

Emerging Responses to Children Exposed to Domestic Violence

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“Communities across North America are significantly revising the way they think about children exposed to domestic violence. At local, county and state levels, communities are engaged in a variety of policy and programmatic actions to respond to these children and their families... We need to continue to develop multiple pathways into services and multiple responses by social institutions if we are to adequately address the needs of these children and help them to grow into emotionally and physically healthy adults.”

Applied Research papers synthesize and interpret current research on violence against women, offering a review of the literature and implications for policy and practice.

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Public attention to the effects of children’s exposure to adult domestic violence has increased over the last decade. This attention focuses on both the impact of the exposure on children’s development and on the likelihood that exposed children may be at greater risk for becoming either a child victim of physical or sexual abuse or an adult perpetrator of domestic violence. New research, policies, and programs focused on these children have resulted. These new efforts are reviewed in this document and an argument is made that the diversity of children’s experiences requires equally diverse responses from our communities.

Definitions of Domestic Violence and Exposure

Jouriles, McDonald, Norwood, and Ezell (2001) suggest that a number of issues affect how we define exposure to adult domestic violence. First, the types of domestic violence to which children are exposed may be defined narrowly as only physically violent incidents or more broadly as including additional forms of abuse such as verbal and emotional. Second, even within the narrower band of physical violence, there is controversy about whether we should define adult domestic violence as only severe acts of violence such as beatings, a broader group of behaviors such as slaps and shoves and psychological maltreatment, or a pattern of physically abusive acts (see Osthoff, 2002). Finally, despite documented differences in the nature of male-to-female and female-to-male domestic violence, should one and not the other be included in a definition when considering children’s exposure to such events?

Settling on the definition of domestic violence does not settle still other definitional questions that arise. For example, how is exposure itself defined? Is it only direct visual observation of the incident? Should our definitions also include hearing the incident, experiencing the events prior to and after the event or other aspects of exposure?

Throughout this paper the phrase “exposure to adult domestic violence” will be used to describe the multiple experiences of children living in homes where an adult is using physically violent behavior in a pattern of coercion against an intimate partner. Domestic violence may be committed by same-sex partners as well as by women against men. However, the available research on child exposure almost exclusively focuses on homes where a man is committing domestic violence against an adult woman, who is most often the child’s mother. Thus, unless otherwise identified, the studies reviewed here focus on heterosexual relationships in which the male is the perpetrator of violence.

The Impact of Exposure on Children

A 2008 national survey of 4,549 children ages birth to 17, funded by the U.S. Department of Justice’s Office of Juvenile Justice and Delinquency Prevention (OJJDP) and the Centers for Disease Control and Prevention (CDC), found that 6.2% of American children were exposed to DV in the past year. The same survey also found that 16.3% of children of all ages were exposed to DV since birth. Additionally, of older children - those 14 to 17 years of age - over a third (27%) reported they were exposed to DV in their lifetime (Finkelhor, Turner, Ormrod & Hamby, 2009).

Recent meta-analyses -- statistical analyses that synthesize and average effects across studies -- have shown that children exposed to domestic violence exhibit significantly more problems than children not so exposed (Kitzmann, Gaylord, Holt & Kenny, 2003; Wolfe, Crooks, Lee, McIntyre-Smith & Jaffe, 2003). We have the most information on behavioral and emotional functioning of children exposed to domestic violence. Generally, studies using the Child Behavior Checklist (CBCL; Achenbach & Edelbrock, 1983) and similar measures have found children exposed to domestic violence, when compared to non-exposed children, exhibit more aggressive and antisocial (often called “externalized” behaviors) as well as fearful and inhibited behaviors (“internalized” behaviors), show lower social

competence and have poorer academic performance. Kitzmann et al. (2003) also found that exposed children scored similarly on emotional health measures to children who were physically abused or who were both physically abused and exposed to adult domestic violence.

Another all too likely effect is a child’s own increased use of violence. Social learning theory would suggest that children who are exposed to violence may also learn to use it. Several researchers have examined this link between exposure to violence and subsequent use of violence. For example, Singer et al. (1998) studied 2,245 children and teenagers and found that recent exposure to violence in the home was significantly associated with a child’s violent behavior in the community. Jaffe, Wilson, and Wolfe (1986) have also suggested that children’s exposure to adult domestic violence may generate attitudes justifying their own use of violence. Spaccarelli, Coatsworth, and Bowden’s (1995) findings support this association by showing that adolescent boys incarcerated for violent crimes who had been exposed to family violence believed more than others that “acting aggressively enhances one’s reputation or self-image” (p. 173). Believing that aggression would enhance one’s self-image significantly predicted violent offending.

A few studies have examined longer-term problems reported retrospectively by adults or indicated in archival records. For example, Silvern et al.’s (1995) study of 550 undergraduate students found that exposure to domestic violence as a child was associated with adult reports of depression, trauma-related symptoms, and low self-esteem among women and trauma-related symptoms alone among men. They found that after accounting for the effects of being abused as a child, adult reports of their childhood exposure to domestic violence still accounted for a significant degree of their problems as adults. Exposure to domestic violence also appeared to be independent of the impacts of parental alcohol abuse and divorce. In the same vein, Henning et al. (1996) found that 123 adult women who had been exposed to domestic violence as a

children showed greater distress and lower social adjustment when compared to 494 non-exposed adult women. These findings remained even after accounting for the effects of witnessing parental verbal conflict, being abused as a child, and varying degrees of parental caring.

Children's Involvement in Violent Incidents

Studies have found that children respond in a variety of ways to violent conflict between their parents. Children's involvement in violent situations has been shown to vary from their becoming actively involved in the conflict, to distracting themselves and their parents, or to distancing themselves by leaving the room (Garcia O'Hearn, Margolin, & John, 1997; Peled, 1998). Children in homes in which violence has occurred were nine times more likely to verbally or physically intervene in parental conflicts than comparison children from homes in which no violence occurred (Adamson & Thompson, 1998). Edleson et al. (2003) found that 40 of 111 battered mothers (36%) reported their children frequently or very frequently yelled to stop violent conflicts; 13 (11.7%) of the mothers reported that their children frequently or very frequently called someone for help during a violent event; and 12 (10.8%) reported their children frequently or very frequently physically intervened to stop the violence.

More often young children appear to be present during domestic violence incidents than older children. Examining data on police and victim reports of domestic assault incidents, Fantuzzo and colleagues (Fantuzzo, et al., 1997) found that in all five cities studied, children ages 0 to 5 years were significantly more likely to be present during single and recurring domestic violence incidents. Children's responses to violent events appear to also vary with age (Cummings, Pellegrini, Notarius, & Cummings, 1989). In one early study, even children ages one to two and a half years responded to angry conflict that included physical attacks with negative emotions and efforts to become actively involved in the conflicts (Cummings, Zahn-Waxler, & Radke-Yarrow, 1981).

These findings have led many to conclude that every child exposed to domestic violence is significantly harmed by the experience. Yet, as the section below will show, many children appear to survive such exposure and show no greater problems than non-exposed children.

Protective Factors in Children's Lives

Most would be convinced by the afore mentioned studies that children exposed to adult domestic violence would all show evidence of greater problems than non-exposed children. In fact, the picture is not so clear. There is a growing research literature on children's resilience in the face of traumatic events (see, for example, Garnezy, 1974; Werner & Smith, 1992; Garnezy & Masten, 1994). The surprise in these research findings is that many children exposed to traumatic events show no greater problems than non-exposed peers, leading Masten (2001) to label such widespread resilience as "ordinary magic".

The studies of exposed children reviewed earlier compared groups of children who were either exposed or not exposed to adult domestic violence. The results reported were based on group trends and may or may not indicate an individual child's experience. Graham-Bermann (2001) points out that, consistent with the general trauma literature, many children exposed to domestic violence show no greater problems than children not so exposed. Several studies support this claim. For example, a study of 58 children living in a shelter and recently exposed to domestic violence found great variability in problem symptoms (Hughes & Luke, 1998). Over half the children in the study were classified as either "doing well" (n=15) or "hanging in there" (n=21). Children "hanging in there" were found to exhibit average levels of problems and self-esteem and some mild anxiety symptoms. The remaining children in the study did show more severe problems: nine showed "high behavior problems", another nine "high general distress" and four were labeled "depressed kids". In another study, Grych et al. (2000) found that of 228 shelter resident children

studied, 71 exhibited no problems, another 41 showed only mild distress symptoms, 47 exhibited externalized problems, and 70 were classified as multi-problem.

How does one explain these great variations among exposed children? Both of the above studies were based on children living in battered women's shelters. On the one hand, these children may have been exposed to more severe violence than a community-resident sample of exposed children. On the other hand, shelter-resident children may also have greater protective social supports available to them when studied. There are also likely a number of protective assets and risk factors that affect the degree to which each child is influenced by violence exposures.

The resilience literature suggests that as assets in a child's environment increase, the problems he or she experiences may actually decrease (Masten & Reed, 2002). Protective adults, including the child's mother, relatives, neighbors and teachers, older siblings, and friends may all play protective roles in a child's life. The child's larger social environment may also play a protective role if extended family members or members of church, sports or social clubs with which the child is affiliated act to support or aid the child during stressful periods. Harm that children experience may also be moderated by how a child interprets or copes with the violence (see Hughes, Graham-Bermann & Gruber, 2001). Sternberg et al. (1993) suggest that "perhaps the experience of observing spouse abuse affects children by a less direct route than physical abuse, with cognitive mechanisms playing a greater role in shaping the effects of observing violence" (p. 50).

Children also experience differing levels of other risk factors, as the following section will reveal.

Risk Factors in Children's Lives

One risk factor that leads to variation in children's experiences is the great variation in severity, frequency, and chronicity of violence. Research has

clearly documented the great variation of violence across families (see Straus & Gelles, 1990). It is likely that every child will be exposed to different levels of violence over time. Even siblings in the same household may be exposed to differing degrees of violence depending on how much time they spend at home. Increases in violence exposure may pose greater risks for children while decreases may lessen these risks.

A number of additional factors seem to play a role in children's exposure and interact with each other creating unique outcomes for different children. For example, many children exposed to domestic violence are also exposed to other adverse experiences. In a study of 17,421 patients within a large health maintenance organization, Felitti, Anda and their colleagues (Dube, Anda, Felitti, Edwards, & Williamson, 2002) found that increasing exposure to adult domestic violence in a child's life was associated with increasing levels of other "adverse childhood experiences" such as exposure to substance abuse, mental illness, incarcerated family members and other forms of abuse or neglect. This finding points to the complexity of exposed children's lives. For example, many exposed children are also direct victims of child abuse (Appel & Holden, 1998; Edleson, 1999; Hughes, Parkinson, & Vargo, 1989; McClosky, Figueredo, & Koss, 1995). Again, in a study of adverse childhood experiences, Felitti, Anda and their colleagues (Whitfield, Anda, Dube, & Felitti, 2003) found that among the 8,629 HMO patients studied, men exposed to physical abuse, sexual abuse, and adult domestic violence as children were 3.8 times more likely than other men to have perpetrated domestic violence as adults.

Problems associated with exposure have been found to vary based on the gender and age of a child but not based on his or her race or ethnicity (Carlson, 1991; Hughes, 1988; O'Keefe, 1994; Spaccarelli et al., 1994; Stagg, Wills, & Howell, 1989). The longer the period of time since exposure to a violent event also appears to be associated with lessening problems (Wolfe, Zak, Wilson, & Jaffe; 1986).

Finally, *parenting* has also been identified as a key factor affecting how a child experiences exposure. More data are available on battered mothers and their caregiving than on perpetrators and theirs. Unfortunately, at times the over reliance on data collected from and about battered mothers may lead to partial or inaccurate conclusions. For example, it may be that the perpetrator's behavior is the key to predicting the emotional health of a child. *By not collecting data about the perpetrators, we may incorrectly conclude it is the mothers' problems and not the perpetrators' violent behavior that is creating negative outcomes for the children.*

Given this imbalance in the research, the available studies reveal that battered mothers appear to experience significantly greater levels of stress than nonbattered mothers (Holden & Ritchie, 1991; Holden et al., 1998; Levendosky & Graham-Bermann, 1998) but this stress does not always translate into diminished parenting. For example, Levendosky et al. (2003) found that among the 103 battered mothers they studied many were "compensating for the violence by becoming more effective parents" (p. 275).

What little research there is on violent men shows that they have a direct impact on the parenting of mothers. For example, Holden et al. (1998) found that battered mothers, when compared to other mothers, more often altered their parenting practices in the presence of the abusive male. Mothers reported that this change in parenting was made to minimize the men's irritability. A survey of 95 battered mothers living in the community (Levendosky, Lynch, & Graham-Bermann, 2000) indicated that their abusive partners undermined the mothers' authority with their children, making effective parenting more difficult. In an earlier qualitative study of one child support and education group program, Peled and Edleson (1995) found that fathers often pressured their children not to attend counseling when mothers were seeking help for their children. Finally, the relationship between the child and the adult perpetrator appears to influence how the child is affected by exposure. A recent study

of 80 mothers residing in shelters, and 80 of their children revealed that an abusive male's relationship to a child directly affects the child's well-being, without being mediated by the mother's level of mental health (Sullivan et al., 2000). Violence perpetrated by a biological father or stepfather was found to have a greater impact on a child than the violence of nonfather figures, such as partners or ex-partners of the mother who played a minimal role in the child's life.

Public Policy Responses

Laws relating to child exposure to domestic violence have changed considerably in the last decade. These laws focus most often on criminal prosecution of violent assaults, custody and visitation decision-making, and the child welfare system's response (Lemon, 1999; Mathews, 1999; Weithorn, 2001).

Criminal prosecution of violent assaults

There are several examples of recent legislative changes in criminal statutes that directly respond to concerns about the presence of children during domestic violence assaults (see Dunford-Jackson, 2004; Weithorn, 2001). In a number of states, laws have been changed to permit misdemeanor level domestic assaults to be raised to a felony level charge. In Oregon, a domestic violence assailant can now be charged with a felony assault if a minor was present during the assault. "Presence" is defined in Oregon as in the immediate presence of or witnessed by the child. Another example of changes in criminal prosecution is legislation in at least 18 states that allows more severe sanctions to be imposed on a convicted domestic violence assailant when minors are present during the attack. Assaults committed in the presence of a minor are considered as only one factor that may influence the sanctions imposed in most of the states. Finally, Utah and at least two other states have taken a different approach by defining the presence of a minor during a domestic violence assault as cause for a separate misdemeanor charge.

On the one hand these new laws are likely to increase the attention of the police, prosecutors, and courts when children are present during domestic violence incidents. Greater sanctions are likely to be imposed when it is perceived that there is more than one victim of the adult domestic assault, namely the children. On the other hand there is concern about these changes on a number of levels (Dunford-Jackson, 2004). First, given the increasingly scarce resources of police agencies and prosecutors' offices, there is concern that attention will focus primarily on cases where children are present because of the likelihood that this factor will increase convictions or guilty pleas. One resulting fear is that children will be brought into court more often to testify in such cases. Another fear is that battered women without children will receive less attention to their cases because police and prosecutors will see them as weaker cases. Finally, many argue that if current criminal statutes were enforced more consistently there would not be a need for these additional laws focused on children. Finally, a particular concern about Utah's legislation is that it may be used against battered mothers for "failing to protect" their children from an assailant.

There is little research on the impact of these criminal statute changes. In one of the few studies of these laws, Whitcomb (2000) surveyed 128 prosecutors in 93 jurisdictions across the U.S. by telephone regarding their work with children exposed to violence and the impact of new laws regarding them. She also conducted face-to-face interviews in five jurisdictions to shed more light on the telephone surveys. She found that: (1) none of the jurisdictions had protocols governing the prosecution of domestic violence and child maltreatment in the same families; (2) prosecutors in jurisdictions in which laws were in place regarding children's exposure to domestic violence were more likely to report domestic violence cases to child protection agencies, but no more likely to prosecute mothers for "failure to protect;" (3) prosecutors were seeking enhanced penalties in domestic violence cases when children were also present, even in jurisdictions where no new laws regarding children

exposed to domestic violence were in place; and (4) 75% of the prosecutors interviewed said they would not report or prosecute a mother for failing to protect her children from exposure to her own victimization, and the remaining prosecutors said they would only do so when there were additional factors indicating extreme danger to the child. Whitcomb's research is clearly a starting point, but a great deal more research is needed on these law changes and both their intended and unintended consequences for battered mothers and their children.

Custody and visitation disputes

Most states now include the "presence of domestic violence" as a criterion that judges may use to determine custody and visitation arrangements when disputed. In most jurisdictions, here and in other Western countries, there has been an assumption that both parents have the right and ability to share custody and visitation of their children (Eriksson & Hester, 2001). In approximately about two dozen states, however, this presumption has been reversed in what are commonly referred to as "rebuttable presumption" statutes. Rebuttable presumption statutes generally state that when domestic violence is present it is against the best interests of the child for the documented perpetrator to be awarded custody until his or her safety with the child is assured. California Family Code is an example of a rebuttable presumption statute. Under § 3044 "there is a rebuttable presumption that an award of sole or joint physical or legal custody of a child to a person who has perpetrated domestic violence is detrimental to the best interest of the child." California's code outlines six factors to consider in assessing whether a perpetrator of domestic violence has overcome this presumption, including no new violence or violations of existing orders and successful completion of assigned services such as batterer intervention and substance abuse programs.

One difficulty in applying rebuttable presumption statutes is defining what evidence of domestic violence will be admitted as part of the custody and visitation decision-making process. Is it a past or present arrest or restraining order? Should

it be a prior conviction or guilty plea? In a rebuttable presumption statute passed by the State of Wisconsin's Legislature and signed into law in February of 2004, guardians ad litem are given the responsibility for investigating all accusations of domestic violence and reporting their conclusions to the judge. The new law instructs judges to make domestic violence their top priority by stating that "if the courts find...that a parent has engaged in a pattern or serious incident of interspousal battery [as described in statutes], or domestic abuse, the safety and well-being of the child and the safety of the parent who was the victim of the battery or abuse shall be the paramount concerns in determining legal custody and periods of physical placement" (Wisconsin Act 130, §25, 767.24(5)). The new law also requires training of all guardians ad litem and custody mediators in assessing domestic violence and its impact on adult victims and children and lays out new procedures for safe mediation.

While legislative developments such as rebuttable presumption laws appear to be positive, there is little or no evaluation of their impact on children's and non-abusive parents' safety. There also are a number of other critical issues that remain mostly unattended in custody and visitation decisions that involve domestic violence. Part of the problem is that many battered mothers are self-represented in disputed custody cases. This raises concerns about both safety for the adult victims and the degree to which they are well represented in court proceedings.

Poor representation for adult victims, or even raising the issue of domestic violence in court proceedings, may compound in a number of ways with other outcomes that can disadvantage her, for example: (1) the abuser or his legal counsel accusing the mother of purposefully alienating her children from him using empirically questionable concepts such as Parental Alienation Syndrome (Faller, 1998); (2) using "friendly parent" provisions of custody statutes to accuse a mother concerned about her and her children's safety of being uncooperative; (3) minimizing the impact of adult domestic violence exposure on children's safety and well-being; (4)

inappropriately using standardized psychological tests that have not been developed to assess domestic violence to question the veracity of battered women's testimony or her parenting abilities; and (5) appointing custody evaluators or mediators, guardians ad litem, and court appointed special advocates (CASAs) who have little training on issues of domestic violence to assess families and advise the court on custody and visitation arrangements. These issues may further disadvantage battered mothers who are not represented by an attorney and in cases where the abuser persistently uses court actions to extend his control or harassment of her.

Again, as with changes in criminal statutes, there is little research on these law changes in the domain of custody and visitation. Kernic et al. (2005) studied 324 divorcing couples with a documented history of domestic violence to 532 divorcing couples with no such history. They found that even if domestic violence is a criterion for deciding on custody and visitation, it does not seem to change court outcomes. Court records failed to identify documented domestic violence in almost half of the cases, and in approximately another quarter allegations were noted but not documented despite available evidence. Battered mothers were no more likely than others to be awarded custody of their children and violent fathers were seldom denied visitation. In another recent study, Morrill et al. (2005) reviewed 393 custody and visitation orders involving domestic violence across six states and surveyed 60 judges. They found that in most jurisdictions when a rebuttable presumption was in place, that battered mothers more often received custody and violent fathers were more often given scheduled and restricted visitation with their children. This was true except in jurisdictions where "friendly parent" and/or presumptions of joint custody were also in place creating a contradictory legal environment.

Child welfare regulations

Finally, some states have approached child exposure by expanding the definitions of child maltreatment to include children who have been exposed to domestic violence. For example, in 1999, the Minnesota State

Legislature expanded the definition of child neglect in the Maltreatment of Minors Reporting Act to include exposure to adult domestic violence as a specific type of neglect (Minn. State Ann. §626.556, see Minnesota Department of Human Services, 1999; see Edleson, Gassman-Pines, & Hill, 2006). The change in Minnesota acknowledged what had long been believed to be the practice in many child protection agencies across the country - accepting certain reports of children's exposure to adult domestic violence as child neglect.

This change in Minnesota's definition of child neglect to include children exposed to domestic violence meant that the state was suddenly mandating that a range of professionals report every child they suspected had witnessed adult domestic violence. A survey of 52 Minnesota counties estimated that the language change would generate 9,101 new domestic violence exposure reports to be screened by child protection agencies each year (Minnesota Association of County Social Service Administrators, 2000), a greater than 50% increase over current levels. While exact figures are not available, the change in definition resulted in rapidly rising child maltreatment reports across Minnesota. This relatively simple change resulted in dramatically increasing workloads in most Minnesota county child protection agencies. Though legislators thought the language change would merely clarify existing practices, many county agencies suddenly faced huge numbers of newly defined neglected children being reported to them.

The increase in child maltreatment reports created significant problems for many county agencies. There were two parts to this change that raised particular concerns among county social service administrators. First, current Minnesota law required an immediate response to all child maltreatment reports. Second, there was no specific funding appropriated to implement this change. Social service administrators argued that the change represented an "unfunded mandate" by the Legislature. Child protection workers already felt their agencies were inadequately supported and the

large increase of reports threatened to stretch some counties beyond their capacity to respond. As current and former child protection workers explained, there was a wide range of children that were swept up by the legislation, some of whom were very much in need of child protective services, and others who needed services but not those of child protection.

The expanded reporting requirements also raised concerns among advocates for battered women who feared that as a result of the new definition child protective services would utilize methods that would blame more mothers for their male partners' violent behavior toward her by finding her case as substantiated for "failure to protect" (see Magen, 1999). This very issue was the focus of a recent class action lawsuit against the City of New York's child protection agency. The court found that the City had unconstitutionally removed children from the custody of their non-abusive battered mothers after substantiating mothers for engaging in domestic violence. Engaging in domestic violence often simply meant being a victim at the hands of an adult male perpetrator (*Nicholson v. Williams*).

Minnesota's story really had two endings, both of which were frustrating and raise questions about an appropriate response to these families. In the first ending, the community responded to the expanded definition of neglect by reporting many thousands of newly identified Minnesota children exposed to domestic violence. Unfortunately, the capacity of child protective services to respond was greatly strained, resulting in more identification and screening but probably fewer services to those most in need. In the second ending, almost all Minnesota counties decided to drop the requirement for reporting exposed children to child protective services after the Legislature repealed the change. The sad outcome of this result is that many thousands of children who were earlier identified were no longer visible in the systems and also not likely to receive needed services (see Edleson, Gassman-Pines, & Hill, 2006, for a more completed discussion of Minnesota's experience).

Many communities around the country have attempted to change the way they respond to battered women and their children as a reaction to experiences similar to those outlined throughout this section. Below, some of the more noteworthy responses are reviewed.

Implications for Practice Responses

The implications of these research findings and some of the states' experiences with legislation suggest several key points:

- Children's social environments and experiences vary greatly;
- The impact of exposure also varies greatly, even within the same families;
- Children have a variety of protective and risk factors present in their lives; and
- This varied group of children deserves a varied response from our communities

It is clear from the available research that children exposed to adult domestic violence are not a monolithic group. The frequency, severity, and chronicity of violence in their families, their own level of exposure to this violence, children's own ability to cope with stressful situations, and the multiple protective factors present (e.g. a protective battered mother) as well as the multiple risks present (e.g. substance abuse or mental illness among caregivers) create a group of children who are as varied as their numbers. These many factors combine in unique ways for each child, likely creating unique impacts as a result of exposure.

Child exposure should not be automatically considered child maltreatment under the law and our current responses may not match the needs of families precisely because there are such varied impacts among children. Certainly many children will be referred to child protection agencies because

of direct attacks on them. Given the limited resources of most public child welfare agencies, families and their children who show minimum evidence of harm resulting from such exposure and who have other protective factors present in their lives may benefit more from voluntary services in the non-profit sector.

Many of these children will enter our child protection systems because they are abused children and in disproportionate numbers based on race and class. Child protection systems must re-examine their responses to families in which both children and adults are being abused. Every effort must be made to keep children with their non-abusing caregivers, provide safety resources for both adult and child victims in a family, and develop new methods for intervening with men who both batter their adult partners and the children in their homes. Federal and privately funded efforts are underway to test new ways of collaborative work between child protection systems, the courts, and domestic violence organizations (see <http://www.thegreenbook.info>). Alternative or differential response initiatives within child protection systems may, in part, provide an additional avenue for providing more voluntary services to the lower risk cases (Sawyer & Lohrbach, 2005).

Perhaps the greater challenge is to develop voluntary systems of care for children who are exposed to domestic violence but not themselves direct victims of physical abuse. These systems of care often operate outside of child protection agencies and allow communities to rely on more than one type of response, thereby avoiding overwhelming the child protection system. Such responses include expanded programming within domestic violence organizations, partnerships with community-based organizations, and new types of "child witness to violence" projects around the country (see Drotar et al., 2003). Many of these programs stress the importance of mothers in their children's healing and encourage mother-child dyadic interventions (see Groves, Roberts, & Weinreb, 2000; Lieberman, Van Horn, & Ippen, 2005). These systems of care need to be developed as part of the fabric of communities

from which the women and children come if they are to be sustained and culturally proficient.

Beyond treatment, there is a dire need to begin efforts that engage community members in taking part in community wide prevention. Developing the capacity of formal and informal systems to understand the social roots of domestic violence, to promote batterer accountability, and to better respond to cultural differences are all important benefits that may be derived from community engagement. Greater community engagement and system coordination also offer the possibility of overcoming institutional barriers that commonly stand in the way of creating safety for battered mothers and their children.

Communities across North America are significantly revising the way they think about children exposed to domestic violence. At local, county and state levels, communities are engaged in a variety of policy and programmatic actions to respond to these children and their families. The recently reauthorized federal Violence Against Women Act of 2005 for the first time addresses the needs of these children. We need to continue to develop multiple pathways into services and multiple responses by social institutions if we are to adequately address the needs of these children and help them to grow into emotionally and physically healthy adults.

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In Brief: Emerging Responses to Children Exposed to Domestic Violence

Jeffrey L. Edleson in consultation with Barbara A. Nissley

Public attention to the effects of children's exposure to adult domestic violence has increased over the last decade. This attention focuses on both the impact of the exposure on children's development and on the likelihood that exposed children may be at greater risk for becoming either a child victim of physical or sexual abuse or an adult perpetrator of domestic violence. New research, policies, and programs focused on these children have resulted. These new efforts are reviewed in this document and an argument is made that the diversity of children's experiences requires equally diverse responses from our communities.

"Exposure to adult domestic violence" describes the multiple experiences of children living in homes where an adult is using physically violent behavior in a pattern of coercion against an intimate partner. Several studies on children exposed to adult domestic violence have indicated children's responses to violence may vary. Many exposed children show more aggressive and antisocial as well as fearful and inhibited behaviors, exhibit lower social competence, and have poorer academic performance (Kitzmann, Gaylord, Holt & Kenny, 2003; Wolfe, Crooks, Lee, McIntyre-Smith & Jaffe, 2003). Children also show similar emotional health to those of physically abused children (Kitzmann et al., 2003). Other children display more resiliency to the negative effects of exposure and have no greater social or emotional problems than those not exposed to domestic violence (Graham-Bermann, 2001). The more social support networks and family members in protective roles available to the child, the more resilient a child may become (Masten & Reed, 2002).

Laws relating to child exposure to adult domestic violence have changed considerably in the last decade. These laws focus most often on criminal prosecution of violent assaults, custody and visitation decision-making, and the child welfare system's response (Lemon, 1999; Mathews, 1999; Weithorn, 2001).

The implications of research findings and some of the states' experiences with legislation suggest several key points:

- Children's social environments and experiences vary greatly;
- The impact of exposure also varies greatly, even within the same families;
- Children have a variety of protective and risk factors present in their lives; and
- This varied group of children deserves a varied response from our communities.

Currently, there are only limited options available for children who have been exposed to domestic violence. These options sadly do not reflect adequate responses to the range of experiences exposed children may experience. Perhaps the greatest challenge is to develop voluntary systems of care for children who are exposed but not themselves direct victims of physical abuse. These systems of care often operate outside of child protection agencies and allow communities to rely on more than one type of response, thereby avoiding overwhelming the child protection system.

Communities across North America are significantly revising the way they think about children exposed to adult domestic violence. At local, county and state levels, communities are engaged in a variety of policy and programmatic actions to respond to these children and their families. The recently reauthorized federal Violence Against Women Act of 2005 for the first time addresses the needs of these children. We need to continue to develop multiple pathways into services and multiple responses by social institutions if we are to adequately address the needs of these children and help them to grow into emotionally and physically healthy adults.