

Research Explores the Messages and Strategies Intimate Partner Violence Survivors Use to Communicate with Their Children to Prevent Future Violence

Mothers who are survivors of intimate partner violence can play an important role in mitigating the effects that witnessing violence can have on their children. The mothers interviewed in this study strove to convey the message that intimate partner violence (IPV) is not normal and offered advice for maintaining nonviolent relationships, in part by encouraging open communication and building a strong positive relationship with their children. They also expressed interest in participating in a program focused on teaching communication skills for survivors interested in having these conversations with their children.

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Summary by Joshua Wilson, Counseling Psychology, Boston College

Introduction:

- Children who witness IPV are at greater risk for experiencing and perpetrating violence, including teen dating violence and IPV as adults, which contributes to an intergenerational cycle of violence.
- Supportive and responsive parenting, especially from a nonviolent parent, can be a protective factor for children who have been exposed to violence. For example, interventions focusing on parents supporting their children with PTSD have shown significant decreases in PTSD symptoms. However, few studies have examined similar interventions for IPV specifically.
- This study explored the messages mothers who are survivors (note: the authors use the term “victim,” but we chose to substitute “survivor” given our experience that this term is experienced as a more empowering and less pathologizing identification) of IPV communicate to their children about relationships and violence and their strategies for doing so, as well as their thoughts regarding an intervention designed to facilitate this communication.
- Research Question:
 - How and what do mother survivors of IPV communicate to their children about violence and relationships, and to what extent are they interested in services to facilitate these conversations?

Methods:

- The researchers conducted one-on-one interviews with a total of 18 survivors who were receiving residential or counseling services at a community-based domestic violence (DV) program. The researchers worked with program staff to recruit participants via flyers and announcements.
- Measures:
 - The interview protocol consisted of a list of 6 major topic areas: a) relationships with children, b) perceptions of how violence affected children, c) communication about violence with chil-

dren, d) communication about violence with teenagers, e) perspectives about a program for mothers, and f) perspectives about a program for children to promote talking about violence and relationships.

- Each topic comprised several guiding questions.
- Participants completed a brief sociodemographic survey after the interview.
- Participants:
 - 18 mothers completed the interview, all of whom were IPV survivors seeking domestic violence services. Most of the participants were Black (n = 11), with five White survivors, one Black + Native American survivor, and one identifying as Other.
 - Survivors ranged from 28 to 56 years old. Most women did not have education beyond the high school level. Seven were single and never married, eight were divorced or separated, and three were widowed or still married.
 - Each mother had at least one child, with 61% having a child living in their home with them. Children ranged from nine months to 35 years of age.

Results:

- Data Analyses:
 - Interviews were recorded, transcribed, and entered into a qualitative data management program known as ATLAS.ti.
 - Interviews were read by at least two researchers who assigned codes and themes to segments of the text. The interviewers then met to reconcile their findings and identified overarching themes across the 18 interviews.
 - The final list of themes was presented to a larger group of IPV researchers as well as to advocates working in the agency from which participants were recruited. Both groups found the themes to be plausible, recognizable, and accurate.
- The researchers identified six overarching themes across the interviews.
- Messages IPV Survivors Want to Convey to their Children:
 1. Explain the IPV experience and highlight that it was not normal
 - Mothers found it difficult to provide their children with an explanation for why the violence occurred.
 - They expressed a desire to clearly convey to their children that abuse is not normal and linked to other problematic conditions such as mental health problems or substance abuse.
 2. Offer relationship advice
 - The mothers in the study offered advice aimed at preventing violence in their children's current and future relationships, emphasizing preventing perpetration of violence with boys and avoiding violent situations with girls.
 - They offered alternatives to violence such as talking about feelings, as well as instilling self-esteem, independence, and help-seeking and other safe behaviors in their children.
- Strategies Mothers Used to Convey these Messages.
 3. Build mother-child relationship

- The mothers in the study described showing love and building trust with their children to mitigate the ways IPV disrupted their relationship.
 - They also described challenges in building these relationships, such as teenage daughters being overly invested in their own dating lives, as well as wanting to limit their younger children's exposure to talking about violence, to preserve their innocence.
4. Encourage open communication
 - The study participants prioritized being honest and direct when discussing violence with their children.
 - They also took steps to make sure their children were comfortable talking about these subjects.
 - Family therapy and therapy for their children were identified as important resources for supporting open communication.
- Mothers' Thoughts About Interventions to Help Them Communicate With Their Children
 5. They want to talk to their children about IPV and relationships
 - Mothers were highly motivated to have these discussions because they were worried about their children perpetrating or experiencing violence, in part because of how IPV has shaped their children's understanding of love and relationships.
 - Mothers wanted to be involved in their children's relationships and saw these conversations as having the potential to help both their children and themselves with their healing process.
 6. They want help with these discussions
 - When asked specifically about an intervention to help with these discussions, all but one woman in the study were interested and supportive of the idea. They expressed an interest in learning communication and parenting skills.
 - Many mothers volunteered to help with such a program.

Discussion

- The authors conclude that some mothers who are survivors of IPV are interested in a program with the unique goals of building parent-child relationships and communication skills to explain past violence in order to prevent future violence.
- The mothers in this study were excited about a program because of the challenges and fears associated with their children's development and their discomfort or feelings of unpreparedness in addressing some of these topics.
- The authors suggest that the intervention proposed in this study also model healthy relationships and address disrupted attachment between mothers and their children, as these are key risk factors linking the witnessing of IPV as a child to future violence.
- The authors highlight Child-Parent Psychotherapy as one of the few examples of an intervention focusing on communication between IPV survivors and their children, which focuses on a relational process between the mother and child in order to improve parental responsiveness to the needs of their child.

- The authors acknowledge that the findings are limited in that the sample in this study may not be representative due to the nature of the agency from which participants were recruited, the relatively older than average age of the sample, and lack of information about the length, severity, and context of the IPV.
- The authors also note that the perspectives of children are important in thinking about a program for improving survivor-child communication and should be examined in future research.

Commentary by Joshua Wilson, Counseling Psychology, Boston College

- Practitioners and scholars in the field of domestic violence programs are increasingly calling for adopting a trauma-informed approach to services. Efforts to create healing interactions between survivors of IPV and their children are important parts of a trauma-informed emphasis on facilitating healing relationships and connections for survivors, given the relational disruption of IPV that the authors describe. Such an approach echoes the authors' suggestion that these services are crucial for preventing future violence as well as contributing to the present healing of both the mother and the child.
- Despite a rush to adopt trauma-informed approaches, many domestic violence programs lack concrete examples of what services for parents might look like. The results of this study are useful in that they provide a concrete example of an intervention that can be further developed and implemented by domestic violence agencies and adapted to their particular program's needs, such as by incorporating their population's cultural beliefs regarding parenting and violence into consideration.
- Individual advocates who are working with survivors who want to have these discussions with their children may use these results as a guide for helping their clients select services they need to support their parenting.
- The limitations acknowledged by the authors regarding the generalizability of these findings must be kept in mind. Programs hoping to offer services targeted toward parents should tailor them with an understanding of their particular population's needs, goals, and challenges.

Practitioner Perspective - Matthew Swoveland, Manager of Youth and Men's Programs at The Second Step, Newton, MA

- In the study, a solid relationship is seen by participants as a stepping stone to communication with children about IPV and its dangers. Some participants emphasize the transformative value of that relationship in itself, but express the challenges of moving beyond that to communicate discrete points about IPV. With increased implementation of trauma-informed practice in education and better understandings of social neurological development in youth survivors of trauma, it would be interesting to see how we can help moth-

ers to build relationships with their children such that the practice of the relationship itself begins the restorative and educational process, even before (or regardless of whether) any mention of IPV is made.

- The interview questions used in the study all ask about strategies used to “address” or “talk about” IPV. I wonder if we might be missing some important practical and day-to-day strategies that mothers use to normalize and set aright the world for their kids, without ever necessarily addressing or talking about DV per se. Framing questions in this way favors the act of talking about IPV, and might miss equally powerful interventions that don’t rely on talking. It also assumes a level of ability and readiness to talk about IPV that we perhaps should not expect from many mothers who might nonetheless wish to convey not just safety, but the importance of trust, respect, and healthy love to their children. Mention is made of a few mothers who expressed similar reservations, although they were not in the majority. One of the reasons mothers wish to convey to their children that the IPV they experienced wasn’t OK and wasn’t normal is that they themselves have had trouble understanding this, and sometimes still do (one mother expressed that communicating about IPV would be hypocritical). This fact can be as much a needful thing to communicate as it is a hurdle to actually communicating it. In other words, the same factors that create a compelling need among mothers to talk about IPV to their children also make it especially hard for them to do so - the need to answer their children’s questions, feelings of guilt, feeling the need to apologize for exposing their children to violence, et cetera.
- Many survivors stressed the importance of sharing advice. This represented their empowerment, and the strength that comes from having survived adversity and escaped the cycle of self-blame. In this way, it is less about role-modeling (as in the role of a mother, or the role of one in a healthy relationship) than it is about character modeling (resiliency, self-sufficiency, and the strength to recover through non-violence). This can be, in my experience, a profoundly impactful example for youth survivors. As one mother said, “I could show you better [than] I could tell you...” This reflects an observation made above, that the relationship itself can be so much more than a vehicle for communicating content.
- Lastly, when considering education and prevention strategies among youth survivors, a very important distinction is made between (a) increasing knowledge, and (b) changing behaviors. We know that many interventions can increase knowledge, but, in the case of one of the studies mentioned, only half of those interventions produced behavior change. As we consider further integration of effective responses to IPV and prevention strategies for youth survivors, it is important that we dig deeper into these interventions and ask what we are missing, and how we can best ensure progress from awareness and education to actual behavior change.