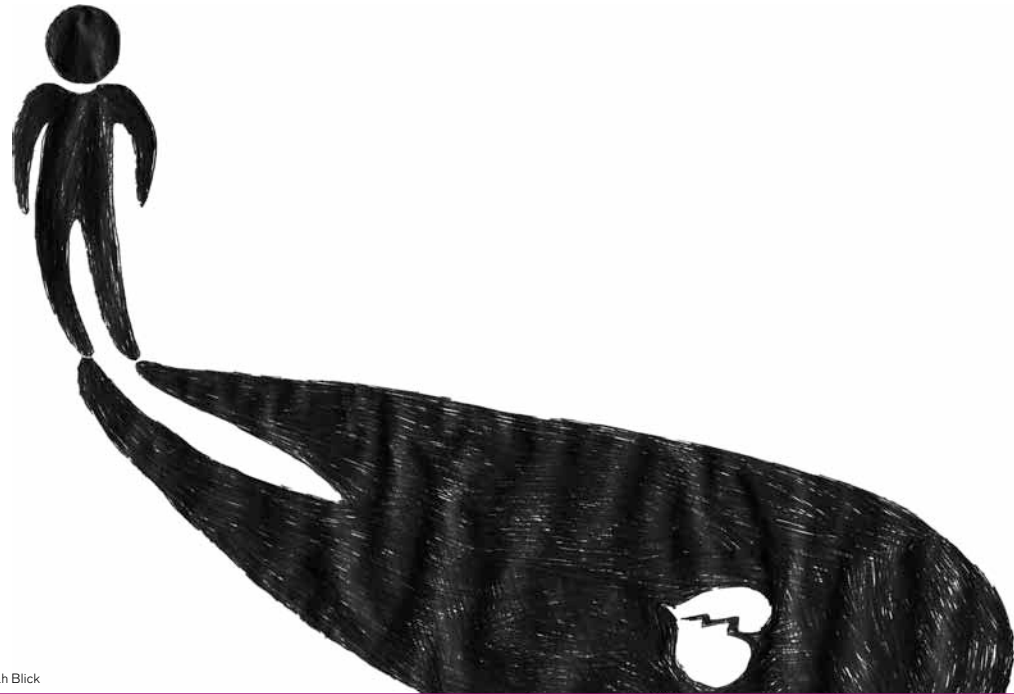


DOMESTIC VIOLENCE

# Enemy within

The emotional scars of witnessing domestic violence can stay with children for a lifetime increasing the risk they may go on to be abusers themselves. **Kelly Mattison** speaks to experts to find out how they can help children of abusers to break the cycle of violence



Sarah Blick

The Department of Health estimates at least 750,000 children a year witness domestic violence. Figures from the charity Women's Aid also show that in up to 90% of incidents of domestic violence children are in the same or next room; that nearly three-quarters of children living on the 'at risk' register live in households where domestic violence occurs; and 52% of child protection cases involve domestic violence.

Children and young people can witness domestic violence in many different ways: they may get caught in the middle of an incident in an attempt to make the violence stop; they may be in the house and hear the abuse when it takes place; or see their mother's physical injuries following an incident of violence. In extreme cases, they may be forced to witness sexual abuse or be encouraged to take part in verbally abusing the victim.

Dr Lynda Dodd, a child

and educational psychologist in Stockport and trustee of Stockport Women's Aid, says that 33% of domestic abuse starts during pregnancy, escalating throughout it. Being pregnant may serve to increase vulnerability rather than affording any protection from violence, perhaps because pregnant women are more vulnerable, she adds.

Research by Dr Julie Quinlivan<sup>1</sup> also suggests that where the maternal levels of the stress hormone cortisol are raised during pregnancy the result is poor foetal growth, stunted brain development and reduction in the quantity of central nervous system myelination, defects for which have been linked to diagnosis of attention deficit hyperactivity disorder.

Dr Dodd reported that the affects of domestic violence on children can include physical injury, emotional difficulties (both

aggressive and passive withdrawn behaviour), psychosomatic problems and cognitive and educational difficulties.

"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," she adds.

Amanda Dewson, lead domestic abuse worker at Stockport Women's Centre, thinks the biggest affect on children is when they are removed from the family due to domestic abuse. "When you look at a child being taken away from everything that's comfortable and then placed somewhere new, this then raises their anxieties even further."

Dr Dodd's research suggests that childhood problems associated with domestic violence can be behavioural, social and emotional. Children who live with

domestic violence can experience increased levels of aggression, anger, hostility, fear, anxiety; and suffer from post traumatic stress disorder, depression, poor relationships, low self-esteem and becoming a carer for the parent. Dewson adds: "I knew of one child who would race home from school to get back to his mum because he was worrying what his dad was doing while he was at school and he was worried she was going to get hurt. He saw it as his role to protect his mum which means he lost his childhood."

Research from the Social Care Institute for Excellence suggests that children and young people living with domestic violence say consistently that they are aware of it, and are often more anxious than is recognised by either the adults involved in the violence, or those who are concerned with the health, education and general wellbeing of the children or the family. The social and educational development of some children may be impaired by the support they give to the abused parent, and girls in particular may be anxious to protect their mother and younger siblings even where this involves placing themselves at physical risk. Most children also have difficulty understanding why the violence occurs and many are discouraged from talking about it by those involved<sup>2</sup>.

Dewson explains that the trauma of experiencing domestic abuse as a child can also follow children into adulthood: "I see a lot of women who have been diagnosed with PTSD and some of it stems back to what they have witnessed as a child, as well as an adult."

Dewson often refers women for therapy to address low self-esteem, which she says is the main issue she encounters with service users. "If we can provide the right intervention, then victims can learn and grow, and some of the results we've had at the centre have been fantastic. Women have really taken

control back and started to turn their lives around."

Dr Dodd's research suggests other emotional difficulties which children can experience can be a lack of conflict resolution skills, limited problem solving skills, pro violence attitudes and belief in rigid gender stereotypes and male privilege. Dewson adds: "When growing up with domestic abuse boys can learn that violence and abuse equals love and girls can learn to be subservient and also learn that violence and abuse equals love. Although not all children who grow up with domestic abuse [go on] to be abusers or abused themselves. And for those who do grow up with these beliefs, what they have learned can be unlearned with the right support and guidance."

Camila Batmanghelidjh, chief executive of the charity Kids Company, is currently working alongside some of Britain's top neuroscientists to examine why some children go on to abuse while others don't. She explains that children who have had good attachments and happen to be in a violent situation for a short period of time can recover very well because that early love they have had has made their brain very resilient.

"We need the front of our brain to calm down the emotional parts of our brain and most of us balance ourselves out," says Batmanghelidjh.

"The real challenge comes from children who have had poor attachments, they find it much more difficult to recover from situations of extreme violence and they're the ones that need the very specialist programmes to help them build up their frontal lobe ability to help them deal with the trauma stored in the emotional parts of the brain," she adds. ■

## References:

1. Study of adolescent pregnancy in Western Australia, The WayForward, pp.53-58, 2000

2. Research briefing from Anne Worrall, Jane Boylan and Diane Roberts for the Social Care Institute for Excellence

## Useful resources:

Women's Aid [www.womensaid.org.uk](http://www.womensaid.org.uk)  
The Hideout – a space for children and young people to understand domestic abuse [www.thehideout.org.uk](http://www.thehideout.org.uk)  
Place to Be [www.theplace2be.org.uk](http://www.theplace2be.org.uk)  
Kids Company [www.kidsco.org.uk](http://www.kidsco.org.uk)

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## Case study

**Eleven year old Sally** was referred to Nicola Fone, a children and young people's worker at Stockport Women's Aid, as she had witnessed her mother being physically and emotionally abused. Sally is still living in the situation with both parents and was upset and concerned that she was falling behind at school.

"When I first started to work with Sally she blamed herself for the abuse; she thought it was her fault because she didn't do her homework on time," says Fone.

Sally had always kept the abuse she witnessed a secret. After their second counselling session together Fone realised it may be easier for Sally to write down what was happening at home rather than saying it out loud as she knew she sometimes struggled with being vocal because of the high anxiety that she felt.

"This worked fantastically," says Fone. "She said she now feels that she can open up and talk about her feelings and how upset she feels for her mum sometimes. That was the biggest thing for her: that she wanted to look after her mum, and confusingly for Sally, a lot of the time she also blamed her mum for going back to her dad."

Fone empowers children to learn what domestic abuse is on a safe level so that they can realise that it's not a victim's fault. She also encourages children not to blame themselves.

"We send a strong message to children that it's never their fault. I used to ask her every week if it is ever a child's fault if anything happens. By the end of the eight weeks she was saying 'no'. I am now in the process of setting up a meeting with her teacher so that if she is having a 'down' day her teacher will know everything. Sally's relationship with her mum has improved and she now feels she can talk to her mum if she is afraid."