

ENDING THE CYCLE OF VIOLENCE



Community Responses
to Children of
Battered Women



Einat Peled
Peter G. Jaffe
Jeffrey L. Edleson
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ENDING THE CYCLE OF VIOLENCE



We dedicate this book to our parents:
Yonah and Shmuel Peled
Immy and Bernard Jaffe
Leah Rae and LeRoy Edleson

Acknowledgments

The three of us first met in July 1992 at the National Conference on Intervention With Children of Battered Women held in Minneapolis. The 3-day conference was organized by the Domestic Abuse Project with support from the Emma B. Howe Memorial Foundation. It attracted more than 350 people from 32 U.S. states, Canada, and three other countries.

The conference participants helped us recognize the need for more information on new programs for children of battered women. In the lobby of the hotel, as conference participants stopped by to talk, we sketched out the plan for this book.

With our plan in hand, we approached conference presenters and others across North America working in innovative programs for children of battered women. At the same time, we approached Marquita Flemming, then the social work editor at Sage Publications, with the initial prospectus of this book. She enthusiastically supported our plan and brought Sage's impressive resources to bear. Terry Hendrix, the interpersonal violence editor, took over for Sage when Marquita moved on to another area of the company's operations. Terry helped shepherd the project with his experienced advice throughout the writing and production process.

The chapter authors, 27 professionals living in three countries, worked hard to produce excellent chapters. The outcome of all of our efforts is this book, *Ending the Cycle of Violence: Community Responses to Children of Battered Women*. It is the first book to feature chapters on the growing number of innovative programs that aim to improve the situation of children exposed to violence against their mothers and to address the many critical issues that must be considered when designing such programs.

Our work could not have been achieved without the support of the boards, staff, and clients of the Domestic Abuse Project in Minneapolis, Minnesota,

and the London Family Court Clinic in Ontario, Canada. These two organizations deserve more detailed acknowledgement here.

Domestic Abuse Project

Einat Peled and Jeffrey Edleson received inspiration and tremendous support from the staff of the Domestic Abuse Project, where much of our work and research with children of battered women took place. We specifically thank Diane Davis, who coordinates the DAP Children's Program, and the therapists and interns who work with her in that endeavor. We also thank Carol Arthur, Joan Bilinkoff, Ellen Altman, and Ann Moore, all senior DAP staff who lent vision, time, and resources to these efforts.

The Domestic Abuse Project (DAP) was established in 1979 and began from a perspective that the response to violence required a multisystems intervention. This response required providing (a) immediate protection, support, and advocacy for battered women and their children; (b) education and accountability for violent men; (c) ongoing support, education, and healing for battered women and their children; and (d) coordinated intervention in and monitoring of social institutional responses to battering. In 1979, shelters in the metropolitan Twin Cities area were providing immediate protection, support, and advocacy. Consequently DAP focused on developing the later three areas.

The agency grew rapidly in the 1980s and now comprises five major units: (a) community intervention, (b) clinical services, (c) marketing and communication, (d) evaluation and research, and (e) administrative services. The majority of DAP resources now are focused on intervention in the criminal justice system, working both on behalf of individual battered women and on changing system responses to all battered women and their children. DAP also devotes considerable resources to providing support and education groups for battered women and for their children, psychoeducational groups for men who batter, individual and family counseling when appropriate, and a network of aftercare and self-help groups for those who have completed more structured programs at the agency or elsewhere. DAP's children's program is located within clinical services and has a full-time coordinator who draws on other staff for leadership of children's groups and individual or family services as needed (see Chap. 5 for more detail).

Community intervention and clinical services are supported by three smaller units. The marketing and communication unit provides publications and training to professional and community groups worldwide. Extensive in-house training is offered to interns from a variety of graduate professional programs and to staff of other agencies who arrange extended visits to

Minneapolis. Publications include a collection of handbooks that describe DAP services in detail, a large number of research and clinical practice articles that have appeared in numerous journals, and a regularly scheduled *Research Update* newsletter that provides news of DAP's evaluation and research findings. The evaluation and research unit operates in close relationship with the University of Minnesota's School of Social Work faculty and students. The unit is a model of collaborative, practice-based research. The administrative services unit supports the general operation of the agency.

In 1993, DAP provided information to more than 13,000 people. Agency staff provided direct advocacy services to 3,287 victim/survivors, and direct treatment services to 577 men, 237 women, 54 children, and 47 adolescents; 28 full- and part-time staff and 12 interns provided these services.

London Family Court Clinic

Peter Jaffe is indebted to the board and staff of the London Family Court Clinic, who have facilitated his work in a number of ways, including creating a caring and supportive environment. The clinic's climate has always fostered the integration of clinical and research excellence and a vision of zero tolerance of violence. Karen Rhiger has undertaken a major task in helping to organize the manuscript, in addition to all of her other responsibilities as an administrative officer at the clinic, and the editors gratefully acknowledge her contribution.

The London Family Court Clinic (LFCC) is a children's mental health center committed to advocate for the special needs of children and families involved in the justice system. The clinic's advocacy includes assessment, counseling, and prevention services, as well as research and training for the community.

The clinic recognizes that children and families involved in the justice system are in crisis and at a major turning point in their lives. Clinic staff believe that the justice system has an opportunity to be part of a healing and conflict resolution process when it is responsive to the real needs of children and families. The staff believes that the clinic can play a role in making the justice system more sensitive and responsive to the people it serves. The Clinic plays this role by (a) providing clinical assessments for the court, (b) acting as a bridge between the justice system and helping agencies, (c) promoting positive adjustment through early identification of childhood problems and through prevention programs, (d) offering training and community education programs, (e) ensuring child victims or witnesses to violence are not revictimized or further traumatized by court proceedings, (f) conducting research in collaboration with community partners to make services, policies, and

legislation more responsive to the needs of children and families in the justice system, and (g) sharing information through publications and workshops.

In the year ending in June, 1993, almost 400 referrals were made to the clinic. During that same period, more than 150 workshops and presentations were offered throughout Canada, the United States, and in two other countries. The clinic also produced 17 publications, received 15 research grants, and fielded almost 400 requests for information during this period.

Throughout the clinic's 20-year history, violence against women and children has been the organization's central focus. A large proportion of the children referred to the clinic have lived with violence that has gone unnoticed by the community until their emotional and behavioral problems can no longer be ignored. Good examples include the following: Adolescent boys who are assaultive to their girlfriends after many years of witnessing their father abuse their mother, children with nightmares and flashbacks after visitation with a father who terrorized their mother for a decade before she finally fled to a shelter, and children too terrified to testify against a sexually abusive stepfather because they know all the different forms of violence that they witnessed at home. These children are a constant reminder that we are a long way from ending the cycle of violence.

Personal Acknowledgments

Einat Peled and Jeffrey Edleson received extensive intellectual and material support from the faculty and staff of the University of Minnesota's School of Social Work and College of Human Ecology.

Einat Peled was and is inspired by her ever-loving and supportive family and wholeheartedly thanks the many children who trusted her with their feelings and thoughts about life and violence. Peter Jaffe's partner, Deb, has been a constant reminder that there is more to life than writing and presenting workshops. Personal relationships, family, and fun were always presented as important priorities. The book would have been published earlier without her . . . but life wouldn't have been the same. Jeffrey Edleson's two sons, Daniel and Eli Edleson-Stein, and his partner of 20 years, Marcie Stein, have taught him to be sensitive to the needs of children and about how important a violence-free and nurturing home, community, and world environment is to the healthy development of all children.

Contents

Acknowledgments	vii
PART ONE: Living in a Violent Culture	
1. Introduction	3
<i>Einat Peled, Peter G. Jaffe, and Jeffrey L. Edleson</i>	
2. Learning to Be Violent	10
<i>Myriam Miedzian</i>	
PART TWO: Shelters and Domestic Violence Programs	
3. Assessment Following violence-witnessing Trauma	27
<i>William Arroyo and Spencer Eth</i>	
4. Individual Psychotherapy for the Traumatized Children of Abused Women	43
<i>Louise Silvern, Jane Karyl, and Toby Y. Landis</i>	
5. Process and Outcome in Small Groups for Children of Battered Women	77
<i>Einat Peled and Jeffrey L. Edleson</i>	
6. Empowering Battered Women as Mothers	97
<i>Joan Bilinkoff</i>	
7. Parenting Groups for Men Who Batter	106
<i>David J. Mathews</i>	
8. Advocacy for Children of Battered Women	121
<i>Honore M. Hughes and Michele Marshall</i>	

**PART THREE: Child Protection and
the Criminal Justice System**

9. How Abused Women Can Use the Law to Help
Protect Their Children 147
Joan Zorza
10. Child Protection Services for Children
of Battered Women: Practice and Controversy 170
Carole Echlin and Larry Marshall
11. Doing More Harm Than Good?
Some Cautions on Visitation Centers 186
Martha McMahon and Ellen Pence

**PART FOUR: Prevention and Education
in Schools and Communities**

12. Teach Your Children Well:
Elementary Schools and Violence Prevention 209
Denise Gamache and Sarah Snapp
13. Violence Prevention Programs in
Secondary (High) Schools 232
Marlies Sudermann, Peter G. Jaffe, and Elaine Hastings
14. Strategies to Address Violence in the Lives
of High-Risk Youth 255
*David A. Wolfe, Christine Wekerle, Deborah Reitzel, and
Robert Gough*
15. Aboriginal Canadian Children Who Witness
and Live With Violence 275
Claudette Dumont-Smith
16. Conclusion 284
Einat Peled, Peter G. Jaffe, and Jeffrey L. Edleson
- Name Index 287
- Subject Index 295
- About the Contributors 301

PART ONE

Living in a Violent Culture

Introduction

EINAT PELED
PETER G. JAFFE
JEFFREY L. EDLESON

The world in which we raise our children is extremely violent. Millions of children are victims of child physical and sexual abuse every year (Dubowitz, 1986; Straus & Gelles, 1986). Many more children are frequent witnesses of violence: They watch it, hear it, read about it, and play with it. Violence is a major theme in television shows, movies, newscasts, music, sports, literature, and children's toys (Miedzian, 1991); it is rampant in many North American cities (Garbarino, Dubrow, Kostelny, & Pardo, 1992; Kotlowitz, 1991); and it is a constant presence in families in which the mother is being abused.

In this book we focus on children who witness violence directed at their mothers by their intimate partners. The phenomenon of children witnessing violence directed at their mothers, as described by professionals or studied by researchers, encompasses a wide range of experiences (see Jaffe, Wolfe, & Wilson, 1990; Peled, 1993). Children may observe this violence directly by seeing their fathers (or other intimate partners of their mothers) threaten or hit their mothers. One 13-year-old girl recalled the following violence:

He choked her for a minute or so and then he stopped. . . . She cried and coughed, tried catching her breath. And then she called the police. (Peled, 1993, p. 102)

A 12-year-old girl, referring to her mother and her stepfather, recalled:

He picked her up off the bed, they were fighting, and then he picked her up off the bed and threw her against the wall. (Peled, 1993, p. 103)

Children may not see, but rather hear the sounds of violence from another part of their home, such as these 10-year-old boys:

The only time I remember is when my dad, he broke down the, did my mom tell you that? That he broke down that door? . . . The bathroom one. I was about four. I don't know where I was. I think I was, I might have been in their room watching TV. . . . After it happened, I asked my mom what happened. Then she told me. (Peled, 1993, p. 102)

He went downstairs, so did Mom. And on the steps he turned back and said something to Mom but I don't know. And he went downstairs and they, I heard all this banging and the floor, the floor was, just kept on, there's so much, there's like bangs in the floor and on the walls and stuff like that. But, and then there was all this yelling. (Peled, 1993, p. 114)

Children also may be exposed to the results of this violence without either hearing or seeing the acts of aggression. One mother of a 6- and a 4-year-old recalled her experience:

After he was arrested and stuff, I wanted to get out of here. I called the police and they said, "Oh yeah, he's posted his bail, he'll be out in an hour." And I was, "An hour? I gotta get out of here." So I called a girlfriend at like two in the morning. My brother and my girlfriend and I went and had to wake those guys up. You know it was January, it was freezing out. Pack up, try and explain to them we gotta leave and why and pack up a few things and get out of here. And that was really hard on them. (Peled, 1993, p. 135)

CHILDREN OF BATTERED WOMEN

It is estimated that between 3.3 million (Carlson, 1984) and 10 million (Straus, 1991) children in the United States are at risk of exposure to woman abuse each year. These children are at increased risk of being abused themselves (Stark & Flitcraft, 1985) and are thought to suffer from an array of behavioral, emotional, and cognitive problems (Fantuzzo & Lindquist, 1989; Goodman & Rosenberg, 1987; Jaffe et al., 1990).

Studies have found child witnesses to have more overall externalizing problem behavior (Jaffe, Wolfe, Wilson, & Zak, 1986), more overall internalizing problem behavior (Christopheropoulos et al., 1987), and less social competence (Wolfe, Zak, Wilson, & Jaffe, 1986). Children of battered women also were found to show more anxiety (Forsstrom-Cohn & Rosenbaum, 1985; Hughes, 1988), more aggression (Westra & Martin, 1981), more

temperamental problems (Holden & Ritchie, 1991), more depression (Christopheropoulos et al., 1987), less empathy (Hinchey & Gavelek, 1982), less self-esteem (Hughes, 1988), and lower verbal, cognitive, and motor abilities (Westra & Martin, 1981) than children who did not witness violence at home. Further, there is some support for the notion of cross-generational transmission of violence by which children from violent families of origin are suggested to carry violent and violence-tolerant roles to their adult intimate relationships (Cappell & Heiner, 1990; Rosenbaum & O'Leary, 1981; Widom, 1989).

The high number of children witnessing woman battering is not, most likely, a recent development. Some evidence suggests that children have been witnessing their mothers being abused for a long time (Edleson, 1991; Gordon, 1988; Pleck, 1987). Until recently, children's witnessing violence in their home was not recognized as a problem requiring intervention. For example, the pediatrician Ira S. Wile wrote in *The Survey* in 1924:

It is undoubtedly true that the brawling home has little advantage compared with the equable atmosphere secured by divorce. Yet, so long as cruelty and animosity are not directed upon the children, they are at least free from the internal stresses that exist when divorce breaks up the home and wraps or tears those intangible ties termed home influences. (p. 474)

The predicament of children who witness their mothers being abused began to attract professional and public attention in the late 1970s. Professional interest seemed to have been contingent on the relatively recent construction of marital violence as a social problem (Loseke, 1987; Straus, Gelles, & Steinmetz, 1980) and to draw on existing public and professional awareness of the problems of child abuse in general (Nelson, 1984) and child psychological abuse in particular (Brassard, Germain, & Hart, 1987; Garbarino, Guttman, & Seeley, 1986).

Battered women and the advocates, clinicians, and researchers who worked with them were the first to report on children of battered women (e.g., Dobash & Dobash, 1979; Hilberman & Munson, 1977; Martin, 1976; Stacy & Shupe, 1983; Walker, 1979). Professionals, faced with battered women's concerns for their children and the difficulties experienced by the children themselves, described emotional and physical difficulties experienced by children residing in shelters for battered women (e.g., Elbow, 1982; Hilberman & Munson, 1977; Layzer, Goodson, & DeLange, 1986; Levine, 1975; Moore, 1975).

Although there is a growing body of research on children of battered women, scant information has been available on interventions to help these children.

OVERVIEW OF THE BOOK

This book presents the work and thoughts of authors from across North America who are working in a variety of ways to both prevent future violence and intervene to lessen the effects that current violence has on children. The book is organized into four parts covering the following: (a) living in a violent culture, (b) shelters and domestic violence counseling, (c) child protection services and the criminal justice system, and (d) prevention and education in schools and communities.

The book begins with Myriam Meidzian's detailed discussion in Chapter 2 of how our societies teach boys to consider violence an acceptable behavior and then maintain these teachings into adulthood. This chapter sets the context in which the rest of the programs and issues are discussed.

Part Two focuses on shelters and domestic violence counseling. Chapter 3 and 4 both focus on individual assessment and counseling in cases of trauma. The authors are all psychiatrists and psychologists working directly with traumatized children. In Chapter 3, William Arroyo and Spencer Eth offer a framework for assessing the effects of trauma. Louise Silvern and her colleagues at the University of Colorado Department of Psychology provide a step-by-step framework in Chapter 4 for helping children overcome the effects of witnessing violence.

The next three chapters in Part Two focus on work with children, their mothers, and their fathers. Einat Peled and Jeffrey Edleson describe in Chapter 5 both the Domestic Abuse Project's Children's Program and the results of their multiyear investigation into its effects. Joan Bilinkoff, the Director of Therapy for the Domestic Abuse Project, offers in Chapter 6 guidelines for working with battered women as single mothers. David Mathews, from the Wilder Community Assistance Program in St. Paul, Minnesota, follows with a chapter devoted to how one works on parenting skills with men who batter. This part ends with Honore Hughes and Michele Marshall's chapter on the work of children's advocates both within and outside battered women's shelters.

Part Three focuses on child protection issues when mothers are also battered women. In Chapter 9 Joan Zorza, a lawyer with the National Center on Women and Family Law in New York, offers a concrete guide of legal remedies for those working with battered women and their children to use when seeking protection from abusers. Carole Echlin and Larry Marshall, both working in child protection services in Ontario, provide an overview in Chapter 10 of assessment and intervention in child protection and then touch on some current controversies over protecting children of battered women. Part Three ends with Chapter 11, in which Martha McMahon, a sociologist