



FDV and Children: A guide for clinicians

Impacts of family and domestic violence on children

Definitive research now shows that infants, children and adolescents living in a home where there is family and domestic violence (FDV), experience serious negative psychological, emotional, social and developmental impacts to their wellbeing. Children in families with parental conflict have poorer health, social and educational outcomes than children in families without parental conflict. Whether a child is present or not, they are impacted by family violence.

Research also shows that FDV affects unborn children. FDV often commences and/or intensifies during pregnancy and is associated with higher rates of miscarriage, low birth weight, premature birth, foetal injury and foetal death. Research also shows that family violence has a negative impact on the developing neural pathways of unborn children and can change the ways their brains develop. A carers own victimisation impacts on their ability to be emotionally available to their children which can adversely affect the child's ability to achieve secure attachment.

Many children continue to be affected by parental conflict and FDV after their parents separate.

The impact of FDV on children varies according to their age. The table below highlights different impacts from infancy through to adolescence.

Age of Child	Impacts of Family violence
Infants	<p>Infants living in a home where there is FDV may:</p> <ul style="list-style-type: none">• have disturbed sleeping and eating patterns;• show continuous and distressed crying;• have disruption to normal feeding and sleeping routines;• show early signs of maternal deprivation if the mother is too traumatised to be able to respond effectively to her baby's needs;• be under-weight;• have delayed mobility;• be very demanding or alternatively very passive;• acquire physical injuries from being held in a mother's arms whilst the mother is being assaulted;• show increased separation anxiety from their mother;• demonstrate a high level of aggression towards other infants.

<p>Pre-schoolers</p>	<p>Pre-school aged children living in a home where there is FDV may:</p> <ul style="list-style-type: none"> • display difficulty in playing alongside others without exerting control over the game or other children. This is often done aggressively by hitting, biting, screaming or hair pulling; • exhibit distrust of any new adult, and show reluctance to participate in normal social experiences; • not relate to the activities or interests of their age group; • show hypervigilance at any sign of conflict and may cower at raised voices; • exhibit frequent illness, severe shyness and low self-esteem; • experience adjustment problems e.g. when moving from kindergarten to school; • Boys tend to demonstrate aggressive behaviour more than girls; and • Girls tend to internalise their stress by becoming clinging, anxious, withdrawn, passive and overly compliant.
<p>Primary School age</p>	<p>Primary school aged children may:</p> <ul style="list-style-type: none"> • see the use of violence as acceptable to gain control over a situation; • be more likely to be able to express their fears and anxieties regarding the violence occurring, however may lack the trust in others to do so safely; • have problems with school work, difficulty concentrating, and lowered performance in class; • display bullying behaviour and poor social skills; • display depression, withdrawal and anxiety in new situations; • avoid peer relations; and • self-harm.
<p>Adolescents</p>	<p>Some of the potential effects for adolescents living with family violence are:</p> <ul style="list-style-type: none"> • they may see violence as an acceptable and normal part of having a relationship which can increase in aggressive behaviour including assaulting their family members (mimicking the perpetrator's behaviour); • Depression and/or anxiety; • At greater risk of being homeless (running away from home to avoid conflict); • substance abuse • seek solace in a relationship outside the family, which may also be abusive. • early school leaving



Identifying a child exposed to FDV

Identifying a child exposed to FDV can be achieved through:

- observing the child over a period of time;
- observing interactions between the parents that indicate a significant power differential between them (such as the father not allowing the mother to speak and/or belittling her comments or opinions);
- observing interactions that indicate that one parent is fearful of the other; or
- self-disclosure by the child or the parent

If you suspect a child may be exposed to FDV or at risk, you should always consult with your Manager and/or a specialist FDV service such as the Women's DV Helpline, or 1800 RESPECT. For further guidance, refer to the ***Guidelines for Protecting Children 2020***.

Supporting a child

A child or young person who is living with family violence may have a very hard time talking about it. They may be confused, feel guilty, distressed or become detached. They may be afraid of how the health professional will react and what might happen next. They may be afraid that they'll get in trouble and they will probably ask you to keep it a secret.

However, you can't always promise confidentiality. If you have formed a belief that a child has been or is currently experiencing sexual abuse and you are a Mandatory reporter of child sexual abuse, then the law says that you must make a report to Department of Communities, Child Protection and Family Support (CPFS). If you realise that someone is in danger and the situation is serious, you will need to inform CPFS and possible WA Police (see section below).

When a child discloses they are living with family violence you can:

1. Reassure them by:

- Being patient, don't push them into talking
- Listening to what they're saying
- Showing them that you believe them and take them seriously
- Confirming that the violence is not okay and it's not their fault
- Telling them they've done the right thing by talking to you
- Thanking them for their bravery

2. Tell them:

If there is a fight, do not try to stop the fight yourself! Never get in the middle of a fight! The best way you can help someone is by calling someone else to come and help.

Getting in the middle of the fighting could be dangerous for you and for other people in your family. It's natural that you want the fighting to stop, but it's safer for you and your mum or the person being hurt if you do not get involved, and call for help.



3. Explain to them why you may need to speak to another adult:

- If you are a nurse or midwife then the law says that you need to report any concerns of child sexual abuse to Department of Communities.
- As a health professional we have a duty of care to make a report if we know someone is hurting them.
- Ask if it's safe to for you talk to the person who is being abused (if appropriate)
- Suggest talking to a school counsellor or a service (see suggestions below) that can help
- Check in on them regularly if you can.

4. Suggest developing a Safety Plan

Suggest a referral to a specialist youth service which could discuss their safety with them and assist in developing their own safety plan (see *Appendix 6: FDV Support Services* for referral options).

Things NOT to do:

- Don't judge a child or young person if they still love and care for their parent who is being abusive
- Don't expect them to be brave or tough
- Don't get angry if they show strong emotions
- Don't underestimate the value of your support
- It may be unsafe to intervene with the person being abusive or violent, you could potentially make the situation even more dangerous for the family or put yourself in danger.

Research shows that one of the strongest protective factors for children and young people experiencing family violence is a strong mother-child attachment. It is common for abusive fathers to undermine the relationship between the mother and child as part of their abuse. If you can do anything to support the mother to maintain her parenting abilities, mental health and assertiveness you will be helping the child to survive this experience.

When do I have to report to external services?

Children living in a family where there is FDV are ALWAYS impacted (regardless of whether they hear or see the violence) and therefore, the Department of Communities Child Protection and Family Service Support Division (CPFS) state that when there is violence occurring in a family with children, FDV is ALWAYS child abuse.

When children have been exposed to, or are experiencing FDV, sharing this information with CPFS is strongly recommended and a Child Protection Concern Referral Form should be completed. In addition, if there is reasonable belief a child has experienced or is at risk of sexual abuse, there is a legal requirement for nurses to report this to CPFS.

You have legal and policy obligations to report concerns for children's safety and/or wellbeing. For further guidance, refer to the ***Guidelines for Protecting Children 2020***.



Counselling and support services for children

See the information sheet *FDV Support Services* in the [FDV Toolbox](#) for a list of counselling and support services for children.

Useful Websites

www.youthsayno.wa.gov.au : For information and other services for children and young people who have witnessed or experienced domestic violence in their family or other relationships

www.Reachout.com

www.woah.org.au : information on ways to keep themselves safe including a tool which steps a young person through developing their own personalised safety plan.

www.AskIzzy.org.au : Ask Izzy can help you to find the services you need, now and nearby. It is free and anonymous, and you can find housing, meals, healthcare, counselling, legal advice, addiction treatment and a whole lot more. If you're on the Telstra mobile network, you can access Ask Izzy even if you don't have credit.

www.theline.org.au : advice for young people on dating, relationships.

References

Appendix 7: *Child Assessment Tool, MARAM Practice Guides and Resources*, Victorian Government, accessed 13/8/2019, <https://www.vic.gov.au/maram-practice-guides-and-resources>

Assessment for Family and Domestic Violence FDV951 form, WA Health

Domestic Violence Resource Centre Victoria, What's OK at Home?, www.woah.org.au accessed 13/08/2019

Fact Sheet 7: Impacts of family and domestic violence on children, Department of Communities, WA, <https://www.dcp.wa.gov.au/CrisisAndEmergency/FDV/Documents/2015/FactSheet7Impactsoffamilyanddomesticviolenceonchildren.pdf>, accessed 21/08/2019

Fourth Action Plan National Plan to Reduce Violence against Women and their Children 2010-2022, https://www.dss.gov.au/sites/default/files/documents/08_2019/fourth_action-plan.pdf accessed 14/08/2019

'*Seen but not heard: children who live with domestic or family violence*', adapted by Department of Communities, Child Safety and Disability Services, Queensland Government 2012

The impacts of Domestic and Family Violence on Children, Research Summary Factsheet, ANROWS, accessed 13/8/2019, https://d2rn9gno7zhxqg.cloudfront.net/wp-content/uploads/2019/01/19030333/ANROWS_Impacts-on-DFV-on-Children.2ed.pdf

This document can be made available in alternative formats on request.

© North Metropolitan Health Service 2020

