

## **ALL DOMESTIC VIOLENCE IS NOT CREATED EQUAL**

*A practical guide to visitation decisions*

*The paper describes the experience of children, the impact on their development and coping; it points to overlap between domestic violence and child abuse, looks at dilemmas for counsellors and the Court in identifying violence and the type of violence when it presents, and discusses options for Court response linked with Counselling interventions. It is the author's experience that we have not named the violence; that we have not recognised fully the need for protection; that we do not have ways of ensuring protection; and that we do not have enough understanding about the dynamics of violence to enable realistic discernment when cases present to our systems. The focus of this paper is on creating the need for awareness for identification, and asserting principles, with the aim of shaping our thinking toward solutions.*

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## **INTRODUCTION**

Domestic violence has been identified as a major concern in modern Australian society. It has been estimated that as many as sixteen percent of Australian couples experience at least one violent episode each year and that six percent of couples experience violence severe enough to cause injury to the battered spouse (Straus, 1988; in Kirby, 1991). In Australia, government-backed initiatives and studies conducted by refuges and women's groups have to date provided solid data on women and children and their experience of violence. A phone-in conducted as part of the Queensland Domestic Violence Task Force found that 90% of respondents with children reported that the children had witnessed the domestic violence and that in 11% of cases a young person had called the police for assistance (Rosenbaum & O'Leary, 1981, in Smith, 1994). A New Zealand study conducted by the National Collective of Independent Women's Refuges (1991) suggested that, for women receiving help from refuges, 90% of their children had witnessed violence and 50% of the children had also been physically abused. (Maxwell, 1994).

A growing body of research suggests that spouse abuse and physical and sexual abuse of children are often linked within families, with each being a predictor of the other. Research figures indicate that child abuse is at least 15 times more likely to occur in families where domestic violence is present (Stacey & Shupe, 1983 in Smith, 1994), which raises argument for a systems' response concomitant with the application of child protection principles.

Profound emotional abuse is the unacknowledged experience of children in these families. Exposure to the extreme conflict, coercive control and psychological abuse, which characterises violent situations raises questions about our handling of these cases in other than a child protection framework. Witnessing violence may be the worst form of psychological and emotional abuse that children can be exposed to. The desensitising experience of being exposed to violence, often over years, is summed up in the following quote.

*"These children have witnessed their mothers being beaten, thrown into walls, pushed through windows, and having their eyes blackened and teeth knocked out. They have often lived through years of brutality, which becomes so much a part of their home lives that they have little appreciation of what "normal" should be" (Jaffe, Wolfe & Wilson, 1990).*

## **IMPACT ON CHILD DEVELOPMENT AND COPING**

The child experience in violent families has been increasingly documented. Research findings are establishing that a child's social and emotional functioning is significantly altered by exposure to violence. Problems have been identified in children's socio-emotional development; behaviours with peers, parents and teachers; academic performance; school-related problems such as poor attendance, distractibility and school phobias; and disturbed behaviours such as extreme withdrawal and passivity or aggressiveness and conduct disorders (Butterworth & Fulmer, 1991).

Though no “typical reactions” to family violence seem to emerge, the experience of violence within their family places children at risk of psychological distortion, behavioural disorder, developmental dysfunction and social deviance in childhood, adolescence and adulthood (Jaffe et al, 1990). Correlations of personality disorder (narcissistic, schizo-typic, antisocial, borderline), and self-destructive behaviour (suicide ideas, suicide attempts, cutting, bingeing, anorexia) with childhood abuse, indicate the increasing recognition of the impact of childhood trauma on adolescent and adult functioning.

Children who are exposed to violence experience trauma. This impacts in two ways: on external functioning and on intrapsychic adjustment. The impact on externalised functioning can result in maladaptive coping and disturbance in learning, development and behaviour. This impacts on social interaction and can result in limited social competency, leading to deviance in adolescence and dysfunction in adulthood. If unresolved, their internalised feeling state can be one of fear, impotence, powerlessness, anxiety and anger. These internalised feelings can be carried on through childhood, adolescence and into adulthood and leave children vulnerable to modelling dysfunctional behaviour as a means of feeling stronger, more powerful and in control.

The exposure to violence usually occurs in a context of environmental disruption. The experience of children in violent marriages commonly involves child abuse, extreme marital conflict, stress, depression and ultimately separation, temporary residence in a refuge, divorce and conflicts over custody and access (Smith, Berthelsen & O’Connor, 1993). Individually, these are major stressors. Cumulatively they represent overwhelming and continual crises that these children have to cope with. The environmental stressors alone predispose these children for major adjustment problems, short and long term.

## **IMPLICATIONS FOR SYSTEMS RESPONSE**

### **THE FAMILY COURT CONTEXT**

Family Courts make decisions about children’s ongoing relationships with parents following separation, and in the light of increasing awareness, the experience of children in violent family situations has particular relevance. There is a lack of official statistics on the incidence of domestic violence in the Family Court Australia clientele. However, results from a study conducted by the Lismore Family Court Counselling Section suggests that 74% of females and 44% of males, overall 59% regard physical and emotional abuse as a significant issue (Craig, Davies, Hawton & Ralph, 1994). In the Brisbane Counselling Section we estimate that in more than 50% of our Court-ordered work, violence is a presenting problem. An analysis of the author’s own caseload over 10 years, found preliminary statistics indicating a consistent average 60-70% of cases presenting with some aspect of family violence.

A Family Court study of judicial determinations in 1990 reviewing 294 judgements in defended cases from all over Australia found allegations of domestic violence toward the wife in 22% of all the cases. This comprised the single largest category of allegations made. There were a further 2% of allegations about violence by the wife's new partner. There were none in which the husband was alleged to be the victim of the wife's violence. By comparison 10% of cases presenting to the Family Court Australia, at that time, involved allegations of sexual abuse (Parkinson, June 1994). Five years on, in 1995, violence undeniably is a feature of many more cases now presenting.

Understanding of the dynamics of violence is crucial to enable responsive assessment of these cases as they present to our systems. There is recognition that domestic violence can derive from multiple sources and follow different patterns in different families which implies the need for a differential clinical diagnosis and case specific responses in family court decisions about children. However, violence in families is not gender neutral. That women can be sexually abusive and physically violent is acknowledged, but to focus on women's violence as though it were similar in meaning, impact and proportion to men's, we may blind ourselves to the strong relationship between violence and gender (Avis, 1992).

This paper focuses on dimensions of male violence in families and calls for recognition of patterns of violence in the context of coercive control, identifies that chronic abuse causes serious psychological harm, warns of the tendency to blame the victim, identifies the need for "recovery" of women and children who are survivors of the prolonged and repeated trauma inherent in many violent situations and identifies capacity for ownership of violent behaviour and responsiveness of violent offenders to therapy, as factors to be taken into account in determining parental function, responsibility and capacity when making determinations about custody and access (visitation).

## **DILEMMAS**

For legal and counselling practitioners alike there are dilemmas in assessing these cases on presentation. We are all having to grapple with issues of shock, denial and disbelief, despite statistics that report an incidence indicating that family violence is endemic in our society. Issues of denial are compounded by: myths about domestic violence, gender bias, lack of understanding about the dynamics of violence, plausible presentation of offenders, the often poorer presentation of the victim, lack of "tangible" evidence (bruising, broken bones), and lack of funding for equitable legal advocacy all compound to "colour" assessment and make it difficult for a battered woman to secure help and protection for herself and her children.

In Court proceedings, limitations of the adversarial contest where children's issues are presented in a mode of counter allegations about parenting shortcomings compound dilemmas for judicial officers and legal advocates. Further inhibiting factors include difficulties in meeting evidentiary requirements of proof in this largely secret, hidden family problem, a legal

culture that until recently advised against raising issues of family violence in evidence, and constraints on available Court time for hearing these complex matters.

In the counselling and mediation context, assessing the nature of the problem can be difficult as these relationships are frequently characterised by extreme polarities of blame and denial, love and hate, exaggeration and minimisation (Goldner, 1992). Skill, awareness and discernment are needed in clinical intervention, case management and reporting. Counsellors and mediators are in need of ongoing training in line with expanding understanding of what constitutes abuse. Such training would involve knowledge of power dynamics, the relationship between power and gender, the emotional, psychological and behavioural consequences of abuse of all kinds, and specific learning to assess for the presence and/or history of physical abuse. A Canadian study has found that once practitioners learned to ask the questions, the assessed incidence of violence and abuse has quadrupled (Avis, 1992).

## **IDENTIFICATION**

Knowledge of some of the facts about incidence and patterns of violent behaviour can assist in developing a context for assessment and determination. This would include: awareness of incidence; recognition that over 90% of reported incidents involve women and children as victims; that violence of men against women is more severe and results in greater physical injury than the violence of women toward men (Berk et al, 1983); that women experience, on average, 35 assaults before reporting violence (Avis, 1992); that children witness violence in 90% of cases (Smith, 1994; Maxwell, 1994) and children who do not directly witness the violence live in a “climate of violence” considered to be equally destructive; and that violence is coupled with physical abuse of children in 40% - 70% of reported cases (McKay, 1994; Stanley & Goddard, 1993). It is important to be alert to instances where violence is a factor, but not notified. Frequently both the woman and the man minimise or deny any violence, which can leave children at risk.

## **THE PSYCHOLOGY AND MODELS OF VIOLENT RELATIONSHIPS**

Knowledge of patterns of violence and understanding the dynamics in violent families is essential to making representative, protective and child responsive decisions. Johnston and Campbell (1993) identify five basic types of inter-parental violence among divorcing families disputing custody: *ongoing or episodic male battering; female-initiated violence; male-controlling violence; separation/divorce trauma; psychotic/paranoid reactions*. They discuss implications for custody placement and contact suitability in the context of the presenting type of violence. In wife battering situations (characterised in the Johnston and Campbell typology as episodic male battering and including elements of male-controlling violence and psychotic and paranoid reactions) theories of coercive control and captivity psychology provide a model for understanding perpetrator behaviour, victim experience, and child experience and need.

### **Perpetrator Behaviour**

Generally, perpetrator behaviour is characterised by denial, projection, and blame. Non-acknowledgment of responsibility is characteristic. As the perpetrator does not perceive that anything is wrong with him, he is unlikely to seek help unless he is in trouble with the law or as a tactic to encourage reconciliation. Predominantly, there is a limited responsiveness to treatment. The Duluth Program estimates a recidivism rate of 40 - 60% following treatment (Paymar, 1994). As with sex offenders, there is no clear portrait or psychological profile of violent perpetrators. Their most consistent feature is their apparent normality. However the tactics for control that they use are consistent. Lenore Walker in her study of battered women observed that the abusers' coercive techniques, "although unique for each individual, were still remarkably similar". (Herman, 1992).

### **Captivity Psychology**

Captivity/hostage psychology and the notion of coercive control provide a conceptual framework for understanding the experience and reactions of many women in domestic violent situations. Amnesty International in 1973 published a "chart of coercion", relating to political prisoners which describes methods that enable one human being to enslave another. The methods of coercive control defined include: violence and threat of violence; control of bodily functions; capricious enforcement of petty rules; intermittent rewards; isolation; degradation; enforced participation in atrocities. The parallel to women in abusive relationships is notable. Terror, intermittent reward, isolation and enforced dependency may succeed in creating a submissive and compliant prisoner. (Herman, 1992). In wife-battering situations, being abused always involves more than just physical assault. It always involves emotional and verbal abuse and often includes sexual abuse, such as forced intercourse after a beating, being forced to participate in undesired sexual acts and having pain inflicted during intercourse.

### **Complex Post Traumatic Stress Disorder**

Herman's description of Complex PTSD in survivors of prolonged and repeated trauma goes further in describing the experience of women (and children) in domestic violent situations. "Prolonged repeated trauma occurs in circumstances of captivity, which brings the victim into prolonged contact with the perpetrator, and creates a special type of relationship, one of coercive control" (Herman, 1992). Relationship experience is based on dominance and subordination rather than mutuality and compromise, resulting in difficulties with basic trust, identity and intimacy, eroding initiative and competence. Depression, anxiety and a sense of helplessness are characteristic symptoms of women in battering relationships. These women have difficulty in being self-protective and experience repetition of harmful situations. The pattern of moving on into another violent relationship is not uncommon. The chronically abused woman frequently presents with apparent helplessness and passivity, fixated in the past, with depression and somatic complaints, and active or underlying anger. These women are in need of help and support. More often than not, they are judged and found wanting by the system. Frequently they are disadvantaged by non-recognition of their vulnerability, their need for protection, and not infrequently they lose custody of their children.

### **Caregiver Function**

The mother's capacity to protect and to provide a buffer from the violence is a crucial factor in helping to minimise the impact of the violence on the child. Two major reasons a battered woman stays in an abusive relationship are the lack of financial resources, and fear that she or her children will be harmed (Paymar, 1994). However the stress of the violent relationship on the mother can cause a prolonged pattern of depression and a general sense of helplessness, fear and social withdrawal. Combined with stressors associated with violence such as moves, separation, police involvement, social isolation and/or problems at work, these women's availability as caregivers can be significantly impaired. As her capacity to protect is diminished, the child's risk for adjustment problems is heightened (Jaffe et al, 1990).

### **Child Dysfunction**

For children, the specific consequences of the experience of witnessing violence result in a need to focus on a range of experience: for example their feelings of guilt, anxiety, anger, confusion and sadness about their family situation and their frequently, ambivalent feelings about each parent. Children can love their father, but disapprove of his violence. They may feel sorry for their mother, but also resent her helplessness and inability to protect herself and the children. The exposure to violence over time results in modelling of violence as an appropriate way to resolve conflict, and children at latency age and in adolescence may present identifying with and mirroring their father's attitude toward their mother. Often children are frightened by their own anger and feel that the cycle of violence is inevitable. They often feel responsible for having caused the violence. These exaggerated and false perceptions lower self-esteem and promote self-blame (Jaffe et al, 1990).

## **NEED FOR CHILD FOCUS**

### **FACTORS ASSISTING CHILD ADJUSTMENT**

Children can recover from interparental violence and parental separation provided that the violence is eliminated and proper supports and opportunities are furnished. In a society where there is a high tolerance for violence and apparent systems' impotence, it is not unrealistic to say that the child experience is that violence is condoned and that protection and safety are not guaranteed for their mothers, their siblings or themselves.

A New Zealand study (Church, 1984), found that the ability of children to recover from the effects of a violent marriage depended on a number of post-separation factors:

- whether the mother gained the protection of a non-molestation order;
- whether or not the violent parent pursued a custody application;
- whether or not the violent parent insisted on regular access visits regardless of the child's fears and wishes;

- whether or not access visits, once obtained were used as a vehicle for continued harassment and intimidation of the mother;
- whether the child ended up back in the family home.

Church found that the majority of children (86%) were frightened of their violent father at separation and remained frightened if he pursued custody or used access to continue to intimidate and threaten the wife. Regular access was beneficial for some children and exacerbated fear and adjustment problems for others. All of the children who had become more unmanageable following separation were children who were required to visit their father on a weekly or fortnightly basis. Court-ordered contact was shown to result in greater adjustment problems for children. Mutually agreed arrangements were associated with improvements in the child following separation. These findings highlight that a range of factors influence child coping and identify a primary need for attention to safety issues to assist child adjustment.

In particular the children need the following set of actions and direct interventions:

- protection from the violence;
- understanding of their special needs;
- assistance in integrating their experience;
- environmental stability and consistency;
- one effective, functioning parent emphasising the need for support of the primary caregiver;
- reconnection with the perpetrating parent to be assessed in the context of safety, child experience and capacity of that parent for child focus;
- affirmation that society and systems (police, health/welfare departments and Courts) do not sanction violence.
- affirmation that this world can be a safe place;

We need to be realistic about the tactics, strategies and capacity of abusing parents. Family Court systems should not collude to allow the abusive parent to use his children to retain control over their mother. Access can be used as a way of gaining information about their ex-partner's whereabouts and activities, creating threat to the physical safety and security of the family (Pagelow, 1990). Ongoing threat and harassment of their mother places children at risk of psychological abuse post-separation. As access is commonly used as a vehicle of control and manipulation, realistic appraisal of the abuser's drive to control and dominate using the children is necessary.

Healthy scepticism about consent agreements in cases where violence is an issue, is realistic. It is not unusual for a man who has little or no respect for his spouse to sign an agreement that he has no intention (or capacity) to follow. The Court system has, currently, no means of overseeing whether the terms of the agreement are honoured or not. To bring the matter back before the Court requires making a formal application, which raises issues of funding, proof in the adversarial context, and availability of Court time. In short, once



an order is in place it is very difficult to gain variation, at least in Australia. This highlights the need to spend the time to make realistic and protective orders in the first instance, preferably incorporating a review process.

By recognising and understanding the diminished capacity of the caregiving parent, resulting from their experience of the violent relationship, we can be responsive to their need for help and support in re-establishing a constructive and healthy parenting role. Mothers who are survivors of violence by their partners have often been relegated to an inferior position within the family. A primary task of rebuilding relational imbalances involves supporting and encouraging the mother to assume her executive position within the family (Lehmann et al, 1994). Children who witness their mother taking a position of control can experience stability and predictability. This can only occur in a context of safety, and enforced protection from threat and harassment by the abusing parent.

Recognising the violence, ordering and enforcing protection orders can provide for an environment of safety and support for the protective parent. A supportive and positive context, with therapeutic input, enables the mother with her children to confront and

re-evaluate some of the denial, minimisation, rationalisation and secrecy of the past abuse. This provides for the development of new individual and family beliefs which are not bound in shame and guilt, and builds confidence and capacity for defining problematic behaviour and setting limits. Children need non-violent caretakers and role models to teach them how to develop positive interpersonal relationships. Children who experience their mother becoming more assertive and setting limits on their behaviour through non-violent means begin to experience a change in family relationships that is based on respect, sharing and consideration about others' feelings (Lehmann, 1994).

Support and assistance in minimising environmental disruption is critical at the acute separation stage. Residential stability is a significant factor. Temporary shelter residence is found to significantly affect child adjustment, yet leaving the family home, for the safety of a refuge is the only option for many of these women and children. The practice of removing the perpetrator from the home (as with sexual abuse victims), which places the onus of responsibility away from the child, is a more constructive, child-focussed option.

“Responsible parenting” as opposed to “parental rights”, as a requirement for access and custody status, places the emphasis on parental performance taking into account applicants' capacity, motivation, and commitment to the full range of parenting responsibilities.

## **CHILD COPING: A FRAMEWORK OF INDICATING FACTORS**

Children's responses vary according to their age, sex, stage of development, position and role in the family. Children's age and stage of development will influence their capacity to cope with what is happening between their parents. Younger children (infants, toddlers and pre-schoolers) are most vulnerable. Because of their limited cognitive and verbal functioning they have limited resources for understanding, coping and adaptation. By school age, children are more able to express fears and anxieties which enables some degree of adaptation. Violence by this stage may have become commonplace and for latent aged children who are characteristically guarded and secretive, denial may become part of their coping. Sex/gender differences manifest at this stage. Latent-age children are defining role models and look, somewhat disturbingly in these families, to their parents as models. In adolescence, children are more able to intellectualise, but by this age there has been internalisation of abuse over years. Maladaptive behaviour is characteristic. The social learning has occurred and patterns repeated. Frequently adolescents are abusive to their mothers.

A risk assessment framework can provide a frame of reference for counsellors, mediators, custody evaluators, legal practitioners and the Court. The "indicating factors" which can alert to risk and degree of risk for children in violent situations include:

- the existence of violence;
- the nature of the violent relationship between the parents;
- the level of conflict post-separation;
- the child's experience of the violence;
- identification of witness or witness-victim status;
- frequency, intensity and exposure over time;
- gender, age and developmental stage;
- assessment of the child's coping and adjustment taking into account behaviour, emotional and social functioning;
- caregiver functioning and environmental stressors;
- relationship with the perpetrator;
- motivation of the abusive parent and their capacity for responsible, consistent parenting with appropriate child focus.

## **DETERMINATIONS ABOUT CUSTODY AND ACCESS**

Serious consideration needs to be given to the implications of placing children in the care of the violent parent. Tendency to violent behaviour reflects adversely on the suitability of that parent to have daily care of the children. Placement of children with the violent parent needs to be viewed with a sound understanding of child experience of violence, and with recognition of child "accommodation" of an abusive and frightening parent. Child behaviour and

expressed wishes on presentation may have little connection with their real need or feelings. Commonly these children may present with a stated attachment to the abusive parent and, particularly in boy children, modelling of the father's behaviour, which more realistically reflects dysfunctional adaptation and coping, resulting from exposure to prolonged and repeated trauma. Removal from the source of the trauma, allowing for time-out to enable personal reconstruction and integration in the context of a safe and secure environment, with the caregiving parent, may be the primary task in making determinations at this point.

The challenge for the court is, in the difficult context of adversarial argument, to determine: safety issues; the nature of the violent relationship; parenting capacity; appropriate custodial care; risk to the child and potential for contact. Identification of the pattern of violence; the child's experience of the violence as witness/witness-victim; exposure over time, (for many children their experience of violence begins in-vitro); frequency and intensity; gender, age and developmental stage of the child; caregiver functioning; relationship with the perpetrator are relevant indicating factors.

Despite increasing legal authority where violence issues are taken into account in custody and access (visitation) matters, Family Court decisions, in Australia, have to this point operated on the principle that access is the right of the child to have contact with their estranged parent, with the result that access has almost universally been ordered. Child sexual abuse cases have caused some reconsideration of this blanket principle and the option of supervised contact has been a moderate alternative frequently utilised. There are categories of violent behaviour that suggest no contact with the perpetrating parent.

To enable the court some independent assessment and information, there is a need for court response to be linked to counselling interventions. Criteria for identifying potential for counselling, which could influence court response, fall into two broad categories:

- (i) Where the violence is pervasive and severe: the woman is too confused and/or frightened to assert her position in her partner's presence, or is traumatised and numbed to elements of risk for her and her children, and where the man indicates no ownership of his problem, exhibits little or no desire to change and in consequence is likely to increase his coercive manoeuvres if he senses any changes in his wife.
- (ii) Where potential for reconstruction of family interaction is evidenced if the woman still has some capacity for independent function within the relationship and outside of it, and the man shows some readiness and capacity to take genuine responsibility for being violent.

An option for management is to make short-term interim orders that involve evaluation, assessment and reporting back to the Court, in the context of a defined time-frame and could include:

Options for type (i) cases:

- (a) no contact until further assessed
- (b) supervised contact while being assessed

This would require indepth assessment of the matter to be determined by the Court, with a possible outcome of no contact. In these proceedings an order for psychiatric assessment of both parties could help clarify personal functioning, in conjunction with a report assessing family function. Counselling and mediator interventions would be questionable in their usefulness, until the determination of issues by the court.

Options for type (ii) cases:

- (c) unsupervised, but day contact only, monitored over a set period
- (d) standard contact, unsupervised, monitored and evaluated over a set period

This would be likely to involve a monitoring phase of 3-6 months, with counsellor or mediator assistance, or an evaluator's assessment, which in general would involve individual counselling with each parent and the child, as required, joint review sessions at monthly or two monthly intervals, preferably with a capacity to report back to the court. The author's experience indicates a need for interventions to be court ordered, preferably in the context of the violent behaviour being "determined". If the system colludes to avoid "naming" the behaviour, this will encourage and allow non-acknowledgment of his behaviour by the perpetrator. This is counter-productive to counselling interventions centering around ownership of the problem, and self-help focussing on responsible parenting. Protective mechanisms need to be enforced by the court. Accountability of the abusing parent to the court, for a responsible child-focus involving non-manipulative and non-threatening behaviour, should be a requirement.

## **CHILD FOCUSED THERAPEUTIC INTERVENTIONS**

Women and children who have experienced family violence have been traumatised. Interventions need to take into account their experience and their need for time to recover and reintegrate. Three stages of recovery are commonly identified and involve:

- the establishment of safety;
- re-experiencing the trauma and reconstruction;
- reconnection with ordinary life.

The non-sanctioning of violence through the enforcement of protection orders is an important reassurance for the child which cannot be underestimated.

The family courts, mandated to protect the child, need to be aware of the environment necessary for recovery. This may mean no connection with the abusing parent for a period. A universal need for time-out could be argued in

all cases presenting with violence, to enable individual reconstruction and integration of experiences prior to attempting and/or assessing parent-child reconstruction. Children's capacity to name the violence, disclose their experience, and assign responsibility, in the author's clinical experience, is consistently dependent on the mother's capacity to protect her children, during the marriage and post-separation. Her ability to protect provides the child with a sense of safety and distance from the violence and the perpetrator. "Time out" at separation and before final decisions are made provides that distancing and allows for individual assessment and integration of their experiences.

In practice the author has trialed interventions on the following basis:

- Brief therapeutic intervention with the mother to focus on her experience and the needs of her family.
- Connection with the father with regard to his experience, and assessment of his ability to acknowledge his behaviour, and his motivation for change.
- A monitoring activity over a fixed period involving the children to evaluate the workability of the access arrangement in terms of child need.

Brief therapeutic intervention for the child can be achieved on the basis of providing "psychological first aid", (Pynoos and Spencer, 1986) which allows for exploration, support, and reconstruction of their experience, and involves drawing, story telling, discussion of the actual traumatic situation and identifying consequences for the child. Goals of work with children on an individual and groupwork basis, include empowering children to break the secret of family violence, improving self-esteem, and teaching children about safe, non-violent ways of relating. Children need basic safety skills to know what strategies to take should there be an assault in the future. They need to talk about the issue of responsibility, to learn that each family member is in charge of and responsible for his or her own behaviour. They need to hear and understand why mothers leave an abusive relationship. Helping children learn that anger and conflict are a normal part of family life, yet very different from abusive behaviour is a critical part of healing. Giving the child permission to discuss the violence, breaks the barriers of secrecy, demystifies the violence and validates the child's experience.

Group work may offer greater potential for working with some of these families in the context of a more integrated response involving court and counselling/mediator interventions. Group work would be both educational and therapeutic in approach, with emphasis on the child experience and parenting issues.

## **SUMMARY AND CONCLUSION**

It is increasingly being established that violence impacts traumatically on children affecting their coping, adjustment and development and that this has major social implications, because of the adult dysfunction that results. This emphasises the need to be responsive to children in violent situations.

If we are not able to discern risk in these families we leave children unprotected.

Violent behaviour is not a relationship issue. This needs to be recognised by the system and individuals within the system. Courts have to name the violence and take a definite stance on its unacceptability. There are, however, a range of violent behaviours. In our planning we need to be cognisant of the differences and the need for differentiated assessment, which invites joint response for creative court and counselling interventions.

The need is for people who are informed. To date there is a lack of skilled professionals with comprehensive understanding of the patterns of violence and the psychology of individuals within violent relationships.

Naming the violence, recognising impact on children, taking seriously our responsibility within systems and as a society for the social implications, and encouraging awareness and training will create the environment for solutions and responses.

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