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Children as Witnesses of Family Violence: Needs Assessment with Program Implications

Beverly A. Seifert
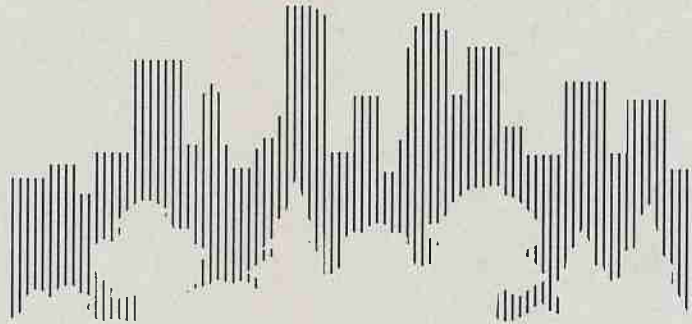*Augsburg College*

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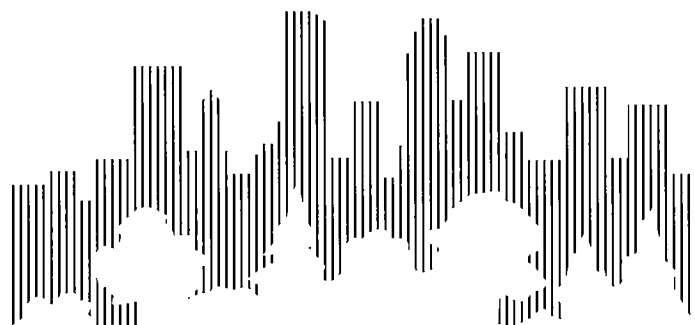
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Children as Witnesses of Family Violence:

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by

Beverly A. Seifert

A Thesis

Submitted to the Graduate Faculty

of

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in Partial Fulfillment of the Requirements

for the Degree

Master of Social Work

Minneapolis, Minnesota

April, 1996

MASTERS OF SOCIAL WORK
AUGSBURG COLLEGE
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CERTIFICATE OF APPROVAL

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has been approved by the Examining Committee for the thesis requirements for
the Master of Social Work Degree.

Date of Oral Presentation: _____May 13, 1996_____

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                Thesis Reader

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                Thesis Reader

ABSTRACT

CHILDREN AS WITNESSES OF FAMILY VIOLENCE:
A NEEDS ASSESSMENT WITH PROGRAM IMPLICATIONS

by
Beverly Seifert

April 1996

Women who are victims of family violence within a rural Midwestern county receive multi-faceted services from area service providers, while their children who witness family violence receive residual attention. It was the intention of this study to discern the needs of children in this population and to determine if a program of specialized services was indicated. Research for this study was done by interviewing key informants within the service delivery system to pinpoint the perceived physical, educational/cognitive, social, and emotional needs of this population. The findings indicated that there is a need for further services within the Goodhue County area. A program to address these needs would include some of the recommendations developed as a result of this study.

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CHAPTER I

INTRODUCTION: STATEMENT OF THE PROBLEM

Background of the Problem

Recognizing a need for a temporary housing program for women who are considered homeless, in the fall of 1991 the Red Wing Area Coalition for Transitional Housing developed the scattered site program. In this program women can reside up to seven months while receiving supportive services weekly as they move toward more permanent housing and independence. Applications for this program exceeded the supply of housing, causing waiting lists to develop. Also, short-term, emergency housing was not able to be accommodated when women suddenly found themselves without adequate housing for any reason. Finding that this program was not meeting the needs of women needing emergency shelter, another housing option was offered in August of 1995 with the opening of a "shelter" known as the Women's Center.

The Women's Center

As a resource for homeless women with or without children, the Women's Center provides three levels of services to women with or without children who are homeless for any reason: (1) short-term emergency shelter (for up to 60 days), (2) service delivery (community resources to meet physical, emotional, social, and educational/cognitive needs of the woman), and (3) outreach (one year of supportive services for the woman following discharge).

According to Women's Center statistics, since the opening of the Center in August 1995, the total number of women who have been served with temporary shelter through February 14, 1996, is 46, and the total number of children during

this same period is 59. Of these totals, approximately 80% of the families seeking services are doing so as a result of family violence (Women's Center, 1996).

Issues of Family Violence

When homelessness and family violence overlap, it becomes much more difficult to determine the effects related to each phenomenon because of the inability to separate one incident from the other. In providing crisis assistance to women who are homeless, it is essential to be cognizant of the issues of family violence as they may relate both to women and their children.

According to Jaffe, Wolfe & Wilson (1990), women in North America are more likely to be killed by their partners than by anyone else. A comparison of the magnitude of this killing in relationship to a war is shown by statistics indicating that the United States lost 39,000 soldiers in the line of duty in the Viet Nam War while during the same time period (1967-1973) 17,300 American women and children were killed by members of their families (Grusznski, Brink, & Edleson, 1988). Throughout the literature, it is stressed that children's witnessing violence within families places them at great risk.

There are many ways that children may be detrimentally affected when there is violence within the family (Hershorn & Rosenbaum, 1985). It is suggested that they are at risk of both physical abuse (McKay, 1994) and emotional abuse, displaying itself as increased internalizing and externalizing behavior and decreased social competence (Jaffe, Wolfe, Wilson & Zak, 1986a).

It is further hypothesized that the effect of witnessing violence increases the child's learning of violence through modeling (Hurley & Jaffe, 1990), the likelihood of employing violence as a means of conflict resolution in later relationships (Rosenbaum & O'Leary, 1981), and the risk of violence towards

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one's own children (Pagelow, 1990; Salzinger, Feldman, Hammer & Rosario, 1992).

These issues point out that it is imperative to gain an understanding of the effects of witnessing violence on children, both in the short-term as well as the long-term.

Definition of the Problem

The problem to be studied is that of the unmet physical, educational/cognitive, social, and emotional needs of children who witness family violence and who receive services from Goodhue County area service providers. It is postulated that the services provided are designed to assist the woman to self-sufficiency, and that children are not served directly through appropriate services to address their needs. Instead, they receive residual attention as the focus is placed on the woman.

The mother is assisted in her choice either of leaving the abusive situation and establishing herself and her children independent of the relationship, or of remaining in the relationship and obtaining the needed resources to keep herself and her children safe. Focus may also be placed on the perpetrator/abuser, as services are designed to address his physical, educational/cognitive, social, and emotional needs, especially as they relate to the violence within the family. According to systems theory, it is further postulated that a focus on the family unit would be more appropriate, rather than a fragmented system that addresses only one family member at a time.

It is the intention of this study to discern the needs of children who witness family violence, especially focusing on those families receiving services from various Goodhue County area service providers. If the results of the study

indicate a demonstrated need for a program of specialized services for this specific population, some insight into the designing of such a program would be offered as well.

CHAPTER II

LITERATURE REVIEW

The focus of this review is the clinical symptoms exhibited by abused children, and how such symptoms relate to their family context and the nature of their

kammerstrom, Sandra

g Family Violence on Children

t fifteen years there has been a scarcity of information

)w violence within the family affects children. Research

far form an elementary understanding of the issue.

the earliest research for yielding inconsistent results and

ological weaknesses, including using a convenience

:porter (usually the mother), and failure to use an

Spaccarelli, Sandler & Roosa, 1994). However, there is

n the range of problems reported throughout the

fect that witnessing family violence plays on children, the

g

are observed in four major areas of functioning:

and somatic concerns, school-related problems, socioemotional development, and interpersonal behaviors. Following is a breakdown of problems by area of functioning:

1. health and somatic problems
   * headaches, stomach aches, diarrhea, ulcers, and other intestinal problems
   * asthma

* enuresis
* sleeping difficulties (insomnia, sleepwalking, nightmares, bedwetting)

2. school-related problems
    * truancy or attendance problems
    * poor academic performance
    * distractibility and inability to concentrate

3. socioemotional problems
    * excessive crying and extreme fear
    * confusion
    * tantrums
    * anxiety
    * depression
    * self-mutilation
    * low self-esteem
    * agitation

4. behavioral problems
    * aggressiveness and impulsivity (especially in boys)
    * withdrawal or extreme passivity and dependency (especially in girls) (Carlson, 1984; Pagelow, 1990)

It appears that children at various stages of development are differentially able to understand and cope with what is happening between their parents as a function of their cognitive abilities and resources for adaptation. Younger children (toddlers and preschoolers) with very limited cognitive and verbal skills appeared to display somatic complaints and regress to earlier stages of functioning. Among latency-age children, sex differences were apparent in that males displayed more aggressive disruptive behavior along with temper tantrums, while females continued to have somatic symptoms and were likely to become withdrawn, passive, clinging, and anxious (Carlson, 1984).

As children become adolescents, both developmental and sex differences continue to be seen. Running away is quite common, especially among boys. Adolescents frequently will take sides during violent arguments, and harbor intense feelings of ambivalence toward both parents. It is not unusual for females

to develop extreme distrust which is generalized to all men, as well as to express negative attitudes about marriage. It is also reported that these girls tend to become victims of physical violence from their boyfriends as they begin to date, seeing such behavior as inevitable. Adolescent males may attempt to physically intervene in violent fights between parents in order to protect their mothers. It is also noted that males may begin to direct violence at their mothers, sisters, or girlfriends, engaging in behaviors that identify them more with their fathers (Carlson, 1984).

Several studies (Wolfe, Jaffe, Wilson & Zak, 1985; Jaffe, Wolfe, Wilson & Zak, 1986a; Hughes, 1988; Kempton, Thomas & Forehand, 1989; O'Keefe, 1994a; O'Keefe, 1994b; O'Keefe, 1994c; Wolfe & Jaffe, 1991) categorize children's adjustment by number of behavior problems (externalized and internalized) and level of social competence. Externalized symptoms include short attention spans, argumentativeness, demonstration of cruelty, bullying or meanness, and temper tantrums. Internalized symptoms include anxiety and depression, clinging to adults, and feelings that they need to be perfect. The majority of studies indicate that boys are more prone to externalizing symptoms, whereas girls are more prone to internalizing symptoms, while both boys and girls tended to show lower levels of social competence. However, more recent studies contradict these findings as they relate to boys' and girls' adjustment (Spaccarelli, 1994; Hershorn & Rosenbaum, 1985).

Child Abuse

The literature shows a substantial correlation between two potential stressors in children's lives--spouse abuse and child abuse. Rosenbaum & O'Leary (1981) observed that there is an estimated overlap between these two types of violence between 40 and 60%, creating a "double whammy" (witnessing

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and experiencing physical violence)(Hughes, Parkinson & Vargo, 1989). For workers in the field of family violence, it seems evident that it is important to ascertain whether children have been physically abused, while for those working with abused children, it would be necessary to assess the presence or absence of spouse abuse in the home. Studies by Hughes (1988) and Hughes, Parkinson & Vargo (1989) have shown that the distress level of children who are abused-witnesses is significantly elevated from that of the comparison group, with nonabused-witnesses falling between the two.

Perpetuation of Violence

A major belief in the literature surrounds the relationship between childhood abuse and becoming an abuser, simply stated as "violence begets violence". The most common idea is that the child exposed to violence has a powerful model for the later use of violence in future relationships with spouse and children. There are few data bearing on the relationship between having been abused as a child and subsequent participation in a violent marital relationship. However, there was a strong tendency for husbands who had witnessed parental spouse abuse to repeat the abusive dynamic in their own marital relationship (Rosenbaum & O'Leary, 1981). Doumas, Margolin & John (1994) found that exposure to violence in the family-of-origin is associated with an increased likelihood of aggression with one's own children.

Summary

Children of couples where there is family violence may be especially predisposed to the development of behavioral and emotional problems for one or more of the following reasons:

1.   They are exposed to violent or violence-tolerant role models;

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2. They are exposed to marital discord as well as spouse abuse;

3. They must cope with the stress of both fear of injury to the mother and fear of being similarly victimized;

4. They may be victims of physical abuse by either or both parents.

The preferred conclusion would seem to be that behavioral and emotional problems in children are multidetermined and that parental marital turmoil may be an important factor whose effects may be either augmented or moderated by other factors (Rosenbaum & O'Leary, 1981).

Parenting, Custody & Visitation

Children living with their mothers during and after leaving an abusive relationship may have unmet needs, which their mothers find themselves inadequately prepared to meet. Experiencing feelings of exhaustion and lacking confidence and competence to cope with the demands of their life, mothers were unable to focus on the feelings or needs of their children (Henderson, 1993). Battered women may suffer from physical and/or emotional disorders and are likely to be exposed to other life stresses, such as financial and housing crises, that may contribute to impairment of parenting effectiveness (Wolfe, Jaffe, Wilson & Zak, 1985).

Mothers' parenting is also scrutinized in other ways. While still in the relationship, strategies are employed to divert the abuser and minimize the abuse to the woman and the children. When these efforts fail to protect the children, the mother becomes victimized by the system that charges her with "failure to protect", and removes the children from her care and into the care of the abuser (Hollander, 1993; Hart, 1992a).

One problem area is in relation to the ongoing contact between the children and their fathers. For the most part mothers did not oppose such contacts,

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believing that their children needed to see their fathers. However, children were enlisted to carry messages between the separated parents and were pressured to take sides, causing confusion and disruption (Henderson, 1990).

The decision to separate or divorce does not free battered women from continued threats and abuse, particularly if contact is maintained through child-visitation. Visitation can be an avenue to maintain power and control over the woman by the use of behaviors that threaten or intimidate the woman, heightening the fear for her own or her children's safety (Shepard, 1992).

According to the literature, it is paradoxical that during the same time period in which we have been learning more and more about the negative effects of family violence on children, the courts have been making changes that may not be in the best interests of the children. Some changes, in fact, may be extremely harmful, such as in the case of joint custody. Because joint custody requires cooperative decision making by parents about all significant aspects of their children's lives, it is inappropriate in cases where there is hostility and poor communication, and which places the former victim and her children at higher risk of future violence (Pagelow, 1990).

Similarly, mediation is recommended or ordered to resolve custody issues in many cases where there is a history of family violence, placing the woman who has been unable to protect herself from physical assault in a process of open discussion and negotiation with her abuser to reach agreement on the most important issue of her life--the caretaking and welfare of her children. Mediation is based on an official assumption that the parties come to the process with equal power and that both can express themselves and represent their own interests. Victims of family violence are intimidated by their abusers and may be incapable of asserting their own interests out of fear of retribution (Pagelow, 1990).

Only one study (Magana & Taylor, 1993) provided a workable mediation program that incorporated a protocol designed to balance the power between the victim and the perpetrator, to address issues of safety, to protect the couple from premature face-to-face negotiations, and to focus the couple on their children's needs. Jaffe, Wolfe & Wilson (1990) concluded that in most cases the children need some contact with their father (except where there is risk of harm to the child). The alternative of eliminating these families from the mediation process leaves the family without a structure for setting up the contact between the children and their father. This results in the parents entering into an arrangement that could be dangerous or accepting an inevitable loss of the children's relationship with their father. Both outcomes fail to meet the needs of the children (Magana & Taylor, 1993).

Current Services to Assist Children Who Witness Violence

The intervention models described in the literature share common goals: (1) to develop adaptive responses toward previous abusive experiences, (2) to learn effective problem-solving techniques for resolving interpersonal difficulties, (3) to increase self-esteem (Jaffe, Wilson & Wolfe, 1986; Wilson, Cameron, Jaffe & Wolfe, 1989), (4) to focus on attitudes toward relationships and responsibility for behavior, and (5) to examine the use of violence as an effective method for resolving conflict (Wilson, Cameron, Jaffe & Wolfe, 1989). Methods of intervention (children's groups, parenting groups, women's groups, men's groups, individual and family counseling) vary in their details of service provision, but share common characteristics. Most children's groups are conducted in 60-90 minute sessions once weekly, are co-facilitated by a male-female team, and are composed of children of similar maturity, intellectual functioning, and verbal ability. However, they may employ techniques of role-playing, mime, art, dance

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therapy, (Brygger & Edleson, 1987), brainstorming, relaxation techniques, affirmations, story composition, films, and books (Wilson, Cameron, Jaffe & Wolfe, 1989) in order to accomplish their goals. Most current services offered are related to the adults in the family (parenting groups, women's groups, men's groups, individual and family counseling), leaving children's groups and individual counseling (and family therapy where appropriate) the prevalent services for children.

Conceptual Framework

Basic Human Needs

According to Maslow's Hierarchy of Needs Theory (Zastrow & Kirst-Ashman, 1990), human behavior is motivated through a hierarchy of needs. "As people fulfill the most elemental needs, they strive to meet those on the next level, and so forth, until the highest order of needs is reached" (p. 336). In ascending order, these needs are as follows:

1. Physiological (food, water, oxygen, rest, clothing, shelter, health care)

2. Safety (security, stability, and freedom from fear, anxiety, threats and chaos)

3. Belongingness and love (intimacy and affection of friends, family and lover)

4. Self-esteem (self-respect, respect of others, achievement, attention and appreciation)

5. Self-actualization (displays acceptance of self, of others, and of nature; seeks justice, truth, order, unity, and beauty; has problem-solving abilities; is self-directed; has freshness of appreciation; has a richness of emotional responses; has satisfying and

changing relationships with other people; is creative, and has a

high sense of moral values)

An understanding of family violence depends on an understanding of this

theory of needs required for survival, both as it applies to adults and children. In

this study, a needs assessment will be undertaken to contrast the area needs with

those identified in the literature.

Social Learning Theory

Most of the literature regarding family violence is based on social learning

theory, especially that regarding group programs. Nichols and Schwartz (1995)

define social learning theory as:

> "a broad approach to human behavior, integrating principles
> from social, developmental, and cognitive psychology along with
> those principles of learning derived from experimental psychology.
> In social learning theory, environmental influences are still the
> primary concern, but private thoughts and feelings are also used to
> understand behavior. This framework takes into account the
> pervasive effects of social influences on behavior." (p. 325)

Zastrow and Ashman (1990) describe it as involving:

> "people's perceptions about different situations and their
> ability to distinguish between one and another. More credit is given
> to people's ability to think, discriminate, and make
> choices...Behavior is seen as occurring within a social context." (p.
> 77-78)

When applying this theory to family violence, the witnessing of violence between

one's parents is theoretically linked with child behavior problems by virtue of a

modeling hypothesis (Bandura, 1977). Boys model the aggression, girls the

passivity, of the same-sex parent, though there are notable exceptions to this

explanation.

Family Disruption Hypothesis

One way to understand the impact of violence is the family disruption hypothesis. According to this hypothesis, children are affected by the fallout of the violence, impact on their parents' effectiveness, changes in family residence, sibling distress, and the constant fear and confusion about the anticipated eruption of new incidences of violence (Jaffe, Hurley & Wolfe, 1990).

Stress Theory

Another closely related theory of family violence and its bearing on youth violence is stress theory. According to stress theory, violent behavior may develop as an alternate means of coping with intolerable stress. Most people are able to withstand normal amounts of stress throughout their lives, and endure abnormal amounts on occasion. However, high levels of stress throughout life put individuals to a severe test (Kratcoski, 1984).

Resiliency

Not all children who grow up in maritally violent homes are behaviorally disturbed, nor do all become involved in abusive relationships as adults. In fact, some children subjected to various traumas have fared quite well in relation to others experiencing similar stressors. Resiliency theory emphasizes that it is important to examine protective and vulnerability factors both in the individual child and the environment in order to explain the difference in functioning level in the face of adversity (O'Keefe, 1994a; Moore, Pepler, Weinberg, Hammond, Waddell & Weiser, 1990).

Summary

Though other theories may be applied to the discussion of family violence, the scope of this study will be limited to the aforementioned conceptual framework in seeking to understand the needs of this population.

CHAPTER III

METHODOLOGY

Purpose of the Study

The purpose of this study is twofold: First, to determine if there are unmet physical, educational/cognitive, social, and emotional needs of children who witness family violence in the Goodhue County area; and secondly, if the answer to the first question supports the need for the establishment of a program of specialized services to children who witness family violence, to determine what this program would look like.

Research Questions

The research questions to be addressed are as follows:

1.   Are there unmet physical, educational/cognitive, social, and emotional needs of children who witness family violence, and whose family may receive services from Goodhue County area service providers, as perceived by experts in the community?

2.   If the answer to Question #1 supports the need for the establishment of a program of specialized services to children who witness family violence, what would this program include?

Operational Definitions

Adult:	Person 18 years of age or older;
Children:	Persons under the age of 18;
Children of Battered Women:	Children who have repeatedly witnessed severe acts of emotional and physical

abuse directed at their mother by her intimate partner (Jaffe, Wolfe & Wilson, 1990);

Educational/Cognitive Needs: Need to develop the ability to learn and to think; involves the ability to take in information, process it, store it, and retrieve and use it (Zastrow & Kirst-Ashman, 1990);

Emotional Needs: Human needs of safety, security, attachment, and autonomy;

Family: One or more adults caring for at least one child under the age of eighteen (McChesney, 1992);

Family Violence: The presence of physically assaultive acts directed towards an adult member of a family unit, which includes a woman and at least one child under the age of 18 years;

Homelessness: Living in a shelter for the homeless, living in a vehicle or public place not designed for permanent residence, or actually living out-of-doors (McChesney, 1992);

Physical Needs: Basic human requirements for survival, to include food, clean water, clothing, shelter, and health care;

Social Needs: Human needs to interact with others to

form cooperative and interdependent

relationships (Merriam-Webster's ninth

new collegiate dictionary, 1990);

attainment of needs provides a support

system, as well as a sense of belonging,

connectedness, and usefulness.

Needs Assessment

This study is a needs assessment designed to better understand and respond to the perceived needs of children from families experiencing family violence and whose family may receive services from Goodhue County area service providers, whether through residential services or outreach services. The needs assessment was designed with two components:

1.   a review of the literature to examine the possible needs of the target population and how other providers respond to those needs, and

2.   the results of key informant interviews with area service providers conducted by the researcher to pinpoint perceived needs of area service delivery recipients.

Target Population

The target population chosen for this project consists of the families and children of family violence who receive services from Goodhue County area service providers. This population was chosen for several reasons:

1.   the multiple needs it presents (physical, educational/cognitive, social, and emotional).

2.   the loss of stability of residence or the imminent risk of same.

3.   the high incidence of family violence within the population.

4.   the perceived lack of specialized services presently being provided
      to this population.

If the results of this study support the need for the establishment of specialized services for this population, program design issues will be addressed.

Protection of Human Subjects

Though it would be most desirable to interview the clients receiving the services to elicit their own perceptions of their needs, the extremely sensitive and potentially harmful nature of doing so would dictate a less intrusive approach to obtaining this information. It was decided to instead focus on professional service providers as expert key informants who would be expected to be aware of the needs of children who witness family violence.

The individuals chosen to be key informants in this study were professionals in Goodhue County working in the areas of community mental health, public health, school social work, child protection, social services, court services, law enforcement, Native American family services, emergency medical services, and a women's shelter. Key informants were selected based on a purposeful selection process due to their position in the community and their knowledge regarding children's issues. All informants were either known personally by the researcher or recommended through referral from professional contacts the researcher knew in Goodhue County. Twenty individuals were identified as key informants for this study and were contacted by this interviewer. Eighteen informants responded to this request positively and were interviewed, yielding a 90% response rate.

Key Informant Interviews

Data was collected using structured, open-ended interviews to explore the key informants' perceptions of unmet physical, educational/cognitive, social, and emotional needs, the current systems providing services to meet those needs, and the need and/or usefulness of establishing a program of specialized services to children who witness family violence. The interviewing schedule was examined by twenty MSW student social workers who would be expected to possess a level of expertise in evaluation of instrument design. Slight modifications of the questions were made as a result of this examination. The interviewing schedule can be found in Appendix C.

Key informants were contacted by telephone to determine their willingness to participate in this study. Information regarding the nature of the study was presented to the key informant at this time and an interview date and time were established. All potential participants were informed that participation was voluntary and they could withdraw from the interviewing process at any time prior to or during the interview. Participants were also informed that their individual identity and all information gathered from the interviews would be kept confidential.

Where telephone interviews were anticipated, a letter of explanation and statement of consent were mailed to the informant. The statement of consent was to be returned to the researcher in a self-addressed, stamped envelope, and the letter of explanation was to be retained by the informant. However, no telephone interviews were conducted. Where in-person interviews were conducted, the statement of consent was obtained and a letter of explanation given to the informant at the designated interview time.

CHAPTER IV

FINDINGS

Eighteen key informants were interviewed during March and early April of 1996. These informants were employees within organizations that service families and children in Goodhue County. The agencies varied in their focus and ways they served children and families, and included social service agencies, law enforcement, health care providers, educators, and spiritual leaders.

Regarding the collective years of experience in working with children who witness family violence or their families, the total years of experience was 235.75 (169.75 of those years being within Goodhue County), the mean was 13.1 years, and the range was from 2.75 to 28 years. Key informants spend from two to seventy percent or their time in direct contact with children who witness family violence or their families, with the mean being 22 percent.

Respondents were provided with limited choices in questions 11, 13b, and 13c, while all other questions were given unlimited choices. The individual interview responses were collectively reviewed and summarized to determine common perceptions and needs. The themes of the summaries are presented within five categories: (1) determination of unmet physical, educational (cognitive), social, or emotional needs of children witnessing family violence; (2) identification of the three most pressing needs; (3) current services being provided to children or families experiencing family violence and their level of effectiveness; (4) identification of gaps in service provision to children who witness family violence; and (5) perceptions regarding further services to address unmet needs. These categories are directly correlated in response to the research questions of this project.

Physical/Educational (Cognitive)/Social/Emotional Needs

All informants indicated the presence of unmet physical, educational (cognitive), social, and emotional needs in children who witness family violence. When asked what the specific **physical needs** were, the responses included:

* Economic stability

* Health & dental care

* Clothing

* Safety

* Food

* Responsible parenting

* Shelter

* Supervision

These needs were generally viewed as being the easiest to address. The lack of food, clothing, or shelter was indicated by two respondents (11%) as not being a need that they witnessed. However, the remainder of those interviewed (89%) contradicted this response.

Responses to **educational (cognitive) needs** included the following:

* Failure to stay in school or graduate

* Truancy

* Underachievement

* Lack of healthy role models

* School absences due to domestic situation

* Inability to concentrate on school

* Lack of evaluation for EBD, SED, and mental health needs

* Not enough social workers in schools

* More curriculum in schools to address violence and appropriate

relationships

*   Acceptance by peers

*   Stability of school environment

*   Medical care

The consensus of opinion was that when children are experiencing family violence in the home, their ability to benefit from educational opportunities will be greatly compromised. However, in one respondent's opinion, school may be seen as a safe place that offers a more normal environment than the home, thereby allowing children to do well in school.

When asked about **social needs** of children experiencing family violence, responses were as follows:

*   Minorities have their culture taken away

*   Isolation from peers

*   Peer relationship problems

*   Removal from parenting role

*   Social and relationship skills

*   Role modeling of nonviolent behavior

*   Problem-solving and conflict resolution skills

*   Break the family secret rule

*   Develop appropriate defense mechanisms

*   Acceptance and belonging to a group

*   Significant relationship with healthy adult

*   Mentoring

Among those interviewed, it was believed that children experiencing unmet social needs were likely to be characterized as having behavioral problems. These problems may be demonstrated through a range of behaviors, from withdrawal on one end of the continuum, to aggressive and violent behavior on the other end.

There was also common agreement among respondents that these behaviors were the result of observation of parental behaviors.

Responses to **emotional needs** included the following:

* Self-esteem
* Resolution of contradictions around love and violence in relationships
* Nurturing and love
* Psychological evaluations in custody disputes
* Spirituality
* Confusion about loyalty to parents
* Freedom from psychological abuse
* Expression of feelings
* Trust
* Parental support and encouragement
* Recognition of feelings beneath anger
* Removal of the secret and shame
* Development of ego strength and resilience
* Development of intimacy
* Prevention of becoming rageful as adolescents
* Healing rituals
* Treatment of depression
* Accurate differentiation between Attention Deficit Disorder, Attention Deficit with Hyperactivity Disorder, and Emotional and Behavioral Disturbance
* Attachment
* Identity

The consensus of opinion among those interviewed was that emotional needs are the most intense requirements of children who witness family violence, if there were a rank order of the four areas under question.

Three Most Pressing Needs

Table 1 presents the responses to the question regarding the three most pressing needs of children who witness family violence. The most commonly identified needs among those interviewed are (1) safety, (2) nonviolence education and mentoring, and (3) listening and support.

Table 1

Three Most Pressing Needs of Children

Response	Number	Percent
Safety	12	67
Nonviolence education & mentoring	10	56
Listening & support	7	39
Rebuild family without violence	3	17
Early intervention	3	17
Belong to a family unit or group	2	11
Be loved	2	11
Engage in victim therapy	2	11
Other responses	1	6

<u>Effectiveness of Current Services</u>

When asked about objectives within the agency in serving the needs of children who witness family violence or their families, those interviewed indicated multiple goals and objectives. However, stated objectives appeared to fall within three main categories: (1) prevention, (2) education, and (3) intervention, with the most responses falling within the intervention category.

In response to the question regarding the effectiveness of their agency's services in serving the needs of this population, the results were clearly positive. Sixty-seven (67) percent rated their agency as fairly effective to very effective in meeting their objectives. Twenty-seven (27) percent rated their agency negatively, and six (6) percent were not able to respond at all. The general perception was satisfaction with the effectiveness of service provision within the respondent's own agency.

It was also estimated by 56 percent of respondents that 80 to 100 percent of those served by their agency are receiving services from other human service organizations. When asked to rank the top three agencies that most often provide those services, the following responses were given (in order of frequency):

*	Child Protection	89% (#1 response)
*	School District	61% (#2 response)
*	mental health providers	33% (#3 response)
*	the Women's Center	33% (#3 response)
*	Corrections/Court Services	28%
*	Public Health	28%
*	Welfare/Child Support	17%
*	law enforcement	17%
*	special contracts	6%

When asked if children who witness family violence have needs that <u>are</u> being met by existing resources in the community, the response was positive, indicated by 61 percent, or 11 responses. As indicated in Table 2, these needs were viewed as being met by identified service providers.

Table 2

<u>Service Providers Currently Meeting Children's Needs</u>

Agency	No. of Responses
Schools	11
Women's Center	9
YMCA	7
Child Protection	6
Social Services	5
Mental Health Providers	3
Court Services	2
Community	2
Churches	2
In-Home Programs	2
Public Health	2
Judicial System	2
Domestic Abuse Groups	1
Case Management	1
Early Childhood and Family Education	1

Law Enforcement	1
Guardian-Ad-Litems	1
Foster Homes	1
Community Education	1

In response to the question of how often these needs are not being met by existing resources in the community, there was agreement that many of the needs were not being met (see Table 3). Seventy-eight (78) percent of the responses indicated needs were not being met either sometimes or frequently, showing a high perception of unmet needs.

Table 3

Frequency of Children's Needs Not Being Met

Frequency	Percent
Always	---
Frequently	28
Sometimes	50
Seldom	22
Never	---

When asked about the effectiveness of existing programs in preventing future violence within families, the results were clearly negative (see Table 4). Only thirty-three percent viewed these attempts as positive influences. The

general perception was dissatisfaction with the effectiveness of existing programs in preventing future violence.

Table 4

Effectiveness in Preventing Future Violence

Effectiveness	Response	Percent
Negative effectiveness	10	56
Positive effectiveness	6	33
Neutral effectiveness	2	11

Gaps in Service Provision

Several themes emerged from responses to questions that give an indication of barriers to effective service provision or reasons for ineffective service provision. These themes can be identified as personal barriers, agency barriers, and societal barriers and are further defined in Table 5. Barriers within one category do not, however, stand alone, and a combination of barriers may be present in any one situation.

Table 5

Barriers to Effective Service Provision

Types of Barriers	Description
Personal Barriers	Code of silence
	Children dependent upon adults for accessing services
	Safety issues

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	Resistance to change
	Lack of stable environment
	Economic conditions
	Ineffective legal consequences
Agency Barriers	Lack of sufficient services
	Confidentiality
	Funding shortages
	Territory issues
Societal Barriers	Societal attitudes
	Legal issues
	Focus on individuals vs community

Determination of Need for Further Services

Respondents interviewed indicated a variety of individuals or agencies that they would like to see involved in the design of programming to address the needs of children who witness family violence. Those most often mentioned are indicated in Table 6.

Table 6

Agencies to be Included in Program Design

Agency	Percent
Schools	72
Law Enforcement	61

Mental Health Providers	44
Women's Center	39
Churches & Spiritual Leaders	39
Social Services	33
Child Protection	28
Courts & Judicial System	28
Community Members	22
Survivors of Violence	22
YMCA Youth Worker	22
Medical Community	22
Public Health	22
Professionals	17
Court Services	11
In-Home Therapy	11

All respondents indicated a need for some level of further services to children who witness family violence. When asked what they would anticipate the program to look like, responses included suggestions regarding identity, resources required, availability of services, collaboration, and safety, in addition to provisions related to the objectives of prevention, education, and intervention. The area of intervention was most focused on with numerous recommendations for methods of providing the services. Most frequently mentioned services can be broken down into the areas of groups, assessment of needs, outreach, individual counseling, support, and supervised visitation (see Table 7).

Table 7

Intervention Recommendations

Types of Service	Responses	Percent
Groups for Children	8	44
Assessment of Needs	5	28
Outreach	4	22
Individual Counseling	4	22
Support for Families(respite, daycare, financial help)	4	22
Supervised Visitation	2	11

The area of education had several recommendations for service provision, including education about parenting, violence issues, and empowerment and expression of feelings for children, as well as the recommendation for student tutoring (see Table 8).

Table 8

Education Recommendations

Types of Service	Response	Percent
Parenting	3	17
Violence Issues	3	17
Empowerment & Expression of Feelings for Children	1	6
Tutoring	1	6

Recommendations in the area of prevention did not receive as many responses, and included less specific suggestions, as shown in Table 9.

Table 9

Prevention Recommendations

Types of Service	Response	Percent
Develop ways to confront violence (punitively & healing)	1	6
Utilize grassroots & national effort to combat violence	1	6
Educate as means of prevention	1	6
Provide after-school supervised programs	1	6
Change school hours to decrease unsupervised time	1	6

Regarding services expected to be provided specifically by the Women's Center, the responses suggested fall into three main categories: (1) education, (2) intervention, and (3) safety, as indicated in Table 10.

Table 10

Services to be Provided by Women's Center

Types of Services	Percent
Education	
Parenting classes or groups	67

Violence issues	39
Intervention	
Children's support groups	28
Help children feel cared for	22
Support & follow-up services	22
Referrals for professional help	17
Counseling	17
Piggyback with other services	17
Outreach with schools & agencies	11
Address health needs	11
Social opportunities for children	11
Aware of spiritual options	11
Mentoring of children	11
Report abuse	11
Child advocacy	6
Safety	
Safe place	28
Keep mother and children together	6

Conclusion

In summarizing the findings, it is apparent that there are physical, educational/cognitive, social, and emotional needs experienced by children who

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witness family violence and their families that are not being met. It was also agreed that while services currently being provided are considered generally effective, the needs of children who witness family violence are not being met as frequently as informants would desire. In addition, respondents perceive that existing programs are considered generally ineffective in preventing future violence, and name numerous barriers to effective service provision. Furthermore, the need for some level of further services to children who witness family violence is indicated by all respondents. A broad range of ideas was presented in answer to both research questions, which will be addressed in the following chapter.

CHAPTER V

DISCUSSION AND IMPLICATIONS

Within the findings of this researcher's interviews, there have emerged several themes with regard to the physical, educational/cognitive, social, and emotional needs of children who witness family violence and the manner in which these needs are addressed currently, as well as ways that these needs can be addressed more effectively. In this chapter we will discuss the findings in more detail, analyzing commonalities and differences.

Physical/Educational (Cognitive)/Social/Emotional Needs

In reviewing the findings in the previous chapter, it was stated throughout all of the interviews that there are unmet physical, educational/cognitive, social, and emotional needs of children who witness family violence. The needs considered to be the easiest to address are the physical and educational needs, which are seen as able to be met in rather concrete ways. Some respondents sum up these needs as follows:

> "When a child is witnessing violence, they see mom getting beat up by dad at 2:00 in the morning, school's not a real top priority for them...And I think we need to realize that more as educators—that not all kids are coming to school ready to learn...And some days academics need to go out the window and kids need help just getting through the day."

> "A lot of times we're not aware that a child is witnessing family violence, or we are but no one will say it...These are the kids that will start the behavior problems at school and then get identified as emotional and behavioral disorder kids. And so much of it is environment. And if that environment was different, would we be identifying those kids as EBD? I would say not."

"We talked about getting some kind of real brief screener that we could do with the kids, so that if it is a situation where they are doing quite a bit of moving, just as a protection issue, that it's something that could go with the child to their next school so the schools aren't constantly starting over and trying to find out where this child is at."

"...doing the best we can to meet the stability needs of the kid, as best you can in the situation that they're in. I see that as such development-wise...at the elementary level, how important that is. And when that's disrupted what damage that can do--when the stability factor is gone."

When needs in these two categories are not met, society has set up explicit expectations and legal sanctions to specify the course of action in addressing this issue. Hence, mandated social service agencies have been created to address these needs--child protection services, welfare and child support, foster care, the justice system, etc. Mandated reporting laws have set requirements for the reporting of suspected cases where children's needs in these areas are not being met. Those interviewed who were employed in the agencies providing these services viewed themselves as being effective in meeting these needs once they have been identified. These findings are in direct correlation with Maslow's Hierarchy of Needs, which states that needs must be met on the most elemental level before the next higher order of needs can be attained (Zastrow & Kirst-Ashman, 1990).

The overwhelming responses indicating that emotional needs are the most intense and difficult to address, with social needs coming in a close second, are consistent with the literature on this subject. These needs are also seen as being the least identified (due to the secrecy surrounding the issue of family violence) and the most likely to have lifelong effects, potentially leading to the lack of

appropriate conflict resolution skills, the use of violence in future relationships with spouse and children, and the failure to engage in and maintain positive relationships. Some emotional and social needs have been expressed by respondents as follows:

> "I don't think they get a lot of nurturing...I don't think that they get a whole lot of love, or it's contradictory. They're not loved for who they are. They're loved for if they didn't break the eggshells when they walked on them."

> "Kids who come from...families where there is a lot of violence, as I have seen, have a tendency to have lower self-esteem, and that they need to find acceptance and they need to belong someplace. And so they will find a crowd or a group where they can feel accepted. A lot of kids that have low self-esteem will be your kids who have a tendency to use drugs or alcohol, and they may align themselves with those kids because they're the easiest group to get in with, and to feel accepted, and kids need to feel accepted. And they also sometimes need relief, which the chemical may give them...So I think when they get into the using group, or to the kids who drink or things like that, they...feel accepted, they feel normal...Where if they are trying to fit into a group at school where there isn't family violence,...they don't feel like they can talk about that, they don't feel like they fit in."

> "I think that's another thing, is emotionally they don't learn to trust. Sometimes they don't even trust their own judgment. Because they see things that are just a mess. Their parents, 15 minutes later are kind of smoothing things over, saying, 'It's okay--it's not a big deal.' And so a child's going, 'Well, wait a minute--it felt like a big deal. It was traumatizing to me.' And so then they start to not trust their own perceptions about things."

> "Kids who live with abuse and have been victims of abuse I think have a tendency to become rageful adolescents and adults. And that rage is a direct result of the hurt and the pain and agonies that they have seen and been a part of."

"I am working with a young boy right now...who his father has emotionally abused his mother. It's quite obvious. And the child broke down in school over nothing...and the teacher finally was able to remove him from the classroom. And he said, 'I'm crying because my mother and dad are fighting all the time.' And they're suffering, but they're still fighting all the time. And he said, 'I really hate it when my dad calls my mother (he used three words) a faggot, a bitch, and a fucker.' It's an 8-year-old child that can understand and repeat these things and he's devastated. I went to observe that home and the mom shows me a hole. He threw something at her, this hollow-core door, and put a hole in it because of his own anger, this 8-year-old's anger. She sees it strictly as a behavior problem that's brought on by something completely outside of the violence that was in this family...It's so obvious to someone that walks in that it's just because of the violence within the parents."

Services to meet these needs are viewed by those interviewed as more difficult to assign, as there is not uniformity in symptomotology. Children may exhibit a wide range of behavioral problems, and specialized services are needed at the appropriate time for each individual child. In some cases, needs may not become apparent until much later in time, and then are manifested in more problematic ways.

Early identification was stressed by many interviewed as a critical piece in addressing these needs. For instance:

"I truly believe that early intervention is so necessary. If law enforcement goes to their house, there's no charges brought, that things don't just drop there. That there's kids that have witnessed this, that maybe they're referred somewhere...or they're talked to somewhere about it, instead of it just being swept under the rug. And then they think that it's not a problem, that no one did anything about this—it must not be a problem."

"I don't think they get the help in the family soon enough once there has been abuse or that kind of thing going on. My opinion is that law enforcement goes to see that there's been some domestic abuse. If the wife's not going to press charges, that's all that happens. And there's kids there...there should be an

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intervention at that point with the kids and the family and everything. And I think it gets dropped unless charges are pressed...Until it gets to be a major thing."

According to respondents working within the law enforcement and criminal justice systems, when family violence has been identified and children are witnesses of that violence, services are presently offered only to the arrested individual and the victim. The child's needs are not addressed at this point, and, unless they show up through the schools or some other identifiable behavior that gains society's attention, they may not be addressed until much later, if at all.

It is speculated by those interviewed that the presence of unmet needs is more likely to be underreported due to the fear of parents, especially mothers who are victims of family violence, being identified as "bad" people and increasing the danger of losing custody of their children as the legal sanctions are brought into play to meet those needs. It is also believed by respondents familiar with the dynamics of family violence that women are in fear of bringing their needs or their children's needs to the attention of authorities because of the possible repercussions from their abuser.

Many interviewees noted that children's needs are dominated by the issue of family violence. Two respondents said it well:

> "It seems as though violence sort of dominates all of those areas. It seems like if one is witnessing violence at home or in a relationship that it dominates everything someone can do. It kind of incapacitates all areas of their life...it just affects everything they do and how well they can do it."

> "I think that they're expected to go on with their life as normal, without really being given the recognition that they've undergone serious trauma. And they continue to get up and go to school and continue to do the kinds of things that they need to do."

"And then after the woman's leaving...then you got all those issues with the disruption of the family. And sometimes they're not able to see both parents."

The Family Disruption Hypothesis (Jaffe, Hurley & Wolfe, 1990) also supports the need to address the ongoing issues of violence. Children are adversely affected by the constant fear and confusion about the anticipation of violence, as well as changes in family residence or the parents' inability to effectively parent.

Until the issue of family violence is addressed, other attempts to meet the needs of children will be less than effective. The opening of the Women's Center has been the triggering action that has brought the issue of family violence out into the open within the community, however, be it very reluctantly. Some comments from respondents address this issue:

"Red Wing's an interesting town. It has a lot of pride. We kind of tend to sweep under the rug a lot of problems we have because we don't want that kind of image. But the reality is--we have a lot of trouble."

"It kind of makes me aware...as it's obvious that there's a lot of issues in this town that people have just not wanted to face at all...People have just not wanted to face reality that this cute little town did have issues like everywhere else in the world...But I think it's really important and I think a lot of good will come of our people having to talk about it and having to say 'It is in my backyard', or 'I do see more people of color and I do hear more about violence,' and having to be in conversation about that....It heightens my awareness of how racist Red Wing is and how far Red Wing is from admitting what its problems are."

Three Most Pressing Needs

The number one need most mentioned by respondents is that of safety, one of the basic physical needs according to Maslow's Hierarchy of Needs (Zastrow & Kirst-Ashman, 1990). Safety is the second level of needs following

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physiological needs, and must be addressed before other social and emotional issues can be dealt with. Growing up in a home where family violence is present is characterized by some respondents as similar to a combat experience. As one respondent put it:

> "I think that children who witness abuse experience those same characteristics that a Viet Nam veteran would experience...Living with domestic violence is like living in a war zone. You don't know when something absolutely horrible and terrible is going to hit, you're on guard, constantly in a state of preparedness out of fear. And I think that we haven't recognized the need to service that."

Another put it this way:

> "And a lot of times the women are prisoners of war in their own homes, and the children. And so then you've got all that psychological stuff and that mindfucking going on. And not a whole lot of places deal with that or have the time to deal with that."

Just as the literature suggests, respondents also indicated that in addition to the witnessing of violence, children are at increased risk of being physically abused themselves, either by the abuser or by the other parent. Abuse is especially likely to occur when children take on the role of protector and attempt to prevent the violence directed toward the victim. Some of the responses include the following:

> "Studies have shown that when you have women who are battered, at least the statistics that I have seen, there's a five times better chance that they then will abuse their children."

> "They become protectors. They protect mom. In some situations they take on the role of being the parent. Instead of the parent parenting the child, the child ends up parenting the victim of the family and trying to protect them. Depending upon the age of the child, as the child becomes older they take on that role more and more."

"I think that children not only witness that violence, but they're sometimes victims of that violence themselves."

"If they're experiencing violence, even just seeing it is pretty volatile, you never know when that's going to all of a sudden involve them."

The need for safety can be addressed in many different ways and by various people and agencies. Law enforcement may remove the abuser from the home, or the child(ren) may be removed from the violent situation by the victim, law enforcement, or Child Protection Services. Safety may be sought by moving into the Women's Center, a secure facility for mothers and children, or by seeking another similar facility in a location unknown to the abuser. Sometimes safety may be sought within the home of a relative or friend. At times when safety is not easily obtained, legal resources (such as an Order for Protection) must be employed to assist in protection of the woman and her children. And for some victims who determine that leaving the situation may be more dangerous to themselves and their children than staying, safety is sought within the situation in which the violence occurred. As one interviewee stated:

"...The age-old question is, 'Why does the woman go back to that situation?' And I think we've become educated enough in the last years to know that the woman is there because she's afraid, because of financial security, because of threats, being told time and again that if you leave I'm going to kill you....That's why women are returning--they think for the safety of their children."

No matter which option is chosen, safety takes precedence over all other needs of the moment, and must be addressed before other needs can be looked at.

The number two need determined by this research was that of education about the issue of violence in general and family violence in particular, in order to interrupt the cycle of violence. This finding supports the Modeling Hypothesis

(Bandura, 1977) of social learning theory, which states that children display the kinds of behaviors they see their parents model in the home. The overwhelming concern about the perpetuation of violence intergenerationally was expressed by all respondents. Some comments from respondents are:

"They're usually learning that if they can kick somebody's ass, then they have the power and it's okay."

"I interviewed many, many sexual abuse perpetrators and after talking with them for several hours and having them start crying and telling me that they were victimized as children, tends me to believe that the children that are growing up in a violent-type situation are going to be violent themselves as adults...Unless there's some intervention there is real high odds that there's going to be violence in their home life as they become adults and get married and their relationships and children."

"I think that it's about time that we provide prevention with children as opposed to cleaning up the messes that parents leave behind in their wake."

"Children who continue to witness violence over and over and over continue to experience...the lack of trust...the trust level continues to be broken over and over and over. And eventually, that becomes very difficult to repair...If things aren't dealt with at a young age,...those are the kids that I see growing up...that are in a lot of trouble and have no remorse for the things that they do...The more it happens, the more difficult it is to get out of the situation and the more likely it's going to continue to the next generation and the next generation."

"I think that it's really important to see the harm that [abusers] cause...If they don't acknowledge the harm, they're not going to change the behavior. And so it'll just perpetuate."

"And I think it's obvious when you look at statistics of people that act out violently how they would have witnessed violence in their [lives]. That whole idea of violence as normative has to be interrupted through education, through social needs being met,

through emotional needs being met...I feel it's a crucial thing, and I think it's traditionally overlooked, or at least I don't even know if it's as much overlooked as not as traditionally high enough a priority to be addressed. It needs to be seen as a higher priority."

"...There needs to be more education on it because otherwise we're going to keep getting more and more and more kids learning those types of behaviors and following through in their adult life with that kind of behavior—that it's okay to hit or scream or punch or bite or whatever."

"I have such a firm belief what kids [are] going to repeat is actions that they see or hear. And actions is the only way to teach. They need to know what it feels like to be hugged, cuddled, feel safe. They need to know that they can speak their mind and not be afraid of the consequence. They need to know how to express their anger in ways that are safe, not only for them but for others...Kids see it, they experience it, they hear it, and that's what sticks in their brain. That's what they learn to model. That process repeats and repeats and repeats...And then when it comes to kids having relationships with each other, if all they're seeing patterned is unhealthy relationships, that's all they're going to do."

"They need role modeling that they see and hear in action. Not someone saying, 'This is how you do it, this is how you handle this.' That's just kind of the skin on the top of the pudding. But they need to see it, they need to hear it. So when somebody is fighting they can see how it's handled. They can see how anger is handled, and they can hear it. Because actions speak louder than anything."

The third most identified need was that of listening to and supporting children who witness family violence. This need is most closely associated with the Resiliency Theory (Moore, Pepler, Weinberg, Hammond, Waddell & Weiser, 1990), which emphasizes the need to examine protective and vulnerability factors both in the individual and the environment. One of the most often mentioned protective factors that may explain the difference in functioning level of different

children is that of at least one significant relationship with an adult who is not one of the parents. Several respondents noted the need for caring persons or role models:

> "...[A] need would be that there is someone in their life who's listening to them, who's believing in them, believing what they're saying, what they have to say, and their concerns, and who's there to listen to them when they are feeling awful, and feeling scared."

> "...It's possible that some of those agencies can't necessarily meet relational needs that they have....And I don't know of any agency in this town that can provide that necessarily. And I'm sure there are some that attempt to do that, and maybe do it well, but I see that as a big gap...Who's going to be their adult friend? Who's going to walk with them? Who's going to help them out?"

> "I think some kids are more resilient than other kids. I think some kids have more ego strength than other kids. I think that some kids have maybe a role model outside the family system that is very significant to them...I call them the survivors, that they have a tremendous will to survive. And some, if they are privileged to have some really good friends that are role models, whether it's in sports, or a teacher, or a counselor, I think those kids are the ones that will make it. I see a lot of kids who survive just tremendous situations, and come out relatively well. From what I have noticed from that is that they've had a significant relationship with somebody who's healthy."

Anyone can provide this service to children, whether as a friend, relative, neighbor, or professional. One respondent suggested:

> "We have so few viable males who can role model and mentor for the young men...We have some very strong men, but they're working or doing other things. We have so few that are able to be guides for the young boys, for instance, healthy guides."

It is the opinion of some respondents that there simply aren't enough willing and available adults to go around, partly due to the increasingly fast pace and extreme

busy-ness of modern families. Several respondents noted the increased stress level placed on families caused by financial stress, parenting responsibilities, and lack of time. One respondent states:

> "...We've almost gotten to the point where as families we expect these outside agencies to do everything for us. When I think about when I was growing up...people were more connected to their neighborhood. They were more connected to their relatives and their family, and they were more connected to their church. So we didn't have to have this other huge safety net there so much because families had their own...around them to help sort out their problems and work on things. Where now that's kind of fallen apart. And so then there's this other big governmental social net that is expected to take care of everything."

Also cited were loss of family values and sense of community as reasons for lack of involvement of individuals in the lives of young people. The dominant theme appeared to be that the loss of sense of community and individualization of needs have contributed to the current societal attitude regarding family violence. Some examples from interviews punctuate this point:

> "If society as a whole or as a community...if there's a lot of watchdogs [who are] keeping track of what's happening with the domestic violence cases...people [judges, law enforcement] will take that responsibility on and do their job and hopefully put a stop to some of the violence...But if you have a community watching and saying, 'We won't accept this type of behavior and we will call the police every time we hear some type of violence going on in your house,' sooner or later people get the idea that it won't be accepted and they either have to change their behavior or they end up moving."

> "Like this whole village approach, everyone wants to talk about it but I don't ever see it happening. Because if we actually had this whole community involved in the process, we'd be getting very few calls because the community would just take care of it. You know, you get 5,000 angry parents walking over to this abusive individual and they would confront them, hopefully they wouldn't string them up, but we would get very few calls."

"I think that for our society violence is just greater all the way around...People get mad in a snap...It's like they're all ready to go to battle and nothing's happened yet. People seem to be so wound up and short-fused...I think that there's a lot more violence that's expected than there used to be."

"I believe that it takes a whole community to change the attitude of a society of people. And that an effort should be made to hit the community as a whole to give the message that violence is not okay."

"It's complex because it's tied up with a whole attitude in our society. It's tied up with the role modeling that is on television and the violence that appears there and it's most like we get desensitized to what goes on...I think more people have to take a stand...and say, 'That's enough! We have had enough!'"

"I think the media stuff is also just right now so that people are getting intolerant of violence, of particularly domestic violence stuff...And this whole culture of sports and that whole thing...the idea that you will train men to be killers on the football field and then expect them to go home and be nice to their wives and kids--it's insane! It's that gladiator thing that white males love. They want their gladiators."

Only when people are willing to be involved in community and other people's lives is there a positive impact in addressing the issue of violence in our society, as well as children's needs for appropriate role models and mentors.

Effectiveness of Current Services

Respondents' perceptions of the effectiveness of their own agency's services in serving children's needs were clearly positive. Perceptions of children's needs being met within the community were also judged to be positive. However, when asked if children's needs were not being met within the community, the results indicated the perception that children's needs were not

being met, which presents an interesting contradiction in viewpoint. Respondents' perceptions appear to indicate that once needs are identified there is an adequate system in place to address those needs. The difficulty lies in the inability to identify those needs in order to provide the necessary services. It is also perceived that services being provided are ineffective in preventing future violence within families. It is perceived by respondents that the services provided are quality services, but are limiting in the fact that there are not enough of them to address the needs completely. Outcome studies would be necessary to determine the advisability of discontinuation of services deemed ineffective in preventing violence.

One possible interpretation of these observations may be that needs which are easier to address are currently being served and most often result in a successful outcome, while services for needs that are more difficult to address may be in short supply or ineffective. There may be some needs that are not being addressed due to lack of resources, legal and ethical limitations, or political agendas. In a service delivery system that expects the most "bang for the buck," it would not be unusual if providers chose to provide services that were more likely to be short-term and successful. Hence, the emphasis on physical and educational needs versus social and emotional needs would be quite understandable.

Another interpretation of this phenomenon could be that the service delivery system is focused on safety and punishment issues and are not able to find the time or money to address prevention needs. This view would claim that time and attention required in the area of safety for victims and punishment of perpetrators does not leave enough resources to address the issue of prevention. Therefore, prevention is not considered a goal of providers in their daily work.

Gaps in Service Provision

Though there were many barriers to effective service provision identified, one gap in services that was noted earlier in this chapter was the inability of service providers to meet deep relational needs. Numerous respondents cited loss of sense of community or lack of community involvement as a possible reason for this need remaining unmet. Other explanations included loss of family values and increased stress on families that limited the availability of adult role models for children. Interestingly, several respondents expressed the possibility of churches and spiritual leaders attempting to meet these relational needs, or even the addressing of spirituality as another need that was not suggested within the research question. Here are their comments:

> "I think the primary gap is all your social agencies cannot address spiritual issues, which I think are really significant and important. When you're talking about kids that may come out of violence, you're talking about a lot of needs for forgiveness and healing of the heart and stuff and there's really no agency that can address those issues. They can kind of do their part in certain areas, but I think that they're limited in what they can do...I think a lot of the school people and even the juvenile people are probably totally unaware of what the youth workers in town do and how in depth they get with kids. They probably don't know that. They probably aren't aware of the impact that youth ministries have on kids."

> "I don't know if it's necessarily that agencies want to eliminate the church...I really believe a lot of agencies don't think the church has anything to offer. And I think to a certain degree the churches have set themselves up for that because maybe they haven't done well in the past with troubled kids, or haven't even attracted troubled. kids. They're not addressing their needs. Are churches actually going out and getting involved with families who are hurting, or do we tend to spend most of our time with people who are doing well and are doing okay and don't have a lot of problems?

And so I see where churches have maybe almost in a sense eliminated themselves from the process...And so I think the churches need to take some responsibility, too, to put themselves back in positions where they're available."

"So there are a lot of different avenues in this community...people that can help people to sort of reintegrate from trauma, whatever kind. And that really was one of the things that brought me to this community was the thought that we could have spiritual healing, and physical healing, and all these good things. Whereas if I was working with therapists exclusively, they can't talk about spiritual healing...There is another way for people to heal and that may work better than the pills and group talk."

"That's a good thing to have as a strength, to have that spiritual base...The spiritual values are there, and to me that's critical. So, we may have to bring in some other pieces, but at least there are strong beliefs. And on the hierarchy of needs I think that the pinnacle, if you can take care of other things."

Another possible explanation for the absence of adequate needed services for children who witness violence is the fact that children do not hold the power in society—adults do. Children do not have voices in legislative bodies, nor do they vote or pay taxes. They can't decide what services they would like that would be helpful to them. Until they become adults they are dependent on the adults around them for the meeting of their needs.

It is very interesting that only a few of the agencies participating in this study were able to be accessed directly by children, and these were law enforcement (911), church youth programs, school social workers, and the Youth Outreach Worker at the YMCA. The power for accessing services clearly rests within the hands of the adults in children's lives, and that is where the focus should be when services are not accessed on the behalf of children.

Determination of Need for Further Services

Responses to the preceding questions provided a unanimous consensus that further services are needed for this population. Responses to the question of what this program would look like closely resembled responses to the question regarding services expected to be provided by the Women's Center. Though it was not directly indicated that this was the Women's Center's sole responsibility, it appeared to be assumed that they would carry the major portion of this responsibility. Since the question regarding what the program would look like was framed as an opportunity to brainstorm, it allowed for answers that stepped out of the narrow confines of on-the-job thinking and challenged those interviewed to be creative and visionary in their responses. It is believed that this type of thinking is necessary in order to solve long-standing problems for which previously attempted solutions have achieved unsatisfactory outcomes. One of the unintended outcomes of this study is that respondents dared to venture into new ways of thinking that may not have been explored previously, and which might have started a process of looking at the issue in a different way that could lead to a more satisfactory outcome. As the saying goes, "If we keep on doing what we've been doing, we'll keep on getting what we've been getting."

Collaboration

The theme that was apparent in responses to the designing of a program to address children's needs was the importance of a collaborative effort. The need is so great that it will take all of us working together to obtain the desired results. It was stressed that no one agency has the necessary resources to be able to address the needs alone, and that in order to be effective there must be communication and cooperation between agencies that strive to meet the needs of children who witness family violence. Some responses include:

"To combat our society at this point is going to take a community effort...There really needs to be a collaborative effort to get the message to our community that we will not tolerate violence...I think the churches need to take a much more active role in that, in getting involved, and being a part of this. Because they are instrumental in teaching basic fundamental values to our society."

"I would like to be able to work more directly with the agencies, and I guess maybe need help on how we would access that."

"I think it's good to talk about it and talk about how can we work at it together, and how can we pool our resources, and the bottom line—meet people's needs. I hope when you get your paper all written that that'll be the model."

A majority of respondents also believed that children who witness family violence receive services from multiple service providers, thereby increasing the need for collaborative efforts to reduce duplication of efforts and increase effective utilization of services. Each person interviewed was very knowledgeable about services provided by their own agency, but was typically unclear about services provided by some other community agencies. Several informants noted the need for a centralized agency to be a primary information point for clients, thereby reducing confusion within the community regarding services. This designated "clearinghouse" would need to be able to identify resources and assist clients in obtaining needed services with agencies providing those services. Being a neutral, non-system agency would further reduce client skepticism.

Another common theme was found in the philosophy of community involvement known as "it takes a village to raise a child." A community-wide effort known as the Children First Initiative is currently underway to bring members of the community together to address the building of assets within the youth in our

community. This is a very large collaborative effort that will include approximately 40 individuals who are in contact with children and youth in some capacity. This initiative will provide an impetus for service providers to continue in this vein in meeting the needs of children who witness family violence.

Intervention

This area had the most numerous recommendations for methods of providing services. Services identified for children included support groups, needs and asset assessments, outreach, individual counseling, and supervised visitation. Each of these service areas is large enough to constitute an entire program in itself, and attempts to provide services in these areas have been inadequate or nonexistent, as stated in an earlier section. The importance of early intervention and participation of very young children was also stressed:

> "The other difficulty that we saw [at Headstart] that I think still goes on, at least in the metro area, is to get a child in group under the age of five was difficult, because there's this belief that children can't do group work when they're under the age of five, and that two and three and four-year-old kids are too preverbal to be able to benefit from that. I think there's beginning to be an acknowledgment that you have to deprogram kids at a very early age...If you don't talk to these little ones and deprogram them, you can expect to incarcerate them and then send them off to woodchopping school or whatever we do and it doesn't work..."

> "The first thing they [in Headstart] had to do, in fact, if they'd come into the classroom from being in a violent situation all night, was to cry or to have somebody hear them. They couldn't even go eat breakfast, or certainly couldn't sit in a circle and sing a song. They'd be off in the corner sucking their thumb or under a table. And so that was very obvious that kids had to, even little kids, of course, had to get some kind of solace somewhere."

"I was amazed at the damage that three and four-year-old boys could do when they'd seen their fathers inflict battering kind of stuff. They would attack their mothers in the very same way--littler individuals, but they could kick or they could hit. It could be just as disruptive and it was just almost like little ducks walking after dad. That patterning was so clear."

Support services for families were also indicated and which may include financial assistance, daycare, and respite services. Though these are not direct services for children who witness family violence, they are seen as necessary to reduce the stress on families that may cause an increase in the incidence of family violence. Stress Theory (Kratcoski, 1984) may explain the increase in violence as an alternative means of coping with intolerable stress.

Education

There were several recommendations for service provision within the broader category of education, and can be broken down into parent education and child education. The focus on education was to interrupt the cycle of violence within the family and prevent the intergenerational transmission of violence. Parenting education was indicated to be important in stopping the use of physical punishment of children that reinforces the use of violence. It was also suggested that appropriate conflict resolution skills were a significant need of parents living with family violence, and that these skills should be modeled for their children.

Education of children about violence issues was cited as one very important need of children, as well as education about empowerment and the expression of feelings. A third suggestion was to provide student tutoring in order to assist children who are not adequately achieving in the school setting.

Prevention

Within the area of prevention, several believe that stronger sanctions to confront violence were needed in order for abusers to get the message that violence will not be tolerated. The assumption is that stiffer penalties will reduce the use of violence. Whether this is an effective method of preventing violence remains debatable. However, stricter penalties combined with some type of treatment may be seen as increasing the potential for reducing the use of violence. As one respondent indicates:

> "It goes in a swing. First you want to punish everybody and if you punish them harder you think they're going to get better. Well, that doesn't ever work. Then it swings back the other way where there are more treatment things involved...And then it will swing back the other way...If you throw everyone in jail or prison that somehow that's going to be the magic answer. And certainly that's not going to do it."

Some respondents express the opinion that education is an effective means of prevention and would like to see more education on domestic violence as well as violence in general. As one respondent says:

> "I think about how meaningful it is to hear first-person stories about abuse...It would be really interesting and helpful to have a series, like a newspaper series, that would interview these children and just talk about what it was like to cower under their bed, or to try to disappear between the bed and the wall so they wouldn't be found, or what it was like not to be able to sleep at night because of the yelling and stuff and then having trouble staying awake in school...Maybe interview a young child, and interview an adolescent child, and interview an adult that had experienced it as a child...That those personal stories are really moving. And that the statistics and all of that are important, but to put a face on it, and to put it in the context of a personal experience, I think is so educational."

Other respondents were concerned with the amount of unsupervised time

that children have before and after school. They would propose a change in school hours to decrease the amount of unsupervised time, or would seek provision of after-school supervised programs. This would reduce stress on families by having children supervised during the hours that parents must be at work.

It is also believed that the task of prevention is such a large one that it will take both a national effort as well as a grassroots effort working together to say no to violence. Changing of a societal issue takes time. It cannot be legislated or mandated--it must involve a change in attitude as well as behavior. Changing people's thinking and attitudes is very difficult, and that is what makes it such a huge task. Attitudes are changed one person at a time, and it must start with ourselves. As one respondent puts it:

> "I also think that to stop violence that you've got to work on yourself as an individual and unlearn everything that you've learned. Because then if you teach what you've learned...you can learn what you taught...We have to start looking at ourselves, our own isms, our own judgments, our own actions...And I just truly believe that that's the only way we can stop it."

Conclusion

Recognition that children who witness family violence are victims too is a relatively new phenomenon. Hence, services typically reflect the philosophy that the woman is the primary victim and the children are only witnesses. As we change our thinking, so must we change our actions. If we expect to interrupt the intergenerational transmission of violence, we must be willing to provide the resources that will make a difference. Children are truly the innocent victims in cases of family violence. They cannot seek out the necessary services without

the help of adults. It's time that we assisted them in accessing services that will

benefit them. As one person put it:

> "It's time for the kids...There hasn't been real acknowledgment that it even exists, and now there is. And now it's slowly coming down to the child level, the impact on the child. I think we'd like to think for a long time we have done that, but I think if we're really honest, we haven't."

CHAPTER VI

LIMITATIONS

Sampling Decisions

Key informants were selected based on the researcher's own knowledge of service providers, as well as on input from professional contacts the researcher knew in Goodhue County. These contacts were asked for referrals of professionals that would be appropriate for this study. As a result, a limitation of this study is presented in that the key informants interviews do not necessarily reflect information or perceptions of all employees of specific agencies, nor from all Goodhue County service providers.

Ideally, a needs assessment would also include direct input from the population experiencing the need. However, because of the extremely sensitive and potentially harmful nature of doing so, a less intrusive approach was chosen to obtain the requested information. This is a limitation of this study. The perceptions of the target population could have offered insight into the actual needs experienced as well as ideas in how those needs could be effectively met, which would have greatly enhanced the validity of this study. In future studies it will be extremely important to include those using the services in the planning and development process for providing services.

Response Rate

Twenty individuals working for human service organizations in Goodhue County were contacted. Eighteen consented and provided in-person interviews. Those who did not respond to the request were considered nonessential interviews, since they were second contacts within agencies from which representation had been obtained. Further interviews within agencies may have

provided different perspectives on the subject if there had been adequate time to perform the additional interviews. However, the sample interviewed provided wide diversity of agencies, as well as individual diversity of background experience. Though a total sampling of all service providers would have been more comprehensive, it is believed that it would not yield a significant amount of new information to justify this level of investigation.

Instrument Reliability and Validity

The instrument used was created by the researcher and, therefore, has not been proven reliable in previous research. Examination of the instrument by twenty MSW student social workers provided some measure of validity.

Generalizability

The degree of subjectivity involved in the use of open-ended questions in the interviews provides another limitation. The information gathered from the key informants is only representative of that person's perceptions and does not necessarily represent the viewpoint of other service providers or the viewpoint of the community at large. Therefore, the information gathered cannot be generalized to be reflective of all of Goodhue County or to a larger population.

CHAPTER VII

CONCLUSIONS AND RECOMMENDATIONS

It is the opinion of this researcher that this study has confirmed the presence of unmet needs of children who witness family violence, especially in the areas of social and emotional needs. This would indicate the necessity of further services to address those needs. Services would be most beneficial if provided within a collaborative model and included objectives within three major areas: (1) intervention, (2) education, and (3) prevention. It would also be desirable to include as many of the key players as possible in the designing of such a program in order to ensure a comprehensive approach and solidarity of focus.

The following recommendations are proposed:

1. It is recommended that a planning committee be created to further explore the recommendations obtained in this study, with the intention of developing and implementing a plan for service delivery that will encompass the most workable findings.

2. It is also recommended that this committee be as broad-based as possible in order to include all perspectives, including that of the service recipients.

3. If a planning committee is not feasible, then it is recommended that individual agencies within the community utilize the results of this study to influence planning for future service provision.

4. It is further recommended that an evaluation tool be developed that would assist in the evaluation of effectiveness of services.

In a county the size of Goodhue County, it would be very feasible to develop a highly effective collaborative model due to the limited number of possible participants. Collaboratives currently exist in the county to address other client needs, and the identified needs of children who witness family violence would be another opportunity to extend those efforts.

Additional research is indicated in order to obtain the perceptions of service recipients regarding their unmet needs and desires for services. This information would be needed to balance the opinions of professional service providers in the community. No one knows the needs better than the persons experiencing the need.

APPENDIX A

LETTER OF EXPLANATION

My name is Beverly Seifert and I am a student in the Master of Social Work Program at Augsburg College in Minneapolis. I have contacted you to request your participation in a research study that I am conducting as a part of my graduate program. This study will examine the needs of children who witness family violence in the Goodhue County area. I am interested in learning about any experiences you may have had with children who witness family violence. I am also interested in how you would visualize service provision to these children.

You have been selected as a potential participant because of your position in the community and your experience working with children in this population. I will be conducting approximately 30 interviews with professionals like yourself, who currently work in one of the human service systems in the Red Wing area.

Participation in this research project is voluntary and does not involve any direct benefit to you. Your decision whether or not to participate in this study will not affect any current or future relationships you may have with Augsburg College. If you choose to participate, you will be asked to take part in an interview either face-to-face or by phone that will take approximately 30 minutes. You may choose to end the interview at any time, skip over any questions, or withdraw completely prior to the scheduled interviewing date.

Your responses to the interview questions will be kept confidential. With your written consent the interview will be taped. No individual will be identified by name or agency in this paper. All tapes and written data collected will be kept in a locked file cabinet to which only the researcher has access. All written and taped information will be destroyed upon completion of this project which is estimated to be September 30, 1996. If you have any questions about the interview or the study you may contact me at 612-388-2714, or you may contact my advisor, Curt Paulsen, Ph.D., at 612-330-1621.

You may keep this copy of the explanation form to keep for your records. Please sign and return the statement of consent in the enclosed self-addressed, stamped envelope if you are consenting to participate in this study.

APPENDIX B

STATEMENT OF CONSENT

I have read the letter of explanation. I have asked questions and have received answers. I consent to participate in the study.

Signature _____ Date _____

I consent to the taperecording of this interview.

Signature _____ Date _____

Signature of investigator _____ Date _____

AUGSBURG
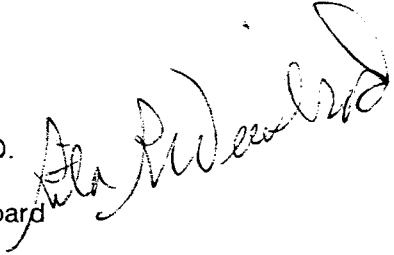
C·O·L·L·E·G·E

DATE: 2/28/96

TO: Beverly Seifert
426 - 15th Street
Red Wing MN 55066

FROM: Rita R. Weisbrod, Ph.D.
Chair
Institutional Review Board

RE: Your IRB Application: Children who witness family violence: a needs assessment"

I have received your response to the IRB summarizing conditions required for final approval of your study.

With these changes, your application is now approved. Your IRB approval number is **# 95 - 43 - 2.** This number should appear on your consent forms.

If there are substantive changes to your project which change your procedures regarding the use of human subjects, you should report them to me by phone (612-330-1227) or in writing so that they may be reviewed for possible increased risk.

I wish you well in your project!

Copy: Curt Paulsen, Thesis Advisor

APPENDIX D

INTERVIEWING SCHEDULE

Professional Questions:

1.   What is your current position? _____

2.   How long have you been in this position? _____

3.   How long have you worked in a human service position in Goodhue

County?_____

4.   How much of your time is currently spent in direct contact with children who

witness family violence or their families? (%) _____

5.   How long have you worked with children who witness family violence or their

families?_____

**Agency Questions: (The following questions are regarding your current position as
it pertains to children who witness family violence and their families.)**

6.   In your work with children or their families served by your agency, what process

do you use to determine the presence of family violence? _____

_____

_____

_____

7.   How do children who witness family violence or their families gain accessibility

to your agency's services?_____

_____

_____

_____

8.   What is the ethnic or cultural makeup of the families or children experiencing family violence with whom you work?_____

_____

_____

9.   What is your objective within your agency in serving the needs of children who witness family violence or their families?_____

_____

_____

_____

10.   How effective do you believe your agency to be in serving the needs you have identified? _____

_____

_____

Opinion Questions: (The following questions are regarding your personal opinions based on your experience in human service positions.)

11.   Of the children who witness family violence served by your agency, estimate what percent receive services from other human service agencies. _____%

Rank the top three agencies that most often provide services to the children mentioned above: _____ Goodhue County Child Protection

_____ Goodhue County Corrections/Court Services

_____ Goodhue County Public Health Service

_____ Goodhue County Welfare/Child Support

_____ Law Enforcement

_____ Mental Health Provider (ask names)

_____ Native American Family Services

_____ School District (ask school names and grade levels)

_____ The Women's Center

_____ Other _____

12. From your professional experience, do you think children who witness family violence have unmet:

   a.   physical needs? _____ If so, please tell me more about the nature of those needs. _____

   _____

   _____

   b.   educational needs? _____ If so, please tell me more about the nature of those needs. _____

   _____

   _____

   c.   social needs? _____ If so, please tell me more about the nature of those needs. _____

   _____

   _____

   d.   emotional needs? _____ If so, please tell me more about the nature of those needs. _____

   _____

   _____

13. From your experience, do the children who witness family violence have needs that are being met by existing resources in the community? _____

   a.   If so, how do you perceive those needs being met by existing resources

in the community? _____

_____

_____

_____

b.   How often do you perceive those needs as not being met by existing

resources in the community?

Never   Seldom   Sometimes   Frequently   Always

c.   Using your professional judgment, rank the three most pressing needs of

children who witness family violence in the order of their importance:

1.   _____

2.   _____

3.   _____

d.   If you were going to design a program to address those needs, who would

you like to see involved in its design? _____

_____

_____

e.   What would you anticipate this program to look like? _____

_____

_____

_____

14.   What is your expectation regarding services for children to be provided by the
Women's Center? _____

_____

_____

_____

15. In your professional opinion, how effective do you believe existing programs to be in preventing future violence within the families with whom you work?_____

_____

_____

_____

16. Do you have anything else you would like to add on this subject?_____

_____

_____

_____

_____

INTERVIEW RESPONSES

Professional Questions:

1. **What is your current position?**
    5 Social Workers
    2 Therapists
    1 Administrator
    3 Spiritual Leaders
    1 Law Enforcement Officer
    2 Medical Professionals
    2 Investigators
    2 Probation Officers
    18 TOTAL

2. **How long have you been in this position?**
    102.75 years   mean = 5.71   median = 5   mode = 5 or 9 range = .25-17

3. **How long have you worked in a human service position in Goodhue County?**
    169.75 years   mean = 9.43   median = 6.75 mode = 2 or 15 range = .75-28

4. **How much of your time is currently spent in direct contact with children who witness family violence and/or their families? (%)**
    388% total   mean = 22%   median = 20   mode = 5   range = 2-70

5. **How long have you worked with children who witness family violence and/or their families?**
    235.75 years   mean = 13.1   median = 11.75 mode = 15   range = 2.75-28

Agency Questions: (The following questions are regarding your current position as it pertains to children who witness family violence and their families.)

6. **In your work with children and/or their families served by your agency, what process do you use to determine the presence of family violence?**
    client interview = 14   78%
    report by 3rd party = 8   44%
    collateral contact with other family member or 3rd party = 7   39%
    direct observation = 5   28%
    already identified = 2   11%

    3rd party reporters include: Social Services, law enforcement, schools, health
        care professionals, mental health workers, Child Protection, probation

officers, friends

7. **How do children who witness family violence and/or their families gain accessibility to your agency's services?**
    voluntary participation:

client seeks services = 9		50%
referral by professional = 10		56%
referral by family member = 5		28%
referral by friend = 3		17%

    involuntary participation:

court-ordered = 4		22%
Child Protection investigation = 1		6%

    referral sources include: law enforcement, Social Services, health care
             professionals, schools, Women's Center, Public Health Service

8. **What is the ethnic/cultural makeup of the families/children experiencing family violence with whom you work?**
    racial makeup:
         white
         African American
         Native American (Mdewankanton Dakota & Ojibwe)
         Asian
         Latino (Hispanic)
    16 indicated mostly white (90%, 98%, 100% highest estimates)
    2 indicated mostly persons of color
    ----
    3 indicated it as a cross-cultural issue
    ----
    3 indicated it as economic issue of poor to lower middle income

9. **What is your objective within your agency in serving the needs of children who witness family violence and/or their families?**
    prevention:
         prevent violence in families - 3
         prevent out-of-home placements - 1
    education:
         educate that violence is not okay - 2
         meet child's needs in public school setting - 1
    intervention:
         referral to appropriate services - 7
         stabilize and reconcile families - 4
         keep children safe - 2
         advocate for client's best interests - 2
         arrest for criminal offense - 1

assess child's needs - 1
provision of services:
    individual counseling - 2
    ongoing support - 2
    give information regarding choices - 2
    parenting education - 2
    support groups - 1
    develop safety plan - 1
    provide safe environment for expression of kids' feelings - 1
don't have one - 1

10. **How effective do you believe your agency to be in serving the needs you have identified?**

positive responses (range from fairly effective to very effective) = 12 (67%)
negative responses (range from not effective to struggling) = 5 (27%)
not able to respond (program is too new) = 1 (6%)

Opinion Questions: (The following questions are regarding your personal opinions based on your experience in human service positions.)

11. **Of the children who witness family violence served by your agency, estimate what percent receive services from other human service agencies?**

1055%   mean = 58.61%   median = 80 mode = 90   range = 0-100
    56% answered 80-100%

Rank the top three agencies that most often provide services to the children mentioned above:

		#1	#2	#3
Child Protection	total = 16	#1 = 7	#2 = 5	#3 = 4
School District	total = 11	#1 = 4	#2 = 3	#3 = 4
MH Provider	total = 6	#1 = 2	#2 = 2	#3 = 2
Women's Center	total = 6	#1 = 2	#2 = 2	#3 = 2
Corrections/Ct Svcs	total = 5	#1 = 1	#2 = 3	#3 = 1
PHS	total = 4		#2 = 2	#3 = 2
Welfare/Child Supp	total = 3	#1 = 1		#3 = 2
Law Enforcement	total = 3	#1 = 1	#2 = 1	#3 = 1
Other (spec. contracts)	total = 1			#3 = 1
NA Family Services	total = 0			

mode = CP
range = 0-16 responses

12. **From your professional experience, do you think children who witness family violence have unmet needs?**

-when there's that kind of chaos in the family the child's needs are not met
-witnessing violence at home or in a relationship dominates everything someone

can do - incapacitates all areas of their life

-need more awareness of what supports are needed in emotional & physical day-to-day life

-so much energy going into the relationship between violator and victim that parents are unable to parent adequately

-most intense needs are emotional, then spills over into social

-addressing violence in general

-don't get help in the family soon enough once there has been abuse - should be an intervention with the kids and family at the point where law enforcement responds to a domestic abuse situation

-kids are kind of a silent community

-children who witness abuse are the victims of abuse as well - living with domestic violence is like living in a war zone - on guard and constantly in state of preparedness out of fear (post traumatic stress disorder - children who witness abuse experience those same characteristics that a Viet Nam veteran would experience)

-we haven't recognized the need to service these children - don't have children's specific services

-it takes an entire village to raise a child

----

a.   **physical needs?**

yes = 14   sometimes (not related to issue of family violence) = 1

not as much = 1   not so aware of = 1   especially = 1

If so, please tell me more about the nature of those needs.

-racism & economic problems - everything in hierarchy of needs precedes how to deal with violence

-pinnacle of hierarchy of needs is strong beliefs - present in Native American community

-economic stability so they don't have to look for a place to live and something to eat

-health issues

-money not spent on kids' needs (clothing, dental, medical, swimming lessons, extras that kids should be involved in) - spent on drugs or alcohol, drunk driving fines or court fees

-separate issue from the family violence issue

-statistics show a five times greater chance of a child being physically abused by a mother who is abused

-low income limits familys' physical surroundings, clothing, food, etc.

-may not be fed and cared for properly (parents unable to parent adequately)

-can't remove the child from the violent situation unless child is actually physically abused (though damaging & abusive in other ways - emotional)

-most of the kids get what they need (clothing, etc.)

-some kids had to be set up in some other home because basic stuff wasn't getting taken care of

-Child Protection is overwhelmed with caseloads - not have needs met if not
      having their lives jeopardized or receiving direct abuse
-don't see food, clothing & shelter as a need
-need for responsible parenting
-physical symptoms (especially if a victim of abuse)
-lot of children supervised at a very early age (may end up running with older kids
      who are unsupervised and do thing earlier (sex, drugs, alcohol)
-long periods of unsupervised kids after school and into the evening - need
      structured setting and adult supervision throughout elementary age
-need a safety plan in place - give some control and power over their environment
-quickest to address
-may need to be taken out of the home to make sure they're safe
-guarantee their safety
-fear for physical self, safety, or abandonment

b.   **educational/cognitive needs?**
      yes = 16   not as much = 1   may or may not = 1

If so, please tell me more about the nature of those needs.
-acting out behaviorally or educationally
-is it educational need or environmental? (hard to determine if Fetal Alcohol
      Effect or LD, or environment)
-failure to graduate from high school or stay in school past 16
-truancy leading thing that happens when kids' needs not attended to
-emotionally not able to function in school
-underachieving
-racism very big issue in middle and high schools
-lack of healthy male role models to mentor boys & role model behaviors
-miss school because of family fights and domestic situations
-not doing enough in just dealing with life in general educationally (how to: get
      along with people, handle their own safety, overcome some of the
      lack of nurturing, handle their own emotions in a healthy way)
-worry about who's getting hurt at home (mom, little brother)
-need more evaluation for EBD and SED placement and mental health needs
-school social workers are overworked and underpaid (too many kids on their
      caseloads) - need more mental health workers
-school can be one place they can be safe & offers more of a normal environment
      (if parents see that they get there)
-not wanting to go to school
-addressing violence - not the way to go
-schools don't have a lot of time & are probably not aware on how to deal with the
      kids
-need more education about violence, who to talk to
-if needs of the immediate crisis don't get dealt
-either withdrawn or troublemakers in school

-not accepted by peers
-difficult for them to interact with other kids or adults or other people in general
-some kids have trouble at home & excel in school; for others school is just too
    much to bother with
-preoccupied with what's going on at home
-symptoms of dysfunction in the family show up as school problems or emotional
    behavioral problems (diagnosis of EBD)
-educational needs not necessarily addressed if a child is taken out of the home or
    move from school to school
-need stability in the educational environment
-younger kids aren't coming to school, hiding bruises
-older kids truant
-school's not a top priority when violence is happening late at night (need help
    just getting through the day
-lots of sick days (headaches, stomach ache, physical symptoms, eating disorders)
-hard focusing on assignments
-truancy

c.   social needs?
    yes = 17   2nd after emotional = 1

If so, please tell me more about the nature of those needs.
-victimize cultures by taking away the culture
-victimize each other rather than the white culture is the real "enemy" - fighting
    amongst themselves
-men more battered by the economic system that uses them as "wage slaves"
-isolated
-few friends
-not involved in activities because of trying to keep family unit on track (taking
    on parenting role)
-lacking in social skills and how to form relationships with people
-victims become violent themselves sometimes
-victims become withdrawn sometimes
-behavior is role modeled & lack appropriate role models
-tend to react in a violent manner themselves
-isolated from peers & have peer relationship problems
-more aggressive
-have poor problem-solving skills
-parents role model behaviors that children will act upon (may see child's violent
    behavior as behavior problem & completely outside of the violence in the
    family)
-if you could eliminate one of the parents (the violent one) you might be able to
    make progress with the child
-children take on role of parent (protect mom), especially as they get older
-families at odds with each other because of the fighting

-repeat whatever they have learned (violence)
-don't know how to interact appropriately in social situations
-the biggest factor because of the silence (keeping the family secret) - take on
      burden of an adult child
-family keeps a closed system
-child becomes the parent
-children side with the abuser a good percentage of the time
-isolated with the stigma of coming from a violent home
-not good social skills - if they can kick somebody's ass then they have the power
-not learning respect
-might not want to have friends come over
-increase their defense mechanisms to protect themselves from their environment
      (by learning to fight, withdrawing, use drugs or alcohol)
-behavior of child is a symptom of what's going on in the family
-need to find acceptance and to belong someplace - find a crowd or group where
      they can feel accepted (may align with kids who use drugs or alcohol -
      easiest group to get in with and feel accepted)
-it's harder to fit in with group where there isn't family violence - may be more
      able to talk about it with others who might have a similar home life
-those who will make it are those who have had a significant relationship with
      somebody who's healthy (some have a role model outside the family
      system that is significant to them; some have really good friends that are
      role models, such as sports, teachers, counselors) - a mentor
-cycle of abuse continues - even though they don't like it, that's what they know is
      done
-kids that don't have supervision and good mentoring by an adult sometimes have
      a lot of difficulty with social skills
-may be ostracized by peers, isolated
-surface at a much later date
-cyclic nature of domestic violence
-conflict resolution issues - need to relearn behaviors
-how to handle situations (when not met there's domestic violence)
-social skills, peer interaction, & interaction with adults
-isolated at home and not bring friends over

d.   **emotional needs?**

    yes = 11   most intense = 1   definitely = 2 especially = 1
                biggest factor = 1   tons = 1   2nd after physical = 1

If so, please tell me more about the nature of those needs.
-racism & economic problems is dehumanizing stuff that creates self-esteem
      issues - can't see themselves as healthy persons
-not able to function in school - emotionally out of it
-materialism not a core belief of Native Americans, but forced into it by the
      economic system

-strong spiritual beliefs in Native American community - healthier spiritually than white society
-can't determine between good and bad touch (confusion around touching and love & affection)
-don't get a lot of nurturing or love; see a lot of neglect
-love and contradictions - they're loved for if they didn't break the eggshells when they walked on them
-misplaced loyalty
-confused about combination of emotional warmth & violence
-not enough mental health services in out-county regions (outreach, in-home, etc.)
-psychological evaluations in custody disputes may indicate need for therapy (judge can't order continuing therapy)
-child may be more clingy and emotional or rebellious
-most intense needs
-spiritual needs of kids
-when family is disrupted sometimes not able to see both parents
-psychological stuff & mindfucking going on - women are prisoners of war in their own homes
-difficult for them to express how they feel
-the bigger the secret is the bigger the emotional burden for kids
-need to feel safe
-need to feel trust
-parents not there for them (supportive)
-lower self-esteem
-may use chemicals for relief
-isolation and no one to talk to about the violence may be the beginning of some mental health issues
-some kids are more resilient
-some have more ego strength
-not learned to express their emotions appropriately (never had that role modeled)
-don't learn the feelings that are causing the anger
-leads to lack of intimacy with people (don't know how to bond very well or get close)
-emotional kind of stunted
-trust is broken and don't learn to trust
-sometimes don't trust their own judgement (see traumatizing events smoothed over, primarily in CD families) - see verbal & emotional abuse, then physical abuse, then honeymoon period and child doesn't make sense of it (think that's normal in families)
-kids who live with abuse & have been victims of abuse have a tendency to become rageful adolescents and adults (rage is direct result of the hurt, pain, and agonies they have seen & been a part of) - need to get to the hurts to work with them
-no talk rule adds secrecy and shame

-expected to go on with their life as normal without recognition that they've
    undergone serious trauma
-need rituals so that they can grieve and let go of the abusive situation (healing
    ritual)
-sense of shame
-reestablishing trust
-can never meet their parents' approval
-get identified as EBD or ADHD - if the environment was different, would we
    identify as that
-self-esteem big issue
-conflict of emotions (see violence that doesn't make sense & still love the
    abuser)
-grow up insecure & weak in gut feelings (lots of denial)
-lot of anger issues, depression
-true ADD or angry kid who's very depressed
-identity issues, where they fit in the family & community, where do they see a
    future, or gender confusion
-hard to attach for fear they're going to leave

13. **From your experience, do the children who witness family violence have needs that are being met by existing resources in the community?**

no = 1   not always = 1   some = 2   not really = 1
yes = 10   to a certain degree = 1   starting to = 1
yes but not enough = 1

    a. **If so, how do you perceive those needs being met by existing resources in the community?**

        Schools = 11
        Women's Center (shelter) = 9
        YMCA (outreach worker, Y-Pals) = 7
        Child Protection = 6
        Social Services = 5
        Mental health providers = 3
        Court Services = 2
        Community (pastors, people to go to) = 2
        Churches (St. Joe's groups, activities) = 2
        In-home programs = 2
        PHS (Maternal Child Nurses) = 2
        Judicial System = 2
        Domestic Abuse groups = 1
        Case management = 1
        ECFE = 1
        Law enforcement = 1
        Guardian ad litem = 1
        Foster homes = 1

Community education = 1

b. **How often do you perceive those needs as not being met by existing resources in the community?**

Never =   0   0%
Seldom =   4   22%
Sometimes = 9   50%   mode and median
Frequently = 5   28%
Always =   0   0%

range = seldom-frequent

c. **Using your professional judgment, rank the three most pressing needs of children who witness family violence in the order of their importance.**

		#1	#2	#3
safety	12	#1 = 8	#2 = 2	#3 = 2
violence is not appropriate education	10	#1 = 5	#2 = 2	#3 = 3
someone to listen to them	7	#1 = 2	#2 = 3	#3 = 2
(early) intervention	3	#1 = 2	#2 = 1	
rebuild family w/o violence	3		#2 = 1	#3 = 2
belong to family unit or group	2			#3 = 2
to be loved (nurturing)	2	#1 = 1		#3 = 1
therapy for victims	2		#2 = 1	#3 = 1
trust	1		#2 = 1	
security	1		#2 = 1	
physical needs	1			#3 = 1
someone there in the future	1		#2 = 1	
believability	1			#3 = 1
permission to talk to adult	1		#2 = 1	
sense of control	1		#2 = 1	
emotional needs	1		#2 = 1	
social needs	1			#3 = 1
self-esteem	1		#2 = 1	
stability	1			#3 = 1
coping skills & resiliency bldg	1		#2 = 1	

d. **If you were going to design a program to address those needs, who would you like to see involved in its design?**

schools/education	13	72%
law enforcement	11	61%
mental health	8	44%
Women's Center	7	39%
Spiritual leaders/churches	7	39%
Social Services	6	33%

Child Protection	5	28%
judicial system/courts	5	28%
interested persons in comm.	4	22%
survivors of violence(victims)	4	22%
YMCA(Youth Worker)	4	22%
medical community	4	22%
Public Health	4	22%
professionals	3	17%
Court Services	2	11%
In-home therapy	2	11%
Prairie Island Tribe	1	6%
males & females	1	6%
diverse races	1	6%
diverse ages	1	6%
blue collar workers	1	6%
white collar workers	1	6%
Rainbow Coalition	1	6%
ECFE	1	6%
Goodhue Cty. Ed. Dist.	1	6%
guardians-ad-litem	1	6%
social worker	1	6%
Planned Parenthood	1	6%
Retired teacher	1	6%
Domestic Abuse Program	1	6%
Colvill Family Center	1	6%
St. John's	1	6%
Extension	1	6%
Domestic Abuse Project	1	6%
Foster parent representative	1	6%
Daycare provider	1	6%
Nanny program	1	6%
Children's MH Coalition	1	6%
whole community	1	6%
parents	1	6%

e.   What would you anticipate this program to look like?
IDENTITY
-separate entity (not identified with county, school or law enforcement)
-break down territorial barriers in order to work together
-community-wide effort to provide assets that kids need
-advisory council of youth & adults who understand family violence (witnesses or
       victims)
RESOURCES
-lots of money
-lots of respect

-tons of money
AVAILABILITY
-available to all anytime & free
-evening & weekend hours
-include services for victims & perpetrators
-neutral location where can't be identified
COLLABORATION
-informal gathering (watchdog committee) once every 1-2 months
-work together (one agency can't do it all)
-lots of brainstorming
-networking to identify kids who fall through the cracks
-Children First initiative - it takes a village to raise a child
-network with family, mentors, counselors, school
-community involvement - it takes a village to raise a child
-it takes a village to raise a child - community involvement
SAFETY
-big safe place
-safe house on every block
-safe place where you can go & talk
-safe place (emergency foster care)
-safe shelter for adolescents for 1-7 days with full supportive services (groups,
    medical care)
PREVENTION
-develop ways to confront violence firmly - we will not stand for it - not just
    punitive but healing
-both grassroots & national effort to say no to violence
-education as means of prevention
-provide after school supervised programs
-change school hours
EDUCATION
A.   -more taught in schools re: family violence issues
      -community & school efforts to talk about violence in general
      -educate kids about violence issues
B.   -student tutoring
C.   -education of community to not spank
      -parenting classes
      -role modeling for families (mentors)
      -teach about healthy relationships & healthy families
D.   -educate kids on steps to empowerment and expression of feelings
INTERVENTION
A.   -individual contact by professionals or "recovering" victims
      -individual play or talk therapy
      -counselors for social & emotional needs
      -one-to-one time
B.   -self-help groups

-fun groups with emphasis on nonviolent solutions
-support groups
-group in Red Wing
-support groups in school day or summer program
-group for kids who are not removed
-activity-oriented groups (esteem building, self-advocacy skills, etc.)
-community service oriented learning group

C.   -outreach where kids are (school, YMCA, pool hall)
     -Social Worker at law enforcement to provide intervention
     -outreach to out-county schools & churches (classroom talks & presentations)
     -outreach to kids who are not removed

D.   -supervised visitation
     -safe place for visitation exchange and supervised visitation

E.   -assess kids' needs and refer to existing resources (clearinghouse)
     -assess kids' needs
     -refer to appropriate individual, group and in-home therapy
     -assess kids' needs using screening & refer to appropriate providers
     -identify kids falling through the cracks by screening before entering school & repeating at least every 2 years

F.   -refer to spiritual dimension
G.   -build relationships & trust with kids
H.   -empower & support kids
I.   -child psychiatrist to consult or see kids
J.   -abuser programming
K.   -victim programming to break cycle of victimization
L.   -wrapped in services with primary case worker to coordinate
M.   -involved in all aspects of a child's life
N.   -explore family dynamics
O.   -older kids involved with younger kids
P.   -support for families
     -provide help for family stresses
     -respite
     -crisis nursery or crisis daycare for respite

14. **What is your expectation regarding services for children to be provided by the Women's Center?**
     -children's support groups - 5
     -counseling - 3
     -referrals for professional help - 3
     -hitchhike services with in-home counseling, summer rec programming, or law enforcement presentations - 3
     -address needs of young people who are witnesses - 2
     -parenting classes or groups - 2

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-topic education (self-esteem, self-concept, effective communication,
    assertiveness training, friendships, loss & major change, cultural issues,
    etc.) - 2
-classroom presentations - 2
-provide community education - 2
-outreach with schools & agencies - 2
-recognize health concerns & work with Public Health as a team - 2
-high expectations - 2
-take the lead in creating safe place and pulling community together
-keep them safe
-place where they can feel safe
-provide safe shelter for adolescents for 1-7 days with full supportive services
    (groups, medical care)
-place to live
-work collaboratively with Colvill Family Center
-identify needs previously unidentified in community
-sensitive and well-trained staff
-model parenting behaviors without victimization
-provide parenting education
-education for family/parenting
-mentoring of adults
-support groups for parents
-feeling of security because of no violence
-report abuse
-acknowledge abuse
-provide support
-provide support after leaving or referrals for services
-provide follow-up & resources
-reach out after leaving
-someone there for kids
-know that they are cared for & feel open to share
-know they are cared for & protected
-help kids feel special & have place to go or call
-learn about violence & how to control their anger
-education about violence
-education about conflict resolution & empowerment
-address violence for what it is
-teach them skills to stop the cycle of violence
-speak at community groups
-social contact with other kids
-provide social environment where they can grow & develop as children
-provide mentoring of kids
-mentoring of kids
-better respected in community
-make aware of spiritual options & refer as appropriate

-utilize church youth groups to work with kids
-keep mom & kids together
-strong child advocacy

15. **In your professional opinion, how effective do you believe existing programs to be in preventing future violence within the families with whom you work?**
positive responses (fairly or somewhat effective, good attempt)= 6 (33%)
negative responses (little value, very ineffective, not at all, what programs?)= 10 (56%)
neutral responses = 2 (11%)

Comments:
-last 5-10 years the system is getting better at addressing the problems - arresting more
-services to children getting better - children being identified
-focus on intervention programs for the offender will cause a decrease in domestic violence
-watchdogs focusing on violence cases, judges, and law enforcement increases the community taking responsibility for stopping violent behavior
-such an enormous task to stop a cycle of violence
-speakers, commitment to no hitting - prevention
-need more education in schools on parenting (so we don't parent as our parents did)
-underfunded, undermanned, and underattended
-primary & secondary intervention (MN Extension Service) doing good job (parenting classes & continuing education for professionals)
-Domestic Abuse Program don't have outcome studies
-anger groups haven't done outcome studies
-police department doing some work with kids in elementary schools that is beneficial
-schools doing more than the community (have peer mediation and the Respect program that are beneficial)
-need services for the whole family, not just one family member
-violence is a generational thing
-our culture fights changing it
-agencies work their tails off to pick up the pieces & are overloaded but can't turn the tide
-agencies can't change people because people have to choose that (God is the only one who changes people's hearts)
-not till as a nation as a whole we decide this violence thing is out of control
-agencies primarily can meet some needs, but the church can change people (agencies doing interventions & referring to a place where they can make those changes, the church)

-agencies arise out of a need or crisis
-church's goal is to see people change
-schools & extension office - literature, workshops
-churches - don't know how they address it
-law enforcement - sensitivity courses for staff
-businesses - employee assistance programs
-community needs to hold abusers accountable for their actions
-quit blaming the victims & not shun them, blame them, or withhold
    services from them
-financially we have a system that beats up women (who leave)
-if she stays, she is charged with failure to protect her children
-if she leaves, she is seen as a bad mother if she goes on AFDC &
    drains our money
-starts small and create the ripple effect to make it bigger
-Domestic Abuse Program - look at patterns and how they operate
-CD treatment - help in how a family is operating
-support groups for victims - still pretty new
-Children's Trust Fund grant for prevention - haven't heard much about it
-Extension Office no-spanking promotion
-not enough to know that a certain way is the right way
-need to provide the kind of support people need (respite care, financial
    support)
-more flexible roles will result in less abuse (think of children and spouses
    as people)
-effort to treat domestic violence as a crime sends message (this is a
    crime and if you do this you need help to change the way you
    behave)
-more work is needed in addressing the social and emotional needs
-need some bigger consequences for batterers, especially when
    there's kids in the situation
-need better follow-up of services for parents and kids
-when kids say there is a problem we need Court Services and law
    enforcement to get involved
-how effective is it when we see repeating generations
-other families have gotten help and made changes to stop that pattern
-how effective are we system-wide with Social Services
-some services are making changes with some families, but not to the
    degree that anyone working in social services would like it to be
-we're addressing too small a number

16. **Do you have anything else you would like to add on this subject?**
    Media & Violence
    "I think the media stuff is also just right now so that people are getting intolerant
    of violence, of particularly domestic violence stuff...And this whole culture of
    sports and that whole thing...the idea that you will train men to be killers on the

football field and then expect them to go home and be nice to their wives and kids--it's insane! It's that gladiator thing that white males love. They want their gladiators."

"It's complex because it's tied up with a whole attitude in our society. It's tied up with the role modeling that is on television and the violence that appears there and it's almost like we get desensitized to what goes on....I think more people have to take a stand...and say, 'That's enough! We have had enough.'"

Perpetuation of Violence
"I interviewed many, many sexual abuse perpetrators and after talking with them for several hours and having them start crying and telling me that they were victimized as children, tends me to believe that the children that are growing up in a violent-type situation are going to be violent themselves as adults...Unless there's some intervention there is real high odds that there's going to be violence in their home life as they become adults and get married and their relationships and children."

"I think that it's about time that we provide prevention with children as opposed to cleaning up the messes that parents leave behind in their wake."

"Children who continue to witness violence over and over and over continue to experience...the lack of trust...the trust level continues to be broken over and over and over. And eventually, that becomes very difficult to repair...If things aren't dealt with at a young age,...those are the kids that I see growing up...that are in a lot of trouble and have no remorse for the things that they do...The more it happens, the more difficult it is to get out of the situation and the more likely it's going to continue to the next generation and the next generation."

"I think that it's really important to see the harm that [abusers] cause...If they don't acknowledge the harm, they're not going to change the behavior. And so it'll just perpetuate."

"And I think it's obvious when you look at statistics of people that act out violently how they would have witnessed violence in their [lives]. That whole idea of violence as normative has to be interrupted through education, through social needs being met, through emotional needs being met...I feel it's a crucial thing, and I think it's traditionally overlooked, or at least I don't even know if it's a smuch overlooked as not as traditionally high enough a priority to be addressed. It needs to be seen as a higher priority."

"...There needs to be more education on it because otherwise we're going to keep getting more and more and more kids learning those types of behaviors and following through in their adult life with that kind of behavior--that it's okay to hit or scream or punch or bite or whatever."

"I have such a firm belief what kids [are] going to repeat is actions that they see or hear. And actions is the only way to teach. They need to know what it feels like to be hugged, cuddled, feel safe. They need to know that they can speak their mind and not be afraid of the consequence. They need to know how to express their anger in ways that are safe, not only for them but for others...Kids see it, they experience it, they hear it, and that's what sticks in their brain. That's what they learn to model. That process repeats and repeats and repeats...And then when it comes to kids having relationships with each other, if all they're seeing patterned is unhealthy relationships, that's all they're going to do."

Societal Issue

"If society as a whole or as a community...if there's a lot of watchdogs [who are] keeping track of what's happening with the domestic violence cases...people [judges, law enforcement] will take that responsibility on and do their job and hopefully put a stop to some of the violence...But if you have a community watching and saying, 'We won't accept this type of behavior and we will call the police every time we hear some type of violence going on in your house,' sooner or later people get the idea that it won't be accepted and they either have to change their behavior or they end up moving."

"Like this whole village approach, everyone wants to talk about it but I don't ever see it happening. Because if we actually had this whole community involved in the process, we'd be getting very few calls because the community would just take care of it. You know, you get 5,000 angry parents walking over to this abusive individual and they would confront them, hopefully they wouldn't string them up, but we would get very few calls."

"I think that for our society violence is just greater all the way around...People get mad in a snap...It's like they're all ready to go to battle and nothing's happened yet. People seem to be so wound up and short-fused..I think that there's a lot more violence that's expected than there used to be."

"I believe that it takes a whole community to change the attitude of a society of people. And that an effort should be made to hit the community as a whole to give the message that violence is not okay."

Why women return

"...The age-old question is, 'Why does the woman go back to that situation?' And I think we've become educated enough in the last years to know that the woman is there because she's afraid, because of financial security, because of threats, being told time and again that if you leave I'm going to kill you....That's why women are returning--they think for the safety of their children...But we really, truly need an education for the children in those types of situations to know that they are not to

be growing up like that, that that is not normal...We need to educate children somehow in programs or through the schools."

Denial of Issues (Violence, Racism, Gangs, etc.)
"It kind of makes me aware...as it's obvious that there's a lot of issues in this town that people have just not wanted to face at all...People have just not wanted to face reality that this cute little town did have issues like everywhere else in the world...But I think it's really important and I think a lot of good will come of our people having to talk about it and having to say 'It is in my backyard', or 'I do see more people of color and I do hear more about violence,' and having to be in conversation about that....It heightens my awareness of how racist Red Wing is and how far Red Wing is from admitting what its problems are."

"Red Wing's an interesting town. It has a lot of pride. We kind of tend to sweep under the rug a lot of problems we have because we don't want that kind of image. But the reality is, we have a lot of trouble."

Working Together
"I think it's good to talk about it and talk about how can we work at it together, and how can we pool our resources, and the bottom line--meet people's needs. I hope when you get your paper all written that that'll be the model."

"I would like to be able to work more directly with the agencies, and I guess maybe need help on how we would access that."

"To combat our society at this point is going to take a community effort...There really needs to be a collaborative effort to get the message to our community that we will not tolerate violence...I think the churches need to take a much more active role in that, in getting involved, and being a part of this. Because they are instrumental in teaching basic fundamental values to our society."

Individual Focus
"I also think that to stop violence that you've got to work on yourself as an individual and unlearn everything that you've learned. Because then if you teach what you've learned, ...you can learn what you taught....We have to start looking at ourselves, our own isms, our own judgements, our own actions...And I just truly believe that that's the only way we can stop it."

Government's Increased Responsibility
"...We've almost gotten to the point where as families we expect these outside agencies to do everything for us. When I think about when I was growing up...people were more connected to their neighborhood. They were more connected to their relatives and their family, and they were more connected to their church. So we didn't have to have this other huge safety net there so much because families had their own...around them to help sort out their problems and

work on things. Where now that's kind of fallen apart. And so then there's this other big governmental social net that is expected to take care of everything."

Punishment

"It goes in a swing. First you want to punish everybody and if you punish them harder you think they're going to get better. Well, that doesn't ever work. Then it swings back the other way where there are more treatment things involved...And then it will swing back the other way...If you throw everyone in jail or prision that somehow that's going to be the magic answer. And certainly that's not going to do it."

First-Person Stories

"I think about how meaningful it is to hear first-person stories about abuse...It would be really interesting and helpful to have a series, like a newspaper series, that would interview these children and just talk about what it was like to cower under their bed, or to try to disappear between the bed and the wall so they wouldn't be found, or what it was like not to be able to sleep at night because of the yelling and stuff and then having trouble staying awake in school...Maybe interview a young child, and interview an adolescent child, and interview an adult that had experienced it as a child...That those personal stories are really moving. And that the statistics and all of that are important, but to put a face on it, and to put it in the context of a personal experience, I think is so educational."

Time for the Kids

"It's time for the kids...There hasn't been real acknowledgement that it even exists, and now there is. And now it's slowly coming down to the child level, the impact on the child. I think we'd like to think for a long time we have done that, but I think if we're real honest, we haven't."

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