Research has indicated that up to 10 million children between the ages of 3 to 17 are exposed to at least one act of violence between their parents yearly, and that up to 27% of adults recall witnessing violence between their parents (Fontes, 2000). Data also indicate that child maltreatment increased from 931,000 cases reported in 1986 to 984,000 in 1997 (Gershater-Molko, Lutzker, & Wesch, 2003). Farver, Xu, Eppe, Fernandez, and Schwartz (2005) pointed out that even though overall crime rates have dropped, violence directed toward children has not experienced similar declines. Tjaden and Thoennes (2000) noted that 3.3 million children witness domestic violence each year.

Children exposed to violence cross all cultural and socioeconomic lines (Martin, 2002). The outcomes of these experiences with violence on children include aggressive behavior, anxiety/fear, lower verbal skills, psychosomatic complaints, insecurity, distrust, poor school performance, and regression in developmental tasks as well as many other potential problems (Martin, 2002). Additionally, children exposed to direct and/or indirect violence at home and/or in the community often experience mental health problems that include posttraumatic stress disorder (PTSD) and social, emotional, and academic problems. All of this suggests that an important level of intervention should include parents, extended family, and caregivers such as foster families (Osofsky, 2005).

Psychoeducational parenting programs have sought to break the cycle of negative parent-child interactions by teaching skills that lead to the positive nurturing of children. Additionally, group and individual counseling programs have been designed to help children and families overcome the effects of violence and violence exposure. The goals of many of these programs include promoting open discussion about children’s experiences with domestic violence, helping children to deal with the emotions and consequences of such exposure, reducing the problematic symptoms children experience, strengthening children’s relationships with their nonabusive caregivers and helping children and their families to create and maintain relationships and living situations that are free from violence and abuse. (Groves, 1999, p. 122)

However, many of these programs focus specifically on preestablished parenting skills and fail to help parents gain an understanding of the effects of violence exposure on children and help those parents develop new parenting skills and interventions designed to help children overcome the negative effects of violence exposure. The purpose of this article is to provide an outline for a group counseling program that can meet the needs of parents who have children who have been exposed to violence and provide them with the tools necessary to promote the healthy development of their children.

\section*{Parenting Programs}

Parents are not always aware of the impact that violence exposure has on their children, and often they continue to employ disciplinary measures that are harsh and inconsistent. Because most children remain in the custody of their mothers following their exposure to violence in the home and/or community, programs that focus on assisting mothers with the acquisition of skills that will aid in the growth and development of their children are necessary.

The Parents of Children Exposed to Violence Group was developed to meet the needs of parents, especially mothers, and their children who are seeking to overcome the effects of violence exposure. The purpose of the group is to help parents improve their children’s potential for healthy psychological adjustment and growth. This group program was designed and implemented at the Child Abuse Council—Safe From the Start Program, in Moline, Illinois, which focuses on providing services to families with children who have been exposed to direct and/or indirect violence in the home and/or community. Through participation in this group, parents address...
issues related to the signs and symptoms of violence exposure in order to support a child’s recovery, communication skills, coping skills, guilt, anger management, and stress management. This group has been conducted with a diverse population that has included African American, Caucasian, and Latina mothers and has focused on issues involving mothers from different socioeconomic levels and marital statuses. Initial outcomes suggest that mothers who attend the group gain improved understanding of the effects of violence exposure on their children and gain improved and effective parenting skills.

Parents of Children Exposed to Violence Group

The Parents of Children Exposed to Violence Group consists of ten 1-hour counseling sessions focusing on developing knowledge, skills, and abilities to help parents and their children recover from the impact of violence exposure. The expected outcomes for this group include increased empathy by the parents for their children, improved parent-child interactions, increased communication in the parent-child dyad, more effective coping skills for anger, guilt, and stress related to violence exposure, and improved parenting skills. The counseling sessions are structured with goals leading to expected outcomes for the group. Each group session starts with an opening activity followed by the topic, process, and summary.

The first counseling session involves learning and identifying the signs and symptoms of violence exposure by children. The goals of the session involve developing structure, understanding group confidentiality, giving information on exposure to violence and recovery, helping caregivers gain support from the group, and assisting their children in recovery. The first activity is an icebreaker that utilizes a beach ball covered with different questions about the participants’ favorite things. When each participant catches the ball, that participant has to answer the question that his or her thumb touches and tell his or her name. The participant then has to throw the ball to another group member, and this process continues with each group member. This activity continues until all group members have had a turn. Following this activity, group members process How to Grow in Group, a handout. The group schedule, duration, and attendance expectations are explained. Following the discussion of group norms, participants engage in a responsive discussion about PTSD and other signs and symptoms of violence exposure. The first session ends with practical process and self-reflection.

The second and third group sessions focus on caregivers’ support of their child’s recovery. The second session opening activity is called Interview and Introduce our neighbor. During this activity, each participant interviews the person on his or her left and asks three questions about him or her and then introduces the participant to the group. After all interviews are completed, participants learn how to identify and respond to infant and toddler grief. Participants then view and process the video, Through My Eyes (Office for Victims of Crime, 1999). This session ends with a review of ideas learned during group.

The third group session begins with the activity My Own Uniqueness (Khalsa, 1996). Participants use “I” statements to complete each sentence on the activity sheet and then share these responses with the group. The techniques of focused attention, eye contact, appropriate physical contact, and discipline, which could aid the caregivers in supporting their child’s recovery, are presented and processed (Campbell, 1992). Group members also summarize these techniques to check for understanding. The group ends by preparing to discuss communication styles, which will be the next session’s topic.

Communication, the fourth session’s topic, begins with a phone line activity in which the group leader whispers directions into the ear of the participant to the left. Every participant has to whisper the same directions into the ear of the next participant until all participants are given the directions. The last participant then tells the group the directions. The end directions and the beginning instructions are compared for accuracy, and the group processes the experience. Communication styles are discussed and processed. Participants discuss and process ways to talk to their children about their violence exposure. The group ends with a summary of the session.

The fifth session’s topic centers on caregiver coping skills. The group starts with a cookie icebreaker. Each participant chooses a decorative cookie that reminds him or her of someone special in his or her life. They then explain why they chose their cookie. The group continues with a discussion of What Matters Most? Group members discuss and process life goals, the importance of self-care in recovery, and how to prioritize tasks into manageable components. This group ends with a summary of the session.

The sixth session focuses on the issue of guilt surrounding violence exposure. The session begins with an icebreaker, and then the group watches the video, The Children Are Watching (ABC News, 1995). The group processes the reactions of the children in the video, their own feelings about the caregivers’ role in creating a safe environment for their children, and their self-awareness about the children’s exposure to violence. This group concludes with a session summary.
The seventh session focuses on anger surrounding violence exposure. It starts with an icebreaker activity that involves questions about a current month (e.g., Women’s History Month). Next, a discussion concerning anger management takes place using the Anger Management Workbook (Carter & Minirth, 1993). Participants process how anger has impacted their lives and their children’s recovery from exposure to violence. Each participant concludes the session by describing how his or her life will be different as a result of applying new understanding about anger and its effects on others.

Session eight assists participants with learning to manage stress in order to be more effective with parenting, violence exposure recovery, and improved self-care. The activity is a check-in that asks, “If your past week was a forecast, what would it have been?” After all participants respond, they are told the topic, stress management, and engage in an open discussion of the definition of stress, its emotional impact, and its physical manifestations. Following the group process on stress, participants are taught progressive muscle relaxation, and they discuss other ways they can reduce stress in their lives.

The ninth session prepares participants for termination and focuses on parenting. Participants are arranged in seats according to their birthdays, starting with January and continuing through December. Participants then relate their most embarrassing or funniest parenting stories. Participants receive the Violence Prevention Resource Guide for Parents (Patten & Robertson, 2001) and process how they can use this information to improve their parenting skills. Participants also process how this information applies or does not apply to their specific violence exposure situations. This session ends with a wrap up focused on participants’ thoughts and feelings about termination of the group.

The tenth session begins with the activity, Handin’ Out Props! Participants are given slips of paper, a brown paper bag, a pencil, and then told to write at least two positive statements about each participant using a slip of paper for each one (which are called props). Participants put individual participant’s props into his or her bag and continue until every participant has been “propped.” Relaxing music is played during the termination session. The group members are encouraged to take their prop bags with them and take out one prop per day, as needed, or at times when they need encouragement. The conclusion of the group focuses on questions such as “In what ways has this group helped you and your family?” “What will you do differently as a result of this group?” “What new things have you learned as a result of this group?”

**Conclusion**

This group provides participants with the opportunity to learn about the effects of violence exposure on children and helps parents learn how to help their children and the family recover. Research is needed to study the outcomes of the group and to determine the extent to which the goals are achieved. Groves (1999) suggested that program evaluations can provide important information concerning the standards of good treatment, successful parent-involvement strategies, and the long-term benefits of group participation. Martin (2002) also suggested that “health care professionals can help educate families and communities to the pernicious effects of exposure to domestic violence and prevent intergenerational patterns of family violence” (p. 14). These words of one group participant provide anecdotal evidence of the group’s success: “I was not aware how my child was affected by his exposure to violence or what I needed to do to help him and my family recover.”

**References**


