

Domestic Violence

What is Domestic Violence?



The term domestic violence is commonly defined as a behavior, or pattern of behaviors, that occurs between intimate partners with the aim of one partner exerting control over the other. Domestic violence may include psychological threats, emotional abuse, sexual abuse, and/or physical violence. This clinical definition is broader than the legal definition, which may be restricted to acts of physical harm. In the past twenty-five years, public awareness of the issue of domestic violence has grown tremendously. As the scope of the problem [1] has become understood, domestic violence is now acknowledged as a significant legal and public health issue, not only a private family problem. There are laws in every state that make domestic violence illegal. There is also federal funding available in all states to provide shelter and services for victims of domestic violence.

Between 25 and 31 percent of US women report being a victim of domestic violence at some point in their lives (Collins, 1999; Tjaden & Thoennes, 2000). Domestic violence occurs across the spectrum of relationships, from dating teens to elderly couples, in both heterosexual and same-sex relationships. Although the majority of victims of domestic violence are women, it is important to acknowledge that men are also victims of domestic violence, and that in some situations both partners may engage in violent behavior.

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Children and Domestic Violence

Exposure

Children are exposed to or experience domestic violence in many ways. They may hear one parent/caregiver threaten the other, observe a parent who is out of control or reckless with anger, see one parent assault the other, or live with the aftermath of a violent assault. Many children are affected by hearing threats to the safety of their caregiver, regardless of whether it results in physical injury. Children who live with domestic violence are also at increased risk to become direct victims of child abuse. In short, domestic violence poses a serious threat to children's emotional, psychological, and physical well-being, particularly if the violence is chronic.

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Effects

Not all children exposed to violence are affected equally or in the same ways. For many children, exposure to domestic violence may be traumatic, and their reactions are similar to children's reactions to other traumatic stressors.

Short-Term Effects of Domestic Violence on Children

Children's immediate reactions to domestic violence may include:

- Generalized anxiety
- Sleeplessness
- Nightmares
- Difficulty concentrating
- High activity levels
- Increased aggression
- Increased anxiety about being separated from a parent
- Intense worry about their safety or the safety of a parent

Long-Term Effects of Domestic Violence on Children

Long-term effects, especially from chronic exposure to domestic violence, may include:

- Physical health problems
- Behavior problems in adolescence (e.g., juvenile delinquency, alcohol, substance abuse)
- Emotional difficulties in adulthood (e.g., depression, anxiety disorders, PTSD)

Exposure to domestic violence has also been linked to poor school performance. Children who grow up with domestic violence may have impaired ability to concentrate; difficulty in completing school work; and lower scores on measures of verbal, motor, and social skills.

“Children may learn that it is acceptable to exert control or relieve stress by using violence, or that violence is linked to expressions of intimacy and affection.”

In addition to these physical, behavioral, psychological, and cognitive effects, children who have been exposed to domestic violence often learn destructive lessons about the use of violence and power in relationships. Children may learn that it is acceptable to exert control or relieve stress by using violence, or that violence is in some way linked to expressions of intimacy and affection. These lessons can have a powerful negative effect on children in social situations and relationships throughout childhood and in later life.

Ages and Developmental Stages: Symptoms of Exposure

As with other trauma types, children's responses to domestic violence vary with age and developmental stage. In addition, children's responses depend on the severity of the violence, their proximity to the violent events, and the responses of their caregivers.

The table below shows a brief list of possible reactions/symptoms by age: young children (birth to age 5), school-age children (aged 6 to 11) and adolescents (aged 12 to 18).

Age Birth to 5	Age 6 to 11	Age 12 to 18
<ul style="list-style-type: none"> • Sleep and/or eating disruptions • Withdrawal/lack of responsiveness • Intense/pronounced separation anxiety • Inconsolable crying • Developmental regression, loss of acquired skills • Intense anxiety, worries, and/or new fears • Increased aggression and/or impulsive behavior 	<ul style="list-style-type: none"> • Nightmares, sleep disruptions • Aggression and difficulty with peer relationships in school • Difficulty with concentration and task completion in school • Withdrawal and/or emotional numbing • School avoidance and/or truancy 	<ul style="list-style-type: none"> • Antisocial behavior • School failure • Impulsive and/or reckless behavior, e.g., <ul style="list-style-type: none"> ◦ School truancy ◦ Substance abuse ◦ Running away ◦ Involvement in violent or abusive dating relationships • Depression • Anxiety • Withdrawal

It is important to remember that these symptoms can also be associated with other stressors, traumas, or developmental disturbances, and that they should be considered in the context of the child and family's functioning.

Adolescents as Victims

Adolescents are involved in domestic violence not only as witnesses to abuse between their parents/caregivers but also as individuals who may themselves be involved in abusive relationships. Data suggests that adolescents are at higher risk of being involved in an abusive relationship than are adults (American Bar Association, 2006). Females 16 to 24 are more vulnerable to intimate partner

violence than are females in any other age group. Gay, lesbian, and bisexual adolescents are just as likely to experience dating violence as are their heterosexual peers (Halpern, Young, Waller, Martin, & Kupper).

“Many teenagers think that jealousy, possessiveness, and violence are signs that their partner loves them.”

Surveys conducted with adolescents demonstrate that they hold attitudes that normalize abusive or controlling relationships. For example, many teenagers think that jealousy, possessiveness, and violence are signs that their partner loves them; and about half of high school girls and three-quarters of high school boys believe that forced sex is acceptable in some circumstances (Michigan State University, n.d.; Jackson, Cram, & Seymour, 2000). Nearly 1 in 5 teenage girls who have been in a relationship said a boyfriend had threatened violence or self-harm if presented with a breakup (Liz Claiborne Inc., 2005).

Teen dating violence is associated with higher levels of substance abuse, violence, and victimization, as well as with lower achievement in school. Victims of dating violence display a strong, consistent pattern of exposure to and participation in a broad range of high-risk behaviors including unhealthy weight control, sexual risk behavior, and suicidal ideation (Silverman, Raj, Mucci, & Hathaway, 2001).

Generally, parents are uninformed about the risk of dating violence for their adolescent children, and most parents have not talked to their teenage or young adult children about dating violence (American Bar Association, 2006). Teens rarely report dating violence, possibly because they think it is a normal part of a relationship.

Resources for Teens

For information on dating violence:

- loveisrespect.org: National Teen Dating Abuse Helpline ^[2]
- thatsnotcool.com ^[3]
- [Love Doesn't Have To Hurt TEENS](#) ^[5] (PDF)

Identifying Children Affected by Domestic Violence

Children who live with domestic violence have been called the "silent" or "hidden" victims of violence because their presence is often overlooked by the parents/caregivers or unknown by observers and professionals. Adult victims may be hesitant to disclose to police, hospital staff, or child welfare workers that their children have seen the violence. This may be due to embarrassment, fear of retaliation or harm, or fear that their children might be removed from their care by Child Protective Services. Professionals who come in contact with these children and families may not ask about children's exposure to domestic violence because they are wary of offending caregivers or because they do not know what to do to help the children they do identify. In these cases, children are not linked with services.

In recent years, however, many service systems have increased their efforts to identify children and provide services to their families. For example:

- Police departments. Many police officers routinely document the presence of children when they respond to calls involving domestic violence and also provide linkages to services.
 - Among the NCTSN resources that provide examples of this trend are:
 - [Creating a Trauma-Informed Law Enforcement System \(2008\)](#) ^[6] (PDF)
 - [Cops, Kids, & Domestic Violence](#) ^[7] (Video)  ^[8]
 - Also see: [Service System Responses](#) ^[9] for information on other programs.
 - The David and Lucile Packard Foundation funded a series of handbooks about children exposed to violence including:
 - [Children Exposed to Violence: A Handbook for Police Trainers to Increase Understanding and Improve Community Responses](#) ^[10]
 - [Youth Exposed to Domestic Violence: A Handbook for the Juvenile Justice System to Enhance Assessment and Intervention Strategies for Youth from Violent Homes](#) ^[11]
- Pediatric and family practice settings. Screening and assessment is conducted in these settings.
 - Family Violence Prevention Fund, in partnership with the American Academy of Pediatrics, the National Association of Pediatric Nurse Practitioners, and other organizations: [Domestic Violence: Consensus Recommendations for Child and Adolescent Health \(2010\)](#) ^[12] (PDF) to help practitioners learn how to assess for and respond to domestic violence.
- Early child care settings. Children are identified and supported.
 - The David and Lucille Packard Foundation: [Children Exposed to Domestic Violence: An Early Childhood Educator's Handbook to Increase Understanding and Improve Community Responses](#) ^[13]
 - The National Child Welfare Resource Center for Family-Centered Practice: [Silent Realities: Supporting Young Children and Their Families Who Experience Violence \(2006\)](#) ^[14] (PDF)
- Middle and high schools. Information and resources on teen dating violence and safety in relationships.
 - [National Youth Violence Prevention Resource Center](#) ^[15]
- Primary and secondary schools. Information on identifying and supporting children who have been exposed to domestic violence.
 - The David and Lucille Packard Foundation: [Children Exposed to Domestic Violence: A Teacher's Handbook to Increase Understanding and Improve Community Responses](#) ^[16]

Interventions for Children Exposed to Domestic Violence: Core Principles

Safety First

The first and most important intervention for children is to address the issues of safety for the family. This usually involves working with the victim of violence to discuss the options she/he might consider to increase safety. Legal advocacy, shelters, and domestic violence service agencies are good resources for addressing the challenges of safety. The first step toward helping the child is seeing that the abused parent/caregiver is safe; another essential step is in assisting older children and adolescents in planning for their safety. Helping children and teens to develop specific strategies for keeping safe gives them a sense of control so that they feel less vulnerable.

Child and Family Therapies

There are a wide variety of counseling and mental health interventions available to families affected by domestic violence. Usually, families need more than therapy; they need case management and advocacy to assist the victim of violence in navigating the legal system, and in obtaining the resources and support the adult victim needs to maintain safety and security for herself/himself and the children. It is important that mental health treatment be provided in a context of comprehensive support for the children and their nonoffending parent.

For children, interventions include groups, individual therapy, and dyadic treatment with their nonoffending parent. An essential component of intervention with all children is the priority of supporting and strengthening the relationship between the nonoffending parent and the child. For most children, a strong relationship with a parent is a key factor in helping a child heal from the effects of domestic violence. The choice of treatment depends on the child's age, the nature and severity of the traumatic reaction, the circumstances of the family, and the availability of other supports. In either a group or an individual format, treatment can provide children and their caregivers with important information about domestic violence and common childhood reactions, which can help normalize their experience and decrease their sense of isolation.

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Many shelters and domestic violence service agencies offer psychoeducational and/or support groups for children. These groups are important tools in helping children to stabilize and to recognize that they are not alone with their worries and fears. Mental health treatment can give children/adolescents a chance to talk about and make sense of their experiences in the presence of a caring and neutral counselor. Children may have cognitive distortions or misunderstandings about what has happened or why it happened such as blaming themselves, blaming the victim, and blaming police or other authorities who attempt to intervene. Children often feel torn between their parents or confused by conflicted feelings of love for and fear of their violent parent. A therapist works with the child to correct these misconceptions and to lessen the child's conflicts. For many children, it is very helpful to create a "trauma narrative," in which he/she makes a complete account of what has happened. This allows the child and therapist to understand in more detail what exactly the child experienced as well as which elements of the experience are most disturbing, and why, and to address specific misunderstandings as they are identified.

For victims, interventions include support groups and individual counseling offered through domestic violence service agencies and shelters (Sullivan & Gillum, 2001). A variety of intervention programs for batterers are available, some of which serve voluntary clients and others that are mandated through the criminal justice system (Saunders & Hamill, 2003).

Generally, it is not considered appropriate to engage victims and abusers in couples or family treatment because it may not be safe for the victim or children to participate honestly in the treatment. There is an evolving interest among child-focused therapists to involve the offending parent in the treatment of children when it is safe and clinically appropriate to do so. Because children may maintain strong psychological ties (and, in many cases, direct access) to their offending parents, involving them in the therapeutic treatment provides an opportunity to directly address the impact of the violence on the child and family. An important component of this work is the offender's acknowledgment of the abuse, commitment to abstain from abuse, and willingness to address this issue honestly and openly within the family (Groves, Van Horn, & Lieberman, 2006).

Interventions: Treatments Developed by NCTSN Members

Some members of the NCTSN are involved in developing, testing, and disseminating evidence-based treatments for children who experience posttraumatic reactions following their exposure to domestic violence. These interventions are described briefly below, with

links to resources that offer more complete information about each. Multimedia presentations on many of these interventions are available in the NCTSN [Training Archives](#) [17].

Child Parent Psychotherapy (CPP)

A dyadic attachment-based treatment for young children exposed to domestic violence and other interpersonal violence developed by the Child Trauma Research Project, University of California, San Francisco. Year-long treatment focuses on safety, affect regulation, understanding of trauma reactions, improving the parent-child relationship, and joint creation of trauma narrative.

- [Child-Parent Psychotherapy fact sheet \(2008\)](#) [18] (PDF)
- [Child-Parent Psychotherapy fact sheet: Culture-specific information \(2008\)](#) [19] (PDF)

Group Treatment for Children Affected by Domestic Violence

A manualized group treatment model developed by Children's Institute, Inc. (CII) for children aged 5 and over and their nonoffending parent. Children and adult victims of domestic violence attend parallel weekly groups. Topics include psychoeducation on safety, the cycle of violence, and parenting, as well as coping skills such as relaxation, mindfulness, yoga, and movement therapy. Additional interventions focus on feelings identification, trauma cues, anger management, cognitive processing, creating a trauma narrative, making meaning, and setting goals for the future. For more information on this intervention or training, contact CII's Child Trauma Treatment Center senior director, Dr. Leslie Anne Ross: lross@childrensinstitute.org [20]

- [Group Treatment for Children Affected by Domestic Violence fact sheet](#) [21] (PDF)

Structured Psychotherapy for Adolescents Responding to Chronic Stress (SPARCS) A group treatment for adolescents with chronic trauma exposure who may still be experiencing chronic stress and who have difficulties in many areas of functioning. Groups address such topics as affect regulation, impulsivity, relationships, numbing and avoidance, and making meaning of experiences. SPARCS was developed by the Adolescent Trauma Treatment Development Center, North Shore University Hospital.

- [Structured Psychotherapy for Adolescents Responding to Chronic Stress fact sheet \(2008\)](#) [22] (PDF)
- [Structured Psychotherapy for Adolescents Responding to Chronic Stress fact sheet: Culture-specific information \(2008\)](#) [23] (PDF)

Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)

A brief treatment (ideally, 12 to 16 weeks) for children aged 3 to 18 affected by traumatic life experiences and their parents. TF-CBT helps children develop skills for processing the trauma; managing distressing thoughts, feelings, and behaviors; enhancing safety; and improving communication with parents; and helps parents increase parenting skills. TF-CBT was developed by Allegheny General Hospital Center for Traumatic Stress in Children and Adolescents and New Jersey CARES Institute Center for Children's Support.

- [How to Implement Trauma-Focused Cognitive Behavioral Therapy \(TF-CBT\)](#) [24] (PDF)
- [TF-CBT: Trauma-Focused Cognitive Behavioral Therapy fact \(2008\)](#) [25] (PDF)
- [Trauma-Focused Cognitive Behavioral Therapy fact sheet: Culture-specific information \(2008\)](#) [26] (PDF)

Service System Responses

To work effectively with children and families affected by domestic violence, child clinicians must have a thorough working knowledge of the judicial, law enforcement, and child protection systems, as well as a strong relationship with the local domestic violence service agencies. Clinicians must recognize and appreciate the important role these agencies play in identifying domestic violence, stopping the violence, and promoting safety. Many of these systems have developed strong local collaborations.

The response of the child protection system to children and families affected by domestic violence has been the focus of controversy. At issue is whether child exposure to domestic violence constitutes child maltreatment and mandated reporting to Child Protective Services (CPS). State laws and policies governing mandatory reporting of children's exposure to domestic violence to CPS vary widely. The Child Welfare Information Gateway lists state-by-state [CPS reporting requirements](#) [27] and a [summary of each state's laws](#) [28]

Examples of integrated programs affiliated with the NCTSN that work with families affected by domestic violence include:

- [Child Witness to Violence Project, Boston Medical Center](#) [29]
Provides trauma-focused, developmentally appropriate mental health services to young children and their families who have been affected by domestic and/or community violence. The project works with the Boston Police Department to train officers in child development principles and to enlist their support in referring children to services. The program is embedded in the Department of Developmental and Behavioral Pediatrics at Boston Medical Center, and works closely with pediatric providers to encourage routine inquiry about domestic violence in pediatric visits, linkage of victims with advocacy resources, and referrals of children who need counseling services.
- [Children Who Witness Violence Program](#) [29]
Active in seven communities in and around Cleveland, Ohio, the program provides mental health services to children exposed to violence and their families; works to enhance community awareness of violence and its impact; and educates mental health providers on the impact of violence.
- [The Child Development-Community Policing Program](#) [30]
Originated as a partnership between the Yale Child Study Center and the New Haven Department of Police Service in 1991, the Child Development-Community Policing (CD-CP) program continues to serve the city of New Haven as the national theory and practice development site for law enforcement-mental health collaborations to respond to children and families exposed to violence. Working together, police, mental professionals, child protective service and other providers, coordinate multi-system interventions that re-establish safety, security and well-being in the immediate wake of violent events. CD-CP has served as a model for law enforcement-mental health partnerships around the country. The team provides linkage to services at the [Childhood Violent Trauma Center](#) [30]. The CDCP works closely with other advocates, community services, and Child Protective Services. For a fact sheet on the Child Development Community Policing Program, [click here](#). The CDCP works closely with other advocates, community services, and Child Protective Services. For a fact sheet on the Child Development Community Policing Program, [click here](#) [31].
- [Project ERIN \(Emergency Response Intervention Network\), Children's Institute, Inc](#) [32]
Pairs family violence specialists with police officers responding to domestic violence calls. Counselors give immediate support at the scene, and then follow up in the days and weeks after the incident to connect children and families with medical and therapeutic services, develop safety plans, and provide access to legal support. Project ERIN also links children and families

with comprehensive domestic violence interventions offered at Children's Institute including group and individual treatment. For more information about the institute's services, contact the Child Trauma Treatment Center senior director, Dr. Leslie Anne Ross: lross@childrensinstitute.org [20].

For information about comprehensive collaborative approaches, see:

- [Family Justice Center Alliance](#) [33]
Co-located collaborative programs that include law enforcement, domestic violence advocacy, medical providers, and other social service providers, with the goal of providing coordinated, comprehensive support for domestic violence survivors and their children.
- [Green Book Initiative](#) [34]
Co-located collaborative programs that include law enforcement, domestic violence advocacy, medical providers, and other social service providers, with the goal of providing coordinated, comprehensive support for domestic violence survivors and their children.
- [Safe Start Initiative](#) [35]
Federal initiative that supports communities to provide more coordinated and effective services to children 0 to 6 exposed to violence and their families. Provides links to resources and publications related to children's exposure to violence.

Resources

NCTSN resources

- [Children and Domestic Violence Fact Sheet Series \(2015\)](#) [36] (PDF) The NCTSN Domestic Violence Collaborative Group announces a new series of fact sheets created for parents whose children have been affected by domestic violence. The set of 10 fact sheets gets to the heart of the experiences and needs of these children and families, and offers education in support of their resilience and recovery.
 - [Children and Domestic Violence: How Does Domestic Violence Affect Children? \(2015\)](#) [37] (PDF)
 - [Children and Domestic Violence: Celebrating Your Child's Strengths \(2015\)](#) [38] (PDF)
 - [Children and Domestic Violence: Before You Talk to Your Children: How Your Feelings Matter \(2015\)](#) [39] (PDF)
 - [Children and Domestic Violence: Listening and Talking to Your Children About Domestic Violence \(2015\)](#) [40] (PDF)
 - [Children and Domestic Violence: The Importance of Playing with Your Children \(2015\)](#) [41] (PDF)
 - [Children and Domestic Violence: Keeping Your Children Safe and Responding to Their Fears \(2015\)](#) [42] (PDF)
 - [Children and Domestic Violence: Managing Challenging Behavior of Children Living with Domestic Violence \(2015\)](#) [43] (PDF)
 - [Children and Domestic Violence: Where to Turn if You Are Worried About Your Children \(2015\)](#) [44] (PDF)
 - [Children and Domestic Violence: Helping Your Child Navigate a Relationship with the Abusive Parent \(2015\)](#) [45] (PDF)

- [Children and Domestic Violence: A Parent's Self-Care and Self-Reflection \(2015\)](#) ^[46] (PDF)
- [Domestic Violence and Children: Questions and Answers for Domestic Violence Project Advocates \(2011\)](#) ^[47] (PDF)  ^[8]
The Domestic Violence Collaborative Group has developed a factsheet designed for domestic violence project advocates. This factsheet includes helpful information how children react to domestic violence, short and long-term responses to domestic violence, possible reactions to domestic violence, factors that can help children recover and working with parents and their children through domestic violence situations.
- [Cops, Kids & Domestic Violence: Protecting Our Future \(2006\)](#) ^[7] (Video)  ^[8]
A CD-ROM-based training dealing with the impact of domestic violence on children, developed for law enforcement. Approximately twenty minutes, it is a combination of video and audio clips. The training is focused around a "typical" domestic violence scene to which law enforcement officers are called to respond. The goal of the product is to provide officers with concrete information about what they can do when responding to the scene of a domestic violence call when children are present.
 - The product includes [PDFs](#) ^[48] containing core messages about DV for police officers, lists of resources, a pocket-size tip card, and other materials.
- [Questions & Answers About Domestic Violence \(2008\)](#) ^[49] (PDF)  ^[8]
Betsy McAlister Groves, MSW, a member of the NCTSN and founder of the Child Witness to Violence Project, answers commonly asked questions about the impact of domestic violence on children.

Other resources

- [Centers for Disease Control and Prevention: Violence Prevention](#) ^[50]
Provides information and resources for the public about domestic violence in general, dating violence, and violence prevention.
- [Centre for Children and Families in the Justice System](#) ^[51]
Helps children and families involved with the justice system as victims, as witnesses of crime, or as parties in custody disputes. Much of their work focuses on [children exposed to domestic violence](#) ^[52] and on supporting their nonoffending parent, with downloadable resources for professionals, volunteers, and students.
- [Domestic Violence Awareness Month](#) ^[53]
An NCTSN Web page that marks October as the annual domestic violence awareness month, with links to current resources.
- [Futures Without Violence](#) ^[54]
Provides extensive information about domestic violence from health, public awareness, and social policy perspectives. Resource section includes fact sheets, brochures, posters, and training curricula.
- Hollywood Homeless Youth Partnership
[Addressing Intimate Partner Violence in Runaway and Homeless Youth](#) ^[55] (PDF)
A guide designed to help staff and administrators at agencies serving runaway and homeless youth understand intimate partner violence in this population. Topics include: creating a culture of safety within the agency, assessing imminent danger, understanding protective and restraining orders, and promoting self-care for agency staff.
- [Minnesota Center Against Violence and Abuse \(MINCAVA\) Electronic Clearinghouse](#) ^[56]
Supports research, education, and access to violence-related resources. Provides resource materials about children and

domestic violence, child abuse, effective interventions, services, and coordinated community responses to violence against women for criminal justice professionals, state coalitions, tribal coalitions, and victim advocacy groups.

- National Council of Juvenile and Family Court Judges ^[57]
Provides training, technical assistance, and research to assist US courts, judges, and staff. The The Family Violence Department ^[58] supports initiatives aimed at improving judicial response to domestic violence including model statutes, guides for judges, training, and technical assistance to professionals, and links to other resources. The Permanency Planning for Children Department ^[59] supports improvements in judicial handling of child abuse and neglect cases including cases involving children's exposure to domestic violence; offers publications and other resources.
- National Network to End Domestic Violence ^[60]
A national advocacy organization that provides links to state domestic violence coalitions, and access to information and resources regarding current topics including public policy related to domestic violence.
- University of Iowa School of Social Work
Early Childhood, Domestic Violence and Poverty: Helping Young Children and Their Families ^[61] (PDF)
A series of six papers that offers recommendations for policy and practice by a variety of professional groups to improve responses to young children affected by domestic violence and poverty. Audience addressed includes health providers, early childhood educators, police, and professionals in domestic violence service agencies and family support programs. Papers available for download.
- U.S. Department of Justice, Office on Violence Against Women ^[62]
Federal agency that provides legal and policy information related to domestic violence and sexual assault; offers grant funding for a wide variety of domestic violence programs related to law enforcement, advocacy, and social services.

References

American Bar Association. (2006). Teen dating violence facts. Chicago: American Bar Association. Retrieved from <http://www.clotheslineproject.org/teendatingviolencefacts.pdf> ^[63]

Child Development-Community Policing Program & Domestic Violence Home Visit Intervention Project (DVHVI). (2004-2005). DVHVI case records. New Haven, CT: Yale Child Study Center.

Cochran, D. (1995). *The tragedies of domestic violence: A qualitative analysis of civil restraining orders in Massachusetts*. Boston: Office of the Commissioner of Probation, Massachusetts Trial Court.

Collins, K. S. (1999). *Health concerns across a woman's lifespan: The Commonwealth Fund 1998 survey of women's health*. New York: Commonwealth Fund. Retrieved from <http://www.commonwealthfund.org/Content/Publications/Fund-Reports/1999/May/Health->

[Concerns-Across-a-Womans-Lifespan--The-Commonwealth-Fund-1998-Survey-of-Womens-Health.aspx](http://www.nctsn.org/trauma-types/domestic-violence) ^[64]

Groves, B., Van Horn, P., & Lieberman, A. (2006). Deciding on fathers' involvement in their children's treatment after domestic violence. In J. L. Edleson & O. J. Williams (Eds.), *Parenting by men who batter: New directions for assessment and intervention* (pp. 65-84). New York: Oxford University Press.

Halpern, C. T., Young M. L., Waller, M. W., Martin, S. L., & Kupper, L. L. (2004). Prevalence of partner violence in same-sex romantic and sexual relationships in a national sample of adolescents. *Journal of Adolescent Health, 35*(2), 24-31.

Jackson, M., Cram, F., & Seymour, F. W. (2000). Violence and sexual coercion in high school students' dating relationships. *Journal of Family Violence, 15*(1), 23-36.

Liz Claiborne Inc. (2008). Tween and Teen Dating Violence and Abuse Study, Teenage Research Unlimited for Liz Claiborne Inc. and the National Teen Dating Abuse Helpline. February 2008 retrieved June 9, 2015 from <http://www.loveisrespect.org/wp-content/uploads/2008/07/tru-tween-teen-study-feb-081.pdf> ^[65]

McDonald, R., Jouriles, E. N., Ramisetty-Mikler, S., Caetano, R., & Green, C. E. (2006). Estimating the number of American children living with partner-violent families. *Journal of Family Psychology, 20*(1), 137-142.

Michigan State University. (n.d.). *Myths and facts about dating violence*. Lansing, MI: Michigan State University. Retrieved from <https://www.msu.edu/user/cdaprogs/myths2.htm> ^[66]

National Child Traumatic Stress Network. (2009). [Core Data Set.] Unpublished data.

Saunders, D., & Hamill, R. M. (2003). Violence against women: Synthesis of research on offender interventions. Washington, DC: U.S. Department of Justice, National Institute of Justice. NCJRS No. 201222. Retrieved from <http://www.ncjrs.gov/pdffiles1/nij/grants/201222.pdf> ^[67]

Silverman, J., Raj, A., Mucci, L., & Hathaway, J. E. (2001). Dating violence against adolescent girls and associated substance use, unhealthy weight control, sexual risk behavior, pregnancy and suicidality. *Journal of the American Medical Association, 286*(5), 572-579.

Sullivan, C., & Gillum, T. (2001). Shelters and community based services for battered women and their children. In C. Renzetti, J. L. Edleson, & R. Bergen (Eds.), *Sourcebook on violence against women* (pp. 247-260). Thousand Oaks, CA: SAGE.

Tjaden, P. G., & Thoennes, N. (2000). *Extent, nature, and consequences of intimate partner violence*. Washington, DC: U.S. Dept. of Justice, Office of Justice Programs, National Institute of Justice. Retrieved from <http://www.ncjrs.gov/pdffiles1/nij/181867.pdf> ^[68]

Source URL (retrieved on 08/27/2016 - 13:29): <http://www.nctsn.org/trauma-types/domestic-violence>

Links:

- [1] http://www.nctsn.org/sites/default/files/html/dv1_1.html
- [2] <http://www.loveisrespect.org/>
- [3] <http://www.seeitandstopit.org/>
- [4] <http://www.thatsnotcool.com/>
- [5] <http://www.apa.org/pi/cyf/teen.pdf>
- [6] http://www.nctsn.org/sites/default/files/assets/pdfs/SS_brief_law_enforcement.pdf
- [7] http://www.nctsn.org/sites/default/files/assets/acp/dv/NCTSN_DV_rev1.htm
- [8] <https://docstore.fedex.com/nctsn>
- [9] <http://www.nctsn.org/content/service-system-responses>
- [10] http://www.lfcc.on.ca/police_packard.html
- [11] <http://www.lfcc.on.ca/YE2DV.html>
- [12] <http://endabuse.org/programs/healthcare/files/Pediatric.pdf>
- [13] http://www.lfcc.on.ca/ece_packard.html
- [14] <http://www.lfcc.on.ca/SilentRealities.pdf>
- [15] <http://www.safeyouth.org/scripts/topics/dateviolence.asp>
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- [17] <http://www.nctsn.org/resources/training-and-education/training-archives>
- [18] http://www.nctsn.org/sites/default/files/assets/pdfs/cpp_general.pdf
- [19] http://www.nctsn.org/sites/default/files/assets/pdfs/cpp_cultural.pdf
- [20] <mailto:lross@childrensinstitute.org>
- [21] http://www.nctsn.org/sites/default/files/assets/pdfs/GroupTreatmentChildrenDomesticViolence_fact_sheet_3-21-07.pdf
- [22] http://www.nctsn.org/sites/default/files/assets/pdfs/sparcs_general.pdf
- [23] http://www.nctsn.org/sites/default/files/assets/pdfs/sparcs_cultural.pdf
- [24] http://www.nctsn.org/sites/default/files/assets/pdfs/TF-CBT_Implementation_Manual.pdf
- [25] http://www.nctsn.org/sites/default/files/assets/pdfs/tfcbt_general.pdf
- [26] http://www.nctsn.org/sites/default/files/assets/pdfs/tfcbt_cultural.pdf
- [27] http://www.childwelfare.gov/systemwide/laws_policies/state
- [28] http://www.childwelfare.gov/systemwide/laws_policies/statutes/witnessdvall.pdf
- [29] <http://www.childwitnessstoviolence.org/>
- [30] <http://medicine.yale.edu/childstudycenter/cvctc/programs/cdcp.aspx>
- [31] <http://www.nctsn.org/sites/default/files/assets/pdfs/ChildDevelopmentCommunityPolicingCDCP.pdf>
- [32] <http://www.childrensinstitute.org/ourwork/programsandservices/projecterin/>
- [33] <http://www.familyjusticecenter.org/>
- [34] <http://www.thegreenbook.info/>
- [35] <http://www.safestartcenter.org/>
- [36] http://www.nctsn.org/sites/default/files/assets/pdfs/childrenanddv_factsheetseries_complete.pdf
- [37] http://www.nctsn.org/sites/default/files/assets/pdfs/childrenanddv_factsheet_1.pdf
- [38] http://www.nctsn.org/sites/default/files/assets/pdfs/childrenanddv_factsheet_2.pdf
- [39] http://www.nctsn.org/sites/default/files/assets/pdfs/childrenanddv_factsheet_3.pdf
- [40] http://www.nctsn.org/sites/default/files/assets/pdfs/childrenanddv_factsheet_4.pdf
- [41] http://www.nctsn.org/sites/default/files/assets/pdfs/childrenanddv_factsheet_5.pdf
- [42] http://www.nctsn.org/sites/default/files/assets/pdfs/childrenanddv_factsheet_6.pdf
- [43] http://www.nctsn.org/sites/default/files/assets/pdfs/childrenanddv_factsheet_7.pdf
- [44] http://www.nctsn.org/sites/default/files/assets/pdfs/childrenanddv_factsheet_8.pdf
- [45] http://www.nctsn.org/sites/default/files/assets/pdfs/childrenanddv_factsheet_9.pdf
- [46] http://www.nctsn.org/sites/default/files/assets/pdfs/childrenanddv_factsheet_10.pdf
- [47] http://www.nctsn.org/sites/default/files/assets/pdfs/DomViolenceFactSheet_final.pdf
- [48] http://www.nctsn.org/sites/default/files/assets/pdfs/Cops_Kids_DV_print_packet.pdf

- [49] http://www.nctsn.org/sites/default/files/assets/pdfs/QA_Groves_final.pdf
- [50] <http://www.cdc.gov/ViolencePrevention/intimatepartnerviolence/index.html>
- [51] <http://www.lfcc.on.ca/>
- [52] http://www.lfcc.on.ca/children_exposed_to_domestic_violence.html
- [53] <http://www.nctsn.org/resources/public-awareness/domestic-violence-awareness-month>
- [54] <http://www.futureswithoutviolence.org/>
- [55] http://www.hhyp.org/downloads/HHYP_Addressing_Intimate_Partner.pdf
- [56] <http://www.mincava.umn.edu/>
- [57] <http://www.ncjfcj.org/>
- [58] <http://www.ncjfcj.org/content/view/20/94/>
- [59] <http://www.ncjfcj.org/content/view/82/146/>
- [60] <http://www.nnedv.org/>
- [61] <http://www.uiowa.edu/%7Esocialwk/EC,%20DV,%20&%20Pov%20Series%20Volume.pdf>
- [62] <http://www.ovw.usdoj.gov/>
- [63] <http://www.clotheslineproject.org/teendatingviolencefacts.pdf>
- [64] <http://www.commonwealthfund.org/Content/Publications/Fund-Reports/1999/May/Health-Concerns-Across-a-Womans-Lifespan--The-Commonwealth-Fund-1998-Survey-of-Womens-Health.aspx>
- [65] <http://www.loveisrespect.org/wp-content/uploads/2008/07/tru-tween-teen-study-feb-081.pdf>
- [66] <https://www.msu.edu/user/cdaprogs/myths2.htm>
- [67] <http://www.ncjrs.gov/pdffiles1/nij/grants/201222.pdf>
- [68] <http://www.ncjrs.gov/pdffiles1/nij/181867.pdf>