
DIVERSITY TRAINING MANUAL

SECTION TWO

EXPLORING THE ISSUES

- 2.1 THE EFFECTS OF DOMESTIC VIOLENCE ON CHILDREN
- 2.2 THE INTERFACE BETWEEN CHILD ABUSE AND DOMESTIC VIOLENCE
- 2.3 ACCESSIBLE AND EQUITABLE SERVICE DELIVERY

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THE EFFECTS OF DOMESTIC VIOLENCE ON CHILDREN

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2.1

INTRODUCTION

For many years children have been the silent, almost invisible, victims of domestic violence. Phrases such as “witnessing domestic violence” have added weight to the myth that children passively observe the physical, sexual and verbal abuse of their parents/care givers without being affected. The rationale was that, so long as children were not directly physically or sexually abused themselves, the effect on them was negligible. However, when looking at the ways in which children experience the domestic violence occurring within the family, it becomes clear that the potential for them to be negatively affected is more likely than not.

Throughout this resource manual the term 'witnessing' domestic violence, will be used sparingly and the more meaningful terms "child victim" or "children affected by domestic violence" or "children's experiences of domestic violence" will be used interchangeably. This serves to more accurately reflect the degree to which children are affected by living in a home where domestic violence is prevalent.

2.1.1

EXPOSURE TO DOMESTIC VIOLENCE: CHILDREN'S EXPERIENCES

The following are some of the ways in which children may be exposed to violence between family members:

- Watching an abusive parent/care giver whilst they destroy, or damage property or belongings
- Listening to violent arguments and/or hearing their mother being sexually abused
- Being forced to insult, injure or humiliate their mother
- Observing their mother being subject to racial abuse such as name-calling, insults or derogatory comments about her religion, the colour of her skin, her race or ethnicity
- Listening to an abusive parent/care giver threatening to kill or maim a family pet

- Hearing their mother being threatened with deportation back to her country of origin. This threat is even more detrimental when it is accompanied with the claim that the children will remain here and the mother will not see or have access to her children again.
- Being used to spy or check up on the mother, or pass messages on and report her whereabouts. This can continue after the mother leaves the abusive relationship at contact or visitation times.
- Being blamed for the violence – if the child "behaved better", "weren't so cheeky", or "cleaned up" after themselves the violence would not have happened.
- Observing the abuse of a significant other/attachment figure by another significant other/attachment figure. For example, a father abusing the child's grandmother.

(Domestic Violence Resource Centre, 2001, p.2).

The following examples show how the reality of domestic violence can insidiously pervade a child's life experience:

- A father held a six-week-old baby over a first floor balcony in order to try and prevent the mother from leaving after he had hit her.
- A father made his seven-year-old son kick and punch the child's mother despite the child's protestations and crying. "He made them kick and punch me and they did because they were so frightened of him".
- A woman allowed the father regular visits to the child, but when she refused his sexual advances and told him to leave her house, he choked and stabbed her in front of their three-year-old-son.
- " He would come in and rip my mother's clothes off. He tried to strangle her, just to beat her up... We were always watching it... he used to tell us to get back to bed".
- " A lot of times I just heard it from the bedroom, and once (my sister) and I heard it, and we were just crying our eyes out for my Mum, you know, she just sounded so

desperate downstairs... crying and screaming”.

- “ It was depressing, my mother was always on edge, scurrying around. And I was frightened as well, every time he was there, thinking, oh, what’s he going to do today? Is he going to knife her or what?”

(Hester, Pearson & Harwin, 2000, p.33).

2.1.2

CHILDREN’S RESPONSES TO EXPOSURE TO DOMESTIC VIOLENCE

Kerouac (1986) reported that children display a number of behaviours in response to violent episodes. For example, during a violent episode children may:

- Become emotionally distressed – crying, frightened, scared
- Shout at their parents/care givers to stop
- Try to physically intervene to stop the fighting
- Plead in their mother’s favour – bargain for the violence to stop
- Become withdrawn and silent
- Leave the room or hide
- Seek attention through behaviours such as being aggressive or excessively noisy (this is usually done to distract the parents and stop the fighting)

After the violent episode has occurred children often seek comfort from their mother or care giver and in some cases they may offer their mother comfort and support. In severe cases children may be required to enlist support or help for their mothers as her injuries may require medical attention.

How children react to, and are affected by domestic violence

Because children experience domestic violence in different ways the consequences can vary enormously. The impact can manifest behaviourally, physically and/or psychologically and may affect the child's development in the short and/or long term. Some of the ways in which children can be affected by, and react to, domestic violence are:

- Physical injuries, including bruises, broken bones
- Bed wetting or soiling even though previously toilet trained
- Psychosomatic illnesses such as headaches, tummy pains, stuttering
- Behavioural problems – running away, being cruel to animals, making up stories, defiant behaviour, repetitive play, risk taking behaviours
- Anxious or fearful behaviour – feeling unsafe and unprotected, hyper-vigilance
- Aggressive language, or behaviour
- Developmental delays and poor school grades. This is mainly due to an inability to pay attention or focus on tasks
- Nervous or withdrawn behaviour – difficulty in communicating, inability to trust others, lacking in self-confidence
- Advanced in maturity and in sense of responsibility - being protective of mother, siblings – physically intervening, getting help
- Disturbed sleep - nightmares, difficulty in falling asleep, constant waking, fear of the dark
- Some children/young people are attracted to drugs ie. cigarette smoking, marijuana usage and the abuse of prescription medication
- Difficulty forming and maintaining friendships, poor social skills
- Highly developed social skills – communication
- Lacking in confidence, poor self-esteem and self-image
- Sadness or depression
- Eating disorders – over eating or under eating
- Self harming behaviours

Generally, these effects are categorised as either externalising or internalising behaviours.

Ø (Refer to Appendix for OHP 1)

Other influencing factors can include:

- The level and frequency of violence
- If the child directly observed the violence
- The myriad of ways in which children may be exposed to the violence
- Whether or not the child, or the child's mother, was injured as a result of the violent episode
- The presence of maternal stress – stressful life events and/or family crisis
- The level of emotional support or deprivation
- The severity of the violence
- If the style of parenting is consistent and appropriate
- If a parent/child bond has been established

(Family Violence Professional Education Taskforce, 1994, p.211).

Long-term effects for children who experience domestic violence

Are there negative long-term effects for children who experience domestic violence?

- In a comparative study of a group of women who experienced family violence as children and a group of women who did not, it was found that the former group had higher levels of social maladjustment, poorer attachment to significant people in their lives and a perceived lack of social support (Henning cited in Kashani & Allan, 1998, p.39).
- An American study found that witnessing violence as a child was associated with adult reports of trauma-related symptoms, depression, low self-esteem amongst women and trauma-related symptoms among men (Silvern cited in Edleson, 1996, p.7).

For further information on studies about the long-term effects of domestic violence refer to: Hester, M., Pearson, C. & Harwin, N. (2000). *Making an impact: Children and Domestic Violence*. London: Jessica Kingsley Publishers Ltd.

2.1.3

FACTORS THAT INFLUENCE CHILDREN'S EXPERIENCES

The following three factors that may influence children's experiences of, and reactions to, domestic violence are explored:

- Gender
- Cultural practices
- Age/developmental stage

Gender

Historically, social, legal and economic structures have influenced the way in which society constructs gender stereotypes. These in turn become the social and cultural "norms" for men and women to follow. The way in which a society defines and values "masculinity" and "femininity" affects the way in which family violence is understood and responded to within a culture.

Therefore, when practitioners are working with women from cultures other than their own, it is important for the practitioner to place the woman's experiences of domestic violence within her cultural context, rather than the cultural context of the practitioner. This enables the practitioner to enhance her / his understanding of that individual woman's experience of domestic violence and provide support and intervention in a way that affirms rather than undermines her cultural identity and assists her to take action and make choices accordingly. (Family Violence Professional Education Taskforce, 1994, p.167).

Traditionally, in many cultures, gender stereotypes are depicted in the following ways:

Men are often depicted in cultural representations of masculinity as powerful, dominant and authoritative.

Women, in contrast, are often depicted in a way described as "emphasized femininity" where they are portrayed as mothers, nurturers and often the focus is on their looks, clothes and sexuality.

(Family Violence Professional Education Taskforce, 1994, p.19).

Gender is an influencing factor, but its impact varies considerably. This is because there is no straightforward or single common response to the way in which boys and girls deal with their experiences of domestic violence.

Children do not generally respond in stereotypical gendered ways to domestic violence. However, gender is an important factor to be considered especially in relation to the child's age and stage of development.

Research has shown that, among preschoolers, gender does not seem to be a significant factor in the impact of witnessing violence amongst intimate family members. However, as the child becomes older, gender difference emerges as an issue, with males in particular, tending to display more aggressive, defiant (externalising) symptoms. Whereas females seem to have better coping skills than males after experiencing spousal violence (Kashani & Allan, 1998, p. 44).

Regardless of whether or not children adopt aggressive behaviours as a result of witnessing and experiencing domestic violence, some of the most likely and most undesirable consequences of living with domestic violence, for all children, irrespective of their cultural background, are that they may learn the following:

- It is acceptable for men to abuse women, including husbands to hit wives
- Violence is an acceptable way of coping with stress
- There are few, if any, consequences for violent acts
- It is possible to love and inflict pain at the same time
- Inequality in relationships is normal
- Violence is an appropriate tool for conflict resolution
- Men are strong, tough and capable whereas women are seen as weak and vulnerable

(Family Violence Professional Education Taskforce, 1994, p.212)

Ø (Refer to Appendix for OHP 1).

The 'transgenerational transmission' of violence

Many studies assert that boys who witness domestic violence are more likely to become abusive to women in their adult life. This belief is reinforced by the premise of social learning theorists who say that girls identify with, and model their mother's passive "victim" behaviour and boys copy their father's violent behaviour and adopt externalised responses.

However other recent studies indicate that the inevitability of this occurring is not conclusive. Whilst most abusers have been abused as children, it is not necessarily the case that most abused children will grow up to be abusive or continue to be victims of abuse.

- There is a strong argument that says boys will not always copy their father's violent behaviours and girls will not necessarily become victims of domestic violence. Smith (1998) supports this view and suggests that only about 30% of male children grow up to become perpetrators of violence themselves (cited in Boyd, 2000, p.8).
- There is a general acceptance that boys have a propensity towards externalizing behaviours such as hitting out, aggressive play and language. However, it has been established that both boys and girls can react in externalizing and/or internalising ways at different times (Hester, Pearson, & Harwin, 2000).
- Literature suggests that there is an increased risk that children from violent homes will go on in later life to perpetuate abusive behaviours in a domestic context. In addition, children who experienced abuse themselves, coupled with witnessing family violence, are at the greatest risk (Family Violence Professional Education Taskforce, 1994, p.213).
- Kaufman and Zigler (1987) say that the child who experiences abuse themselves is at risk of becoming abusive but the link between the two points is far from direct or inevitable (cited in Kashani & Allan, 1998, p10).

It is important not to forget that children from both genders are also exposed to community violence and violence portrayed over popular

- Instill fear in the children that they may be separated from their mother by the police and returned to him
- Undermine the child's sense of safety by telling them that they will be ostracized or rejected by their extended family because they have left their family home
- Make derogatory racial comments about the mother and child/children's colour, religion, appearance, foods, language, accent, or beliefs

Developmental factors

Domestic violence may contribute to poor developmental outcomes for children. Research has found that domestic violence is significantly associated with greater immaturity and inadequacy among both boys and girls (Jouriles, Murphy & O'Leary cited in Edleson, 1996, p 6), and that children residing in domestic violence shelters had significantly lower verbal and quantitative skills when compared to a national sample (Westra & Martin, 1981, pp.41-54).

Care needs to be taken when analyzing this information because there are many other variables that could be contributing to these findings. The family's socio-economic status, ethnicity, immigration status, length of time of resettlement in Australia, previous experiences of war or persecution, may significantly affect how, or if, families have access to education and information and this in turn would affect how they rate on verbal and quantitative skills tests.

In addition, children often find the transition to refuge life difficult and this may influence how they interact with and socialise with others in refuge. This behaviour change is often quite independent of their experiences of domestic violence (Kashani & Allan, 1998, p.39).

The following is a brief summary of possible effects of domestic violence at different ages and stages (Rendell, 2000, pp.1-6):

Pre and post-natal:

Children subjected to pre and post-natal violence have been known to experience a range of effects, including low birth weight, miscarriage,

abortion and stillbirth. A study conducted at the Royal Women's Hospital, Brisbane, demonstrated that women living with domestic violence were more likely to be prescribed medication during pregnancy and that the incidence of asthma and epilepsy was higher among this group. They were also more likely to use tobacco, alcohol, minor tranquillisers and non-prescription pharmaceuticals, all of which may jeopardise the health of the baby (Webster, Sweet & Stolz cited in Rendell, 2000, p.1).

Infants:

Infants are reactive to their environment. When distressed they cry, refuse to feed, or withdraw, and are particularly susceptible to emotional deprivation. They are extremely vulnerable.

Toddlers:

Toddlers can have behavioural problems such as frequent illness, severe shyness, low self-esteem and trouble in day care, as well as social problems such as hitting, biting or being argumentative.

Preschoolers:

Children believe that everything revolves around them and is caused by them. If they witness domestic violence or abuse, they often believe that they have caused it.

Primary school:

Young children begin to learn that violence is an appropriate way of resolving conflict in human relationships. They often have difficulties with schoolwork. Girls at this age group have been found to have the highest clinical levels of aggression and depression.

Adolescents:

Adolescents see the violence as their parents' problem and they often regard the victim as being responsible. Ongoing conflict between parents has a profound influence on adolescent development and future adult behaviour, and can be the strongest predictor of violent delinquency (James, 1994).

Domestic violence can affect children's social and emotional development significantly. During consultation with practitioners in the development stage of this Diversity Training Project it became apparent that many practitioners had observed that the children they come into

2.1.5

TYPES OF ABUSE THAT WOMEN EXPERIENCE, AND HOW IT AFFECTS THEIR CHILDREN

Even if children are not directly physically harmed as a result of domestic violence, they may be harmed emotionally or psychologically, or their needs may be neglected due to turmoil in the family. These effects on children can be seriously detrimental to their physical or social development, in the short-term or long-term.

The following categories of abuse are frequently used to describe the types of abuse experienced by women. In this instance the categories are used to explore the ways in which different types of abuse can affect children.

Physical

It is very distressing for children to be exposed to either hearing or viewing the abusive parent/care giver assaulting their mother. Adults may intentionally physically harm children or children may be inadvertently injured when trying to intervene between their parents or care givers. Children may have been used as a shield by the abusive parent, so that the victim of the abuse cannot retaliate in self-defense.

Sexual

Children may be forced to watch their mother being sexually abused or they may hear what is happening through closed doors. This has a psychological and emotional impact on the child.

Emotional

Each form of abuse affects children on an emotional level. They may experience feelings of fear, anger, sadness, frustration and loneliness. Children often hear verbal abuse such as "put downs" and constant criticism directed at their mother/care giver. They may also be shouted at, or threatened with future violence, either to themselves or their mothers, and in some instances are blamed or held responsible for the actions of the perpetrator. Further to this, children can be emotionally neglected in homes where domestic violence occurs. The abusive adult may not support, encourage or protect the child, and similarly the victim / survivor may not have the energy, confidence, or resources to adequately provide for and nurture the child.

Financial

The needs of children may be neglected or ignored when the abusive parent withholds financial assistance to the family in order to control them. Children may not be able to participate in school activities or have the necessary books and school supplies they require. In some cases children may not have enough food to eat.

Cultural/racial/spiritual

At the core of domestic violence is the perpetrator's desire to exercise power and control over his family and his belief that he has every right to do so. As a means of exercising control, children, and their mother, may be denied the right to attend their chosen religious/cultural ceremonies, festivities or rituals. They may also be criticised for their beliefs, ridiculed for their language, ethnicity, or physical features and/or skin colour. This is a form of emotional abuse of children.

Refer to the Appendix for "Activity 1 - Discussion" which has been designed to explore how these different types of abuse can affect children, and the additional cultural implications which may be present for children from non-English speaking backgrounds.

2.1.6

PROTECTIVE FACTORS

Where there is domestic violence in the family home, it is hard to imagine how children cope with and survive such adversity. However, it appears that many children have the capacity and resilience to adjust to their life circumstances with little apparent negative effect.

The terms "risk factors" and "protective factors" are often used to describe the elements that either (1) place a child at risk of injury or of developing behavioural, developmental, or learning problems, or which (2) protect them despite their exposure to domestic violence, stress or trauma. Current thinking focuses on identifying whether or not the child is potentially at risk, and determining the internal and external sources of support the child has for protection.

- Children often display “acting out” or externalizing behaviours such as loud or noisy play, or verbal and physical aggression towards others including their mothers and siblings.
- Children may also become withdrawn and quiet. This may often be overlooked as a concern because the child is viewed as being “good” or “well behaved”, when in actual fact the child may be in distress.

Secrecy

Children who live in a battering relationship experience the most insidious form of child abuse. Whether or not they are physically abused by either parent is less important than the psychological scars they bear from watching their fathers beat their mothers. They learn to become part of a dishonest conspiracy of silence. They learn to lie to prevent inappropriate behaviour, and they learn to suspend fulfilment of their needs rather than risk another confrontation. They extend a lot of energy avoiding problems. They live in a world of make-believe (Walker, 1984, p.46).

Many children living with domestic violence learn from an early age that the violence must be kept a secret at all costs. Children learn to use a range of strategies to prevent disclosure.

- Many children lie or invent stories to maintain the secret because they are protecting their mothers or the abusive parent/care giver
- Children often go to great lengths to hide the reality of what is happening in their homes. This can be because they are fearful of the consequences of sharing their secret with anyone (Hester, Pearson & Harwin, 2000, p.136).

Acting out / adopting aggressive behaviours

Children who are exposed to violence on a regular basis cope with the emotional turmoil in a variety of ways. It is unreasonable to expect that children will cope in a uniform way to domestic violence. Some children will respond by acting out or being aggressive in an effort to protect themselves. This may be the most competent response they have to deal with their fears. Other children may become hyper-vigilant

and unable to relax. These behaviours are often viewed negatively by adults. However, for the child these behaviours are effective and appropriate coping mechanisms.

Many children described as “unruly” or “hyperactive” are in fact responding to traumatic life events in a way that assists them to feel safe and protected. Their behaviours allow them to cope with what they have experienced.

Children from non-English speaking backgrounds who live in a domestic violence context may experience added layers of distress due to the grief, loss, trauma and disorientation associated with their immigration, refugee, and resettlement experiences. In addition they may experience discrimination and/or racism and confront other disadvantages associated with their position in society as members of a minority group, language differences, etc. With these additional stresses to deal with, many such children may react to, or cope with, domestic violence in a variety of ways including aggressive or acting out behaviours.

The key to assisting a child to cope in more socially acceptable ways lies in a practitioner:

- being alert to the possibility that domestic violence is present in their homes
- conveying acknowledgement of the difficulties they may face in disclosing the domestic violence
- assisting them to identify and discuss the domestic violence
- conveying an understanding of the emotional turmoil they may be experiencing as a result of the domestic violence
- conveying an understanding of the child's environmental context, including any immigration / refugee / resettlement / cultural factors which may be the source of additional stresses for the child.

- There may not be an accredited interpreter available in the child's first language, particularly if the child is from a small, newly arrived refugee community.
- Children may have a limited understanding of domestic violence, or may see it as "normal".
- Some children may feel that they are in some way to blame for the violence.
- Children may fear for their own safety and for their mother's safety should she confront the abusive male.
- Children may fear that parents will withdraw their love if they disclose the abuse.
- Children may fear being ostracised from their extended family.
- Many children are scared of breaking up their family.
- Providing an opportunity for the child to speak about their experiences
- Providing a safe environment in which the child feels comfortable to disclose the domestic violence
- Assisting the child by asking if they know what domestic violence is. If they do, encouraging them to talk about it. If they don't, explaining the types of behaviours that constitute domestic violence (Refer to work sheet section of this resource manual for handouts and activities)
- The initial response to a disclosure is important. It is essential that the practitioner does not react negatively to the disclosure. For example, if the child reveals distressing information about physical, sexual or emotional abuse and the practitioners reacts with shock/horror the child may retract what they have said or stop talking about it

(For further information refer to section three "Working in a cross-cultural context" and section four "Working with children: A practical perspective".)

Facilitating children's disclosure of domestic violence

As previously discussed there is no specific way in which children react to, and are affected by, domestic violence. Therefore it is difficult for practitioners to gauge whether or not a child's "behaviours of concern" are related to general anxiety or anxiety specifically caused from their experience of domestic violence.

Practitioners could help children they suspect may be experiencing domestic violence by:

- Developing a trusting relationship with the child if the circumstances are suitable i.e. if the practitioner has regular access to the child (Refer to section 4 "Working with children: A practical perspective" for practical suggestions for developing rapport with children)
- Conveying an understanding of the emotional turmoil the child may be experiencing as a result of the domestic violence
- Conveying an understanding of the child's environmental context, including any immigration / refugee / resettlement / cultural factors which may be the source of additional stresses for the child.
- Communicating through an Interpreter if the practitioner and child are unable to communicate effectively in English

DIVERSITY TRAINING MANUAL

SECTION 2.1.10 THE EFFECTS OF DOMESTIC VIOLENCE ON CHILDREN EVALUATION SHEET

In order to gauge the effectiveness of section 2.1 we are asking participants to provide us with their valuable opinions, which will enable us to determine if the manual provides relevant and useful material to participants and, pending the availability of funding, make appropriate changes.

Please hand in your evaluation sheet at the time of training or complete and return your evaluation sheet to -

Immigrant Women's Support Service
Diversity Training Project – Evaluations
PO Box 5490, West End, Qld 4101

1. On a scale of 1-5 how would you rate the content of this section "The effects of domestic violence on children?"

1. Excellent 2. Very good 3. Good 4. Average 5. Poor

2. On a scale of 1-5 how would you rate the usefulness of the activities?

1. Excellent 2. Very good 3. Good 4. Average 5. Poor

3. If you believe that the section could be made more effective what changes could you suggest?

4. Do you work directly with children in domestic violence situations?

Yes

No

5. Do you think this section has assisted you to work more effectively with children from non-English speaking backgrounds affected by domestic violence?

Yes

No

ACTIVITY 1 **DISCUSSION**

Aim:

Practitioners are asked to explore how these types of abuse ie. physical, sexual, emotional, financial, cultural/racial/spiritual can affect and impact on children from non-English speaking backgrounds.

This activity enables practitioners to share their experiences, discuss previously held assumptions and acquire valuable knowledge and insight from other practitioners.

Strategies:

- Practitioners should break into five groups and nominate a scribe who can report back to the main group.
- Each group is to select one type of abuse from the headings ie. physical, sexual, emotional, financial, cultural/racial/spiritual.
- Trainer to provide groups with handouts with the corresponding type of abuse and discussion questions.
- Each group to take approximately 10 minutes for discussion of the questions.
- Scribes from each group then feedback small group findings to the larger group.
- Trainer to facilitate discussion and request feedback from participants - approximately 20 minutes.

Discussion Points:

- a) Discuss the ways in which a child may be affected by domestic violence perpetrated against the child's mother
- b) Discuss any additional stresses for the child which may arise from their immigration / refugee / resettlement experiences.

(Refer to Appendix for OHP 4 and Handouts 1-5).

OHP 1 **THE EFFECTS OF DOMESTIC VIOLENCE ON CHILDREN**

- Physical injuries, including bruises, broken bones
- Bed wetting or soiling even though previously toilet trained
- Psychosomatic illnesses such as headaches, tummy pains, stuttering
- Behavioural problems – running away, being cruel to animals, making up stories, defiant behaviour, repetitive play, risk taking behaviours.
- Anxious or fearful behaviour – feeling unsafe and unprotected, hyper-vigilance
- Aggressive language, or behaviour
- Developmental delays and poor school grades. This is mainly due to an inability to pay attention or focus on tasks
- Nervous or withdrawn behaviour – difficulty in communicating, inability to trust others, lacking in self-confidence
- Advanced in maturity and in sense of responsibility - being protective of mother, siblings – physically intervening, getting help
- Disturbed sleep - nightmares, difficulty in falling asleep, constant waking, fear of the dark
- Some children/young people are attracted to drugs ie. cigarette smoking, marijuana use and the abuse of prescription medication
- Difficulty forming and maintaining friendships, poor social skills
- Highly developed social skills – communication
- Lacking in confidence, poor self-esteem and self-image
- Sadness or depression
- Eating disorders – over eating or under eating
- Self harming behaviours

OHP 3 **PROTECTIVE FACTORS**

A child's resilience to their environmental stressors can be attributed to **three major protective factors**:

Attributes of the child

A child's temperament and personality is an important factor. Children with calm, easy-going, sociable dispositions who are self-confident and willing to take initiative have a special capacity to adapt to change and elicit positive responses from others.

Support from within the family – extended family

Children who have a close supportive relationship with a parent/relative who is able to provide affection and support to them have a greater potential for resilience to the negative impact of domestic violence. Such relationships often introduce order and organization into the child's life, and this can effectively foster resilience.

Social support from outside the family

A supportive teacher, care giver or family friend who has formed a special relationship with the child, and who listens, cares about and supports the child also assists a child to develop greater resilience to the impact of domestic violence.

Scenario

Mary is an experienced children’s counsellor and she is currently running a group work program for 6 children (4 boys and 2 girls). The counselling room is well resourced with a large range of toys, games, puzzles, and craft activities on display in the room. Mary is concerned about Carlos a 7- year- old boy from a non-English speaking background whose behaviour is disrupting the other children. Carlos speaks limited English but seems to communicate his needs effectively. However, he refuses to sit down during the group activities and instead prefers to walk around the room playing with and touching the equipment in the room. He is loud and boisterous and his attention span is limited; he finds it difficult to settle down to tasks. The other children are starting to become hostile towards Carlos.

Questions:

- 1** What could some of the reasons be for Carlos’ behaviour?
- 2** What could be some of the immigration / refugee / resettlement issues Mary should consider before developing an intervention?
- 3** What strategies could Mary develop to foster Carlos’ resilience?

HANDOUT 1 **PHYSICAL ABUSE** INFORMATION & DISCUSSION QUESTIONS

Physical

It is very distressing for children to be exposed to either hearing or viewing the abusive parent/care giver assaulting their mother. Adults may intentionally physically harm children or children may be inadvertently injured when trying to intervene between their parents or care givers. Children may have been used as a shield by the abusive parent, so that the victim of the abuse cannot retaliate in self-defense.

Discussion Points:

- a** Discuss the ways in which the abuse that the child's mother experiences affects the child

- b** How may the family's immigrant / refugee / resettlement experiences and cultural background impact on these experiences

HANDOUT 3 **EMOTIONAL ABUSE** INFORMATION & DISCUSSION QUESTIONS

Emotional

Each form of abuse affects children on an emotional level. Children often hear verbal abuse such as "put downs" and constant criticism directed at their mother/care giver. They may also be shouted at, or threatened with future violence, either to themselves or their mothers, and in some instances are blamed or held responsible for the actions of the perpetrator. Further to this, children can be emotionally neglected in homes where domestic violence occurs. The abusive adult may not support, encourage or protect the child, and similarly the victim / survivor may not have the energy, confidence, or resources to adequately provide for and nurture the child.

Discussion Points:

- a** Discuss the ways in which the abuse that the child's mother experiences affects the child

- b** How may the family's immigration / refugee / resettlement experiences and cultural background impact on these experiences.

HANDOUT 5 **CULTURAL/RACIAL/SPIRITUAL ABUSE** INFORMATION & DISCUSSION QUESTIONS

Cultural/racial/spiritual

At the core of domestic violence is the perpetrator's desire to exercise power and control over his family and his belief that he has every right to do so. As a means of exercising control, children, and their mother, may be denied the right to attend their chosen religious/cultural ceremonies, festivities or rituals. They may also be criticised for their beliefs, ridiculed for their language, ethnicity, or physical features and/or skin colour.

Discussion Points:

- a Discuss the ways in which the abuse that the child's mother experiences affects the child

- b How may the family's immigration / refugee / resettlement experiences and cultural background impact on these experiences