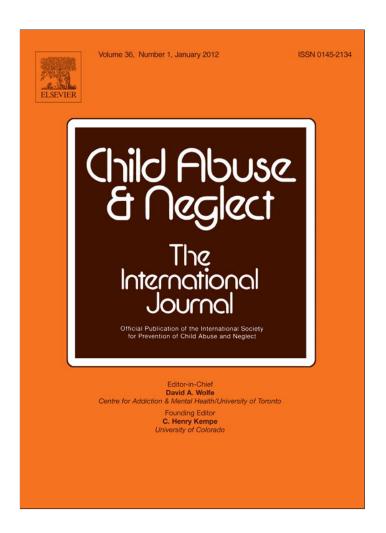
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## Child Abuse & Neglect



### **Brief Communication**

# Children in danger of domestic homicide

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Child maltreatment and domestic violence were once considered separate topics both in research and in clinical practice. This brief communication attempts to shed light on the lethal risk posed to children living with domestic violence. It is hoped that the acknowledgment of these risks will better inform research and clinical practice to protect children in these circumstances.

Recent studies have pointed to the fact that child maltreatment and domestic violence are overlapping issues with 30–60% of families reporting a co-occurrence of child maltreatment and adult domestic violence (Edleson, 1999). One study indicated that an estimated 8,755,000 children had experienced maltreatment and an estimated 2,190,000 children had witnessed domestic violence in the United States (Finkelhor, Ormrod, Turner, & Hamby, 2005). Statistics Canada (2009) has noted a current family violence rate against children and youth of 206 per 100,000 population. A significant amount of research has identified the detrimental impact that domestic violence has on children (Kitzmann, Gaylore, Holt, & Kenny, 2003; Wolfe, Crooks, Lee, McIntyre-Smith, & Jaffe, 2003). Exposure to domestic violence has serious impacts to child development resulting in impairments in emotional and behavioral functioning inclusive to social competence, school achievement, cognitive functioning, psychopathology, and general health (Alpert, Cohen, & Sege, 1997; Humphreys, 2001; Wolfe et al., 2003). Aside from the exposure, perpetrators of domestic violence are at a greater risk of being deficient, potentially abusive parents excessively using corporal child-control strategies (Adinkrah, 2003; Jaffe, Johnston, Crooks, & Bala, 2008).

#### Children and domestic homicide

Domestic violence at its extreme results in domestic homicide. In the US approximately 1,800 adults are killed annually as a result of domestic homicide (Adams, 2007). Canadian rates indicated approximately 132 cases of domestic homicide in 2007 (Statistics Canada, 2009). Currently, there are no studies that have calculated the prevalence of children affected by domestic homicide; however some researchers estimate that approximately 3,300 children lose a parent(s) to domestic homicide every year in the US (Lewandowski, McFarlane, Campbell, Gary, & Barenski, 2004).

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Domestic homicide has a devastating impact on children. With a single act, a child can lose both parents to death and/or criminal repercussions. Prominent authors in the field, Eth and Pynoos (1994), note that children exposed to domestic homicide experience traumatic grief, "[becoming] overwhelmed, resorting to maladaptive behavior, or remaining frozen in misery" (Eth & Pynoos, 1994, p. 296). Beyond the profound trauma, some youngsters face ongoing loyalty conflicts with maternal and paternal family systems along with the traumatic memories of the perpetrator's violence and the victim's injuries (Burman & Allen-Meares, 1994; Eth & Pynoos, 1994). Children may also experience significant mental, physical, behavioral, and academic adjustment problems comprising of mental health issues (Hardesty, Campbell, McFarlane, & Lewandowski, 2008). These children may also have compounding problems related to multiple disruptions in their lives in terms of home and school placements which undermine their sense of stability and security (Clements & Averill, 2004; Kaplan, Black, Hyman, & Knox, 2001; Parker, Steevers, Anderson, & Moran, 2004).

Court proceedings that require some children to become witnesses may cause further trauma through the recounting of violent memories (Eth & Pynoos, 1994). The devastating effects of experiencing these tragedies, including the perpetration of violence in future intimate relationships may carry over into adulthood (Parker et al., 2004). It may be difficult for these children to separate themselves from an imagined outcome associated with the parent victim or perpetrator (Eth & Pynoos, 1994).

Children affected by domestic homicide may not receive the counselling they need, as new caregivers may not recognize trauma symptoms in the desire to re-establish some routines in the children's lives (Kaplan et al., 2001). There are often significant delays in receiving counselling for these children. It can be many years before counselling is received (Black & Kaplan, 1988). Only a minority of children receive further ongoing therapy, despite possible recommendations from legal proceedings or by mental health professionals (Kaplan et al., 2001).

#### Child homicide

Children are also at risk of being killed in domestic homicide incidents (Jaffe & Juodis, 2006). Although there are no research studies that look at the prevalence rate of children killed in the context of domestic violence, many domestic violence death review committees track the number of child deaths that occurred within domestic homicide cases. The Domestic Violence Death Review Committee (DVDRC) of Ontario noted that 27% of the 77 domestic homicide cases reviewed between 2003 and 2008 had a history of violence or threats against children (Ontario DVDRC, 2008). Furthermore, of the 166 domestic homicide cases that occurred in Ontario between 2002 and 2007, a total of 230 victims resulted, 23 of which were children (Ontario DVDRC, 2008). Also a report from the Arizona Coalition Against Domestic Violence, based on 2005–2008 data, noted that 22 of the 98 cases reviewed involved children with a total of 16 child deaths (Arizona Coalition Against Domestic Violence, 2009).

Little research has identified the connection between adult domestic homicide and child homicide; however there is some indication that child homicides are often preceded by a family history of child abuse, prior agency involvement, and domestic violence (Websdale, 1999, p. 24). Websdale (1999) examined 83 cases of domestic child homicide in the state of Florida. In approximately 50% of these cases children experienced prior abuse and/or neglect at the hands of the perpetrator, and in nearly half of these cases the abuse was accompanied by domestic violence between the parents. When examining 57 couples that experienced a child homicide, Websdale found that over half of these couples had a prior history of domestic violence, with 32% experiencing domestic violence in combination with child abuse and/or neglect and 21% with no reports of child abuse and/or neglect (Websdale, 1999). These findings indicate that children living in homes with a presence of domestic violence may be at risk for homicide, although the risk for lethality may not appear obvious in some cases due to the absence of a history of child abuse.

What is evident from the previous research is that children may be at risk of domestic homicide and that information regarding risk factors unique to child homicide is lacking. This brief communication attempts to address this gap by bringing awareness to this developing issue. To aid in this, 17 DVDRC reports were reviewed for the presence of child homicide.

#### Method

Current reports from 16 US DVDRCs and 1 Canadian DVDRC were gathered from committee websites. These reports and committees were chosen based on the availability of published data. Reports were gathered from DVDRCs in the following locations (please note that the reports year is identified in brackets): Contra, California (2005), Kern, California (2006), San Diego, California (2006), Santa Clara, California (2006), Cuyahoga, Ohio (2007), Delaware (2007), Florida (2007), Georgia (2008), Maine (2008), Hennepin, Minnesota (2007), New Mexico (2007), Utah (2004), Vermont (2005), Chesterfield, Virginia (2006), Washington (2008), Wisconsin (2006), and Ontario Canada (2008). Each report was reviewed and coded for the total number of incidents of domestic homicide, the total number of children present and witness to the domestic homicide, and the total number of children that lost a parent(s) to domestic homicide.

**Table 1**Summary of most recent findings by DVDRC's<sup>a</sup> on children affected by domestic homicide.

Location of DVDRC State-County	Total # of incidents	Total # of deaths	Total # of children killed	Total # of children present and witness to homicide	Total # of children that lost a parent(s) from homicide
California – Contra (2005)	26	31	3	_	16
California – Kern (2006)	23	31	0	13 present	28
California – San Diego (2006)	24	30	1	3 present	_
California – Santa Clara (2006)	5	6	1	5 present	7
Ohio – Cuyahoga (2007)	19	22	2	_	-
Delaware (2007)	70	92	2	31 present	24
Florida (2007)	24	29	8	_	-
Georgia (2008)	65	89	3	55 present, 39 witness	-
Maine (2008)	14	20	0	10 present	15
Minnesota – Hennepin (2007)	11	16	1	4 present	_
New Mexico (2007)	28	28	2	6 present, 1 witness	_
Utah (2004)	_	78	6	_	_
Vermont (2005)	2	2	0	2 present	_
Virginia – Chesterfield (2006)	17	25	7	_	_
Washington (2008)	486	635	35	72 present, 63 witness	_
Wisconsin (2006)	26	33	1	11 present	22
Ontario, Canada (2008)	166	230	23	61 present, 16 witness	_

<sup>&</sup>lt;sup>a</sup> Some committees are called Fatality Review Committees.

#### Results

The 17 DVDRC reports combined documented 1,006 incidents of domestic homicide totaling 1,397 deaths. Of these 1,397 deaths, a total of 95 children were killed. Twelve of the 17 reports, totaling 920 incidences, indicated that 273 children were present during the homicide and 199 children witnessed the incident. Six reports, representing 164 incidences, acknowledged that a total of 112 children lost at least 1 parent as a result of homicide. Specific results of each DVDRC report are summarized and listed in Table 1. These results are a summary of information provided by domestic violence death review committees in the US and Canada. Currently, the committees do not provide information regarding the impact of children witnessing the homicide, custody issues or agreements post-homicide, and/or potential interventions for children exposed to domestic homicide. It is hoped that future studies examine these factors in detail.

## Discussion

Children are harmed by exposure to domestic violence and domestic homicide. In fact, some children may be killed in the context of domestic violence. The data identified within this brief communication indicates that many children are exposed to, and therefore affected by, domestic homicide. Furthermore, the data illustrates that children are also killed during domestic homicide incidents. From a review of 17 jurisdictions in the US and Canada, 112 children lost at least 1 parent as a result of homicide, 273 children were present during the homicide, 119 children were identified as witnesses, and 95 children were killed. From this information it is apparent that children are significantly impacted by domestic homicide in a number of ways as witnesses or actual victims.

The information gathered from the 17 DVDRC reports acknowledges lethal risk for children involved with domestic violence situations. What is not clear are the potential risk factors that may indicate lethal risk to a child. The DVDRC of Ontario has identified 37 risk factors that possibly increase the risk of lethality within domestic violence situations (Ontario DVDRC, 2008). It cannot be assumed that these risk factors also predict risk to children. As noted in the 17 DVDRC reports, children are not always attacked directly or physically harmed in cases of domestic homicide indicating that different factors may contribute to child homicide. Risk factors are important to determine as they assist professionals in identifying the risk of lethality in domestic violence situations. As such, future research should identify factors specific to the risk of lethality for children to build on the existing literature on the prediction of adult deaths (Campbell, 2004).

The assessment of risk is often a common practice for those working with victims of domestic violence. Numerous assessment tools have been developed to aid professionals in this task. To the authors' knowledge, no risk assessment tools have been specifically designed to measure a child's risk of lethality in a domestic violence situation. Often helping professionals focus solely on the primary victim overlooking the potential for lethal harm to the child. To alleviate this oversight, assessment tools specific to both the child and the primary victim should be developed and existing tools should be tested for this population of children.

The data presented within this brief communication has its limits. It focuses solely on brief statistics of child involvement within the context of domestic homicide and does not provide insight into potential risk factors. It is also limited within its abilities to generalize to other populations, as it is specific to cases within the reported regions and to those cases reviewed by the committees. It does however provide a foundation for future research and allows light to be shed on the

tragic occurrence of child death. It is the hope of the authors that future research will determine prevalence rates for children exposed to domestic homicide and identify the unique factors that jeopardize a child's safety. An important goal is to develop appropriate risk assessment tools for front line social workers, police officers, and the courts in an effort to protect children in these circumstances.

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