



Intimate Partner/Domestic Violence Co-Occurring with Child Maltreatment

A Bibliography

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Global Response to Child Abuse**

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Scope

This bibliography covers literature significant to the study of child maltreatment that co-occurs with witnessing domestic violence/intimate partner violence. Some publications listed also cover community violence and poly-victimization.

Organization

Publications include articles, book chapters, reports, and research briefs and are arranged in date descending order. Links are provided to full text publications when possible. However, this collection may not be complete. More information can be obtained in the Child Abuse Library Online.

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Intimate Partner/Domestic Violence Co-Occurring with Child Maltreatment

A Bibliography

Banda, L.C., Carlson, J., Diaz, A., Akin, B. A., Davis, L., Rose, J., & Yellowhammer, T. (2024). [Barriers to services at the intersection of child maltreatment and domestic violence: A multi-perspective analysis of parents with lived experience and professionals](#). *Journal of Family Violence*, 39, 509–521. DOI:10.1007/s10896-022-00457-8

Purpose: Firm evidence exists on the co-existence of child maltreatment and domestic violence (DV). This study examines the barriers to service delivery for families experiencing DV who are child welfare (CW) system involved from the perspectives of two key groups: parents with lived experience of DV and CW and multi-sector professionals. Methods: A thematic content analysis was conducted of data from 16 in-person and remote listening sessions of 140 participants including families and DV/CW professionals across the U.S. Results: Findings suggest that for parent participants communication, inadequate services, lack of trust, and providers not serving families well were some of the challenges that impact accessing and receiving services and resources. Professional participants described the limited availability of services, systemic challenges, and collaboration as barriers impacting the access to and provision of resources to families experiencing DV and involved within the CW system. Conclusions: Discussion points reflect on the synergies and divergencies in the participant groups' identified barriers. Study implications emphasize the need to address the challenges encountered by CW and DV systems at the individual, systemic and educational levels.

Brühl, A., Ward, C. L., Lachman, J. M., Foran, H. M., Raleva, M., Baban, A., & Heinrichs, N. (2023). [Co-occurrence of intimate partner violence against mothers and maltreatment of their children with behavioral problems in eastern Europe](#). *Violence Against Women*, 29(12-13), 2439–2463. DOI:10.1177/10778012231188090

This study investigates the co-occurrence of intimate partner violence (IPV) against mothers and their risk of perpetrating child maltreatment (CM) in North Macedonia, the Republic of Moldova, and Romania. Risk factors for IPV, CM, and their co-occurrence were identified. Two samples (N1 = 112, N2=701) of mothers with children with behavioral problems were assessed. IPV was reported by 64% of mothers, CM by 96%, and their co-occurrence by 63%. Mothers exposed to emotional IPV reported more physical and emotional CM. Mothers exposed to physical IPV reported more physical CM. Mothers' own history of CM and offspring's behavior problems were associated with IPV and CM co-occurrence.

Diestel, A. J., Price, M., Hidalgo, J. E., Contractor, A. A., & Grasso, D. J. (2023). Linkages between childhood maltreatment, intimate partner violence, and posttraumatic stress disorder symptoms in pregnant Hispanic women: A network analysis. *Child Maltreatment*, 28(2), 243–253. DOI:10.1177/10775595221092948

Pregnant Hispanic women are at increased risk for posttraumatic stress disorder (PTSD) in part due to greater risk of childhood maltreatment, intimate partner violence (IPV), and pregnancy-related vulnerabilities. However, PTSD, is a highly heterogeneous diagnosis with numerous presentations. Individual PTSD symptoms may be differentially associated with specific types of maltreatment, IPV. Determining how IPV exposure across the lifespan is associated with specific symptoms of PTSD in pregnant Hispanic women is necessary to develop group-relevant models of this disorder and targeted interventions. The present study examined a network model of PTSD symptoms, childhood maltreatment, and adulthood IPV in a sample of pregnant Hispanic women (N = 198). Childhood emotional abuse and adulthood psychological distress had the highest bridge centrality. These types of exposures were most strongly associated with social isolation. Childhood

emotional abuse was associated with more individual PTSD symptoms than any IPV type. These findings suggest that associations between PTSD symptoms and different types of IPV exposure vary. In addition, robust associations between childhood emotional abuse and PTSD symptoms suggest that this domain may be particularly important for the clinical assessment and intervention for pregnant women.

Pearson, I., Page, S., Zimmerman, C., Meinck, F., Gennari, F., Guedes, A., & Stöckl, H. (2023). [The co-occurrence of intimate partner violence and violence against children: A systematic review on associated factors in low- and middle-income countries](#). *Trauma, Violence, & Abuse*, 24(4), 2097–2114. DOI:10.1177/15248380221082943

Violence against women (VAW) and violence against children (VAC) are public health issues of global concern. Intimate partner violence (IPV) is a commonly occurring form of VAW and there is evidence to suggest that IPV and VAC frequently co-occur within the same families. This systematic literature review searched for studies published in any language between 1st January 2000 to 16th February 2021 and identified 33 studies that provided findings for co-occurring IPV and VAC in 24 low- and middle-income countries (PROSPERO: CRD42020180179). These studies were split into subgroups based on the types of co-occurring violence they present and meta-analyses were conducted to calculate pooled odds ratios (ORs) within these subgroups. Our results indicate a significant association between IPV and VAC, with all pooled ORs showing a significant positive association between the two. Almost half of the studies focused exclusively on co-occurrence between male-to-female IPV and female caregiver-to-child VAC; few authors reported on male caregiver-to-child violence. Only three studies identified risk factors for co-occurring IPV and VAC, and those that did suggested conflicting findings on the risks associated with maternal age, alcohol and drug use, and parental education level. We also found incongruity in the violence definitions and measurements used across studies. Future research should aim to develop more consistent definitions and measurements for co-occurrence and move beyond solely examining dyadic and

unidirectional violence occurrence in families; this will allow us to better understand the interrelationships between these different forms of abuse.

Gilbert, B., Stewart, A., Hurren, E., Little, S., & Allard, T. (2022). Exploring dual-system involvement for domestic violence victimisation and child maltreatment perpetration: An exploration by gender and race/ethnicity. *Child Abuse & Neglect*, 124, 105440. DOI:10.1016/j.chiabu.2021.105440

Background: There is an historical separation between system responses to domestic violence (DV) and child maltreatment. Concerns have been noted that DV victims may be over-represented as parents responsible for harm to children in the child protection system. Although there is a growing acknowledgement of the high overlap between DV and child maltreatment within families, little empirical research has been conducted on this relationship. Objective: This study aims to longitudinally examine the overlap of being a victim of DV and a perpetrator of child maltreatment, along with the impact of dual-system involvement on the nature and frequency of the violence experienced. Methods: The data are linked longitudinal administrative data from the Queensland Cross-sector Research Collaboration (QCRC) repository. These data contain each contact every individual born in Queensland in 1983 or 1984 had with the Queensland DV civil court system and the Queensland statutory child protection system. Results: Of individuals identified as a perpetrator of child maltreatment, 45% have also been a victim of DV and approximately 22% of DV victims were identified as a perpetrator of child maltreatment. Our results also show differences based on Indigenous status, gender, parental status, number of substantiations, frequency of violence, harm type, and number of domestic violence orders. Conclusions: There is considerable overlap between individuals who are victims of DV and individuals who perpetrate child maltreatment. This overlap was influenced by both gender and race/ethnicity. The implications of this study for both policy and practice are discussed.

Rebbe, R., Lyons, V. H., Webster, D., & Putnam-Hornstein, E. (2022). [Domestic violence alleged in California child maltreatment reports during the COVID-19 pandemic.](#) *Journal of Family Violence*, 37, 1041-1048. DOI:10.1007/s10896-021-00344-8

During the COVID-19 pandemic, reports to child abuse and neglect hotlines have dropped significantly across the United States. Yet, during this same period, calls to domestic violence hotlines have increased. The purpose of this study was to examine if there have been measurable changes in domestic violence-related reports to child abuse and neglect hotlines. Using administrative child protection records from California, we plotted counts and proportions of child maltreatment reports with and without domestic violence allegations before and through the onset of school closures associated with the COVID-19 pandemic. We used an interrupted time series analysis to evaluate whether or not there was a change in domestic violence allegations in child protection reports corresponding to the COVID-19 pandemic. We document that during the first two quarters of 2020 there was a 14.3% drop in the overall number of child protection reports. Despite a decline in maltreatment reporting overall, there was a 25% increase in the proportion of reports with allegations of domestic violence. Our findings suggest both the count and composition of reports to child protection agencies were affected by the COVID-19 pandemic. The current analyses also showcase the seasonality of CPS reports generally, and reports with DV allegations, specifically.

Armstrong, E. M., & Bosk, E. A. (2021). Contradictions and their consequences: How competing policy mandates facilitate use of a punitive framework in domestic violence-child maltreatment cases. *Child Maltreatment*, 26(4), 441-451. DOI:10.1177/1077559520969888

Research shows child welfare cases involving caregiver domestic violence (DV) continue to produce punitive consequences for non-abusive adult victims. This occurs despite the adoption of a supportive policy framework that emphasizes perpetrator responsibility for DV-related harm to children. Risk assessment procedures have been implicated in punitive outcomes, but we know little about how they shape child welfare workers'

decision-making practice. Focusing on a state with a supportive policy framework, this paper uses grounded theory to examine how policy contradictions, procedural directives around risk assessment, and informal interventions produce punitive consequences for adult victims of DV and unmitigated risk to children. Data include state policy and procedural documents and interviews with child welfare workers describing decision-making in their most recent completed case and most recent case involving DV. Findings point to the need for active alignment of policies and procedures, greater integration of knowledge across practice areas, renewed commitments to differential response, and greater inclusion of DV specialists in child welfare settings.

Brown, S. M., Rhoades, G. K., Marti, C. N., & Lewis, T. (2021). [The co-occurrence of child maltreatment and intimate partner violence in families: Effects on children's externalizing behavior problems](#). *Child Maltreatment*, 26(4), 363-375.
DOI:10.1177/1077559520985934

Children exposed to maltreatment are at risk of experiencing intimate partner violence (IPV) and behavioral problems. This study examined different forms of family violence that co-occur and their relationship to children's externalizing behaviors across developmental stages (early childhood, middle childhood, adolescence). Longitudinal data (N = 1,987) at baseline and 18 months and 36 months post-baseline from the NSCAW II were used. Mixture modeling was employed in which latent class models estimated subgroups of children who experienced co-occurring forms of family violence; regression models estimated which subgroups of children were at risk of externalizing behaviors. Three latent classes were identified across developmental stages: high family violence, low family violence, and child physical abuse and psychological aggression. For children in early childhood, a fourth class was identified: partner and child physical abuse and child psychological aggression. Results from regression models revealed differences in externalizing scores by class membership across developmental age groups and over time. That distinct classes of child maltreatment and IPV co-occur and differentially

impact children's behavior suggests a need for strong prevention and intervention responses to address children's dual maltreatment and IPV exposure.

Buffarini, R., Coll, C. V. N., Moffitt, T., Freias da Silveira, M., Barros, F., & Murray, J. (2021). [Intimate partner violence against women and child maltreatment in a Brazilian birth cohort study: Co-occurrence and shared risk factors](https://doi.org/10.1136/bmjgh-2020-004306). *BMJ Global Health*, 6(4), e004306. DOI:10.1136/bmjgh-2020-004306

Background: Intimate partner violence (IPV) against women and child maltreatment (CM) are major public health problems and human rights issues and may have shared causes. However, their overlap is understudied. We investigated the prevalence of IPV and CM, their co-occurrence in households and possible shared risk factors, in the general population of a Brazilian urban setting. Methods: Prospective population-based birth cohort, including over 3500 mother-child dyads with maternal reports on both IPV and CM when children were 4 years old. Eleven neighbourhood, family and parental risk factors were measured between birth and age 4 years. Bivariate and multivariate Poisson regression models with robust variance were used to test which potential risk factors were associated with IPV, CM and their co-occurrence. Results: The prevalence of any IPV and CM were 22.8% and 10.9%, respectively; the co-occurrence of both types of violence was 5%. Multivariate analyses showed that the overlap of IPV and CM was strongly associated with neighbourhood violence, absence of the child's biological father, paternal antisocial behaviour in general and a mother-partner relationship characterised by high levels of criticism, maternal depression and younger maternal age. A concentration of many risk factors among 10% of the population was associated with a sixfold increase in risk for overlapping IPV and CM compared with households with no risk factors. Conclusion: IPV and CM share important risk factors in the family and neighbourhood environments and are particularly common in households with multiple social disadvantages and family difficulties. Integrated preventive interventions are needed.

Langevin, R., Hébert, M., & Wallace, A. (2021). The intersection of intimate partner violence and childhood sexual abuse in mother-child dyads. *Child Abuse & Neglect*, 120, 105218. DOI:10.1016/j.chiabu.2021.105218

Child sexual abuse (CSA) and intimate partner violence (IPV) have been associated with negative consequences for adult victims and their children including a risk of revictimization and intergenerational continuity. The aim of this study was to document correlates of intergenerational cumulative trauma profiles in mother-child dyads. A sample of 997 sexually abused children (mean age = 7.61 years; 79.1% girls) and their mothers was recruited. Latent Class Analysis (LCA) was used to identify classes of cumulative trauma among dyads. Classes were compared on validated measures of psychological functioning for both members of the dyads. Four distinct classes emerged: CSA Only (43.3%), Intergenerational CSA with Psychological IPV (14.2%), Physical and Psychological IPV with Low Child Exposure (24.0%) and Intergenerational Polyvictimization (18.5%). Comparisons generally revealed lower distress in CSA Only dyads, and higher levels of psychological difficulties in the two most victimized groups. However, the dose-response pattern was not as clear as expected, as the two most victimized groups did not differ in terms of psychological functioning. This study shows that higher levels of intergenerational cumulative trauma are associated with increased psychological symptoms in mothers and more dissociation in their sexually abused children. Interventions should be adapted to the specific needs of families to prevent lasting intergenerational difficulties in trauma exposed individuals.

Pu, D. F., & Rodriguez, C. M. (2021). [Spillover and crossover effects: Mothers' and fathers' intimate partner violence, parent-child aggression risk, and child behavior problems](#). *Child Maltreatment*, 26(4), 420–430. DOI:10.1177/1077559520985936

The high co-occurrence of intimate partner violence (IPV) and physical child abuse suggests that studying these forms of aggression simultaneously, bidirectionally, and longitudinally is critical. Guided by family systems theory, this study examined parent-

child aggression (PCA) risk, IPV victimization, and child behavior problems as reported by mothers and fathers when their child was 18 months and at 4 years old, to evaluate whether negative processes can transmit across family subsystems (i.e., spillover hypothesis) and/or across individuals (i.e., crossover hypothesis). Results indicated that mothers' PCA risk predicted their subsequent IPV victimization and their reported child behavior problems (i.e., spillover effects) as well as fathers' reported IPV victimization (i.e., crossover effect). Maternal reports of child behavior problems also predicted mothers' reported IPV victimization and fathers' reported child behavior problems, indicating child-driven effects. Overall, mothers rather than fathers appear more vulnerable to harmful spillover effects. Findings underscore the need for early prevention and intervention given the complex, transactional nature of family violence.

Ravi, K.E. (2021). [Exposure to IPV among children in the child welfare system and an emotional-behavioral disability: The role of maternal depression and social support](#). *Journal of Child & Adolescent Trauma*, 14(4), 587–597.
DOI:10.1007/s40653-021-00367-9

This study examines the relationship between children's exposure to IPV and EBD among children involved in the child welfare system for suspected maltreatment (both substantiated and unsubstantiated). It specifically examines how children's trauma symptoms, maternal depression, and maternal social support may impact the relationship between exposure to IPV and EBD. This study uses structural equation modeling with data from the second National Survey of Child and Adolescent Wellbeing to examine the relationship between exposure to IPV and EBD among 989 children (ages 8–17) involved in the child welfare system. Moderated mediation was employed to examine whether children's trauma symptoms mediate the relationship between IPV exposure and EBD and whether differences in maternal depression and social support impact such mediation effect. Child trauma symptoms and maternal social support were significantly related to EBD. The current study highlights the relationship between

children's trauma symptoms and EBD among children in the child welfare system. The study also provides preliminary evidence for maternal social support as a protective factor for children developing EBD. Implications of this research include providing interventions as well as increasing maternal social support to potentially reduce the likelihood of children developing EBD.

Rebbe, R., Eastman, A. L., Adhia, A., Foust, R., & Putnam-Hornstein, E. (2021). Co-reporting of child maltreatment and intimate partner violence: The likelihood of substantiations and foster care placements. *Child Maltreatment*, 26(4), 431-440. DOI:10.1177/10775595211007205

Intimate partner violence (IPV) negatively affects children. Although IPV-related reports frequently come to the attention of child protective services (CPS), there is neither a unified standard for how CPS systems should respond, nor sufficient research documenting that reaction. The current study used population-based administrative records from California to assess how CPS responds to reported allegations of IPV, with and without physical abuse and/or neglect allegations. We used multinomial regression to model the likelihood of investigation outcomes. Results indicate that 20.7% of CPS reports had IPV alleged during hotline screening, and of those, just 3.2% were screened out compared to 20.2% for reports where IPV was not alleged. Almost half (45.5%) of IPV-alleged reports came from law enforcement, in contrast to 15.2% of reports that did not allege IPV. IPV-alleged reports were more likely to have allegations substantiated without a case opened for services, but less likely to result in foster care placements. Several statistically significant differences were identified by the type of alleged maltreatment co-reported with IPV. This study contributes to an understanding of how CPS responds to IPV-alleged reports.

Renner, L. M. (2021). The co-occurrence of child maltreatment and intimate partner violence: A commentary on the special issue. *Child Maltreatment*, 26(4), 464–469. DOI:10.1177/1077559520985934

Children exposed to maltreatment are at risk of experiencing intimate partner violence (IPV) and behavioral problems. This study examined different forms of family violence that co-occur and their relationship to children's externalizing behaviors across developmental stages (early childhood, middle childhood, adolescence). Longitudinal data (N = 1,987) at baseline and 18 months and 36 months post-baseline from the NSCAW II were used. Mixture modeling was employed in which latent class models estimated subgroups of children who experienced co-occurring forms of family violence; regression models estimated which subgroups of children were at risk of externalizing behaviors. Three latent classes were identified across developmental stages: high family violence, low family violence, and child physical abuse and psychological aggression. For children in early childhood, a fourth class was identified: partner and child physical abuse and child psychological aggression. Results from regression models revealed differences in externalizing scores by class membership across developmental age groups and over time. That distinct classes of child maltreatment and IPV co-occur and differentially impact children's behavior suggests a need for strong prevention and intervention responses to address children's dual maltreatment and IPV exposure.

Gracia, E., Rodriguez, C. M., Martín-Fernández, M., & Lila, M. (2020). Acceptability of family violence: Underlying ties between intimate partner violence and child abuse. *Journal of Interpersonal Violence*, 35(17–18), 3217–3236. DOI:10.1177/0886260517707310

Intimate partner violence (IPV) and child abuse (CA) are two forms of family violence with shared qualities and risk factors, and are forms of violence that tend to overlap. Acceptability of violence in partner relationships is a known risk factor in IPV just as acceptability of parent–child aggression is a risk factor in CA. We hypothesized that these acceptability attitudes may be linked and represent the expression of a general,

underlying nonspecific acceptance of violence in close family relationships. The sample involved 164 male IPV offenders participating in a batterer intervention program. Implicit measures, which assess constructs covertly to minimize response distortions, were administered to assess acceptability of partner violence against women and acceptability of parent–child aggression. To determine whether acceptability attitudes regarding both forms of violence were related to a higher order construct tapping general acceptance of family violence, Bayesian confirmatory factor analyses were conducted. Findings supported a hierarchical (bifactor) model with a general factor expressing a nonspecific acceptance of family violence, and two specific factors reflecting acceptability of violence in intimate partner and parent–child relationships, respectively. This hierarchical model supporting a general acceptance of violence in close family relationships can inform future research aiming to better understand the connections between IPV and CA.

Lawson, M., Speidel, R., Fondren, K., Cummings, E. M., & Valentino, K. (2020). [Intimate partner violence and maltreated preschoolers' internal representations of conflict](#). *Journal of Family Psychology*, 34(4), 425–435. DOI:10.1037/fam0000627

Family violence, including intimate partner violence (IPV) and child maltreatment, has detrimental consequences across the life span. Robust evidence from families experiencing relatively normative conflict demonstrates the central role of children's internal representations, or beliefs and expectations of relationships, on children's adjustment. The current investigation examines children's implicit internal representations of interadult conflict among families experiencing IPV and child maltreatment. Maltreated ($n = 132$) and nonmaltreated ($n = 82$) preschoolers ($M_{age} = 4.93$ years, $SD = 1.11$) completed a narrative story–stem completion task in which they were asked to generate narrative endings to interadult conflicts. Narratives were coded for constructive conflict resolutions, dysregulated destructive behaviors, and the proliferation of interadult aggression toward the child. Mothers reported the frequency of

IPV and constructive conflict between themselves and their partners within the past year. The potential additive and interactive effects of IPV, constructive conflict, and child maltreatment on children's internal representations of conflict behaviors were examined. The narratives of maltreated children depicted more constructively resolved conflict as interadult constructive conflict tactics increased. Maltreated and nonmaltreated children did not differ in their representations of conflict resolution at high levels of constructive conflict tactics. Maltreatment was positively associated with representations of dysregulated destructive behaviors and conflict spread to the parent-child relationship. IPV was positively associated with representations of conflict spread. Constructive conflict, in turn, was negatively associated with conflict spread. The findings highlight the importance of the multiple expressions of family conflict and violence on children's implicit internal representations of conflict.

Sijtsema, J. J., Stolz, E. A., & Bogaerts, S. (2020). Unique risk factors of the co-occurrence between child maltreatment and intimate partner violence perpetration. *European Psychologist, 25*(2), 122-133. DOI:10.1027/1016-9040/a000396.

Recent studies found that there is considerable overlap between perpetrators of intimate partner violence (IPV) and child maltreatment (CM), suggesting that both types of domestic violence can co-occur. However, there is a lack of consistency about the prevalence of co-occurrence, what unique risk factors and outcomes of co-occurrence are, and whether co-occurrence differs between Europe and other world regions. The aim is thus to review existing evidence and provide a framework for the study of IPV and CM co-occurrence by identifying unique risk factors and outcomes. In total, 12 European studies were identified that examined risk factors of co-occurrence between IPV and CM. Risk factors were distinguished at the individual, dyadic, and broader contextual levels, and compared between Europe and other regions of the world. Despite significant variation between studies, several general patterns were discerned, both globally and region-specific. These insights were used to develop a framework for the explanation of

IPV and CM co-occurrence, which has implications for prevention and treatment. Importantly, more awareness and early signaling of risk for co-occurrence may counteract the spill-over from one type of domestic violence into the other to the benefit of children's safety and well-being.

Rancher, C., Jouriles, E. N., Johnson, E., Cook, K., & McDonald, R. (2019). Self-blame for interparental conflict among female adolescents who have been sexually abused. *Journal of Family Psychology*, 33(8), 982–987. DOI:10.1037/fam0000539

This study evaluated whether self-blame appraisals for interparental conflict relate to conduct problems among female adolescents who have been sexually abused. Participants included female adolescents who had experienced sexual abuse and a current, primary nonabusing caregiver. Families presented for services at a children's advocacy center. Female adolescents (N = 263, Age 11–17 years, M = 13.68, SD = 1.74) reported on conduct problems, self-blame appraisals for interparental conflict, self-blame appraisals for their sexual abuse, perceptions of the frequency and severity of interparental conflict, and whether the sexual abuse involved coercion. Caregivers reported on adolescent conduct problems and their contact with a romantic partner. Adolescent relationship to the alleged abuser and the severity and duration of the sexual abuse were coded from forensic interviews and case records. Adolescent self-blame appraisals for interparental conflict were positively associated with adolescent and caregiver reports of adolescent conduct problems. These relations emerged even after controlling for other theoretically important variables, such as self-blame appraisals for sexual abuse. Adolescent appraisals for interparental conflict may be an important target for assessment and intervention for female adolescents who have been sexually abused.

Rizo, C. F., O'Brien, J., Macy, R., Ermentrout, D., & Lanier, P. (2019). Reporting maltreatment to child protective services in the context of intimate partner violence research. *Violence Against Women*, 25(2), 131-147. DOI:10.1177/1077801218761604

Given the overlap between intimate partner violence (IPV) and child maltreatment, IPV-exposed child participants in research might disclose instances of child maltreatment. Such disclosures might require researchers to report the maltreatment to child protective services (CPS). However, the literature provides minimal guidance on how to navigate the complex challenges and ethical dilemmas around reporting in the context of research. To help address this gap and stimulate discussion regarding protocols and policies for reporting child maltreatment, this article presents a CPS reporting protocol developed as part of a community-engaged research project evaluating a parenting intervention for system-involved mothers experiencing IPV.

Victor, B. G., Henry, C., Gilbert, T. T., Ryan, J. P., & Perron, B. E. (2019). [Child protective service referrals involving exposure to domestic violence: Prevalence, associated maltreatment types, and likelihood of formal case openings](#). *Child Maltreatment*, 24(3), 299-309. DOI:10.1177/1077559519843605

Childhood exposure to domestic violence (CEDV) is widely understood as potentially harmful to children. Accordingly, many child welfare systems in the United States construe CEDV as maltreatment when the exposure results in harm or threatened harm to the child. The purpose of the current study was to investigate substantiated child welfare referrals directly related to CEDV to better understand the prevalence and patterns of CEDV-related maltreatment and how child welfare workers respond under the “harm or threatened harm” standard. Data were drawn from 23,704 substantiated referrals between 2009 and 2013 in a large Midwestern child welfare system. Approximately 20% of substantiated referrals were CEDV related. A plurality of CEDV-related referrals included both a male caregiver and female caregiver who were co-substantiated for maltreatment. The most common maltreatment types substantiated for these referrals were neglect based rather than abuse based, and just under a quarter

(23%) of CEDV-related referrals were formally opened for services. Referrals involving co-occurring substance abuse were most likely to be opened for services based on predicted probabilities derived from multilevel modeling. Implications for policy and practice are considered.

Ahmadabadi, Z., Najman, J. M., Williams, G. M., Clavarino, A. M., d'Abbs, P., & Abajobir, A. A. (2018). Maternal intimate partner violence victimization and child maltreatment. *Child Abuse & Neglect, 82*, 23–33. DOI:10.1016/j.chiabu.2018.05.017

There is some limited evidence of an association between maternal intimate partner victimization (IPV) and children's experience of maltreatment. Using data from a longitudinal study, we examine whether this relationship is independent of range of potential confounders including socio-economic, familial and psychological factors. Data were taken from the 14 and 30-year follow-ups of the Mater-University of Queensland Study of Pregnancy (MUSP) in Australia. A subsample of 2064 mothers and children (59.0% female) whose data on maternal IPV and child maltreatment was available, were analysed. In families with maternal IPV, two in five children reported being maltreated, compared to one in five children maltreated in families without maternal IPV. Except for sexual maltreatment which was consistently higher in female offspring, there was no gender differences in experiencing different types of maltreatment in families manifesting maternal IPV. Although both males and females were at increased risk of child maltreatment in families where mothers were victimized by their male partners, male children were more likely to be emotionally maltreated. The main associations were substantially independent of measured confounders, except for father's history of mental health problems which attenuated the association of maternal IPV victimization and male offspring's physical abuse. Our findings confirm that there is a robust association between maternal IPV and child maltreatment. Both maternal IPV victimization and child maltreatment co-occur in a household characterized by conflict and violence. Consequences of IPV go beyond the incident and influence all family members. Efforts to

reduce child maltreatment may need to address the greater level of IPV associated with the cycle of family violence.

Broady, T. R., & Gray, R. M. (2018). The intersection of domestic violence and child protection in Australia: Program participant accounts. *Australian Social Work, 71*(2), 189–201. DOI:10.1080/0312407X.2017.1422774

Domestic and family violence (DFV) and child maltreatment have been widely identified as co-occurring social phenomena. It has been well established that children living in an environment of DFV are at significant risk of either directly experiencing violence themselves, or being neglected due to their parents' reduced caregiving capacity. In order to effectively address clients' presenting concerns, intervention responses must account for the overlap between these social issues. This article describes the experience of DFV and child protection involvement as experienced by clients attending two different interventions at Relationships Australia NSW; group programs for DFV perpetration or 20ecognizes20na; and a parenting program in the context of statutory child removal. Findings provide evidence of overlap between these issues and highlight how a supportive and non-judgemental group environment can allow parents to make behavioural changes and equip themselves to provide a safe and nurturing environment in which to raise their children.

Gracia, E., López-Quílez, A., Marco, M., & Lila, M. (2018). [Neighborhood characteristics and violence behind closed doors: The spatial overlap of child maltreatment and intimate partner violence](#). *PloS One, 13*(6), e0198684. DOI:10.1371/journal.pone.0198684

In this study, we analyze first whether there is a common spatial distribution of child maltreatment (CM) and intimate partner violence (IPV), and second, whether the risks of CM and IPV are influenced by the same neighborhood characteristics, and if these risks spatially overlap. To this end we used geocoded data of CM referrals (N = 588) and IPV

incidents (N = 1450) in the city of Valencia (Spain). As neighborhood proxies, we used 552 census block groups. Neighborhood characteristics analyzed at the aggregated level (census block groups) were: Neighborhood concentrated disadvantage (neighborhood economic status, neighborhood education level, and policing activity), immigrant concentration, and residential instability. A Bayesian joint modeling approach was used to examine the spatial distribution of CM and IPV, and a Bayesian random-effects modeling approach was used to analyze the influence of neighborhood-level characteristics on small-area variations of CM and IPV risks. For CM, 98% of the total between-area variation in risk was captured by a shared spatial component, while for IPV the shared component was 77%. The risks of CM and IPV were higher in neighborhoods characterized by lower levels of economic status and education, and higher levels of policing activity, immigrant concentration, and residential instability. The correlation between the log relative risk of CM and IPV was .85. Most census block groups had either low or high risks in both outcomes (with only 10.5% of the areas with mismatched risks). These results show that certain neighborhood characteristics are associated with an increase in the risk of family violence, regardless of whether this violence is against children or against intimate partners. Identifying these high-risk areas can inform a more integrated community-level response to both types of family violence. Future research should consider a community-level approach to address both types of family violence, as opposed to individual-level intervention addressing each type of violence separately.

Tiyyagura, G., Christian, C., Berger, R., & Lindberg, D. (2018). [Occult abusive injuries in children brought for care after intimate partner violence: An exploratory study.](#) *Child Abuse & Neglect*, 79, 136–143. DOI:10.1016/j.chiabu.2018.02.003

Children in homes with intimate partner violence (IPV) are at increased risk for physical abuse. We determined the frequency and injury patterns in children who underwent child abuse consultation after IPV exposure by retrospectively analyzing the “Examination of Siblings to Recognize Abuse” cohort of children referred for physical abuse. Children were

selected who presented after IPV exposure. Among 2890 children evaluated by child abuse pediatricians, 61 (2.1%) patients presented after IPV exposure. Of the 61, 11 (18.0%) were exposed to IPV, but had no direct involvement in the IPV event, 36 (59.0%) sustained inadvertent trauma during IPV, and 14 (23.0%) were directly assaulted during IPV. Thirty-six patients (59.0%) had an injury: 31 (51.0%) had cutaneous injuries and 15 (24.6%) had internal injuries including fracture(s), intracranial or intra-abdominal injury. Of the 15 patients with internal injuries, 14 (93.3%) were less than 12 months old. Among the 36 patients with injuries, 16 (44.4%) had no report of direct injury, a report of a mechanism that did not explain the identified injuries, or a report of trauma without a specific mechanism. Five (13.9%) did not have physical examination findings to suggest the extent of their internal injuries. Injuries are present in a significant proportion of children presenting to Emergency Departments after IPV exposure. History and physical examination alone are insufficient to detect internal injuries especially in infants. These preliminary results support the need for future, prospective studies of occult injury in children exposed to IPV.

Victor, B. G., Grogan-Kaylor, A., Ryan, J. P., Perron, B. E., & Gilbert, T. T. (2018). Domestic violence, parental substance misuse and the decision to substantiate child maltreatment. *Child Abuse & Neglect*, 79, 31-41. DOI:10.1016/j.chiabu.2018.01.030

Families that experience domestic violence and parental substance misuse are disproportionately involved with the child welfare system. Prior research suggests that child protective services (CPS) caseworkers are more likely to substantiate maltreatment allegations when domestic violence and parental substance misuse are identified during the investigation, pointing to one possible mechanism for this disproportionate involvement. While previous studies have relied on nationally representative data sets, the current study used administrative records from a large Midwestern child welfare agency that accounts for state-level variation in child welfare policy and practice. A total of 501,060 substantiation decisions made between 2009 and 2013 were examined to

assess the influence of caseworker-perceived domestic violence and parental substance misuse on the decision to substantiate reported maltreatment. Results from multilevel modeling suggest that the identification of domestic violence and parental substance misuse during an investigation significantly increased the probability that an allegation would be substantiated. The implication of these findings for child welfare practice are considered in light of the fact that many child welfare agencies do not consider exposure to domestic violence and parental substance misuse in and of themselves to constitute child maltreatment.

Brown, E. (2017). [Native American tribal child social workers' experiences on co-occurrences of domestic violence and child maltreatment](#) (Publication No. 472) [Master's thesis, California State University at San Bernardino]. CSUSB ScholarWorks.

Native American women and children suffer from domestic violence at an alarming rate on and off Indian reservations in the United States. Often these families that are impacted by domestic violence are involved in the state/county child welfare system. This study was to gain knowledge about Native American tribal child social workers experiences and challenges with co-occurrences of domestic violence and child maltreatment cases. This study used an exploratory, qualitative design with a phenomenological approach by collecting data through face-to-face and over the phone interviews with four Native American tribal child social workers from four different tribes across the nation. This design allowed participants the opportunity to provide a more in-depth explanation from their own personal experiences regarding their experiences and challenges working with domestic violence and child maltreatment cases. The study found that there is a need for state/county social workers to have a better understanding of the historic and current experiences of Native people from a cultural, spiritual, and socioeconomic perspective through effective and consistent training on the Indian Child Welfare Act (ICWA). The study also found, that there is a need for state/county administration and social workers

to build relationships with tribal child social workers in order to provide culturally competent and effective policies and services to serve Native American communities.

Jaffe, P., Campbell, M., Reif, K., Fairbairn, J., & David, R. (2017). Children killed in the context of domestic violence: International perspectives from death review committees. In M. Dawon (Ed.), *Domestic homicides and death reviews* (pp. 317–343). PalgraveMacmillan. DOI:10.1057/978-1-137-56276-0_11

Child homicides are a significant concern around the world and call for enhanced prevention efforts. In 2012, 36,000 children under the age of 15 were victims of homicide representing 8% of all global homicide victims (United Nations Office on Drugs and Crime 2014). In Western societies, children are most likely to be killed by parents or step-parents, acts usually referred to as filicides (Dawson 2015; Friedman and Resnik 2007; Office for National Statistics 2014). Extensive reviews of official records find that fathers are 57% of Canadian filicide perpetrators (Dawson 2015) and 55% of American filicide perpetrators (Dixon et al. 2014). Fathers appear more likely to kill children as an act of revenge, in the context of separation, and following a prior history of domestic violence (Dawson 2015; Ewing 1997; Lawrence 2004).

Maneta, E. K., White, M., & Mezzacappa, E. (2017). Parent-child aggression, adult-partner violence, and child outcomes: A prospective, population-based study. *Child Abuse & Neglect*, 68, 1–10. DOI:10.1016/j.chiabu.2017.03.017

Parent-child physical aggression (PCPA) and adult intimate partner violence (IPV) are common forms of family violence that often co-occur. Their deleterious effects on children and adolescents have been well documented. However, important questions remain regarding whether the type of violence exposure, the experience of one or both forms, the chronicity of violent experiences, and the age, gender, and SES of the child, differentially influence developmental outcomes. Data on 2810 children from the Project on Human Development in Chicago Neighborhoods were analyzed. Children aged 3–9 at

the outset were assessed three times, at 3-year intervals. Primary caregivers reported on IPV, PCPA, and children's externalizing and internalizing symptoms. Children's externalizing and internalizing symptoms were examined as a function of time, age, gender, socioeconomic status (SES), and the time-varying effects of cumulative IPV and PCPA exposure. Cumulative experiences of IPV and PCPA each adversely affected the developmental trajectories of both externalizing and internalizing symptoms, but in different ways; and they did so independently of participants' age, gender, or SES, which all functioned as significant, independent predictors of child outcomes. PCPA was by far the more potent of the two forms of violence; and when both forms occurred, they worked additively to affect outcomes. Important questions remain regarding the reasons for the differential potency of these two forms of family violence on childhood symptoms, and related implications for interventions, as well as for later adult behavior.

Namy, S., Carlson, C., O'Hara, K., Nakuti, J., Bukuluki, P., Lwanyaaga, J., Namakula, S., Nanyuja, B., Wainberg, M. L., Naker, D., & Michau, L. (2017). [Towards a feminist understanding of intersecting violence against women and children in the family](#). *Social Science & Medicine*, 184, 40–48. DOI:10.1016/j.socscimed.2017.04.042

While intimate partner violence (IPV) against women and violence against children (VAC) have emerged as distinct fields of research and programming, a growing number of studies demonstrate the extent to which these forms of violence overlap in the same households. However, existing knowledge of how and why such co-occurrence takes place is limited, particularly in the Global South. The current study aims to advance empirical and conceptual understanding of intersecting IPV and VAC within families in order to inform potential programming. We explore shared perceptions and experiences of IPV and VAC using qualitative data collected in December 2015 from adults and children in Kampala, Uganda (n = 106). We find that the patriarchal family structure creates an environment that normalizes many forms of violence, simultaneously infantilizing women and reinforcing their subordination (alongside children). Based on

participant experiences, we identify four potential patterns that suggest how IPV and VAC not only co-occur, but more profoundly intersect within the family, triggering cycles of emotional and physical abuse: bystander trauma, negative role modeling, protection and further victimization, and displaced aggression. The discussion is situated within a feminist analysis, including careful consideration of maternal violence and an emphasis on the ways in which gender and power dynamics can coalesce and contribute to intra-family violence.

Roark, J., Knight, K. E., Olson, H., & DeSandre, H. (2017). Predictors of child abuse charges within the context of domestic violence arrests. *Crime & Delinquency*, 63(13), 1777-1803. DOI:10.1177/0011128716661141

This article investigates how different factors of a domestic violence incident impact the likelihood of a child abuse charge within the context of domestic violence arrests. Data from 5,148 domestic violence arrests were used to test whether domestic violence-, incident-, and child-based predictors increased the likelihood of a child abuse charge. Logistic regression models of gender-stratified samples were employed to test for gender differences among domestic violence arrestees. The results demonstrated predictors affected men's odds of a child abuse charge when compared with women. For men and women, children witnessing the domestic violence incident had the largest impact on a child abuse charge. These results contribute to the underdeveloped area of police response to child abuse in domestic violence cases.

Turner, W., Hester, M., Broad, J., Szilassy, E., Feder, G., Drinkwater, J., Firth, A., & Stanley, N. (2017). [Interventions to improve the response of professionals to children exposed to domestic violence and abuse: A systematic review](#). *Child Abuse Review*, 26(1), 19-39. DOI:10.1002/car.2385

Exposure of children to domestic violence and abuse (DVA) is a form of child maltreatment with short- and long-term behavioural and mental health impact. Health

care professionals are generally uncertain about how to respond to domestic violence and are particularly unclear about best practice with regards to children's exposure and their role in a multiagency response. In this systematic review, we report educational and structural or whole-system interventions that aim to improve professionals' understanding of, and response to, DVA survivors and their children. We searched 22 bibliographic databases and contacted topic experts for studies reporting quantitative outcomes for any type of intervention aiming to improve professional responses to disclosure of DVA with child involvement. We included interventions for physicians, nurses, social workers and teachers. Twenty-one studies met the inclusion criteria: three recognizes controlled trials (RCTs), 18 pre-post intervention surveys. There were 18 training and three system-level interventions. Training interventions generally had positive effects on participants' knowledge, attitudes towards DVA and clinical competence. The results from the RCTs were consistent with the before-after surveys. Results from system-level interventions aimed to change recognizes practice and inter-organisational collaboration demonstrates the benefit of coordinating system change in child welfare agencies with primary health care and other organisations. Implications for policy and research are discussed.

Bidarra, Z. S., Lessard, G., & Dumont, A. (2016). Co-occurrence of intimate partner violence and child sexual abuse: Prevalence, risk factors and related issues. *Child Abuse & Neglect*, 55, 10–21. DOI:10.1016/j.chiabu.2016.03.007

This article proposes a review of the scientific literature on the cooccurrence of intimate partner violence and intrafamilial child sexual abuse. The review of these two types of violence has evolved in distinct research fields and their cooccurrence has rarely been examined. The objective of this article is to examine the existing knowledge about this cooccurrence. A systematic examination of the scientific literature in several relevant databases was conducted using combinations of 20 keywords so as to identify scientific articles, published between 2003 and 2013, that investigated this cooccurrence. The final

sample comprised 10 studies. These studies revealed the presence of much heterogeneity regarding the prevalence of the cooccurrence for intimate partner violence with sexual abuse and other maltreatment (from 12% to 70%). The review also highlighted a greater risk for children to be victims of sexual abuse or other maltreatment when exposed to intimate partner violence. The implications of these results and the ensuing recommendations for practice and future research are considered in the discussion section.

Bottoms, B. L., Peter-Hagene, L. C., Epstein, M. A., Wiley, T. R., Reynolds, C. E., & Rudnicki, A. G. (2016). Abuse characteristics and individual differences related to disclosing childhood sexual, physical, and emotional abuse and witnessed domestic violence. *Journal of Interpersonal Violence, 31*(7), 1308–1339.
DOI:10.1177/0886260514564155

Many adult survivors of childhood abuse hide their victimization, avoiding disclosure that could identify perpetrators, end the abuse, and bring help to the victim. We surveyed 1,679 women undergraduates to understand disclosure of childhood sexual, physical, and emotional abuse, and, for the first time, witnessed domestic violence, which many consider to be emotionally abusive. A substantial minority of victims failed to ever disclose their sexual abuse (23%), physical abuse (34%), emotional abuse (20%), and witnessed domestic violence (29%). Overall, abuse-specific factors were better predictors of disclosure than individual-level characteristics. Disclosure of sexual abuse was related to experiencing more frequent abuse (by the same and by multiple perpetrators), being more worried about injury and more upset at the time of the abuse, and self-labeling as a victim of abuse. Disclosure of physical abuse was related to experiencing more frequent abuse (by the same and multiple perpetrators), being less emotionally close to the perpetrator, being older when the abuse ended, being more worried and upset, and self-labeling as a victim. Disclosure of emotional abuse was associated with being older when the abuse ended, and being more worried and upset. Disclosure was unrelated to victim demographic characteristics or defensive reactions (dissociative proneness, fantasy

proneness, repressive coping style, and temporary forgetting), except that among physical and emotional abuse victims, repressors were less likely to disclose than nonrepressors. Disclosure of witnessing domestic violence was not significantly related to any factors measured.

Guedes, A., Bott, S., Garcia-Moreno, C., & Colombini, M. (2016). [Bridging the gaps: A global review of intersections of violence against women and violence against children](#). *Global Health Action*, 9(1), 31516. DOI:10.3402/gha.v9.31516

The international community recognizes violence against women (VAW) and violence against children (VAC) as global human rights and public health problems. Historically, research, programmes, and policies on these forms of violence followed parallel but distinct trajectories. Some have called for efforts to bridge these gaps, based in part on evidence that individuals and families often experience multiple forms of violence that may be difficult to address in isolation, and that violence in childhood elevates the risk of violence against women.

Kiesel, L. R., Piescher, K. N., & Edleson, J. L. (2016). The relationship between child maltreatment, intimate partner violence exposure, and academic performance. *Journal of Public Child Welfare*, 10(4), 434–456. DOI:10.1080/15548732.2016.1209150

This article presents a longitudinal examination of the association between children's experiences of child maltreatment (CM) and intimate partner violence (IPV), alone and in combination, with children's academic performance. Integrated, administrative data from the Minnesota Departments of Education and Human Services were used to obtain a sample of 2,914 children. Data provided an opportunity to study comparisons of single (CM or IPV) and combined experiences (CM-IPV), longitudinally observe the impact of these experiences on academic functioning, and make comparisons to the general population. Results revealed significant differences in school attendance and math and

reading performance by adverse experience. Children exposed to CM and IPV, individually or in combination, underperformed at school. IPV-exposed children had the poorest outcomes. Findings highlight the need for dedicated screening for adverse childhood experiences, particularly IPV exposure, and devoting greater educational and social service resources as a means of promoting future school achievement and adult functioning.

Rodriguez, C. M., Gracia, E., & Lila, M. (2016). Multimethod prediction of child abuse risk in an at-risk sample of male intimate partner violence offenders. *Child Abuse & Neglect*, 60, 27-35. DOI:10.1016/j.chiabu.2016.09.006

The vast majority of research on child abuse potential has concentrated on women demonstrating varying levels of risk of perpetrating physical child abuse. In contrast, the current study considered factors predictive of physical child abuse potential in a group of 70 male intimate partner violence offenders, a group that would represent a likely high risk group. Elements of Social Information Processing theory were evaluated, including pre-existing schemas of empathy, anger, and attitudes approving of parent-child aggression considered as potential moderators of negative attributions of child behavior. To lend methodological rigor, the study also utilized multiple measures and multiple methods, including analog tasks, to predict child abuse risk. Contrary to expectations, findings did not support the role of anger independently predicting child abuse risk in this sample of men. However, preexisting beliefs approving of parent-child aggression, lower empathy, and more negative child behavior attributions independently predicted abuse potential; in addition, greater anger, poorer empathy, and more favorable attitudes toward parent-child aggression also exacerbated men's negative child attributions to further elevate their child abuse risk. Future work is encouraged to consider how factors commonly considered in women parallel or diverge from those observed to elevate child abuse risk in men of varying levels of risk.

Coulter, M. L., & Mercado-Crespo, M. C. (2015). Co-occurrence of intimate partner violence and child maltreatment: Service providers' perceptions. *Journal of Family Violence, 30*(2), 255-262. DOI:10.1007/s10896-014-9667-5

Intimate partner violence (IPV) places children at risk for maltreatment (CM). It is critical for both IPV and CM professionals to assess the possibility of the co-occurrence of both of these types of family violence, whose risk factors are nearly identical. However, little is known about the attitudes and perceptions of child welfare (CW), IPV, child protection, or other related professionals when serving families where both of these circumstances may occur. This study examined the perceptions of service providers in Hillsborough County, Florida on the co-occurrence of CM and IPV. Findings demonstrate the inequitable knowledge, training, and perceived ability to deal with the co-occurrence of IPV and CM among professionals from different employment areas. These discrepancies serve as opportunities for different agencies to collaborate in reducing knowledge gaps and increasing respondent's capacity to effectively identify and intervene with victims.

Jenney, A., Mishna, F., Alaggia, R., & Scott, K. (2014). Doing the right thing? Considering risk assessment and safety planning in child protection work with domestic violence cases. *Children and Youth Services Review, 47*(Pt 1), 92-101. DOI:10.1016/j.childyouth.2014.07.015

The concepts of risk and safety are central to social work practice with survivors of violence against women. Little is known, however, about the interaction between child protection workers and the women with whom they are working, in terms of their understanding of these concepts or how discrepancies between client and worker perceptions may create barriers to developing effective intervention strategies. Employing grounded theory methodology, focus group and interview data were used to explore how both worker and client experiences of the process of risk assessment and safety planning influenced the course of the intervention. Emergent findings reveal that workers and clients held a similar set of beliefs about the social construction/collective representation of woman abuse and the work of child protection. Specifically, for both,

the concept of 'doing the right thing' was an over-arching theme for understanding how risk and safety are assessed, and determining how cases are opened or closed. Findings illustrate how narrative structures shape interactions that take place within the context of care and prevention, manifesting themselves in complex ways that can lead to risks for both clients and workers, in managing multiple risks, recognizing the complexity of the concept of safety, misunderstanding the impact on children, and the role of men in addressing DV in the lives of their children.

Widom, C. S., Czaja, S., & Dutton, M. A. (2014). [Child abuse and neglect and intimate partner violence victimization and perpetration: A prospective investigation.](#) *Child Abuse & Neglect*, 38(4), 650–663. DOI:10.1016/j.chiabu.2013.11.004

This paper describes the extent to which abused and neglected children report intimate partner violence (IPV) victimization and perpetration when followed up into middle adulthood. Using data from a prospective cohort design study, children (ages 0–11) with documented histories of physical and sexual abuse and/or neglect ($n = 497$) were matched with children without such histories ($n = 395$) and assessed in adulthood ($M_{age} = 39.5$). Prevalence, number, and variety of four types of IPV (psychological abuse, physical violence, sexual violence, and injury) were measured. Over 80% of both groups – childhood abuse and neglect (CAN) and controls – reported some form of IPV victimization during the past year (most commonly psychological abuse) and about 75% of both groups reported perpetration of IPV toward their partner. Controlling for age, sex, and race, overall CAN [adjusted odds ratio (AOR) = 1.60, 95% CI [1.03, 2.49]], physical abuse (AOR = 2.52, 95% CI [1.17, 5.40]), and neglect (AOR = 1.64, 95% CI [1.04, 2.59]) predicted increased risk for being victimized by a partner via physical injury. CAN and neglect also predicted being victimized by a greater number and variety of IPV acts. CAN and control groups did not differ in reports of perpetration of IPV, although neglect predicted greater likelihood of perpetrating physical injury to a partner, compared to controls. Abused/neglected females were more likely to report being injured by their

partner, whereas maltreated males did not. This study found that child maltreatment increases risk for the most serious form of IPV involving physical injury. Increased attention should be paid to IPV (victimization and perpetration) in individuals with histories of neglect.

Hamilton, L. (2013). [Assessing children's risk for homicide in the context of domestic violence](#). *Journal of Family Violence*, 28(2), 179–189. DOI:10.1007/s10896-012-9473-x

Increasing evidence indicates that children are at risk of homicide in the context of domestic violence. Using a retrospective case analysis of 84 domestic homicide cases, this study sought to identify the unique factors that place a child at risk of homicide. Three groups of domestic homicide cases in which there were no children in the home (No Child in the Home, n=44), a child was targeted (Child Target, n=13), and a child was present, but not targeted (No Child Target, n=27) were compared. Overall, there were no significant differences amongst cases involving children (targeted or not) on major factors except for the higher number of agencies involved with couples with children. Few cases had risk assessment or safety plans completed. Despite the study limitations, the findings speak to the need for professionals to assess child risk and include children in safety planning in all cases of domestic violence.

Holmes, M. R. (2013). Aggressive behavior of children exposed to intimate partner violence: An examination of maternal mental health, maternal warmth and child maltreatment. *Child Abuse & Neglect*, 37(8), 520–530. DOI:10.1016/j.chiabu.2012.12.006

Over 4.5 million children each year are exposed to intimate partner violence (IPV). Furthermore, IPV rarely occurs without other forms of violence and aggression in the home. IPV is associated with mental health and parenting problems in mothers, and children experience a wide variety of short-term social adjustment and emotional

difficulties, including behavioral problems. The current study investigated the influence of IPV exposure on children's aggressive behavior, and tested if this relation was mediated by poor maternal mental health, and, in turn, by maternal warmth and child maltreatment, and moderated by children's age and gender. Study findings highlight the indirect consequences of IPV in the home on children's aggressive behavior. Secondary data analysis using structural equation modeling (SEM) was conducted with the National Survey of Child and Adolescent Well-Being (NSCAW). Children were between the ages of 3–8 ($n = 1,161$). Mothers reported past year frequency of physical assault by their partner, frequency of child psychological and physical abuse, maternal mental health, and children's aggressive behavior problems. Maternal warmth was measured by observation. IPV was significantly related to poor maternal mental health. Poor maternal mental health was associated with more child aggressive behavior, lower maternal warmth, and more frequent child physical and psychological abuse. Psychological abuse and low maternal warmth were directly related to more aggressive behavior while IPV exposure and physical abuse were not directly associated with aggressive behavior. Neither age nor gender moderated the modeled paths. Expanding knowledge about child outcomes is especially critical for children who were involved in investigations of child maltreatment by child protective services (CPS) in order to identify relevant risk factors that can lead to interventions. The results identified maternal mental health as an important variable in mediating the relationship between IPV exposure and aggressive behavior. One implication is for multicomponent family interventions that could be tailored toward helping the mother cope with such mental health issues while also addressing deficits in children's social behavior development.

Nicklas, E., & Mackenzie, M. J. (2013). Intimate partner violence and risk for child neglect during early childhood in a community sample of fragile families. *Journal of Family Violence*, 28(1), 17–29. DOI:10.1007/s10896-012-9491-8

The current study explores the relationship between child neglect and intimate partner violence (IPV) in a longitudinal community sample of 1,740 families with young children, with a special focus on the association between specific typologies of both neglect behaviors and IPV. We focused on families followed across early childhood, because infants and toddlers are at the greatest risk of exposure to neglect (the most prevalent type of child maltreatment), and this period spanning the transition to parenthood presents heightened risk for IPV. We found evidence that coercive IPV is an important driver of the connections between IPV and subsequent neglect through affecting the mother's well-being and ability to provide basic care and nurturance. Implications for intervention and future work addressing definitions and pathways to neglect are discussed.

Voisin, D. R., & Elsaesser, C. M. (2013). [Pathways from polyvictimization to youth problem behaviors: The critical role of school engagement](#). *International Journal of Higher Education*, 2(4), 15–30. DOI:10.5430/ijhe.v2n4p15

School engagement has a powerful influence on youth development. Youth who fail in school are at significant risk for a host of subsequent psychosocial outcomes, including substance use, risky sexual behaviors, gang involvement, and increased contact with juvenile justice authorities. Although school engagement is an important determinant of key developmental outcomes, few studies have adequately considered how polyvictimization may not only compromise school engagement but also negatively impact psychological functioning, lead to negative peer affiliations with gangs, thereby subsequently increasing the risk for drug use and subsequent juvenile justice involvement. In addition, no studies have considered how key factors such as age, gender, race/ethnicity and parenting styles may moderate those risk relationships. Based on the

existing empirical literature and several unifying theories, we present a conceptual model that documents pathways from poly-victimization to multiple youth problem behaviors, with school engagement as a key mediator. This review is intended to help guide future research in these areas. We conclude with recommendations for school-based interventions and future research based on this innovative model.

Jaffe, P. G., Campbell, M., Hamilton, L. H., & Juodis, M. (2012). [Children in danger of domestic homicide](#). *Child Abuse & Neglect*, 36(1), 71-74.
DOI:10.1016/j.chiabu.2011.06.008

Child maltreatment and domestic violence were once considered separate topics both in research and in clinical practice. This brief communication attempts to shed light on the lethal risk posed to children living with domestic violence. It is hoped that the acknowledgment of these risks will better inform research and clinical practice to protect children in these circumstances.

MacDonell, K. W. (2012). The combined and independent impact of witnessed intimate partner violence and child maltreatment. *Partner Abuse*, 3(3), 358-378.
DOI:10.1891/1946-6560.3.3.358

Intimate partner violence (IPV) is a pervasive issue, generating startling facts regarding its detrimental societal effects. There is also considerable overlap between witnessing IPV and experiencing childhood maltreatment. The current article reviews the state of the knowledge about the short- and long-term impact of witnessing IPV as well as a review of the literature exploring the unique impact of experiencing both IPV and maltreatment compared to witnessing only. Seventy-three articles were included in the present review. Negative outcomes in youth have been reported in both the internalizing and externalizing domains of functioning, in health and cognitive domains, as well as in youth's relationships with family, peers, and romantic partners. The current literature

suggests that these negative impacts persist into adulthood. Mixed results, whether there are significant additive effects of witnessing IPV and child maltreatment compared to witnessing IPV only, were found in youth and again into adulthood. Policy implications and recommendations for future research are suggested.

Chan, K. (2011). [Children exposed to child maltreatment and intimate partner violence: A study of co-occurrence among Hong Kong Chinese families](#). *Child Abuse & Neglect*, 35(7), 532–542. DOI:10.1016/j.chiabu.2011.03.008

This study assessed the co-occurrence of child maltreatment and intimate partner violence (IPV) and examined the association between them. The cross-sectional study recruited a population-based sample of 1,094 children aged 12–17 years in Hong Kong. Structured questionnaires were used to collect data from the children. The prevalence of occurrence of child abuse and neglect by parents and exposure to IPV in both the past year and lifetime was examined, and their correlates were assessed using univariate and multivariate logistic regression. The results show that 26% and 14.6% of child participants had been exposed to IPV physical assault, and 44.4% and 22.6% had been subjected to a parent's corporal punishment or to physical maltreatment from a parent in their lifetime and the year preceding the study, respectively. Among those families characterized by IPV, 54.4% and 46.5% were involved in child physical maltreatment over the child's lifetime and in the preceding year, respectively. Multivariate logistic regression analyses revealed that children exposed to IPV were at higher risk of being victims of neglect, corporal punishment, and physical maltreatment or severe physical maltreatment by their parents than children who were not exposed to IPV, even when child and parent demographic factors were controlled for.

Finkelhor, D., Turner, H., Hamby, S., & Ormrod, R. (2011, October). [Polyvictimization: Children's exposure to multiple types of violence, crime, and abuse](#). *OJJDP: Juvenile Justice Bulletin*. U. S. Department of Justice.

Hamby, S., Finkelhor, D., Turner, H., & Ormrod, R. (2011). [Children's exposure to intimate partner violence and other family violence](#). *OJJDP: Juvenile Justice Bulletin*. U. S. Department of Justice.

McDonald, R., Jouriles, E. N., Rosenfield, D., & Corbitt-Shindler, D. (2011). [Predictors of domestically violent men's aggression toward children: A prospective study](#). *Journal of Family Psychology*, 25(1), 11-18. DOI:10.1037/a0022449

This research examines predictors of domestically violent men's aggression toward children after the children and their mothers sought help at an emergency shelter for domestic violence victims. Participants were 62 women who had sought refuge at a domestic violence shelter and who had at least one child between 4 and 9 years old. During their shelter stay, women provided data on partner– child aggression that occurred before shelter entry. After leaving the shelter, they also provided data on postshelter partner–mother intimate partner violence (IPV), children's postshelter contacts with their mothers' partners, and postshelter partner– child aggression on 5 occasions after their shelter departure (4, 8, 12, 16, and 20 months postshelter). Consistent with our hypotheses, the level of partner– child aggression before the family entered the shelter, the level of partner–mother IPV after shelter departure, and the frequency of children's contacts with the partners after shelter departure each predicted postshelter partner– child aggression. Clinical and policy implications are discussed.

Sousa, C., Herrenkohl, T. I., Moylan, C. A., Tajima, E. A., Klika, J. B., Herrenkohl, R. C., & Russo, M. J. (2011). [Longitudinal study on the effects of child abuse and children's exposure to domestic violence, parent-child attachments, and antisocial behavior in adolescence](#). *Journal of Interpersonal Violence*, 26(1), 111-136. DOI:10.1177/0886260510362883

This study examined the unique and combined effects of child abuse and children's exposure to domestic violence on later attachment to parents and antisocial behavior during adolescence. Analyses also investigated whether the interaction of exposure and

low attachment predicted youth outcomes. Findings suggest that, while youth dually exposed to abuse and domestic violence were less attached to parents in adolescence than those who were not exposed, those who were abused only, and those who were exposed only to domestic violence, the relationship between exposure types and youth outcomes did not differ by level of attachment to parents. However, stronger bonds of attachment to parents in adolescence did appear to predict a lower risk of antisocial behavior independent of exposure status. Preventing child abuse and children's exposure to domestic violence could lessen the risk of antisocial behavior during adolescence, as could strengthening parent-child attachments in adolescence. However, strengthening attachments between parents and children after exposure may not be sufficient to counter the negative impact of earlier violence trauma in children.

Goddard, C., & Bedi, G. (2010). Intimate partner violence and child abuse: A child-centred perspective. *Child Abuse Review*, 19(1), 5-20. DOI:10.1002/car.1084

A substantial body of literature assessing the impact of intimate partner violence on children and associations between intimate partner violence and child abuse now exists. Central to knowledge about these areas of practice and research is a robust, child-centred consideration of some of the more challenging conceptual issues they give rise to. In this paper, we aim to stimulate debate by presenting a critical, child-centred perspective on the intersection between intimate partner violence and child abuse. Initially, we provide the context for the review by presenting a brief overview of the literature. We then consider three central issues from a child-centred perspective. We discuss the language used to describe children forced to live with intimate partner violence, and the importance of hearing children's perspectives on their experiences of such conflict. Finally, we consider similarities and differences between the intimate partner violence and child abuse fields from a child-centred viewpoint. We conclude that increasing conceptual clarity around these issues will enhance research in the field, and

ultimately improve interventions designed to protect children forced to live with intimate partner violence. Copyright © 2009 John Wiley & Sons, Ltd.

Hamby, S., Finkelhor, D., Turner, H., & Ormrod, R. (2010). [The overlap of witnessing partner violence with child maltreatment and other victimizations in a nationally representative survey of youth](#). *Child Abuse & Neglect*, 34(10), 734–741.
DOI:10.1016/j.chiabu.2010.03.001

Objective: To examine the co-occurrence of witnessing partner violence with child maltreatment and other forms of victimization. Data are from the National Survey of Children's Exposure to Violence (NatSCEV), a nationally representative telephone survey of the victimization experiences of 4,549 youth aged 0–17. Witnessing partner violence (WPV) is very closely associated with several forms of maltreatment and exposure to other forms of family violence in this sample, with adjusted OR ranging from 3.88 to 9.15. WPV is also significantly associated with a wide variety of other forms of victimization, with OR ranging from 1.43 to 7.32. More than 1/3 (33.9%) of youth who witnessed partner violence had also been maltreated in the past year, compared with 8.6% of non-witnesses. For lifetime data, more than half (56.8%) of WPV youth had also been maltreated. Neglect and custodial interference were most closely associated with WPV. These data support the poly-victimization model, indicating that many youth experience multiple forms of victimization. They also indicate that the various forms of family violence are especially closely linked. Practice implications: These results provide new urgency to calls to better integrate services to adult and child victims of family violence. For example, screening to identify the needs of child witnesses could be done in domestic violence shelters, and screening to identify the needs of adult victims could be done in child protective service settings.

Moylan, C. A., Herrenkohl, T. I., Sousa, C., Tajima, E. A., Herrenkohl, R. C., & Russo, M. J. (2010). [The effects of child abuse and exposure to domestic violence on adolescent internalizing and externalizing behavior problems](#). *Journal of Family Violence*, 25(1), 53-63. DOI:10.1007/s10896-009-9269-9

This study examines the effects of child abuse and domestic violence exposure in childhood on adolescent internalizing and externalizing behaviors. Data for this analysis are from the Lehigh Longitudinal Study, a prospective study of 457 youth addressing outcomes of family violence and resilience in individuals and families. Results show that child abuse, domestic violence, and both in combination (i.e., dual exposure) increase a child's risk for internalizing and externalizing outcomes in adolescence. When accounting for risk factors associated with additional stressors in the family and surrounding environment, only those children with dual exposure had an elevated risk of the tested outcomes compared to non-exposed youth. However, while there were some observable differences in the prediction of outcomes for children with dual exposure compared to those with single exposure (i.e., abuse only or exposure to domestic violence only), these differences were not statistically significant. Analyses showed that the effects of exposure for boys and girls are statistically comparable.

Murphy, R. A. (2010). Multi-system responses in the context of child maltreatment and intimate partner violence. *Child Abuse & Neglect*, 34(8), 555-557.
DOI:10.1016/j.chiabu.2007.07.013

Thackeray, J. D., Scribano, P. V., & Rhoda, D. (2010). Domestic violence assessments in the child advocacy center. *Child Abuse & Neglect*, 34(3), 172-182.
DOI:10.1016/j.chiabu.2009.10.002

This study was designed to identify the frequency, methods, and practices of universal assessments for domestic violence (DV) within child advocacy centers (CACs) and determine which factors are associated with CACs that conduct universal DV assessments. The study design was a cross-sectional, web-based survey distributed to

executive directors of National Children's Alliance accredited or accreditation-eligible CACs. Responses were received from 323 of 376 eligible CACs (86%). Twenty-nine percent of CAC directors report familiarity with current DV recommendations and 29% require annual education for staff regarding DV. Twenty-nine percent of CACs conduct "universal assessments" (defined as a CAC that assesses female caregivers for DV more than 75% of the time). The majority of CACs use face-to-face interviews to conduct assessments, often with children, family or friends present. The presence of on-site DV resources (OR = 2.85, CI 1.25–6.50) and an annual DV educational requirement (OR = 2.88, CI 1.31–6.32) are associated with assessment of female caregivers. The presence of on-site DV resources (OR = 3.97, CI 2.21–7.14) is associated with universal assessments. Many CAC directors are not aware of current DV recommendations and do not require annual DV training for staff. Less than one-third of CACs practice universal assessments and those that do often conduct DV assessments with methods and environments shown to be less comforting for the patient and less effective in victim identification. CACs are more likely to assess female caregivers if they have co-located DV resources and they require DV training of their staff. CACs are more likely to universally screen for DV if they have co-located DV resources. The presence of DV in the home has significant potential to negatively impact a child's physical and mental health as well as the ability of the caregiver to adequately protect the child. Current practice in CACs suggests a knowledge gap in this area and this study identifies an opportunity to improve the services offered to these high-risk families.

Casanueva, C., Martin, S. L., & Runyan, D. K. (2009). Repeated reports for child maltreatment among intimate partner violence victims: Findings from the National Survey of Child and Adolescent Well-Being. *Child Abuse & Neglect*, 33(2), 84–93. DOI:10.1016/j.chiabu.2007.04.017

Objectives: To determine the prevalence of intimate partner violence (defined as any physical violence during the last 12 months or previously) among mothers who maltreat

their children, and to examine whether mothers' experiences of intimate partner violence (IPV) are associated with repeated reports (rereports) of children to Child Protective Services (CPS) during the following 18 months. Data for the analyses were from the National Survey of Child and Adolescent Well-Being (NSCAW), a national probability study of children investigated for child maltreatment. The sample of 5,501 children (ages 0–14) was randomly selected from the families who entered the US child welfare system between October 1999 and December 2000. The analysis sample was restricted to 1,236 families in which caregivers were: (1) the alleged perpetrators of the child maltreatment at baseline (independently of substantiation status) and (2) the biological mothers ($n = 1,212$ or 98.6%), adoptive mothers ($n = 17$ or 1%), or stepmothers ($n = 7$ or 0.3%) of children not placed in out-of-home care. Children of mothers physically abused by an intimate partner during the last 12 months or previously at the intake interview (44%) were twice as likely as children of mothers who had not experienced such violence to be rereported to CPS (29% vs. 14%, Odds Ratio = 2.0, 95% Confidence Interval = 1.1–3.4). Rereports occurred almost twice as quickly for children of mothers who experienced IPV compared to children of mothers who had not experienced IPV (Hazard Ratio = 1.9, 95% Confidence Interval = 1.1–3.0). The higher risk and speedier rereports of child maltreatment associated with intimate partner violence highlights the need for universal assessment and provision of services for IPV among families that are investigated by CPS.

Taylor, C. A., Guterman, N. B., Lee, S. J., & Rathouz, P. J. (2009). [Intimate partner violence, maternal stress, nativity, and risk for maternal maltreatment of young children.](#) *American Journal of Public Health*, 99(1), 175–183. DOI:10.2105/AJPH.2007.126722

We examined the associations of intimate partner violence (IPV) and maternal risk factors with maternal child maltreatment risk within a diverse sample of mothers. We derived the study sample ($N = 2508$) from the Fragile Families and Child Well-Being Study. We conducted regression analyses to examine associations between IPV, parenting stress, major depression, key covariates, and 4 proxy variables for maternal child

maltreatment. Mothers reported an average of 25 acts of psychological aggression and 17 acts of physical aggression against their 3-year-old children in the year before the study, 11% reported some act of neglect toward their children during the same period, and 55% had spanked their children during the previous month. About 40% of mothers had experienced IPV by their current partner. IPV and maternal parenting stress were both consistent risk factors for all 4 maltreatment proxy variables. Although foreign-born mothers reported fewer incidents of child maltreatment, the IPV relative risk for child maltreatment was greater for foreign-born than for US-born mothers. Further integration of IPV and child maltreatment prevention and intervention efforts is warranted; such efforts must carefully balance the needs of adult and child victims.

Banks, D., Dutch, N., & Wang, K. (2008). Collaborative efforts to improve system response to families who are experiencing child maltreatment and domestic violence. *Journal of Interpersonal Violence, 23*(7), 876–902. DOI:10.1177/08862605083146

The *Greenbook* demonstration initiative provided federal funding and other support to six communities to establish collaborations to plan and implement policy and practice changes in systems that serve families who are experiencing domestic violence and child maltreatment or child exposure to domestic violence. The demonstration sites established and organized collaborative groups in accordance with the *Greenbook* foundational principles and recommendations, including representation from multiple levels within the primary partner systems and other organizations, as well as the community. The sites struggled with how to engage consumers of the primary systems, however, and devoted a great deal of time to understanding and addressing organizational differences among the partners. Other salient collaborative influences included leadership, resources, trust, and commitment. The stakeholders noted that the collaborative relationships required a great deal of work but were ultimately one of the main successes of the initiative.

Bourassa, C., Lavergne, C., Damant, D., Lessard, G., & Turcotte, P. (2008). Child welfare workers' practice in cases involving domestic violence. *Child Abuse Review*, 17(3), 174–190. DOI:10.1002/car.1015

This paper reports the findings of an exploratory and qualitative study of child welfare workers' practice in cases involving domestic violence. The research aimed to focus on child welfare workers' interventions with families experiencing domestic violence, elements influencing the child welfare workers' decisions, and the factors facilitating and creating obstacles for intervention. An analysis of the qualitative data showed that child welfare workers have different ways of intervening in cases involving domestic violence. Also, the interventions were especially centred on women victims of violence and they were held responsible for protecting their children. Finally, the dilemmas and difficulties which child welfare workers face in these cases are discussed.

Campbell, R., Greeson, M. R., Bybee, D., & Raja, S. (2008). The co-occurrence of childhood sexual abuse, adult sexual assault, intimate partner violence, and sexual harassment: A mediational model of posttraumatic stress disorder and physical health outcomes. *Journal of Consulting and Clinical Psychology*, 76(2), 194–207. DOI:10.1037/0022006X.76.2.194

This study examined the co-occurrence of childhood sexual abuse, adult sexual assault, intimate partner violence, and sexual harassment in a predominantly African American sample of 268 female veterans, randomly sampled from an urban Veterans Affairs hospital women's clinic. A combination of hierarchical and iterative cluster analysis was used to identify 4 patterns of women's lifetime experiences of violence co-occurrence. The 1st cluster experienced relatively low levels of all 4 forms of violence; the 2nd group, high levels of all 4 forms; the 3rd, sexual revictimization across the lifespan with adult sexual harassment; and the 4th, high intimate partner violence with sexual harassment. This cluster solution was validated in a theoretically driven model that examined the role of posttraumatic stress disorder (PTSD) as a mediator of physical health symptomatology. Structural equation modeling analyses revealed that PTSD fully

mediated the relationship between violence and physical health symptomatology. Consistent with a bio-psycho-immunologic theoretical model, PTSD levels more strongly predicted pain-related physical health symptoms compared to nonpain health problems. Implications for clinical interventions to prevent PTSD and to screen women for histories of violence in health care settings are discussed.

Herrenkohl, T. I., Sousa, C., Tajima, E. A., Herrenkohl, R. C., & Moylan, C. A. (2008). Intersection of child abuse and children's exposure to domestic violence. *Trauma, Violence, & Abuse*, 9(2), 84–99. DOI:10.1177/1524838008314797

This review addresses research on the overlap in physical child abuse and domestic violence, the prediction of child outcomes, and resilience in children exposed to family violence. The authors explore current findings on the intersection of physical child abuse and domestic violence within the context of other risk factors, including community violence and related family and environmental stressors. Evidence from the studies reviewed suggests considerable overlap, compounding effects, and possible gender differences in outcomes of violence exposure. The data indicate a need to apply a broad conceptualization of risk to the study of family violence and its effects on children. Further testing of competing theoretical models will advance understanding of the pathways through which exposure leads to later problems in youth, as well as protective factors and processes through which resilience unfolds.

Holt, S., Buckley, H., & Whelan, S. (2008). The impact of exposure to domestic violence on children and young people: A review of the literature. *Child Abuse & Neglect*, 32(8), 797–810. DOI:10.1016/j.chiabu.2008.02.004

This article reviews the literature concerning the impact of exposure to domestic violence on the health and developmental well-being of children and young people. Impact is explored across four separate yet inter-related domains (domestic violence exposure

and child abuse; impact on parental capacity; impact on child and adolescent development; and exposure to additional adversities), with potential outcomes and key messages concerning best practice responses to children's needs highlighted. Method: A comprehensive search of identified databases was conducted within an 11-year framework (1995–2006). This yielded a vast literature which was selectively organized and analyzed according to the four domains identified above. Results: This review finds that children and adolescents living with domestic violence are at increased risk of experiencing emotional, physical and sexual abuse, of developing emotional and behavioral problems and of increased exposure to the presence of other adversities in their lives. It also highlights a range of protective factors that can mitigate against this impact, in particular a strong relationship with and attachment to a caring adult, usually the mother. Conclusion: Children and young people may be significantly affected by living with domestic violence, and impact can endure even after measures have been taken to secure their safety. It also concludes that there is rarely a direct causal pathway leading to a particular outcome and that children are active in constructing their own social world. Implications for interventions suggest that timely, appropriate and individually tailored responses need to build on the resilient blocks in the child's life. Practice implications: This study illustrate the links between exposure to domestic violence, various forms of child abuse and other related adversities, concluding that such exposure may have a differential yet potentially deleterious impact for children and young people. From a resilient perspective this review also highlights range of protective factors that influence the extent of the impact of exposure and the subsequent outcomes for the child. This review advocates for a holistic and child-centered approach to service delivery, derived from an informed assessment, designed to capture a picture of the individual child's experience, and responsive to their individual needs.

Jouriles, E. N., McDonald, R., Smith Slep, A. M., Heyman, R. E., & Garrido, E. (2008). Child abuse in the context of domestic violence: Prevalence, explanations, and practice implications. *Violence and Victims, 23*(2), 221–235. DOI:10.1891/0886-6708.23.2.221

This article addresses the following questions: (a) How common is child abuse among domestically violent families? (b) Are there specific patterns of child abuse among domestically violent families? (c) What may explain occurrences of child abuse in domestically violent families? (d) How might domestic violence affect treatment for child abuse? We review research on child abuse in the context of domestic violence. We discuss implications of this research for service-delivery programs for domestically violent families.

Kaslow, N. J., & Thompson, M. P. (2008). Associations of child maltreatment and intimate partner violence with psychological adjustment among low SES, African American children. *Child Abuse & Neglect, 32*(9), 888–896. DOI:10.1016/j.chiabu.2007.09.012

This study assessed the unique and interactive effects of child maltreatment and mothers' physical intimate partner violence (IPV) status on low-SES African American children's psychological functioning. Mothers were recruited from a large, inner-city hospital, and those who met eligibility criteria were asked to complete a lengthy face-to-face interview while their child was assessed separately but concurrently. The sample included 152 mother-child dyads. The children's mean age was 10 years, and 45% were male. Multivariate linear regression analyses tested the main and interactive effects of child maltreatment and mothers' exposure to physical IPV on children's psychological functioning (internalizing and externalizing symptoms, traumatic stress symptoms), while controlling for covariates. Children who experienced child maltreatment and children whose mothers experienced physical IPV had higher levels of psychological distress than their respective counterparts. Post hoc analysis of significant interaction effects indicated that child maltreatment was associated with internalizing and externalizing problems

and traumatic stress only when mothers reported higher levels of physical IPV. This finding did not hold true for youth whose mothers did not acknowledge elevated rates of physical IPV. African American youth from low-SES backgrounds who are maltreated and whose mothers experience physical IPV are at particularly high risk for psychological distress. Targeted prevention and intervention programs are needed for these poly-victimized youth.

Bourassa, C. (2007). Co-occurrence of interparental violence and child physical abuse and its effect on the adolescents' behavior. *Journal of Family Violence*, 22(8), 691-701. DOI:10.1007/s10896-007-9117-8

This study analyzed the impact of the co-occurrence of parental and interparental violence on the behavior of adolescents. Results reveal that the co-occurrence of interparental violence and child physical abuse has a significantly greater negative impact on behavior than does exposure to interparental violence only. Moreover, participants, who are both abused and exposed to interparental violence, exhibit internalized and externalized symptoms falling within the clinical range more frequently. Exposure exclusively to interparental violence also has definite impact; for example, teens who are only exposed to interparental violence exhibit internalized and externalized symptoms more frequently than do those who have been neither subject to physical abuse from a parent nor exposed to interparental violence. Implications of the findings are discussed.

Dixon, L., Hamilton-Giachritsis, C., Browne, K., & Ostapuik, E. (2007). The co-occurrence of child and intimate partner maltreatment in the family: Characteristics of the violent perpetrators. *Journal of Family Violence*, 22(8), 675-689.
DOI:10.1007/s10896-007-9115-x

This study considers the characteristics associated with mothers and fathers who maltreat their child and each other in comparison to parents who only maltreat their child. One hundred and sixty-two parents who had allegations of child maltreatment made against them were considered. The sample consisted of 43 fathers (Paternal Family—PF) and 23 mothers (Maternal Family—MF) who perpetrated both *partner and child maltreatment*, together with 23 fathers (Paternal Child—PC) and 26 mothers (Maternal Child—MC) who perpetrated *child maltreatment only*. In addition, 2 fathers (Paternal Victim—PV) and 23 mothers (Maternal Victim—MV) were *victims of intimate partner maltreatment and perpetrators of child maltreatment* and 7 fathers (Paternal Non-abusive Carer—PNC) and 15 mothers (Maternal Non-abusive Carer—MNC) *did not maltreat the child but lived with an individual who did*. Within their family unit, 40.7% of parents perpetrated both intimate partner and child maltreatment. However, fathers were significantly more likely to maltreat both their partner and child than mothers and mothers were significantly more likely to be victims of intimate partner violence than fathers. PF fathers conducted the highest amount of physical and/or sexual child maltreatment while MC and MV mothers perpetrated the highest amount of child neglect. Few significant differences between mothers were found. PF fathers had significantly more factors associated with development of a criminogenic lifestyle than PC fathers. Marked sex differences were demonstrated with PF fathers demonstrating significantly more antisocial characteristics, less mental health problems and fewer feelings of isolation than MF mothers. MC mothers had significantly more childhood abuse, mental health problems, parenting risk factors and were significantly more likely to be biologically related to the child than PC fathers. This study suggests that violent families should be assessed and treated in a holistic manner, considering the effects of partner

violence upon all family members, rather than exclusively intervening with the violent man.

Knickerbocker, L., Heyman, R. E., Smith Slep, A. M., Jouriles, E. N., & McDonald, R. (2007). Co-occurrence of child and partner maltreatment. *European Psychologist*, 12(1), 36-44. DOI:10.1027/1016-9040.12.1.36

This paper addresses issues in the literature regarding the co-occurrence of partner and child physical maltreatment in the United States and in Europe. Design issues including operationalizations, representativeness of samples, data collection methods, and reference periods are discussed in the context of prevalence studies. Next, possible explanations for the pervasiveness of co-occurring maltreatment are explored with an emphasis on theoretical models and mechanisms of co-occurrence. Finally, we offer assessment implications for clinicians and agencies dealing with partner and child maltreatment.

Landsman, M. J., & Hartley, C. C. (2007). Attributing responsibility for child maltreatment when domestic violence is present. *Child Abuse & Neglect*, 31(4), 445-461. DOI:10.1016/j.chiabu.2006.08.008

The purpose of this study was to examine factors that influence how child welfare workers attribute responsibility for child maltreatment and child safety in cases involving domestic violence. The study used a factorial survey approach, combining elements of survey research with an experimental design. Case vignettes were constructed by randomly assigning characteristics to vignettes believed to be related to assessments about responsibility for child maltreatment. Public child welfare workers were systematically sampled and asked to rate vignettes on male and female caregivers' responsibility for child maltreatment and concerns for safety. The presence of domestic violence significantly affected workers' assessments of the attribution of responsibility

and concern for child safety, more so than variables related to child maltreatment. Responsibility for exposing a child to domestic violence differed for males and females, with more factors explaining female responsibility. Substance use by either caregiver was significant in attributing responsibility for physical harm, not watching the child closely enough, and concern for child safety, but not for exposure to domestic violence. Domestic violence appeared to heighten workers' assessments of responsibility for child maltreatment and concerns about child safety, taking precedence over the characteristics of the child maltreatment itself. Battering tends to work against the domestic violence victim in terms of the attribution of responsibility. A greater number of factors affect female responsibility for exposing a child to domestic violence than male responsibility, even though in every case the male was the designated domestic violence batterer.

Zolotor, A. J., Theodore, A. D., Coyne-Beasley, T., & Runyan, D. K. (2007). Intimate partner violence and child maltreatment: Overlapping risk. *Brief Treatment and Crisis Intervention, 7*(4), 305–321. DOI:10.1093/brief-treatment/mhm021

Studies of intimate partner violence (IPV) and child maltreatment (CM) have examined the association between IPV and physical abuse. Children in homes with IPV may also experience other forms of CM. The objective is to determine the prevalence of CM in homes with and without IPV using cross-sectional analysis of survey data of mothers with partners ($n = 1,232$). The Conflict Tactics Scale and Parent Child Conflict Tactics Scale were used to determine IPV, physical, psychological, sexual abuse, and neglect. Mothers reporting IPV (either man to woman or woman to man) report 2.57 times the odds of physical abuse compared to those not reporting IPV (95% CI 1.11–5.97). Moms reporting IPV report 2.04 times the odds of neglect. Those reporting IPV report 9.58 times the odds of psychological abuse (95% CI 4.27–21.49). Mothers reporting IPV report 4.90 times the odds of sexual abuse (95% CI 0.43–55.67). IPV is associated with all forms of CM in this sample.

Providers of IPV services for women with children should also assess for all forms of child maltreatment.

Jaffe, P. G., & Juodis, M. (2006). Children as victims and witnesses of domestic homicide: Lessons learned from domestic violence death review committees. *Juvenile and Family Court Journal*, 57(3), 13-28. DOI:10.1111/j.1755-6988.2006.tb00125.x

Domestic Violence Death Review Committees (DVDRCs) are interdisciplinary teams dedicated to examining domestic homicide and recommending how to prevent future tragedies by comprehensively examining individual cases. This article summarizes the findings of 15 DVDRCs concerning children as victims and witnesses. The findings reflect that an alarming number of children are victimized by domestic violence. Themes in the recommendations are grouped in relationship to: (1) training and policy development; (2) resource development; (3) coordination of services; (4) legislative reform; and (5) prevention programs. The recommendations are critical for criminal and civil courts as well as enhancing collaboration between the justice system and community partners in preventing domestic homicide.

Kellerher, K., Gardner, W., Coben, J., Barth, R., Edleson, J., & Hanen, A. (2006). [Co-occurring intimate partner violence and child maltreatment: Local policies/practices and relationships to child placement, family services and residence](#). U.S. Department of Justice.

Renner, L. M., & Slack, K. S. (2006). Intimate partner violence and child maltreatment: Understanding intra- and intergenerational connections. *Child Abuse & Neglect*, 30(6), 599-617. DOI:10.1016/j.chiabu.2005.12.005

The purpose of this study is to assess the extent to which intimate partner violence and different forms of child maltreatment occur within and across childhood and adulthood for a high-risk group of women. Low-income adult women were interviewed,

retrospectively, regarding their experiences with intimate partner violence and child maltreatment in childhood and adulthood, and intra- and intergenerational relationships between multiple forms of family violence were identified. Analyses demonstrated weak to moderate associations between various forms of violence within generations. Only weak support was found for the transmission of violence hypothesis that maltreated children are more likely to grow up to maltreat their own children. Stronger support was found for the theory of learned helplessness, whereby children maltreated or witness to violence during childhood are more likely to be victimized as an adult. The results from this study suggest that interventions with children who are identified for one form of victimization should be assessed for other forms of victimization, and interventions should also address learned behaviors or beliefs associated with continued or future victimization.

Rivett, M., & Kelly, S. (2006). 'From awareness to practice': Children, domestic violence and child welfare. *Child Abuse Review*, 15(4), 224–242. DOI:10.1002/car.945

This paper traces the development of social care practice in relation to child witnesses of domestic violence. It suggests that this development has been dominated by subsuming the needs of these children into a child protection process. The paper outlines how this has led to significant (but often unclear) legal and policy initiatives which have failed, as yet, to be translated into practice. The paper argues that there are a number of important reasons why child witnesses of domestic violence should not always be assumed to need the response of a child protection system and that a future practice, legal and policy response should be based on a wider understanding of their needs.

Coohey, C. (2004). Battered mothers who physically abuse their children. *Journal of Interpersonal Violence*, 19(8), 943–952. DOI:10.1177/0886260504266886

The purpose of this study is to understand why some battered mothers physically abuse their children. Mothers who were battered and physically abused their children (the co-occurrence group) were compared with mothers who were neither battered nor physically abused, who were only battered, and who only abused (N = 184). The mothers in the co-occurrence group were more likely than the mothers who did not physically abuse their children to have been severely assaulted by their own mothers as children, have had poorer quality relationships with and receive less support from their mothers, have more stressors, and have known their partners for less time. These differences were not found between the mothers in the co-occurrence and abuse-only groups. In the multivariate analysis, having been assaulted by one's own mother as a child—not being battered by one's partner—was the most potent predictor for whether a mother physically abused her child.

Dong, M., Anda, R. F., Felitti, V. J., Dube, S. R., Williamson, D. F., Thompson, T. J., Loo, C. M., & Giles, W. H. (2004). The interrelatedness of multiple forms of childhood abuse, neglect, and household dysfunction. *Child Abuse & Neglect*, 28(7), 771–784. DOI:10.1016/j.chiabu.2004.01.008

Childhood abuse and other adverse childhood experiences (ACEs) have historically been studied individually, and relatively little is known about the co-occurrence of these events. The purpose of this study is to examine the degree to which ACEs co-occur as well as the nature of their co-occurrence. We used data from 8,629 adult members of a health plan who completed a survey about 10 ACEs which included: childhood abuse (emotional, physical, and sexual), neglect (emotional and physical), witnessing domestic violence, parental marital discord, and living with substance abusing, mentally ill, or criminal household members. The bivariate relationship between each of these 10 ACEs was assessed, and multivariate linear regression models were used to describe the

interrelatedness of ACEs after adjusting for demographic factors. Two-thirds of participants reported at least one ACE; 81%–98% of respondents who had experienced one ACE reported at least one additional ACE (median: 87%). The presence of one ACE significantly increased the prevalence of having additional ACEs, elevating the adjusted odds by 2 to 17.7 times (median: 2.8). The observed number of respondents with high ACE scores was notably higher than the expected number under the assumption of independence of ACEs ($p < .0001$), confirming the statistical interrelatedness of ACEs. The study provides strong evidence that ACEs are interrelated rather than occurring independently. Therefore, collecting information about exposure to other ACEs is advisable for studies that focus on the consequences of a specific ACE. Assessment of multiple ACEs allows for the potential assessment of a graded relationship between these childhood exposures and health and social outcomes.

Edleson, J. L. (2004). Should childhood exposure to adult domestic violence be defined as child maltreatment under the law. In P. G. Jaffe, L.L. Baker, & A. Cunningham (Eds.), *Protecting children from domestic violence: Strategies for community intervention* (pp. 8-29). Guilford Press.

A growing body of research has revealed that many children are affected by exposure to adult domestic violence. Increased public attention to this issue has led at least one state to define childhood exposure to domestic violence as a form of child maltreatment and to respond to it as such. This article reviews the research on childhood exposure to domestic violence and emerging laws aimed at protecting these children. Greater caution and more creative thinking is needed as public agencies and programs attempt to develop public policy for children exposed to domestic violence. The author concludes with an argument against assuming that childhood exposure to violence is automatically a form of child maltreatment and suggests the need to modify child protection services and the expansion of primarily voluntary community-based responses to these children and their families.

Hazen, A. L., Connelly, C. D., Kelleher, K., Landsverk, J., & Barth, R. (2004). Intimate partner violence among female caregivers of children reported for child maltreatment. *Child Abuse & Neglect*, 28(3), 301–319. DOI:10.1016/j.chiabu.2003.09.016

The purpose of this study was to determine the prevalence and correlates of intimate partner violence among female caregivers of children reported to child protective services. Data were derived from the National Survey of Child and Adolescent Well-Being, a national probability study of children investigated for child abuse and neglect in the United States. Caregivers were interviewed about demographic characteristics, mental health, substance use, and physical violence by a partner. The lifetime and past year prevalence of intimate partner violence was 44.8 and 29.0%, respectively. Caregiver major depression and history of prior reports of child maltreatment were strongly associated with violence against women. The findings highlight the need for effective screening and identification of intimate partner violence in families in which child maltreatment has occurred.

Cox, C. E., Kotch, J. B., & Everson, M. D. (2003). A longitudinal study of modifying influences in the relationship between domestic violence and child maltreatment. *Journal of Family Violence*, 18(1), 5–17. DOI:10.1023/A:1021497213505

The increased risk of child maltreatment in the presence of domestic violence is well documented, but much remains unknown about factors that modify this relationship. This study investigates the roles of risk and protective factors in the relationship between domestic violence and being reported to the Department of Social Services for child maltreatment. Consistent with the literature, we find a significant overlap between domestic violence and maltreatment. Young maternal age, low education, low income, and lack of involvement in a religious community add to the risk for maltreatment associated with domestic violence. Separation between the maternal caregiver and her partner significantly reduces the risk for maltreatment when domestic violence is reported. A significant reduction in the risk for maltreatment is also found with higher

levels of support from the maternal caregiver reported by the child in the context of domestic violence.

Edleson, J. L., Mbilinyi, L. F., Beeman, S. K., & Hagemeister, A. K. (2003). How children are involved in adult domestic violence results from a four-city telephone survey. *Journal of Interpersonal Violence, 18*(1), 18–32. DOI:10.1177/0886260502238538

There is limited research available on children's involvement in incidents of adult domestic violence. This study collected direct reports on real-life events and went beyond earlier research by eliciting information on a larger array of family and contextual factors that may account for variation in children's responses. Anonymous telephone interviews with 114 battered mothers in four metropolitan areas elicited detailed information from women on their children's responses to the violence being committed against the mothers. One quarter of the mothers reported that their children were physically involved in the events. In addition, mothers with less stable financial, social, and living situations at the time of the interview reported their children to have intervened more during the past violent incidents. The article concludes with recommendations for a greater emphasis on careful assessment of children's involvement in domestic violence incidents and on assisting mothers to achieve economic stability as well as safety.

Folsom, W. S., Christensen, M. L., Avery, L., & Moore, C. (2003). The co-occurrence of child abuse and domestic violence: An issue of service delivery for social service professionals. *Child and Adolescent Social Work Journal, 20*(5), 375–387. DOI:10.1023/A:1026047929774

In order to add to the growing literature on intergenerational rates of family violence, data were collected from a community-based child abuse agency. The study's purpose was to compare the co-occurrence of child abuse/neglect (CAN) and domestic violence (DV), and the prevalence of CAN and parent's childhood history of abuse. Data were collected from 537 families through intake and subsequent interviews in an attempt to

determine the relationship among CAN and DV, and CAN and parent's childhood history of abuse. A chi-square analysis indicated significant relationships among these variables. Of the participants in this sample, 48.9% had experienced both CAN and DV. These results also indicated that 66.3% of participants had a childhood history of CAN and were currently experiencing issues of CAN with their own children. Logistic regression was utilized to examine whether families involved with Child Protective Services (CPS) were at higher risk for DV and/or parental childhood history of CAN. The results indicate that CPS-involved families were approximately three times as likely to have a parent reporting a childhood history of CAN but were not at significantly higher odds for DV. Implications for service delivery are discussed.

Holden, G. W. (2003). Children exposed to domestic violence and child abuse: Terminology and taxonomy. *Clinical Child and Family Psychology Review*, 6(3), 151-160. DOI:10.1023/a:1024906315255

Three definitional issues regarding children exposed to domestic violence are examined. First, the multiple ways in which a child can be exposed to violence is discussed. A taxonomy of 10 types of exposure is proposed. Nine key characteristics of domestic violence, as they relate to children and children's exposure, are then outlined. The third issue addressed concerns why children who are exposed to domestic violence can be considered victims of child maltreatment. These children, by nature of their experience in the home, are psychologically maltreated and are also at high risk for physical abuse and some risk for sexual abuse. Empirical questions concerning these definitions and taxonomies and their interrelations are discussed.

Kantor, G. K., & Little, L. (2003). Defining the boundaries of child neglect: When does domestic violence equate with parental failure to protect? *Journal of Interpersonal Violence*, 18(4), 338–355. DOI:10.1177/0886260502250834

Child maltreatment does not exist in isolation from other forms of family violence. Notably, research supports the connection between wife abuse and child maltreatment, and research on the possible consequences to children exposed to domestic violence has influenced a redefinition of child maltreatment legislation and policy. Recently, some states have considered and passed legislation making witnessing of domestic violence, per se, a form of criminal child abuse. This article explores conceptual discontinuities in official definitions of child maltreatment in relation to domestic violence failure to protect matters by drawing on data from legislative reviews, child protective services, and individual-level definitions. Implications for policy, practice, and research are addressed.

Osofsky, J. D. (2003). [Prevalence of children's exposure to domestic violence and child maltreatment: Implications for prevention and intervention](#). *Clinical Child and Family Psychology Review*, 6(3), 161–170. DOI:10.1023/A:1024958332093

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

available research, there is little doubt that vast numbers of children are exposed to domestic violence and that children's responses vary widely depending on their risk and vulnerability, as well as the structure of their environments. A developmental risk and protective factors framework will be used to integrate the information on children's exposure to violence.

Saunders, B. E. (2003). Understanding children exposed to violence: Toward an integration of overlapping fields. *Journal of Interpersonal Violence, 18*(4), 356–376. DOI:10.1177/0886260502250840

Although comprehensive studies examining a variety of violence types and potential outcomes are becoming more common, there continues to be an overreliance on relatively simple, single violence type, criterion group comparisons. Unfortunately, the sheer volume of what is known about different forms of childhood violence, the many potential outcomes that have been shown to be related to a history of violence in childhood, and emerging research on mediators and moderators makes conducting comprehensive research a significant theoretical and technical challenge. Complicating this situation is that vertically organized and isolated professional fields of study and practice have emerged around specific types of childhood violence and outcomes, making cross-fertilization of ideas and methods difficult. Suggestions concerning theory, methods, and professional integration are offered to promote more integration of the field of childhood violence.

Avery, L., Hutchinson, K. D., & Whitaker, K. (2002). Domestic violence and intergenerational rates of child sexual abuse: A case record analysis. *Child and Adolescent Social Work Journal, 19*(1), 77–90. DOI:10.1023/A:1014007507349

Using case review at a shelter for battered women and their children, this exploratory study investigated the association between physical abuse, exposure to domestic

violence and intergenerational occurrence of child sexual abuse. The charts of 570 children were reviewed in an attempt to explore the relationship between the children's experiences with sexual abuse and their nonoffending parent's own history of having been sexually abused. Results indicated that a significant percentage of nonoffending parents who reported a history of child sexual abuse also had children who were sexually abused. Additionally, we found that most (93%) of the children studied had been exposed to domestic violence, and while the base rate of sexual abuse was relatively low (11%), the rate of physical abuse of the children was substantial (41%). Logistic regression results indicated that children of sexually abused nonoffending parents may be at heightened risk for sexual abuse. Implications for treatment and intervention are discussed.

Bevan, E., & Higgins, D. J. (2002). Is domestic violence learned? The contribution of five forms of child maltreatment to men's violence and adjustment. *Journal of Family Violence*, 17(3), 223-245. DOI:10.1023/A:1016053228021

On the basis of a learning-theory approach to the intergenerational transmission of violence, researchers have focused almost exclusively on violent men's childhood experiences of physical abuse and witnessing family violence. Little consideration has been given to the coexistence of other forms of child maltreatment or the role of family dysfunction in contributing to violence. This study shows the relationships between the level of child maltreatment (physical abuse, psychological maltreatment, sexual abuse, neglect, and witnessing family violence), childhood family characteristics, current alcohol abuse, trauma symptomatology, and the level of physical and psychological spouse abuse perpetrated by 36 men with a history of perpetrating domestic violence who had attended counseling. As hypothesized, a high degree of overlap between risk factors was found. Child maltreatment, low family cohesion and adaptability, and alcohol abuse was significantly associated with frequency of physical spouse abuse and trauma symptomatology scores, but not psychological spouse abuse. Rather than physical abuse or witnessing family violence, childhood neglect uniquely predicted the level of

physical spouse abuse. Witnessing family violence (but not physical abuse) was found to have a unique association with psychological spouse abuse and trauma symptomatology. These results present a challenge to the understanding of domestic violence obtained from learning theory.

Hartley, C. C. (2002). [The co-occurrence of child maltreatment and domestic violence: Examining both neglect and child physical abuse](#). *Child Maltreatment*, 7(4), 349–358. DOI:10.1177/107755902237264

Research supports a substantial overlap between domestic violence and child maltreatment. However, few studies examine the characteristics of families in which both domestic violence and child maltreatment are present, with most studies exploring only child physical abuse. This study examined differences in demographic characteristics, parental problems, and maltreatment characteristics for families involving physical abuse or neglect and woman battering compared to families with the same type of maltreatment but no known woman battering present. Descriptive analyses found more differences between families with domestic violence and neglect and neglect-only than between co-occurring physical abuse and physical abuse-only families. Analyses looking at the association or interaction between the type of maltreatment and presence of domestic violence found a significant association between marital status, father's biological relationship to the child, mother-as-perpetrator, and age of the children with co-occurrence of domestic violence for neglect but not for physical abuse.

McGuigan, W. M., & Pratt, C. C. (2001). The predictive impact of domestic violence on three types of child maltreatment. *Child Abuse & Neglect*, 25(7), 869–883. DOI:10.1016/s0145-2134(01)00244-7

This exploratory study investigated the co-occurrence of domestic violence and three types of child maltreatment: physical child abuse, psychological child abuse, and child

neglect. A sample of 2544 at-risk mothers with first-born children participated in a home-visiting child abuse prevention program. A longitudinal design using multiple data collection methods investigated the effect of domestic violence during the first 6 months of child rearing on confirmed physical child abuse, psychological child abuse, and child neglect up to the child's first 5 years. Logistic regressions revealed significant relationships between domestic violence and physical child abuse, psychological child abuse, and child neglect. These effects were significant beyond the significant effects of known risks of maltreatment, as measured by the Kempe Family Stress Inventory (KFSI). Domestic violence occurred in 59 (38%) of the 155 cases of confirmed maltreatment. Domestic violence preceded child maltreatment in 46 (78%) of the 59 cases of co-occurrence, as indicated by independent home observations and child protective service records. The findings indicate that domestic violence during the first 6 months of child rearing is significantly related to all three types of child maltreatment up to the child's fifth year. Domestic violence and risks factors measured on the KFSI continue to contribute to all three types of maltreatment up to the child's fifth year. Prevention programs would be wise to provide services to at-risk families until the child is at least 5 years old. Addressing concurrent problems during treatment may enhance intervention.

Eckenrode, J., Ganzel, B., Henderson Jr, C. R., Smith, E., Olds, D. L., Powers, J., Cole, R., Kitzman, H., & Sidora, K. (2000). [Preventing child abuse and neglect with a program of nurse home visitation: The limiting effects of domestic violence](#). *JAMA*, 284(11), 1385–391. DOI:10.1001/jama.284.11.1385

Context: Home visitation to families with young children has been promoted as an effective way to prevent child maltreatment, but few studies have examined the conditions under which such programs meet this goal. Objective: To investigate whether the presence of domestic violence limits the effects of nurse home visitation interventions in reducing substantiated reports of child abuse and neglect. Design: Fifteen-year follow-up study of a randomized trial. Setting: Semirural community in upstate New York.

Participants: Of 400 socially disadvantaged pregnant women with no previous live births enrolled consecutively between April 1978 and September 1980, 324 mothers and their children participated in the follow-up study. Interventions: Families were randomly assigned to receive routine perinatal care (control group; $n = 184$ participated in follow-up), routine care plus nurse home visits during pregnancy only ($n = 100$), or routine care plus nurse home visits during pregnancy and through the child's second birthday ($n = 116$). Main Outcome Measures: Number of substantiated reports over the entire 15-year period involving the study child as subject regardless of the identity of the perpetrator or involving the mother as perpetrator regardless of the identity of the child abstracted from state records and analyzed by treatment group and level of domestic violence in the home as measured by the Conflict Tactics Scale. Results: Families receiving home visitation during pregnancy and infancy had significantly fewer child maltreatment reports involving the mother as perpetrator ($P = .01$) or the study child as subject ($P = .04$) than families not receiving home visitation. The number of maltreatment reports for mothers who received home visitation during pregnancy only was not different from the control group. For mothers who received visits through the child's second birthday, the treatment effect decreased as the level of domestic violence increased. Of women who reported 28 or fewer incidents of domestic violence (79% of sample), home-visited mothers had significantly fewer child maltreatment reports during the 15-year period than mothers not receiving the longer-term intervention ($P = .01$). However, this intervention did not significantly reduce child maltreatment among mothers reporting more than 28 incidents of domestic violence (21% of sample). Conclusions: The presence of domestic violence may limit the effectiveness of interventions to reduce incidence of child abuse and neglect.

McGuigan, W. M., Vuchinich, S., & Pratt, C. C. (2000). Domestic violence, parents' view of their infant, and risk for child abuse. *Journal of Family Psychology, 14*(4), 613–624. DOI:10.1037/0893-3200.14.4.613

This investigation used longitudinal data from 181 couples with firstborn infants to test the hypothesis that parents' negative cognitions about the child mediate the effect of domestic violence on risk of child abuse. Analysis of covariance showed that mothers and fathers who experienced domestic violence during the 1st year of their child's life developed a significantly more negative view of their child. Hierarchical regressions showed that the effect of domestic violence on the family's risk of child abuse was mediated by the mother's and father's negative views of the child. Intervention and prevention applications are discussed.

Tomison, A. M. (2000). [*Exploring family violence: Links between child maltreatment and domestic violence*](#). Australian Institute of Family Studies.

There is a growing body of evidence that suggests that different types of violence may occur simultaneously in the same family, and that the presence of one form of violence may be a strong predictor of the other. Yet until recently, policy, research and practice dealing with family violence has been fragmented, with the various types of violence that may occur between family members usually managed independently of one another. In this paper the relationship between child maltreatment and domestic violence is explored, in particular, the relationship between child sexual abuse and domestic violence, and the 'forgotten' victims of family violence – children who witness domestic violence. It is contended that to adequately prevent family violence requires a shift in policy and practice to ensure that the 'totality of violence' present in families is addressed. Specifically recommended are greater cross-sectoral acknowledgment of the various forms of family violence, and the development of an overarching National Framework and a National Roundtable of Violence Prevention, encompassing the prevention of all violence.

Edleson, J. L. (1999). The overlap between child maltreatment and woman battering. *Violence against Women*, 5(2), 134-154. DOI:10.1177/107780129952003

Societal responses to child maltreatment and to woman battering have developed in separate and sometimes conflicting ways. It is only in recent years that greater attention has been devoted to the possible overlap between child maltreatment and woman battering in the same families. Thirty-five studies conducted over the past 2½ decades that mentioned an overlap between child maltreatment and adult domestic violence in the same families were identified. These studies are reviewed and their strengths and weaknesses identified. The article concludes with a discussion of the implications these findings have for practice, policy, and research.

Fantuzzo, J. W., & Mohr, W. K. (1999). [Prevalence and effects of child exposure to domestic violence](#). *The Future of Children*, 9(3), 21-32. DOI:10.2307/1602779

In recent years, researchers have focused attention on children who are exposed to domestic violence. Although presently there are no scientifically credible estimates of the national prevalence of children exposed to domestic violence, existing data suggest that large numbers of American children are affected. This article discusses the limitations of current databases and describes a promising model for the collection of reliable and valid prevalence data, the Spousal Assault Replication Program, which uses data collected through collaboration between police and university researchers. Research examining the effects of childhood exposure to domestic violence is also limited by a range of methodological problems. Despite this, however, sufficient evidence from the body of studies exists to conclude that such exposure has adverse effects. The specific effects may differ depending on a host of variables, such as the children's ages, the nature and severity of the violence, the existence of other risk factors in the children's lives (for example, poverty, parental substance abuse), and whether the children are also directly physically abused. In general, childhood exposure to domestic violence can be associated with increased display of aggressive behavior, increased emotional problems

such as depression and/or anxiety, lower levels of social competence, and poorer academic functioning. A scientifically credible body of research on the prevalence and effects of childhood exposure to domestic violence is necessary to promote the development of effective interventions and to permit the proper channeling of public and private funds. This article identifies some of the steps that can be taken to build the research capacity necessary to obtain the needed data.

Findlater, J. E., & Kelly, S. (1999). Child protective services and domestic violence. *The Future of Children*, 9(3), 84–96. DOI:10.2307/1602783

Studies estimate that domestic violence is present in at least one-third of the families involved in child protective services (CPS). Yet, until recently, CPS has not directly addressed domestic violence in its handling of child abuse and neglect cases. By the same token, domestic violence programs have historically emphasized services for battered women, with limited understanding of the child safety goals of CPS. Despite these historical differences, collaborative efforts between CPS and domestic violence service programs are emerging based on a common goal of safety from violence for all family members. Innovative strategies include the use of domestic violence specialists in a variety of child protection settings for case consultation and for support to the battered women, direct referrals of battered women from domestic violence programs to family preservation services, and cross-training of CPS workers and domestic violence service providers. A survey of state CPS administrators and domestic violence coalition directors conducted for this article revealed that although there is mutual interest in greater collaboration, such efforts remain limited. New forums, such as CPS citizen review panels and community-based CPS partnerships, hold promise for further collaboration. Critical to successful strategies are supportive agency leadership, greater trust and understanding across systems, a recognition of common goals, and a willingness to change policies and practice.

Groves, B. M. (1999). [Mental health services for children who witness domestic violence](#). *The Future of Children*, 9(3), 122-132. DOI:10.2307/1602786

Exposure to domestic violence has significant negative repercussions for children's social, emotional, and academic functioning. In the past decade, mental health professionals have developed treatment programs and approaches aimed at mitigating these deleterious effects. Their efforts, however, are often hampered by difficulty identifying and gaining access to the target population because the occurrence of domestic violence remains a family secret in many households. Clinicians and researchers have published descriptions of group and individual therapy approaches for children who witness domestic violence. These approaches share several goals: promoting open discussion about children's experiences with domestic violence, helping children to deal with the emotions and consequences that follow such exposure, reducing the problematic symptoms children experience, strengthening children's relationships with their nonabusive caregivers, and helping children and their families to create and maintain relationships and living situations that are free from violence and abuse. One limitation of the literature describing these interventions is the absence of controlled outcome studies demonstrating the effects of these programs, in the short and long terms. Thus, development of such evaluative components is an important future direction for this field. Some of the other challenges that confront clinicians include working with children's families, addressing children's complex and intense emotional experiences, and determining whether children have themselves been victims of abuse or neglect (and then interfacing with child protective services).

Lemon, N. K. (1999). The legal system's response to children exposed to domestic violence. *The Future of Children*, 9(3), 67-83. DOI:10.2307/1602782

Historically, the legal system has not responded adequately, if at all, to cases involving domestic violence. In the past two decades, U.S. courts and law enforcement agencies have increasingly acknowledged the seriousness of domestic violence and have

developed responses to it. Unfortunately, the legal system has been slower to recognize the impact of domestic violence on children. This article highlights four key areas of case law in which the courts have begun, in varying degrees, to examine the effects of domestic violence on children: child custody and visitation, restraining orders, failure to protect a child from harm, and termination of parental rights. A survey of appellate cases since 1990, though not representative of all cases, shows an ongoing need for mandatory judicial training on domestic violence and its effects on children, greater clarity about how to interpret relevant laws, changes in the laws to better serve children, and the renewal of national funding for legal aid programs. Courts and law enforcement agencies in some locales have implemented innovative programs to improve their interventions with children exposed to domestic violence. These programs include coordinated court responses, child development training for police officers, multidisciplinary team approaches, and supervised visitation centers. However, few of these programs have been evaluated for overall effectiveness in improving outcomes for children. Better evaluation is needed, as is ongoing funding for the replication of successful programs nationwide. A companion article by Matthews in this journal issue examines federal laws and policies with regard to domestic violence and children, and reviews many of the state statutes on which the court decisions discussed here are based.

Matthews, M. A. (1999). The impact of federal and state laws on children exposed to domestic violence. *The Future of Children*, 9(3), 50-66. DOI:10.2307/1602781

Until recently, few federal and state laws specifically addressed the needs of children in families in which there is domestic violence. Yet, many laws, particularly in the areas of domestic violence, family law, child welfare, welfare reform, and immigration, can have profound effects on the well-being of these children. The growing understanding by legislators and policymakers of the potential harms of domestic violence to children has resulted in recent years in statutory changes, particularly at the state level. However, laws that are enacted and implemented with inadequate knowledge of the complex dynamics

of domestic violence and the unique issues battered parents and their children face may have unintended negative consequences for the children these laws are designed to protect. Collaboration across public and private social service agencies and domestic violence training for court personnel are examples of efforts that can bridge this knowledge gap and increase the likelihood that the protective intent of the laws is carried out in practice. This article analyzes current and proposed federal and state civil laws to better understand their potential impact on children affected by domestic violence. A companion article by Lemon in this journal issue examines court decisions related to these laws.

Appel, A. E., & Holden, G. W. (1998). The co-occurrence of spouse and physical child abuse: A review and appraisal. *Journal of Family Psychology*, 12(4), 578-599.
DOI:10.1037/0893-3200.12.4.578

For more than 20 years, there have been periodic reports in the research literature about the co-occurrence of spouse abuse and physical child abuse. This review compiles and evaluates those reports. Forty-two studies were found that provided some data concerning co-occurrence; 31 of the studies included sufficient detail to be used in this review. The different types of studies are classified and methodological issues are discussed. The base rate of co-occurrence found in representative community samples was about 6%. In clinical samples of either battered women or physically abused children, the percentage of overlap ranged from 20% to 100%. When a conservative definition of child abuse was used, a median co-occurrence rate of 40% was found. Five models depicting the directionality of abuse in violent families are proposed and discussed in relation to the data and theories of violence. Recommendations for methodological improvements and theory-driven studies are presented. (PsycINFO Database Record © 2012 APA, all rights reserved)

Stanley, N. (1997). Domestic violence and child abuse: Developing social work practice. *Child & Family Social Work*, 2(3), 135-145. DOI:10.1046/j.1365-2206.1997.00052.x

This paper takes as its starting point the report produced by the Social Services Inspectorate (1995), entitled *Domestic Violence and Social Care*, which seeks to alert social workers to the links between domestic violence and child abuse and urges the profession to respond more effectively to these two interconnected forms of violence. Having examined the research findings which provide evidence for these links, the theoretical and service delivery contexts in which these two forms of violence have been studied and conceptualized by the social work profession, both in the United Kingdom and in the United States, are identified. Studies of the social work response to domestic violence are discussed and some of the difficulties experienced by social workers in responding effectively to the needs of families where both forms of violence are experienced are considered. In particular, the issues of 'invisible' men and 'trapped' women and children are explored. It is argued that effective social work intervention which challenges these stereotypes will require additional resources and the article concludes with a consideration of whether the *Messages from Research* report might herald a shift in the approach to child protection that would promote the allocation of resources to this area of work.

McCloskey, L. A., Figueredo, A. J., & Koss, M. P. (1995). The effects of systemic family violence on children's mental health. *Child Development*, 66(5), 1239-1261. DOI:10.1111/j.1467-8624.1995.tb00933.x

This study examines the link between different forms of family aggression and children's symptoms of psychopathology. The goal of the study was to understand what forms children's problems might take in violent homes and whether close ties within the family (to the mother or a sibling) buffered children. Interviews with 365 mothers and 1 of their children between the ages of 6 and 12 about abuse in the home, support and closeness

within the nuclear family, and mother's and children's mental health formed the basis of this study. Families were recruited from battered women's shelters and the community. We found that different forms of abuse in the home were highly interrelated and that children of battered women were at risk for child abuse. Domestic violence predicted children's general psychopathology, but we uncovered little evidence for the presence of specific sorts of disorders as a result of family dysfunction. Although mothers experiencing conjugal violence were more likely to have mental health problems, their mental health did not mediate the children's response to family conflict. Finally, there was less sibling and parental warmth in families marked by aggression, although when it was present, family social support failed to buffer children. Although the general pattern of results was consistent across respondents (mother and child), there was low agreement on symptoms of child psychopathology.

Sternberg, K. J., Lamb, M. E., Greenbaum, C., Cicchetti, D., Dawud, S., Cortes, R. M., Krispin, O., & Lorey, F. (1993). [Effects of domestic violence on children's behavior problems and depression](#). *Developmental Psychology*, 29(1), 44-52. DOI:10.1037/0012-1649.29.1.44

The Children's Depression Inventory, Child Behavior Checklist, and Youth Self-Report were completed by mothers, fathers, and their 8-12 year old children to assess the effects of various types of domestic violence on children's behavior problems and depression. 110 Israeli children from lower-class families were identified through social service records. 33 of the children had been physically abused by their parents within the last 6 months, 16 had witnessed spouse abuse, 30 had been both victims and witnesses of domestic violence, and 31 had experienced no known domestic violence. Overall, domestic violence had effects on child development that varied in magnitude and nature depending on the type of domestic violence and who reported the information about the child's adjustment.