



Practical Strategies

Child welfare policy and practice on children's exposure to domestic violence

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ABSTRACT

Objectives: This article reviews research, policy and programming in Australia, Canada and the US on the child welfare response to EDV.

Method: The review draws on searches of standard research databases, interviews with researchers and practitioners, and the authors' own research.

Results: Although EDV is underreported, across studies 7% to 23% of youths in general population surveys experienced EDV, 36–39% of youth in DV cases have witnessed the violence, and 45–46% of primary caregivers in child maltreatment investigations have experienced DV. Mandatory reporting can increase the number of cases that come to the attention of child welfare, but without resources for training and programming can lead to inappropriate reports, lack of referral for further assessment, and strains on the child welfare system. Improving the child welfare response to EDV can include collaboration between child welfare workers and DV advocates; increased training on screening for DV; new protocols on DV; and dedicated DV staffing within child welfare agencies. In recent years, policy and program attention to EDV has also been embedded within broader national efforts to protect children from violence and maltreatment. Differential response models that eschew investigation in favor of assessment and service delivery hold promise for families with DV.

Conclusions: Empirical data are limited, but current research and practice experience suggest that child welfare agencies seeking to improve the response to EDV should collaborate with other disciplines involved with preventing and responding to DV, seek resources to support training and programming, consider methods that avoid stigmatizing parents, and build in a program evaluation component to increase knowledge about effective practice.

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Over the past 25 years, children's exposure to domestic violence (EDV) has increasingly been considered as a form of child maltreatment (Edleson, 2004). EDV can be defined as a child directly witnessing physical or psychological violence between adults, overhearing the violence, or seeing its aftermath (e.g., resulting injuries or emotional harm). We have chosen to use the broader term EDV instead of exposure to intimate partner violence to also capture children witnessing violence between a caregiver and another adult taking place in the home.

The association of EDV with impaired child development and with both immediate and later negative health outcomes has been well documented (e.g., Bair-Merritt, Blackstone, & Feudtner, 2006; Dauvergne & Johnson, 2001; Jaffe, Wolfe, &

This article is dedicated to the memory of Pamela Whitney, a true pioneer in developing effective child welfare responses to the problem of domestic violence. Ms. Whitney was an assistant commissioner of the Massachusetts Department of Children and Families, where she was a leader in creating one of the United States' first domestic violence units within a state child welfare agency (see http://www.boston.com/bostonglobe/obituaries/articles/2010/12/06/pamela_whitney_57_innovator_in_helping_troubled_families/?rss_id=Most+Popular and Whitney & Davis, 1999).

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Campbell, 2011; Kitzmann, Gaylord, Holt, & Kenny, 2003; Moss, 2003). Like other forms of maltreatment, EDV seldom occurs in isolation and is associated with a higher likelihood of experiencing other forms of victimization (Hamby, Finkelhor, Turner & Ormrod 2010; Holt, Buckley, & Whelan, 2008; Renner & Slack, 2006) as well as caregiver substance abuse and mental health problems (Kohl, Barth, Hazen, & Landsverk, 2005; Kohl, Edleson, English, & Barth, 2005).

There are emerging movements in several countries to improve policy and practice to protect children from EDV. These movements have resulted in the collection of new data on EDV and the design and implementation of new child welfare policies and practices. To assist with the development of child welfare practice, this article briefly summarizes current knowledge on the prevalence of EDV, and on child welfare services policies and practices that may hold promise for reducing the frequency and impact of EDV on children. We focus on Australia, Canada, and the United States (US) since these countries share: (1) a similar socio-legal context; (2) a long history of enacting and expanding legislation about reporting of maltreatment; (3) debates regarding the application of reporting laws to EDV; and (4) new child welfare practices that show promise for responding more effectively to EDV (Mathews & Kenny, 2008).

Prevalence

The starting point in the development of a child welfare response to EDV is to understand the magnitude of the problem. Surveys in Australia, Canada and the US use different methodologies and deal with children in different age ranges, but data suggest that EDV is a sizeable problem common to each. In Australia, EDV was assessed by a 1998–1999 national population survey of 5000 Australians aged between 12 and 20 from all States and Territories in Australia. Youths in school responded to questionnaires administered there and youths out of school responded to a street intercept survey. The survey indicated that 23% of youths had witnessed at least 1 act of violence perpetrated against their mother or stepmother (Indermaur, 2001). The 2005 National Personal Safety Survey conducted by the Australian Bureau of Statistics found that 4.9% of men and 15% of women reported episodes of violence from a previous partner since the age of 15 and 61% of those said they had children in their care during that relationship, 36% of whom were likely to have witnessed the violence (Australian Bureau of Statistics, 2005). Research in Australian courts found that 68% of cases in the Family Court of Australia and 48% in the Federal Magistrates courts included allegations of children witnessing domestic violence (Moloney, Smyth, Weston, Richardson, Qu & Gray, 2007).

Several studies document the prevalence of EDV in Canada. In the National Longitudinal Survey of Children and Youth (NLSCY), parents were questioned on the violence witnessed by children in their homes. According to the NLSCY 1998/99 cycle, 8% of children aged 4–7 years had witnessed violence at home (Moss, 2003). The 2004 General Social Survey found that 7% of Canadians over the age of 14 had experienced spousal violence in a current or previous marital or common law union, and that 40% of all victims of spousal abuse had children who witnessed the abuse (Au Coin, 2005). Similarly, the 1993 Violence against Women Survey indicated that almost 4 in 10 victimized women (39%) reported that their children saw the violence, suggesting that an estimated 1,000,000 children had witnessed violence by their father against their mother (Dauvergne & Johnson, 2001). According to the 2008 Transition Home Survey (THS), approximately 101,000 women and children were admitted to 596 shelters in Canada (Sauvé & Burns, 2009); almost half of these female victims of abuse were admitted with children, and 25% of them were in the shelter hoping to protect their children from direct or indirect abuse.

In the US, the National Survey of Children's Exposure to Violence was a telephone survey involving a nationally representative target sample of 4,549 youth aged 0–17 (Finkelhor, Turner, Ormrod & Hamby, 2009). The main survey was conducted with youths themselves aged 10–17 and caregivers provided information for children aged 2–9. This research found that 6.2% of children had witnessed an assault between their parents in the previous year, and 16.3% during their lifetime. Among children who reported other forms of child maltreatment, these percentages climbed to 20.8% in the previous year and 49.6% during their lifetime (Hamby et al., 2010).

Of particular concern for child welfare agencies is the prevalence of EDV among cases referred to child welfare services. The Canadian Incidence Study of Reported Child Abuse and Neglect (CIS), which surveys caseworkers about child maltreatment reports, found among the substantiated investigations in its 2008 sample that 46% of primary caregivers had been victims of domestic violence, and EDV was present in 32% of these cases (Williams, 2011). The US National Survey of Child and Adolescent Well-Being (NSCAW) found similar results in its sample of child maltreatment investigations: 29.0% of female caregivers reported experiencing DV in the past year and 44.6% over their lifetime (Hazen, Connelly, Kelleher, Landsverk, & Barth, 2004). National child welfare data on EDV are not available for Australia.

While these data indicate substantial prevalence, statistics on EDV almost certainly underestimate the size of the problem. Most forms of victimization tend to be underreported in survey research (Cohen & Land, 1984; see also Finkelhor et al., 2009), and DV is typically a hidden crime that victims tend to underreport both to authorities and researchers (Dauvergne & Johnson, 2001; Public Health Agency of Canada, 2010). Moreover, child respondents to surveys may not have the cognitive skills to retrieve memories of EDV reliably (Finkelhor et al., 2009), even when it has affected them. Current methods of gathering data about DV in client data systems further contribute to underreporting EDV, because they often do not record whether a child was exposed. For example, Canadian police data only capture children if they were direct victims of the violence, though Canadian police often report to child welfare if children were present during the adult assault (Tonmyr, Li, Williams, Scott, & Jack, 2010). In addition, system data on DV concerns female victims and there is very little systematic information about male victims and little information on children's EDV in these cases (see e.g., Allen, 2011).

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