as facing other challenges such as struggles with self-esteem and forming relationships. This qualitative study set in Northern Ireland explored the perceptions of Education Welfare Officers, child protection social workers and teachers in post-primary schools regarding the impact of domestic violence on schooling and educational attainment, and of service responses to this. The survey used semi-structured interviews with four professionals in each of the above categories. Findings confirmed the major effect that domestic violence can have on children's schooling and relationships. Two typical types of responses by children were identified: those who became quiet and withdrawn, and those who became loud and aggressive. There seemed to have been progress in terms of professional understanding and service responses regarding domestic violence, but there seemed to be limited structured cooperation between the professional groups in addressing the effects of domestic violence on children. Sharing of information is hindered by confidentiality issues, some of which might be addressed by integrated teams of appropriate professionals. Greater investment in inter-agency training and development of the preventive role of the Education Welfare Service are recommended.

Spilsbury, J., Belliston, L., Drotar, D., Drinkard, A., Kretschmar, J., Creeden, R., et al. (2007). Clinically significant trauma symptoms and behavioral problems in a community-based sample of children exposed to domestic violence. *Journal of Family Violence, 22*(6), 487-499.

This study assessed the associations of characteristics of domestic violence incidents with clinically significant levels of traumatic symptoms and behavioral problems in a socio-economically and ethnically mixed sample of 687 children participating in a community-service program for children witnessing violence. Study predictors included child/family demographic characteristics, type and chronicity of exposure, and child's perceptions of control over the event and threat to personal safety. Outcomes consisted of traumatic symptoms and behavior problems. Results showed that perceived threat and control were associated with greater odds of clinically significant levels of several trauma symptoms (and behavior problems in the case of perceived threat) after adjusting for effects of demographic factors and violence characteristics. Child co-

victimization increased odds of reaching clinically significant levels of traumatic symptoms compared to children who witnessed the event but were not victimized. Female sex and White ethnicity increased odds of specific trauma symptoms and behavior problems. Increasing age reduced odds of some trauma symptoms. Associations between predictors and one outcome measure did not generalize across the other outcome measure. Implications of study findings, and directions for future research are discussed.

Ybarra, G., Wilkens, S., & Lieberman, A. (2007). The influence of domestic violence on preschooler behavior and functioning. *Journal of Family Violence, 22*(1), 33-42.

Enhancing current explanations of domestic violence exposure effects on child cognitive and behavioral functioning was the purpose of this investigation. Participants were 31 domestic violence exposed and 31 non-exposed children ages 3 to 5 years and their single-parent household mothers. Child-mother pairs were matched for child's age, gender, and ethnicity, mother's age and education, and annual family income. Child cognitive and behavioral functioning was assessed via psychological assessment and parent report. The presence of mental health difficulties in mothers was assessed using self-report and clinician-administered instruments. Exposed children showed lower verbal functioning and higher internalizing behaviors than did their non-exposed peers. Exposed mothers displayed greater psychological difficulties than did their counterparts.

Fantuzzo, J., & Fusco, R. (2007). Children's direct exposure to types of domestic violence crime: A population-based investigation. *Journal of Family Violence, 22*(7), 543-552.

Police officers served as public health sentinels to collect data on children exposed to domestic violence across an entire municipality for 1 year. This study extended research by investigating a typology of domestic violence crimes and children's direct sensory exposure to these types. Police officers used a standard, validated protocol to collect data on all substantiated domestic violence. Findings revealed that almost half of all events had children present, and 81% of these children were directly exposed to the violence. Children under the age of 6 years old were at greater risk of exposure. Identified domestic violence households with children were more likely to be low-income, non-White, and headed by a single female, compared to households at large. Cluster analysis revealed seven domestic violence event profiles. Typology showed that children were disproportionately exposed to the most unstable and dangerous profiles including weapon use, mutual assault, and substance abuse.

Fantuzzo, J., Fusco, R., Mohr, W., & Perry, M. (2007). Domestic violence and children's presence: a population-based study of law enforcement surveillance of domestic violence. *Journal of Family Violence, 22*(6), 331-340.

The purpose of the present study was twofold: (1) to test whether law enforcement officers could reliably use a standard protocol to collect data on domestic violence events (DVEs) across a large municipality, and (2) to use these data to examine prevalence and nature of the violence and children's presence. Reliability checks indicated that data were collected reliably on over 5,000 substantiated DVEs. Findings showed that 48% of all assaults in the municipality were DVEs. Victims were predominantly females in their early thirties, and injuries were predominantly minor and resulted from body contact. Children were present in nearly 50% of the DVEs. They were disproportionately present in domestic violence household is compared to all other households in the municipality. Domestic violence households with children were more likely to have mothers and fathers involved in the violence and were disproportionately minority households headed by single females in relatively poor neighborhoods.

Katz, L., Hessler, D., & Annet, A. (2007). Domestic violence, emotional competence, and child adjustment. *Social Development, 16*(3), 513-538.

This article examined emotion competence in children exposed to domestic violence (DV). It also examined the hypothesis that children's emotional competence mediates relations between DV and children's later difficulties with peers and behavioral adjustment. DV was assessed when children were at the age of five, emotional competence was assessed at the age of 9.5, and peer quality and behavioral adjustment were obtained at the age of 11. Children from homes with greater DV were less aware of their own emotions and more emotionally dysregulated at the age of 9.5. Emotional awareness mediated the relationship between DV at the age of five and children's friendship closeness and internalizing problems at the age of 11. Emotion dysregulation mediated the relationship between DV at the age of five and children's negative peer group interactions, social problems, and internalizing and externalizing problems at the age of 11. Results are discussed in terms of the impact of DV on children's emotional development and the role that different aspects of emotional competence play in children's socio-emotional adjustment.

Lieberman, A. (2007). Ghosts and angels: Intergenerational patterns in the transmission and treatment of the traumatic sequelae of domestic violence. *Infant Mental Health Journal*, 28(4), 422-439.

The article discusses the impact of exposure to domestic violence on infants, toddlers, and preschoolers; the manifestations of post-traumatic stress disorder in the first years of life; and the parameters of Child-Parent Psychotherapy as a relationship-based treatment that aims at enhancing the parent's effectiveness as a protector as a means of restoring the child's momentum towards healthy development. Obstacles to the child's mental health and to the success of treatment are discussed, with particular attention to the adverse effects of parental psychopathology and of environmental stressors such as poverty, cultural marginalization, and lack of access to resources. It is argued that the infant mental health clinician working with traumatized children and their families' needs to adopt a therapeutic approach that actively incorporates collaboration with other service systems, including pediatric care, childcare, law enforcement, child protective services, and the courts, in order to provide ecologically sound and culturally competent treatment.

Buckley, H., Holt, S., & Whelan, S. (2007). Listen to me! Children's experiences of domestic violence. *Child Abuse Review*, 16(5), 296-310.

This paper reports on a study undertaken in the Republic of Ireland during 2005 and is based on the experiences of children and young people who have lived with domestic violence. The objectives of the study were to explore the impact of domestic violence on children, identify their needs and recommend appropriate interventions to be brokered through a centrally based women's support service. Data were gathered from 70 participants, including 37 service providers/volunteers, 11 mothers and 22 children and young people who had lived in violent environments. The data indicated that children respond in unique ways to living with domestic violence, and that services to meet their needs must be tailored to suit their individual situations. The impact of domestic violence on their lives manifested itself with regard to their sense of fear and anxiety in relation to themselves, their siblings and their mothers; their self-esteem and sense of being 'different', their relationships (including ambivalent relationships with their fathers); their experiences of education and their sense of a lost childhood. The final report for the study was based on the total data collection, but this paper will concentrate primarily on the material elicited from the children and young people.

Moretti, M. M., Obsuth, I., Odgers, C. L., & Reebye, P. (2006). Exposure to maternal vs. paternal partner violence, PTSD, and aggression in adolescent girls and boys. *Aggressive Behavior, 32*(4), 385–395.

Adolescents who witness interparental violence (IPV) are at increased risk for perpetrating aggressive acts. They are also at risk for post-traumatic stress disorder (PTSD). In this study, we examined the relation between exposure to maternal vs. paternal physical IPV and adolescent girls' and boys' aggressive behavior toward mothers, fathers, friends, and romantic partners. We also assessed the influence of PTSD (as assessed by the Diagnostic Interview for Children and Adolescents-IV (DICA-IV)) on the relation between exposure to IPV and aggressive behavior. Participants were 63 girls and 49 boys, ages 13–18, consecutively admitted to a youth correctional facility or assessment facility designated to serve aggressive and delinquent youth. Structural equation modeling was used to estimate unique relations between exposure to maternal vs. paternal IPV and youth aggression in relationships. Girls who observed their mothers' aggressive behavior toward partners were significantly more aggressive toward friends. Similarly, boys who witnessed their fathers' aggression were significantly more aggressive toward friends. Adolescent girls and boys who observed aggression by mothers toward partners reported significantly higher levels of aggression toward their romantic partners. Approximately one third of our sample met PTSD criteria; the relation between exposure to parental IPV and aggression was stronger for individuals who met criteria for PTSD. The implications of understanding the relations between parents' and their daughters' and sons' use of aggression are discussed within the context of providing support for families in breaking intergenerational patterns of violence and aggression.

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.

Wolfe, D. A., Crooks, C. V., Lee, V. McIntyre-Smith, A., & Jaffe, P. G. (2003). The effects of children's exposure to domestic violence: A meta-analysis and critique. *Clinical Child and Family Psychology Review*, 6(3), 171-187.

A wide range of children's developmental outcomes are compromised by exposure to domestic violence, including social, emotional, behavioral, cognitive, and general health functioning. However, there are relatively few empirical studies with adequate control of confounding variables and a sound theoretical basis. We identified 41 studies that provided relevant and adequate data for inclusion in a meta-analysis. Forty of these studies indicated that children's exposure to domestic violence was related to emotional and behavioral problems, translating to a small overall effect ($Z_{\text{overall}} = .28$). Age, sex, and type of outcome were not significant moderators, most likely due to considerable heterogeneity within each of these groups. Co-occurrence of child abuse increased the level of emotional and behavioral problems above and beyond exposure alone, based on 4 available studies. Future research needs are identified, including the need for large-scale longitudinal data and theoretically guided approaches that take into account relevant contextual factors.

Koenen, K. C., Moffitt, T. E., Caspi, A., Taylor, A., & Purcell, S. (2003). Domestic violence is associated with environmental suppression of IQ in young children. *Development and Psychopathology*, 15(2), 297-311.

Research suggests that exposure to extreme stress in childhood, such as domestic violence, affects children's neurocognitive development, leading to lower intelligence. But studies have been unable to account for genetic influences that might confound the association between domestic violence and lower intelligence. This twin study tested whether domestic violence had environmentally mediated effects on young children's intelligence. Children's IQs were assessed for a population sample of 1116 monozygotic and dizygotic 5-year-old twin pairs in England. Mothers reported their experience of domestic violence in the previous 5 years. Ordinary least squares regression showed that domestic violence was uniquely associated with IQ suppression in a dose-response relationship. Children exposed to high levels of domestic violence had IQs that were, on average, 8 points lower than unexposed children. Structural equation models showed that adult domestic violence accounted for 4% of the variation, on average, in child IQ, independent of latent genetic influences. The findings are consistent with animal experiments and human correlational studies documenting the harmful effects of extreme stress on brain development. Programs that

successfully reduce domestic violence should also have beneficial effects on children's cognitive development.

English, D., Marshall, D., & Stewart, A. (2003). Effects of family violence on child behavior and health during early childhood. *Journal of Family Violence, 18*(1), 43-57.

Looking at families where children have been abused/neglected in early childhood, this study examined measures of child behavior and health to see if they tended to be worse when domestic violence is or has been present in a family. Further, caregiver and family characteristics as well as other case factors were examined, as possible moderators or mediators of the effects of domestic violence. Results indicate that domestic violence, of the type and severity occurring in our sample, does not have a direct effect on child outcomes by Age 6, when other associated variables are taken into account, but has considerable *indirect* effects. There is a pronounced impact of domestic violence on family functioning, the caregiver's general health and well being, and the quality of the caregiver's interaction with the child, which in turn are significantly associated with decrements of child functioning related to behavior problems and health. Some implications of this study for research in the area of domestic violence and child maltreatment are discussed.

Herrera, V. M., & McCloskey, L. A. (2001). Gender differences in the risk for delinquency among youth exposed to family violence. *Child Abuse & Neglect, 25*(8), 1037-1051.

The purpose of this research was to illuminate gender differences in adolescent delinquency against a backdrop of childhood exposure to both marital violence and physical child abuse. Specifically, analyses were performed to trace the unique effects of exposure to either form of family violence (marital or child) on the violent and nonviolent delinquency of boys and girls. This is a prospective study of 299 children who were interviewed with their mothers in 1999 about forms of abuse in the family. Approximately 5 years later a search of juvenile court records was performed for these same children. Details on the nature of the crimes were collected. Outcome variables included: (1) whether there was ever an arrest; and (2) whether there was ever an arrest for a violent crime. Preliminary analyses indicated no gender differences in overall referral rates to juvenile court, although boys were more likely than girls to be referred for property, felony, and violent offenses. Exposure to marital violence in childhood predicted referral to juvenile court. Girls with a history of physical child abuse were arrested for violent offenses more than boys with

similar histories, but the context of violent offenses differed dramatically by gender: Nearly all referrals for a violent offense for girls were for domestic violence. Although boys and girls share similar family risk factors for delinquency, girls are more likely than boys to be arrested for violent offenses in the aftermath of child physical abuse. These findings suggest that it takes more severe abuse to prompt violence in girls than is necessary to explain boys' violent offending. © 2001 Elsevier Science Ltd. All rights reserved.

Levendosky, A., & Graham-Bermann, S. (2001). Parenting in battered women: The effects of domestic violence on women and their children. *Journal of Family Violence, 16*(2), 171-192.

This study integrates an ecological perspective and trauma theory in proposing a model of the effects of domestic violence on women's parenting and children's adjustment. One hundred and twenty women and their children between the ages of 7 and 12 participated. Results supported an ecological model of the impact of domestic violence on women and children. The model predicted 40% of the variance in children's adjustment, 8% of parenting style, 43% of maternal psychological functioning, and 23% of marital satisfaction, using environmental factors such as social support, negative life events, and maternal history of child abuse. Overall, results support the ecological framework and trauma theory in understanding the effects of domestic violence on women and children. Rather than focusing on internal pathology, behavior is seen to exist on a continuum influenced heavily by the context in which the person is developing.

Huth-Bocks, A., Levendosky, A., & Semel, M. (2001). The direct and indirect effects of domestic violence on young children's intellectual functioning. *Journal of Family Violence, 16*(3), 269-290.

This study examined the direct and indirect effects of domestic violence on preschoolers' intellectual functioning. The sample consisted of 100 women and their 3–5-year-old children (44 boys and 56 girls) recruited from the general community. Forty-three percent of mothers had experienced domestic violence within the last year, defined by at least one physically aggressive act by an intimate partner. Children who had witnessed domestic violence had significantly poorer verbal abilities than nonwitnesses after controlling for SES and child abuse, but there were no group differences on visual–spatial abilities. Domestic violence also indirectly affected both types of intellectual abilities through its impact on maternal depression and the intellectual quality of the

home environment. Strengths and limitations of the study are discussed, as well as the implications for interventions for young child witnesses.