CENTRE FOR RESEARCH ON VIOLENCE AGAINST WOMEN AND CHILDREN

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Evaluation of Groups For Children Who Have Witnessed Violence

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EXECUTIVE SUMMARY

Evaluation of Groups for Children Who Have Witnessed Violence

Witnessing wife assault has been shown to be very deleterious for children's emotional health and behavioural adjustment. Children who witness violence in the home suffer from depression, post-traumatic stress disorder, and anxiety at greatly elevated rates. They often are in conflict with adults and the law, and as teens they tend to run away from home and be truant from school. School achievement and social competence are lower in children who witness violence. Even very young infants have been shown to have very adverse reactions, as measured by physiological indicators, to verbal conflict alone. Infants exposed to violence may suffer from developmental delays, failure to gain weight, and excessive crying. Since the prevalence of children witnessing violence in the home is high, and their behavioural and emotional needs are great, it is unfortunate that until recently, support and treatment for these children has been largely non-existent.

The present study evaluated groups for children conducted by the Children's Aid Society of London and Middlesex, Madame Vanier Children's Services, and community agency volunteers. Thirty-one children aged 7-15, and their mothers/caretakers, completed a specially designed set of questions, both at pre-group intake and at the end of the final session. Groups ran 10 sessions, and had as their objectives: to increase the children's and teens' knowledge of safe behaviour during violent episodes; to encourage expression of emotions about the violence; to improve their own approaches to handling conflict with peers; and to improve their knowledge and attitudes with regard to woman abuse and excuses for violence.

Results showed positive satisfaction evaluations by both mothers and children/teens. For example, on a scale of how much the mothers believed the groups had helped their children, ranging from 1 (not at all) to 5 (a lot), 87 per cent of mothers rated the groups at 4 or 5. Ninety-two per cent of the children and teens rated the group 4 or 5, in terms of how much they liked the group, on a scale of 1 (not at all), to 5 (a lot). Children improved in their ability to identify abusive actions, and at post-test, far fewer indicated they would try to intervene in abuse episodes themselves. Fewer children condoned any kind of violence in relationships at post-test, and fewer children felt that children were the cause of abuse or parental fights. Children also improved in their strategies in interpersonal conflicts, and more children indicated they would use non-violent conflict resolution tactics. One area of potential improvement was identified, in that the mothers' rating of how much information they received was not all that high, and it appeared that some mothers would have welcomed further information.

It was concluded from the evaluation that the groups were successful in attaining their short-term objectives. Further research on longer term outcomes, a wider range of emotional and behaviour problems, and a focus on generalisation of the leanings of the group to other settings still remains to be done. The need for further research notwithstanding, the present results validate the worth of the groups, from both the children's, the mothers' and the researchers' perspectives.

Introduction

Background and Literature Review

Those who work on the front lines of service to battered women have long been aware of the special needs of children who accompany their mothers to women's shelters or refuges in times of crisis (e.g. Layzer, Goodson, & Delange, 1986). The prevalence of children adversely affected by witnessing violence is increasingly being recognised. For example, Kincaid (1982) estimates that there are between three to five children in each Ontario school class, on average, who witness violence in the home. Workers in children's mental health and youth justice are becoming more aware of this previously hidden issue (Sudermann, 1992).

Once one starts asking children questions about violence in the family (toward mother), it becomes apparent that the effects on children are profound. The effects are many-faceted and can include anger, extreme acting out, non-compliance with mother and teachers, depression, withdrawal. inattentiveness in school, problems in peer relationships and the use of power and control in interpersonal relationships (Jaffe, Wolfe & Wilson, 1990). Not all children will have the same effects, depending on the child and the situation involved. Post-traumatic stress disorder has been documented in a majority of children who have witnessed their mother being assaulted in the home (Lehmann, 1995).

There are arguably two phases which children go through in experiencing the effects of witnessing violence toward their mother: the crisis period and the more extended aftermath, which can extend into adulthood. For children who witness repeated violence over a long period of time, the two phases will be intermixed at times. Most studies of children who have witnessed violence have captured the acute or crisis effects, as the studies have often been done with children residing in shelters. No prospective, long term follow-up studies of children who have witnessed their mother being assaulted in the home have been carried out, to our knowledge. However, it would seem from the strength and salience of the immediate effects which have been documented that treatment for children soon after the abuse has occurred, or at least during the childhood and youth period, is very important in preventing serious longer-term effects (Jaffe & Sudermann, in press; Pepler, Moore, Mae & Kates, 1991). Some studies relying on a retrospective, client recall strategy have found that many batterers also witnessed their fathers beating their mothers (Dutton, 1988). Also, Mercer (1987) found that high school males who reported using verbal and physical abuse with teen dating partners were more likely to come from homes where they witnessed violence.

Group treatment for children of battered women has been described in the literature in a few instances (Jaffe, et al., 1990; Wilson, Peled, & Edleson, 1995; Wilson, Cameron, Jaffe, & Wolfe, 1986). However, few formal evaluations of such groups have been done to determine whether the goals of these groups are being met in the short term or at longer term follow up. The purpose of the present study was to provide a pilot study for such a group evaluation for short term results, and to obtain feedback for the researchers about the instrument which was created to begin the group evaluation process. The response of children and youth in school classes to the evaluation instrument was also collected to provide some normative, baseline information about the responses of children and youth in the general population.

Description of Children's Groups

The Community Group Treatment Program offers three types of group: child-only, parent-child and parallel integrated. Themes remain consistent for the three groups and all are 10 weeks long. Child-only groups do not involve participation from the mothers. In the parent-child groups, the mothers attend half of the sessions to support their children. In the parallel/integrated groups, the mothers attend the full 10 weeks.

The objectives of the groups include:

- a) Increasing the participants' adaptive functioning and remediating social-behavioural problems resulting from witnessing violence.
- b) Creating sufficient change to prevent violence in the child's future relationships.
- c) Ensuring that the child learns skills to keep herself or himself safe during any recurrence of violent episodes in their family environment.

One aspect of the group sessions includes identifying and expressing emotions surrounding violence, separation, blame, loss (e.g. family separation following abuse; moving from the family home and neighbourhood), and/or ambivalence. Another aspect involves an educative component designed to dispel destructive myths regarding violence in the family. Constructive conflict resolution strategies are taught to the children. Safety plans (in the event of renewed violent episodes) are formulated with the children, and information is provided on sources of community help in crisis. And finally, older group members receive information on teen dating violence, while younger participants deal with sexual abuse prevention/detection issues.

Where mothers are involved, the program emphasizes understanding the effects on children of witnessing wife assault so that they can meet the trauma needs of their children more effectively. Ages of children and youth served are 5-16, with children grouped according to age (5-7, 8-11, 12-16).

Hypotheses

Hypotheses of the present study were:

- 1) That children will increase their knowledge of safe behaviour during violent episodes between their parental figures and their knowledge of helping persons and agencies.
- 2) That children will improve their stated approaches to handling conflicts with peers and learn to use non-violent conflict resolution strategies.
- 3) That children will improve their knowledge and attitudes with regard to responsibility for violence and excuses for woman abuse, and will stop believing myths about wife assault.
- 4) That participants' appraisals of the groups will be positive, with regard to personal and psychological comfort in the group, as well as learning from the group.
- 5) That participants' mothers or alternate caretakers will appraise the groups positively, in terms of the participants' learning as well as, possibly, improvement in behaviour.

Since no standardized measures have been identified for the purpose of evaluating groups for children who have witnessed violence, a questionnaire was constructed by the investigators for this

purpose, and is appended. Participants were assessed immediately prior to and following group participation, (provided they gave consent, and provided their parents/legal guardians also gave consent). Non-participation in the assessment was <u>not</u> a barrier to group participation. Assessments were administered by the group coordinator (Sandra Miller-Hewitt) and, in some cases, with the assistance of the study research assistants. Children and youth who had difficulty reading questionnaires had the questions and response alternatives read to them. Some children (such as the 5 and 6-year-olds) were not assessed, due to reading/language issues.

Methodology

Questionnaires were administered immediately prior to the start of the groups, at an intake session with the primary group leader. Some older children filled in the questionnaires in small groups, with help as needed. The children's questionnaire was repeated at the last session, and the Children's Evaluation was also completed at that time. Mothers/caretakers either completed the questionnaire at the last session, when they attended, or they were visited at home by an experienced volunteer. Children and mothers were informed that they did not need to complete the questionnaires in order to receive service, but no refusals were noted.

The questionnaires and appraisal forms were intended to provide the group leaders and sponsors with considerable feedback on the clients' learning in the group, their perceptions of the process, and their suggestions for improvement.

Sample Description

The 31 children whose questionnaires were received ranged in age from 7-15 years. The average age was 11.6 years. Of these children 17 (54.8%) were girls and 14 (45.2%) were boys.

RESULTS

Post - Group MOTHERS' / CARETAKERS' EVALUATION

1. What did you like about your child's participation in the group?

Positive Comments

Very good.

They learned something about family violence.

I felt it would help him to understand about violence.

She didn't give any feedback but she did like going.

That he was with other children in the same situation and all were boys that seemed comfortable with each other.

He appears happier. He seemed really relaxed with the others.

For him to feel there are other children who have experienced similar situations and share same feelings.

I like how (name) got along with the other kids.

(Name) seemed to enjoy going to group. I hope that it has increased his sensitivity towards aggression and its results on the family.

The understanding of what abuse does to you and your family emotionally, physically and verbally.

He began to develop a level where we could identify and come to terms with his behaviour when he was angry and also talk to me if I got angry. <u>Great</u>.

It gave them a chance to express themselves. Also, to be around other children that witnessed abuse.

It forced us to talk about issues that are most times easier to ignore.

(Name) learned to know the difference between being assertive and being aggressive. He also learned to listen when someone was telling him he was being hurtful.

(Name) learned a lot about how to protect herself against violence.

Has given my children education and support

Educated her on the subject of abuse, and to put her with other kids the same.

Learned that violence isn't acceptable.

Becoming more understanding of violence, not blaming themselves.

Negative Comments

I was concerned because of the escalation in his violent behaviour. It seemed he was left hanging after the group's end.

2. How much do you think the group helped your child?

	a lot	a little		not at all	
	5	4	3	2	1
Percentage response	56.5	30.4	8.7	0	0

I think things will come out in the future that helped (name).

3. Have you noticed any change in your child as a result of participation in the group?

Yes No
Percentage response 73.9 26.1

If you answered yes, what changes did you notice?

Positive changes

Not as frustrated.

She doesn't hit her sisters as much.

Listen a little bit more. He has stopped throwing his temper around.

More aware.

There has been no physical abuse at home the last three weeks.

More aware of abusive reactions to certain situations - example threats.

(Name) behaves better.

At times (name) seems to handle difficult times easier, not with so much anger.

He has been able to identify abusive behaviour on many different levels.

They have been a lot freer and happier.

I noticed an increased awareness to issues involving violence / not necessarily changes in behaviour.

More understanding of violence against women and surrounding issues. They've both used some of the information in school projects.

More outspoken.

She avoids fights and resolves problems better.

More confidence and expresses her feelings a lot more.

Negative changes

His behaviour at home and school both became more violent.

4. How much information did you receive about what your child was learning and doing in the group?

 a lot
 a little
 not at all

 5
 4
 3
 2
 1

 27.3
 22.7
 45.5
 4.5
 0

Percentage response

5. What would you suggest should be done differently in future groups?

More frequent.

More information about how the children were doing in the group.

Perhaps there could be something for children in the group who show more difficulty in dealing with the encounter.

Everything was fine.

Spend a bit more time with the kids. Maybe spend 10 minutes at the end finding out what they accomplished. Time limit on how long each person speaks but not if they really have had a bad week.

Children working on shame and embarrassing feelings.

Nothing.

Teach the child about self-esteem, assertiveness, and making friends.

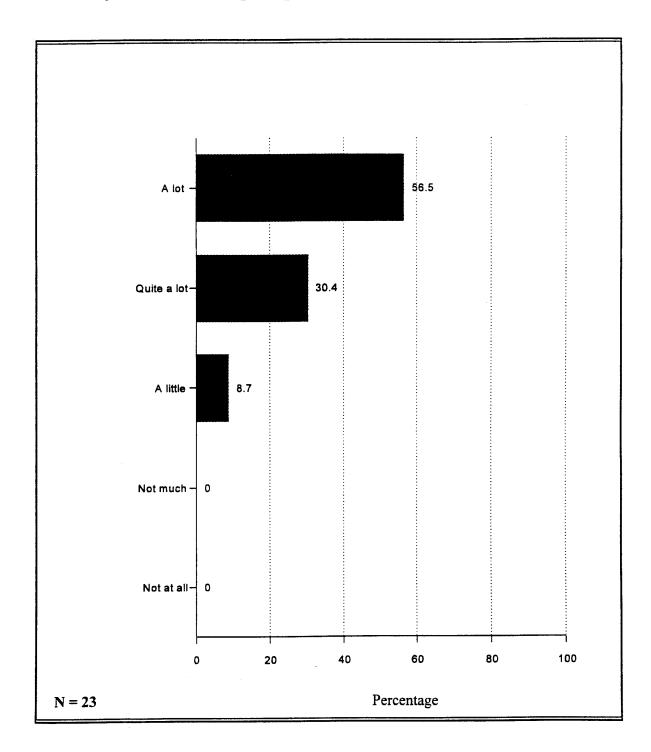
A time to discuss how the child will mimic the abusive parental behaviour in their own relationships.

An outline or overview of the weeks we're not here (parents).

I think everything was fine and am grateful for the CAS support of our family. This was their second time taking group and the re-inforcement was appreciated.

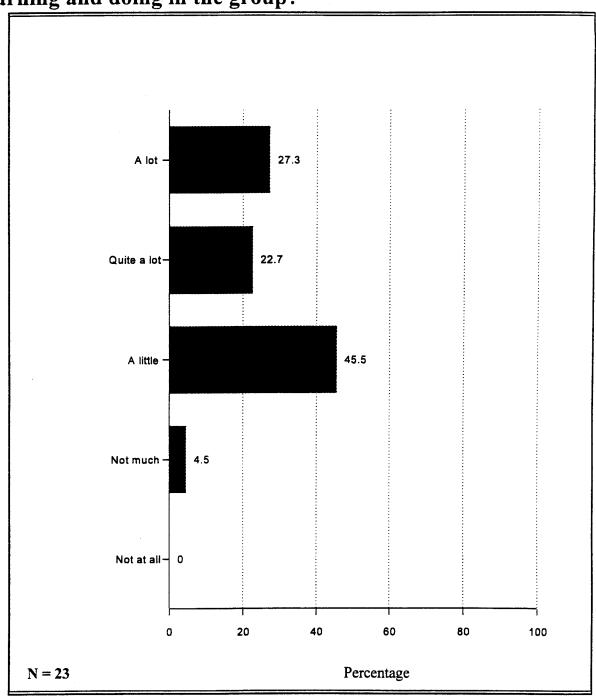
MOTHERS' EVALUATIONS

How much do you think the group helped your child?



MOTHERS' EVALUATIONS

How much information did you receive about what your child was learning and doing in the group?



Post-Group CHILDREN'S EVALUATION

1.	How much did your like the group?	a lot		a little		not at all		
		5	4	3	2	1		
	Percentage response	60.7	32.1	3.6	0	0		

2. What did you like about the group?

I liked the people.

Work sheets and snacks.

My friends.

Don't know.

Markers. It was fun. Snack.

Everything.

Expressing ideas, snacks, friends, skits.

Fun.

Snack time, discussions.

I liked talking about the stuff that happened in my life.

I learned a lot. Snacks.

What we did and what we learnt.

The food, the people, learning about the violence.

It was fun and you miss school. The food was good too.

The way we talk about woman abuse. Other guys getting along with others.

Snack and the stuff we talked about.

I liked learning about woman abuse. And the activities we did. It helped me a little.

Everyone was very cooperative. Also everyone was very friendly. I liked everyone.

Learned how to talk about personal feelings with other people.

Talked about violence. Can solve fights.

It helped me understand my feelings and the way I thought.

That I got to meet new people and refresh my memory of what we did in the first group.

Ripping apart (name). Homework. The food.

Talking out my problems.

3. What did you dislike about the group?

Talking about dads and moms and people.

Writing stuff down.

Nothing.

Liked everything. Had to miss stuff at school.

When I first came I felt kinda sad because I was scared.

Nothing.

Nothing.

NOTHING.

The classes were too short and there should be two classes a week.

Not enough snack.

Sometimes I didn't like how long we had to stay here.

It is sometimes boring.

Talking about what has happened at home.

Nothing except ____ talking a lot.

The time of day which it is on.

Some of the other kids' attitude.

Liked everything. Had to miss the play today.

The way some of the kids acted immature.

That the material was all the same as the first group.

No thing.

Nothing.

4. How much did you learn in the group?

	a lot		a little	not at all			
	5	4	3	2	1	•	
Percentage response	64.3	28.6	7.1	0	0		

5. Would you tell a friend who has problems in her or his family to come to this kind of group?

Yes No
Percentage response 92.9 3.6

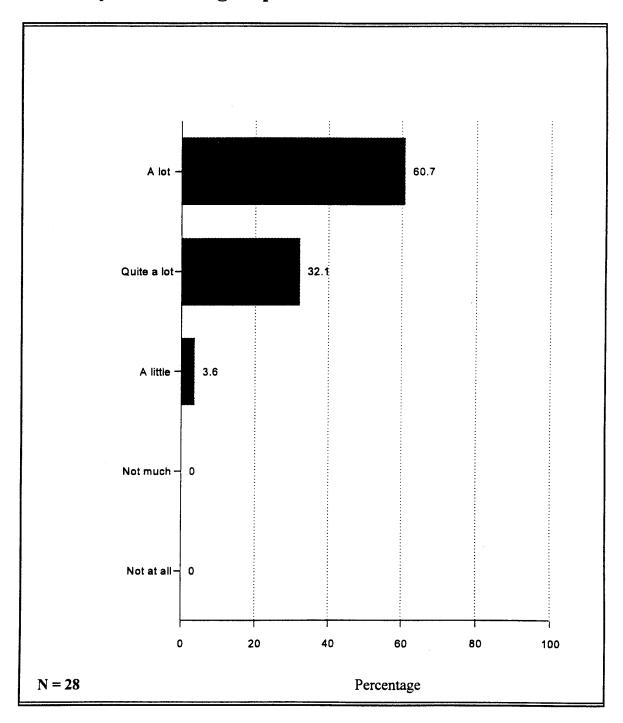
Unsolicited comments made by students in response to question #5.

I don't feel it changed my life any.

I have told one of my friends that gets abused.

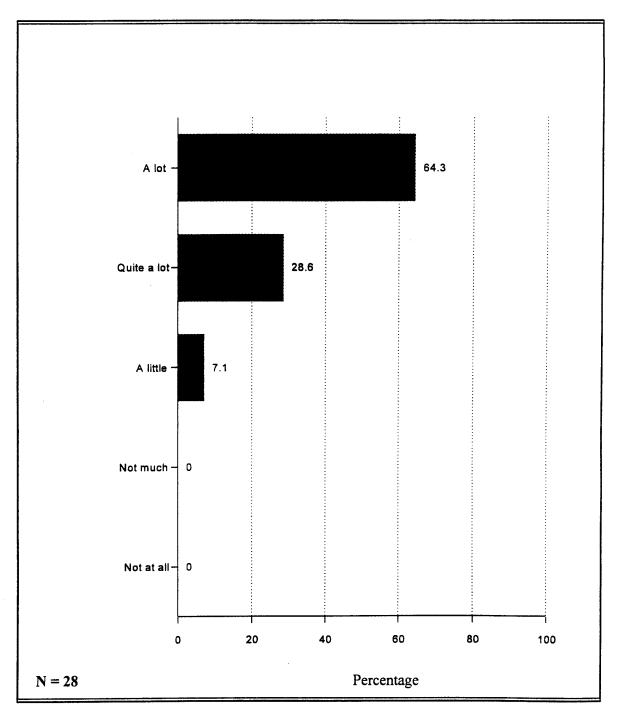
CHILDREN'S EVALUATIONS

How much did you like the group?



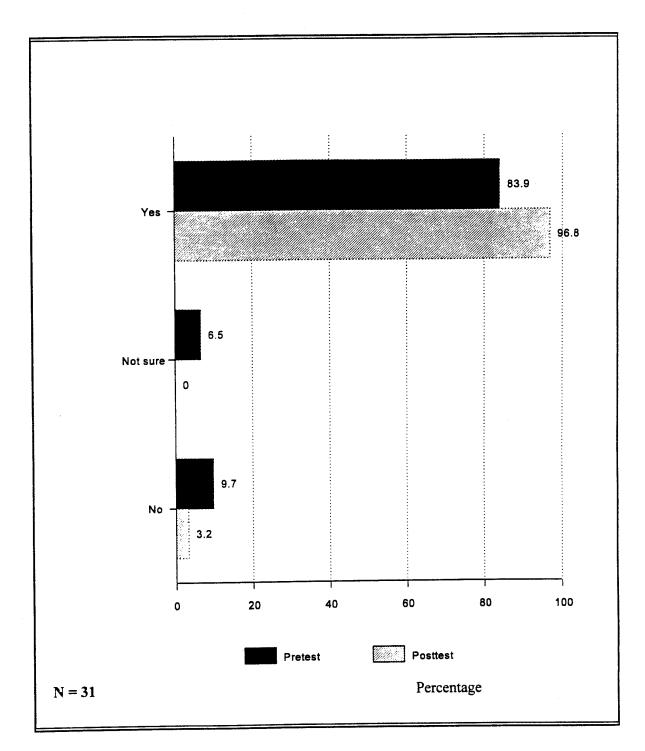
CHILDREN'S EVALUATIONS

How much did you learn in the group?

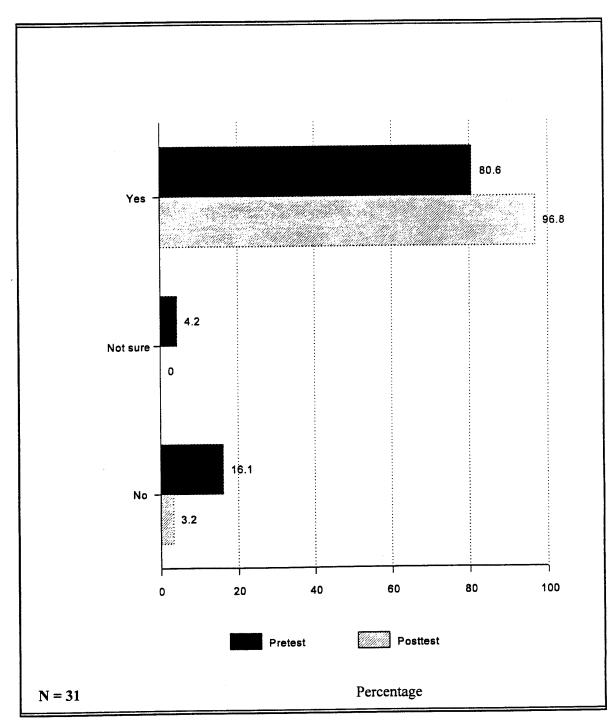


Children's Responses to the Questionnaire

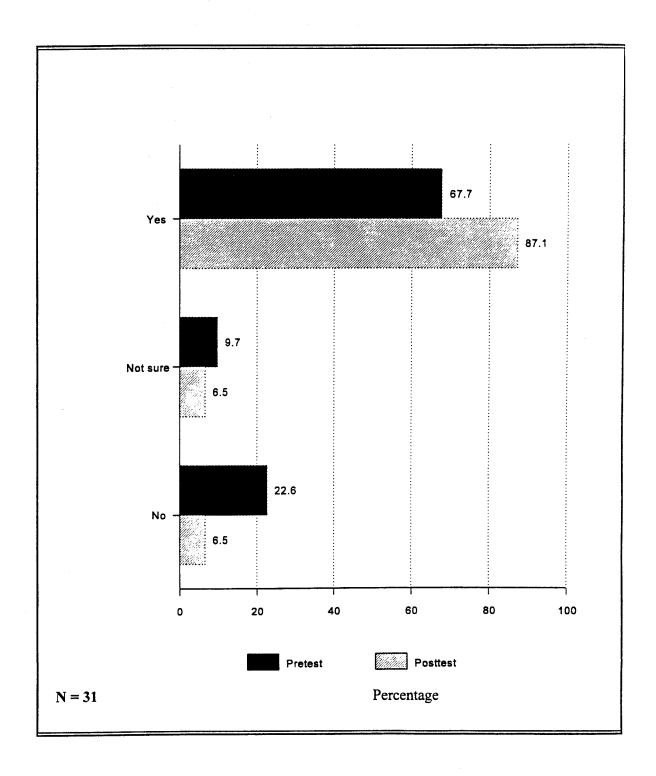
Hits with a fist.



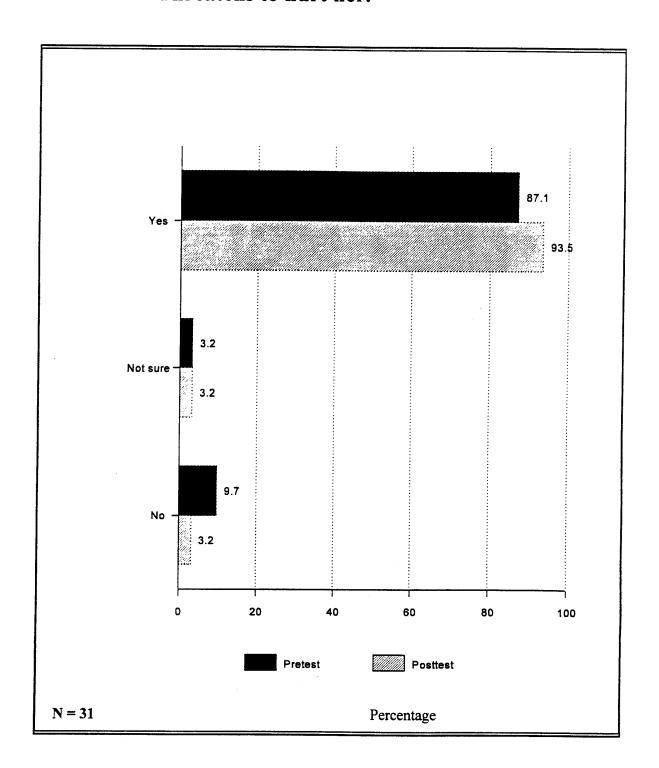
Slaps.



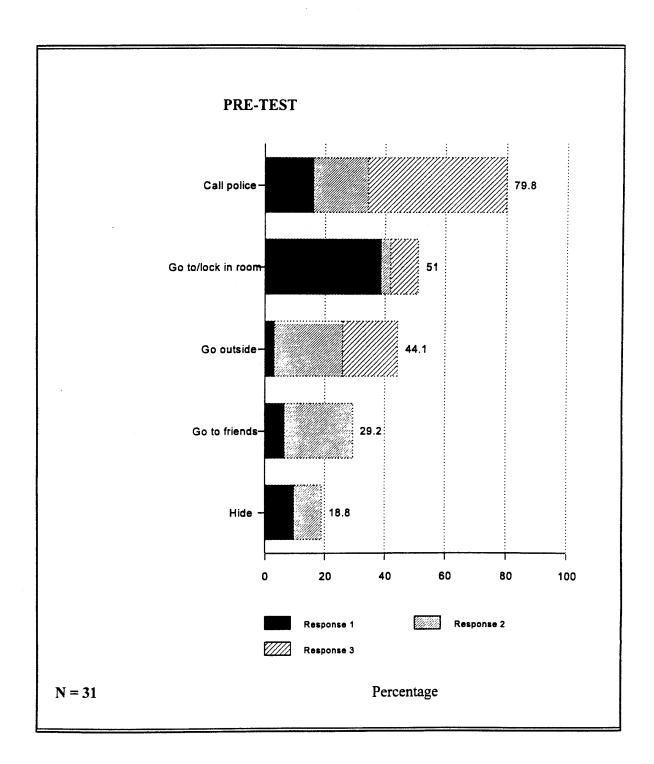
Calls names.



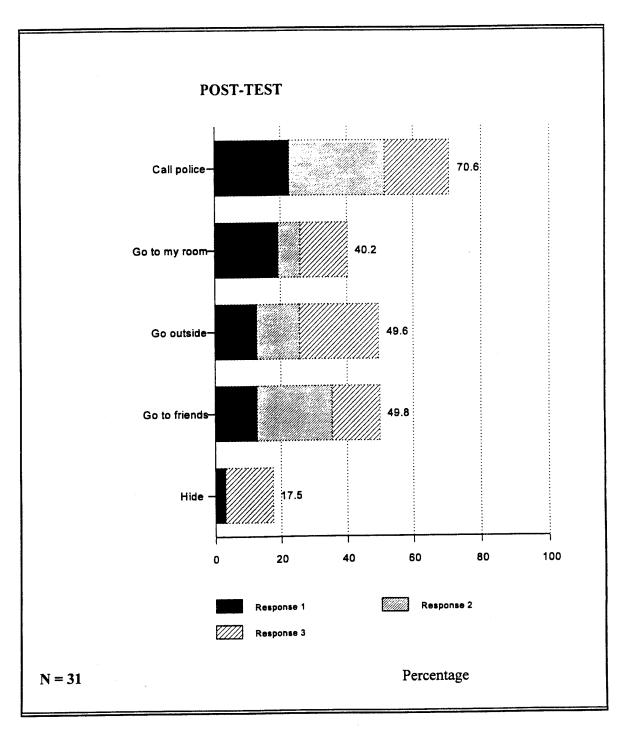
Threatens to hurt her.



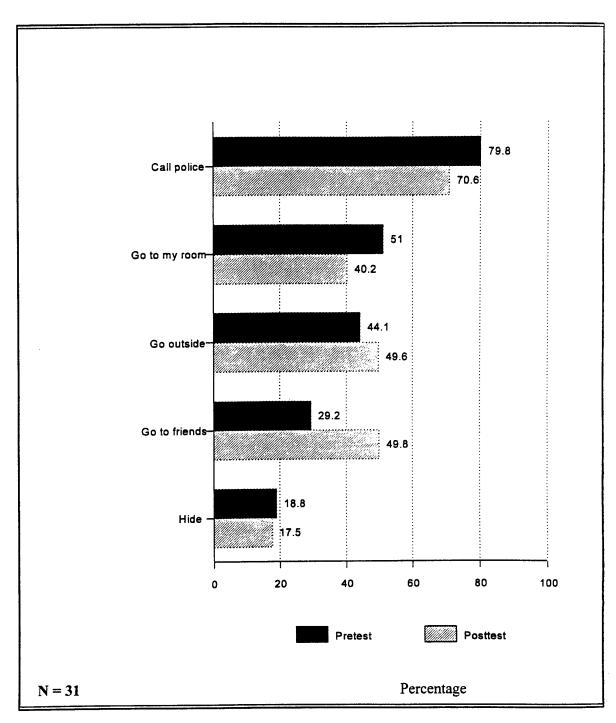
If the adults in your house were fighting what would you do to keep yourself safe?



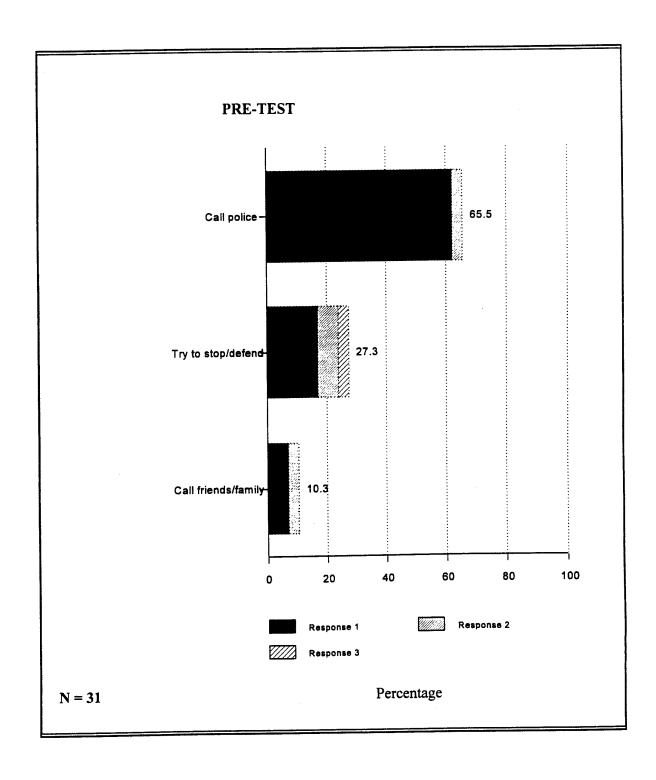
If the adults in your house were fighting what would you do to keep yourself safe?



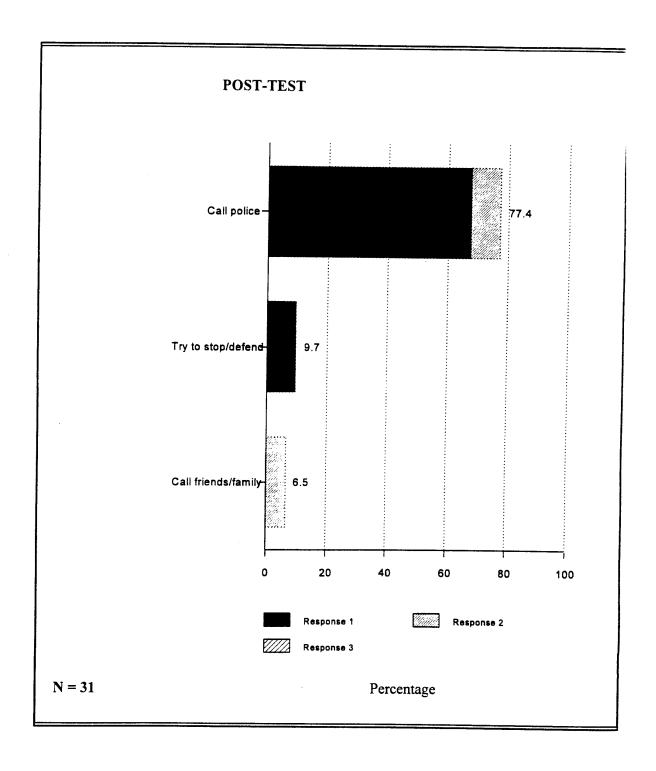
If the adults in your house were fighting what would you do to keep yourself safe?



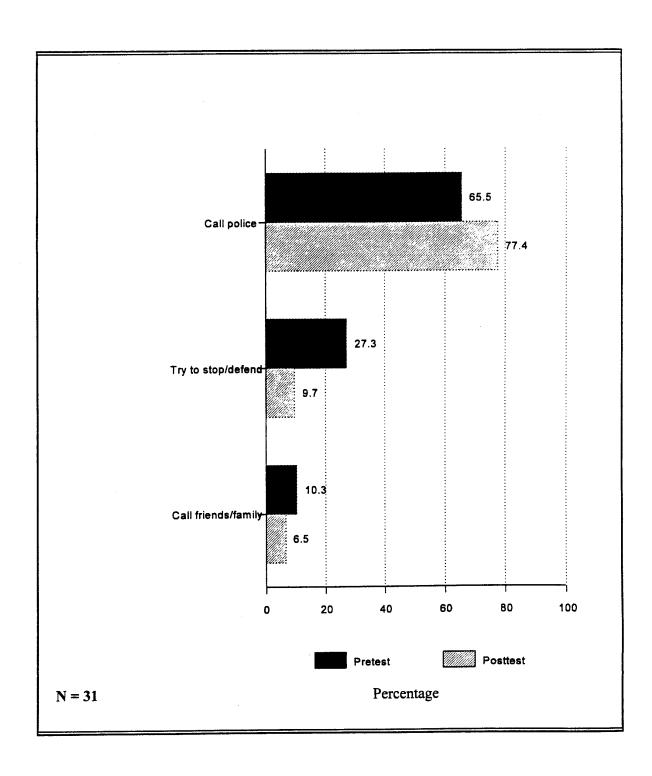
If someone tried to hurt your mom, what would you do?



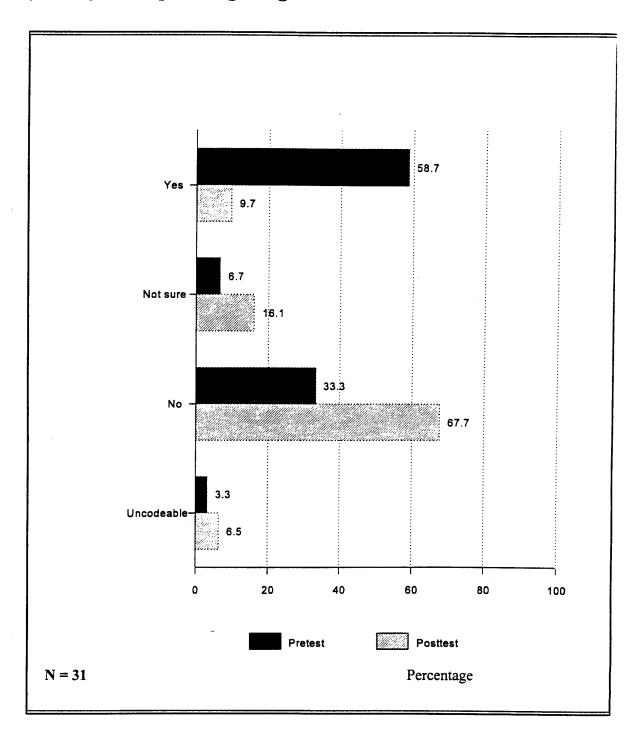
If someone tried to hurt your mom, what would you do?



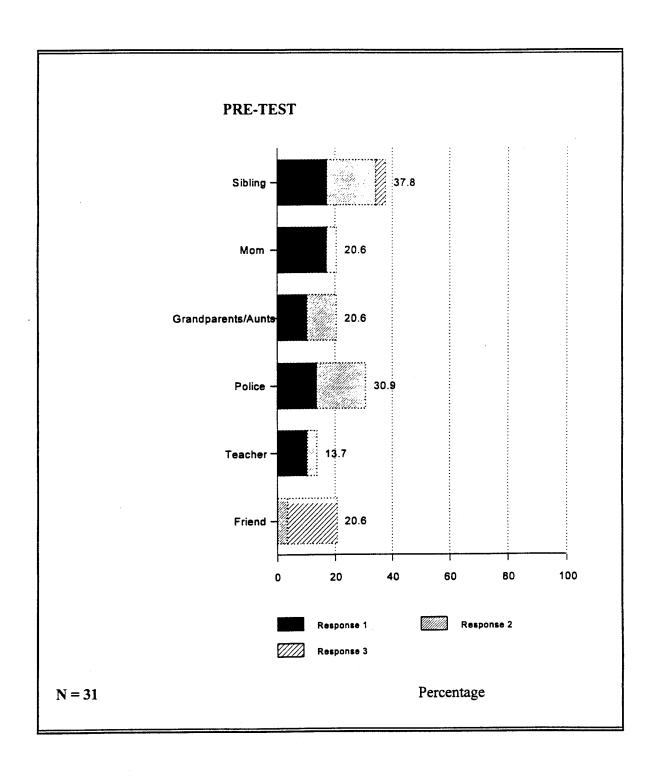
If someone tried to hurt your mom, what would you do?



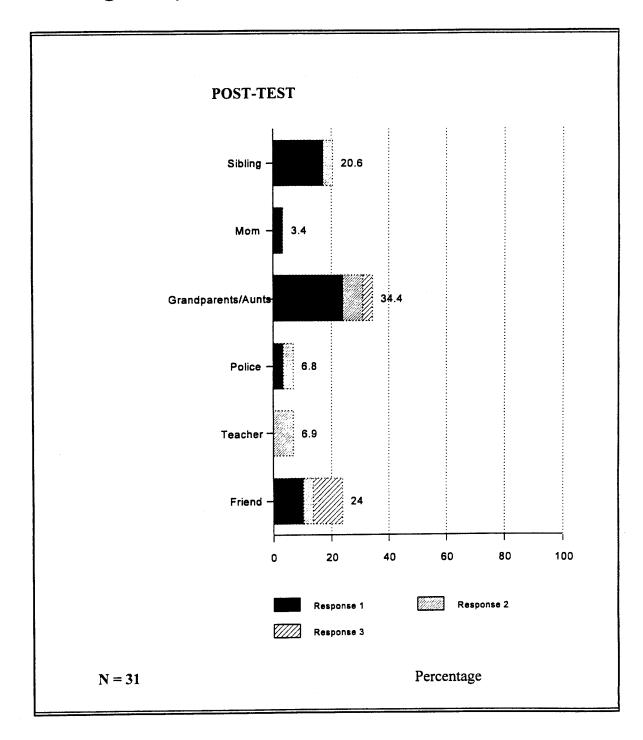
Would you try to stop the fighting?



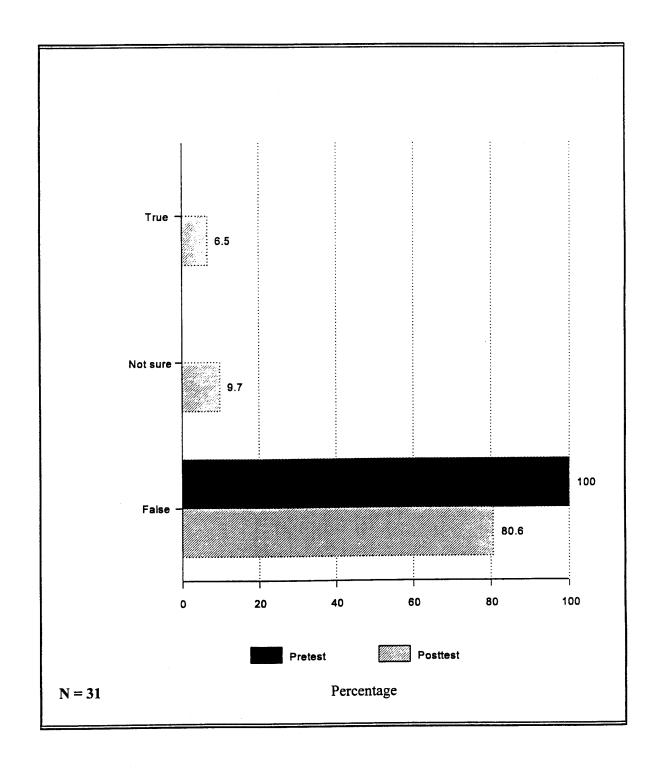
If there were fights in your family, who would you talk to?



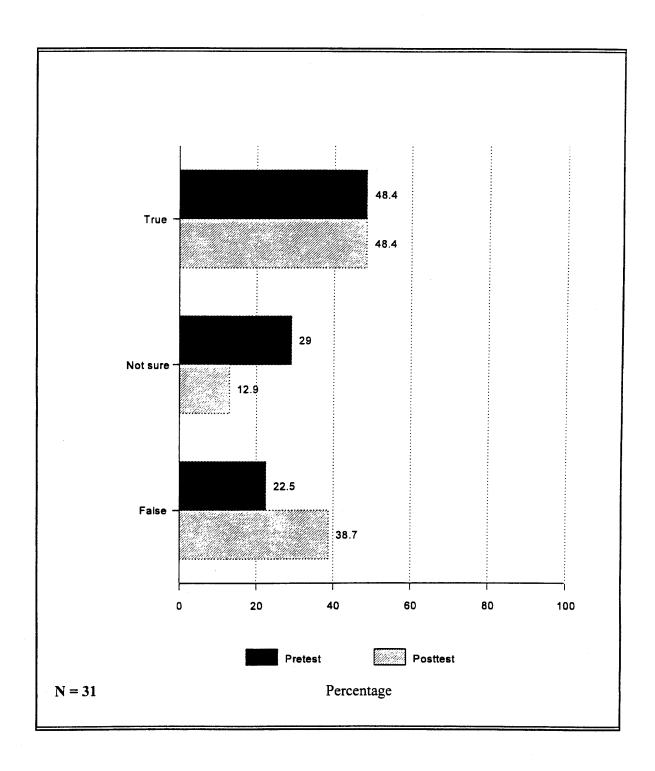
If there were fights in your family, who would you talk to?



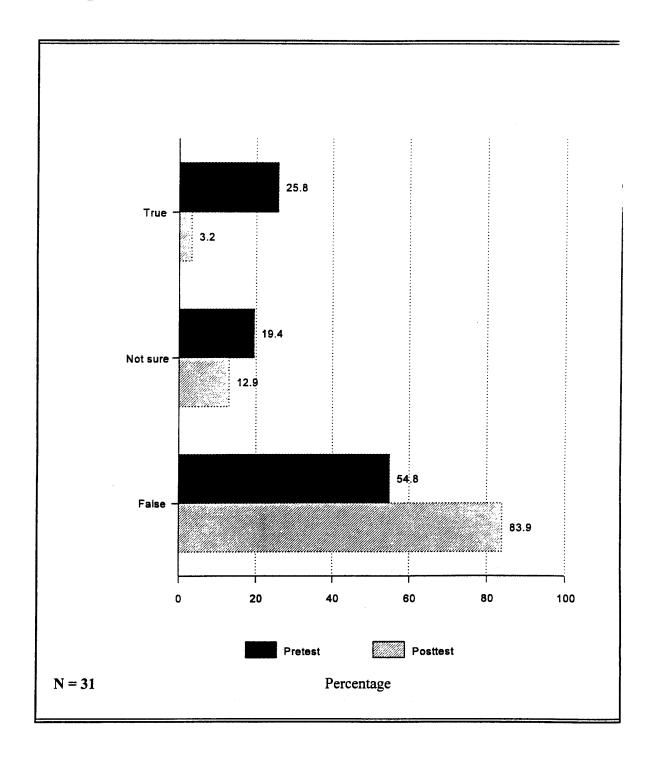
Some fighting and hitting (between a dad and a mom) is OK.



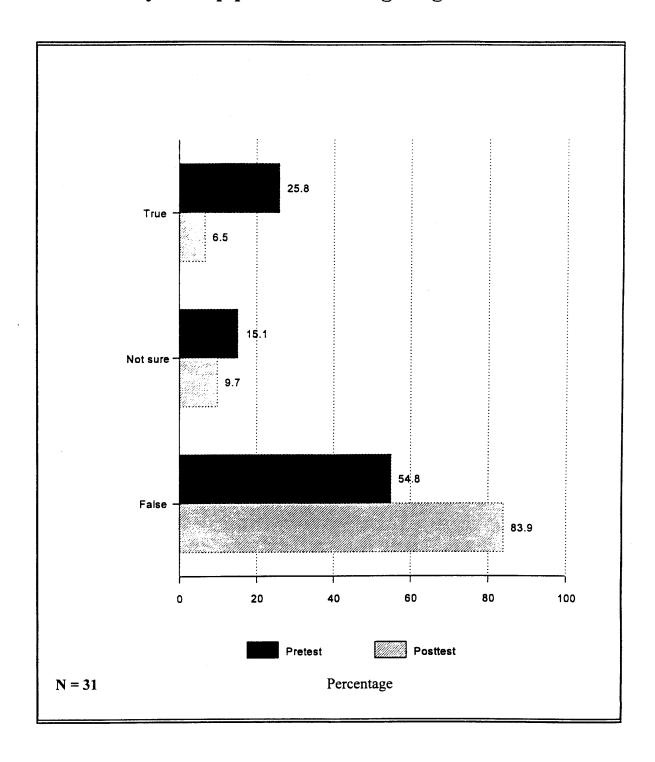
Alcohol or drugs cause woman abuse.



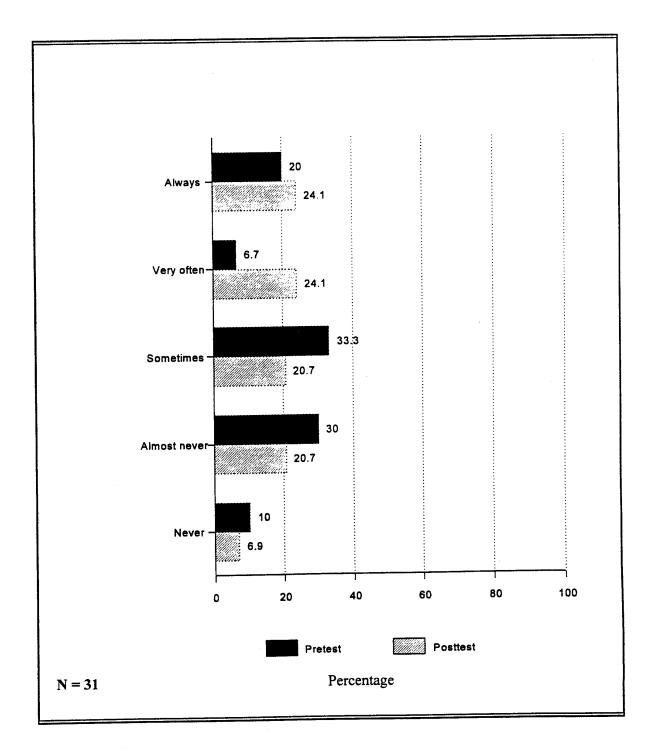
Sometimes the children are the cause of parents' abusive behaviour/fights.



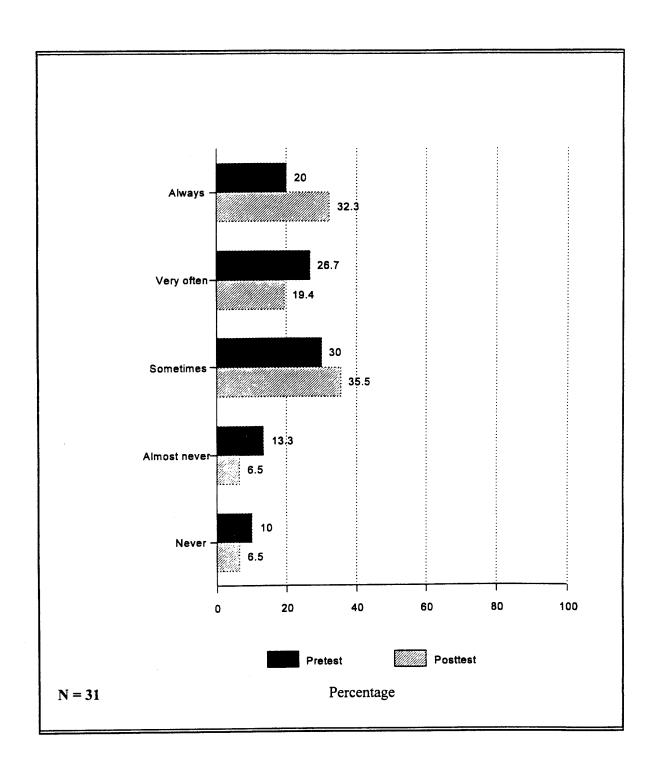
Children should try to stop parents from fighting.



When I am mad at someone, I always get help to settle the problem.



When I am mad at someone I go away and cool off.



DISCUSSION

The discussion will briefly address each of the hypotheses of the study, followed by more general observations about the results. Finally, directions for future research will be noted.

Hypothesis One: That children will increase their knowledge of safe behaviour during violent episodes between their parental figures and their knowledge of helping persons and agencies. This hypothesis was supported. For example, in response to the question, "If the adults in your house were fighting, what would you do to keep yourself safe?" more children at post-test mentioned leaving the house and going to a place of safety well away from the fighting (outside, friends' house). This was likely a result of the emphasis in the groups that the first thing children should do in situation of wife assault is to keep themselves safe and get away from their fighting. Similarly, on the question, "If someone tried to hurt your mom, what would you do?" on pre-test 27% said they would defend mom in some way, while at post-test, this had decreased to less than 10%. To the question "Would you stop the fighting?", 33% said "No" at pre-test, but 68% said "No" at post-test. To the question, "Would you try to stop the fighting?" 55% said "No" at pre-test, while 84% said "No" at post-test.

<u>Hypothesis Two</u>: That children will improve their stated approaches to handling conflicts with peers and learn to use non-violent conflict resolution strategies.

This hypothesis was supported. For example, the percentage of children who stated they got help to solve a problem went from 27% at pre-test (always or very often) to 48% at post-test. Similarly, at pre-test 20% responded that they would always go away and cool off when mad at someone compared to 32.3% at post-test.

Hypothesis Three: That children will improve their knowledge and attitudes with regard to responsibility for violence; will stop accepting excuses for violence; and will stop believing myths about wife assault.

This hypothesis was supported. On the items which deal with definitions of woman abuse, the percentage of children defining each act as abuse increased. For example, "Slaps", 81% at pre-test and 97% at post test defined this as abuse. Also, with regard to verbal abuse ("Call her names"), 67% of the children at pre-test and 87% at post-test defined this as abuse.

At pre-test, 100% of children replied "False" to the statement that "Some fighting and hitting (between a dad and mom) is OK," which is greater than the 81% who replied "False" to this item at post-test. We are not sure why this anomalous result occurred, and this points to the need for further study. Another notable finding was that more children understood that children were not the cause of parents' abusive behaviour and fights: 55% were clear on this at pre-test, and 85% after the groups.

<u>Hypothesis Four</u>: That participants' appraisal of the groups will be positive, with regard to personal and psychological comfort in the group, as well as learning from the group.

This hypothesis was supported. The children's appraisal of how much they liked the groups was extremely positive. Ninety-three per cent of the children rated their liking of the group at points 5 or 4 of the five-point rating, with fully 61 per cent rating it at the highest possible point (5). Also,

64 per cent rated their learning in the group as "a lot", with 29 per cent rating it at "quite a lot". Also, the quality of the children's comments as to what they like about the groups was quite detailed and often related the central content of the group, rather than more peripheral factors such as snack. One research committee member indicated that the specificity of the children's comments as to the group content had gone up significantly from a previous evaluation. Even with regard to suggestions as to what could be changed, many participants said "Nothing", or indicated that they wanted to have more group involvement.

Hypothesis Five: That participants' mothers or alternate caretakers will appraise the groups positively, in terms of the participants' learning as well as, possibly, improvement in behaviour. Mothers' appraisals were also very positive, with 87% of respondents rating the groups at 5 or 4 on a five point scale, and none rating the group at 2 or 1. Seventy four per cent of mothers rated their children as having changed as a result of the group, while only one noted this change to be in a negative direction. With regard to suggestions for change, these are listed in their entirety in the Results section. There were several very interesting and constructive suggestions (e.g. dealing with children's feelings of shame and embarrassment), while other comments related to process issues which arise in most groups (e.g. amount of time each person gets to speak in the group).

One area for potential improvement is the amount of information which mothers felt they received about the group. About 50% of the mothers indicated they received either "a little" or "not much" information about what their child did in the group. This may have reflected that some mothers did not participate in the groups, and were not given specific information routinely as the group progressed. This may be an area to work on, so that mothers can reinforce some of the learnings of the group, or learn some things themselves, in some instances. This might be addressed in future group design. However, it was not asked in this evaluation whether this was a drawback in the mothers' minds or not.

SUMMARY AND FUTURE DIRECTIONS

In summary, the goals of the groups appear to be met very well, as evaluated here. The participants' satisfaction ratings were very high and positive changes occurred in the children in the desired directions.

This study was conceived as a pilot study for a larger work. In future evaluations it might be desirable to include standardized measures of children's emotional and behaviour problems in general, as well as measures related to issues such as post-traumatic stress disorder, anger management, depression and adjustment at school and with family and peers. However, we do have to keep in mind the time constraints and attention spans involved for testing.

Future directions for research identified by the research group after the completion of this study included: expanding the evaluation with a larger sample in order to address a number of issues which the size of the present sample precluded. For example, issues to address include any differential effects and differential appraisals of the groups for girls versus boys; differential results and appraisals resulting from different levels of maternal involvement in the group process, and any differential effects or issues for different age levels of child and adolescent participants. The data analysis for a larger data set would also be enhanced by: reliability and validity study of the Children's Questionnaire; grouping the items into scales that have similar themes; and the use of inferential statistics to assess pre-post changes.

Many other research ideas present themselves in the context of this study, including the impact of the group on conflict resolution of these children in real peer and relationship situations, the overall longitudinal course of the adjustment of these children; and the ideal timing of group involvement with respect to the cessation (or non-cessation) of the abuse.

CONCLUSION

In conclusion, the present study represents one of the very few systematic evaluations of groups for children who have witnessed violence. The positive results here indicate that this is an important step in the development of responses to children who have witnessed wife assault.

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