

Children of India – The Biggest Victims of Family Violence

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Abstract

Child victimization of family violence is pervasive in nature with developmental, behavioural, emotional and social outcome. Children living in family environment where violence is present are at risk to experience abuse either directly or indirectly. Existing research on the effects of children's experience and exposure to family violence is relevant and useful to an examination in two major ways. Firstly, understanding how exposure to various types of family violence affects children; secondly, exposure to family violence affecting parent's behavior, and thus compound the effects on children. Tragically, child victims are vulnerable both to abuse and neglect within their families and to the failure of the systems intended to protect them. Children are exposed to violence in the home are denied their right to a safe and stable home environment. Many are suffering silently, and with little support. Children who are exposed to violence in the home need trusted adults to turn to for help and comfort, and services that will help them to cope with their experiences. Far more must be done to protect these children and to prevent family violence from happening in the first place. This paper examines some of the underlying causes of family violence in India and the impact on children's physical and mental health, exposed to family violence.

Key Words: Family Violence, Physical health, Mental health, Exposure to violence

INTRODUCTION:

Violence in the home is one of the most pervasive human rights challenges of 21st Century India as well as world around. It remains a largely hidden problem that few countries, communities or families openly confront, even today. Violence in the home is not limited by geography, ethnicity, or status; it is a global phenomenon and the time is ripe now to accept it and develop strategies to confront this social menace in concerted manner. As many as ten million children and adolescents witness violence between their caregivers each year. This kind of violence is called domestic violence or intimate partner violence. The US Department of Justice defines domestic violence as "a pattern of abusive behavior in any relationship that is used by one partner to gain or maintain power and control over another intimate partner." Domestic violence can be verbal, physical, sexual, or psychological. Domestic violence can occur between heterosexual or same sex couples.

Parents or caregivers involved in a violent relationship may think that the fighting does not affect their children. Even children who do not see domestic violence are affected by the conflict in the family. Children may develop serious emotional and behavioral problems. These problems are not always recognized by their parent's more caregivers. As a result, children do not always get the help they need. When there is domestic violence between partners, there is often child abuse as well. Sometimes children

get hurt accidentally. Children need to be assessed for their health and safety when domestic violence occurs.

Children and adolescents exposed to family violence should be evaluated by a trained mental health professional. There are good treatments for the emotional and behavioral problems caused by family violence. Treatment can include individual, group or family therapy, and in some cases, medication may also be helpful. It is critical for the child/children and victimized parent to receive treatment in a setting where they feel safe.

Family violence is an ongoing experience of physical, psychological, and/or sexual abuse in the home that is used to establish power and control over another person. Although awareness about the rate of domestic violence in our society is increasing, the public health ramifications have only recently been recognized in the medical community. The majority of the medical literature to date has focused on the effect of domestic violence on the primary victim. What effect does witnessing domestic violence have on secondary victims, such as children who live in homes where partner abuse occurs? It is estimated that 3.2 million American children witness incidents of domestic violence annually.

Witnessing family violence can lead children to develop an array of age-dependent negative effects. Research in this area has focused on the cognitive, behavioral, and emotional effects of family violence. Children who witness violence in the home and children who are abused may display many similar psychological effects. These children are at greater risk for internalized behaviors such as anxiety and depression, and for externalized behaviors such as fighting, bullying, lying, or cheating. They also are more disobedient at home and at school, and are more likely to have social competence problems, such as poor school performance and difficulty in relationships with others. Child witnesses display inappropriate attitudes about violence as a means of resolving conflict and indicate a greater willingness to use violence themselves.

Family violence is a significant problem for those whose life is affected by this issue, the social, health and criminal justice agencies that respond to it, and wider society that must bear the costs. Whilst family violence is not a new phenomenon, the past thirty years has seen increasing public awareness and a growing political consensus that something needs to be done, even if what should be done is less clear (Holt and Devaney, 2015). In Northern Ireland family violence (also referred to as family abuse or intimate partner violence in the literature) has been defined as: Threatening, controlling, coercive behavior, violence or abuse (psychological, physical, verbal, sexual, financial or emotional) inflicted on anyone (irrespective of age, ethnicity, religion, gender or sexual orientation) by a current or former intimate partner or family member. (Department of Health, Social Services and Public Safety and Department of Justice, 2013)

FAMILY VIOLENCE IN INDIA:

Globally, violence within family is universal across culture, religion, clan and ethnicity. Despite their widespread prevalence, family violence in India, however is not customarily acknowledged and has remained invisible. It is such problem thought unworthy for any immediate attention, especially in the context of legal or political attention (Vindhya, 2003). The social construction of the divide between public and private underlines the hidden nature of family violence against children in India. Rather, it is considered as disciplining and essential for maintaining the rule of authority within the family, especially for children and adolescents.

Family violence is an abuse of the intimate, trusting and safe relationship that a family should provide. It can be between couples, parent-child, siblings, parent and grand-parents, parents and other family members. Family violence occurs in many forms; the most prominent are domestic violence, child abuse and elder abuse. Family violence affects many persons at some point in their life and constitutes the majority of violent acts in our society. Family violence is an everyday occurrence in Indian family life irrespective of class, community, status, society and religious affiliation. It is a private affair with a few or no bystanders and no real time or opportunity to help the victim (may be women or children or adolescent or aged). The accused is often the only witness to the violence. The family in India, once considered a fortress of safety and security for women, children, adolescents and aged; and a place of peace and solace, has turned out to be breeding ground of violence (Ahmed-Ghosh, 2004). It is an irony, as Martin (1978) observes, “... family, the most intimate association to which the majority of people belong, is an unrivalled source of strength and comfort. But its very closeness can also intensify the worst of human relations. Love may be corrupted to envious possession and discipline to cruelty. And above all the private focus of hopes and fears may foster dual standards of private and public behaviour”.

The pervasiveness of family violence problems in India has not been fully documented. It is one of the least reported of all crimes relative to actual frequency of occurrence (Chawla, 2004). Except for police records that are loosely maintained and a few privately conducted investigations, no nationally represented study provides data concerning the incidence of family violence in India (Ahmed-Ghosh, 2004; Chawla, 2004). Despite the absence of any uniform national investigation into the problem, there is enough evidence to show that family violence does occur in India, and that marital violence in particular is widespread though largely hidden (Chawla, 2004; Fernandez, 1997). Family violence may be triggered by such factors as patriarchy, marital discord, poverty, unemployment, job insecurity, economic strain due to chronic ill health, alcoholism, drug abuse, caste, religion and social class conflicts. These conditions can create enormous stress, tension and frustration within the family which may erupt in to episodes of violence.

CHILD ABUSE IN INDIA – 2007 (NATIONAL SURVEY REPORT):

Nineteen percent of the world's children live in India. According to the 2001 Census, some 440 million people in the country today are aged below eighteen years and constitute 42 percent of India's total population i.e., four out of every ten persons. This is an enormous number of children that the country has to take care of. While articulating its vision of progress, development and equity, India has expressed its recognition of the fact that when its children are educated, healthy, happy access to opportunities, they are the country's greatest human resource. A study was conducted as a National study covering 13 states to examine the incidence of child abuse, especially at home and the respondents included Children (5-18 years) and Young Adults (18-24 years). It has very clearly emerged that across different kinds of abuse, it is young children, in the 5-12 year group, who are most at risk of abuse and exploitation at home. The major findings related to child abuse at home are as follows:

Physical Abuse:

- Two out of every three children were physically abused.
- Out of 69% children physically abused in 13 sample states, around 55% were boys.
- Over 50% children in all the 13 sample states were being subjected to one or the other form of physical abuse.
- Out of those children physically abused in family situations, 89% were physically abused by parents.
- Most children did not report the matter to anyone.

Sexual Abuse:

- Around 53% children reported having faced one or more forms of sexual abuse.
- Andhra Pradesh, Assam, Bihar and Delhi reported the highest percentage of sexual abuse among both boys and girls.
- Around 22% child respondents reported facing severe forms of sexual abuse and 51% other forms of sexual abuse.
- Out of the child respondents, around 6% reported being sexually assaulted.
- 50% abuses are persons known to the child or in a position of trust and responsibility.
- Most children did not report the matter to anyone.

Emotional Abuse and Girl Child Neglect:

- Every second child reported facing emotional abuse.
- Equal percentage of both girls and boys reported facing emotional abuse.
- In 83% of the cases parents were the abusers.
- Around 48% of girls wished they were boys.

The gravity of the situation demands that the issue of child abuse be placed on the national agenda. The Ministry on its part has taken measures such as the enabling legislation to establish the National and State Commissions for Protection of Rights of the Child, the Integrated Child Protection Scheme, the draft offences against Children Bill etc. These are a few important steps to ensure protection of children of the country. But clearly, this will not be enough, the government, civil society and communities need to complement each other and work towards creating a protective environment for children. The momentum gained needs to enhance further discussion on the issue amongst all stakeholders and be translated into a movement to ensure protection of children of this country.

CHILD VICTIMIZATION OF FAMILY VIOLENCE:

Family violence is devastating social problem that impacts every segment of the population, particularly the children. Family violence was conceptualized as both domestic violence and child abuse. The construct of family violence emerged from a family events affecting the children include: (a) exposure to parental fights; (b) witnessing paternal violence towards the mother; and (c) witnessing or experiencing abuse and/or violence on the part of the children. Family violence created a toxic environment within family that leads to child victimization to a greater extent.

Child abuse and family violence often occur within the family and are linked in a number of important ways that have serious consequences for the safety of children in several ways. Firstly, family violence often directly results in physical injury and/or psychological harm to children. Secondly, even when family violence does not result in direct physical injury to the child, it can interfere with both the mother's and father's parenting to such a degree that the children may be neglected. Thirdly, while an intervention into child abuse may be initially effective, the impact of that intervention will soon be sabotaged, if family violence is also present, and if the perpetrator is not held accountable for stopping the violence and the adult victim is not protected.

Children can be injured as a direct result of family violence. Perpetrators sometimes intentionally injure children in an effort to intimidate and control their adult partners. These assaults can include physical, emotional, verbal and sexual abuse of the children. Children are also injured – either intentionally or accidentally, during attacks on their mothers or other family members. An object thrown or a weapon used against the mother may hit her child. Assaults on younger children may occur while the mother is holding the child. Injuries to older children often occur when the child attempts to intervene in violent episodes. Although many parents believe that they can hide violence from children, children living in these homes report differently. Research suggests that between 80 to 90 percent of these children are aware of the violence (Carlson, 1984). Even if they do not see a beating, they hear the screams and see the bruises, broken bones, and the abrasions sustained by their mothers. A New Zealand study conducted by the

National Collective of Independent Women's Refugees (1991) suggested that for women receiving help from refuges, 90% of their children had witnessed violence; 50% of the children had also been physically abused. Overseas research (Jaffe, 1990; 1992) also confirms that children are often involved directly and indirectly in family violence and that this is likely to have damaging consequences for them both immediately and in the larger term.

However, what happens in a violent families and how the children react and get affected to it both directly and indirectly are described as follows:

- **Environment of Shame** – Children are often used as weapons in parental battles. They are used by one parent in maneuvers against the other. Sometimes, a parent may compel children to be unwilling listeners to complaints about their spouse. Children from such an atmosphere may view the family as an environment of shame.
- **Insecurity Feeling** – In several violent families, the needs of the child is of little importance to their parents. The child is overtly rejected and unwanted. Such neglected children are often haunted by an extreme sense of insecurity and feels like an outsider, as both the parents are overindulged between themselves, mostly in conflict situation.
- **The Negative Fallouts on the part of the Child**– In violent homes, children may apprehend violence at any moment. Every minute is spent in fear and anxiety. A constant atmosphere of anger, uncertainty and frustration produces destructive tensions in the child. All of these may lead to negative outcomes for children and may affect their wellbeing, safety, and stability (Carlson, 2000; Edleson, 1999; Rossman, 2001). Childhood problems associated with experiencing and exposure to family violence fall into three primary categories:
 - Behavioral, social and emotional Problems: Higher level of aggression, anger, hostility, oppositional behaviour, and disobedience; fear anxiety, withdrawal, and depression; poor peer, sibling, and social relationships; and low self-esteem.
 - Cognitive and Attitudinal Problems: Lower cognitive functioning, poor school performance, lack of conflict resolution skills, limited problem solving skills, pro-violence attitudes, and belief in rigid gender stereotypes and male privilege. Becker and McCloskey (2002), for example, examined the impact of family violence in the development of attention and conduct problems in 287 children, who were 6 to 12 years old at the start of six years prospective study.
 - Long-term Problems: Higher levels of adult depression and trauma symptoms and increased tolerance for and use of violence in adult relationships.
- **Disrespect for the Parents** – Violent parental behaviour leads to mistrust and undermines the child's ability to trust adults. The child loses all his respect for the parental authority and often turns

against parents. The inevitable feeling of the child is that if only the parents had not been around, life would have been better. Such children may suffer from backlog of delayed grief. The anger at the parent can spill over throughout life; long after the parent is dead, creating even more buried feelings of violence within the child.

- **Reinforce Violence** – Family violence triggers the defense mechanism in children and reinforces resistance, rebellion and revenge. It also strengthens the idea in children that it is ethical for the strong to use violence against the weak. Children of violent parents learn to hit from the same parents who teach them to love. Thus, loving and hitting become linked up in their minds and life becomes a love-hit affairs.
- **Comfortable with Chaos** – Children who are accustomed to family violence may develop a tendency to be more comfortable with chaos than with systematized environment. They may become incapable of living an organised and systematic life in later years.
- **Displaced Battlefield** – It is found that children preempt parental violence by releasing aggression well in advance. They tend to rebel violently as a course of spontaneous survival instinct so that parental violence may be diverted or postponed at least for the moment. The crisis created by a child may help the family to get closer and provides the only opportunity for a dead and violent family to experience love. In a family where the bonds of cohesiveness are loose, the introduction of violence by the children may help to strengthen family bonds. The child provides a displaced battlefield to help minimize parental strife and increase understanding. In other words children tend to behave in a disorderly way just to silence their otherwise disorderly parents.
- **Social Isolation** – Violent parents usually discourage children from developing friendship. They do not allow other children into their home or they order them out of the home when they do visit. Because of shame and embarrassment, children of violent parents do not want to return invitation to others who have invited them to their homes. They do not want their friends to witness family arguments and discord. Friendships therefore are less likely flourish and the child may experience social isolation.
- **The Scapegoat** – In some families one particular child is singled out for ill-treatment by the mother. The most common reason for treating a particular child as a scapegoat is that this particular child may remind the mother of a despised husband or even the hated husband himself.
- **Family Violence and Delinquency** – In families where parents are excessively violent, children tend to stay out of home even late at night to avoid the unpleasant home atmosphere. Children may also resort to extreme steps like committing suicide or running away from homes. Children of abusive parents may easily fall in love with undesirable characters of the opposite sex and land up in lifelong difficulties. Considerable developmental work has been documented pathways from family violence experiences to serious delinquent behaviours (Mejia, Kliewer and Williams, 2006).

- **Sibling Rivalry** – In a violent family sibling rivalry lead to dominance and possession of material things among the siblings. This morbid jealousy among children and contribute to brutal assaults and enormous violence within families.

CHILDREN’S EXPERIENCES OF FAMILY VIOLENCE:

There is a growing awareness of children’s experiences of family violence. This has sometimes been referred to as ‘witnessing’ the violence, but this fails to capture the ways in which children become caught up in incidents of abuse. It also fails to acknowledge that far from watching passively children experience the violence with all of their senses. Therefore it may be more accurately referred to as children being exposed to or experiencing family violence. Children may not always observe the violence (and in many instances the abuse is manifested in psychological and controlling behaviour by the perpetrator) but they are still aware that the abuse is happening (Overlien and Hydén 2009; Swanston *et al.*, 2014).

A major limitation of most crime surveys that have been undertaken is the lack of data on children’s victimization. One useful source of information has been the prevalence survey of child maltreatment undertaken by the NSPCC across the United Kingdom in 2009. Respondents reported that 12 percent of under elevens, 18 per cent of eleven to seventeen year olds and 24 per cent of eighteen to twenty-four year olds had been exposed to family violence between adults in their home during childhood. 3 per cent of under elevens and 3 per cent of eleven to seventeen’s reported exposure to domestic violence in the year prior to the survey. Overall, 24 per cent of young adults reported witnessing at least one episode of violence between their parents, with 5 per cent of the children reporting that the violence was frequent and ongoing (Radford *et al.*, 2011). This equates to 19,000 children in Northern Ireland being exposed to frequent and ongoing family violence.

Risk of severe abuse for both men and women in the Republic of Ireland was found by Watson and Parson’s (2005) crime survey to increase with the presence of children, with this enhanced threat significantly higher for women when compared with men. The authors suggest, may arise from the increased stress of parenthood, greater difficulty leaving a relationship or restricted options for moving on when children are involved. This study also notes that nearly three quarters of women seeking refuge from domestic violence are accompanied by children and that the risk of severe abuse for women who have children increases by more than 50 per cent at the point of separation. Indeed O’Hagan (2014) has highlighted the very real dangers for women with children trying to leave their abusive partner, and the poor understanding of the phenomena of filicide-homicide in the context of separation and divorce.

FAMILY VIOLENCE CAN AFFECT CHILDREN IN MANY WAYS:

Several studies also reveal that children who witness domestic violence are more likely to be affected by violence as adults – either as victims or perpetrators (WHO, 2002). When children live with family violence, they are experiencing trauma. It can be trauma that is ongoing and long-lasting. Family

violence can have impacts on overall health, development and wellbeing. The effects build up over time, and can impact on every aspect of their life. Children are affected if they:

- Witness the violence against their mother or care, or see their fear.
- Hear it in another room, or have to hide or run from abuse.
- Have to tiptoe around an abuser to try to prevent outbursts.
- Have to comfort, clean up or take additional responsibilities for siblings/care following violence.
- Are victimized for supporting their mother or care.
- Are encouraged to join in with verbal abuse or contempt for their mother or care.
- Cannot be cared for properly as the abuse is either directly preventing it, or is causing poor mental health and exhaustion for the care.
- Experience disrupted attachment with their mother or primary care as infants or the normal co-regulation of emotions between a mother and infant is disrupted.
- Are abused themselves. People who abuse their partners or ex-partners often abuse their children as well.
- Have an acquired brain injury from physical abuse.
- Are forced to have ongoing contact with someone of whom they are scared or whose presence is a 'trauma trigger', following previous incidents where the children have been traumatized.

Age Span Differences

The potential negative effects vary across the age span (*Table - 1*). In infants from homes with partner abuse, the child's needs for attachment may be disrupted. More than 50 percent of these infants cry excessively and have eating and sleeping problems. Infants are also at a significantly increased risk for physical injury. Preschool-aged children who witness intimate violence may develop a range of problems, including psychosomatic complaints such as headaches and abdominal pain. They also can display regressive behaviors such as enuresis, thumb sucking, and sleep disturbances. During the preschool years, children turn to their parents for protection and stability, but these needs are often disrupted in families with partner abuse. Increased anxiety around strangers and behaviors such as whining, crying, and clinging may occur. Nighttime problems such as insomnia and parasomnias are more frequent in this age group. Children in this age group who have witnessed domestic violence also may show signs of terror, manifested by yelling, irritability, hiding, and stuttering.

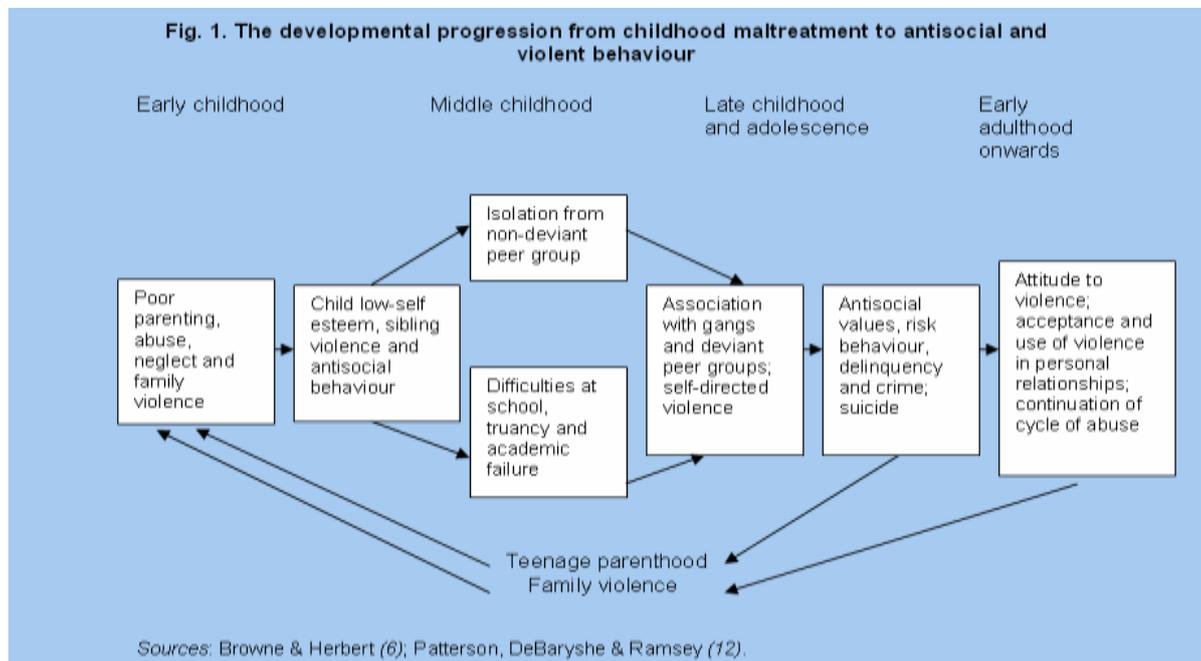
TABLE 1

Potential Effects in Children Who Witness Violence

AGE	POTENTIAL EFFECTS
Infants	Needs for attachment disrupted Poor sleeping habits Eating problems Higher risk of physical injury
Preschool children	Lack feelings of safety Separation/stranger anxiety Regressive behaviors Insomnia/parasomnias
School-aged children	Self-blame Somatic complaints Aggressive behaviors Regressive behaviors
Adolescents	School truancy Delinquency Substance abuse Early sexual activity

—Effects categorized according to age. Information adapted from references 3 and 5.

School-aged children also can develop a range of problems including psychosomatic complaints, such as headaches or abdominal pain, as well as poor school performance. They are less likely to have many friends or participate in outside activities. Witnessing partner abuse can undermine their sense of self-esteem and their confidence in the future. School-aged children also are more likely to experience guilt and shame about the abuse, and they tend to blame themselves.



THE IMPACTS OF FAMILY VIOLENCE ARE COMPLEX:

Studies seeking to overview the key research have affirmed that a significant majority of the children exposed to domestic violence are affected by the experience in both the immediate and longer term (Stanley, 2011). While the research has established associations between exposure to domestic violence and adverse outcomes for children, there is now a growing body of convergent evidence that suggests that the association is a causal one (Goddard and Bedi, 2010). A series of meta analyses of research studies examining the effects of children's experience of domestic violence have indicated that exposure is related to a range of subsequent emotional, behavioural and social problems (Kitzman *et al.*, 2003; Wolfe *et al.*, 2003; Evans *et al.*, 2008). The pathway is a complicated one involving children's reaction to what they have seen and heard, the decrease in parental warmth and caring in a household where violence takes place and the protective factors that ameliorate some of the negative effects (Stanley, 2011).

The most robust evidence of the impact of domestic violence on psychosocial outcomes for children comes from a meta-analysis of 118 studies (Kitzmann *et al.* 2003). It showed significantly poorer outcomes on 21 developmental and behavioural dimensions for most of the children exposed to domestic violence compared to children who had not been exposed to such abuse.

There is growing recognition of the heightened risk of domestic violence to women during pregnancy. It has been estimated that around 30 per cent of domestic violence begins during pregnancy, and that between 11 per cent and 44 per cent of pregnant women who had been abused in the past, were assaulted during pregnancy. In 90 per cent of all settings this abuse was carried out by the father of the unborn child (British Medical Association, 2007). During pregnancy women are less able to protect themselves and their unborn babies, resulting in possible miscarriage or long-term disability for a child. The impact of domestic abuse during pregnancy is recognized to be a significant contributory factor to maternal and foetal mortality and morbidity (CEMACH, 2009). There is a need to ensure that health professionals working with new and expectant mothers routinely ask about domestic violence and are clear about how to respond if disclosures are made (Lazenbatt and Thompson-Cree, 2009).

Other research has shown that children as young as one year old can manifest heightened distress in response to verbal conflict between parents (Overlien, 2010). Children living with domestic violence generally have significantly more frequent behavioural and emotional problems than their peers who do not live with domestic violence (Meltzer et al., 2009). Children who have also been physically abused display the highest levels of behavioural and emotional disturbance. It is important to recognize that individual children may react in different ways to the violence to which they are exposed. Some children may 'externalise' their feelings and confusion through aggressive or anti-social behaviour, whilst others may 'internalise' the behaviours resulting in higher levels of depression, anxiety and trauma symptoms. Research indicates the imitation violence on both boys and girls is similar with regard to internalizing behaviours, but that boys are more likely to display externalizing behaviours (Evans, Davies and DiLillo, 2008).

Currently, research does not indicate that a child's age makes any significant difference in respect of whether they are more or less affected by their exposure to domestic violence, although the ways in which they are affected may differ. For example, babies living with domestic violence appear to be subject to higher levels of ill health, poorer sleeping habits and excessive screaming, along with disrupted attachment patterns. Children of pre-school age tend to be the age group who show most behavioural disturbance such as bed wetting, sleep disturbances and eating difficulties, and are particularly vulnerable to blaming themselves for the adult violence. Older children are more likely to show the effects of the disruption in their lives through under performance at school, poorly developed social networks, self-harm, running away and engagement in anti-social behaviour (Humphreys and Houghton, 2008). When children experience domestic and family violence, it can affect their:

- **Behaviours** – They can act out, over-react, be hostile, impulsive, aggressive or defiant. They can also withdraw or dissociate or run away. All these behaviours can be normal to children who have been traumatized by family or domestic violence, and do not mean the children have 'disorders'. Drug and alcohol use can be a problem with older children.

- **Development** – Normal development can be impaired. They can look like they are regressing or acting younger than their age. This can be a subconscious way of trying to get to a state where they are safe and secure. It can also be a result of the harm to the brain's development caused by exposure to trauma.
- **Relationships** – They may avoid closeness and push people away. Children may also attach to peers or adults who may be unsafe for them, to try to develop an alternative secure base, if home feels insecure.
- **Emotions** – Children often feel fearful, stressed, depressed, angry, anxious or ashamed. Emotional security is the foundation of healthy relationships later in life. This security can be damaged if attachment between the mother/carer and baby is disrupted by domestic violence.
- **Learning** – They may not be able to concentrate at school because they are constantly on the lookout for danger. This can be subconscious. Detentions, missed school and frequent changes of schools can also affect learning.
- **Cognitions** – Children may have low self-esteem, and think negatively about themselves or people around them. (For example, they may think, 'everyone hates me'.)
- **Physical health** – A range of illnesses may be related to domestic and family violence. Headaches, stomach aches, stress reactions (for example rashes or immune system related illnesses) and sleep disturbances (for example nightmares, insomnia or bedwetting) are common.

Helping Children Recover:

How quickly and completely children recover from the effects of domestic and family violence depends on whether:

- They can be kept safe from violence and from reminders of previous trauma – known as 'trauma triggers'
- They are supported and comforted within a 'protective cocoon' of care after they experience trauma
- The schools and childcare centers they attend provide an understanding and supportive environment to help with healing and recovery
- They can have security, safety and care in their everyday lives
- They have access to specialized trauma-informed therapies or help, if they need them
- They can rebuild a safe and secure attachment with their mother or a protective carer, if they have been exposed to violence in their early years

- Other disadvantages impact on the child's life, such as poverty, isolation or school bullying

Recovery can also depend on individual personalities and strengths. 2.3 and 10 million children are exposed to domestic violence each year in the United States (Rossman, Hughes, & Rosenberg, 2000). Because of the high incidence rates, researchers recently have begun to examine the effects of such exposure on children.

CONSEQUENCES OF CHILD MALTREATMENT:

Research has demonstrated a number of potentially negative outcomes for victims of child maltreatment (9–11), including:

1. Death	2. Sleep disorders and Post-traumatic stress disorder
3. Physical and Mental disability	4. Mental health problems
5. Stress and Physical health problems	6. Eating disorders and self-injury
7. Low self-esteem and poor self-worth	8. Alcohol and drug abuse
9. Educational failure	10. Increased risk of further victimization
11. Emotional and behavioral problems	12. Victims becoming offenders

Generally, maltreated children show less self-confidence, joie de vivre and hope for the future. These consequences may continue into adulthood and reduce the person's quality of life. Risk-taking behaviour also leads to far-reaching physical and psychological ill effects, sometimes resulting in early death or suicide. Evidence from the Adverse Childhood Experiences (ACE) study in the United States demonstrated a strong relationship between maltreatment in childhood and self-reporting by adults of smoking, obesity, alcohol and drug abuse, sexually transmitted diseases, depression and suicide. In addition, childhood victims who reported a high number of adverse experiences were more likely to have heart disease, cancer, stroke, diabetes, liver disease and generally poor health as an adult.

CONCLUSION:

Thus, family violence is highly dangerous, especially for children of all age groups. Truly, children are the "biggest victim" of this evil having long lasting effect on children as well as on the whole humanity. The costs to children and to society of children's exposure to family violence are enormous. To reach these hidden victims of family violence, however, all agencies, institutions, and service providers for children must make efforts to identify, assess them and make a treatment approach. Children who are exposed to family violence in the home are denied their rights to a safe and stable home environment. Child victims of family violence present a number of psycho-social characteristics having long lasting effects on children and are "at-risk" to repeat their experience in the next generation, either as victims or perpetrators of violence in

their own intimate relationships. Thus, violence has no place in a child's life. With a clear vision and concrete action, we can and must give children a brighter and more peaceful future. Interventions that help children are usually those that help parents to increase their own safety and to increase the resources available to provide safety for their children.

Child abuse and family violence are inextricably interwoven and not only hurts and harms the child; it has far reaching effects on all of society. Promising strategies to prevent violence against children in the home and family context are many and varied, ranging from programmes with a direct impact, such as parenting training, to policies with a more indirect impact, such as those governing alcohol availability or access to family planning services. Community based interventions may be the best hope for families in our society struggling with violence in their homes. Further, knowledge of human rights is the best defense against their violation. Learning about one's rights including child rights builds respect for the rights of others and children, and points the way to more tolerant and peaceful societies. Thus, ending violence against children needs to be part of National Development Plans and development assistance frameworks, not an after thought.

