We are the Macomb Intermediate School District.

We exist to provide our clients quality service, high caliber support, and cutting edge leadership.

Our primary clients are the 21 school districts of Macomb County. They are our most important customers – indeed, our reason for being.

Within these districts we focus our efforts on school staff. We work to increase their skills and capabilities so their students can experience more effective educational programs.

We also serve the handicapped. In fact, we are committed to working directly with youngsters with disabilities who reside in Macomb County's school districts.

And we are involved with the educational community across the country. Many of our staff members are leaders in state and national programs. Many are working with colleges and universities. Still others are exchanging information with their professional colleagues. All these activities have a single purpose: to identify and develop techniques and programs that improve learning opportunities in Macomb County.
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Preamble

This toolkit was created for children who have witnessed domestic violence. We hope that the information provided in this toolkit will help families and people who work with these families to have a better understanding of these children and how they cope with domestic violence.
Overview

Research indicates children exposed to domestic violence are at an increased risk of being abused or neglected themselves. The U.S. Department of Health and Human Services estimates that approximately 3.3 to 10 million children witness the abuse of a parent or caregiver each year. The experience of family violence can be among the most disturbing for children because both victims and aggressors are the adults who care for them and who are most closely attached to them. For many of these children, violence interrupts their experience of consistent safety and care, and creates an environment of uncertainty and helplessness.

Children who are exposed to domestic violence, especially repeated incidents of violence, are at risk for many difficulties, both immediately and in the future. These include problems with sleeping, eating and other basic bodily functions; depression, aggressiveness, anxiety and other problems in regulating emotions; difficulties with family and peer relationships; and problems with attention, concentration and school performance.

In order to minimize the risk of long-term damage, child witnesses to domestic violence need the safety and security of their environment to be restored. Children exposed to domestic violence also need support from the adults around them, most importantly their own parents or other primary caregivers. Health care workers, law enforcement officers, educators, and domestic abuse and child welfare organization workers all play overlapping roles in the prevention and intervention of cases of harmful domestic violence.

Statistics

- Studies show that child abuse occurs in 30 to 60 percent of family violence cases that involve families with children. (J.L. Edleson, "The overlap between child maltreatment and woman battering." Violence Against Women, February, 1999.)
- A survey of 6,000 American families found that 50 percent of men who assault their wives, also abuse their children. (Pagelow, "The Forgotten Victims: Children of Domestic Violence," 1989)
• Research shows that 80 to 90 percent of children living in homes where there is domestic violence are aware of the violence. *(Pagelow, "Effects of Domestic Violence on Children," Mediation Quarterly, 1990)*

• A number one predictor of child abuse is woman abuse. *(Stark and Flitcraft, "Women at Risk: A Feminist Perspective on Child Abuse," International Journal of Health Services, 1988)*

• The more severe the abuse of the mother, the worse the child abuse. *(Bowker, Arbitell, and McFerron, "On the Relationship Between Wife Beating and Child Abuse," Perspectives on Wife Abuse, 1988)*

• Some 80 percent of child fatalities within the family are attributable to fathers or father surrogates. *(Bergman, Larsen and Mueller, "Changing Spectrum of Serious Child Abuse," Pediatrics, 1986)*

• In families where the mother is assaulted by the father, daughters are at risk of sexual abuse 6.51 times greater than girls in non-abusive families *(Bowker, Arbitell and McFerron, 1988)*

• A child’s exposure to the father abusing the mother is the strongest risk fact for transmitting violent behavior from one generation to the next *(American Psychological Association, Violence and the Family: Report of the APA Presidential Task Force on Violence and the Family, 1996)*

• Male children who witness the abuse of mothers by fathers are more likely to become men who batter in adulthood than those male children from homes free of violence *(Rosenbaum and O’Leary, "Children: The Unintended Victims of Marital Violence," American Journal of Orthopsychiatry, 1981)*

• Older children are frequently assaulted when they intervene to defend or protect their mothers. *(Hilberman and Munson, "Sixty Battered Women," Victimology: An International Journal, 1977-78)*

• In a 36-month study of 146 children, ages 11-17 who came from homes where there was domestic violence, all sons over the age of 14 attempted to protect their mothers from attacks. Some 62 percent were injured in the process. *(Roy, 1988)*

**Effects on Children**

Domestic violence affects every member of the family living in the home, including the children. Family violence creates a home environment where children live in constant fear. Children who witness family violence are affected in ways similar to those who are physically abused and are often unable to establish nurturing bonds with either parent. Children living in violent homes are also at greater risk for abuse and neglect. Statistics show that over 3 million children witness violence in their home each year. Those who see and hear violence in the home suffer physically and emotionally.
Children who live with domestic violence face increased risks: the risk of exposure to traumatic events, the risk of neglect, the risk of being directly abused, and the risk of losing one or both of their parents. All of these may lead to negative outcomes for children and may affect their well-being, safety, and stability. Children's risk levels and reactions to domestic violence exist on a continuum where some children demonstrate enormous resiliency while others show signs of significant maladaptive adjustment. Protective factors, such as social competence, intelligence, high self-esteem, outgoing temperament, strong sibling and peer relationships, and a supportive relationship with an adult, can help protect children from the adverse affects of exposure to domestic violence.

**Infants and Toddlers**

Infants and small children who are exposed to violence in the home experience so much added emotional stress that it can harm the development of their brains and impair cognitive and sensory growth. Behavior changes can include excessive irritability, sleep problems, emotional distress, fear of being alone, immature behavior, and problems with toilet training and language development. At an early age, a child’s brain is becoming ‘hard-wired’ for later physical and emotional functioning. Exposure to domestic violence threatens that development. (UNICEF, 2006).

Age-specific indicators for infants include:

- Basic need for attachment is disrupted
- Routines around feeding/sleeping are disturbed
- Injuries while "caught in the crossfire"
- Irritability or inconsolable crying
- Frequent illness
- Difficulty sleeping
- Diarrhea
- Developmental delays
- Lack of responsiveness

http://www.acadv.org/children.html

**Preschoolers and School-age children**

As they grow, children who are exposed to violence may continue to show signs of problems. Primary-school-age children may have more trouble with schoolwork, and show poor concentration and focus. They tend not to do as well in school. In one study, forty per cent had lower reading abilities than children from non-violent homes. Personality and behavioral problems

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Children Who Witness Domestic Violence
among children exposed to violence in the home can take the forms of psychosomatic illnesses, depression, suicidal tendencies, and bed-wetting (UNICEF, 2006). Some studies suggest social development is also damaged. Some children lose the ability to feel empathy for others. Others feel socially isolated, unable to make friends as easily due to social discomfort or confusion over what is acceptable. Many studies have noted that children from violent homes exhibit signs of more aggressive behavior, such as bullying, and are up to three times more likely to be involved in fighting (UNICEF, 2006).

Age specific indicators for the school-aged child include:

**Preschool**
- Somatic or psychosomatic complaints
- Regression
- Irritability
- Fearful of being alone
- Extreme separation anxiety
- Developmental delays
- Sympathetic toward mother

**Elementary Age**
- Vacillate between being eager to please and being hostile
- Verbal about home life
- Developmental delays
- Externalized behavior problems
- Inadequate social skill development
- Gender role modeling creates conflict/confusion

http://www.acadv.org/children.html

**Teenagers**

Teens face the same issues as younger children in an abusive family, namely feeling lonely and isolated, growing up too fast, behavior problems, stress related medical and mental health problems, and school problems. Teenagers are also faced with entering into the dating world for the first time. They are formulating their own theories about relationships, and some may not have the best models on which to base a healthy relationship. They have witnessed the cycle of violence with the abuse, apologies from the perpetrator, tensions building and more abuse. Unfortunately, some teenagers may be faced with a higher risk of being victims of dating violence and as mentioned earlier, ending up in violent relationships as adults either as victims or abusers.

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Age specific indicators for teens include:

**Preadolescence**
- Behavior problems become more serious
- Increased internalized behavior difficulties: depression, isolation, withdrawal
- Emotional difficulties: shame, fear, confusion, rage
- Poor social skills
- Developmental delays
- Protection of mother, sees her as "weak"
- Guarded/secretive about family

**Adolescence**
- Internalized and externalized behavior problems can become extreme and dangerous: drug/alcohol, truancy, gangs, sexual acting out, pregnancy, runaway, suicidal
- Dating relationships may reflect violence learned or witnessed in the home

http://www.acadv.org/children.html

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**Characteristic Behaviors of Children who Experience Family Violence**

There are some behaviors commonly found in children who are reared in families with violent interaction patterns. They include:

**Role reversal:** Often an older child is forced to accept responsibilities for care of younger siblings and of the household due to the parents’ inability to fulfill these functions. This child may never have had the opportunity to participate in normal childhood activities.

**Aggressive behavior:** Some of these children may act in an aggressive manner at home and in school, toward other siblings, children, animals, and adults. This behavior may also include destruction of property and theft.

**Violence toward parents:** When these children become adolescents or adults, they may turn on their parents.

**Running away:** Older children may run away, perceiving this as their only alternative for escaping an unbearable home situation.
Truancy: These children often fail to attend school. They may believe that if they stay home their presence will keep the fighting under control, or that peers will recognize their physical and emotional deprivation.

Shy, withdrawn behavior: These children may not interact with others. As this behavior seldom attracts attention, these children may not be identified as trouble.

Other behavior indicators may include:
- Overly compliant, overly adaptive, passive, undemanding, avoidance of conflict, clinging, excessive self-control.
- Extended aggression, demanding, rageful, biting, destroys property, temper tantrums, short attention span, lying.
- Socially withdrawn, timid, depressed, social wariness, inhibited, vacant stares, lack of curiosity, excessive fantasies, poor peer relationships, fear of a particular person, excessive fears, attempted suicide, excessive fear of punishment, feels deserving of punishment.
- Developmental arrest, delays in physical, cognitive, social or emotional development, speech disorders, infantile behavior.

http://www.domesticviolenceservices.com/violenceeffectsonchildren.html

Effects on Family

Perpetuating the Cycle of Family Violence
Violence is a pattern of learned behavior. There is a real danger that children will learn aggression by exposure and observation, and that it will become part of their pattern of behavior. Research studies, child abuse literature and family theorists indicate that violent patterns of behavior are transmitted from generation to generation. This repetition may be due to the failure to learn other stress responses within the family. Findings have suggested that abused children often become abusive parents and abusive spouses. Children who observed their parents or other significant adults engage in physical violence often learn these behaviors and reenact them when they become adults. In addition, many adults who abuse their spouses were abused as children and/or observed physical violence between their parents.
Service Coordinator Considerations

Children can react to their environment in many different ways and their reaction can vary depending upon age or sex. However, most children exposed to domestic violence, regardless of any variables, suffer from emotional, behavioral, social, and physical disturbances that can affect their growth and development.

As service coordinators and service providers, we can be aware of what the child has experienced. Our job continues to be to support the bonds and attachment between the child and the primary caregiver. We need to continue to connect the family with community resources available for both the adult and the “child victim.”

Other Important Things to Know and Remember

We recommend parents seek assistance for their child from a physician or family counseling agency when the child’s behavior:

- is physically harmful to the child or others (e.g., cutting own
- clothes with scissors, laying down on street, etc.)
- is intense enough to interfere with the child’s day-to-day
- adjustment in the program
- does not respond to basic child guidance strategies
- persists over time (3 to 6 weeks)

NATIONAL DOMESTIC VIOLENCE HOTLINE
1-800-799-SAFE (7233) or 1-800-787-3224 (TDD)

- Trained counselors provide crisis intervention, referrals to local service providers for victims of domestic violence and those calling on their behalf, and information or support in many languages
- Counselors answer every call in both English and Spanish
- Translators are available for 139 languages
- Crisis intervention and referrals to the Deaf through the TDD line
- For additional information about the services provided by this HOTLINE visit the following website: www.ndvh.org
Helpful Children's Books

Brave Bart by Caroline Sheppard
Jessica and the Wolf by Ted Lobby
When I'm Afraid by Barbara Gardiner
When Sophie Gets Angry - Really, Really Angry by Molly Bang
Tough Boris by Mem Fox
What If It Never Stops Raining by Nancy Carlson
The Way I Feel by Janan Cain
The Feel Good Book by Todd Parr

Conclusion

As Early On service coordinators and service providers, we will encounter children who have experienced domestic violence. Our passion, compassion and concern for the family will be the best tools we can offer.

References

http://www.childwelfare.gov/pubs/factsheets/domesticviolence.cfm
http://www.nccev.org/violence/domestic.html
http://www.domesticviolenceservices.com/violenceeffectsonchildren.html
http://www.acadv.org/children.html
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Julie Lagos, Early On Family Liaison, Editor
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