

Prevalence of Children's Exposure to Domestic Violence and Child Maltreatment: Implications for Prevention and Intervention

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The purpose of this paper is to review research on the prevalence of children's exposure to domestic violence, to consider the available literature on the co-occurrence of domestic violence and child maltreatment, and to gain more understanding about the impact of exposure on children. There is clear evidence indicating that both severe and moderate violence occurs frequently in homes among family members and that children are exposed to this violence. However, because of differing definitions of what constitutes domestic violence and variability in research methodologies for collecting the data, there are significant discrepancies in prevalence reports across studies. Of great concern is the immediate impact on the children and the long-term consequences for their later relationships. Fewer studies have been done on the co-occurrence of domestic violence and child maltreatment. However, it is likely that children who live in homes where domestic violence occurs are more likely to be abused and neglected. On the basis of available research, there is little doubt that vast numbers of children are exposed to domestic violence and that children's responses vary widely depending on their risk and vulnerability, as well as the structure of their environments. A developmental risk and protective factors framework will be used to integrate the information on children's exposure to violence.

KEY WORDS: violence exposure; child maltreatment; prevention and intervention; risk and protective factors.

While recent research has documented a pervasive link between child maltreatment and domestic violence, the necessary integration of this perspective into the work of law enforcement, the judicial system, the child welfare system, and social service providers has not yet occurred. As Edleson (2000) has noted, there is not only fragmentation of services, but also often separate ways of thinking about the two events from the perspective of child protection services and programs for battered women. The realities of family violence and the impact on children must be dealt with by a continuum of professionals that include among others judges and police, home visi-

tors, staff in battered women's shelters, early intervention providers and evaluators, child welfare professionals, physicians, and mental health professionals. Thus, informing science and raising awareness about both prevalence of children's exposure to domestic violence and co-occurrence of domestic violence and child maltreatment will not only contribute substantially to the literature, but also ultimately help the children and families who are impacted negatively by such exposure. In this paper, I will first review the literature on prevalence of exposure to domestic violence. Second, I will provide an overview of the available literature on the co-occurrence of child maltreatment and domestic violence. In the course of presenting the studies, I will discuss the impact of violence exposure on children. Finally, I will conclude with directions for the future in this important area affecting vulnerable children.

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REVIEW OF CHILDREN'S EXPOSURE TO DOMESTIC VIOLENCE

Prevalence of children's exposure to domestic violence can be understood by considering the numbers of children exposed and their experiences, how exposure impacts children's healthy development, factors that increase risk or provide protection against the negative effects of exposure, and the types of interventions that can be implemented to mitigate deleterious effects (Fantuzzo & Mohr, 1999). There are significant discrepancies across studies in the estimates on prevalence of children's exposure. Major contributing factors to the inconsistency in the data include differences in definitions of what constitutes exposure to domestic violence and variability in research methodologies for collecting the data. Regardless, there is considerable evidence indicating that homicide, severe violence, and moderate violence occur frequently in homes among family members, and that, regardless of the reports of parents and caregivers, children are exposed to much of this violence. Understanding how such exposure impacts children will be influenced by the perspective chosen to frame the issues. For example, Bronfenbrenner (1986) describes parenting not only in terms of the dyadic relationship between parent and child, but also within a broader context that takes into account multiple relationships and milieus. This ecological perspective may overlap with a risk and protective factors framework and a developmental perspective for understanding children's exposure to domestic violence in two ways. Parents who are usually the main support for children in providing nurturance and protection may not be able to do so when they are exposed to, or are victims of, violence themselves. Further, the impact on children at different developmental periods is related to both their reactions at the time, the supports that are required in their environment to help them cope with violence exposure, and the short- and long-term consequences.

Existing data sources for understanding children's exposure have both strengths and weaknesses. Crime reports, while useful for verifying the occurrence of domestic violence, are influenced by the legal definitions of domestic violence, police protocols in different areas for reporting, and the training of the police officers who handle the calls. In contrast, population-based surveys, while using a clear set of definitions to collect data, rely on retrospective accounts of violence by those who participate in the surveys, limiting the validity of the data. As the field

grows, however, there are developing prospects for gathering more accurate and comprehensive data, especially through greater access to different types of population-based information.

A major set of data regarding child exposure is broad-based survey and program data. A weakness of survey and program data is that these rarely focus on the nature of the child's exposure as a victim or witness nor provide specific information about the children. In the 1987 National Family Violence Survey (Straus & Gelles, 1990), 6,000 households were surveyed using telephone interviews. In this study, 116 per 1,000 women said they had experienced some form of physical or verbal aggression by an intimate partner during the past year, and 44 per 1,000 women said that they had engaged in physical or verbal aggression toward their male partner. Further, 34 per 1,000 women reported experiencing severe violence. Although these data are interesting, it is important to note that there are significant reliability and validity issues in gathering information through retrospective telephone surveys. In addition, this survey did not include specific questions on child exposure to domestic violence (Fantuzzo, 2002). The National Crime Victimization Survey, again using retrospective telephone interviews, indicated in 1993 that the rate of physical attacks against women by an intimate partner was 9.3 per 1,000 and, in 1996, 7.5 per 1,000. The survey also indicated that children under the age of 12 resided in more than 50% of these households.

A risk and protective factors model is a useful framework for understanding children's exposure to violence as a risk factor for later problems. The problems in the child may include negative behavioral, cognitive, social, and emotional outcomes and even psychopathology. Problems in the parents can also lead to child maladaptation (Osofsky & Thompson, 2000). Early studies of exposure estimated that 25–30% of American women are beaten at least once in the course of intimate relationships (Pagelow, 1984). In some communities, it has been reported that almost half of the calls for police assistance are for domestic disturbances. How much of this violence occurs in the presence of children is unknown, which is why the children are considered *invisible victims*. As Judge Cindy Lederman, Administrative Judge of the 11th Circuit in Miami/Dade County, has poignantly described, unlike most people who can escape violence by simply switching off the TV, some children cannot turn off the real-life violence in their lives (personal communication, November 1999). It has been estimated that at least 3.3 million children witness physical and verbal

spousal abuse each year, including a range of behaviors from insults and hitting to fatal assaults with guns and knives (Carlson, 1984; Jaffe, Wolfe, & Wilson, 1990). It is important to note, however, that as alarming as this statistic may be, this frequently cited figure may underestimate the true numbers of children exposed to violence since the data was gathered almost 20 years ago and did not include either divorced parents or children under 3 years of age (Fantuzzo, 2002; Straus, Gelles, & Steinmetz, 1980). Limited data are available that directly address the issue of children's witnessing of parental violence. Straus (1974) studied college students' anonymous reports of witnessing violence between their parents during their last year in high school. Of the children living in two-parent households, 16% reported physical aggression between their parents. In a study done two decades later, O'Brien, John, Margolin, and Erel (1994) interviewed 181 children, 8–11 years of age about their memories of physical aggression between their parents. Within this nonreferred community sample of children living in two-parent households, 25% reported witnessing either father-to-mother or mother-to-father aggression. McCloskey, Figueredo, and Koss (1995), and McCloskey and Walker (2000), studying school-age children, reported that 20% of the children in a community sample said they had seen their father slap their mother.

Protecting children and facilitating their development is a family's most basic function. Regardless of composition, families are uniquely structured to provide the attention, nurturance, and safety that children need to grow and develop. Parents who are aware that they may not be able to protect their children from violence are likely to feel frustrated and helpless. In addition, when parents are exposed to violence or are themselves victims of violence, they are likely to have difficulty being emotionally available, sensitive, and responsive to their children. In these cases, it is important for the traditional societal protectors of children including schools, community centers, churches, and others to help ensure safe environments for the children.

These additional protections are needed for children exposed to violence not only to provide them with more immediate support and guidance, but also because a major concern for these children is that they are at higher risk to become either victims or perpetrators of violence as they grow older. Such potential outcomes may be exacerbated by the fact that they may not have the protection that usually is offered by a safe home environment. In the Spousal Assault

Replication Program, Fantuzzo, Boruch, Beriama, et al. (1997) reported on a major multicity research effort providing more reliable and valid information on exposure by using substantiated data on children exposed to family violence gathered by law enforcement officers and researchers. This program exemplified the advantages of building partnerships between public agencies, such as law enforcement and university researchers, to collect detailed information about violent incidents including who was in the home at the time, who made the call to the police, and who else was assaulted. The data from this five-city study indicated that children were present in households where domestic violence occurred at more than twice the rate than in comparable households in the general population. Further, children under the age of 5, as compared with older children, were more likely to be exposed to multiple incidents of domestic violence and to parental substance abuse over a 6-month period. Other risk factors in homes where domestic violence occurred were poverty, single-parent household, and lower educational level of parent. This study is helpful in providing substantiating information about the fact that younger children, who are most dependent on their caretakers, are most likely to be exposed to serious domestic violence as well as additional risk factors.

Developmental issues as well as vulnerability for young children in domestic violence situations are crucial for understanding the effects of domestic violence on children. Although more attention is now being paid to the effects of such exposure on children (e.g., Fantuzzo and Mohr, 1999; Groves, 1999; Margolin, 1998; McCloskey et al., 1995; Osofsky, 1999; Zuckerman, Augustyn, Groves, & Parker, 1995), further research is needed to understand the comparative effects of exposure to violence versus being a victim of child abuse and neglect. Still less is known about the effects of children's exposure to the co-occurrence of both domestic violence and child maltreatment. Given their developmental needs, young children may be especially vulnerable to the harmful effects of domestic violence because they have not developed the capacity to understand and cope with trauma in the same way as older children (Osofsky, 1999). Groves (Groves, 1999; Groves & Zuckerman, 1997) points out, on the basis of her clinical experience as Director of the Child Witness to Violence Project at Boston City Hospital, that domestic violence has the potential to be particularly damaging for young children when they are exposed to assaults between people whom they love. There is consistent

evidence indicating that children's psychological reactions to trauma are more intense on the basis of their proximity to the violence, familiarity with the victim and/or perpetrator, the child's temperament, developmental stage, severity and chronicity of the violence, and support available to moderate the effects of violence on the child (Osofsky, 1997; Pynoos, Steinberg, Ornitz, & Goenjian, 1997). In our research, we have found that both parents and police perceive witnessing violence against a parent to have a much greater impact on a child than violence against a stranger (Fick, Osofsky, & Lewis, 1997; Osofsky, Hammer, Freeman et al., in press). How much a child perceives or remembers a violent experience affects the presence or absence of symptoms and the circumstances under which symptoms are likely to occur (Drell, Siegel, & Gaensbauer, 1993). Again, younger children seem to be more vulnerable in terms of both immediate effects and long-term risk for later psychological problems in the absence of intervention. With these additional developmental concerns for younger children exposed to violence, the importance of early intervention becomes even more imperative as a way to protect against their substantially greater risk.

At the same time, it is important to recognize that very young children, despite their greater vulnerability, may be partially protected from exposure to a traumatic incident at times because they do not fully appreciate the potential danger. Yet, it is important not to ignore or de-emphasize young children's reactions to violence exposure, especially when the violence occurs in their own homes. Interestingly, in a 2001 survey of a sample of New Orleans police officers' understanding about the effects of domestic violence on young children, over 75% of them endorsed the idea that even very young children are not too young to be affected by exposure to violence in their homes (Osofsky, Hammer, Freeman et al., in press). A number of studies have documented that infants and toddlers are likely to exhibit emotional distress, immature behavior, somatic complaints, and regressions in toileting and language (Bell, 1995; Drell et al., 1993; Jaffe et al., 1990; Margolin, 1998; Osofsky & Fenichel, 1994, 1996, 2000; Pynoos, 1993). Further, the potential protective influence for young children of not being totally aware of what has happened appears to fail when severe trauma has occurred, for example, when they witness one of their parents as either a victim or a perpetrator. Posttraumatic stress symptoms including sleeplessness, disorganized behavior, and agitation are often observed among children even if they are downplayed by caretakers in

their environment. For children exposed to violence, aggressive behaviors are common as are reduced social competencies, depression, fears, anxiety, sleep disturbances, and learning problems (Holden, Geffner, & Jouriles, 1988; Margolin, 1987; Osofsky, 1997, 1999). With domestic violence, children may also experience intense stresses that include fear of death and fear of loss of their parent. It is not uncommon for children to experience intense rage, feelings of guilt, and a sense of responsibility for the violent event (Groves, 1999). For these reasons, it is possible to speculate that exposure to less significant incidents of domestic violence may also have a considerable impact on children, potentially leading to negative outcomes and severe symptoms.

The complexity of providing protection and additional support for young children in domestic violence situations emerges because often the people who are closest to the child, the parents, cannot provide protection and safety. In a recent study, Huth-Bocks, Levendosky, and Semel (2001) found with a community sample of one hundred 3- to 5-year-old children that in addition to the direct effect of exposure to domestic violence on children's verbal abilities, there was an indirect impact due to the maternal stress and depression that affected the quality of the home environment and the mothers' emotional availability to their children. The effect of continual violence exposure and parental psychopathology on children cannot be ignored. McIntosh (2002) broadened these concerns with her report of the relative lack of parental attunement that accompanies domestic violence. The negative effects result from the children having to integrate the experience of violence between people they trust, and also having to live in a stressful nonnurturing environment. Thus, the context of domestic violence for children is an aversive one that goes beyond just exposure to violence. Children learn from what they observe. They learn from being exposed to domestic violence that this behavior is permissible and acceptable. They also, unfortunately, learn the confusing message that the very people who are supposed to protect and nurture them may be placing them in harm's way. What is often underestimated is the potential effect of violence exposure on later relationship difficulties, violence, deviant behavior, and psychopathology. These problems highlight the need for effective intervention strategies for violence-exposed children.

In general, parents tend to underestimate the extent to which their children may be exposed to both community and domestic violence (Richters &

Martinez, 1993). This finding is to be expected for several reasons, including children's fearfulness and attempts to be unseen while observing, parents' wishes that their children not be exposed, and defensiveness regarding the potential exposure. When older children, who are more reliable reporters, are questioned about both community and domestic violence exposure, they usually report much higher levels than do their parents. In determining the effects on children, information is needed on both their actual exposure and their perceptions about family violence (Grych, Seid, & Fincham, 1992; Margolin, 1998; O'Brien et al., 1994).

Future research in this important area needs to carefully consider the methodologies used and the generalizability of findings from experimental studies. For example, the studies of Cummings and Davies (1994) have shown that even expressions of anger between parents negatively affect children's emotions and behavior. However, questions have been raised about the degree to which the experimental situations in these studies are representative of real-life circumstances. Much of the direct knowledge on the effects of domestic violence on children has been obtained by interviewing parents or sometimes older children living in shelters (Holden, Geffner, & Jouriles, 1998; Margolin, 1998; Trickett & Schellenbach, 1998). The data are confounded by the fact that these children have experienced multiple traumas in addition to violence exposure. These children are also influenced by the traumatization of the parents and their desire to psychologically or actually protect their children. For example, most of these children have just undergone a significant loss, are living in a new and strange environment with a traumatized parent, and are living with other traumatized children and parents. Further, and compounding the concerns about the accuracy of the reports of family violence, agreement between parents about whether or not violence has occurred is low; reliability drops even lower when parents are asked if their child has been exposed (Jouriles & O'Leary, 1985; Margolin, 1987; O'Brien et al., 1994). Interrater agreement between children and parents about whether the child has witnessed domestic violence is also low. When children who live in families where there has been documented violence are interviewed, they often can give detailed reports about the violence that their parents assumed went unnoticed (Jaffe et al., 1990).

Based on the available data, there is general agreement that much more information and data are needed on the extent and implications of exposure

to family violence, exposure at different developmental stages, and exposure to different types of violence (Fantuzzo & Mohr, 1999; Holden et al., 1998; Margolin, 1998; Osofsky, 1999; Trickett & Schellenbach, 1998; Zuckerman et al., 1995). Finally, careful studies are needed on factors that may add to children's vulnerability or protect them, especially when they are exposed to family violence.

HOW VIOLENCE EXPOSURE MAY INFLUENCE LATER OUTCOMES

A consideration of risk and protective factors must include an additional risk factor for children exposed to domestic violence, namely, that domestic violence can become part of an intergenerational cycle of violence (Bell, 1995). In a study of 10,036 elementary and high school children in inner-city Chicago, Shakoore and Chalmers (1991) found that children and adolescents who witnessed and were victims of violence were more likely to become perpetrators of violence than those who were not exposed. Another study of 536 children in Grades 2, 4, 6, and 8 linked children's physical aggression with witnessing family violence, primarily spouse abuse (Jenkins & Bell, 1997). A report for the Massachusetts Coalition of Battered Women Service Groups (1995) provides important information about the effects on children when they witness domestic violence. Children learn that (1) violence is an appropriate way to resolve conflicts; (2) violence is a part of family relationships; (3) the perpetrator of violence in intimate relationships often goes unpunished; and (4) violence is a way to control other people.

As noted, it is possible and even likely that early and repeated exposure to family violence may be a precursor to later violent adolescent and adult behaviors. Bell (1995) has elaborated about the impact of exposure to violence on later negative outcomes. He suggests that we have not fully conceptualized the impact of exposure to violence on children compared with the impact of violence exposure on other groups such as veterans of the Korean and Vietnam wars (Bell, 1995). Children and adolescents who have witnessed violence are themselves victims and experience high amounts of stress. From his work, Bell believes that exposure to violence leads to more high-risk behaviors in youth. As Margolin (1998) has emphasized, it is not just that children see aggression, but rather it is that they learn how aggression can be applied in intimate relationships. Thus, children may come to view violence as an acceptable way, perhaps

the only way, to resolve conflicts and may learn to rationalize the use of violence—they know nothing else. An ecological perspective may be useful to explain the effects of children's exposure to violence. It is not just that children are exposed, but that they learn violence may be an acceptable way for individuals to act toward one another.

Witnessing domestic violence may not be perceived as life-threatening, but still be disturbing enough to cause distress. For example, it has been shown in at least one study (Sternberg et al., 1993) that children who were exposed to domestic violence but were not abused reported more depressive features than did a nontraumatized group. Moreover, the group exposed to domestic violence but not abused did not differ in the severity of depressive features when compared to children who had been abused.

From our clinical experience with elementary school age and younger children exposed to repetitive family violence, we frequently observe disturbances in school behavior, mixed feelings toward parents with positive affect being mingled with anger, and difficulties in forming later relationships. With severe violence, including witnessing or experiencing a homicide of a loved one, questions must be raised not only about the immediate reactions, but also about how the children will react over time. From a developmental perspective, children who have been exposed to violence and even death of a loved one when they are very young may undergo changes in their understanding of death and their sense of vulnerability in their own life as they grow older. For adolescents who have been exposed to violence earlier in their lives, being violent themselves may take on a very different meaning. Sometimes, it may become a typical response and the consequences of violent behaviors may not even be considered. Children who are exposed to violence when they are young, compared with those without such exposure, may deal with aggression, sexuality, and intimacy very differently when they reach adolescence. Such early experiences may also impact negatively their later ability to form relationships and influence their parenting during adulthood (Osofsky, 1997).

CO-OCCURRENCE OF CHILD MALTREATMENT AND DOMESTIC VIOLENCE

A striking report in 1990 revealed that in homes where domestic violence occurs, children are physically abused and neglected at a rate 15 times higher

than the national average (Senate Hearing 101–939, 1990). Several studies have found that in 60–75% of families where a woman is battered, children are also battered (Bowker, 1988; McKibben, DeVos, & Newberger, 1989; Straus et al., 1980). In the mid-1970s, researchers began to explore the co-occurrence of child maltreatment and domestic violence. According to a recent report “In Harm’s Way: Domestic Violence and Child Maltreatment,” researchers typically use one of two methods to study the overlap (National Clearinghouse on Child Abuse and Neglect Information, 2001). They either identify evidence of woman battering in families where known cases of child abuse exist, using child protection services records, or, using shelter samples, they search for evidence of child abuse in families where abuse of the mothers has been documented.

In 1975, a national survey was conducted of 1,146 families indicating that 77% of children living in high violence families were abused during their lifetime (Straus, Gelles, & Steinmetz, 1980). In 1988, Stark and Flitcraft (1988) examined medical records of 116 mothers in a hospital setting who were referred for child maltreatment. Remarkably, 45% of the mothers’ medical records either indicated or suggested that they had been abused at some point in their history. This study was replicated at a Boston hospital where the researchers found that 59% of the mothers of abused or neglected children had records suggesting that they had been battered by their partners (McKibben et al., 1989). This work is particularly interesting as investigators included a matched sample of mothers of nonabused/nonneglected children and found that the incidence of woman abuse was much lower in this group.

Several federally funded studies done in the late 1970s included questions for families about major presenting problems in addition to child maltreatment. Those families reporting domestic violence as a significant problem ranged from 11% in a 1977 study to 42% in a 1982 study (Daro & Cohn, 1988). A 1990 review of 200 substantiated cases of child abuse in the Massachusetts Department of Social Services indicated that adult domestic violence was cited in 30% of the cases, with more recent studies indicating the rate may be as high as 48% (Dykstra & Alsop, 1996). A similar review done by English (1998) in Washington State indicated that 55% of the physical and emotional abuse referrals involved domestic violence.

In a study of Minnesota child welfare cases, 71% of the families in crisis reported issues related to domestic violence (Shepard & Raschick,

1999). Edleson's review of 35 published studies of co-occurrence concluded that the majority of reviewed research supports the notion of a high level of overlap ranging from 30 to 60% in most studies (Edleson, 1999). Beeman, Hagemester, and Edleson (2001) in their review of police records cross-referenced with child protection referrals identified that over 64% of the cases were identified as dual violence families. Of some note, although the majority of time the perpetrator of domestic violence is the male, for women, domestic abuse increases their risk of abusing their children. In a national survey of over 6,000 American families, battered women were twice as likely to physically abuse their children than were women who were not abused themselves (Straus & Gelles, 1990). In a recent study, Ross (1996) found that women who were violent toward their husbands were more likely to also abuse their children.

One of the important issues to note with co-occurrence of domestic violence and child maltreatment is the effect on children. This issue is very important from a risk and protective factors framework because providing basic safety and protection in these families may be much more difficult. In Margolin's review of the effects of domestic violence (Margolin, 1998), she noted that 45–70% of children exposed to domestic violence are also victims of physical abuse, and that as many as 40% of child victims of physical abuse are also exposed to domestic violence. McCloskey et al. (1995) reported that children living with a battered mother are also at serious risk for sexual abuse either by the mother's partner or outside of the home. As might be expected, negative outcomes are more likely for children who experience both domestic violence and maltreatment when compared to outcomes for those who experience one form of violence. Further, not infrequently in families where there is domestic violence and child maltreatment, there are also other risk factors including mental health problems, substance abuse, divorce, criminality, poverty, and general family dysfunction. Thus, there are many factors that may be contributing to the negative outcomes for children. More research is needed on the effects of one or more forms of violence exposure on children as well as on factors that moderate the effects, such as support systems, and the child's temperament and capacities. With the literature indicating that the risk for exposure to domestic violence is higher for younger children who are also more vulnerable to child abuse and neglect, the field could benefit enormously from longitudinal follow-up studies.

CONCLUSION

Regardless of the methods used to gather the data, there is little doubt that vast numbers of children are exposed to domestic violence and their responses vary widely depending on their level of risk and vulnerability, developmental status, and the structure of their environments. Studying the prevalence of such exposure is complicated by great variability in what is understood and, subsequently reported, as domestic violence. Studies of the effects of domestic violence exposure on children have been hindered by several factors including (1) difficulties in carrying out randomized trials with samples that are often at very high psychosocial risk; (2) the absence of reliability and validity data for many of the measures frequently used to study violence exposure; (3) the ways that the data is collected relying heavily on parental reports by individuals who may also be traumatized and/or want to protect their children; and (4) the problems in accessing child victims directly, some of whom may be too young to be interviewed and others of whom will require parental consent to be included. Bearing in mind these caveats, in the past few years, more carefully controlled studies are beginning to emerge as evidenced by those cited throughout this paper.

Research and clinical work point to important directions for future work. From a methodological perspective, studies are needed that consider the differential effects of being exposed to violence, being victimized by violence, the severity of the exposure, and the effects of being exposed to an acute trauma as compared with chronic ongoing violence. Samples need to be population-based to allow for broader data gathering than is possible with self-report or parent reports of exposure. They need to include children of different ages, socioeconomic backgrounds, and ethnic or cultural backgrounds. The inclusion of information about violence exposure would be useful to include in national surveys that are gathering information in different areas. Only in these ways will it be possible to identify the "hidden children" and to obtain accurate prevalence data. On the basis of developing new and creative ways to gather this data, it will be possible to gain a better understanding of risk factors in order to build appropriate developmental and other models to understand exposure (Fantuzzo, 2002). A broader base of information in these areas will be helpful in providing education for professionals who work with traumatized children as well as for developing effective prevention and intervention programs.

From a conceptual perspective, more attention is needed to both developmental issues related to the effects of exposure at different ages and to risk and protective factors for traumatized children that include mediating and moderating factors. The data are consistent in indicating that environmental stability, being able to create a safe environment, consistency, and predictability make an enormous difference in young children's coping and adaptation following exposure to violence. Significant longitudinal research has been done on determinants of resilience and conditions that serve as protective factors (Masten, 2001; Masten, Best, & Garmezy, 1990). Although the protective factors literature shows that one of the important mediating or moderating factors is support from a trusted person, achieving stable relationships for children exposed to domestic violence may be a complicated process. In domestic violence situations, there may be opportunities for children to receive support from "nontraditional" available adults, ranging from a relative or friend to a sensitive police officer investigating the incident. While limited longitudinal data are available about the long-term effects on children exposed to domestic violence, the existing data combined with retrospective reports indicate that these children, without intervention, are at higher risk to become either victims or perpetrators later in their lives. Additional resiliency data point to alternative family and community support, and the child's individual resources and temperament as factors that influence the outcomes of violence exposure.

An ecological systems model for prevention and intervention suggests that utilizing resources and support from different groups in society that impact children and families including schools, police, and community groups is likely to have a positive long-term impact on children exposed to violence. However, there is little doubt that being exposed to domestic violence within their own families by those who should be protecting and nurturing them can lead to complex outcomes that may be unpredictable for the children. Children learn by what they observe and in homes with domestic violence, they learn that violence is an acceptable and sometimes the only way to relate. They learn that violence may characterize intimate relationships. Therefore, as they relate to others and as they grow older, violence in relationships may seem quite usual. Although clinical case studies are useful (see Osofsky, Cohen, & Drell, 1995), carefully controlled longitudinal studies would add immensely to our understanding of these influences in the lives of traumatized children.

In summary, it is important that we broaden our understanding of violence exposure from a primary focus on victims and perpetrators to recognize the important "ripple effects" in terms of the psychological impact on children of exposure to violence. Law enforcement officers, families, and others frequently overlook children when an incident of domestic violence occurs. Yet, the negative effects of exposure to domestic violence can be significant. They may include temporary upset in the child or clear symptoms of posttraumatic stress disorder. In extreme cases, severe and chronic exposure with little intervention can lead to later psychopathology and deviant behavior. First responders such as police officers and emergency personnel, with some education about the effects of violence-exposure on children, can play a major role in offering early protection and support for violence-exposed children, especially in domestic violence situations. The effects of a single incident, chronic exposure, and exposure to more than one type of violence on children's development require further systematic study in order to provide a more reliable and valid scientific understanding. A knowledge base will be helpful in developing effective intervention efforts to protect children and to mitigate the negative effects of violence exposure on later behavioral and emotional outcomes.

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