



Assessing child exposure to adult domestic violence

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Abstract

The emerging interest in children's exposure to adult domestic violence has brought about calls for better methods to assess such exposure. Currently no assessment tools exist that adequately measure the diversity of children's experiences with domestic violence. In this article we identify several factors affecting children's experiences and consequent outcomes, including concurrent victimization and various risk and protective factors. We then review several measures that include at least one question regarding adult domestic violence and that assess child exposure to and/or perception of domestic violence. We conclude that existing measures do not comprehensively identify factors related to child exposure and thus call for the development of new tools that more thoroughly and accurately assess child exposure to adult domestic violence.

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1. Introduction

Child exposure to adult domestic violence has increasingly become a concern for both practitioners and researchers. For example, new research in child welfare systems has revealed that large proportions of children under protective supervision are exposed to adult domestic violence but that screening and investigation of the violence is often inadequate (English, Edleson, & Herrick, 2005; Hazen, Connelly, Kelleher, Landsverk, & Barth, 2004). Juvenile and family courts struggle to understand and assess the significance of child exposure when making decisions concerning custody and visitation (Jaffe, Lemon & Poisson, 2003; Kernic, Monary-Ernsdorff, Koepsell, & Holt, 2005).

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Law enforcement leaders have questioned their own responses to children who are present when police respond to adult domestic assault reports (International Association of Chiefs of Police, 1997). And, finally, battered women's shelters and other domestic violence prevention programs have increasingly recognized and expanded their responses to the needs of children in the families they serve (Saathoff & Stoffel, 1999).

Professionals working in these programs have little guidance and few tools to carefully assess exposed children so that they can target new policies and practices to best serve them. As a result, several investigators have developed instruments to measure the impact of exposure. For example, Graham-Bermann (1996) developed the *Family Worries Scale*, and Grych, Seid, and Fincham (1992) developed the *Children's Perception of Interparental Conflict Scale*. These instruments measure the emotional and behavioral consequences of a child's exposure to adult domestic violence, but do not give information about the child's actual exposure experiences.

There are no existing measures of a child's exposure to adult domestic violence that both adequately measure it and have been subjected to rigorous psychometric testing. Hamby and Finkelhor (2001) examined a large number of assessment tools for use in monitoring child victimization but very few of these instruments were designed to monitor childhood exposure to adult domestic violence. Their review reveals that researchers and clinicians have most often adapted the adult version of the widely used Conflict Tactics Scales (Straus, 1979; Straus, Hamby, Boney-McCoy, & Sugarman, 1996) to assess children's levels of exposure. These adaptations vary greatly and leave the field with no standard method of measuring prevalence or individual incidents of exposure (Jouriles, MacDonald, Norwood, & Ezell, 2001).

To fill this gap for practitioners and researchers alike, we undertake a review of the research on children's exposure to adult domestic violence with an eye towards understanding what is needed to develop a new assessment tool. To that end we discuss the pervasiveness of child exposure to domestic violence and the factors that contribute to children's unique experiences with and outcomes from this exposure. We review a selection of commonly-used measures that ask respondents at least one question about domestic violence exposure. We then discuss the degree to which these measures adequately assess the unique experiences of children exposed to domestic violence.

2. Overview of children's exposure to adult domestic violence

Researchers estimate widely ranging numbers of children exposed to adult domestic violence. Many of the estimates are derived by extrapolating from national surveys that were not designed to measure children's exposure. The two most widely cited estimates are those developed by Carlson (1984) and Straus (1992). Based on studies of the number of households experiencing domestic violence each year (Straus, Gelles, & Steinmetz, 1980), Carlson estimated that "at least 3.3 million children yearly are at risk of exposure to parental violence" (p. 160). Straus (1992) estimated yet an even higher level of exposure using retrospective accounts by adults of their teen years. He estimated that there may be as many as 10 million American teenagers exposed to adult domestic violence each year. Carlson (2000) has more recently raised her estimate as a result of additional studies. She now conservatively estimates that from 10% to 20% of American children are exposed to adult domestic violence each year (Carlson, 2000). Based on recent US Census data (US Census Bureau, 2000), this would indicate that approximately 7 to 14 million American children are exposed to adult domestic violence annually. Finally, Thompson, Saltzman, and Johnson (2003) report that 33.2% of

Canadian abused women and 40.2% of US battered women responding in national surveys stated that their children had witnessed domestic violence events.

Most of these are rough estimates of the number of children exposed to domestic violence and each relies on imprecise definitions, retrospective accounts or indirect measurement to arrive at a final number. While these estimates give some insight into the extent to which adult domestic violence and children's exposure pervade society, they tell us little about what forms of violence to which children are being exposed, how often they are exposed to it and how they are involved in violent events.

To delve deeper into children's experiences it is necessary to first define the terms "adult domestic violence" and "exposure". Jouriles et al. (2001) suggest that a number of issues affect how we define exposure to adult domestic violence. First, the types of exposures children experience may be defined narrowly as only physical violence or more broadly as including additional forms of abuse such as verbal and emotional. Second, even within the narrower band of physical violence exposure, there is controversy about whether we should define adult domestic violence as only severe acts of violence such as beatings, a broader group of behaviors such as slaps and shoves, or a pattern of physically abusive acts (Osthoff, 2002).

"Exposure" is most commonly defined as being within sight or sound of the violence. However there are compelling arguments to redefine and assess a child's exposure to violent events in broader terms. In their national curriculum for child protection workers, for example, Ganley and Schechter (1996) highlight several ways that batterers expose children to adult domestic violence. These include hitting or threatening a child while in his or her mother's arms, taking the child hostage in order to force the mother's return to the home, forcing the child to watch assaults against the mother or to participate in the abuse, and using the child as a spy through interrogation about the mother's activities. In addition to seeing, hearing, or being used in a direct incident of violence, some mothers and their children describe the aftermath of a violent incident as also having a traumatic effect on them. The aftermath can include a mother who is injured and in need of help, a father who alternates between physical violence and loving care, police intervention to remove a male perpetrator from the home, or moving to a shelter for battered women.

Throughout this article the phrase "exposure to adult domestic violence" will be used to describe the multiple experiences of children living in homes where an adult is using violent behavior in a pattern of coercion against an intimate partner. Violence is experienced in diverse ways in families, including between same-sex partners as well as by women against men. The focus in this paper is on the experience in which most children exposed to domestic violence find themselves, in a home where a man is committing a pattern of violence against an adult woman, who is most often the child's mother.

3. Factors to consider in the assessment of child exposure

Child exposure to adult domestic violence is associated with significantly greater behavioral, emotional, and cognitive functioning problems among children, as well as adjustment difficulties that continue into young adulthood. A number of authors have reviewed the research to date on problems associated with children's exposure to domestic violence (see reviews by Appel & Holden, 1998; Edleson, 1999a; Fantuzzo & Mohr, 1999; Lehmann, 2000; Margolin, 1998; O'Leary, Slep, & O'Leary, 2000; Rossman, 2001). More recent meta-analyses by Kitzmann, Gaylord, Holt, and Kenny (2003) and Wolfe, Crooks, Lee, McIntyre-Smith, and Jaffe (2003) have shown children exposed to domestic violence to exhibit significantly worse problems than children not so exposed

but the size of this effect is relatively small ($Z_T = .28$ in Wolfe et al., 2003). Exposed children were not, however, significantly different than children who were physically abused or who were both physically abused and exposed to violence (Kitzmann et al., 2003).

The wide range of behaviors and consequences associated with exposure to domestic violence found in these reviews indicate that the relationship between exposure and possible impacts is complex. As Graham-Bermann (2001) points out, many children exposed to domestic violence show no greater problems than children not so exposed. At least two studies support this claim (Hughes & Luke, 1998; Grych, Jouriles, Swank, McDonald, & Norwood, 2000). How does one explain these variations? Rossman, Hughes, and Rosenberg, (2000) suggest that risk factors are additive, meaning that they combine to produce greater impacts on children exposed to domestic violence. This is consistent with the literature on children's resilience (Hughes, Graham-Bermann, & Gruber, 2001; Masten, Best, & Garmezy, 1990). It is, however, also generally suggested that a child is differentially affected depending on the number, type, and level of *both* risk and protective factors present in each child's environment (Masten et al., 1990; Masten & Sesma, 1999). A child's gender and age, the frequency, severity and chronicity of violence in the home and the child's relationship with his or her mother and the man who batters her all may influence the impact of exposure on a child (Edleson 2004; Gewirtz & Edleson, in press).

Children may also be at increased risk of physical harm during violent incidents depending on their own responses to the incidents. Children's responses have been shown to vary from becoming actively involved in the conflict, to distracting themselves and their parents, to distancing themselves from the conflict (Margolin, 1998). Adamson and Thompson (1998) found that children from homes in which there were domestic violence were nine times more likely to use verbal or physical aggression to intervene in parental conflict than were children from violence-free homes (27% vs. 3%). The degree to which a child intervenes in adult domestic violence clearly varies from child to child and is likely related to the impact of exposure.

Children exposed to domestic violence may also be direct victims of physical and sexual maltreatment. A number of reviews have examined the co-occurrence of documented child maltreatment in families where adult domestic violence is also occurring. Over 30 studies of the link between these two forms of violence show a 41% median co-occurrence of child maltreatment and adult domestic violence in families studied (Appel & Holden, 1998) with the majority of studies finding a 30% to 60% overlap (Edleson, 1999b). Behaviors often attributed to domestic violence exposure may also derive from the child's concurrent victimization at the hands of his or her parent or caregiver.

A factor that may moderate the impact of exposure is a child's ability to cope with stressful events. Children appear to interpret and cope with conflict differently based on their perception of the cause or content of that conflict. The child may hold him or herself responsible for events over which he or she has no control, developing an inappropriate belief that he or she has significant control over the violent events. For example, Grych et al. (1992) found that children tended to blame themselves more when the content of parent conflict involved them. Alternately, one child may have greater skills than another to calm him or herself during conflict between parents. For example, Rossman and Rosenberg (1992) found that children who believed they were more able to calm themselves during conflict were reported to have fewer problems.

Given this brief review, it is likely that a number of different factors may influence the degree to which exposure to adult domestic violence may or may not affect a child's development. It is critical to address this array of child, family and social variables in order to thoroughly assess children's exposure.

4. Assessment tools relevant to child exposure

Clearly, there is a need for assessment instruments that assess child exposure. Historically, practitioners have “made do” with a variety of measures to assess various aspects of child exposure to domestic violence, of which several were not originally meant for this purpose. The bulk of these measures focus on the *impact* of exposure to violence, never addressing the specific aspects of the child’s individual experience with the violence that may affect behaviors, emotions and perceptions associated with impact. Because the field has so few measures of exposure and is replete with measures of impact, we will focus our analysis on the former. Measurement instruments most likely to be used in the field will be those readily available and those that are easily administered through self-report formats (Feindler, Rathus, & Silver 2003). Thus, this paper will primarily focus on readily available, self-report assessment instruments that include the measurement of children’s exposure to domestic violence.

The measures included in our analysis all contain at least one question specifically regarding domestic violence exposure. Measures asking about general “family conflict” but not exposure did not meet the criterion for inclusion here. We also principally focused on measures that use self-report by children up to age 18. Children have been shown to report differently than their parents and other informants (Sternberg, Lamb, Guterman, & Abbott, 2006). O’Brien, John, Margolin, and Erel (1994) found that even when one or both parents report that their children were not exposed to the domestic violence, more than one in five children (21%) could provide detailed descriptions of domestic violence in their homes. Thus, it is important to tap directly into children’s reports of their exposure.

Based on the above criteria, we found five measures of exposure which are listed in Table 1 below. Each of the measures selected attempts to evaluate the types and frequency of violence to which a child has been exposed. For each measure, Table 1 contains the measure’s name, original publication source, the target of assessment, the types of questions, how each item is scaled, the number of questions regarding exposure, and any available information on the psychometric properties of the measure.

One of the most common methods of measuring child exposure, as stated earlier, is to adapt the adult *Conflict Tactics Scales* (Straus, 1979; Straus et al., 1996) for use with children. In order to assess children’s exposure to domestic violence, Kolbo’s (1996) adapted version of the *CTS* added columns requiring a parent or caregiver to rate “how often your child witnessed (saw or heard) each” conflict tactic. Kolbo utilized the same seven-point scale as the original *CTS*, with responses ranging from “Never” to “Over 20 Times”. However, Kolbo’s adapted *CTS* asked both how often each conflict tactic occurred and how often the child witnessed it being used. The measurement tool examines tactics ranging from “discuss the issue calmly” and “bring in or try to bring in someone to help settle things” to “kick, bite, or hit with a fist” and “use a knife or gun” (Kolbo, 1996).

Things I Have Seen and Heard (Richters & Martinez, 1990) measures types of violence both witnessed and directly experienced by children. Using a five-point scale ranging from “zero” to “many times”, it asks children how frequently each of 15 types of violence have occurred. Questions include, “Grown ups in my home hit each other” and “Grown ups in my home yell at each other” (Richters & Martinez, 1990).

The most recent addition to the compendium of measures of child exposure is the *Juvenile Victimization Questionnaire (JVQ)* (Finklehor et al., 2005). The measure is very comprehensive, touching on everything from specific forms of community violence victimization and exposure, to the witness of war and other trauma. It makes a valiant effort to include a wide variety of forms

Table 1
Summary of selected measures of child exposure

Measure name	Author and year	Respondents	Domain/subject	Items/scaling	Questions regarding exposure	Psychometric properties
Conflict Tactics Scale (Adapted)	Kolbo (1996); Revised version of CTS by Straus (1979)	Parents of children ages 8 to 11 suspected of exposure to domestic violence	Type of conflict tactics use by parent or caregiver. Type, severity, and frequency of conflict tactics witnessed by child used by parent/caregiver against another parent/caregiver	<ul style="list-style-type: none"> • 80 items • 7-point Likert scale • “Never” to “Over 20 times” 	<ul style="list-style-type: none"> • 19 questions regarding violent and non-violent tactics used in conflict. • Each question asks how often the parent has engaged in the behavior and how often the child has witnessed the tactic. 	<ul style="list-style-type: none"> • Reliability and validity not assessed
Juvenile Victimization Questionnaire	Finklehor, Hamby, Ormrod, and Turner (2005)	Children ages 8 to 17 (child self report) and 2 to 8 (parent report)	Covers five areas of concern: Conventional crime, child maltreatment, peer and sibling victimization, sexual assault, and witnessing and indirect victimization.	<ul style="list-style-type: none"> • 37 items • 3-point scale • 1 time to 3 or more times • Follow up questions regarding frequency, victim and perpetrator 	<ul style="list-style-type: none"> • 3 questions specific to exposure to physical domestic violence 	<ul style="list-style-type: none"> • Internal Consistency: $\alpha = .80$ • 3–4 weeks retest reliability for youth self-report: $\kappa = .63$ (fair to good), percent agreement = .95

Things I have Seen and Heard	Richters and Martinez (1990)	Children, ages 6 to 14	Exposure to violence at home and in the community	<ul style="list-style-type: none"> • 15 items • 5-point scale using increasing dots • “Zero times” to “Many times” 	<ul style="list-style-type: none"> • 4 items regarding exposure to violence in the home. 	<ul style="list-style-type: none"> • Internal Consistency: $\alpha = .74$ to $.76$ • Inter-rater reliability between child and parent on family violence: $r = .67$ • One week test–retest reliability: $r = .81$ • Internal consistency: $\alpha = .72$ to $.86$
Violence Exposure Scale for Children — Revised	Fox and Leavitt (1996)	Children, elementary and preschool age Adults, parallel questionnaire given to parent	Exposure to violence within and outside the home. Subsets are: witness to mild violence, victim of mild violence, witness to severe violence, and victim of severe violence	<ul style="list-style-type: none"> • 20 items, plus two open ones • 20 items use a 4-point scale • Thermometer pictograms illustrating “Never” to “Lots of times” 	<ul style="list-style-type: none"> • Although there are 22 questions regarding exposure to violence or victimization. However, the perpetrator and/or victim is never specified. 	<ul style="list-style-type: none"> • Internal consistency: $\alpha = .72$ to $.86$
Victimization Scale	Nadel, Spellman, Alvarez-Canino, Lausell-Bryant, and Landsberg (1996)	Middle school students, grades 6–8	Exposure to violence and victimization at home, school, and in neighborhood.	<ul style="list-style-type: none"> • 135 items • 4 point scale • “Never” to “Often” 	<ul style="list-style-type: none"> • 12 questions regarding exposure to violence in the home. 	<ul style="list-style-type: none"> • Reliability and validity not available

of victimization in order to chart the interrelationship of many of these incidents, pointing out that measures that are too specific often mistakenly attribute children's negative outcomes to the wrong trauma (Finklehor, Ormrod, Turner, & Hamby, 2005). The question that most specifically references domestic violence asks, "In the last year did you see one of your parents get hit by another parent, or their boyfriend or girlfriend? How about slapped, hit, punched, or beat up?" (Finklehor, Ormrod, et al., 2005).

A lesser known scale that addresses children's exposure to domestic violence is the *Victimization Scale* (Nadel et al., 1996) as found in the Centers for Disease Control and Prevention's compendium of assessment tools *Measuring Violence-Related Attitudes, Beliefs, and Behaviors Among Youths* (Dahlberg, Toal, & Behrens, 1998). Much like the JVQ, the measure addresses several forms of violence exposure and victimization including at school, in the child's neighborhood, at home, and "outside of school". In the section regarding incidents at home, the measure runs the gamut from witnessing hits, kicks, and threats with weapons to verbal and emotional abuse and robbery.

Finally, *The Violence Exposure Scale for Children (VEX-R; Fox & Leavitt, 1996)*, derived from the *Things I Have Seen and Heard* measure, evaluates children's exposure to a wide range of violent acts both within and outside the home, as well as children's victimization from these acts. It is a novel approach with a comic-book style version of the measure for children and a text version for parents. It asks both the child and the parent how often the child has been victimized by and exposed to specific violent acts. Items include "How many times has a person slapped you really hard?" and "How many times have you seen a person point a knife or a real gun at another person?" (Fox & Leavitt, 1996).

As a group, these measures may be useful as broad screening measures for general violence but are inadequate in their ability to extensively measure children's exposure to domestic violence. For example, Kolbo's (1996) adapted version of the CTS defines witnessing as "saw or heard," a rather narrow definition of child exposure. In addition, the scale was never subjected to psychometric development and so its properties are unknown. Richters and Martinez's (1990) *Things I Have Seen and Heard* instrument contains only four items specifically about violence exposure in the home and two more about weapons and drugs in the home, focusing mainly on physical incidents of violence, never identifying the victims and perpetrators. While the JVQ takes into account who the victims and perpetrators are, the measure is at the same time lacking in depth when it comes to assessment of exposure to domestic violence. The questions specifically ask about violence the child has *seen*, focusing mostly on physical violence, while asking one question about theft from the home. The *Victimization Scale* addresses more forms of domestic violence than the JVQ, but does not identify the perpetrators and victims of the violence. Finally, the VEX-R (Fox & Leavitt, 1996) focuses broadly on violence exposure but never identifies the victim and perpetrator and does not specify if any of the violence occurs in the home. In the parent version of the VEX-R there is some indication that additional probes are to be included for each question as to the timing, location and perpetrator of the event, yet there is no place on the test itself to indicate answers to these probes. For the most part the measures included in this analysis either fail to reach beyond exposure to physical violence, do not identify the victims or perpetrators, or ask too few questions regarding domestic violence exposure in general.

5. Toward more sophisticated assessment tools

Admittedly, few measurement instruments will address the needs of all potential users. However, practitioners, advocates, judges, and police currently lack a measurement tool sensitive

enough to assess the varied experiences of children exposed to domestic violence. Without such a tool, the field cannot properly tailor services, interventions, and policies to better serve children experiencing such violence. In order to meet this need, [Mohr and Tulman \(2000\)](#) suggest the measurement of child exposure to violence must consider the multiple contextual variables that affect children. The literature is clear that a number of factors affect the child's experience of violent events, yet no tool currently assesses all of the key domains outlined in this paper that affect children's outcomes from such exposure. Such a measure must first ask directly about a child's exposure to adult domestic violence and the manner in which the child has been exposed. Second, such a measure should include reports on the actions of the child in the violent situation. Third, following [Mohr and Tulman's \(2000\)](#) suggestion for a multidimensional assessment, a measure should include some appraisal of the known risk and protective factors in a child's life, including the co-occurrence of child maltreatment and the child's coping abilities. Gauging the level of risk and protective factors in a child's life will be an important aspect of any future measurement instrument. Fourth, the assessment tool must take the form of a self-report to measure the *child's* perception of the violent incidents, as they may differ from parental perceptions. Finally, the measure must be readily available and easily administered so that researchers, practitioners, law enforcement personnel, and the courts may use it in the field.

This compelling information has inspired us to embark upon a project of our own to create such a tool. We have begun to develop and psychometrically test a new *Child Exposure to Domestic Violence* (CEDV) scale. The 46-item child self-report scale has been developed, reviewed by an international panel of experts and piloted tested with a small number of children ages 10 to 16. It contains questions focused on the types of adult domestic violence to which a child is exposed, how a child is exposed to each, how the child is involved in violent incidents as well as information on other forms of victimization and risk and protective factors. We are currently conducting a study of the CEDV's test–retest reliability and external validity with children who are residents in or associated with shelter and non-shelter domestic violence service organizations. It is our hope that this project will provide the needed bridge to better services for and understandings of children exposed to domestic violence.

Considering the possible negative outcomes, public concern has rightfully turned towards child exposure to domestic violence. Yet, the field has been immobilized, with professionals limiting their study and treatment to children's behavioral and emotional impacts from exposure to domestic violence, without adequate exploration of the variations in experience that may cause these outcomes in the first place. Current notions of child exposure to domestic violence tend to assume a universal experience that anecdotal evidence and a review of the literature refute. Without exploring the bridge between exposure and impacts, it is nearly impossible to both adequately develop services to intervene in and prevent child exposure to domestic violence, and to understand the nature of the problem on a larger scale. Through the creation of a sophisticated, comprehensive assessment tool we can do better to meet the needs of children exposed to domestic violence.

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