
An Intervention Model for Child Witnesses of Domestic Violence

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The PACT Family Peace Center Children's Program has provided psychoeducational group and individual counseling for child witnesses of domestic violence since 1990.

Definition

The PACT Family Peace Center defines domestic violence as an intimate partner's systematic attempt to gain or maintain power and control over another person through intimidation, manipulation, humiliation and violence. Physical abuse is only one part of a whole system of abusive behavior. Emotional abuse, physical and social isolation, economic abuse, sexual abuse, using children as leverage, threats, male privilege and intimidation are other parts of the system of abuse.¹

The act of *witnessing* violence includes both seeing and hearing physical, emotional, verbal, sexual abuse or property damage. The act of experiencing violence refers to being physically, emotionally, sexually abused or neglected.²

Emotional abuse and neglect can be equally impacting as physical abuse.³ The PACT Family Peace Center provides intervention for children who have witnessed and/or experienced family violence.

Prevalence

Nationally, women experience an estimated 572,000 acts of violence by their male intimate partner. In 1993, the Hawaii State Commission on the Status of Women estimated that 49,000 women in the State of Hawaii are victims of domestic violence. This was considered a conservative estimate.⁵

It is estimated that approximately 90% of children living in violent homes are aware of the violence.⁶ If 49,000 victims have an average of one child, then approximately 44,100 children in Hawaii have witnessed domestic violence.

Clinical Considerations

There are three major clinical areas to consider:

- 1) the child witnesses' development of aggressive behavior,
- 2) posttraumatic stress disorder, and
- 3) altered relatedness.⁷⁻⁸

These issues may effect the normal physical, moral, and cognitive development of school age children and toddlers.³

Posttraumatic Stress Disorder (PTSD) and Health Related Problems

Child witnesses of domestic violence may experience PTSD symptoms, which include a restricted range of affect, a sense of foreshortened future, difficulty sleeping, difficulty concentrating, hypervigilance and exaggerated startle response.⁸ Some health related problems include allergies, headaches, stomach problems, asthma, enuresis, and phobias.⁷

Altered Relatedness and Problems in relationships

Exposure to family violence may contribute to a child's ability to establish significant trusting relationships.⁹ A parent's chronically inconsistent emotional or physical availability adds to the child's anxiety and uncertainty which may lead to mistrust and poor ability to empathize.⁸

Aggressive Behavior

Children who have been abused or neglected are 38 percent more likely to be arrested for violent crime than nonabused or non neglected children.¹⁰ Children who witness chronic violence may also become desensitized and tolerant of violence¹¹ and self-blaming.¹² They may also develop gender-rigid and distorted beliefs and attitudes which may result in rationalizations involved with being a perpetrator.¹³

Intervention

One effective intervention is a psychoeducational group which challenges the child's beliefs and attitudes about aggressive behavior and family violence. This group also facilitates the learning of appropriate nonviolent skills for conflict resolution.¹³ PACT Family Peace Center's groups are psychoeducational. They were designed to provide an emotionally safe and consistent environment within which participants can share and examine their beliefs and attitudes about aggressive behavior and family violence. PACT Family Peace Center's counseling approach is culturally relevant and sensitive to the needs of Hawaiian Pacific Islanders as well as other populations.

Children's Groups

Group Process

PACT Family Peace Center defines the group process as a combination of the relationships that members establish with each other, the facilitator, as well as the nature in which members integrate group content. Chronologically, group process refers to the events occurring in an individual session as well as the collective, therapeutic sequence of a 15-week cycle.

Children's groups are limited to ten to fifteen participants and two to three adult facilitators. The small group size allows the children to bond sufficiently and to maintain a consistent environment. The group process involves a continuum of sequential healing that includes:

- Trust building
- Acknowledging violence and validating feelings
- Healing
- Discovering new ways of coping with violence and
- Integration.

Trust Building

While trust building is the initial stage in the group sequence, it is frequently a recurring phase. Group discussion and activities, which work to align members to each other, may occur at any point in the group sequence. Validation by peers and facilitators specific to the trauma of witnessing violence appears to provide comfort to participants. The group experience is designed to normalize participant's reactions to violence and to diminish isolation, thereby increasing self-trust.

Acknowledging Violence and Validating Feelings

Children often learn to minimize, to blame themselves or the victim and to deny abuse and violence they have witnessed or experienced.⁹ Participants are encouraged individually and as a group to examine different types of abuse, which include emotional, verbal, physical, sexual and property damage. The goal of acknowledging the violence and validating the child's feelings and experiences, is to decrease their shame and personalization of the abuse.¹³

Healing

Trauma is a common effect of witnessing and experiencing abuse and violence.⁸ Common symptoms associated with trauma include cognitive distortions which are assumptions and faulty beliefs that often lead to impaired self-esteem.¹³ Children displaying trauma symptoms often form rigid, dichotomous or "black and white" images of the world and themselves. The group sessions are designed to help children process and discard beliefs that minimize their range of coping. Participants are taught that violence may be intergenerational and are encouraged to choose to live non-violently.

Children who witness the abuse of a parent for prolonged periods of time may develop feelings of powerlessness and an inability to recognize choices.¹³ These feelings may be further reinforced as women and children encounter a system which often appears to excuse violence or fails to keep victims safe. Children's groups work to instill both personal power and awareness of choices regarding personal safety and behavior.

Discovering New Ways of Coping with Violence

Typically, child and adolescent victims and witnesses of domestic violence respond to conflict with either extreme externalized or internalized behaviors.^{8,13} Parents often request immediate skill building for their children in the area of anger management. It appears that group participants are rarely willing to discuss and integrate positive behavior in initial or even mid- group sequence. They seem to first find congruence and validation in information specific to their own experiences with family violence. As children make connections between their own behaviors and the violence they have witnessed, they become more willing to explore proactive versus reactive responses.

Often, children and adolescents who have been traumatized by domestic violence exhibit a cluster of symptoms associated with attention deficit.³ Parents learn that as children adapt to the continual crisis of domestic violence, a specific pattern for life style and personality develops. Being "in crisis" and the energy or "rush" which it provides become the primary focus or impetus for being engaged in life. After having been conditioned to this rhythm, children may re-create the "rush".

Anger management concepts in the group refer to the concept that families and individuals experience anger and violence in a cycle. This cycle includes a *honeymoon* period, a *tension building* period and an eventual *explosion* period. Group members learn to recognize tension building in their family and themselves. Group discus-

sion and activities work to move children closer to being conscious rather than unconscious of feelings and behaviors. Group focus on tension building assists children in learning to keep safe and out of violent situations as adults move from tension building to explosions. Children are taught that explosion or conflict is a part of life.¹⁵ However, violence and abuse need not be inherent in conflict. An explosion need not be violent. Discovering new ways focuses on identifying healthy, nonviolent conflict resolution skills, including time-out.

Hypervigilance, the constant scanning of the environment for physical or emotional hostility, is also a symptom of trauma. It is a coping skill that reinforces an external focus and locus of control, which may lead to learned helplessness.¹⁶ This curriculum is designed to teach the participants to develop an internal locus of control and **self** reference.⁸ By creating a safe and consistent environment, the group encourages children to refer and attend to their feelings and thoughts.

Children who grow only in response to an external locus of control remain at risk for perpetuation of the cycle of violence.¹⁷ Evidence that group members have begun the process of integrating self reference includes taking responsibility for their own actions, attention to body cues, reference to and use of safety plans.

Integration

Throughout the group cycle, participants are provided with opportunities to integrate the curricula with their personal experiences. Although the group curricula is a sequential design, certain topics are recurrent. Trust and safety issues frequently require additional time to process and address. The 15-week cycle is a modest period of time considering the length of time that clients have been exposed to abuse and violence.

Parent Group

Children who have witnessed abuse and power imbalances among adult family members need to experience the family system differently if they are to heal.⁹ Parental support is highly recommended. Therefore, children 13 years and younger are not accepted to the Children's Program without their parents participation in both adult support group and a parent group.

The parent's group and children's group concurrently address the same issues. Communication between children's group facilitators and the parent's group facilitators is constant. Parent motivation and insight appear to be at their fullest potential as a result of the validation and support generated in the parent group. This provides them with the opportunity to offer continuing and appropriate support to their children. Because the parent's curriculum is based on the premise that violence is never appropriate in disciplining children, nonviolent discipline and parenting skills are taught.

An awareness of the effects of witnessing violence may elicit in parents feelings of guilt and shame about being a "bad" parent.⁹ The parent group provides a nonjudgmental environment for parents to explore parenting issues that relate to the effects domestic violence has had on their children. Within the group there may be former victims and former perpetrators who are brought together under the mutual concern of understanding their children's experiences and helping them to heal. Parents are encouraged to let go of shame and guilt by replacing them with new skills and support.

Program Evaluation

The Children's Program uses a multi-axial approach to assessment and evaluation. They include interviews, house-tree-person

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drawings, the Child Behavior Checklist and a Group Interaction Client Assessment (GICA).

The Child Behavior Checklist (CBCL) assesses parents' perceptions of their child's behavior by responding to a 113 item questionnaire relating to potential behavior problems. The Children's Program has been using the CBCL as a pre and post test measure of program effectiveness.

The GICA is a pre and post test that uses a Likert Scale to measure aspects of the healing process from 1 (poor) to 5 (very high). The GICA is administered immediately following the intake assessment and again following the 15-week group cycle. Each item is scored on the basis of observable behaviors and self-reports of the child. The GICA attempts to assess client development in self esteem, safety, understanding of domestic violence, anger management skills, and social relationships.

Preliminary examination of the data suggest a significant decrease in externalized behavior upon completion of the group cycle. Additional research is currently being conducted.

Conclusion

The literature indicates that witnessing domestic violence can produce cognitive and social delays in children's development, increase their potential for violent and aggressive behavior, limit their ability to establish trusting and empathetic relationships and perpetuate the cycle of violence. The purpose of the Children's Program is to provide participants with the support and tools they require to interrupt and stop the intergenerational cycle of violence.

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PACT

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- **Community Education**
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- **PreMediation Counseling**
 - Makes assessments of non-abusive situations.
Prepares women and men to go into mediation process

NOTE: PACT and FAMILY PEACE CENTER have merged and FPC is now under PACT. Their offices will continue to be separate.



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