

For our 2020 Domestic Violence Awareness Month Fact Sheet, the **Resource Center on Domestic Violence: Child Protection and Custody (RCDV: CPC)**, a project of the National Council of Juvenile and Family Court Judges (NCJFCJ), seeks to honor survivors and their families who are experiencing co-occurring domestic violence and child maltreatment by exploring its prevalence and risk factors, its effects on child outcomes, and protective factors that promote resilience.

The facts in this factsheet were adapted from an article published in the RCDV: CPC's special issue of the *Juvenile and Family Court Journal*. If you wish to request a copy of the journal or have any questions about the facts in this factsheet, please visit our website at **rcdvcpc.org** or call us at **1-800-52-PEACE**.

On behalf of the staff of the RCDV: CPC, and all of the members of the NCJFCJ, we hope this fact sheet is helpful to your ongoing work with survivors and their families.

Holmes, M.R., Bender, A.E., Crampton, D.S., Voith, L.A., & Prince, D.M. (2019). Research foundations of Greenbook interventions to address the co-occurrence of child maltreatment and adult domestic violence. *Juvenile and Family Court Journal*, 70(4), 11-36.



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Child Protection and Custody



Prevalence and Risk **Factors for the Co-occurrence** of Domestic Violence and Child Maltreatment

Researchers have known for decades that child maltreatment and adult domestic violence frequently occur in the same family, with early studies indicating that both forms of violence occur in approximately 30 to 60 percent of families.

More recent studies using nationally representative data provide more precise estimates of the cooccurrence, indicating that more than a third (33.9 percent) of children who are exposed to domestic violence have been maltreated in the

These nationally representative data 03 also indicate that lifetime rates of the co-occurrence are even higher, with over half (56.8 percent) of children exposed to domestic violence also experiencing maltreatment.

past year.



In early studies examining the combined 06 effect of maltreatment and domestic violence exposure, researchers found that children who had been physically abused and exposed to domestic violence had higher internalizing (anxiety and depression) and externalizing (aggression and delinquency) scores than those who had been exposed to domestic violence alone.



Early studies identified risk factors associated with exposure to domestic violence and child maltreatment such as poverty, parental unemployment, and substance abuse.

Other risk factors for exposure 05 to domestic violence and child maltreatment have emerged including financial and parenting stress, parent arrests for criminal offenses, lower education attainment of parents, poorer health and depression in the family, neighborhood disadvantage, and violence outside the home.



One study that investigated the combined and separate effects of earlier child maltreatment and exposure to domestic violence on adolescent conduct disorder (patterned disruptive and violent behavior) found that child maltreatment, after controlling for domestic violence exposure, was predictive of conduct disorder; however, exposure to domestic violence without child maltreatment was not itself predictive of conduct disorder.



In a mega-analysis pooling data across 15 studies to examine child functioning across four groups 80 of children (maltreated children, children exposed to domestic violence, children maltreated and exposed to domestic violence, and no-violence comparison group), researchers found that children who experienced maltreatment and exposure to domestic violence were at higher risk of internalizing and externalizing behavior problems than were children who experienced only one form of violence.

Other researchers examined types of child maltreatment (physical abuse, neglect, sexual abuse, and exposure to domestic violence) and found that only physical abuse and sexual abuse had significant effects on externalizing behavior problems.

Some studies 10 have found that domestic violence exposure predicts poorer child outcomes than child maltreatment. For example, some research indicates that domestic violence exposure is more predictive than child maltreatment of delinguent behavior

and later perpetration of

child abuse.

At least one research team examined the cumulative effects of maltreatment and its associated risk factors in early childhood and found an increased risk of externalizing behavioral problems in adolescents.

Another researcher, investigating the 12 consequences of exposure to domestic violence on very young children found that, initially, these children did not differ significantly from children who were never exposed; however, over time, the more frequently children were exposed to domestic violence before the age of three years, the more aggressive behavior problems were exhibited by age eight years.



Research has shown that approximately 40 percent of children who have been exposed to domestic violence or maltreatment fare just as well as, or better than, children not exposed, suggesting that protective factors may be promoting resilience in a substantial minority of these children.

Protective Factors Promoting Resilience in Children Exposed to Domestic Violence and Maltreatment

Although children exposed to domestic **13** violence or maltreatment are at higher risk of developing emotional, behavioral, cognitive, health, and mental health problems, some children continue to thrive and achieve optimal development despite early adverse life events.

Early research examining resilience in adolescents who had experienced maltreatment identified having a stable caregiver as a protective factor.





Other research identified emotional availability of the mother and positive relationships with non-familial adults as being less important than positive self-esteem, egoresilience, and ego overcontrol in promoting adaptive functioning in maltreated school-aged children.

Early research also examined the effects of maternal parenting stress on children's adjustment in homes with varying levels of domestic violence. Results of this research suggest that children whose mothers feel less stressed by their parenting responsibilities in the face of domestic violence suffer less emotional and behavioral impact.

Most research examining resilience of 18 children who have been maltreated or exposed to domestic violence has identified individual-level protective factors such as personality traits, social skills, and coping skills that promote adaptive functioning.

Family-level protective factors for children exposed to maltreatment or domestic violence include having stable, supportive, and warm non-offending parents who promote adaptive functioning.

While less research has been conducted examining community-level protective factors, some 20 studies have identified peer relationships and social support from non-familial relationships, such as teachers or neighbors, as protective factors promoting resilience of children exposed to maltreatment and/or domestic violence.

Citations by Fact

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), 578-59. This review compiled and reported data from 31 studies about the cooccurrence of spouse abuse and physical child abuse. In clinical samples of battered women or physically abused children, the overlap ranged from 20 to 100 percent. When a conservative definition of child abuse was used, a median co-occurrence rate of 40 percent was found. Edleson, J. L. (1999). The overlap between child maltreatment and woman battering. Violence Against Women, 5(2), 134-154. This review identified 35 studies in which an overlap between child maltreatment and adult domestic violence was mentioned. The majority of studies reviewed

indicated that in 30 to 60 percent of families in which child maltreatment or adult domestic violence was occurring the other form of violence also was being perpetrated.

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. This study reported data from the National Survey of Children's Exposure to Violence, a nationally representative telephone survey of the victimization experiences of 4,549 youth aged 0-17 years old.

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See, e.g., Fantuzzo, J., Boruch, R., Beriama, A., Atkins, M., & Marcus, S. (1997). Domestic violence and children: Prevalence and risk in five major US cities. Journal of the American Academy of Child & Adolescent Psychiatry, 36(1), 116-122. This study is a secondary analysis of data from the Spouse Assault Replication Program (SARP) database, collected from police officers and 2,402 female victims of misdemeanor domestic violence in five U.S. cities (Atlanta, Charlotte, Miami, Milwaukee, and Omaha). Victims were interviewed twice about the domestic violence incidents, and household demographic data from the SARP households were compared with census data from each city.

Margolin, G., & Gordis, E. B. (2003). Cooccurrence between marital aggression and parents' child abuse potential: The impact of cumulative stress. Violence and Victims, 18(3), 243-258. This study reported data from 177 volunteer families in a large metropolitan area using parents' self-reports to measure spousal aggression, child abuse potential, financial stress, and parenting stress. 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. This study reported data from 519 reports of parental child abuse in 441 families in Cedar Rapids, IA using child protection assessment narratives, child protection service authorization forms, and police reports to measure the presence of domestic violence. Tajima, E. A. (2004). Correlates of the co-occurrence of wife abuse and child abuse among a representative sample. Journal of Family Violence, 19(6), 391-402. This study analyzed data from a subsample of 2,733 households from the 1985 National Family Violence Survey in which respondents were married (or living together) and had at least one child under the age of 18. The survey used the Conflict Tactics Scale, a widely used instrument in research on family violence, and demographic information to identify risk factors associated with the co-occurrence of wife abuse and physical child abuse.

Margolin, G., & Gordis, E. B. (2000). The effects of family and community violence on children. *Annual Review of Psychology, 51(1)*, 445-479. This review examined theoretical and empirical literature on children's reactions to child maltreatment, community violence, and inter-parental violence.

Hughes, H. M. (1988). Psychological and behavioral correlates of family violence in child witnesses and victims. American Journal of Orthopsychiatry, 58(1), 77-90. This study reported data from 55 abused and 40 non-abused child witnesses to parental violence temporarily residing in a battered women's shelter and 83 comparison children on measures of self-esteem, anxiety, depression, and behavior problems using mothers' and children's self-reports. Hughes, H. M., Parkinson, D., & Vargo, M. (1989). Witnessing spouse abuse and experiencing physical abuse: A "double whammy"? Journal of Family Violence, 4(2), 197-209. This study reported data from 40 abused and 44 non-abused child witnesses to parental violence temporarily residing in a battered women's shelter and 66 comparison children on measures of anxiety, depression, and behavior problems using mothers' and children's self-reports.

McCabe, K. M., Hough, R. L., Yeh, M., Lucchini, S. E., & Hazen, A. (2005). The relation between violence exposure and conduct problems among adolescents: A prospective study. *American Journal of Orthopsychiatry*, 75(4), 575-584. This study reported data from a subsample of 423 youth from the





Patterns of Care study, which drew a stratified random sample of high-risk youth receiving services from public service sectors in San Diego County, CA.

Sternberg, K. J., Baradaran, L. P., Abbott, C. B., Lamb, M. E., & Guterman, E. (2006). Type of violence, age, and gender differences in the effects of family violence on children's behavior problems: A mega-analysis. Developmental Review, 26(1), 89-112. These researchers found that children experiencing a co-occurrence of maltreatment and exposure to domestic violence were 1.9 times more likely to have internalizing behavior problems and 1.5 times more likely to have externalizing behavior problems than were children who experienced only one form of violence.

Herrenkohl, T. I., & Herrenkohl, R. C. (2007). Examining the overlap and prediction of multiple forms of child maltreatment, stressors, and socioeconomic status: A longitudinal analysis of youth outcomes. Journal of Family Violence, 22(7), 553-562. This study reported data from 416 adolescents sampled from child welfare abuse and protective service programs in a two-county area of Pennsylvania.

Herrera, V. M., & McCloskey, L. A. (2001). Gender differences in the risk for delinguency among youth exposed to family violence. Child Abuse & Neglect, 25(8), 1037-1051. This study reported data from 129 youth exposed to family violence and 170 community youth in a midsize city in the southwestern U.S. using mothers' reports and youths' self-reports. Juvenile court records for these youth were examined five years later. While most of the



youth remained in the study region over the course of the study period, one limitation of the study is that it cannot account for juvenile court records that may have occurred outside of the original location (e.g., due to family/youth moving, etc.).

Cunningham, S. M. (2003). The joint contribution of experiencing and witnessing violence during childhood on child abuse in the parent role. Violence and Victims, 18(6), 619-639. This study used data from 2,889 individuals with at least one child under the age of 18 living in the home who participated in the Second National Family Violence Survey.

Appleyard, K., Egeland, B., Dulmen, M. H. M., & Alan Sroufe, L. (2005). When more is not better: The role of cumulative risk in child behavior outcomes. Journal of Child Psychology and Psychiatry, 46(3), 235-245. This longitudinal study reported data from 171 at-risk urban children using multiple informants and data collection methods to measure impact of cumulative risk variables (i.e., child maltreatment, inter-parental violence, family disruption, low socioeconomic status, and high parental stress) on adolescent behavior problems.

Holmes, M.R. (2013). Sleeper effect of intimate partner violence exposure: Longterm consequences on young children's aggressive behavior. Journal of Child Psychology and Psychiatry, 54(9), 986-995. This secondary data analysis of the National Survey of Child and Adolescent Well-Being reported data on 107 children under the age of three who had been exposed to intimate partner violence, and 339 children under the age of three who had never been exposed, using mothers' reports of child aggressive behavior and exposure to intimate partner violence.

Vu, N. L., Jouriles, E. N., McDonald, R., & Rosenfield, D. (2016). Children's exposure to intimate partner violence: A meta-analysis of longitudinal associations with child adjustment problems. Clinical Psychology Review, 46, 25-33. This meta-analysis reviewed 74 studies that examined longitudinal associations between children's



exposure to intimate partner violence and their adjustment problems. Wolfe, D. A., Crooks, C. V., Lee, V., McIntyre-Smith, A., & Jaffe, P. G. (2003). The effects of children's exposure to domestic violence: A meta-analysis and critique. Clinical Child and Family Psychology Review, 6(3), 171-187. This meta-analysis identified 41 studies examining the relationship of children's exposure to domestic violence and emotional and behavioral problems. It also identified four studies indicating a relationship between the cooccurrence of child abuse and exposure to domestic violence and emotional and behavioral problems.

Kitzmann, K. M., Gaylord, N. K., Holt, A. R., & Kenny, E. D. (2003). Child witnesses to domestic violence: A meta-analytic review. Journal of Consulting and Clinical Psychology, 71(2), 339-352. This meta-analysis examined 118 studies of the psychosocial outcomes of children exposed to inter-parental violence. Holmes, M. R., Yoon, S., Berg, K. A., Cage, J. L., & Perzynski, A. T. (2018). Promoting the development of resilient academic functioning in maltreated children. Child Abuse & Neglect, 75, 92-103. This study reported data from a secondary analysis of the National Survey of Child and Adolescent Well-Being, a national longitudinal study designed to assess the outcomes of children who have been abused or neglected. The study sample included 1,776 children between the ages of birth and five-years old who were not removed from their homes following investigation and who lived with their biological caregivers. Outcomes were measured using a combination of caregiver, child, teacher, and caseworker interviews and field observations to measure language/academic functioning, maltreatment, individual-level protective factors, relationship-level protective factors, and neighborhood-level protective factors.

Herrenkohl, E. C., Herrenkohl, R. C., & Egolf, B. P. (1994), Resilient early school-age children from maltreating homes: Outcomes in adolescence. *American Journal of Orthopsychiatry, 64(2), 301-309.* This study reported data from the second wave of a



longitudinal study using a subsample of 191 children in families receiving services from local child welfare agencies and 154 children from comparison groups using the Achenbach Child Behavior Checklist, a widely used tool for identifying problem behaviors in children, to measure child functioning.

Cicchetti, D., & Rogosch, F. A. (1997). The role of self-organization in the promotion of resilience in maltreated children. Development and Psychopathology, 9(4), 797-815. This study reported data comparing 133 maltreated and 80 nonmaltreated children (based on official child welfare agency records) who attended a summer day camp for low-income, disadvantaged children over three consecutive years. This longitudinal study examined a range of child behavior and other characteristics using child self-reports, peer evaluations, and counselor observations and assessments and school district records to measure child adaptive and personality functioning. A higher percentage of non-maltreated children were found to exhibit a wider range of resilience traits. Differential predictors of resilience were found in maltreated and non-maltreated children. Positive adult relationships were more influential in predicting resilience in non-maltreated children than maltreated children.





Levendosky, A. A., & Graham-Bermann, S. A. (1998). The moderating effects of parenting stress on children's adjustment in woman-abusing families. Journal of Interpersonal Violence, 13(3), 383–397. This study reported data from 60 sheltered battered women and their children and 61 nonsheltered women and children from the same community in southeastern Michigan using mothers' reports to measure children's adjustment, parenting stress, and domestic violence.

Kim, J., Cicchetti, D., Rogosch, F.A., & Manley, J.T. (2009). Child maltreatment and trajectories of personality and behavioral functioning: Implications for the development of personality disorder. Development and Psychopathology, 21(3), 889–912. This study reported data from 249 maltreated and 200 non-maltreated children who were followed longitudinally between the ages of six and ten using Department of Social Services records to determine maltreatment and camp counselor reports to measure ego resiliency and ego control and externalizing and internalizing behavior. Schultz, D., Tharp-Taylor, S., Haviland, A., & Jaycox, L. (2009). The relationship between protective factors and outcomes for children investigated for maltreatment. Child Abuse & Neglect, 13, 684-698. This study reported data from a secondary analysis of the National Survey of Child and Adolescent Well-Being. The study sample included 1047 children between the ages of birth and 14 years. Reports from children, caregivers, child protection workers, and teachers were used to measure protective factors (social competence, adaptive functioning skills, and peer relationships) and outcomes (externalizing behavior, internalizing

behavior, and reading competence). Rajendran, K., & Videka, L. (2006). Relational and academic components of resilience in maltreated adolescents. Annals of the New York Academy of Sciences, 1094(1), 345–349. This study reported data from the National Survey of Child and Adolescent Well-Being. The study sample included 816 adolescents and used child self-report, performance, and caregiver reports to measure social competence, academic achievement, and sense of relatedness to caregiver. Holmes, M.R., Yoon, S., Voith, L., Kobulsky, J., & Steigerwald, S. (2015). Resilience in physically abused children: protective factors for aggression. Behavioral Sciences, 5(2), 176-189. This study was a secondary data analysis of data from the national Survey of Child and Adolescent Well-Being. The study sample included 1207 children between the ages of four and ten years at the time their child protective services investigation was closed. The study used children's reports, mothers' reports, and caseworker reports to measure physical child maltreatment and protective factors (child prosocial skills, child internalizing well-being, and caregiver well-being) and outcome (aggressive behavior). Daigneault, I., Hebert, M., & Turigny, M. (2007). Personal and interpersonal characteristics related to resilient developmental pathways of sexually abused adolescents. Child and Adolescent Psychiatric Clinic of North America, 16(2), 415–434. This study reported data from 86 adolescents between the ages of 11 and 17 years of age who were investigated and confirmed as victims of sexual abuse by child protective services in Quebec, Canada. The study measured personal and interpersonal characteristics used to predict overall resilient functioning, and a composite resilience outcome score from measures of anxiety, withdrawal, social problems, attention problems, and aggressive behavior.

Hyman, B., & Williams, L. (2001). Resilience among women survivors of child sexual abuse. Affilia, 16(2), 198-219. This study reported data from 136 victims of sexual abuse in a major northeastern city who were brought to the city



hospital emergency department for treatment and collection of forensic evidence and interviewed at two separate times. The study used self-reports to measure a number of factors and mechanisms to predict competent functioning and a resilience scale operationalized as well-being in five essential spheres (psychological well-being, physical health, interpersonal relationships, absence of arrests, economic well-being). DuMont, K. A., Widom, C. S., & Czaja, S. J. (2007). Predictors of resilience in abused and neglected children grown-up: The role of individual and neighborhood characteristics. Child Abuse & Neglect, 31(3), 255-274. This study reported data from 676 cases of documented childhood physical and sexual abuse from a Midwestern county using official records, census data, psychiatric assessments and self-reports to measure predictors of resilience, including the stability of the respondent's living situation as a child, and success on multiple domains of functioning selected to demonstrate evidence of adaptation over time. Graham-Bermann, S. A., Gruber, G., Howell, K. H., & Girz, L. (2009). Factors discriminating among profiles of resilience and psychopathology in children exposed to intimate partner violence (IPV). Child Abuse & Neglect, 33(9), 648-660. This study presents findings from a multivariate cluster analysis of scores obtained from a sample of 219 children exposed to varying levels of intimate partner violence within one year.

Collishaw, S., Pickles, A., Messer, J., Rutter, M., Shearer, C., & Maughan, B. (2007). Resilience to adult psychopathology following childhood maltreatment: Evidence from a community sample. Child Abuse & Neglect, 31(3), 211–229. This study reported data from a subsample of 541 participants from the Isle of Wight study, a community sample assessed in adolescence and midlife. In adolescence, psychiatric disorder, peer relationships and family functioning were assessed; in adulthood, lifetime psychiatric history, personality and social functioning and retrospective reports of childhood sexual and physical abuse were assessed. Among participants who reported childhood abuse, the most important predictor of resilience to adult psychopathology was the presence of at least one parent who was rated as very caring. Edmond, T., Auslander, W., Elze, D., & Bowland, S. (2006). Signs of resilience in sexually abused adolescent girls in the foster care system. Journal of Child Sexual Abuse, 15(1), 1-28. This study reported data from 99 sexually abused adolescent girls living in a congregate living setting or in a family or foster care home situation in St. Louis County, MO. Trained graduate students interviewed participants to measure severity and type of child maltreatment; mental health and behavioral problems to determine resilience; and individual protective factors, family level protective factors, and community level protective factors. Girls with resilient trajectories had higher scores on the positive peer behavior measures and lower scores on the negative peer behavior and peer substance use measures.

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