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Intimate Partner Violence – Treating Child Witnesses

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Description of Intimate Partner Violence

Definition

- Intimate partner violence (IPV) is an umbrella term that describes “any form of physical, sexual, emotional, psychological, and/or verbal abuse between partners in an intimate relationship” (Murray & Graves, 2012, p. 14).
- IPV is often referred to as other terms, including “domestic violence, dating violence, battering, spouse abuse, wife abuse, and intimate partner abuse” (Murray & Graves, p. 13).
- Children who witness parental IPV are often considered the “invisible victims” of IPV (Osofsky, 2003). Exposing a child to IPV can be considered a form of child maltreatment.
- What it means for a child to *witness* IPV is difficult to define. Some forms of witnessing are very obvious, such as a child actually watching interparental violence. However, even if children do not see the violence with their own eyes, they may be witness to it through hearing it, or dealing with the aftereffects of it (e.g., coming home following a violent incident and seeing the parent victim in an injured state).

Prevalence

- According to the National Center for Children exposed to domestic violence, (<http://www.ncccev.org/violence/domestic.html>), each year, an estimated 3 to 10 million children witness assaults against a parent by an intimate partner.
- There are high rates of overlap, as much as 30% to 60%, between parental IPV and child maltreatment (Kaufman, Kantor, & Little, 2003).

IDENTIFICATION/ASSESSMENT STRATEGIES

Within many Child Protective Service (CPS) guidelines, exposing a child to IPV is considered a form of neglect for failing to protect the child (Kaufman et al., 2003). Therefore, counselors must be aware of mandatory reporting requirements in their jurisdiction to determine whether and how suspected child witnessing of parental IPV should be reported to the appropriate authorities.

Because of the high rates of IPV in clinical populations, combined with the significant consequences that can result from it, all clients should be screened for IPV experiences. Based on a comprehensive review of the research literature, Murray and Graves (2012) presented the following general recommendations for the assessment of children who have been maltreated, including exposure to IPV:

- The primary consideration throughout the assessment process must be on the child’s safety, including his or her physical and emotional safety.
- Counselors should ensure that their clinical assessment does not interfere with any ongoing CPS investigative assessment. If a CPS investigation is ongoing, the counselor should coordinate assessment and treatment with other involved professionals, such as a CPS case manager and/or forensic interviewer.
- Assessment strategies used should be appropriate to the developmental level of the child.

- Both formal instruments and more unstructured, open-ended interview questions should be used.
- Areas of clinical assessment may include the following: the child's basic and developmental needs, the co-occurrence of child maltreatment, trauma and mental health symptoms, the level of social support available to the child, and the child's functioning in different areas of life, such as academic, social, and behavioral.
- The assessment process can be linked to safety planning with the child or with a parental figure for the child. Safety plans with children may address how to report future abuse, how to recognize safety risks, and role playing safety behaviors (for more information on developing a child safety plan see Kress, Adamson, Paylo, DeMarco, & Bradley, 2012).
- An instrument that may be useful when working this population is the Trauma Symptom Checklist for Children (Briere, 1996), which assesses how youth between the ages of 8 and 15 responded to traumatic events, and has six clinical subscales: Anger, Sexual Concerns, Anxiety, Posttraumatic Stress, Dissociation, Depression, and Anger.

INTERVENTION STRATEGIES

General strategies and considerations that should be used when working with children who have witnessed IPV, include the following recommendations which are based on a comprehensive review of the research literature (Murray & Graves, 2012):

- Remember that children will vary in the way that they are impacted by witnessing IPV. Factors that influence this impact include the following: the child's age and development, parenting influences, whether the IPV also occurred with other traumas (e.g., child abuse), the severity of the observed violence, and the protective factors available to the child.
- Safety must be the primary consideration. Safety risks associated with any counseling interventions must be considered and monitored carefully.
- Individual and/or group counseling may be beneficial.
- Specific treatment modalities that may be used include play therapy, psychoeducation, family support services, family therapy, parent education programs, and peer-mediated programs.
- The child's attachment style may impact the manner in which the child responds to the counselor.
- The issues that counselors may address in treatment include decreasing trauma symptoms, addressing mental health and substance abuse issues, dealing with transitions and consequences that resulted from witnessing the IPV (e.g., placement into foster care or one parent moving out of the home), and helping the child improve his or her functioning across different areas of life which may have been impacted by the event.
- The U.S. Department of Health and Human Services Administration for Children and Families offers a list of resources on evidence-based practices for children impacted by domestic violence through the Child Welfare Information Gateway (http://www.childwelfare.gov/systemwide/domviolence/case-work_practice/evidence_based.cfm).
- Counselors should coordinate their services with other involved agencies and resources from which the client is also seeking help, including victim advocates, law enforcement, and Child Protection Services.

INTERNET RESOURCES

Internet-based resources that specifically address children witnessing domestic violence include the following:

- The Child Welfare Information Gateway: <http://www.childwelfare.gov/pubs/factsheets/domesticviolence.cfm>
- The American Academy of Family Physicians: <http://www.aafp.org/afp/2002/1201/p2052.html>
- Futures without Violence: http://www.futureswithoutviolence.org/userfiles/file/Children_and_Families/Children.pdf
- UNICEF: <http://www.unicef.org/protection/files/BehindClosedDoors.pdf>

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