

## Protecting Children from Domestic Violence and its Aftermath

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## Child Witness to Violence Project



- Provides counseling services to children age 8 & younger (and their families) who have witnessed significant violence
- Provides training/consultation to providers who work with children affected by violence.

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## Child Witness to Violence Project: The heart of our program



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### Child Witness to Violence Project: Lessons Learned

- Being the bystander to violence may be as traumatizing for a child as being the direct victim.
- Domestic violence is a particularly toxic form of trauma for young children.
- Supporting the non-abusing parent and the parent-child relationship is an essential ingredient to helping children affected by domestic violence.

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### Trauma and Young Children

- Study of proposed classification of PTSD symptoms in children age 48 months and younger:
  - Unanticipated finding: Most potent trauma variable predicting PTSD symptoms was witnessing a threat to the caregiver.
 

Scheerenga & Zeanah (1995):
- The majority of children who are exposed to domestic violence are under the age of eight (Fantuzzo, Atkins, & Marcus, 1997)
- Survey of children 0-6 at Boston Medical Center: 28% had witnessed moderate –severe violence in the past year; average age of child: 2.7 years (Taylor, Zuckerman & Groves, 1996)

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### Exposure to Violence Affects Early Brain Development

Stressful events can be harmful, tolerable or beneficial, depending on:

- Whether the stressful experience is controllable
- How often and for how long the body's stress system has been activated in the past
- **Whether the affected child has safe and dependable relationships to turn to for support.** (Shonkoff J, 2006)

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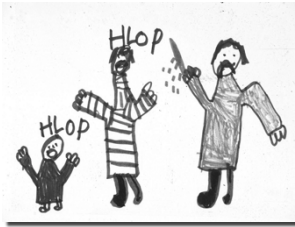
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### Impact of Trauma on Caregiver-Child Relationships



- Loss of sense of caregiver as reliable protector
- Disturbed mental representations of who is safe and who is dangerous

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Supporting the non-abusing parent and the parent-child relationship is an essential ingredient to helping children affected by domestic violence.



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1. Young children are disproportionately represented in the population of children exposed to domestic violence
2. Young children recover from traumatic experiences in the context of caregiving relationships
3. In many cases, the best way to help a child is to help the non-abusing parent access safety and support

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**The Protective Systems' Roles in Helping Children Exposed to Domestic Violence**



- DCF
- Voluntary agencies
- The courts

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**Massachusetts DCF  
"Promising Approaches"**

- "Mandated reporters are encouraged to carefully review each family's situation and to consider whether or not to file with the Department of Children and Families"
- Mandated reporters should give due consideration to the family environment and the negative impact of violence on the child... They are encouraged to assess the caretaker's and child's conditions.... When considering whether or not to file a report of concern, refer to the factors below to help you make the decision. "

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**DCF: Approaches to Assessing Safety and Risk**

- Assessing potential danger
  - Access to weapons
  - Escalating threats, stalking
  - Mental illness, suicide threats, substance abuse
  - History of protective orders, prior arrests
- Non-abusing parent
  - Efforts to seek help
  - Connections to community
  - Ability to evaluate or recognize the impact on the child
  - Mental illness, substance abuse
- Child
  - Age of child
  - Constant worry about danger
  - Sleep difficulties
  - Withdrawal from friends and activities
  - Separation anxiety/worry about the safety of loved ones

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**Voluntary Agencies: Risk Assessment for children exposed to violence:**

- History of the violence
- Nature of the threats or abuse
- Presence of alcohol, drugs, weapons
- History of mental illness
- Non-abusing parent's opinion of risk
- Non-abusing parent's appraisal of danger
- Non-abusing parent's efforts/willingness/ability to seek help or safety
- Non-abusing parent's connections to family, friends, social institutions
- Age of child

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**The Courts**

- At the time of issuing a protective order:
  - Risk assessment
    - History of the violence– chronicity matters
    - Ask about the children
    - Age of child
    - Are there other eyes on the child?
- Visitation and/or custody orders:
  - GAL evaluation

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**GAL Evaluations:  
Central Questions in a DV Case**

- Has DV taken place? Nature of that DV?
- What is the impact on the adults and their parenting?
- What is the impact on the children?
- Strengths/weaknesses of parents, parenting history
- Needs & special needs of children
- Fit/relationship between each parent and child

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**GAL Investigation: Key Components**

Multiple Sources in Domestic Violence Cases

- Gathering and reviewing documents
- Interviewing collaterals-schools, therapists, DCF, medical providers
- Interviewing the parties
- Interviewing the child(ren)
- Psychological Testing (in some cases)

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**Sources of Documents**

- Police Reports
- CORI/CARI
- Previous Court records
- Medical Records
- Mental Health Records
- Drug and Alcohol treatment records
- Batterers' Intervention Program Records
- Battered Women's Shelter/Domestic Violence Counselor Records
- Department of Social Service Records
- School Records

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