

# Caregivers Helping to Affect and Nurture Children Early

Training Manual  
Participant Resources



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# **Module One Resources**

## **Domestic Violence in America**

## Resource #1

### Getting to Know You\*

Using this form, choose someone in the group to interview. Take notes so that you can introduce your interviewee to the whole group.

1. Tell me about your name. What is it? Were you named after someone? Who? Why? Have you ever changed any part of your name? Do you know much about your surname's origins?
  
2. If you were one of the following, which would you be, and what would your title be?
  - A Romantic Comedy Film
  - A Self-Help Book
  - A How-To Book
  - A Music Video
  - A Song
  - A Broadway Musical
  - A Drama Series
  - An Action Film
  
3. What is one thing that would surprise people about you?
  
4. What is your greatest hope and your worst fear about responding to domestic violence issues in early childhood programs?

\* Created by Ann Adalist-Estrin, M.S., and adapted for ISF CHANCE Training

## Resource #2

### Definitions of Domestic Violence

Domestic Violence (DV) or Intimate Partner Violence (IPV) is a pattern of physical, verbal, emotional, and sexual abuse, which includes, but is not limited to, threats, intimidation, isolation, and/or financial control. Domestic Violence is a pattern of behavior that is used by one person as a means to harm and take power and control over another person in the context of a dating, family, roommate or caretaker relationship. This type of violence can occur among heterosexual or same-sex couples and does not require sexual intimacy. IPV can vary in frequency and severity. It occurs on a continuum, ranging from one hit that may or may not have a severe impact on the victim to chronic, severe battering. Repeated abuse is also known as battering. Domestic Violence is maintained by societal and cultural attitudes, institutions and laws that often do not identify this type of violence as wrong.

**Physical violence** is the use of physical force with the potential for causing death, injury, disability, or harm. Physical violence includes, but is not limited to, scratching, pushing, shoving, throwing, grabbing, biting, choking, shaking, slapping, punching, burning, use of a weapon, and use of restraints or one's body, size, or strength against another person.

**Sexual violence** is divided into three categories: 1) use of physical force to compel a person to engage in a sexual act against his or her will, whether or not the act is completed; 2) attempted or completed sex act involving a person who is unable to understand the nature or condition of the act, to decline participation, or to communicate unwillingness to engage in the sexual act, e.g., because of illness, disability, or the influence of alcohol or other drugs, or because of intimidation or pressure; and 3) abusive sexual contact.

**Threats of physical or sexual violence** are the use of words, gestures, or weapons to communicate the intent to cause death, disability, injury, or physical harm.

**Psychological/emotional violence** involves trauma to the victim caused by acts, threats of acts, or coercive tactics. Psychological/emotional abuse can include, but is not limited to, humiliating the victim, controlling what the victim can and cannot do, withholding information from the victim, deliberately doing something to make the victim feel diminished or embarrassed, isolating the victim from friends and family, and denying the victim access to money or other basic resources. It is considered psychological/emotional violence when there has been prior physical or sexual violence or prior threat of physical or sexual violence.

**Stalking** is also often included among the types of IPV. Stalking generally refers to repeated behavior that causes victims to feel a high level of fear including unwanted phone contact, e-mail or voicemail harassment and unannounced, unwanted visits or appearances at one's home or workplace (Tjaden and Thoennes, 2000).

## Resource #3

### Myth or Fact Quiz

Directions: After reading each statement carefully, determine whether it is Myth or Fact, and circle the corresponding word.

- |   |      |      |
|---|------|------|
| 1. Domestic violence includes physical and verbal battery of a partner.                                       | Myth | Fact |
| 2. Domestic violence is rare in middle and upper income families  | Myth | Fact |
| 3. Abusers often come from families where they witnessed domestic violence as children.                       | Myth | Fact |
| 4. People who are being continually abused by intimate partners make a choice to stay in the relationship.    | Myth | Fact |
| 5. There is no domestic violence among gay and lesbian partners.  | Myth | Fact |
| 6. Men cannot be victims of domestic violence.  | Myth | Fact |
| 7. When children live in situations where there is domestic violence, they are often also abused.             | Myth | Fact |
| 8. Children rarely suffer long-term effects as a result of living in a home where there is domestic violence. | Myth | Fact |
| 9. Many women are killed or maimed annually by abusing partners.  | Myth | Fact |
| 10. If you know about a situation where someone is being abused, you should stay out of it.                   | Myth | Fact |

## **Resource #4**

### **Domestic Violence Realities\***

1. Approximately 1.5 million women and 834,700 men are raped and/or physically assaulted by an intimate partner each year in the U.S.
2. Nearly one-third (31%) of American women report physical or sexual abuse by a husband or boyfriend sometime in their lives.
3. Violence is the reason stated for divorce in 22% of middle-class marriages.
4. Women are five to eight times more likely than men to be victimized by an intimate partner.
5. Women who leave their abusers are at 75% greater risk of severe injury or death than those who stay in their relationships.
6. Child abuse occurs in 30 - 60% of domestic violence situations where there are children present.
7. Parents who are violent with one another are at higher risk for abusing their children.
8. Each year, an estimated three to ten million children witness assaults against a parent by an intimate partner.
9. Children exposed to domestic violence are at risk for emotional, physical, and cognitive delays and/or difficulties.

\* Source: [www.endingviolence.com](http://www.endingviolence.com) (adapted)

## Resource #5

### Patterns of Domestic Violence in Families\*

Research has shown that there are some predictable patterns in families living with domestic violence:

1. Domestic violence does not occur as an isolated event. If no legal intervention occurs, it will happen over and over.
2. Once violence occurs, it tends to increase in severity over time.
3. Violence is more likely in authoritarian households, where there is a belief in the supremacy of one partner over the other.
4. Violence is often connected to drug or alcohol abuse.
5. Violence is often connected to unemployment or underemployment of one of the partners (economic stress).
6. Violence occurs in cycles: commission of a violent act, separation of the parties, the perpetrator's pleas for forgiveness, and reconciliation and reunion of the parties.
7. Physical violence often includes or is preceded by verbal battery.
8. Most violence (2/3) is perpetrated by one intimate partner against the other, rather than by strangers or casual acquaintances.
9. Women are more likely than men to be domestic violence victims.
10. Childhood exposure to domestic violence has long-term consequences that can include physical and medical problems, emotional disturbances, and academic difficulties.
11. Abusers often come from families where they witnessed domestic violence as children.
12. Patterns of violence occur in every racial, cultural, ethnic, religious, and economic group. They occur in gay and straight families, and in families with young and mature parents.
13. With emotional support and resources, families affected by domestic violence can be reconciled and develop appropriate behaviors and skills.

\* Source: [www.endingviolence.com](http://www.endingviolence.com) (adapted)

## **Resource #6**

### **Characteristics of Victims\***

Who are the victims of domestic violence?

Victims:

- Can be any woman.
- Are sometimes men.
- Can come from any community, race, religion, or ethnicity.
- Are very likely to have experienced violence as children.
- Can often be isolated from friends, family, and community.
- Often, but not always, accept traditional male and female roles.
- May accept a myth of male superiority, male dominance.
- Can be gay or straight.
- Often feel emotionally dependent on their partner.
- Often are or feel economically dependent on their partner.
- Usually feel responsible for the abuse.
- Often attempt to try harder and be “better” to avoid the abuse.

\* Source: [www.endingviolence.com](http://www.endingviolence.com) (adapted)



## **Resource #7**

### **Reasons Victims Stay in Abusive Relationships\***

1. Fear of increased violence and danger to personal safety or safety of children.
2. Fear of loss of economic resources.
3. Belief that it is their fault and they can change the situation.
4. Love for partner.
5. Religious teachings or moral/social code of obedience.
6. Fear of loss of child custody.
7. Perception of aloneness/lack of support from friends and family.
8. Fear of overwhelming or increased stress associated with single parenting.
9. Denial of the severity of the situation.
10. Belief that the partner needs them.
11. Feelings of helplessness and hopelessness.
12. Lack of information about or access to safety and support.

\* Source: [www.endingviolence.com](http://www.endingviolence.com) (adapted)

## Resource #8 Stages of Change and Domestic Violence\*

According to the work of Prochaska and DiClemente, humans go through stages as they move through changes in circumstances and behaviors. Understanding these stages of change can be very helpful in understanding the decisions made by those living with domestic violence.

### Stages of Change and Domestic Violence

Stage	Description of Stage	Stage of Change in Domestic Violence Victims
Precontemplation	Unaware of benefits of change; not wanting to change; sees failure as character flaw; can be influenced by denial	Wants to maintain the status quo; often feels that it is not that bad, belief that circumstances will be worse if leaves; does not want relationship to fail
Contemplation	Acknowledges problem, considers making changes	Knows the relationship is in trouble, but is unsure of whether or what steps to take/when
Preparation	Intends to make change soon; has attempted change or is taking steps toward change, but has not been successful	Has left before or tried to leave, but returned; may have reached out to others
Action	Motivated to engage in activities to promote change	Takes specific steps to leave and pursue a new life
Maintenance	Feels successful; has been engaged in change for 6 months	Able to see self without partner; building new relationships, skills
Termination/ Relapse	Gives up on change or says will try again another time	Returns to abuser; may be convinced abuser will change

\* Source: Prochaska and DiClemente, 1992

## **Resource #9**

### **Understanding Victims of Domestic Violence – Questions for discussion:**

1. How much control did the guests/characters have over their lives?
2. How were children being affected by their parents' relationships?
3. How/why did the women make their decisions to leave their partners?
4. What things influenced the various people that you heard?
5. Can you think of a few other questions that would help you to understand the victims' perspectives?
6. In what Stage of Change did survivors appear to be?
7. Were any characteristics of victims (See Resource #6) or reasons victims stay (See Resource #7) evident?

## **Resource #10**

### **Sample Scenarios for**

### **“What Would You Do, If You Were A Victim?” Activity**

1. You are 25 years old, pregnant, and living with your boyfriend, the father of your unborn child. You are estranged from your family because of the pregnancy and the two of you have just moved into a new town, hundreds of miles from your home. You have not yet found a job and do not know anyone well. Unexpectedly, your boyfriend begins hitting you.
2. You are a lesbian living with a new partner. You have two young children from a previous marriage also living with you. Your partner seems to be having trouble adjusting to your children, and angrily confronts you about their behavior. She threatens to make you leave if you do not allow her to discipline your children. You have nowhere else to go.
3. You are a 40-year-old Latino, married for 10 years. Since your marriage began, your wife has been verbally abusive. You are berated for almost everything on a daily basis. Your wife calls you names, humiliates you in public, criticizes every action, and pokes fun at your friends and extended family. Although you are unhappy, you cannot confide your situation to friends or family for fear that you will be seen as “wimpy.”
4. You are a 35-year-old African-American female. You have a lucrative position with a finance company, and have family and several close friends living nearby. You recently became engaged to “the love of your life” and you are planning a spring wedding. Recently, your fiancé began asking you to leave your job after the wedding to be a stay-at-home wife. He has also asked that you spend less time with your family and friends (you see them once or twice a week). He says that, if you love him, you will be willing to devote your life to him alone. He has even suggested that you may need to move away after the wedding in order for the two of you to “start over”.

## Resource #11

### Who are the Abusers? What do you think?

Directions: Read each statement carefully, determine whether you “Agree” or “Disagree” and circle the corresponding word.

- |   |       |          |
|---|-------|----------|
| 1. Most abusers do not really care about their families.  | Agree | Disagree |
| 2. An abuser is always poor and has little education.   | Agree | Disagree |
| 3. Verbally berating a partner is not considered abuse.   | Agree | Disagree |
| 4. When an abuser strikes out, he/she was probably provoked into this behavior by the partner.                                | Agree | Disagree |
| 5. Once someone develops abusive behaviors, there is little hope for their recovery and positive involvement with the family. | Agree | Disagree |
| 6. A victim should hang in there when being abused, because a partner’s behaviors can change with enough love.                | Agree | Disagree |
| 7. Abusers rarely hurt their children, only their adult partners.   | Agree | Disagree |
| 8. Abusers often have substance abuse or emotional problems.  | Agree | Disagree |
| 9. Abusers can change their behavior if an authority figure explains it to them (a minister, boss, etc.).                     | Agree | Disagree |
| 10. Abusers were often abused themselves and are not responsible for their behavior.  | Agree | Disagree |

## Resource #12

### Who are the Abusers? What Do We Know?\*

#### 1. Characteristics of Abusers\*

- They are usually male.
- They often have had childhood experiences with violence.
- They come from all age groups, races, religions, cultural groups, educational levels, and socioeconomic groups.
- They may have very low self-esteem.
- They may abuse alcohol and/or drugs.
- They often feel powerless.
- They will use physical force to maintain power and control.
- They can believe in male supremacy or male dominance in the family.
- They often blame others for their situations and behaviors.
- They may behave conventionally in public.

#### 2. Why People Abuse Their Partners

- Feelings of powerlessness.
- An attempt to gain control.
- May be a learned behavior witnessed in childhood.
- May be triggered by drug or alcohol use or abuse.
- May believe in male dominance and feel entitled to control others.
- May have been victims themselves and the abuse results from trauma and rage.

\* Source: [www.endingviolence.com](http://www.endingviolence.com) (adapted)

## Resource #13 Power and Control Wheel



DOMESTIC ABUSE INTERVENTION PROJECT

202 East Superior Street  
Duluth, Minnesota 55802  
218-722-2781  
www.duluth-model.org

## Resource #13 (continued) Power and Control Wheel Discussion Guide

1. These words and phrases come from the Power and Control Wheel. What meaning do they have for you?
  - Intimidation
  - Economic abuse
  - Coercion
  - Threats
  - Male privilege
  - Using the children
  - Emotional abuse
  - Isolation
  - Denial
  - Blame
  
2. Questions for discussion:
  - What are some examples of each of the aspects of the Wheel?
  - Could a perpetrator effectively control a partner without employing several or all of the aspects of the Wheel?
  - What could a person do if victimized in any one of these ways?
  - Does this make you wonder if there are men who are abused by other men, or by women?
  - What about women abused by other women? How could this model be applied to those situations?



## Resource #14

### A Personal Follow-Up Plan\*

*“Everything you touch you change, and everything you change changes you.”*

Octavia Butler

Reflect on this quote from The Parable of the Talents by Octavia Butler.

What will you take from this training that will create change?

#### I. The Triumphs

A. What 2 things did you hear in this session that reinforced skills or information that you already had and validated you in your work?

- 1.
- 2.

B. What will keep you “keeping it going?”

#### II. The Challenges

A. What 2 things did you hear in this session that raised questions for you?

- 1.
- 2.

B. Where will you go to find out more?

#### III. The Obstacles

A. What 2 things did you hear that you disagreed with or you feel pose obstacles to your work?

- 1.
- 2.

B. Who will you talk to about these?

#### IV. The Pathways

A. What 2 new skills or ideas did you learn that you are eager to try?

- 1.
- 2.

B. Who will you ask to mentor you in the process?

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## **Module Two Resources**

### **Young Children and Domestic Violence**

## **Resource #15**

### **Developmental Tasks of the Preschool Years – Birth to Five**

#### **Infants**

- Form trusting relationships with caring adults
- Develop motor skills for sitting alone, crawling, walking, picking up objects
- Use all senses, especially mouth/taste, to explore and understand the world
- Develop beginning receptive (understanding) language skills
- Begin to use motor skills for exploring the environment

#### **Toddlers**

- Expand circle of trusting relationships with caring adults
- Test attachments by practicing independence
- Practice large motor skills and further develop small motor skills
- Develop a beginning sense of autonomy (“I can do it!”)
- Engage in first risk-taking activities to further explore and indulge curiosity while gradually moving away from adults
- Develop beginning expressive (speaking) language skills

#### **Preschoolers**

- Develop trusting relationships with adults outside of the family
- Develop a sense of psychological separateness from parents
- Begin to develop friendly relationships with peers while gradually recognizing them as separate people with needs and feelings
- Develop interests and preferences for foods, activities, playmates
- Expand enthusiasm for and curiosity about new experiences
- Develop ability to converse using expanding receptive and expressive language skills

#### **School-Age**

- Practicing skills in every domain: physical, cognitive and social-emotional
- Motivated by peer relationships
- Beginning of evolving logical thought
- On-set of social emotions such as embarrassment/shame
- Can become rigid and rule-bound

## Resource #16

# Parents' and Caregivers' Roles in Supporting Development in the Early Years

### During Infancy

- Provide consistency of caregiving and support
- Provide a safe and predictable environment and routines
- Talk and listen to the child, read stories
- Show pleasure in the child's achievements, large and small

### During Toddler Period

- All of the above and...
- Allow the child to expand his/her circle of caregivers and loved ones
- Support the beginning sense of autonomy via successful toilet training and self-care activities
- Be patient with testing behaviors and emotional conflicts that result in defiance and tantrums
- Allow risk-taking activities appropriate to the child's age and developmental level
- Support beginning expressive language skills via conversation and listening

### During Preschool Years

- Support additional relationships with other adults and children
- Tolerate the child's defiant reactions while setting firm and predictable limits with reasonable consequences
- Respect children's preferences and choices
- Influence children's development of concepts and skills through interactions and conversation
- Continue to provide a safe and predictable environment

### During School Age Years

- Modulate exposure to adult world
- Share values
- Respect children's feelings about their peers
- Foster skill-building by reinforcing strengths and guiding practice in areas still emerging

## Resource #17 Temperament Scale\*

After each characteristic, rate yourself on a scale of 1-10. Think of a child you know and rate the child also.

1. **Activity level.** Some children are active. They kicked a lot in the uterus before they were born, they are babies that move around in their bassinets, and as toddlers, they always run. They can turn into people who just need a lot of activity and movement to be happy. Other children and people are content with much less activity.

1-----5-----10  
Not very active Very active

2. **Rhythmicity.** Some people have regular cycles of needs. They eat, sleep, and have bowel movements on schedule almost from birth. Others are more sporadic and much less predictable.

1-----5-----10  
Not very regular or rhythmic Very regular

3. **Approach-Withdrawal.** Some children delight in everything new; others withdraw from new situations. The first bath makes some babies laugh and others cry. There are children and adults who love to try new experiences and are eager to jump right in. There are also those who need to take a lot of time to warm up to new people, places, foods, or ...anything.

1-----5-----10  
Slow to warm up Eagerly approaches

4. **Adaptability.** Some children and adults adjust quickly to change; others are unhappy at every disruption of their normal routine.

1-----5-----10  
Dislike changes Quickly adjusts to new experiences

5. **Intensity of reaction.** There are those who react to things with GREAT joy or GREAT frustration and those that respond to life in a milder, less intense way.

1-----5-----10  
Low key reactions Intense reactions

6. **Threshold or responsiveness.** Some children seem to sense every sight, sound, and touch. For instance, they waken at a slight noise, or become overwhelmed by visual clutter or pungent smells. They may turn into adults who have difficulty screening out



the world and are easily over-stimulated. Others seem unaware of bright lights, loud street noises, wet diapers, or crowded rooms.

1-----5-----10  
 Low tolerance for sensory input High tolerance for sensory input

7. **Quality of mood.** Some people’s moods switch rapidly from happy to upset. Others can stay in one emotional state for what may seem like a very long time.

1-----5-----10  
 Even tempered Moods change quickly

8. **Distractibility.** Most people get fussy when they are hungry or tired or upset.; but some can be easily distracted by activities, people, TV, or interruptions in routine. Similarly, when children want to do something dangerous or prohibited, some of them can be distracted by another, safer idea while others are more single-minded and stay focused on what is desired.

1-----5-----10  
 Stays very focused Easily distracted

9. **Attention span.** Some people stay happily with one task for a long time. Others quickly move from one activity to another.

1-----5-----10  
 Moves often from one activity to another Stays with one thing for long periods

The nine individual temperament characteristics listed here do not, in and of themselves, create behavior problems or interfere with a child’s ability to cope with crisis (Chess & Thomas, 1977). Rather, it is the fit (or the lack of fit) between the child’s temperament and the coping style and expectations of the adults around him/her that can cause distress for everyone.

Another aspect of temperament that can interfere with a child’s coping is the degree to which a parent or caregiver identifies the temperament quality as similar or identical to their own or that of the child’s other parent. This can endear a child when those qualities are loved and appreciated in yourself or another. But when those qualities are repulsive or frustrating in one’s self or others, they can cause parents and caregivers to react negatively. For children with a parent who has caused distress in the family, their likeness to that parent can make them unlikable to parents or caregivers and cause the child to become the target for misplaced anger.

\* Created by Ann Adalist-Estrin, M.S., and adapted for ISF CHANCE Training

## Resource #18

### Effects of Domestic Violence on Children\*

#### Behavioral Reactions in Children

Children's responses to violence in the home will vary, not only from child to child, but also from day-to-day in the same child. Reactions are influenced by temperament and family dynamics, as well as additional stressors on the child. There are, however, some behaviors that are often observed in children living with domestic violence.

#### *Infants*

- Attachment disruptions (will go to anyone OR no one)
- Disrupted or changed sleep patterns  
changes in eating patterns
- Excessive or unusual crying

#### *Preschoolers*

- Increased separation anxiety
- Regressive behaviors
- Insomnia, sleep disturbances
- Psychosomatic complaints  
(headaches, stomach aches)
- Changes in eating, toileting patterns

#### Generalized Effects

- Emotional and behavioral disturbances (withdrawal, low self-esteem, nightmares, aggression against peers and/or family members, destruction of property)
- Changes in ability to learn (difficulty focusing, concentrating, easily distracted)
- Difficulty establishing good peer relationships
- Suppressed drive to explore, natural curiosity
- Increased anxiety levels, worry
- Hyper-vigilance
- Overreaction to loud noises, sudden movements
- Decreased attention span
- Mistrust of adults
- Fear of being hurt
- Unpredictable outbursts, acting out
- Increase in aggressive behaviors toward others
- Seems angry much of the time

## **Factors Influencing Degree of Impact of Violence on Children**

- Age – child’s age (the youngest children may be most vulnerable)
- Frequency of exposure (chronic exposure is most harmful)
- Proximity of the threat (children are at greatest risk who are direct witnesses, but those who only hear the violence, or even learn of it afterwards can also be affected traumatically)
- Degree of the threat (children who feel threatened are at highest risk)
- Familiarity – children are most affected when perpetrator/victim are parents
- Presence of an adult to mediate the intensity of the violent event

\* Source: Child Witness to Violence Project, National Coalition for Child Protection Reform, 2004.  
Adapted by Ann Adalist-Estrin, M.S. for ISF CHANCE Training



## Resource #19

### Victims and Parenting \*

1. Parents who suffer abuse and live with domestic violence, experience trauma. They fear for their lives and for the safety of their children, often so much so that they cannot think of anything else.
2. These feelings and preoccupations, and the behaviors that come with them, will affect young children.
3. The following is a list of the most frequently observed parent/victim reactions and the corresponding implications for parenting and child development.
  - Sadness and anxiety – may make the parent less responsive to overtures from the child and can interfere with attachment.
  - Impaired ability to be consistent and predictable – can create anxiety in children.
  - Feelings of numbness, depression, fear, or preoccupations with safety may make parent emotionally unavailable to child.
  - Increased fear for the child’s safety – can result in hyper vigilance and “over-protective” parenting.
  - Inability to trust the safety of child’s independence and to support the child’s autonomy – could interfere with the child’s motivation to explore things, experiences, and people.
  - Fatigue, exhaustion – can interfere with all parenting and life tasks and increased irritability may result in less positive engagement with the child.
  - Frustration and anger at the situation may lead to increased aggression toward the child.
  - Inability to protect the child and create a safe environment could put the child at risk.

\* Source: Kaplan-Sanoff, Adalist-Estrin, 2006.

## Resource #20

### The Impact of Trauma on Children

#### What is Trauma?

An incident is traumatic if it carries a threat against life, physical well-being, or personal security\*.

- Trauma diverts a child's energies from developmental tasks
- Children can be re-traumatized by situations characterized by additional threats or simple uncertainty
- Children's memories of and reactions to trauma vary with age and over time.

\* Source: Augustyn, M., Parker, S., McAllister-Groves, B. and Zuckerman, B., "Silent Victims: Children Who Witness Violence," *Contemporary Pediatrics*. 1995;12(8).

#### Brain Development and Trauma: Key Points

- The brain is not fully developed at birth.
- Massive brain growth occurs in the first year.
- There are major spurts of brain growth at 4, 7, and 12 years of age.
- Brain development continues through adolescence into young adulthood.
- Different functions (regulation of mood, anxiety, behavior, and abstract thought) develop or mature at different times in the life of a child. (Bruce Perry, MD, PhD. [www.ChildTrauma.org](http://www.ChildTrauma.org))
- Early experiences become biology, changing brain chemistry, thus shaping the way people learn, think, and behave for the rest of their lives. (Robert F. Anda, M.D., M.S., Co-Principal Investigator for the ACE Study – Adverse Childhood Experiences [www.acestudy.com](http://www.acestudy.com))
- What gets stimulated (the good and the bad) at each age, gets hardwired. (Robert F. Anda, M.D., M.S., Co-Principal Investigator for the ACE Study – Adverse Childhood Experiences [www.acestudy.com](http://www.acestudy.com))
- Trauma or perceived danger causes the excretion of adrenalin and cortisol in amounts that cause brain damage and death in laboratory animals. (Perry, 2004)
- Prolonged anxiety can also cause changes in brain chemistry. (National Research Council, 2000)
- The presence of parents and trusted adults lowers the dangerous levels of cortisol. (Dozier, 2005)

## Post-Traumatic Stress Disorder in Children

There is a wide range of possible reactions or disturbances that result from trauma. Some children will act out with behaviors that are developmentally typical but intensified or more frequent than expected for that child at that age. Other children will develop new behaviors as a result of trauma. This can include regressions, withdrawal and aggression. Children who are exposed to domestic violence are also at risk for Post Traumatic Stress Disorder. (Augustyn, et al., 1995)

### Symptoms of PTSD include:

- Lack of affect, numbness of response
- Shutting down of emotions
- Reduced activities, involvement with peers
- Demonstration of detachment from present activities
- Unable to appreciate the future
- Flashbacks or troubling remembrances of violent events
- Reenactment of trauma in play, art, or words
- Avoidance of people or things reminiscent of the trauma
- Inability to concentrate
- Hyperarousal or strong reactions to non-threatening stimuli
- Sleep disturbances
- Developmental regressions

These symptoms also appear in children with Attachment Disorders and with Attention Deficit and Attention Deficit Hyperactivity Disorder, making it difficult for even seasoned mental health practitioners to diagnose children with these symptoms.

***The severity of the impact of domestic violence, the degree of trauma, and the diagnosis of PTSD can be assessed only by a mental health professional.***

***This list is provided to give early childhood staff guidance on observing children, reading behavioral cues, and knowing when to recommend to parents that children be evaluated by a physician or referred to a mental health professional.***

## Resource #21

### Vulnerability and Resilience in Young Children\*

#### Some Risk Factors Influencing Vulnerability in Young Children

Risk factors are those life circumstances that increase the possibility of negative outcomes. Studies have shown that it is the layering of risk factors accumulating over time that causes the most difficulty and harm to children. Family violence can be the only risk factor for some families but most often it exists in combination with others. This layering of risks increases vulnerability in children and in families. For some children, the family violence they have experienced will create cycles of failure and enduring trauma.

The following risk factors are listed randomly and not in any particular order. How would you rank these risk factors in order of most damaging to least damaging?

- Additional Abuse: physical, sexual, emotional
- Poverty and/or parental unemployment or under-employment
- Racism
- Learning disabilities
- Behavioral Problems: Poor impulse control, attention difficulties
- Substandard schooling/childcare
- Alcoholism in family
- Drug abuse/addiction in family
- Deteriorating or uninhabitable housing
- Gang involvement by parents, parent partners, or siblings
- Crime – victimization
- Criminal activity (Parent, parent partners, or siblings)
- Incarceration of parent or caregiver (including abusive parent)
- Community violence, terrorism, or other life threatening circumstances
- Parental neglect
- Parental harshness
- Low birth weight
- Poor nutrition
- Inferior medical care
- Mental illness of child or parent
- Physically or emotionally unavailable parents

- Marital distress between parents
- Family divorce
- Single parenthood (parent's or teen's)
- Deprivation of social relationships and/or activities
- Profound or repeated loss
- Powerlessness – personal, family, and community

### **Resilience in Young Children: Protective Factors**

Protective factors are those people and things that buffer children and families from risk. These increase the capacity for survival and foster healthy development in spite of the risks:

- Strong bond with parents
- Connections to caregivers/teachers/pastors/neighbors
- Academic or cognitive competence
- Availability of play activities
- Skills and talents (sports, the arts)
- Access to community resources and recreation
- Easy-going or likeable temperament
- Physical attractiveness
- Connection to a community or a community of faith
- Belief in God, or a power greater than self, giving meaning to life
- Opportunities to talk about faith and meaning or to pray

Research on resiliency tells us that the list above can be grouped into three primary protective factors: relationships, skills, and faith.

- Relationships/Attachment – Child's involvement in a relationship with significant adults that is strong, mutual, and long-lasting.
- Skills, Competence, Confidence - Child has healthy, positive self-perception of own abilities.
- Faith and Meaning – Child feels a sense of meaning that comes from a belief in a higher power or belongs to a group with similar values and is a participant in comforting rituals.

\* Source: Werner and Smith, 1992.

## Resource #22

### Promoting and Supporting Resilience in Young Children\*

#### Roles of Adults in Supporting Resilience Development

Although there are many factors that impact on the development of resilience, the one constant is a relationship with a trusted and caring adult. The early childhood environment also provides other key elements needed for the development of resilience.

#### *Providers can:*

- Create an environment where child feels accepted and cared for.
- Provide a safe environment.
- Create environment where child has a significant degree of control.
- Assist child in recognizing when to ask for help.
- Forgive child for mistakes.
- Nourish problem-solving by providing ample opportunities for children to make choices, experience frustration, and learn self-control.
- Help child to anticipate, predict, and accept change.
- Give child meaningful and realistic choices about various aspects of daily life.
- Provide opportunities for success at socially valuable tasks.
- Help child reflect accurately on stressful events.
- Support the growth of skills for coping with stress.
- Support the growth of relationships with other caring adults.

#### Protective Factors in the Early Childhood Environment

Quality early childhood programs provide three key factors that support and protect young children.

- ***Caring Adults*** – Adults whose role it is to be aware of the needs of the whole child, including physical, cognitive, and psychosocial. Adults responsible for supporting the growth of children's competence, and expected to be knowledgeable of developmental milestones, as well as potential barriers and problems.

- ***Prepared Environment*** – An environment created by trained adults to support the development of children’s interests and abilities. An environment that is designed to change with children’s changing developmental needs.
- ***Appropriate Curriculum*** – The program occurs in a prepared environment and includes activities and other experiences that are developmentally-appropriate, child-centered, facilitated by trained staff members, and designed to encourage relationships and autonomy and enhance and support children’s overall development.

## Resource #23

### Assessing Risks and Protections

#### Christie's Story

Christie is a four-year-old girl. She has lived with her mother and her grandmother most of her life. Christie's mother has been working hard as a school secretary. She wants to go to college but money is tight. Christie's Mom has a boyfriend named James who wants them to live with him. They go to his house for many days at a time.

Christie's father is very involved in every aspect of her life, even though he was never married to her mother. He has struggled with alcohol problems for all of Christie's life but is a very loving father. When he isn't drinking, he visits Christie takes her to the park, tells her bedtime stories, and is generally nurturing and affectionate.

Christie's father has one other child, a 10-year-old boy who lives in another state with his mother. Christie's father pays child support to both mothers of his children. He works two jobs, one as a nurse's assistant in a nursing home and one as a bartender.

Christie is very smart and learns quickly in her Head Start class. She is well behaved but has some problems with peers because she is bossy and demanding. The teachers say that she is also somewhat anxious, and sad. She says she misses her father because she has not seen him in a while. She said that she hears her mom and James fighting a lot and that her mom fell down the stairs one night. Christie's grandmother has been bringing her to the program each morning. She told the staff that Christie has been having nightmares and wakes up screaming. She often wets the bed.

Christie says that she loves Sundays because the entire family, all her aunts and uncles and cousins come to grandmother's house to have dinner after church. She really likes to have everyone around the house.

Christie's grandmother is 70 years old. She told the Head Start teacher that she has very mixed feelings about having to take care of Christie. She likes having Christie and her daughter live with her because she is lonely since her husband had a heart attack and died last year and she loves her granddaughter very much. She is also feeling very old and tired and says that it is hard to keep up with a 4 year old. She also worries about what goes on at James's house. Christie says she wants her mom to leave her when she goes to James' house because she wants to take care of her Grandmother.



**Use this worksheet to record your discussion.**

What risk factors were present in Christie's life?

Did Christie's mother meet Christie's developmental needs?

What feelings do you think Christie might have?

Is there evidence of trauma?

How might you expect Christie to behave? At home? At Head Start?  
With friends?

What are the protective factors present in Christie's life?

## **Module Three Resources**

# **The Role of Early Childhood Staff in Responding to Domestic Violence Issues**

## Resource #24

### Personal Beliefs Self-Evaluation

Directions: Read each statement carefully, then circle the answer that corresponds to your way of thinking.

- a. I believe that all couples living together should be married.  
Strongly Agree      Agree      Disagree      Strongly Disagree
  
- b. I believe that women and men should play specific roles in the family.  
Strongly Agree      Agree      Disagree      Strongly Disagree
  
- c. I believe that men should have the right to discipline their wives/partners under some circumstances.  
Strongly Agree      Agree      Disagree      Strongly Disagree
  
- d. I believe that only heterosexual couples should live together as spouses.  
Strongly Agree      Agree      Disagree      Strongly Disagree
  
- e. I believe that people in unhappy relationships should just leave.  
Strongly Agree      Agree      Disagree      Strongly Disagree
  
- f. I believe that people in unhappy relationships should stay together for the sake of the children.  
Strongly Agree      Agree      Disagree      Strongly Disagree
  
- g. I believe that if an abusing partner is sorry for his/her actions, that person should be forgiven and allowed to return home.  
Strongly Agree      Agree      Disagree      Strongly Disagree
  
- h. I believe that abusers are bad people who should never be allowed near their partners or children.  
Strongly Agree      Agree      Disagree      Strongly Disagree

## **Resource #25**

### **What would you do? Family Scenarios**

#### **Scenario #1**

The Smith-Johnson family (Mary Smith and Ruth Johnson) is a lesbian couple rearing a three-year-old daughter they adopted from China. Recently, Mary has indicated that there has been trouble in her relationship with her partner. Mary has come to the day care center with bruises on her wrists and arms, and has said pointedly that Ruth is jealous of Mary's relationships with other female friends. The couple's daughter, Brandi, has become increasingly aggressive in her play with other children.

#### **Scenario #2**

The Baker family is biracial (Mr. Baker is Caucasian, and Mrs. Baker is African-American). They have been married five years and have two children, a daughter, Debbie (age 5), and a son, Joseph (age 2). The Bakers are estranged from both sets of grandparents, because of their mixed race marriage and children. Recently, Mr. Baker lost his job at a local department store when it went out of business, and he has been unsuccessful at finding a new job. During play in the doll corner, Joseph has begun yelling and using bad language when playing house with the other children.

#### **Scenario #3**

Joan Williams is a single parent with a four-year-old son, Sean. Joan's boyfriend, James, is Sean's father. Joan has confided to the center staff that the couple separated due to domestic violence. Although she has a restraining order, James continues to come to Joan's home and make threats to coerce Joan to allow him to return home. At the center, Sean has gradually become more withdrawn. He shows little interest in playing with the other children, and his appetite has become increasingly poor.

#### **Questions for use in discussing the family scenarios:**

1. What do you think and how do you feel about the structure of these families?
2. Do you have any personal or religious beliefs that would impact on your ability to support the needs of these families?
3. How can you maintain personal beliefs/values and effectively work with families?

## Resource #26

### Knowing the Facts

#### Key Facts about Domestic Violence for Early Childhood Program Staff

- Nearly one-third (31%) of American women report physical or sexual abuse by a husband or boyfriend some time in their lives.
- Women who leave their abusers are at 75% greater risk of severe injury or death than those who stay in their relationships.
- Child abuse occurs in 30 – 60% of domestic violence situations where there are children present.
- Parents who are violent with one another are at higher risk for abusing their children.
- Each year, an estimated three to ten million children witness assaults against a parent by an intimate partner.
- Children exposed to domestic violence are at risk for emotional, physical and cognitive delays or difficulties.
- Domestic violence does not occur as an isolated event. If no legal intervention occurs, it will happen over and over.
- Once violence occurs it tends to increase in severity over time.
- Violence is often connected to drug or alcohol abuse.
- Violence is often connected to unemployment or underemployment of one partner (economic stress).
- Violence occurs in cycles of commission of a violent act, separation of the parties, the perpetrator's pleas for forgiveness, and reconciliation and reunion of the parties.
- With support, families affected by domestic violence can be reconciled and develop appropriate behaviors and skills.
- Victims of domestic violence often feel emotionally or economically dependent on partner.
- Victims of domestic violence typically feel responsible for the abuse and blame themselves.
- Children living with domestic violence feel fear and danger, which creates trauma.
- Trauma changes brain chemistry.



- Domestic violence is rarely the only risk factor in the life of a child living with it.
- The layering of risks increases the trauma.
- There are three primary protective factors are Relationships/ Attachment, Skills, and Faith.

\* Source: [www.endingviolence.com](http://www.endingviolence.com) (adapted)

## Resource #27

### Coping with Children's Challenging Behaviors

It is important to remember that labeling a child or a child's behavior "challenging" can be both helpful and hurtful to the child and to the behavior management process.

Awareness of the impact of domestic violence and trauma on children is critical to effectively responding to it in the early childhood classroom. But, sometimes adults look for challenges when they know about the child's home difficulties, interpreting all difficult behavior as related to the violence, abuse, or parenting stresses suspected in the home. Some will even blame the child for being "just like his father".

When framing a behavior as challenging, ask yourself the following questions:

- Is the child challenging because of what the behavior triggers for the adults?
- Has the staff lowered their expectations for this child because of the home situation? Intervening only when the challenging becomes dangerous?
- Where does the challenge come from?
  - o Developmental norms?
  - o Temperamental characteristics?
  - o Family patterns or dynamics?
  - o Specific life situations?
  - o Unrealistic expectation in the classroom?
  - o A mismatch between the child/family and the program/staff member?

There is no one formula that can ever be applied to misbehaviors universally. Adults should respond to each child and situation individually. Remember also that traumatized children can easily be retraumatized by harsh or humiliating discipline.

Prevention is most important with young children. Challenging behaviors can often be prevented when the expectations are realistic, children are in control of much of their activity, the classroom is designed to support children to make choices about which activities they engage in and with whom and for how long. Finally, children always test adults and more so when they feel insecure or fragile. Relationships built on trust and predictability can help children to test less and cooperate more.

### **Consider the following responses to inappropriate behavior:**

- Acknowledge the feelings behind the child's behavior.
- Distract the child from the inappropriate behavior with a toy or an activity. This technique works best with infants and toddlers.
- Let children know what they can do, not just what is not allowed.
- Allow children to experience natural consequences for their actions...if they leave a toy, it will get used or put away.
- Create logical consequences for broken rules, something related to the inappropriate behavior. If a child is bothering others, he/she should play alone for a while. If a child is using toys or objects inappropriately, the toy should be taken away. Ignore inappropriate behavior that does not pose a health or safety risk for the child or others or that is not an expression of feelings that need to be acknowledged.
- When necessary, remove a child from a situation that is difficult or in which he or she has broken the rules.
- Remind the child of the broken rule.
- Allow the child to tell you when they are ready to return to the group.
- If the inappropriate behavior continues, then the adult chooses the length of time the child needs to stay away from the activity or group.
- Allow children to decide what they want to do when they are removed, but remind them that they must be respectful of the group (no ball throwing inside or singing during a book, etc.)
- Congratulate the child when he/she makes a good choice.
- Be sure rules are predictable and consistent, but be flexible when children are under a great deal of stress.
- Do not use threats unless you plan to back them up with logical consequences. Children quickly learn to ignore meaningless threats.
- Avoid deliberately putting children into fear- or stress-producing situations. Children cannot be forced to overcome phobias or anxieties through pressure.
- Choose carefully which behavioral issues to pursue. Forcing a child to eat the last two bites of food on the plate is usually not worth the power struggle.
- Always let children know what there is no choice about and then what choice is appropriate.



- Choices always help children learn, grow and follow the rules. Children who have little choice in the tragedy of family violence need it even more than other children. Programs that insist that children sit in a specific spot, with their bodies in a specific pose, raise their hands before talking, answer questions using specific words, and play with materials a specific way are severely limiting a child's capacity for learning and for coping.
- Avoid shaming or embarrassing children as part of discipline.
- Be purposeful, avoid impulsive reactions, have a plan!
- Always reconnect with a child after there has been a clash over the rules. A hug, a smile, or a kind word says grown ups can be upset with what you did and still really like you.

### **The Anxiety of Transitions**

Traumatized children are often retraumatized by anything that feels uncertain. They have a great deal of difficulty with transitions that are a part of everyday life, even moving from one activity to another. To them, change means a loss of the familiar, a loss of the moment, a loss of what is safe. Even transitions to desirable activities cause anxiety for many children.

#### ***Tips for easier transitions:***

- Give 2 warnings – Always tell children when they have 5 minutes and then 1 minute until the next activity.
- Talking about what comes next and the order of the day should be a part of the conversation over and over, particularly with children who are in the aftermath of trauma.
- Sing! Use music, songs, or poems to dilute the tension and soothe the spirit.
- Breathe – Use deep breathing exercises during transitions...make it a game.
- Let children hold things in their hands. Carrying a stuffed animal over to the snack table or a paintbrush to the sink occupies the hands and gives children a transitional object.

\* Adapted from Rice, K.F. and Groves, B.M. Hope & Healing: A Caregiver's Guide to Helping Young Children Affected by Trauma. Zero To Three Press (2005) pg.31.

## Resource #28

### The Healing Powers of the Early Childhood Curriculum

#### How Does the Early Childhood Curriculum Help Children Exposed to Domestic Violence?

- Promoting children's confidence in their abilities
- Supporting the growth of self-esteem
- Enabling children's creativity, awareness, discovery, and wonder
- Meeting children's needs for acceptance and belonging
- Identifying and responding to child and family stress
- Supporting the growth of autonomy and appropriate risk-taking
- Providing an outlet for expression of children's fears and anxieties
- Meeting security and safety needs of children
- Promoting skills mastery (relational, self-help, motor and other)
- Providing opportunities for mastery of power
- Enhancing mastery of life circumstances (via socio-dramatic play)
- Promoting mastery of rules (classroom, relational and other)
- Providing toys that can be used for reducing stress, expressing feelings and practice problem solving

AND

- Enhancing parents' knowledge of children's developmental issues and needs
- Supporting the ongoing development of the parent-child relationship
- Supporting parents' goals for their children's development and school success
- Providing access to resources for parents

**What would you add to this list?**

## **Resource #29**

### **Using Toys and Materials with Young Children in the Aftermath of Domestic Violence**

#### **Toys and Materials in Most Early Childhood Programs \***

- Active play: balls, beanbags, climbing equipment, running, dancing, jumping.
- Expressive play: paint, crayons, markers, clay, Play-Doh, poetry, story writing, music, dancing, singing.
- Sensory play: sand, water, various art materials, smelling games, kaleidoscopes, cooking.
- Construction play: blocks, Legos, Tinkertoys, Lincoln Logs.
- Nurturing play: dolls, housekeeping area, doll families, stuffed animals.
- Pretend play: puppets, dress ups, hats, doctor kit, magic wands, telephones.
- Protective play: Police/fire/rescue vehicles, powerful character figurines.

#### **What would you add to this list?**

\* Adapted from Rice, K.F. and Groves, B.M. Hope & Healing: A Caregiver's Guide to Helping Young Children Affected by Trauma. Zero To Three Press (2005) pg.26.

## **Resource #30**

### **Activities and Ideas for the Classroom**

The following is a list of activities that can be used in classrooms for 3-5 year old children. They are included here because they offer opportunities for children living with domestic violence to learn coping skills and to bolster resilience. These classroom activities can easily be adapted for school-aged children by adding art, music, and writing components.

1. Using the Classroom “Peace Table”
2. Recognizing and Naming Feelings
3. Reading a Story About Feelings
4. How I Feel Today: The Feelings Board
5. It Should Not Be A Secret
6. Bubbles – Restful and Relaxing

Note: Infants and toddlers benefit from the predictability and order of a quality early childhood program. Activities such as peek-a-boo reinforce trust (you “go away” and “come back”). Repeating things (books, songs and games) over and over at the child’s request also encourages mastery and a sense of comfort. Games that include knocking over towers of soft blocks, squeezing edible Play-Doh and popping bubbles (use baby shampoo with glycerin to avoid stinging eyes) can help young children feel that they can control the environment when life becomes stressful.

## **Resource #30 – Classroom Activity #1 Using the Classroom “Peace Table”**

Audience: Children

Purpose: To help children develop problem solving and conflict resolution skills.

Materials/Equipment: Low table and two chairs; four different hand puppets, including animals and people; sign that says “Peace Table”

Group Size: Whole group or smaller groups of interested children

Ages of children: 2 - 5 years

Procedures to be followed:

- Bring children together at circle or group time.
- Point out the addition of the “Peace Table” to the classroom.
- Ask them for reasons that children sometimes argue or fight.
- Explain that, because we are friends, we want our quarrels to end quickly.
- Ask how the “Peace Table” could help us to be friends again when we are angry.
- Make a list of things the children say that could be said or done to make peace.
- Show the children the puppets, and describe how the puppets can help us to say how we feel.
- Give the children an imaginary situation to pretend that they are angry about. (“Robert, pretend that Pam took your favorite toy.”)
- Have these two children put on the hand puppets, and use them to tell each other how they feel.
- Ask the children to use the puppets help them to be friends again.
- Later, tell the children that these special puppets will stay at the “Peace Table, ” where they will help us to talk about our feelings.
- Remember to remind them that angry feelings are OK if you can be angry in ways that won’t hurt people or things.
- Ask children to use the puppets to play out expressing angry feelings as well.

**Follow-up:** When children quarrel with one another, ask them to go to the “Peace Table” to discuss them. Remind children to have the puppets speak for them.

## Resource #30 – Classroom Activity #2 Recognizing and Naming Feelings

Audience: Children

Time: 10 – 15 minutes

Purpose: To help children recognize the names for particular emotions and the facial expressions that go with them.

Materials/Equipment: Feelings hand puppets (faces show fear, shame, happiness, sadness, anger)

Group Size: Whole group

Ages of children: 2 - 5 years

Procedures to be followed:

- Bring children together at circle or group time.
- Talk about feelings.
- Let children start a list (you write) of some feelings they have and feelings other people have.
- Suggest that it is important to learn how to act when we have different feelings.
- Introduce the feelings puppets.
- Ask the children if they recognize the expressions on the puppets' faces, and why the puppets might feel that way. ("How does this puppet feel? Why do you think she feels that way?")
- Ask the children, "How should the puppet act if he feels sad? Angry? Happy?"
- As each emotion is discussed, ask the children what makes them feel that way.
- Ask how they behave when they have that feeling.
- Accept all answers, but encourage children to talk about appropriate ways of responding to emotions.
- Try to be expansive with the list of feelings because children (and adults too) tend to focus on happy, sad and angry. What about frustrated, disappointed, worried, cheated, or guilty?

**Follow-up:** Read books about emotions and discuss the ways story characters are feeling.

## **Resource #30 – Classroom Activity #3**

### **Reading a Story About Feelings**

Audience: Children

Time: 15 minutes

Purpose: To explore various emotions and the ways that we feel about them.

Materials/Equipment: Book - such as *The Way I Feel* (by Jean Cain, Parenting Press, 2000) or *When Sophie Gets Angry - Really, Really Angry* (M. Bang, Blue Sky/Scholastic, 1999)

Group Size: Whole group or those children interested in the story

Ages of children: 2 - 5 years

Procedures to be followed:

- Read the book to the children, holding it so that they can see pictures. Ask questions as the story progresses.
  1. What kinds of things make you feel silly? Happy? Sad?
  2. What do you do when you feel silly? Happy? Sad?
  3. Is it good to feel silly? Happy? Sad? Why?

**Follow-up:** Make these and additional books about feelings available in a special place in the “book corner”. Suggest that sometimes when children have feelings, it helps to read about other people’s feelings and let children know that they can be read to one on one at various times in the day.

Suggest that children paint anger, or sadness, or excitement!

## Resource #30 – Classroom Activity #4

### How I Feel Today: The Feelings Board

Audience: Children

Time: 15 minutes for group activity; 5 minutes per child per day

Purpose: To provide a mechanism for children to advise adults of their feelings as they begin their day at preschool or childcare.

Materials/Equipment: Large poster board with columns. Column one has pictures of each child. Five columns that follow are labeled with five days of the week (Monday through Friday). Velcro is attached to the board in each of the five spaces next to each child's picture. A basket near the "Feelings Board" has small, velcro-backed faces each depicting emotions such as sleepy/tired, happy, sad, angry, hungry, sick, etc.

Group Size: Whole group for introducing the Feelings Board. Each child chooses his feeling for the day individually.

Ages of children: 3 - 5 years

Procedures to be followed:

- Introduce the Feelings Board to the children during circle or group time.
- Show the small faces, and ask the children if they recognize the emotions depicted.
- Explain that the Feelings Board is a way to tell the teachers how you are feeling each day.
- Explain to children that, as they arrive in the morning, they should go to the Feelings Board, pick a face from the basket that shows how they feel, and place it next to their name.
- Have the children try using the Board following the teacher's explanation.

**Follow-up:** Remind the children for several days not to forget the Feelings Board when they arrive at school in the morning. Ask children about their feelings, "John, I see you were tired when you came to school. How do you feel now?"



## **Resource #30 – Classroom Activity #5 It Should Not Be A Secret**

Audience: Children

Time: 10 -15 minutes

Purpose: To support children's ability to tell a caring adult about things that frighten or concern them.

Materials/Equipment: Pictures of situations that children might see or be involved in, such as a child taking a cookie while mom's back is turned; a child watching an older child hurt another; a child hiding a special gift.

A picture book about domestic violence (see Bibliography).

Group Size: Whole group

Ages of children: 2 - 5 years

Procedures to be followed:

- Bring children together at circle or group time.
- Tell children you have a secret in your head.
- It is the treat that they will get at snack time.
- Ask them to guess what it is. After a few guesses...tell the secret.
- Ask them if that was a good secret or a bad secret?
- Tell a quick story about a boy whose brother ate the muffin when his mom told him not to and he asked his brother to keep the secret.
- Again, ask if that was a good secret or a bad secret.
- Add more: A mom's surprise birthday party, the broken vase, your babysitter's boyfriend coming over.
- Explain that, when children have bad secrets, adults who love and care for them want to help.
- Read the picture book selected from the Bibliography.
- Show the situational pictures, and ask children whether what they are seeing is a "good" or a "bad" secret.
- Listen to the children's comments and provide feedback as needed.

## **Resource #30 – Classroom Activity #6 Bubbles – Restful and Relaxing**

Audience: Children

Time: 10 -15 minutes

Purpose: To structure activities designed to help children in crisis to relax

Materials/Equipment: Bubbles, a water table, various wands

Group Size: As children choose

Ages of children: 2 - 5 years

Procedures to be followed:

- Bubble play (in fact, all water play) is very relaxing.
- Vary the tools available at the water table, create colored water for bubbles. Let children make bubble wands from pipe cleaners. Put glycerin in dish soap to make extra thick bubbles.
- Talk with children about the differences between blowing bubbles fast or slow, waving the wand instead of blowing, and trying to catch the bubbles in the air.



## Resource #31 Communication Skills Exercise

For each situation, ask yourself “What is the child communicating with this behavior?” and “What could a helpful adult response be?”

### Situation

### Message From Child? / Adult Response

Baby who has just been fed starts screaming.

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Toddler is at window sobbing as father leaves center.

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Three-year-old reaches for a woman sitting in a wheel chair.

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Five-year-old screams at another child, “You can’t come to my party!”

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Four-year-old screams at teacher, “I hate you!”

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Three-year-old uses block like a gun, and points it at another child saying, “I’m going to kill you!”

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Four-year-old sits beside teacher during circle time and begins rubbing teacher’s stocking-covered legs.

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Child repeatedly pinches another child while sitting side by side at story time.

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## **Resource #32**

### **Communicating With Young Children\***

1. Children's communications come in a variety of ways, verbal and non-verbal. Listen for both.
2. Listening is an attitude, not just a group of actions.
3. Be aware of your own feelings and emotional responses to each child.
4. Acknowledge each child's feelings and emotional responses.
5. Remain objective in your responses to children.
6. Avoid communication stoppers: criticizing, discounting, giving orders.
7. Provide conversation openers that promote children's discussions, using open-ended questions.
8. Act as a translator for children's verbal and non-verbal expressions. Give back the message received in your own words.
9. Ask real questions, not rhetorical ones.
10. Address uncomfortable situations directly with children
11. Use body language that conveys the same meaning as your words.
12. Avoid mixed messages.

\* Source: Janet Gonzalez-Mena. Foundations of Early Childhood Education. New York: McGraw-Hill, 2005.

## Resource #33

### Trust and Parent/Staff Relationships

1. Trust is necessary between childcare providers and parents, in order to work effectively in the best interest of children. Victims of domestic violence bring to this process a host of both positive and negative experiences with trusting people in positions of authority.
2. The primary tools for building trust are:
  - Being non-judgmental
  - Listening attentively
  - Honoring confidentiality
  - Respecting parents' feelings and opinions

### Building Trust – Stories for Role Play or Discussion

In each of the following situations, ask yourselves:

- Was the staff person being non-judgmental?
- Do you think that the parent felt heard?
- Was there something else that the staff person could have said to build trust?
- What do you think should happen next?
- What might the parent say in these stories?
- How would you prioritize the responses in order of importance to trust building and child safety?

**Situation #1** – Parent confides to an assistant teacher that she has taken out a restraining order against her husband. Parent asks that the teacher not to allow the father to pick up the child from the center.

Possible responses from assistant teacher:

- “You must really be going through a lot! How are you holding up?”
- “How is (Child’s name) reacting to not seeing his/her dad?”
- “Check with (director) and she can change the pick up authorization list. If she isn’t in the office, let me know. We will need to see a copy of the restraining order and then, even though we will keep this confidential from everyone else, the rest of the staff will have to be

informed so they can follow the policies. All of this is in the information sheet though, about pick up authorization in the parent handbook.”

- “What does (Child) know about the situation and how can we help him/her?”

**Situation #2** – During a parent-teacher conference, parent confides that she believes that the recent changes in her child’s behavior are due to constant arguing and fighting in the home.

Possible responses from assistant teacher:

- “You sound worried.”
- “Tell me more about the behaviors you see at home?”
- “Let’s talk a little about what might be stress or reactions to the home difficulties and we have some information about how children respond to parents fighting that I can give you.”
- “Let’s work together on a plan to observe (Child) and then we can check back in with each other every few days. “
- “If need be, we can refer you to a family counselor. Let us know if you want that information.”
- “At this point, it doesn’t sound like we need to bring in our child therapist for observation and we would let you know before we did that.”

**Situation #3** – Teacher observes dark bruises on mother’s eye when she removes her sunglasses (it is dark outside).

Possible responses from assistant teacher:

- “Can you come in the office for a moment, I have something for you?”

When child is not present....

- “I certainly do not want to pry and (Child) is doing very well in our program, but sometimes when parents are injured, there are difficulties at home, so I wanted to let you know that we have some information available about how children are affected by different kinds of stress at home.”

## Resource #34

### Mandated Reporters: Issues, Concerns, and Strategies

The issue of whether exposure to domestic violence should or could be defined as child abuse is very complicated. It is strongly debated around the country and there are no easy answers. The following outlines the issues and concerns and includes strategies that can guide early care and education staff members who struggle with these decisions.

#### What are the Issues?

If living with Domestic Violence causes trauma for many children, and emotional distress for most, doesn't that trauma or distress represent risks to children that could be considered abusive or neglectful?

Since, in all states, early childhood providers are designated as mandated reporters of suspected abuse and neglect, what should child care staff do in cases of suspected domestic violence?

The definition of Child Abuse in most states is similar to that of Pennsylvania:

Child Abuse includes any of the following when committed upon a child under 18 years of age by a perpetrator (14 years of age or older):

- A recent act (within the past two years) or failure to act, which causes a non-accidental serious physical injury that results in severe pain for the child or significantly impairs the child's functioning, either temporarily or permanently
- A recent act (within the past two years) or failure to act, which causes or results in a non-accidental psychological condition, as diagnosed by a physician or licensed psychologist
- A recent act (within the past two years) or failure to act or series of such acts or failures to act, which create an imminent risk of serious physical injury

Some states specifically include child exposure to domestic violence in their definition of child maltreatment, thereby requiring a report to protective services every time a child witnesses domestic violence, regardless of whether the child was directly injured.

**In most states, a child's exposure to domestic violence does not require a child protection report.** In these states, mandated reporters must use their judgment (albeit trained and educated) to decide whether a child's behavior

indicates that they are at risk of injury or abuse and whether protective services should be involved.

### **The Concerns**

As we saw throughout Module Two of this training manual, there can be serious adverse psychological effects on children who witness domestic violence as well as an increased risk of child abuse for children who live with adult domestic violence.

Section III of Module Two also included information about resilience and protective factors in the lives of young children. We know that children will respond to and be impacted by domestic violence differently. We cannot assume that all children are adversely affected by exposure to violence or that their exposure is the result of or results in negligence or abuse.

Of course, cases where there is physical injury, indications of diagnosable psychological harm, or perceived imminent danger to a child are cases that need to be reported to child protective services. Centers must have clear policies written in both staff and parent handbooks outlining the steps that will be taken in such cases.

### **Why is This Such a Difficult Decision?**

Many in the domestic violence and other related fields are concerned about early childhood educators automatically considering exposure to violence as a reason to file a report without evidence of physical injury, diagnosable psychological harm, or perceived imminent danger. Some of their concerns can help us to understand what a difficult decision this is:

- Most of the effects of exposure to domestic violence are emotional and psychological and should be assessed by mental health professionals, who are also mandated reporters and can take on that role.
- Child abuse occurs in 30-60% of the homes where there is adult partner violence.
- Women who are battered often go to extreme lengths to protect their children from an abusive partner. Research has shown that the non-abusing parent is often the strongest protective factor in the lives of children who witness domestic violence. However, some state Child Welfare Laws can be interpreted in such a way as to penalize mothers/victims for neglecting their children solely because their children



witnessed their mother's abuse. This is more often the case when the mother "fails to protect" the child from child abuse but could be applied to cases of partner violence.

- In some cases, the report to child welfare, whether deemed to be founded or unfounded, triggers more abuse for the adult victim and increases the danger to the child.
- Reports that are unsubstantiated can place demands on protective services—a system that, in most states, is overburdened and under funded.

## Strategies

In deciding whether or not to contact child protective services, consider the following:

- Your agency's policy and protocol for contacting Child Protective Services, including how the decision is made and who will make the call.
- Your state's child abuse reporting laws and its policy on defining child exposure to domestic violence as child maltreatment.
- The safety of the victim and children: whenever possible, inform the victimized parent of your intention to file a report.
- Referring the parent to a domestic violence advocate or organization.
- Your center's protocols regarding requiring that children with behaviors that concern staff be evaluated by a health mental health professional.
- When filing a report is necessary, specify and emphasize that the concern is related to domestic violence and give as much information as possible to aid in keeping the victim/parent safe as well as the child.

### References for Resource 34

Groves, B., Augustyn, M.: "Identification, Assessment, and Intervention for Young Traumatized Children," in Osofsky, J. (ed): *Young Children and Trauma: Intervention and Treatment*, 2004, Guilford Press, N.Y.

Rice, K.F., & Groves, B.M.(2005) *Hope and Healing: A caregiver's guide to helping young children affected by trauma*. Washington, DC: Zero To Three Press.

What is Child Abuse? [www.dpw.pa.us](http://www.dpw.pa.us)

Whitney, P., Davis, L.: Child Abuse and DV in Massachusetts: Can practice be integrated in a public child welfare setting? *Child Maltreatment* 1999; 4(2): 159.

[www.endabuse.org](http://www.endabuse.org)

## Resource #35

### Responding To Domestic Violence In Early Childhood Programs: Putting It All Together

#### Sample Parents' Domestic Violence Crises

For each of the following situations, use the checklists below to outline an appropriate response for early childhood staff.

1. Parent talks about a domestic violence situation in her home to child care center director.
2. Child comes to school with facial bruises. Child tells teacher that she was “accidentally” hit by her father while her parents were arguing.
3. Teacher witnesses a child’s father hitting his wife in the childcare center parking lot. The child was still inside the center and did not see it.
4. Child role plays parent arguing and hits another child while engaged in dramatic play in the doll corner.
5. Child tells staff member that she saw her mom hitting her grandmother and staff knows that the grandmother is ill and lives with the child.

#### Things to consider in responding to the situations in this activity

- ✓ Legal requirements (whether there is mandated reporting in this case)
- ✓ Policies of child care/preschool program
- ✓ Professional ethical standard
- ✓ Consequences of disclosure/non-disclosure – To the child? To the parent/ provider relationship?
- ✓ How/with whom parent wants information shared

#### Possible Responses Check List

- ✓ Check your personal attitudes and perceptions
- ✓ Keep yourself safe
- ✓ Focus on the needs of the child
- ✓ Know the plan or steps recommended by your agency
- ✓ Consult with a supervisor
- ✓ Refer a family/child to local counseling services
- ✓ Refer a victim to a domestic abuse specialist at a local agency

## **Resource #36: Resources and Bibliography Agencies/Resources for Networking and Referral**

### **PHILDELPHIA DOMESTIC VIOLENCE HOTLINE**

Toll free: 1-866-SAFE-014 (866-723-3014)

### **Pennsylvania Resources**

#### *A Woman's Place*

P.O. Box 229

Doylestown, PA 18901

Telephone: 1-215-343-9241

Hotline: 1-800-220-8116

#### *Center for Lesbian and Gay Civil Rights*

1315 Spruce Street

Suite 301

Philadelphia, PA 19107

Telephone: 1-215-731-1447

Toll free: 1-866-LGBT-LAW (542-8529)

#### *Community Legal Services Law Center*

North Central

3638 N. Broad Street

Philadelphia, PA 19140

Telephone: 1-215-227-2400

#### *Congreso De Latinos Unidos, Inc.*

216 W. Somerset Street

Philadelphia, PA 19133

Telephone: 1-215-763-8870

#### *Domestic Abuse Project/Delaware County*

14 West 2nd Street

Media, PA 19063

Telephone: 1-565-6272

Hotline: 1-610-565-5490

#### *Domestic Violence Center of Chester County*

P.O. Box 832

West Chester, PA 19381

Telephone: 1-610-431-3546

Hotline: 1-888-711-6270

## **Pennsylvania Resources (continued)**

*Laurel House Domestic Violence Shelter and Services of Montgomery County*

P.O. Box 764

Norristown, PA 19404

Telephone: 1-610-277-1860 ext. 102

Hotline: 1-800-642-3150

FAX: 1-610-275-4018

*Lutheran Settlement House/Bilingual Domestic Violence Project*

1340 Frankford Avenue

Philadelphia, PA 19125

Telephone: 1-215-426-8610

1-215-235-9992 (espanol)

*National Clearinghouse for the Defense of Battered Women*

125 South 9th Street

Suite 302

Philadelphia, PA 19107

Telephone: 1-215-351-0010

*Pennsylvania Coalition Against Domestic Violence/*

*National Resource Center on Domestic Violence*

6440 Flank Drive

Suite 1300

Harrisburg, PA 17112-2778

Telephone: 1-717-545-6400

Toll Free: 1-800-932-4642

FAX: 1-717-545-9456

*Pennsylvania Coalition Against Rape*

125 N. Enola Drive

Enola, PA 17025

Telephone: 1-717-728-9740

Hotline: 1-800-692-7445

FAX: 1-717-728-9781

*Women Against Abuse*

P.O. Box 13758

Philadelphia, PA 19101

Telephone: 1-215-386-1280

FAX: 1-215-386-8863

## Pennsylvania Resources (continued)

*Women in Transition, Inc.*  
21 S. 12th Street  
Philadelphia, PA 19107  
Telephone: 1-215-564-5301

*Women's Advocacy Project*  
400 Courthouse Plaza  
18 W. Airy Street  
Norristown, PA 19404  
Telephone: 1-610-279-1548

*Women's Advocacy Project*  
555 High Street  
2nd Floor  
Pottstown, PA 19464  
Telephone: 1-610-970-7363

*Women's Center of Montgomery County*  
101 Washington Lane  
Suite WC-1  
Jenkintown, PA 19046  
Toll free: 1-800-773-2424

*Women's Law Project*  
125 S. 9th Street  
Philadelphia, PA 19107  
Telephone: 1-215-928-9801

## National Agencies/Resources for Networking and Referral

### NATIONAL DOMESTIC VIOLENCE HOTLINE

Toll free: 1-800-799-SAFE (7233)  
1-800-787-3224 (TDD)

*Battered Women's Justice Project*  
c/o National Clearinghouse for the Defense of Battered Women  
125 S. 9th Street  
Suite 302  
Philadelphia, PA 19107  
Telephone: 1-215-351-0010  
Toll Free: 1-800-903-0111 ext. 3  
FAX: 1-215-351-0779

*Center for the Prevention of Sexual and Domestic Violence*  
936 North 34th Street  
Suite 200  
Seattle, WA 98103  
Telephone: 1-206-634-1903  
FAX: 1-206-634-0115

*Clearinghouse on Family Violence Information*  
P.O. Box 1182  
Washington, DC 20013  
Telephone: 1-800-394-3366

*Family Violence Prevention Fund*  
383 Rhode Island Avenue  
Suite 304  
San Francisco, CA 94103-5133  
Telephone: 1-415-252-8900  
FAX: 1-415-252-8991

*Family Violence Research and Sexual Assault Institute*  
1310 Clinic Drive  
Tyler, TX 75701  
Telephone: 1-903-595-6600

*Health Resource Center on Domestic Violence*  
Family Violence Prevention Fund  
383 Rhode Island Avenue  
Suite 304  
San Francisco, CA 94103-5133  
Telephone: 1-800-313-1310  
FAX: 1-415-252-8991

## National Resources (continued)

### *National Battered Women's Law Project*

275 7th Avenue Suite 1206  
New York, NY 1001  
Telephone: 1-212-741-9480  
FAX: 1-212-741-6438

### *National Coalition Against Domestic Violence*

*Public Policy Office*  
1532 16th Street, N.W.  
Washington, DC 20036  
Telephone: 1-202-745-1211  
FAX: 1-202-745-0088

### *National Clearinghouse for the Defense of Battered Women*

125 South 9th Street Suite 302  
Philadelphia, PA 19107  
Telephone: 1-215-351-0010

### *National Clearinghouse on Marital and Date Rape*

2325 Oak Street  
Berkeley, CA 94708  
Telephone: 1-510-524-1582

### *National Network to End Domestic Violence*

666 Pennsylvania Avenue, S.E., Suite 303  
Washington, DC 20003  
Telephone: 1-202-543-5566  
FAX: 1-202-543-5626

### *National Resource Center on Domestic Violence*

6440 Flank Drive, Suite 1300  
Harrisburg, PA 17112-2778  
Telephone: 1-717-545-6400  
Toll Free: 1-800-932-4642  
FAX: 1-717-545-945

### *National Victims Resource Center (NVRC)*

Office for Victims of Crime  
Office of Justice Programs  
Department of Justice  
633 Indiana Avenue, N.W. Room 1386  
Washington, DC 20531  
Telephone: 1-202-307-5950

**National Resources (continued)**

*Resource Center on Domestic Violence,  
Child Protection, and Custody*

NCJFCJ

P.O. Box 8970

Reno, NV 89507

Telephone: 1-800-527-3223

FAX: 1-775-784-6160



## Books For Children

Bernstein, S.C. *A Family That Fights*. Morton Grove, IL: Albert Whitman and Company, 1991.

Davis, D. *Something is Wrong at My House*. Seattle, WA: Parenting Press, 1984.

Deaton, W. *I Saw It Happen*. Alameda, CA: Hunter House, Inc., 1998.

Hochban, T. *Hear My Roar: A Story of Family Violence*. Toronto: Annick Press, 1994.

Holmes, M.M. *A Terrible Thing Happened*. New York: Magination Press, 2000.

Johnson, K. *The Trouble With Secrets*. Seattle, WA: Parenting Press, 1986.

Lee, I. and Sylvester, K. *When Mommy Got Hurt: A Story for Young Children about Domestic Violence*. Charlotte, NC: KIDSRIGHTS, 1996.

Paris, S. *Mommy and Daddy are Fighting*. Seattle, WA: A New Leaf Book, Seal Press, 1986.

Rogers, F. and Sharapan, H. *I Do and I Don't*. Pittsburgh, PA: Family Communications, Inc. 1992.

Schor, H. *A Place for Starr: A Story of Hope for Children Experiencing Family Violence*. Indianapolis, IN: Jist Works, 2002.

Trotter, M. *A Safe Place*. Morton Grove, IL: Albert Whitman and Company, 1997.

See also: the “Recommended Books For Young Children” section of

Rice, K. F. and Groves, B. M. *Hope & Healing: A Caregiver's Guide to Helping Young Children Affected by Trauma*. Zero To Three Press (2005) page 55.

## Domestic Violence Web Sites

### *Action Alliance for Children*

<http://www.4children.org/>

Statistics on domestic violence and its effects on children.

### *American Bar Association*

<http://www.abanet.org/domviol.home.htm/>

Includes information for attorneys and the general public relative to domestic violence law; public education brochures; multidisciplinary responses; and a bibliography.

### *American Institute on Domestic Violence*

<http://www.aidv-usa.com/>

Provides workplace domestic violence awareness training; resources and links to additional information.

### *Amnesty International Women's Action Council to Stop Violence Against Women*

<http://www.women.amnestyusa.org/>

An organization working to secure basic human rights for women world wide.

### *An Abuse, Rape, and Domestic Violence Aid and Resource Collection*

<http://www.aardvarc.org/>

Resources for combating various forms of violence; guidelines for special victims, including those from cultural and religious groups, gay, lesbian and disabled victims.

### *Battered Women's Justice Project*

<http://www.bwjp.org/>

An organization devoted to social change within community agencies and governmental agencies, and to the creation of institutional accountability.

### *Break the Cycle*

<http://www.breakthecycle.org/>

Designed to educate teens and other young people about violence in intimate relationships.

### *Casa Myrna Vasquez, Inc.*

<http://www.casamyrna.org/>

A resource aimed at informing and assisting Latino families coping with domestic violence. Includes survivor stories.

### *Center for Family Policy and Practice*

<http://www.cffpp.org>

Information on parenting after violence.

### *Child Witness to Violence Project at the Boston Medical Center*

<http://www.childwitnessstoviolence.org/>

Specializes in the traumatic impact of violence on children. Provides professional and community education and consultation.

*Community Works*

<http://www.sanctuaryweb.com/>

Site for an organization devoted to teaching non-violence. Information on creating safe havens and the impact of trauma on victims.

*Domestic Violence.com*

<http://www.domesticviolence.com>

An online survival kit. Provides a simplified step-by-step guide for responding to and surviving domestic violence. Information on involving the police; having a perpetrator arrested; finding an attorney; going to criminal and/or civil court; and obtaining orders of protection.

*Faith Trust Institute (formerly The Center for the Prevention of Sexual and Domestic Violence)*

<http://faithtrustinstitute.org/>

An interfaith initiative designed to examine and promote the roles of clergy and the church in preventing and ending domestic violence. Also a source of publications and films on this topic.

*Family Violence Prevention Fund*

<http://endabuse.org/>

Addresses myths about domestic violence, current legislation, and initiatives.

*INCITE! Women of Color Against Violence*

<http://www.incite-national.org/>

A “radical feminist” organization whose mission is to end violence against women of color and their communities. Publishes a newsletter and hosts an annual conference.

*Institute for Safe Families*

<http://www.instituteforsafefamilies.org/>

A non-profit organization dedicated to ending family violence and promoting the health and well-being of the family and of communities. Provides training and manuals for education of health and human service providers.

*Institute on Domestic Violence in the African American Community*

<http://www.dvinstitute.org/>

An organization addressing domestic violence in the African American community. Includes hotline numbers, a bibliography, links, and a listing of events.

*Legal Momentum (formerly the National Organization for Women Legal Defense and Education Fund)*

<http://www.legalmomentum.org/>

Web site dealing with a variety of legal issues impacting women. Information on working women and violence, and the National Task Force working to support domestic violence victims.

*Lifespan Center for Legal Services and Counseling*

<http://www.life-span.org/>

An organization providing counseling for victims and their children, legal representation and court advocacy, as well as public education.

*Medline Plus (A service of the U.S. National Library of Medicine and the National Institutes of Health)*

<http://www.nlm.nih.gov/medlineplus/domesticviolence.htm/>

A resource on many health topics, including domestic violence. Statistics and legal information; how victims can protect themselves and their families; and coping with trauma.

*National Association of Public Child Welfare Administrators, American Public Human Services Association*

<http://www.aphsa.org/>

*National Center for Children Exposed to Violence*

<http://www.ncccev.org/>

A resource for the impact of all forms of violence on children, signs and symptoms of trauma. Information on various initiatives and up-coming events.

*National Clearinghouse on Marital and Date Rape/Women's History Library*

<http://members.aol.com/ncmdr/index.htm/>

An AOL subscriber site with a large library of books and articles related to violence against women. Also provides a fee-based telephone document search and delivery service.

*National Coalition Against Domestic Violence*

<http://www.ncadv.org/>

Comprehensive information for all 50 states about domestic violence resources; training for community anti-violence advocates; and lobbying in Washington, DC on behalf of shelters and prevention programs.

*National Latino Alliance for the Elimination of Domestic Violence*

<http://www.dvalianza.org/>

An organization dedicated to the elimination of domestic violence in the Latino community.

*National Network to End Domestic Violence*

<http://www.nnedv.org/>

Promotes social change through legislation and the power of the vote.

*National Organization for Women*

<http://www.now.org/issues/violence/>

Provides links to NOW involvement in various lobbying efforts, and reports of hate crimes committed in the U.S.

*National Resource Center on Domestic Violence*

<http://www.nrcdv.org/>

A project of the Pennsylvania Coalition Against Domestic Violence focusing on providing information regarding domestic violence, including internet and computer safety for victims.

*National Resource Center to End Violence Against Native Women (North Dakota Council on Abused Women's Services, Coalition Against Sexual Assault in North Dakota)*

<http://www.ndcaws.org/sharedfiles/nativeamerican.asp/>

Statistics on violence against women in the Native American community; resources and other links.

*Pennsylvania Coalition Against Domestic Violence*

<http://www.pcadv.org/>

Web site for the first state domestic violence coalition in the U.S. (est. 1976). Describes the work of the Coalition on local, state and national levels.

*Resource Center on Domestic Violence: Child Protection/Custody*

[http://www.ncjfcj.org/dept/fvd/res\\_center/](http://www.ncjfcj.org/dept/fvd/res_center/)

Provides information and assistance to those working in the fields of domestic violence and child protection and custody. A source for education, statutes and publications.

*SAFE – Stop Abuse for Everyone*

<http://www.safe4all.org/>

A self-described “human rights” organization for those who often fall outside of traditional domestic violence services, including teens, immigrants, gays and lesbians, and the elderly.

*Safe Horizon*

<http://www.victimsservices.org/>

An organization whose mission is to prevent violence, provide support, and promote justice for victims of crime and abuse.

*Silent Witness National Initiative*

<http://www.silentwitness.net/>

Dedicated to preserving the memories of women killed by abusive partners, and to educating the public and legislature about the nature and extent of domestic violence.

*Spouse Abuse by Law Enforcement (S.A.B.L.E.)*

<http://www.policedv.com/>

Designed to assist those victimized by spouses in law enforcement. Provides legal counseling and advocacy services, and answers questions about navigating the system when the perpetrator is part of the system.

*The Coalition to End Family Violence*

<http://www.thecoalition.org/>

Provides emergency information for abuse victims, and community education and advocacy.

*The Greenbook Project*

<http://www.thegreenbook.info/>

A project to improve the quality of services provided by local child welfare, family courts and domestic violence agencies to families affected by domestic violence, child abuse and maltreatment.

*The Non-Violence Alliance*

<http://www.endingviolence.com>

Information on abusers as fathers and a curriculum for parenting education for abusers.

*Tribal Institute*

<http://www.tribal-institute.org/lists/domestic.htm>.

A clearinghouse for Native American peoples with articles about the extent of domestic violence among indigenous peoples in the U.S.; descriptions of various projects and programs; and numerous links.

*U.S. Department of Justice Office of Violence Against Women*

<http://www.ojp.usdoj.gov/vawom/>

Information concerning a wide range of federal domestic violence initiatives and resources, including funding opportunities and publications.

*Women's Law Initiative*

<http://www.womenslaw.org/>

Provides important links to domestic violence resources, services and laws.

**Other Helpful Websites**

[www.childtrauma.org](http://www.childtrauma.org) The Child Trauma Institute provides training, consultation, information, and resources for those who work with trauma-exposed children, adolescents, and adults.

[www.zerotothree.org](http://www.zerotothree.org) A resource for parents and professionals working with children birth to three years.

[www.acestudy.com](http://www.acestudy.com) A comprehensive study of adverse childhood experiences on adult health and mental health

## Annotated Film List

### Documentaries

*A Life Without Fear* (1994), Sakhi Shelter for Southeast Asia Women, (20 minutes).

Recognizes the oppression of Asian women based on their sexual orientation, immigration status, class, and religion; deals with steps to empowerment.

*A New Life: Escaping Abuse* (1997), California Attorney General's Office, (17 minutes).

Battered women share stories of escape from domestic violence and the life that awaited them on the other side.

*Battered Hearts: A Story of Family Violence* (1996), S.A.F.E. Place of Battle Creek, Michigan, (12 minutes).

Women and children describe their experiences with domestic violence.

*Beyond Awareness to Action: Ending Abuse of Women* (1995), Marin Abused Women's Services and Transforming Communities, (23 minutes).

Explores the role of communities in educating members and ending domestic violence.

*Breaking the Silence: Journeys of Hope* (2001), Mary Kay Ash Foundation, (60 minutes).

A PBS film that focuses on the processes through which domestic violence victims become survivors.

*Broken Promises: Family Violence Within the Native American Community, Black Indian, Hispanic and Asian (BIHA) Women in Action*, (30 minutes).

Interviews with Native American women and their experiences with domestic violence.

*Broken Vows: Religious Perspectives on Domestic Violence* (1994), Faith Trust Institute, (59 minutes).

Six battered women from different religious backgrounds discuss their experiences. Roles of churches are explored.

*Defending Our Lives* (1993), Cambridge Documentary Films.

Battered women who murdered their abusers speak out from prison. An Academy Award winning film.

*Dolores* (1992), Committees for Hispanic Children and Families, Domestic Violence Project, (51 minutes).

Drama about the effects of violence on a Latino family, and the societal and cultural factors at work.

*Domestic Violence: Faces of Fear*, PBS Video, (60 minutes).

Survivors and witnesses from diverse backgrounds focus on the impact of domestic violence on their lives. Innovative violence projects are highlighted.

*Domestic Violence: What Churches Can Do* (2002), Faith Trust Institute, (20 minutes).

Practical steps are outlined for the roles of church congregations in responding to domestic violence.

*Escape the Abuse* (1994), Intermedia, (20 minutes).

Provides steps for the safe planning of escape from domestic violence.

*Facing Diversity: Responding to Violence Against Women From Diverse Cultures* (2000), Intermedia, (40 minutes).

Discusses roots of violence against women in various cultures and races.

*Hidden Victims: Children of Domestic Violence* (2000), AIMS Multi-media, (45 minutes).

Explores devastating impact of domestic violence on children; profiles four families.

*Honoring Our Voices* (1993), Women Make Movies, Inc., (33 minutes).

Dramatized story about the abuse of a Sioux woman and her search for help for her family.

*In and Out of Control: Emotional, Physical and Sexual Violence* (1998), Kinetic Video, (38 minutes).

Explores the roles of environment, heredity and substance abuse in violent behavior. Identifies triggers for violence and methods of prevention and treatment.

*It's Not Always Happy at My House* (1987), Coronet MTI Film and Video, (34 minutes).

Designed for use with children; includes dramatizations of the dynamics of domestic violence and its impact on family members, especially children.

*It's Not Like I Hit Her* (2000), Kinetic Video, (23 minutes).

An unflinching examination of the impact of emotional abuse.

*Men and Domestic Violence* (1995), Altschul Group Corporation/United Learning, (19 minutes).

Abusers in a treatment program discuss power and control issues, and the perpetrator's responsibility for the abuse.



*Men Don't Tell* (1993), Lifetime Television, (two hours).

Notable primarily for the unusual depiction of a husband as the battering victim and the roots of the perpetrator's violent behavior.

*No Safe Place – The Origins of Violence Against Women* (1996), Kinetic Video, (56 minutes).

Stories of abuse victims and interviews with perpetrators. Looks at characteristics of abusers and their partners.

*Reviving Ophelia: Saving the Selves of Adolescent Girls* (1998), Media Education Foundation, (35 minutes).

Examines challenges facing teenage girls and the impact of culture and the media in shaping self-image.

*Responding to Child Victims and Witnesses: Promising Partnerships to Improve Case Outcomes* (2000), Office of Victims of Crime, Department of Justice, (16 minutes).

Describes the need for coordinated response to violence through the partnerships of community agencies and services.

*Speaking Up: Ending Domestic Violence in Our Communities, Family Violence Prevention Fund* (30 minutes).

Includes commentary by survivors and experts showing how individuals can play a role in ending domestic violence.

*Survival From Domestic Violence: Stories of Hope and Healing, International Society for Traumatic Stress Studies*, (35 minutes).

Interviews with domestic violence survivors; includes their experiences with health care and helping professionals.

*The Children are Watching* (1995), Altschul Group/United Learning, (12 minutes).

The effects of domestic violence on child witnesses are examined.

*The Savage Cycle* (1991), Intermedia (30 minutes).

Uses the "Power and Control Wheel" to examine violence in intimate relationships.

*Through My Eyes: Children Exposed to Violence* (1999), Office of Victims of Crime, Department of Justice, (9 minutes).

Uses art work, writing and the voices of children to examine the impact of domestic violence on the youngest victims.

*Tulip Doesn't Feel Safe* (1993), Hazelden Video, (12 minutes).

For use with children; an animated story about a child whose mother is battered, and how the child learns to deal with scary situations.

*Understanding Psychological Trauma, Parts I and II* (1991), Kinetic Video, (29 and 32 minutes).

Explores issues associated with post traumatic stress, symptoms, treatment, and recovery. Not strictly about domestic violence.

*We Will Not Be Beaten*, Transition House Films, (20 minutes).

Victims of abuse share their experiences and societal causes of domestic violence are discussed.

*When Domestic Violence Comes to Work, Parts I and II* (2000), Intermedia, (20 and 30 minutes).

Impact of domestic violence on the workplace; how to recognize and respond to coworkers and provide information to victims about resources.

*You're Hurting Me, Too: The Effects of Domestic Violence on Children* (1996), Intermedia, (24 minutes).

Both short and long-term effects of domestic violence on children are explored. Focuses on the need for treatment to deal with the impact of trauma.

*Young Men's Work: Stopping Violence and Building Community*, Hazelden Video, (27 minutes).

Explores roles for men in reducing societal violence.

## Hollywood or Made-For-TV Films

*Disappearing Acts* (HBO Home Video 2001)

A scene in the last section of the film chronicles the stresses present for a couple adjusting to a new baby and the father's difficulty coping which includes destruction of property.

*North Country*, (Warner Brothers Pictures, 2005)

First scene in the film depicts a battered mother, leaving home with her two children and seeking refuge with her parents who judge her as at fault for the abuse.

*Personal Velocity, Part I "Something to Talk About"* (United Artists, 2002, 25 minutes)

Graphic and includes cursing, this film depicts a mother going through the process of deciding to leave and following through.

*The Burning Bed* (1984), Metro-Goldwyn Mayer (95 minutes).

A riveting account of a woman's abuse and her response to the violence.

The following films also have scenes depicting the impact of domestic violence on children/mothers:

*Fried Green Tomatoes* (Universal Pictures, 1991)

*Joy Luck Club* (Hollywood Pictures, 1993)

*Once Were Warriors* (Magna Pacific Films, 1994)

*What's Love Got to do With it* (Touchstone Pictures, 1993)

*The Prize Winner of Defiance, Ohio* (Dreamworks, 2006)

*Enough* (Sony Pictures, 2002)

*Beauty and the Beast* (Walt Disney Pictures, 1991)

Note: The Disney film *Beauty and the Beast* has been critiqued by many as depicting women in the role of "tamer of the dangerous and abusive" in men. Viewing the film might be a useful addition to this training.

## Trainer Resource – Using Films

Hollywood really helps trainings! Movies are an entertaining way of driving home many important points. There are, however, several things to consider in using films in this training.

1. *Legalities* – Copyright laws prohibit the showing of films for other than home viewing so that entire films cannot be shown without the written consent of the studio.

### Solutions

Option 1. Have films assigned to trainees to be viewed at home.

Option 2. Show less than 15 minute clips which the copyright law allows.

Option 3. Try getting permission from the studios, which is often given free of charge to nonprofits for the educational use of the films.

2. *Time* – Films usually run 2+hours and in a curriculum packed with information and activities this is prohibitive.

### Solutions

Option 1. Trainees can get a film list 2 weeks prior to the training, with instructions to choose 3 or 4 to view.

Option 2. Randomly assign one film to each student in a pre-training mailing.

Option 3. Trainers can cue movies they choose to a place that they think accurately delivers the intended message.

3. *Offensive Material* – Many films about domestic violence are violent. They also often have profanity and sexuality. Some participants are really offended by these scenes.

### Solutions

Option 1. Trainers can carefully screen the films when choosing the clips avoiding the offensive scenes.

Option 2. Include the MPAA ratings and cautions with the mailing and give prospective trainers a choice of films to watch ahead of time.

Option 3. Don't use films but describe the material in the scenes that illustrate the points to be made.

Option 4. Warn participants of the offensive material, explaining that it “comes with the territory” of domestic violence.

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