



Contents lists available at ScienceDirect

Child Abuse & Neglect



The overlap of witnessing partner violence with child maltreatment and other victimizations in a nationally representative survey of youth^{☆,☆☆}

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ARTICLE INFO

Article history:

Received 23 July 2009
Received in revised form 3 March 2010
Accepted 8 March 2010
Available online 17 September 2010

Keywords:

Intimate partner violence
Child maltreatment
Co-occurrence
Witnessing domestic violence

ABSTRACT

Objective: To examine the co-occurrence of witnessing partner violence with child maltreatment and other forms of victimization.

Method: Data are from the National Survey of Children's Exposure to Violence (NatSCEV), a nationally representative telephone survey of the victimization experiences of 4,549 youth aged 0–17.

Results: Witnessing partner violence (WPV) is very closely associated with several forms of maltreatment and exposure to other forms of family violence in this sample, with adjusted OR ranging from 3.88 to 9.15. WPV is also significantly associated with a wide variety of other forms of victimization, with OR ranging from 1.43 to 7.32. More than 1/3 (33.9%) of youth who witnessed partner violence had also been maltreated in the past year, compared with 8.6% of non-witnesses. For lifetime data, more than half (56.8%) of WPV youth had also been maltreated. Neglect and custodial interference were most closely associated with WPV.

Conclusions: These data support the poly-victimization model, indicating that many youth experience multiple forms of victimization. They also indicate that the various forms of family violence are especially closely linked.

Practice implications: These results provide new urgency to calls to better integrate services to adult and child victims of family violence. For example, screening to identify the needs of child witnesses could be done in domestic violence shelters, and screening to identify the needs of adult victims could be done in child protective service settings.

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Introduction

Partner violence and child abuse share many common features, and it is not surprising that these phenomena often occur together (Bourassa, 2007). Indeed, in many cases the same perpetrator is guilty of assaulting multiple family members. The assaulted family member is not necessarily the only victim in these situations, however. Increasing attention has been paid

[☆] For the purposes of compliance with Section 507 of PL 104-208 (the "Stevens Amendment"), readers are advised that 100% of the funds for this program are derived from federal sources (this project was supported by Grant No. 2006-JW-BX-0003 awarded by the Office of Juvenile Justice and Delinquency Prevention, Office of Justice Programs, US Department of Justice). Financial support for this project was provided by the Centers for Disease Control and Injury Prevention. The total amount of federal funding involved is \$2,709,912.

^{☆☆} Points of view or opinions in this document are those of the author and do not necessarily represent the official position or policies of the US Department of Justice or the CDC.

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to the plight of children who may be doubly victimized in such families: first, by being maltreated themselves and second, by witnessing the victimization of a parent.

Numerous studies indicate that the overlap is substantial between witnessing partner violence (WPV) and child maltreatment (Appel & Holden, 1998; Jouriles, McDonald, Slep, Heyman, & Garrido, 2008). The overlap is observed whether one examines child abuse rates among the children of partner violence victims (Jouriles et al., 2008) or partner violence in families reported for maltreatment (Hazen, Connelly, Kelleher, Landsverk, & Barth, 2004). The degree of co-occurrence is affected by several factors, however. In one review, the median prevalence of child abuse was 41% among children of battered women, but only 6% in nationally representative samples (Appel & Holden, 1998). In addition to sample characteristics, stricter definitions of abuse and shorter referent periods also typically decrease the level of co-occurrence (Appel & Holden, 1998; Edleson, 1999; Jouriles et al., 2008).

There are several limitations with existing information on the co-occurrence of WPV and child maltreatment. Samples from service settings, such as domestic violence shelters, represent families who often have multiple problems and few resources, and are not typical of the general population. Existing figures for representative community samples come primarily from older studies (Straus, Gelles, & Steinmetz, 1980). Most existing studies use adult or official record informants (Edleson, 1999; Jouriles et al., 2008), and thus the true exposure of youth is less well established, because they may not witness all violence between parents. This relates to a major controversy in the field, as the degree to which child protective services (CPS) should get involved in cases of WPV is much debated (Edleson et al., 2007). More specific data on WPV could help advance this policy debate.

Additionally, most research on the co-occurrence of WPV and child abuse has focused on a single form of maltreatment, child physical abuse. Although the shared physical assault component may make this seem a natural choice, it is not clear that there is any theoretical reason to focus on this particular overlap. A parent who is willing to use physical violence against loved ones, or even a parent who is traumatized from victimization themselves, may have difficulty with other inappropriate and abusive behaviors and with meeting children's basic needs. Much less is known about the co-occurrence of WPV with other forms of maltreatment, such as neglect, psychological abuse, sexual abuse, and custodial interference (taking or keeping a child with the intent to deprive a parent of legal physical custody).

WPV and its overlap with other forms of victimization

The concern about the co-occurrence of WPV and child maltreatment is one of the earliest instances of attention to the problem of multiple victimizations. It turns out that these interrelationships are by no means limited to violence that occurs within the family; there are sizeable interrelationships among many different kinds of violence exposure and victimization (Finkelhor, Turner, Ormrod, & Hamby, 2005). Yet there are few studies which have examined whether WPV overlaps with other forms of youth victimization. Our own prior work has established that there is an overlap between witnessing violence and other forms of direct victimization (Finkelhor, Turner, et al., 2005), but has not specifically focused on WPV. Given the high degree of overlap among a wide variety of victimizations, we anticipate that WPV will not only be associated with child maltreatment, but also with other victimizations.

Purpose

NatSCEV, the National Survey of Children's Exposure to Violence (Finkelhor, Turner, Ormrod, & Hamby, 2009) offers an opportunity to examine the co-occurrence of WPV with all major forms of child maltreatment as well as other youth victimizations. NatSCEV provides recent nationally representative data on the rates and co-occurrence of WPV and other forms of victimization. We expect to find a significant overlap between WPV and child maltreatment, including but not limited to physical abuse. We also expect to find that WPV is associated with higher rates of exposure to a variety of forms of youth victimization outside of the home as well.

Method

Participants

The experiences of 4,549 children age 0–17 comprise the National Survey of Children's Exposure to Violence (NatSCEV), a nationally representative sample of children living in the contiguous United States. Most (67%) of the sample was obtained from random digit dialing a nationwide sampling of residential telephone numbers. The rest of the sample comes from an over-sampling of telephone exchanges that had a population of 70% or more of African American, Hispanic, or low-income households. The demographic characteristics of the sample were: 50% male, 50% female, 53% White, non-Hispanic, 20% Black, non-Hispanic, 5% other race, non-Hispanic, and 21% Hispanic, any race (see Finkelhor et al., 2009, for more information).

Procedure

An adult caregiver (usually a parent) was interviewed in each household to obtain family demographic information. One child was randomly selected from all eligible children in a household by identifying the child with the most recent birthday.

If the selected child was 10–17 years old, the main telephone interview was conducted with the child (46% of completed interviews). Otherwise, the interview was conducted with the caregiver who “is most familiar with the child’s daily routine and experiences.”

We have found no evidence of reporter bias in numerous comparisons of proxy and self-reports in previous studies or these data (Finkelhor, Turner, et al., 2005, 2009).

Up to 13 telephone callbacks were made to select and contact a respondent and up to 25 callbacks were made to complete an interview. Respondents were promised confidentiality and paid \$20 to participate. Interviews averaged 45 min in length. They were conducted in English or Spanish. Approximately 6% of parent interviews were done in Spanish, and nearly all adolescents chose to be interviewed in English. The cooperation rate for the RDD cross-section portion this survey was 71%, which is quite good by current standards. For more details, see Finkelhor et al. (2009).

Respondents who disclosed a situation of serious threat or ongoing victimization were re-contacted by a clinical member of the research team, trained in telephone crisis counseling, whose responsibility was to stay in contact with the respondent until the situation was resolved or brought to the attention of appropriate authorities. All procedures were authorized by the Institutional Review Board of the University of New Hampshire.

Measurement

Victimization and exposure to victimization. This survey used an enhanced version of the Juvenile Victimization Questionnaire (JVQ), an inventory which covers five general areas of youth victimization: maltreatment, conventional crime, victimization by peers and siblings, sexual victimization, and witnessing and indirect victimization (Finkelhor, Hamby, Ormrod, & Turner, 2005; Hamby, Finkelhor, Ormrod, & Turner, 2005). See Finkelhor et al. (2009) for the exact item wording.

Witnessing partner violence (WPV). The original JVQ had one item on witnessing partner violence, which was supplemented with three additional items on physical partner violence in NatSCEV. The directions to the additional screening items read, “The next set of questions are about people who have taken care of you [or “your child” for caregiver interviews]—that would include your parents, stepparents, and your parents’ boyfriends or girlfriends, whether you lived with them or not. It would also include other grown-ups, like grandparents or foster parents if they took care of you on a regular basis. When we say “parent” in these next questions, we mean any of these people.” The WPV rate was computed as a positive answer to any of these four items. Reports to earlier items on witnessing assaults that included parent perpetrators and victims were re-scored so that they are also included in rates.

Child maltreatment. The JVQ includes five screens on different types of maltreatment: physical abuse, psychological abuse, neglect, custodial interference, and sexual abuse by a known adult. The directions to the maltreatment section of the interview read, “Next, we are going to ask about grown-ups who take care of you {or “your child” for caregiver interviews}. This means parents, babysitters, adults who live with you, or others who watch you. Before we begin, I want to remind you that your answers will be kept totally private. If there is a particular question that you don’t want to answer, that’s O.K. But it is important that you be as honest as you can, so that the researchers can get a better idea of the kinds of things that kids your age sometimes face.”

Other forms of victimization and exposure to victimization. A selection of key victimization items from the JVQ were used to examine the co-occurrence of WPV with other victimizations. See Tables for a description of these items.

Severity of child maltreatment. Respondents who reported maltreatment were asked whether youth were “physically hurt when this happened,” whether they went “to the hospital, a doctor’s office, or some kind of health clinic to get treated for this injury,” whether “a police officer or some other law official” knew about what happened, and “how afraid” they felt (not at all, a little, or very afraid).

Demographics. Youth characteristics such as age, gender, race, and ethnicity were obtained in a demographic section of the survey.

Weights. All results are adjusted for the following: (1) differing probabilities of household selection, including the over-sampling of Black, Hispanic, and low income respondents; (2) variations in the within-household probability of selection due to different numbers of eligible children across households; and (3) differences in sample proportions by gender, age, and race/ethnicity, and income relative to Census Population Projections for 2008 of each strata.

Results

Analyses. Logistic regressions were performed with WPV as the predictor and child maltreatment and other victimization types as the dependent variables. One series was run with only WPV in the equation. Another series was run to show the effects of WPV after controlling for several demographic variables: youth age, youth gender, household income, and youth race and ethnicity (coded as African American or not and Latino/a or not). These were done for both past year and lifetime reports. Because many studies have presented only the bivariate association between WPV and maltreatment, the odds ratios (ORs) for WPV for both series appear in Table 1.

Additionally, because ORs from logistic regressions are well known to exceed the true relative risk for phenomena with population rates higher than 10%, the results are also shown with the Zhang and Yu correction (Zhang & Yu, 1998). Their correction, which adjusts for the incidence of the outcome (here, each type of victimization) in the non-WPV group, more nearly approximates the true relative risk, and has advantages over statistical alternatives in its ability to handle multiple

Table 1
Odds ratios for association of witnessed partner violence (WPV) with maltreatment and other victimizations.

Type of victimization	Past year reports			Lifetime reports		
	OR	OR post-demos	OR post-demos _{corr}	OR	OR post-demos	OR post-demos _{corr}
<i>Maltreatment</i>						
Any maltreatment	5.47	5.32	3.88	8.85	7.55	4.36
Custodial interference	8.17	9.67	8.83	12.71	10.44	9.15
Neglect	11.63	9.77	9.06	8.00	6.74	6.17
Sexual abuse by known adult	6.49	6.19	6.13	10.32	5.27	5.18
Physical abuse	5.87	5.03	4.41	7.95	6.25	4.99
Psychological abuse	4.79	4.13	3.48	6.76	6.07	4.32
<i>Witnessed other forms of family violence</i>						
Witness sibling physical abuse	5.33	7.25	6.55	12.04	9.24	7.99
Witness other family assault	7.29	7.71	6.64	7.66	6.64	5.60
<i>Other forms of victimization</i>						
Any physical assault	3.70	3.49	1.66	5.23	4.78	1.63
With injury	3.01	3.27	2.69	4.72	4.17	3.11
With weapon	4.92	3.92	3.46	4.35	3.23	2.82
Dating violence ^a	2.58	2.90	2.71	4.80	4.27	3.81
By non-sibling peer	2.78	2.47	1.99	3.18	2.47	1.88
By juvenile sibling	1.68	1.73	1.43	2.18	2.20	1.55
Any sexual victimization	2.98	3.00	2.70	5.32	3.81	3.24
Statutory rape/sexual misconduct ^a	7.98	7.46	7.32	4.13	3.70	3.62
Any sexual assault	3.11	3.03	2.93	5.37	3.10	2.96
Kidnapping	0.38	1.10	1.10	5.07	3.43	3.36
Internet harassment ^b	2.64	2.46	2.38	3.07	2.83	2.73
Bullying	2.59	2.19	1.88	2.62	3.10	2.17
Emotional bullying	2.01	2.26	1.78	2.58	2.49	1.73
Witnessed community violence	2.52	2.56	2.00	4.00	3.30	2.14
Property crime	3.52	3.09	2.01	3.80	3.55	1.84

Note: All past year effects are significant, $p < .01$, except for dating violence, $p < .05$, and kidnapping, ns , $n = 4,549$. All lifetime effects are significant, $p < .001$. OR, odds ratio; OR post-demos, odds ratio for WPV after controlling for youth gender, youth age, household income, and youth race and ethnicity (African American or not and Latino/a or not); OR post-demos_{corr}, Also has Zhang and Yu (1998) correction applied to more nearly approximate the true relative risk. OR greater than 3.0 after all adjustments are highlighted in bold.

^a Asked only about youth 12 years and older.

^b Asked only about youth 5 years and older.

covariates, continuous covariates, or confounds strongly associated with the dependent variable, and lacks problems with statistical convergence (Kleinman & Norton, 2009). For example, for some common phenomena, such as physical assault (already at 44% in the past year even in the non-WPV group), the true relative risk can only go so high before you reach 100%. The unadjusted odds ratio for physical assault is 3.70, which cannot be the relative risk as that would imply 163% of WPV children are physically assaulted. The principal advantage of the Zhang and Yu correction is that it can be applied even after controlling for multiple demographics. As the uncorrected odds ratio is still most commonly reported (Kleinman & Norton, 2009), we include both statistics to facilitate comparison of our results with other studies. See Table 1.

The rates of victimization for youth who had and had not witnessed partner violence are in Tables 2 and 3. As some researchers report the other conditional—the rate of WPV for youth who have been maltreated (Hazen et al., 2004)—we also provide that rate in the final column of Tables 2 and 3. So, for example, on the top line of Table 2, 33.9% of youth who witnessed partner violence also were identified as victims of maltreatment, versus only 8.6% of youth who had not witnessed partner violence. These rates correspond to the OR in Table 1. For some settings, however, it may be useful to also know that 20.8% of maltreated youth were identified as witnesses to partner violence (the final column in Table 2).

Finally, we also used chi-square and analysis of variance to examine whether episodes of maltreatment that co-occurred with WPV were more severe in terms of injury rates, notification of police, or how afraid youth felt.

Co-occurrence of WPV and maltreatment and other family violence. WPV is very closely associated with all other forms of family violence in this sample, with OR ranging from 3.88 to 9.15, even after controlling for demographics and applying the Zhang and Yu correction. More than 1/3 (33.9%) of youth who witnessed partner violence had also been maltreated in the past year, compared with 8.6% of non-witnesses. For lifetime data, more than half (56.8%) of WPV youth had also been maltreated. See Tables 1–3.

Many of the findings are striking. Custodial interference, for example, turns out to be relatively rare among youth with no history of WPV, with a lifetime rate of only 1.5%. For WPV youth, however, 1 in 5 (20.1%) have also experienced custodial interference. Put another way, almost 3/4 (72.3%) of the youth who had experienced custodial interference had also witnessed partner violence. More than 70% of the youth who had been sexually abused by a known adult also had WPV. The differences are also substantial for more common forms of maltreatment. Physical abuse was reported by 4.8% of non-WPV youth but nearly 1 in 3 (31.1%) of WPV youth; the findings for psychological abuse were similar. Although the rates are lower for the shorter past-year referent period, the ORs are in a similar range, and generally show that WPV youth are 3–9 times as likely to be maltreated as non-WPV youth.

Table 2

Co-occurrence of witnessed partner violence (WPV) with maltreatment and other victimizations: past year reports.

Type of victimization	% of WPV youth with other victimization	% of non-WPV youth with other victimization	% of Victimized Youth who also WPV
<i>Maltreatment</i>			
Any maltreatment	33.9	8.6	20.8
Custodial interference	8.5	1.1	33.8
Sexual abuse by known adult	1.4	0.2	30.8
Neglect	9.9	0.9	41.2
Physical abuse	17.6	3.5	25.3
Psychological abuse	23.4	6.0	21.1
<i>Witnessed other forms of family violence</i>			
Witnessed sibling physical abuse	8.5	1.7	25.3
Witnessed other family assault	14.8	2.4	29.4
<i>Other forms of victimization</i>			
Any physical assault	74.6	44.4	10.1
With injury	23.7	9.4	14.4
With weapon	19.0	4.5	21.9
Dating violence (12 yo+)	8.6	3.7	14.8
By non-sibling peer	35.2	16.4	12.5
By juvenile sibling	39.8	28.3	8.6
Any sexual victimization	14.8	5.5	15.2
Statutory rape/sexual misconduct	1.9	0.3	33.3
Any sexual assault	4.6	1.6	16.3
Kidnapping	0.4	0.5	4.2
Internet harassment	5.8	2.3	14.3
Bullying	29.4	13.8	12.8
Emotional bullying	34.9	21.2	10.2
Witnessed community violence	35.7	18.1	11.6
Property crime	54.8	25.7	12.8

Note: n = 4,549.

Table 3

Co-occurrence of witnessed partner violence (wpv) with maltreatment and other victimizations: lifetime reports.

Type of victimization	% of WPV youth with other victimization	% of non-WPV youth with other victimization	% of Victimized youth who also WPV
<i>Maltreatment</i>			
Any maltreatment	56.8	11.2	49.6
Custodial interference	20.1	1.5	72.3
Sexual abuse by known adult	5.3	0.4	70.9
Neglect	13.8	1.6	62.6
Physical abuse	31.1	4.8	55.7
Psychological abuse	38.2	8.0	50.6
<i>Witnessed other forms of family violence</i>			
Witness sibling physical abuse	20.0	1.9	66.7
Witness other family assault	19.3	3.3	53.4
<i>Other forms of victimization</i>			
Any physical assault	85.3	51.1	24.5
With injury	39.1	10.7	41.1
With weapon	26.2	6.6	43.7
Dating violence (12 yo+)	14.5	3.7	55.7
By non-sibling peer	48.4	21.3	21.3
By juvenile sibling	50.8	34.6	22.2
Any sexual victimization	28.0	6.2	46.5
Statutory rape/sexual misconduct	2.7	0.8	52.6
Any sexual assault	12.6	2.2	52.5
Kidnapping	5.1	0.9	52.1
Internet harassment	8.8	2.1	48.7
Bullying	42.5	20.3	30.9
Emotional bullying	49.1	29.5	26.2
Witnessed community violence	55.3	23.5	31.3
Property crime	69.9	36.3	29.1

Note: n = 4,549.

Table 4

Consequences of child maltreatment as a function of whether youth witnessed partner violence: lifetime reports.

Type of maltreatment	WPV youth	Non-WPV youth
<i>Physical abuse</i>		
Injury rate	59.9%	34.0%***
If injured, sought medical care	22.6%	5.9%**
Police notified	25.3%	10.7%**
How afraid youth felt	2.41 (±.06)	1.99 (±.06)***
<i>Psychological/emotional abuse</i>		
Police notified	13.3%	5.2%**
How afraid youth felt	1.93 (±.05)	1.86 (±.05)
<i>Neglect</i>		
Illness rate	38.6%	17.4%*
Police notified	36.3%	36.0%
How afraid youth felt	2.34 (±.09)	1.71 (±.12)***
<i>Custodial interference</i>		
Injury rate	6.4	6.0
Police notified	47.8%	33.3%
How afraid youth felt	2.04 (±.07)	1.68 (±.12)***
<i>Sexual assault by known adult</i>		
Injury rate	20.0%	11.8%
Police notified	55.2%	57.1%
How afraid youth felt	2.79 (±.11)	2.42 (±.16)

Notes: *n* ranges from 44 to 308.* $p < .05$.** $p < .01$.*** $p < .001$.

Co-occurrence of WPV and other victimizations. WPV is significantly associated with a wide variety of victimizations, with ORs ranging from 1.43 to 7.32 (after controlling for demographics and applying Zhang and Yu correction). Most of these ORs were lower than the OR for maltreatment and family violence. Some of the most notable degrees of overlap were for physical assaults involving weapons (past year) or injury (lifetime), and for variables suggesting that these youth may be at higher risk for engaging in problematic relationships themselves as they enter adolescence, with a nearly fourfold lifetime risk of dating violence and a greatly increased likelihood of reporting being a victim of statutory rape or sexual misconduct (past year and lifetime). Looking at lifetime reports, more than half of dating violence victims and statutory rape/sexual misconduct victims had a WPV history.

Severity of child maltreatment as a function of WPV. Maltreatment that co-occurs with WPV tends to be more severe than maltreatment in the absence of WPV. The strongest effects were seen for physical abuse. Physically abused youth who were also WPV were more likely to be injured, more likely to seek medical care for injuries, more likely to have maltreatment incidents reported to the police, and felt more afraid during the abuse episode, compared to non-WPV youth. Police involvement was also more common when WPV co-occurred with psychological abuse. Fear ratings were higher for youth reporting neglect and custodial interference who also had WPV. Neglected youth who also reported WPV were more likely to report getting sick from neglect. See Table 4.

Discussion

These data suggest two important conclusions. First, that witnessing partner violence is yet another form of victimization that overlaps strongly not only with maltreatment but with many forms of victimization, adding further support to the polyvictimization model (Finkelhor, Ormrod, & Turner, 2007). Second, these findings also suggest that some forms of victimization cluster together more strongly than others. In particular, these data indicate that WPV and all forms of child maltreatment and family violence are particularly closely linked.

WPV, child maltreatment, and other forms of family violence

More than a third of the youth who had witnessed partner violence in the past year had also experienced some form of maltreatment. The picture for lifetime rates was similar—over the course of a lifetime, more than half (56.8%) of WPV youth were also maltreated. For physical abuse, which is the focus of most previous studies of the co-occurrence of partner violence and maltreatment, the past year rate for WPV youth was 17.6% and for lifetime was about one third (31%). The latter is only slightly lower than the average overlap of 41% (not separated for referent period) reported in a review of primarily clinical and high-risk samples, and both rates are higher than for most past community samples (Appel & Holden, 1998). The strength of these associations is notable. Fully 72% of all youth who had ever experienced custodial interference had also witnessed partner violence. More than 60% of neglect victims and more than 70% of victims of sexual abuse by a known adult had also witnessed partner violence. These data suggest that WPV may be a key component in creating conditions that lead to maltreatment.

These data also suggest that more attention needs to be paid to other possible victims in the family (Hamby, 2004). Witnessing sibling physical abuse and other family assaults also commonly co-occurred with WPV. For these forms of family violence, the degree of co-occurrence with WPV was similar or higher than those for child maltreatment.

In an earlier paper, we demonstrated that there is significant overlap across all major victimization categories, including physical assault, sexual victimization, maltreatment, property crime, and exposure to violence. The average OR (age-adjusted) for these overlaps was 2.7 (past year) and 2.8 (lifetime), with most victimizations associated with a doubling or tripling of the risk of another form of victimization (Finkelhor et al., 2009). Every OR for the co-occurrence of WPV with maltreatment and other family violence exceeded these average values, often by a considerable margin. WPV youth are *three to nine times as likely* to be maltreated or exposed to other family violence as non-WPV youth.

It is equally important to note, however, especially for clinical or criminal justice purposes, that, despite this high co-occurrence, it should not be assumed that a child presenting with one form of victimization also has some other form. Even in the lifetime data, almost half of the WPV youth had not been maltreated, and, looking at it from the other direction, half of maltreated youth had never witnessed violence between their parents.

WPV and other forms of victimization

These data also confirm the hypothesis that WPV is associated with virtually every form of youth victimization. For lifetime data, the results were highly significant for every form, even those that may seem quite unlike WPV, such as property crime and Internet harassment. For past year data, the associations were less strong but still significant for every victimization save kidnapping. Although these data do not allow causal inferences to be drawn, it can be speculated that a general lack of parental oversight, poor modeling, the greater likelihood of low functioning parents to live in high-risk neighborhoods, or compromised functioning due to parental traumatic stress might all contribute to the very high rates of victimization suffered by WPV youth. Among these other victimizations, some of the greatest increased risks were for statutory rape/sexual misconduct and dating violence, suggesting that WPV may be particularly associated with a risk for problematic adolescent relationships. These data add to evidence that a comprehensive approach to youth victimization is needed at all levels of research, intervention, and policy-making.

Implications

We believe these results provide new urgency to calls to better integrate services to adult and child victims of family violence. Many people have called for greater collaboration between services aimed at child and adult victims, and in part our findings contribute by providing new and more comprehensive data on the need for such collaboration. There have been a few outstanding efforts to craft model policies for cases of multiple victims in one family, perhaps most notably the Greenbook and Safe Start initiatives (Association for the Study and Development of Community, 2005; Schechter & Edleson, 1999). The Greenbook recommends that, especially in cases of low or moderate severity, children be kept with non-offending parents and services be made available without the necessity of opening a child protection investigation. Given that many families have open CPS cases for a very short period of time and that as many as 80% receive no services following a CPS referral (English, Edleson, & Herrick, 2005), we recommend that collaborative efforts which protect and help both adult and child victims should be the norm.

What should such collaborative services look like? That is a large question, but these data, especially taken into consideration with other well-established findings, point to some important implications. Given the very high percentage of IPV victims among parents, treatment plans which direct non-offending parents to immediately leave the perpetrator may not always be effective in stopping the violence. In our data, the strongest indication of this comes from the very high co-occurrence of WPV and custodial interference, which by its very definition involves separation of the parents and suggests that some maltreatment may actually be occurring in the context of parental separation. These likely involve both cases of perpetrators denying access to children as another form of partner abuse and cases of victims trying to get their children away from a perpetrator. Other data point to other dangers, most especially the persistence or even initiation of physical assault and stalking after separation (e.g., Tjaden & Thoennes, 2000). According to some data, the majority of intimate partner femicides occur in couples who have had at least one separation in the past year (Campbell, Glass, Sharps, Laughon, & Bloom, 2007). Although frequent mention is made of the risks of separation violence, these risks need to be more thoroughly integrated into treatment plans. A realistic, safe plan would involve careful consideration of risks and sufficient offers of resources and support, rather than stronger directives to terminate the parental relationship or lose custody of the children.

We also recommend that the needs of victimized parents be more formally incorporated into child protection assessments. A parent's ability to implement CPS recommendations will depend in part on her ability to freely choose her actions, and if she is also a victim, this may not be the case. At least anecdotally, many child protection assessments of parents are still very adversarial (Sirotkin & Fecko, 2008), but it is unlikely that an adversarial approach serves the long term interests of families. More cooperative approaches, such as Parent–Child Psychotherapy (Lieberman, Van Horn, & Ippen, 2005), show considerable promise and could be implemented more widely. Other interventions deserve much further study than they have received to date. The preliminary data on couples counseling suggests it might be effective for some couples who experience less injurious violence (Stith, Rosen, McCollum, & Thomsen, 2004).

On the other side of the equation, the high degree of co-occurrence observed in this non-clinical sample indicates that screening for child victimization in domestic violence agencies should be more widely implemented. Dangerousness assessments and safety planning could explicitly incorporate risks to children to help parents develop plans that respond to those risks. An instrument such as the VIGOR (Victim Inventory of Goals, Options, and Risks) (Hamby, 2008) is one possible tool. It is important that these issues be raised early, as many victims do not continue with services beyond crisis intervention. Referral to CPS should not be automatic, as it is clear from our data as well as others' that not all children in these families are exposed to IPV and that such exposure is not a *per se* harm (Jouriles et al., 2008; Lansner, 2008). Nonetheless, many shelters house almost as many children as adults (for example, 47% of shelter residents are children in North Carolina, North Carolina Council for Women, 2009), and children should not actually reside in a social service program without having their needs assessed. Although we would not conclude that being a victim in and of itself is equivalent to having parenting problems, the very high co-occurrence of WPV and neglect (which in our definition did not include WPV) suggest that there may be a subpopulation of parents whose parenting abilities are limited by victimization. Regarding other services for children, the particularly high co-occurrence of WPV with adolescent dating violence and statutory rape/sexual misconduct suggests that children exposed to partner violence would benefit from education regarding healthy, safe, and respectful relationships. The co-occurrence of so many different forms of victimization calls for a more comprehensive approach to the needs of children and families.

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