

## IMPACT OF DOMESTIC ABUSE ON CHILDREN BY DEVELOPMENTAL LEVEL

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**The following table outlines the possible effects of domestic abuse on a child by developmental level and identifies potential protective factors that may minimise the impact of abuse on the child.**

*(Key source document: Cleaver, H., Unell, I. and Aldgate, J. (1999) Children's Needs – Parenting Capacity: The Impact of Parental Mental Illness, Problem Alcohol and Drug Use and Domestic Violence on Children's Development. London: The Stationary Office)*

### STAGE 1: THE CHILD FROM 0-2 YEARS

AREAS OF DEVELOPMENT	IMPACTS OF DOMESTIC ABUSE	PROTECTIVE FACTORS	WARNING SIGNS
<b>HEALTH</b>	Foetal damage from physical violence against the mother. This could include foetal fracture, brain injury, organ damage, spontaneous abortion, premature birth, low birth weight and still birth. Retarded brain growth from stress hormones in mother's blood system. Young children may suffer physical assault as part of the violence against a parent	An alternative safe and supportive residence for the expectant mothers subject to violence and threats  Regular support and help from a primary health care team, and/or social services and relevant voluntary sector support agency	Depressed, withdrawn mother  Signs of current or previous physical abuse of parent and baby  Baby is jumpy, nervous, fretful; has sleep and eating disturbances; is not responsive or cuddly
<b>INTELLECTUAL DEVELOPMENT</b>	Depressed parents respond less frequently to their baby's cues or modify their behaviour to that of their infant. Some research suggests this can lead to delays in an infant's expressive language and ability to concentrate on and complete simple tasks	The presence of an alternative or supplementary caring adult who can respond to the child's developmental needs	Poor language skills in the infant
<b>IDENTITY</b>	The infant may develop identity problems if parents/carers call the child by different names or if highly critical of the child and show little warmth	As above	As above
<b>FAMILY AND SOCIAL RELATIONSHIPS</b>	A parent whose depression is caused or compounded by living in an abusive environment may emotionally detach from the child	As above	As above
<b>EMOTIONAL/ BEHAVIOURAL DEVELOPMENT</b>	A baby largely develops emotions/behaviour from carers. A depressed parent experiencing domestic violence may withdraw emotionally and this can be mirrored in the infant. Children as young as 18 months became upset and distressed during angry exchanges between parents	As above	A baby who is withdrawn and difficult to engage in play or communication

STAGE 2: The child from 3-4 years

<b>AREAS OF DEVELOPMENT</b>	<b>IMPACTS OF DOMESTIC ABUSE</b>	<b>PROTECTIVE FACTORS</b>	<b>WARNING SIGNS</b>
<b>HEALTH</b>	Abused parent suffering may be limited in their capacity to protect their child from physical danger and provide a child with feelings of safety. This may be demonstrated by a poor physical condition of the child, i.e. the child may appear unfed or unwashed and have marked developmental problems especially in language	A safe and supportive residence for the parent subject to violence and threats  Regular support and help from a primary health care team, and/or social services, including consistent day care, respite care, accommodation and family assistance	Poor physical neglected condition  Signs of current or previous physical abuse of the child  Poor language skills  Sleep problems  Delayed toileting  Frequent visits to GP/hospital
<b>INTELLECTUAL DEVELOPMENT</b>	The child may show a lack of interest in their environment and poor intellectual development. Children may be too frightened to show inquisitive behaviour. Their attendance at pre-school facilities may be disrupted because an abused parent may wish to conceal the evidence of domestic abuse	The presence of an alternative or supplementary caring adult who can respond to the child's cognitive and emotional needs  Regular attendance at pre-school facilities	Little awareness and/or understanding of their environment  Problems relating to other children
<b>IDENTITY</b>	Children of this age often blame themselves for their parents' problems. Reports from abused parents suggest that infants who witness domestic violence try to protect their parents	As above	As above
<b>FAMILY AND SOCIAL RELATIONSHIPS</b>	Child may be inconsistently parented, emotional unavailability of parent, exposure to inappropriate carers and separation. Can become fearful or unnaturally vigilant believing they are in continual danger. May develop inappropriate behaviour and insecure attachments through apathy and disinterest. Alternatively they may exhibit controlling behaviour which can be accompanied by inner turmoil. Infants may cope with disturbing parental behaviour by appearing not to respond. These children may appear to be coping with the violence, but in reality they are likely to be trying to prevent further frightening	As above	Overly aggressive and bullying behaviour of peers/siblings  Controlling behaviour over siblings  Imitating inappropriate sexual behaviour  Withdrawn from conversation and has difficulty expressing feelings

	responses from the parent.		
<b>EMOTIONAL/ BEHAVIOURAL DEVELOPMENT</b>	Where children experience frightening parental behaviour they can demonstrate symptoms similar to post traumatic stress disorder including; bed-wetting, sleep disturbance and rocking. Children experiencing domestic violence demonstrate significantly more behavioural problems than those who have only witnessed the abuse. Pre-school children can be at greater risk of emotional disturbance than older more articulate children because they are less able to communicate verbally.	As above	Behaving in a nervous or jumpy way

### STAGE 3: The child from 5-9 years

<b>AREAS OF DEVELOPMENT</b>	<b>IMPACTS OF DOMESTIC ABUSE</b>	<b>PROTECTIVE FACTORS</b>	<b>WARNING SIGNS</b>
<b>HEALTH</b>	Increased risk of physical injury, extreme anxiety and fear. This brings an increased risk of medical problems including injuries, convulsive disorders and increased frequency of hospitalisation. Children can also show other health related issues which may include: Stomach pains, headaches, asthma, allergies and disturbed sleep patterns. Children's ill health may go unrecognised because of school absenteeism, as a result of parenting problems, may mean school medicals are missed	Ability to separate either psychologically or physically from a stressful situation A safe and supportive residence for the abused parent Support from primary health care team, social services or appropriate voluntary services (i.e. respite care/accommodation) Attendance at school medicals	Frequent visits to the GP and hospital Bed wetting Depressed, withdrawn behaviour High level of school absenteeism
<b>INTELLECTUAL DEVELOPMENT</b>	Some research suggests that children of this age, from a violent home, can display a gender split in their cognitive development e.g. that significant number of boys display aggression and anxiety, whilst the girls are more likely to underachieve in school	An alternative or supplementary caring adult who can respond to the child's cognitive and emotional needs Sympathetic, empathetic and vigilant teachers Regular attendance at school and attendance at an organised out of school activities group including homework and breakfast clubs	Aggressive or confrontational behaviour from male children Extreme levels of anxiety and introverted behaviour from female children
<b>IDENTITY</b>	Some evidence that being of same gender as abused parent appears to be more traumatising than for children of opposite sex. Risk of children developing	As above	As above

	low self esteem and belief that they are unable to control events in their environment. Children may also believe they trigger the violence between their parents		
<b>FAMILY AND SOCIAL RELATIONSHIPS</b>	Children can feel helpless and guilty. Inconsistent parental behaviour may cause anxiety and faulty attachments. When separation from an attachment figure is unavoidable children of this age may demonstrate lower levels of distress than younger children because of their increased understanding of time	A supportive older sibling who can offer significant support to younger children Being taught different ways of coping and being sufficiently confident to know what to do when parents are incapacitated	The appearance of poor attachment to either parent
	When parents' behaviour is unpredictable or embarrassing children can feel ashamed or embarrassed about the behaviour amongst anyone outside the family. Will try to keep it secret	Social networks outside the family, especially with a sympathetic adult of the same sex	Clear avoidance of discussing family life
<b>EMOTIONAL/ BEHAVIOURAL DEVELOPMENT</b>	Children may seek to escape the violent behaviour through fantasy and their parent's behaviour is reinterpreted in acceptable ways. Gender may influence the child's reaction to violence. As with identity it is widely accepted that boys are more likely to act out their distress with anti-social, aggressive behaviour such as lying, stealing and attacks on their peers. Girls tend to internalise their worries, showing symptoms of depression, anxiety and withdrawal. The temperament of the child is also an issue. Domestic violence does not always impinge equally on all children in the family. Research suggests that parental annoyance is more likely to be directed towards the temperamentally 'difficult' child. A further fact is that children who witness anger or violence can have difficulty in controlling their own emotions and behaviour. They receive negative messages from the abuse that 'you can do bad things and not be punished' and 'men are strong, women are weak'	A friend. Children who have at least one friend have been shown to have a higher self worth and lower scores on loneliness than those without	Extreme fluctuation of moods and emotions during conversation
<b>SELF CARE SKILLS</b>	Children may be expected to take too much responsibility for themselves and they may themselves adopt a parenting role towards their abused parent.	As above	Bearing too much responsibility for their care and that of parents and siblings

STAGE 4: The child from 10-14 years

<b>AREAS OF DEVELOPMENT</b>	<b>IMPACTS OF DOMESTIC ABUSE</b>	<b>PROTECTIVE FACTORS</b>	<b>WARNING SIGNS</b>
<b>HEALTH</b>	Children may be left to cope alone with the physical changes that accompany the onset of puberty. If children have a parent suffering from depression brought on by domestic violence this can increase the risk of psychological problems in the child. Children may fear being physically hurt in the abusive situation	Regular medical and dental checks including school medicals Factual information about puberty, sex and contraception An ability to separate, either psychologically or physically from the stressful situation	Children may be anxious about how to compensate for physical neglect Children may appear to have low self esteem Fearful of getting hurt Develop an unhealthy interest in alcohol and drugs
<b>EDUCATION</b>	Impact on education and academic competence can be varied. School may be seen as a source of help and sanctuary from problems at home. Or children can experience an inability to concentrate causing them to perform below their expected ability and missing school because they are caring for parents and or siblings	Regular attendance at school Sympathetic, empathic and vigilant teachers Belonging to organised out of school clubs, including homework clubs	School performance may be below expected ability or very much an overachiever Poor school attendance record
<b>IDENTITY</b>	Children typically begin to question parents' values and beliefs. Rigid family thinking or extreme behaviour such as domestic violence may lead to rejection of the family and low self-esteem. Like younger children, adolescents can blame themselves for the behaviour of a parent		Depression and low self-esteem Children may be in denial of their own needs and feelings
<b>FAMILY AND SOCIAL RELATIONSHIPS</b>	Children can be cautious of exposing family life to outside scrutiny so friendships are restricted. A parent may impose isolation from peers, extended family, or outsiders. Some children may cope with the violence by running away. By age eleven children can start a pattern of going missing. Children who wander the streets are shown to be very much at risk of detachment from school and involvement in crime.	A mutual friend Research suggests that positive features in one relationship can compensate for negative qualities in another. Mutual friendship is associated with feelings of self worth	Friendships may have been restricted Attempts to run away from home Children may be cautious about discussing family life
<b>SOCIAL PRESENTATION</b>	Some children may use violent, bullying or aggressive language and behaviour towards peers or adults	A mentor or trusted adult with whom the child is able to discuss sensitive issues	Inappropriate behaviour such as violence, bullying and sexual abuse
<b>EMOTIONAL/ BEHAVIOURAL DEVELOPMENT</b>	The emotional instability in children of this age means that like in younger children the impact of parental conflict may be great. Conflict between a caring role	Information on how to contact a relevant professional and a contact person in the event of a crisis	Overly aggressive behaviour An inability to verbally express their frustrations and emotions

	and the child's own needs can lead to feelings of guilt and shame. Some children will demonstrate their emotions and frustrations through aggressive behaviour		Early sexual activity
<b>SELF CARE SKILLS</b>	Continual fear of what might happen when away from the home can cause young adolescents to be continually vigilant. My take too much responsibility for care/protection of other family members, may try to be absent from home as little as possible. Events, eg having lunch at school, visiting friends or school trips can be forgone causing developmental and socialisation skills to be neglected	As above	The child appears overly anxious and unsettled Perceptions of risk may be particularly acute or conversely poorly reactive Capacity to engage in social interaction in a normal developmentally way may be impaired

STAGE 5: The child from 15+ years

<b>AREAS OF DEVELOPMENT</b>	<b>IMPACTS OF DOMESTIC ABUSE</b>	<b>PROTECTIVE FACTORS</b>	<b>WARNING SIGNS</b>
<b>HEALTH</b>	Children may adopt equally extreme but opposite positions. If a parent has been emotionally unavailable to a child, may not have been an opportunity to discuss contraception or how to behave in close personal relationships. Children may have grown up with inappropriate role models, poor attitude to and/or understanding of sexual relations. Could put them at risk of pregnancy or getting someone pregnant or of catching a sexually transmitted disease. Young people need a level of self confidence to be able to influence what happens to them in a sexual relationship. Growing up with domestic violence will usually damage a young person's self confidence	Regular medical and dental checks Factual information about puberty, sex and contraception	Inappropriate sexual behaviour or comments towards peers or adults Signs of sexual aggression
<b>EDUCATION</b>	Failure to achieve education potential could lead to school exclusion, lack of attainment that will determine future life chances. If disturbed behaviour results in exclusion from school, teenagers need an adult to champion their cause and strive for their re-entry or ensure their learning continues	Sympathetic, empathic, vigilant teachers Regular attendance at school/form of education When no longer in full time education, a job An adult who acts as a champion, committed to the young person	Frequent patterns of disciplinary action at school A history of exclusion

		acting vigorously and persistently on their behalf	
<b>IDENTITY</b>	Young people growing up in families where little is predictable or reliable they are likely to believe that they have little control over what happens to them	Un-stigmatised support from a relevant professional who recognises the child's role as a carer A mutual friend who increases feelings of self worth	Has difficulty in making decision and following them through
<b>FAMILY AND SOCIAL RELATIONSHIPS</b>	Adolescents can feel isolated from friends and adults outside of the family. Wish to escape from parents can make young people very vulnerable. Young people may attempt to withdraw/run away in a number of ways by emotionally withdrawing and spending large amounts of time on their own. High incidences of children running away from domestic violence. Or, the young person may seek escape/solace in drugs and alcohol. The experience of domestic violence will also affect young people's dating behaviour. Research suggests that witnessing the abuse of their mother is associated with teenage boys taking an aggressive, angry and abusing role during dates	The acquiring of a range of coping strategies and being sufficiently confident to know what to do if a parent is unable to manage A trusted adult with whom the young person is able to discuss sensitive issues	Poor social networks amongst peers and adults A history of running away from home extremely introverted behaviour evidence of reliance on drugs or alcohol a tendency to get serious about relationship too early in order to escape home over aggressive behaviour with peers and adults
<b>SOCIAL PRESENTATION</b>	Young people may resort to aggression as a method of solving their own problems		Overly aggressive physical and verbal behaviour
<b>EMOTIONAL/ BEHAVIOURAL DEVELOPMENT</b>	Tendency to blame themselves for parental behaviour continues through to late adolescence. Research suggests children who have experienced physical and sexual abuse are at risk for suicidal behaviour, self harming and depression	As above	Signs of depression and feelings of powerlessness and evidence of self harm
<b>SELF CARE SKILLS</b>	When away from home many teenagers continue to worry about their parents and siblings, this concern may result in young people leading a restricted life	As above	Limited social networks and social skills