Young adults' experiences of domestic violence during childhood

by

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ABSTRACT

Young adults' experiences of domestic violence during childhood

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DEGREE: **MSW (Play Therapy)**

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Domestic violence is a known social problem around the world. In South Africa, there is an extremely high prevalence of domestic violence and the country has the highest incidence of intimate partner violence, a form of domestic violence, in the world. Intimate partner violence refers to domestic violence between partners of spouses. Children who are exposed to domestic violence are often the unseen victims thereof. Although their exposure to domestic violence have a negative influence on their behavioural, emotional, cognitive and social functioning, they are not necessarily seen as victims of domestic violence if they were not direct victims of the violent incidents. The focus of this study was on young adults who were exposed to intimate partner violence in their childhood homes.

The goal of the study was thus to explore the experiences of young adults regarding their exposure to domestic violence during childhood. A qualitative research approach was utilised in order to explore the personal experiences of the participants in the study. A phenomenological research design guided the study, as the researcher aimed to gain insight into the experiences of the participants by letting them descriptively elaborate on their experiences. Following a pilot study, data was collected by means of unstructured one-to-one interviews. Purposive sampling was used to identify participants that complied with certain sampling criteria. Because of the sensitive nature of the topic, snowball sampling was also utilised to gain access to participants. The sample of the study consisted of ten participants, one male and nine females.

The findings of the study confirmed the harmful effects of exposure to intimate partner violence, even though the participants were not direct victims of the violent incidents. The participants experienced the negative consequences of exposure to domestic violence in various areas of their life, including on their emotional well-being, roles

within their childhood homes, academic performance and peer group relationships. The negative effects were not limited to their childhood years, but also affected their psychosocial functioning as young adults. In some cases, domestic violence were perpetuated into the participants' adult family situations. As children, the participants tended not to talk to anyone about their experiences, which can contribute to children being the hidden victims of domestic violence.

The findings of the study suggest that exposure to intimate partner violence, as a form of domestic violence, have many harmful effects on children. It is highlighted that even indirect exposure of children to domestic violence have significant negative consequences for them. These consequences can be long-term and can contribute to domestic violence being an intergenerational phenomenon.

Children who are exposed to domestic violence cannot be overlooked and demand attention and support from professional persons such as social workers, psychologists, teachers, school principals, the South African Police Service, the Justice System as well as the government services of South Africa. It is recommended that prevention and early intervention strategies are put into place, for example educational and awareness campaigns and early identification of children who are exposed to domestic violence. Further, therapeutic services should be offered to children to help them deal with the harmful consequences of their exposure to domestic violence. It is also recommended that perpetrators of domestic violence be removed from the home, rather than re-victimising children who are exposed to domestic violence by removing them from the family home.

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CHAPTER 1
GENERAL INTRODUCTION TO THE STUDY

1.1 INTRODUCTION

Domestic violence is a global concern that affects individuals from different races, cultures, socio-economic strata and ages (Singh, 2005:36). Kenney (2012:10) confirms that domestic violence affects people from all cultures, age groups as well as from different educational and economic backgrounds. It is both a national and world crisis and "has appeared at alarming thresholds throughout the world" (Pandey, 2008:29).

In the South African society violence has unfortunately become a norm, despite efforts to put social crime prevention programmes in place (Terrill, 2013:309). Domestic violence is a crime that is underestimated with regards to its high prevalence, which Terril (2013) ascribes to the fact that South African crime statistics are not accurate, and that domestic violence is one of the most underreported crimes in the country. The mentioned author further states that underreporting is a problem that is not unique to South Africa.

Large numbers of children grow up in extremely violent environments, including the home or family milieu (Hutchison, 2003:186). The family is generally the first institution a child interacts with (Meyer & Moore, 2003:305) and developmental psychologists emphasise the role that a warm, loving and stable home environment plays in the healthy development of children (Thompson & Henderson, 2007:6). However, children who grow up with domestic violence in the home are directly and indirectly exposed to circumstances that could affect them negatively in the present and future, in several areas of their lives (Allen, 2013:120-122). Even though children are not necessarily direct targets of a domestic violence incident, they are still victims as they may experience negative effects due to their exposure to the violence in the home (Berns, 2004:23). Children are exposed to domestic violence in different ways that may cause them to suffer in the short and long term, even though they may be the passive victims (Choudhuri, 2007:146). The latter author describes the different ways in which children could be exposed to domestic violence, including observing the violence occurring,

hearing the abusive episodes, becoming involved in the violent incidents, as well as experiencing the aftermath of the violence.

Children are often the hidden victims of domestic violence as they are not necessarily directly assaulted, but exposed in other ways, such as witnessing parental conflict (McCue, 2008:22). In children, the effects of exposure to domestic violence manifest in emotional, behavioural, cognitive and social problems (Fisher & Lerner, 2005:370; Maree, 2003:63; Singh, 2005:29). These effects can be short-term or long-term and can last into adult life (Allen, 2013:2-4; Van der Bosse & McGinn, 2009:57).

However, debates on whether domestic violence negatively affects children, still exist. Some authors are of the opinion that children are not necessarily affected by the exposure to domestic violence (Seifert, 2009:38; Stein, 2004:301), while others point to the mostly negative effects of exposure to domestic violence on the child. Domestic violence threatens a child's attachment with his caregiver, challenges his trust in the parent as a reliable protector from harm, and negatively affects the family's relationships (Oppenheim & Goldsmith, 2007:166). In homes where domestic violence is a reality, the parents tend to be less emotionally available to their children (Jenny, 2011:508). Exposure to domestic violence can further have negative emotional effects on children, and children exposed to domestic tend to perform poorly at school, act aggressively, become delinquent and have poor social skills (Pandey, 2008:82).

Bandura's theory of social learning focuses on the fact that children attend to, remember and may imitate the behaviours of others (Schaffer, 2009:46). Siegel (2009:17) asserts that observational learning or modelling is a "cornerstone of social learning theory." Therefore, being exposed to domestic violence may have a significant impact on children's behaviour. Children learn from what they see and replicate the behaviours of their families of origin when they themselves become spouses or partners; therefore children exposed to domestic violence are at risk of repeating the violent behaviour patterns in their adult years (Seifert, 2009:38). The repetition of violent behaviours that children observe in their childhood homes can contribute to domestic violence being regarded as an intergenerational phenomenon (Wood & Sommers, 2011:232).

The study was concerned with a specific form of domestic violence, namely intimate partner violence.[1] Intimate partner violence refers to domestic violence between partners or spouses, which has an effect on the partners as well as on the children who are directly or indirectly exposed to violent incidents (Naude, 2006:4). Intimate partners are described as partners who are or were married, are or were in a romantic or cohabiting relationship, and intimate partner violence is seen as a progressive process where the perpetrator attempts to control his or her partner (Kennedy, 2007:7). It is asserted that South Africa has the highest rate of intimate partner violence in the world (De la Harpe & Boonzaaier, 2011:147; Gass, Stein, Williams & Seedat, 2010:582).

Despite the high prevalence of domestic violence in South Africa, research on children's experiences of exposure to domestic violence is limited (Goddard & Bedi, 2009:16; Idemudia & Makhubela, 2011:3343). The researcher intended to explore the experiences of children related to their exposure to domestic violence, specifically intimate partner violence. Due to the sensitive and unpredictable nature of family life in homes where domestic violence occurs (Van der Bosse & McGinn, 2009:55), the researcher involved young adults who were exposed to domestic violence during childhood instead of children who still lived in homes where domestic violence was present. Including young adults as research subjects allowed them physical and emotional distance from the domestic violence situation and further offered the researcher an opportunity to explore the possible long-term effects of their exposure to domestic violence in their adult life.

A number of key concepts are relevant to the study, namely young adults or early adulthood, domestic violence, intimate partner violence, childhood and exposure to intimate partner violence.

Early adulthood is the life stage between the ages of 20 and 40 years. In this stage individuals' lives revolve around intimate relationships, career choices and

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[1] Although the study focused on intimate partner violence as a form of domestic violence, the terms "domestic violence" and "intimate partner violence" will be used interchangeably.

establishing a family (Rosdahl & Kowalski, 2008:114). A young adult in the present study refers to individuals in early adulthood between the ages of 20 to 35 years.

The Domestic Violence Act 116 of 1998 provides a comprehensive definition of domestic violence and defines domestic violence as follows:

> "physical abuse; sexual abuse; emotional; verbal and psychological abuse; economic abuse; intimidation; harassment; stalking; damage to property; entry into the complainant's residence without consent, where the parties do not share the same residence; or any other controlling or abusive behaviour towards a complainant, where such conduct harms, or may cause imminent harm to, the safety, health or wellbeing of the complainant ..."

Intimate partner violence is a form of domestic violence that involves physical, sexual, psychological or emotional harm to a person, caused by a current or former partner or spouse within a hetero-sexual or same sex relationship (Naudé, 2006:4). In the study the term intimate partners refers to the parents or care-givers of the child (participant).

Childhood is regarded as the life stage between the period of birth and 18 years (Berk, 2006:5-6). Within the context of the study, exposure to intimate partner violence refers to being within sight or sound of the violence (Edleson et al., 2007 in Van der Bosse & McGinn, 2009:50).

1.2   THEORETICAL FRAMEWORK

The ecological systems theory views the child as "developing within a complex system of relationships affected by multiple levels of the surrounding environment" (Berk, 2006:26). Bronfenbrenner's (1979) ecological perspective considers the many spheres of influence in risk and resilience across the life span and views the settings of the family, the peer group, school, work, and the wider social environment as embedded contexts in which social competence is developed. The ecological perspective supports the view that a child cannot be seen in isolation but should be seen as part of a larger social system. Thus, the child should not be discussed without describing the context in which he or she develops and interacts, such as the family and community (Gargiulo & Kilgo, 2004:48; Walsh, 2006:13).

The ecological perspective describes four systems concerning the environment in which the individual functions, namely the microsystem, mesosystem, exosystem and the macrosystem (Shaffer & Kipp, 2010:63-64). The microsystem refers to the immediate environment of the person and the activities and interactions that occur within that environment, and for most young children the microsystem is limited to the immediate family. The mesosystem is regarded as the connections or interrelationship among microsystems such as home, school, peer group and the neighbourhood. The exosystem consists of the different contexts that the child is not in direct contact with, but that will still influence the child's development, for example the parent's work environment. As an example, the relationship between the parent and child might be influenced by extended work hours of the parent. The example also highlights the interrelatedness of the different systems. The macrosystem refers to the cultural or social context in which microsystem, mesosystem and exosystem are embedded, for example the policies or cultural norms related to violence against women and children, while the chronosystem concerns changes that happen over time (Berk, 2006:29).

The natural environment is regarded as a major source of influence on the developing child and the family is the immediate setting in which the child develops (Meyer & Moore, 2003:305; Shaffer & Kipp, 2010:63). The home as microsystem thus plays a crucial role in the life of the child. For optimal well-being, the home environment should be one in which children can feel safe and secure (Thompson & Henderson, 2007:6). Domestic violence has a severe impact on the family as microsystem. As intimate partner violence affects the family within the immediate setting or microsystem in which the child develops, ecological systems theory postulates that it may also affect the child's functioning within other systems such as the school or social environment. This wider influence on other systems is evident in the harmful emotional, social, behavioural and cognitive effects of domestic violence that can also affect the child's functioning in school and within the peer group. The intergenerational nature of domestic violence can be situated in the chronosystem, which indicates how systems can change or be affected over time. The ecological systems theory can thus be regarded as relevant to the study.

1.3   RATIONALE AND PROBLEM STATEMENT

South Africa has the highest rate of intimate partner violence in the world (De la Harpe & Boonzaaier, 2011:147; Gass et al., 2010:582). Intimate partner violence, as a form of domestic violence, is regarded as a social and public health problem as it has long-lasting and devastating effects on the health and wellbeing of the victim, but also on the children who are exposed to the acts of violence in the home (Idemudia & Makhubela, 2011:3445; Peltzer & Pengpid, 2013:14; Van der Bosse & McGinn, 2009:57). Intimate partner violence and its negative consequences were also noticed by the researcher in different non-government and non-profit organisations where she was involved, either as a student social worker or as a social worker.

Information from practice indicated that there were limited social work services to children exposed to domestic violence. During her practical work at NICRO (National Institute for Crime Prevention and Reintegration of Offenders) in her final year of her Social Work studies during 2008, the researcher noted that services to children who were exposed to domestic violence were not being addressed by the Perpetrator-Intimate-Partner-Violence programme utilised by the organisation. The need for services to children being exposed to domestic violence was confirmed at that time by a report by Lesizwe (2005) and again in 2010 by Mokwena (2010) from the NICRO Pretoria Office. In the researcher's position as social worker at Child Welfare Tshwane at the Eersterust office, the need for services to children living with domestic violence in the home was again confirmed due to the presence of intimate partner violence in the community being evidenced in the case load of the organisation (Pretorius, 2013). Already in 2001, domestic violence has been identified as a significant problem in the Eersterust community (Van der Hoven, 2001:17). The intergenerational transmission of domestic violence (Maree, 2003:58) was also noticeable in the research by Van der Hoven (2001), as it was found that young girls tended to accept the aggressive and abusive behaviour of their boyfriends, while these girls mostly came from families where they often witnessed violent acts by the father against the mother.

There further appeared to be a lack of research that focuses on the experiences of child victims of domestic violence (Goddard & Bedi, 2009:16; Idemudia & Makhubela, 2011:3343). Through a literature search including library and electronic searches at

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the University of Pretoria, the researcher discovered that there were limited South African studies focusing on children that were exposed to domestic violence, as evident from a search through the platforms of SABINET and the National Health Research Database. Based on a search using the keywords "domestic violence" there appeared to be sufficient studies in the field, specifically the impact of domestic violence on women. However, the keywords "intimate partner violence" showed that there were fewer studies available on this specific topic. There seemed to be a gap in research done specifically on the experiences of children with regards to exposure to domestic violence and intimate partner violence, as there were limited studies found that focused specifically on this aspect.

International literature that were found, showed that there were programmes that address domestic violence. A programme in Australia, for example, use puppets in order to address the issue of domestic violence by supporting the physical and emotional state of children as well as promoting alternative parenting practices (Allen, 2013:132-133). South African welfare organisations such as NICRO, CMR (Christelike Maatskaplike Raad), SAVF (Suid-Afrikaanse Vrouefederasie) as well as Child Welfare Tshwane offer help and services to the perpetrators and victims of domestic violence, but seemingly not to the children who are exposed to it (NICRO 2013, sv 'programme-based Interventions'; Christelike Maatskaplike Raad 2013, sv 'Child Protection'; SAVF 2013 sv 'Services'; Pretorius, 2013).

It is clear that domestic violence and specifically intimate partner violence remains a significant social problem in South Africa (De la Harpe & Boonzaaier, 2011:147; Gass et al., 2010:582). Early intervention could have the advantage of reducing the worsening path of intimate partner violence by providing interventions before individuals commit acts of violence towards their intimate partners (Jackson, 2007:394).

Due to the general lack of research on children's experiences of exposure to domestic violence, the researcher regarded a study to determine children's experiences of exposure to domestic violence as a relevant starting point for considering early intervention and other social work services. Therefore, the researcher aimed to interview young adults who were exposed to domestic violence during childhood in

order to collect information regarding their experience of exposure to domestic violence and the coping strategies they used as children. As domestic violence is seen as an intergenerational problem, the researcher also wished to gain information on how their exposure to domestic violence during childhood influenced the participants' functioning as young adults. The knowledge gained from the study could lead to a better understanding of the problem of domestic violence and could be utilised to consider appropriate service delivery, such as preventive strategies or therapeutic intervention for children who have been exposed to domestic violence. Appropriate services could also focus on the prevention of the transmission of domestic violence into adulthood, and thus to next generations.

The following research question was formulated to guide the study: What are young adults' experiences regarding exposure to domestic violence during their childhood?

1.4 GOAL AND OBJECTIVES OF THE RESEARCH STUDY

The goal of the study was to explore the experiences of young adults regarding their exposure to domestic violence during childhood.

In order to achieve the above research goal, the following objectives were formulated for the study:

- To describe theoretically the phenomenon of domestic violence, with a specific focus on intimate partner violence and its effect on children exposed to domestic violence.
- To explore and describe the experiences of young adults regarding exposure to intimate partner violence as a form of domestic violence during their childhood.
- To explore and describe how young adults attempted to cope with domestic violence as children.
- To explore and describe how domestic violence impacts on the current functioning of the young adult participants.
- To explore and describe participants' suggestions regarding social work services to children exposed to domestic violence.

- To reach conclusions and make recommendations based on the findings of the study regarding service delivery to children who are exposed to domestic violence.

1.5   RESEARCH DESIGN AND METHODOLOGY

The research approach which the study employed was the qualitative approach, as the study relied on qualitative and descriptive methods of data collection (Grinnell & Unrau, 2011:20). The researcher wished to explore and describe the experiences of young adults regarding their exposure to domestic violence during childhood. A qualitative study was the most appropriate for gaining in-depth information from young adults who have been exposed in domestic violence during their childhood. The research study had an explorative purpose as the researcher intended to gather basic data in order to understand a phenomenon (Fouché & De Vos, 2011:95; Grinnell & Unrau, 2011:21), which in the case of this study was young adults experiences regarding the phenomenon of domestic violence. Applied research was relevant to the study as the knowledge gained could make a professional contribution to addressing the problem in practice (Punch, 2005:41) in terms of social work service delivery to children who are exposed to domestic violence.

Phenomenology was an applicable research design for the study. This design allowed the researcher to gain insight into young adults' lived experiences of domestic violence during their childhood. The participants could elaborate descriptively on their experiences and so provided rich information about their experiences related to their exposure to domestic violence (Wertz, Charmaz, McMullen, Josselson, Anderson & McSpadden, 2011:126).

Two sampling methods were employed. The researcher firstly utilised purposive sampling to purposefully select participants according to specific criteria. Therefore, participants were recruited that would be able to provide relevant information for understanding the research problem (Strydom & Delport, 2011:392). Participants were identified with the help of the intake and statutory social workers and social auxiliary workers at the organisation where the study was conducted. As domestic violence is an extremely sensitive and hidden problem, the researcher also made use of snowball

sampling, where the researcher asked participants whom could be located to bring the researcher into contact with another member of the population whom they happened to know (Babbie, 2013:129; Strydom & Delport, 2011:393).

Data was collected by means of in-depth one-to-one interviews. These interviews were suitable to collect in-depth information on the life-world of the participants (Ryan, Coughlan & Cronin, 2009:309; Welman, Kruger & Mitchell, 2012:198). The researcher prepared a few open-ended questions that guided the conversation, probed responses for more detail and clarity, and asked follow-up questions to further explore answers to the main questions (Greeff, 2011:349; Welman et al, 2012:198). Interviews were audio recorded with the permission of the participants in order to fully capture the interviews (Willig, 2013:30). The researcher further made field notes (Miczo, 2003:469-490). A pilot study was conducted in order to evaluate whether the main questions were understandable and would elicit sufficient information during the interviews.

The voice recordings of the interviews were transcribed for the purpose of data analysis. Data analysis was conducted according to the data analysis process described by Tesch (1990) in Creswell (2003:192). Data analysis involved searching the collected data for general relationships and underlying themes (Marshall & Rossman, 2006:154). In the process the researcher also followed guidelines to ensure the trustworthiness of the research findings (Lietz, Langer & Furman, 2006:447-451).

The researcher took all ethical aspects into consideration while conducting the research study. The ethical considerations are described in more detail in Chapter 3.

1.6   LIMITATIONS OF THE STUDY

The researcher identified a number of limitations of the study. These limitations are as follows:

- The research sample consisted of 10 participants. Due to the sample size, the findings of the study cannot be generalised to other contexts.
- Out of the ten participants in this study, there was only one male participant. Although the experiences described by the male participant were mostly similar

to those described by the female participants, the findings cannot be regarded as representing the experiences of other males who were exposed to domestic violence during their childhood.

- The study was conducted in a Coloured community, and therefore data was collected on the views of individuals who lived in this community. The study was therefore limited to only one racial group and the findings cannot be generalised to other racial groups.

- Because of the sensitive topic, the researcher experienced difficulty in finding research participants. Although many more names of potential participants were provided, most of these persons declined the invitation to participate in the research study.

1.7   CHAPTER OUTLINE

The research report is presented in the following chapters:

Chapter 1: General introduction to the research study

Chapter 1 contains the introduction to the study. The researcher described the context of the study, the theoretical framework, the problem statement and rationale for the study, the goal and objectives of the study, and a brief summary of the research design and methodology. The limitations of the study was also indicated.

Chapter 2: Children's exposure to domestic violence

Chapter 2 includes the literature review for the study. The focus of the chapter is on domestic violence, specifically intimate partner violence, and the effect it could have on children being exposed to it.

Chapter 3: Research methodology and empirical findings

In Chapter 3 the research methodology and the ethical considerations for the study are described. Further, the research findings are presented.

Chapter 4: Conclusions and recommendations

Chapter 4 includes a summary of the key findings of the study, as well as the conclusions and recommendations based on the findings of the study.

CHAPTER 2

CHILDREN'S EXPOSURE TO DOMESTIC VIOLENCE

2.1   INTRODUCTION

Domestic violence is regarded as "a common reality in our society. It occurs in all social classes, ethnic groups, cultures and religions" (Domestic Violence Roundtable, 2008). The issue of domestic violence remains challenging within social work practice and on occasions decisions with regards to child protection are made without considering the possibility of domestic violence as part of child abuse (Allen, 2013:1).

Despite the high prevalence of domestic violence in South Africa, there appears to be limited research on the experiences of children as victims of domestic violence (Goddard & Bedi, 2009:16; Idemudia & Makhubela, 2011:3343). Over the years, more attention has been given to the physical and emotional consequences for women who have been victims of domestic violence; however, little attention has been given to the children as the unseen victims of domestic violence (Summers, 2006:8). Section 7(1)(m) of the Children's Act, No 38 of 2005, stipulates that it is not in the best interests of the child to be exposed to family violence. Therefore, it can be concluded that attention should be given to preventing children from suffering from the consequences of violence occurring in their home environment. The focus of this chapter is on literature related to domestic violence, with specific reference intimate partner violence and the effects thereof on children.

2.2   DEFINING DOMESTIC VIOLENCE

Domestic violence is defined as follows in the Domestic Violence Act 116 of 1998:

> … physical abuse; sexual abuse; emotional, verbal and psychological abuse; economic abuse; intimidation; harassment; stalking; damage to property; entry into the complainant's residence without consent, where the parties do not share the same residence; or any other controlling or abusive behaviour towards a complainant, where such conduct harms, or may cause imminent harm to, the safety, health or wellbeing of the complainant.

The above definition of domestic violence is mirrored by Hornor (2005:206), who describes domestic violence as follows:

> … not any single behaviour but rather a pattern of physical, sexual, and/or psychological behaviours perpetrated by a current or former intimate partner, and how these assaultive and coercive behaviours are designed to manipulate, control, and dominate the partner to achieve compliance and dependence.

Acts of domestic violence are intended to systematically intimidate, humiliate or frighten victims in an effort to retain power and control over them (Cousins, 2014:541).

Different terms are used interchangeably to describe domestic violence, including wife abuse, woman battering and spousal abuse (Summers, 2006:14). However, the latter author states that domestic violence is not always perpetrated by males. The author explains that the use of the term "domestic" in domestic violence, means "in the household," which can involve violence between parents, parent-child violence as well as sibling violence, but excludes violence between individuals who are not residing in the same household.

In this study, the researcher focused on intimate partner violence as a form of domestic violence (which is described in the next section, point 2.3). As intimate partner violence involves an intimate relationship between two individuals, it is important to take into account the definition of a domestic relationship as defined by the Domestic Violence Act 116 of 1998. In terms of the Domestic Violence Act 116 of 1998, a domestic relationship refers to a relationship between a complainant and a respondent in any of the following ways:

> (a)   they are or were married to each other, including marriage according to any law, custom or religion;
>
> (b)   they (whether they are of the same or of the opposite sex) live or lived together in a relationship in the nature of marriage, although they are not, or were not, married to each other, or are not able to be married to each other;
>
> (c)   they are the parents of a child or are persons who have or had parental responsibility for that child (whether or not at the same time);
>
> (d)   they are family members related by consanguinity, affinity or adoption;

(e)   they are or were in an engagement, dating or customary relationship including an actual or perceived romantic, intimate or sexual relationship of any duration; or they share or recently shared the same residence.

As seen from the above definitions of domestic violence and of a domestic relationship, domestic violence can include all parties within a household. This study focused on violence between intimate partners and the effects thereof on their children. The focus on the experiences of children is specifically relevant, as parents are children's first contact with the world (Meyer & Moore, 2003:305). Different aspects related to intimate partner violence as a form of domestic violence are discussed in the following section.

2.3   INTIMATE PARTNER VIOLENCE AS A FORM OF DOMESTIC VIOLENCE

Intimate partner violence is a form of domestic violence and is described as the physical, sexual, psychological or the emotional harm that is caused by a current or a former partner or spouse, occurring between heterosexual or same-sex couples, and not necessarily involving sexual intimacy (Naudé, 2006:4). Many researchers prefer to use the term "intimate partner violence" to describe this form of domestic violence, as it focuses specifically on violence between individuals who are or were marital partners including separated marital partners, current and former cohabiters, as well as current or former sex-partners (Summers, 2006:14). The term "intimate partner violence" is therefore used to specifically place the focus on the abusive behaviour between partners in an intimate relationship and to highlight the nature of the relationship in which the violence occurs (Goddard & Bedi, 2009:6).

Intimate partner violence has been linked to an increased risk of injury and death, as well as to a greater likelihood of poor health over the short and long-term, and of harmful health behaviours (Gass et al., 2010:582). Women with violent partners are at an increased risk of HIV infection and of behaviours that can compromise their health, such as excessive alcohol consumption.

There are inherent differences in the quality of relationships of domestic partners in violent relationships, compared to that of domestic partners who are not in violent

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relationships. Sgarzi and McDevitt (2003:123,147-148) refer to the Domestic Violence Intervention Project of Duluth, Minnesota, in which these differences in the quality of relationships are described. The relationship between individuals who are not in a violent relationship, is described as an "equality wheel" in which a positive intimate partner relationship includes negotiation and fairness characterised by a willingness to compromise; non-threatening behaviour by talking and acting to make one's partner feel safe; and respect by being understanding and non-judgemental. It further includes trust and support by respecting one another's right to own feelings, friends and opinions; honesty and accountability by communicating openly and truthfully; and responsible parenting by sharing parental responsibilities and being a positive role model for the children. The Project also points out that a positive and healthy relationship involves shared responsibility, which includes making family decisions together, and an economic partnership, which includes collaborative financial decisions in which both partners benefit from the financial arrangements.

Contrary to the above, the Domestic Violence Intervention Project described by Sgarzi and McDevitt (2003:123,147-148) refers to a violent intimate partner relationship as a "power and control wheel" that involves coercion and threats. The latter includes threatening to hurt or leave the partner or threatening to commit suicide, forcing the victim to drop charges against the perpetrator, and forcing the victim to participate in illegal actions. The perpetrator utilises intimidation and creates fear by means of actions or gestures such as destroying the victim's property and openly displaying weapons. The violent relationship further involves emotional abuse by insulting the victims, making them feel bad about themselves, playing "mind games" and making victims feel guilty. Perpetrators in violent intimate relationships also isolate the victims by controlling what the victims do and where they go. To this effect, the perpetrator tends to make use of minimizing, blaming by stating that the victim caused the perpetrator's actions, and denying that the abuse happened. The perpetrator also attempts to control the victim by threatening to take the children away or using visitation to harass the victim. Male perpetrators may use male privilege by defining men's and women's roles and treating the victim like a servant. Victims could also be abused economically by preventing them from getting or keeping a job, which necessitates the victim to ask for money, and not allowing the victim to access family income.

Leone, Johnson, Cohan and Lloyd (2004:473) distinguish between two types of intimate partner violence, namely situational couple violence versus intimate terrorism. As described by these authors, situational couple violence does not exist within a general pattern of controlling behaviour and affects the victim psychologically. On the other hand, intimate terrorism consist of partners that attempt to exert control over their partner by using a wide range of power and control tactics which include physical violence.

Victims are often not aware of the fact that they are in a violent relationship, or may be in denial of this fact, and it is therefore important to educate victims who find themselves in a violent relationship (Sgarzi & McDevitt, 2003:147-148). These authors recommend that victims who have been abused by their partners should be assisted to become aware of the comparison between individuals who are not in a violent relationship, and individuals who are in a violent relationship, with the guidance of a specialist from the criminal justice system. Intimate partner violence, however, does not only affect the intimate partners, but also affects children who are being directly or indirectly exposed to violent incidents.

It is recognised that South Africa has the highest incidence of intimate partner violence in the world (De la Harpe & Boonzaaier, 2011:147; Gass et al., 2010:582). Children in these households grow up in extremely violent conditions (Hutchison, 2003:186). However, these children often remain the hidden victims of intimate partner violence (McCue, 2008:22).

2.4   CHILDREN AS VICTIMS OF DOMESTIC VIOLENCE

The harmful effects of domestic violence on children often go unrecognised. Such oversight could be related to the wrongful thinking that children are only harmed by domestic violence when they are direct victims of abuse. Singh (2005:29) states that children who are not personally assaulted but are witnesses of domestic violence between adults in their home, can be considered as the hidden victims of domestic violence. The mentioned author is of the opinion that neither society, nor law, nor social development agencies have placed the situation of these children as a priority and as a situation that requires immediate attention. Observing physical or verbal conflict

between their parents jeopardises children's perception of the family as stable and secure, and results in children feeling anxious, frightened and sad (Kail & Cavanaugh, 2007:271). Initially, research on family violence was predominantly focused on female victims of male perpetrators, with the result that the children became "the silent, hidden, forgotten, and unintended victims" (Edelson, 1999 as cited in McClennen, 2010:207).

Children who witness violence in their homes often remain silent about it. Remaining silent about domestic violence may be due to the fear children experience because of the violence in their homes, or because of being threatened not to talk about these incidents. For some children, remaining silent about the violence in their homes is therefore not a conscious decision. Idemudia and Makhubela (2011:3445) express their concern over the fact that, as intimate partner violence often takes place in the presence of children, living with the secret of the domestic violence in their homes may add to children's experience of severe trauma. When children withdraw themselves into their own world because of their exposure to domestic violence, they may be unable to develop an accurate perception or understanding of the world (Seifert, 2007:38).

The fact that children remain silent about their exposure to domestic violence does not mean that they are not negatively affected by the violence. Due to children's exposure to domestic violence, their level of arousal can be chronically high and their self-soothing skills weak, which can result in an emotional over-reaction to problems and stressful situations (Seifert, 2007:38). The complex situation that these children find themselves in, are aptly described as follows: "These children are the victims of violence, even though their scars are invisible" (Buzawa, Hotaling & Klein, 1998:43 as cited in Payne & Gainey, 2010:151).

Children who are not personally assaulted during incidents of domestic violence, are often overlooked as victims of the violence (Singh, 2005:29). It is therefore important to be aware of the different ways in which children are exposed to domestic violence; all of which can affect a child's sense of safety and security.

2.4.1 Ways in which children are exposed to domestic violence

Children can be exposed to domestic violence in different ways. Their exposure to domestic violence can negatively affect them, even when they are not directly involved in the violent incident. Baker, Jaffe, Ashbourne and Carter (2002:7) mention that when a child sees, hears or later learns that a parent was harmed by a partner, it threatens a child's sense of stability and security which he or she should receive from the parent. The different ways in which children can be exposed to domestic violence are described according to four categories (Child Welfare Information Gateway, 2009), which will be subsequently described.

2.4.1.1 Children who hear the violent events

The first category that describes children's exposure to domestic violence, is where the child hears the violent events taking place. Hearing the violent events include hearing the sounds when one parent or partner pushes or beats the other partner, or hearing the victim scream and cry out due to the suffering caused by the violence. It also involves hearing parents or partners swearing at and belittling one another.

It may also happen that a child hears about the violence after it has taken place. Hamby, Finkelhor, Turner and Ormrod (2011:3) point out that hearing about the violent incidents afterwards can still be traumatising for the child, as detailed information might be shared about the violence. These authors add that, although children who hear the violence in their home might be in another room, it still implies that the child is near the violence and might potentially be in danger. The information that these children provide to others about the violent incidents might be less accurate as they have not been an eye witness and can only share what they have heard.

2.4.1.2 Children who observe the violent events

The second category entails that the child is more directly involved as an eye witness to the violent incident; in other words observing one partner beating, pushing, stabbing or shooting the other partner. The child could also witness the victim being in pain, which might make the child feel helpless due to not being able to help the victim.

When a child observes the violent incidents in the home, it implies the child's presence at the incident and also puts the child in danger (Hamby et al., 2011:3). This type of exposure to domestic violence is therefore least subject to misinterpretation. A potential consequence of this type of exposure is that children learn from what they see with regards to violence in their homes, and frequently replicate these behaviours in their own families of origin when they themselves become spouses or parents (Seifert, 2007:38).

2.4.1.3 Children who intervene in the violent events

The third category of children's exposure to domestic violence involves the child's direct involvement in the violent events, for example the child intervening in or being part of a violent event (e.g. being a shield against abusive actions). Here the child might want to protect the parent victim from being abused by attempting to push the abuser away or physically standing between the abuser and the victim.

Children are sometimes forced to intervene in or become part of domestic violence events (Simons, 2010:7). It may happen that children are forced by the perpetrator to ask questions to the adult victim in order to keep the perpetrator informed about the victim's whereabouts. Further, children may be forced to contribute to the abuse towards the victim and may also be required to convince the victim to remain in the violent relationship.

In some situations, children are forced to become indirectly involved in a violent relationship (Baker et al., 2002:7). The latter authors provide examples such as where the perpetrator would claim that the children's negative behaviour caused the assaults towards the victim, or that the perpetrator, in the presence of the victimised parent, would threaten children with violent acts towards them as well as towards their pets. Other examples are where the perpetrator holds the child hostage or abducts the child in an attempt to punish or gain obedience from the adult victim, or when the perpetrator talks negatively about the victim in the presence of the child. The latter situation can cause confusion within the child.

2.4.1.4 Children who experience the aftermath of the violent events

The fourth category of children's exposure to domestic violence entails experiences related to the aftermath of a violent event, for example suffering from post-traumatic-stress disorder (PTSD) as a result of the exposure to incidents of domestic violence. Baker et al. (2002:7) mention that children exposed to intimate partner violence may struggle with emotional and behavioural challenges, experience sleep disturbances and live in fear of possible danger. Children who are exposed to domestic violence tend to afterwards demonstrate aggressive behaviour, have a short attention span, are easily distracted and may also become hyper vigilant (Ahmed, 2009:65). These effects can be long-lasting and being exposed to domestic violence can have a negative impact on the children in future.

Seifert (2007:38) further points out that if children are exposed to a pattern of violence in their homes, there is a risk that violent patterns can be repeated in the future. It becomes clear that, irrespective of being directly or indirectly exposed, domestic violence has harmful consequences on children.

2.5   THE EFFECTS OF DOMESTIC VIOLENCE ON CHILDREN

Domestic violence can negatively affect the children being exposed to it, as well as parents and the home environment (Allen, 2013:120-122; Humann, 2014:106). While it is recognised that children respond differently to exposure to domestic violence (Barry, Bell, Devereux, Jordan, Lawlor, McCabe, McCann, Mooney, O'Rourke, O'Gorman, Valentyn & Webster, 2012:29; Webb, 2007:75), it seems there still remain debates on whether all children are indeed negatively affected by domestic violence.

There are different views on the effect of domestic violence on the child. Singh (2005:30), for example, describes the case of Nicholson vs Williamson, where an expert witness on behalf of the plaintiff pointed to studies that illustrated that children who have been exposed to severe forms of domestic violence "rarely experience long-term effects from witnessing domestic violence" and that 80 percent or more children coming from homes with abusive backgrounds was found to be "psychologically normal, were self-confident, had positive images of themselves and were emotionally well off." Hutchison (2011:170) supports the abovementioned view by stating that

children who witness domestic violence are not always negatively affected with regards to their long-term development. The latter author points to a study (Smith et al., 1996 in Hutchison, 2011:170) indicating that one third of children who witnessed domestic violence seemed unaffected by it, appeared well adjusted and showed no signs of distress, anxiety or behavioural problems.

Authors ascribe the fact that some children seem not to be significantly affected by exposure to domestic violence, to certain protective factors that could shield them against the harmful consequences of domestic violence. O'Keefe (1994) as cited in Hutchison (2011:170) highlights two factors that could buffer the negative effects of exposure to domestic violence on children. The first factor relates to the extent of domestic violence witnessed by the child; the more violent the incidents witnessed by children, the more likely the children would be to develop problematic behaviour and experience other negative consequences. The second factor has to do with the relationship between the child and the mother, assuming that the mother is the victim in the domestic relationship. This factor implies that if a mother-child relationship remains stable and secure, the likelihood of the child developing problematic behaviour decreases significantly, even if the child witnesses a high number of violent incidents in the home.

Authors describe different factors that will have an influence on a child's reaction to domestic violence. These factors will be discussed in the following section.

2.5.1 Factors influencing the effects of domestic violence on children

Children who are exposed to domestic violence, react differently to this exposure. Authors have identified a number of factors that could influence how a child might react to his or her exposure to domestic violence. Webb (2007:75) points out the following factors which appear to affect children's responses to their exposure to domestic violence, namely:

- a child's proximity to the violence (what the child actually saw or heard),
- a child's temperament,
- a child's achievement in school,
- the severity and chronicity of the violence, and

- the availability of adults who can emotionally protect or sustain the child.

Based on the findings of a study in the United Kingdom on the effects of intimate partner violence on children, Barry et al. (2010) as cited in Allen (2013:122) describe the following factors that could influence the effects that intimate partner violence could have on a child:

- the severity of the violent incidents,
- the frequency and duration of the incidents,
- factors relating to race, culture, age, gender, disability, sexual orientation and socio-economic factors,
- pre-existing health or mental health problems,
- whether the child is being abused,
- whether children blame anyone, including themselves for the violence,
- whether children perceive violence as a way of getting their needs met,
- whether there is inconsistent punishment from the father or mother,
- whether the abusive parent manipulates family relationships,
- support available from parents, relatives, neighbours and friends,
- the quality of the mother's relationship with her child,
- exposure to violence in the media and in the community,
- other stressors at home and at school, and
- the nature of external interventions from agencies or the community. As an example, a sympathetic teacher, while not able to prevent domestic violence, can do much to boost a child's self-esteem.

It should be kept in mind that research indicates a strong correlation between domestic violence and child maltreatment (Faller, 2003:377). The problem of children exposed to domestic violence can therefore not be ignored. It should also be recognised that in cases where children (only) witness incidents of domestic violence within the home, they still experience vicarious trauma. The vicarious trauma that these children experience puts them at risk of developing emotional and behavioural problems, including mental health problems, substance abuse and violence towards others (Fisher & Lerner, 2005:370; Maree, 2003:63; Singh, 2005:29).

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Researchers recognise that there are certain factors influencing a child's response to domestic violence (Webb, 2007:75), as well as protective factors that can help to shield children against the harmful effects of domestic violence (Singh, 2005:30). However, there is agreement that children who witness domestic violence experience various emotional, behavioural and social effects due to the devastating and upsetting events they have to face and deal with (Idemudia & Makhubela, 2011:3446). Adams (2006:334), Ybarra, Wilkens and Lieberman (2007:33) and Sox (2004:68) agree that exposure to domestic violence impacts children in five areas of their functioning, namely impaired biological functioning, delayed behavioural, emotional and cognitive development as well as impaired social adjustment. These effects can be considered as the child's efforts to cope with the situation, and McFarlane, Watson and Hall (2007:76) are of the opinion that "children's emotional and behavioural problems, when associated with domestic violence, can be considered as their efforts to adapt to a maladaptive environment related to the excessive stress experienced by the family associated with the domestic abuse."

The family is generally the first institution a child interacts with (Meyer & Moore, 2003:305) and developmental psychologists emphasise the importance of a warm and stable home environment for the development of children (Thompson & Henderson, 2007:6). In the further discussion of the effects of domestic violence on children, the researcher will thus first focus on the effects of domestic violence on the family and home environment as the context in which children develop. The effects of domestic violence on different aspects of the child's life, will be discussed subsequently.

2.5.2 The effects of domestic violence within the context of the family

Much of the negative effects of domestic violence relates to its impact on the wider context in which children grow up, namely their family and home environment, including parenting capacities and the parent-child bond. The ecological systems theory, which forms the theoretical framework for this study, indicates the microsystem as the activities and interactions in the child's immediate environment (Berk, 2006:26). The family and home is the immediate setting in which the child develops and has a major influence on the development and functioning of the child (Meyer & Moore, 2003:305; Shaffer & Kipp, 2010:63). When reflecting on the effects of domestic

violence on the child, it is thus important to consider the child's immediate systems as this is where the child will formulate a perception of the world.

2.5.2.1 The effects of domestic violence on the family and home

The family is the primary system in which children grow up and are cared for. The Children's Act 38 of 2005 describes care in relation to a child as, amongst others, providing children with "living conditions that are conducive to the child's health, well-being and development [and] safeguarding and promoting the well-being of the child." The Centre for Social Justice (2010:6) emphasises the importance of a stable and healthy family, by stating the following:

> Stable, healthy families are at the heart of strong societies. It is within the family environment that an individual's physical, emotional and psychological development occurs. It is from our family that we learn unconditional love, we understand right from wrong, and we gain empathy, respect and self-regulation. These qualities enable us to engage positively at school, at work and in society in general. The absence of a stable, nurturing family environment has a profoundly damaging impact on the individual, often leading to behaviour which is profoundly damaging to society.

The White Paper for Families in South Africa (Department of Social Development, 2013:6) emphasises that a family should provide family members with a sense of belonging as well as personal and social identity. Families are also supposed to provide family members with meaning and direction in life. With regards to the need for nurturance, support and socialisation within a family, the White Paper points out that families need to provide children and adults with an appropriate environment in terms of their physical, psychological, social and spiritual development, and should instil the social values and norms of society.

Members of a family have a need to feel worthy and feel that they matter. When individuals fail to feel that they matter, especially to their significant others, those persons experience a profound rejection of the self in its entirety (Elliott, 2009:2). The latter author adds that feeling worthless makes an individual feel shameful, as if one has nothing to capture another's attention, is unworthy of human investment by others, or that they have nothing to offer.

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The presence of domestic violence in the home can have a marked influence on the family's role in providing care, safety, and a sense of personal worth and well-being to its members. In the home environment where domestic violence takes place, safety cannot be guaranteed for any members of that family. As an example, Madu, Ndom and Ramashia (2010:2827) refer to a study by Mathews et al. (2004) where it was estimated that in South Africa, every six hours a woman was killed by her intimate partner.

Children experience many negative emotions when exposed to violence in the home where they are supposed to feel safe and secure. A home environment that is filled with violence-related conflicts may lead to psychological distress and anger in children as they do not experience their home as safe (Hayes, Trocmé & Jenney, 2006:204). Domestic violence affects the whole family, including the children, and further results in an unsafe home environment that instils fear and uncertainty in children (Humann, 2014:106). Where the mother is the victim of domestic violence, the situation deprives mothers of their care-giver role to safeguard their children. Women in South Africa are financially more dependent on their partners or spouses, often due to poverty and unemployment, which is seen as a contributing factor to mother's failure to protect their children in situations of domestic violence (Pretorius, 2006:8). Families living with domestic violence may also be confronted with situations where the police needs to intervene in the violent events at family homes (Jackson, 2007:178).

Given the abovementioned situation, it is relevant to take note of the definitions of abuse and of a child in need of care. The Children's Act 35 of 2008 defines abuse as, amongst others, "exposing or subjecting a child to behaviour that may harm the child psychologically or emotionally." Children exposed to circumstances in which the actions of the parent, care-giver or a family member may seriously harm the child's physical, mental or social well-being, may be considered as a child in need of care and protection (Waterhouse & Nagia-Laddy, 2009:2). Children who are found to be in need of care and protection could be placed in alternative care (The Children's Act, Section 156). It is thus clear that children who are exposed to intimate partner violence may be at risk of removal from the parental home and forced into new roles and circumstances to escape the violence and maltreatment, such as having to reside with extended family members (Pretorius & Botha, 2006:245).

2.5.2.2 The effects of domestic violence on parenting capacities

Domestic violence can negatively affect the parent's capacity to care for children. Waterhouse and Nagia-Luddy (2009:3) state that domestic violence often coincides with "other childhood experiences that negatively affect children's emotional and social functioning, such as harsh discipline, lack of emotional support and affection and poor parental supervision." The impact that domestic violence has on young children are thus amplified as they are completely dependent on their carers for all the aspects of their care (Allen, 2013:119). The presence of interrelated negative parenting factors is positively associated with subsequent violent behaviour in children and with the perpetuation of the cycle of violence in families and societies (Waterhouse & Nagia-Luddy, 2009:3).

Parents who are captive in a violent intimate relationship often withdraw from their children as they become preoccupied with their troubled relationship (Ahmed, 2009:62). Parents involved in domestic violence might also separate themselves from their children because they do not want to involve the children in their conflict. As a result of these parental reactions, some children may experience feelings of loneliness and isolation and feel that no one understands them. Domestic violence can therefore affect the quality of care as well as the quantity of time that parents spend in relation to the care of their children (Ahmed, 2009:62).

Children who grow up in a home in which domestic violence occurs, may be aware of the constant fear that the mother, as victim of domestic violence, tends to experience (Van der Bosse & McGinn, 2009:55). The dynamics of domestic violence cause the mother to find it difficult to comfort her children, and consequently undermine children's developmental need for safety and security (Martin, 2002). These reactions are significant, seeing that the home environment should be an environment where children can feel safe and secure (Thompson & Henderson, 2007:6).

Sterne, Poole, Chadwick, Lawler and Dodd (2010:50-51) offer some examples of situations that could negatively affect parents' capacity to take care of their children when domestic violence is a reality in the home:

- A mother may find it difficult to perform everyday childcare tasks such as getting the children where they need to be, preparing meals, and helping children to organise themselves for the day.

- A mother who is undermined by a controlling partner, which could occur over a period of years, may struggle to discipline her children and maintain behavioural boundaries, even after the family have moved away from the perpetrator. Feelings of guilt and over-compensation may continue as the mother feels she did not stand up for herself or protect her children against the violence in the home.

- Children might perceive their mother as weak and unable to protect them from harm, and could develop feelings of anger towards their mother.

- The violent partner, for example the father, might lead the child to understand that their mother is bad and that it is acceptable for her to be punished; an impression that is reinforced by the accompanying verbal abuse. Children may then learn to forgive their father and blame the mother for the domestic violence.

- The parent-child role can become reversed. The child, especially the older child, can become the person the mother turns to for support and understanding. This situation, in turn, can provoke further criticism and aggression from the father.

- The perpetrator can isolate a victim, for example the mother, from support networks such as from other parents and extended family members. In social situations, such as on the school or public playground, a mother who is a victim of domestic violence may seem isolated and not socialising with other parents or care-givers.

- Children can be forced by the perpetrator to take part in violent events towards the mother, leading them to experience feelings of guilt and confusion.

The abovementioned situations can affect the quality of care of the child and can create troublesome relationships between a parent and a child. Research indicates that attachment is one of the crucial aspects that is affected by domestic violence.

2.5.2.3 The effects of domestic violence on attachment

The presence of domestic violence in the family can have a detrimental impact on the development of secure attachment in children (Idemudia & Makhubela, 2011:3447). Berk (2006:419) defines attachment as "the strong, affectionate tie we have with special people in our lives that leads us to feel pleasure when we interact with them

and to be comforted by their nearness during times of stress." The quality of attachment can be observed in the different types of attachment, namely secure attachment, and insecure attachment styles such as avoidant attachment, ambivalent/resistant attachment, and disorganised/disoriented attachment (Berk, 2006:422; Rathus, 2013:221; Sigelman & Rider, 2009:412-414). The quality of attachment plays a significant role in a person's life and has long-lasting effects on a person's overall functioning. Studies indicate that children with secure attachments fare better in terms of their intellectual, social and emotional development; advantages that last through the adult years (Sigelman & Rider, 2009:419).

Rathus and Longmuir (2012:417) point out that disorganised attachment is the type of attachment that best describes the internalisation and behaviour of a child who is exposed to domestic violence. Disorganised/disoriented attachment is the attachment pattern that reflects the greatest insecurity in the child (Berk, 2006:422). The internalised working model (Berk, 2006:421) of such a child is based on a perception that people are dangerous and that being defensive is important for one's safety. Disorganised attachment in children is associated with emotional problems later in life (Sigelman & Rider, 2009:413).

The parents of children who experience disorganised attachment are emotionally unavailable to their children. This type of parenting is often found in parents who are victims in a domestic violence relationship, as they may struggle to meet the needs of their children due to injuries, depression or substance abuse that often co-exist with domestic violence (McNeil & Hembree-Kigan, 2010:260-261). The abusive parent, on the other hand, may be so preoccupied in controlling his or her partner, that his or her role to take care of the children is also neglected (Children exposed to ..., 2002).

As a result of the influence of domestic violence on the behaviour of the parents, many children exposed to domestic violence may become withdrawn from the non-abusing parent, who is usually the mother, resulting in a negative impact on attachment (Allen, 2013:120). In contrast, some children may have difficulty separating from their parents. Lundy and Grossman (2005) in Allen (2013:119) analysed data of 40 636 children from 50 agencies providing services to children who have been exposed to domestic violence between the years of 1990 and 1995. These authors found that the young

children appeared to have difficulty separating from their parents, which could be attributed to problematic attachment issues.

Children exposed to domestic violence also tend to adopt an avoidant attachment pattern and may not feel secure in intimate relationships (Allen, 2013:120). Avoidant attachment can be described as the attachment type where children experience a complete loss of confidence and security towards the mother (Sánchez, 2008:24). The latter author also mentions that avoidant attachment in children results in a lack of confidence that their care-givers will provide in their basic needs or comfort them. These children attempt to live independently from the care-giver, display a detached pattern in relating to other individuals and attempt to live life without love and support from others. These reactions are the result of constant rejection when the child approached the care-giver for comfort and protection. Apart from the effect of domestic violence on the child's attachment, other aspects of the child's functioning are also affected.

2.5.3 The effects of domestic violence on the child

Research indicates that exposure to domestic violence can negatively affect various aspects of a child's life (Fisher & Lerner, 2005:370; Maree, 2003:63; Singh, 2005:29). These negative effects can last into the child's adult life (Allen, 2013:2-4; Van der Bosse & McGinn, 2009:57). Where the previous section focused on the possible effects of domestic violence on the child's immediate environment of the family, home, parenting capacity and child-parent attachment, this section will focus on the effects of domestic violence on various aspects of the child's psychosocial functioning.

2.5.3.1 The emotional and psychological well-being of the child

Children exposed to domestic violence may develop psychological problems such as high levels of anxiety, fears, phobic responses, depression and posttraumatic stress disorder (Appleton, 2008:24; Singh, 2005:30). The symptoms of posttraumatic stress (PTSD) in children include psychological distress, irritability, and angry outbursts (Cameron, Elkins & Guterman, 2006:53). Feelings of helplessness and fear may occur when these children realise that there is no way that they can compete with the perpetrating parent (Jaffe, Lemon & Poisson, 2003:24). The child may live in constant

fear and anxiety as his or her home environment is characterised by a stressful and unsafe atmosphere.

Children exposed to domestic violence can be confronted with feelings of worthlessness, powerlessness, and feeling responsible for the abuse due to the perpetrator manipulating the child to think so (Sgarzi & McDevitt, 2003:126). Further, these children may fear for their lives, and for the lives of their siblings and the victimised parent. Such fears may be accompanied by feelings of rage, embarrassment, humiliation and guilt. As a result of being manipulated and feeling worthless, children exposed to domestic violence tend to have a poor self-esteem (Allen, 2013:120).

As many of the incidences of domestic violence are unpredicted with regards to both its incidence and triggers, children are often in a state of constant vigilance, which affects their sense of safety (Van der Bosse & McGinn, 2009:55). The violence further challenges the child's emotional maturity level and the many stresses that children experience as a result of exposure to domestic violence, result in the development of psychosomatic symptoms such as headaches, stomach aches, asthma, arthritis, ulcers, insomnia, and nightmares (Allen, 2013:119-120; McCue, 2008:24).

The emotional distress caused by domestic violence may be exacerbated when the child is being manipulated by the abuser, who attempts to convince the child that the abuse is not wrong or when the abuser blames the child for causing the violent incidents in order to deny responsibility for the abuse (Tiamiyu, Guthrie & Murphy, [sa]:336). The extreme emotional distress of children who have been exposed to domestic violence can result in bedwetting, eating disorders and fears of being alone, as in actual fact these children are in need of emotional support and security (Allen, 2013:119; Sgarzi & McDevitt, 2003:126).

Children are often confused about the phenomenon of domestic violence. Due to this confusion they might blame themselves for the violence in the home as they were not able to protect the abused parent, while they also feel ashamed about the circumstances in the home (Allen, 2013:120). Older children may have suicidal thoughts and even attempt suicide, while others fall into complete denial of the

problem or persistent feelings of confusion (Hague, Harvey & Willis, 2012:25; Howson, 2006:120). In infants and young children, their confusion and distress may manifest as excessive irritability as well as regression in language and behaviours such as toilet training (Allen, 2013:119).

Sgarzi and McDevitt (2003:126) explored the impact that domestic violence has on children by means of drawings by children who have been exposed to domestic violence. Examples of drawings included a family home with bars like a prison, a house with bombs falling from the sky through the roof over the father's head, a drawing of the self who is drowning, and a tornado in the home. A 16 year old teenager drew a father fleeing from home, with the teenager pointing a rifle at him, with the caption of the drawing that read: "Revenge is sweet. I'll count to three." These images may depict the vulnerable position of children who are exposed to domestic violence in the home.

2.5.3.2 The academic performance of the child

Research provides evidence that domestic violence can have a negative effect on a child's cognitive and academic functioning (Jones Brewer, 2008:22). Children exposed to domestic violence are at risk of poor academic performance (Maree, 2003:63; Singh, 2005:30). Most of these children have a short attention span and experience developmental delays and, as a result struggle with their school work or develop learning problems (Sgarzi & McDevitt, 2003:126). Many times, due to them struggling with their academic work, these children lose interest in their school work (Allen, 2013:120). Some children are unable to concentrate on their school work after observing or experiencing a violent incident at home, as they attend school feeling tired and unable to focus on their school work (Allen, 2013:119).

A study by Koenen, Moffitt, Caspi, Taylor and Purcell (2003) as cited in Jones Brewer (2008:22) supports the view that children's intellectual functioning might be negatively affected due to exposure of domestic violence. In their study with kindergarten (foundation phase) children it was found that children's exposure to domestic violence is associated with intelligence quotient (IQ) suppression. The study specifically found that children who were exposed to medium levels of domestic violence had IQ's of an average of five points lower than children who have not been exposed to domestic

violence. The study further found that children who were exposed to high levels of domestic violence showed a reduction of eight IQ points.

It seems that verbal abilities are specifically and greatly influenced by environmental experiences, which suggests that domestic violence may negatively affect children's verbal abilities (Jones Brewer, 2008:22). The latter author indicates that, as verbal abilities are part of intelligence, lower verbal abilities could lead to indirect and long-term effects on children's intellectual functioning. This view is supported by Medina, Margolin and Wilcox (2000:667) who mention that research proposes that, when children are exposed to violence in the home, it might negatively impact on their performance in terms of verbal recollection.

Children who are exposed to domestic violence are also often absent from school, which may have a negative influence on their school work (Holt, Buckley & Whelan, 2008:803). However, the opposite may occur, where the child may regard the school as a respite from home and where remaining at school may be used as a way to not go home.

As exposure to domestic violence may affect the child's cognitive development, children who are exposed to violence in the home may experience gaps in their language development and exhibit poor impulse control. The impairment of their cognitive abilities may then result in limited employment opportunities in adult life (Fisher & Lerner, 2005:370). On the other hand, some children who are exposed to domestic violence may over achieve in order to feel successful in at least one area of their life (Alaggia & Vine, 2012:323).

2.5.3.3 The effects on the child's behaviour

In a South African study, it was found that a significant number of pre-school children whose mothers were victims of intimate partner violence presented with behavioural problems (Peltzer & Pengpid, 2013:19). A study conducted in Boston in the United States found that children of abused mothers were six times more likely to attempt suicide, 74% more likely to commit crimes against another person, 24 times more likely to commit sexual assault related crimes and 50% more likely to abuse drugs and

alcohol (Sgarzi & McDevitt, 2003:126-127). Children who grow up in a home where domestic violence occurs find themselves in troubled situations and their efforts to deal with these situations manifest in their behaviour. Some of the behaviours are internalised behaviour which can not necessarily be observed, while other behaviours are externalised and can be observed in the child's actions.

It seems that violence and aggression, thus externalised behaviours, are specifically related to exposure to domestic violence. Children who have been exposed to domestic violence are likely to make use of violence in their interpersonal encounters (Faller, 2003:337-389). These children tend to act out by becoming aggressive towards people and animals, and could also be overly possessive (Allen, 2013:119). They also are more likely to engage in bullying by using violent acts to express themselves in their environment, or they may even become a victim of bullying as they might not be aware of the cues involved in their own behaviour (Allen, 2013:119; Sgarzi & McDevitt, 2003:126).

Living in a violent home is regarded as the single best predictor of juvenile delinquency or other antisocial behaviours (Sgarzi & McDevitt, 2003:126). The latter authors indicate that, although some children become saddened by overwhelming emotions they experience because of the violence in their homes, others present with temper tantrums, defiant behaviour and engage in dangerous or risk-taking behaviour. These behaviours include experimentation with drugs and other mood altering substances, stealing and juvenile crimes (Allen, 2013:120; Lessenger & Roper, 2007:53).

2.5.3.4 The effects on the child's social functioning

Exposure to domestic violence appears to affect children's social interactions, both in terms of the quantity and quality of these interactions. In terms of the quantity or number of social interactions, some children isolate themselves from friends as they attempt to avoid bringing friends to their homes. This reaction makes their lives more restricted and more focused on the violence at home (Allen, 2013:120). Children exposed to domestic violence can also become withdrawn, thus further restricting their social interactions (Sgarzi & McDevitt, 2003:126).

Exposure to domestic violence also affects the quality of children's social relationships and interactions. Children may try to prevent the violence at home from recurring by presenting with pleasing behaviours and may also learn to accept violence as part of a loving relationship (Sgarzi & McDevitt, 2003:126). As a result of the intense emotions that they experience when being exposed to violence in the home, children may become emotionally numb and consequently have great difficulty in developing empathy towards others (Munro, 2007:82). Farrell and Ainscow (2002:117) state that domestic violence provides a negative social model for children with regards to conflict resolution and communication within intimate relationships. Children who have been exposed to domestic violence over a period of time therefore tend to be less sensitive in their interpersonal interactions and they are also less attentive to social cues. As a result, these children find it difficult to identify other people's emotions.

Domestic violence may further lead to role reversal within the family. Role reversal is an unconscious behaviour that children exercise where they take up the parental role by means of caring for the other children in the house, preparing meals and cleaning the home (Sgarzi & McDevitt, 2003:126). These authors point out that children who take up the parenting role, many times do so in an attempt to prevent the domestic violence from occurring, as the victim's alleged failure to fulfil household tasks is often the expressed justification for the abuse.

Often children, mostly between the ages of six and 12 years, try to find reasons for the violence that occur in their home (Allen, 2013:119). The latter author mentions how older school-going children may blame their father's alcohol use or bad behaviour on themselves or on the mother victim, as it helps these children to cope with the fact that their father is bad or imperfect. Girls who have been exposed to domestic violence over years may marry men with similar characteristics to their abusive fathers (Allen, 2013:120). Some children attempt to hide the domestic violence and keep it a secret from others as they begin to interact with more people in their lives (Cooper & Vetere, 2005:67). The dynamics involved in domestic violence appear to contribute to domestic violence being and intergenerational phenomenon.

2.6   DOMESTIC VIOLENCE AS AN INTERGENERATIONAL PHENOMENON

Albert Bandura's (1977) social learning theory as explained by Newman and Newman (2012:41), is based on the "awareness that much learning takes place as a result of observation and imitation of other people's behaviour." Children not only observe what happens within their environment but also look at the consequences of these happenings. Children are thus influenced by their environments and the people that expose them to situations and behaviours. Through observational learning, children become acquainted with the concept that specific behaviours are practiced in different situations.

The social learning theory supports the concept of reciprocal determinism (Powell, Symbaluk & Honey, 2009:29). Reciprocal determinism, as described by these authors, are when environmental events, observable behaviour and internal events such as thoughts and feelings interact with each other, and result in the internalisation of certain behaviours. Children who are exposed to domestic violence are confronted with violent events, the behaviours that occur between the intimate partners, and the thoughts and feelings of the individuals involved in the situation. The children as silent victims in the situation, are therefore at risk of internalising many negative aspects related to domestic violence.

Children who observe violent incidents in their home, thus learn that aggressive behaviour is the way to express anger or frustrations (Allen, 2013:120). They may side with the perpetrator and would even physically attack the non-abusing parent, which is usually the mother. Consequently, boys who observe their fathers beating their mothers, tend to also abuse their girlfriends or wives during adulthood (Moffatt, 2002:91). Girls who grow up in a violent home are at risk of early pregnancy in an attempt to escape from their home situation.

Domestic violence is therefore regarded as an intergenerational phenomenon. The child's family environment forms the basis for the development of an internalised view of people and human relationships that children eventually carry over into the adult world (Thompson & Henderson, 2007:89). The role that the family plays in socialising children, teaching them the rules of behaviour in society and taking the appropriate

steps to keep them within the rules, cannot be overemphasised (Maree, 2003:58). Children who grow up in a home where domestic violence occurs learn negative behaviours by observing one parent abusing the other parent. As a result of the modelling of negative behaviours by parents, these children are at risk of regarding such behaviours as normal and of repeating the behaviours (Singh, 2005:31-32).

However, it remains controversial whether witnessing intimate partner violence directly leads to perpetrating intimate partner violence (Wood & Sommers, 2011:233). Apart from the effect of socialisation in perpetuating domestic violence, there appears to be other causal factors of domestic violence, for example marital problems, arguments between partners, love triangles, jealousy, infidelity and separation (Mtimkulu, 2010:166). In South Africa, alcohol and drug abuse is also a significant contributing factor to domestic violence (De la Harpe & Boonzaier, 2011:149).

Some studies have indeed found a link between childhood observations and adult behaviour, in particular between observing intimate partner violence and potentially becoming a perpetrator of domestic violence (Buzawa, Buzawa & Stark, 2012:105). Violence witnessed by children within their home has been explored as a factor in predicting subsequent violence as well as victimisation in adult intimate relationships. The mentioned authors point out that learning theorists propose that the process of learning a power abusive interactional style, whereby the only way to deal with negative feelings and anger is for the more powerful partner to act aggressively towards the weaker partner, may be the reason for violence to persist from generation to generation. They further explain that children who witness violence in their home "learn" that there is a victim and victimiser in an intimate relationship and would perceive a more socially acceptable relationship as frightening, unreliable and insecure. The findings of the Illinois Family Study (Renner & Slack, 2006 in Wood & Sommers, 2011:232) support this notion in the prediction of intimate partner violence in adulthood. The findings of the study indicated that female respondents who witnessed intimate partner violence as children were twice as likely to experience adult intimate partner violence as respondents who did not witness intimate partner violence.

2.7 DOMESTIC VIOLENCE WITHIN THE CONTEXT OF CRIME IN SOUTH AFRICA

Although it is stated on the South African Police Service (SAPS) website (2013) that most assaults and sexual offences that are reported take place in and around the victim's home and that the perpetrator is most likely known to the victim, there are no figures available specifically on domestic violence, as there is not a specific category indicating domestic violence as a reported crime. Reported cases of domestic violence are included amongst crimes such as assault "gbh" (grievous bodily harm), assault common, rape, attempted murder or pointing of a firearm.

Domestic violence as such is thus not recorded by the SAPS as a specific problem occurring in the home environment. As a result, the exact number of domestic violence incidents is not announced through SAPS statistics. In the South Africa's Victims of Crime Survey of 2012, it is stipulated that during the year 2011, 29,9% assault incidents occurred in the home and that in 24,8% of murders that occurred, the murderer was a spouse or lover (Statistics South Africa, 2012:52, 55).

Ross (2010:65) states that the police in South Africa are under legal obligation to move a domestic violence case forward even in a case when the victim does not want to press charges against the perpetrator due to social pressure. This author also adds that the police, under the South African Domestic Violence Law, must explain to victims of domestic violence that they are there to assist these victims in any way possible. This assistance includes helping victims find a shelter, receive medical treatment, issue a protection order, as well as pressing charges against the perpetrator (Ross, 2010:65).

2.8 EARLY INTERVENTION SERVICES FOR CHILDREN EXPOSED TO DOMESTIC VIOLENCE

Children living in a violent home are at risk of being abused or neglected themselves (Sgarzi & McDevitt, 2003:133). It is important to address the phenomenon of domestic violence in order to prevent its negative impact on future generations. In the preamble of the Domestic Violence Act, it is pointed out that the "remedies currently available to the victims of domestic violence have proved to be ineffective" (Domestic Violence Act

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116 of 1998). Recent research highlights the need for programmes to identify children who have been exposed to domestic violence at an early stage and to provide them with support and interventions in their natural environment and with their care-givers (Crusto, Lowell, Paulicin, Reynolds, Feinn, Friedman & Kaufman, 2008:2). Sgarzi and McDevitt (2003:133) suggest that domestic violence advocates should bear in mind that the key to the success of intervention is to not blame the victim of the domestic relationship when discussing the well-being of the children, but that parents need to be helped first in order to help the children.

Unfortunately, in terms of the provision of services for families affected by domestic violence, a lack of knowledge, skills and experience among service providers may be a challenge, in addition to language and cultural barriers, busy schedules, a lack of time and bureaucratic pressures (Penfold, 2004:5). However, professionals who are confronted with the cycle of domestic violence that they so often need to face, need to prioritise domestic violence as a societal problem that needs to be addressed as soon as the professional becomes aware of violence in the home. This is especially important where children are involved.

The Massachusetts Medical Society (1992) outlines an intervention protocol for all medical personnel when they have a suspicion that domestic violence exists within a family. The five-step intervention, with the acronym of R-A-D-A-R, and the actions required are as follows (Sgarzi & McDevitt, 2003:133-134):

- Routinely ask about partner abuse in all intake interviews.
- Ask clients questions about abuse directly, yet privately (batterers often prevent their victim partners from being interviewed alone).
- Document all findings. Prosecutors can attempt to proceed with criminal cases without the testimony of frightened or intimidated victims if they have other forms of evidence.
- Assess the victim's safety by looking at what they can do to increase their safety at home, school and work. Help to initiate a safety plan.
- Review options with the victim. The victim may not be ready to take drastic steps at that moment, but one of the most important things that a professional can do for a victim is to help them understand that assistance is available when they are

ready. It is important to make the victim feel listened to and understood without any judgements in order for victims to trust the professional person such as a social worker, advocate or counsellor to support them in their efforts to live a life without abuse.

The abovementioned authors (Sgarzi & McDevitt, 2003:133-134) further comment that victims from a domestic violence relationship struggle with low self-esteem from many years of verbal and emotional abuse. As a result, they might be more able to take difficult steps if they realised that such steps would be for the sake of their children, rather than for themselves.

Trauma-focused cognitive behaviour therapy initially focused on the treatment of children who have been sexually abused. This therapy has been found to also be effective for the treatment of children between the ages of three and 18 who experienced different forms of persistent trauma, including intimate partner violence (Blodgett, Behan, Erp, Harrington & Souers, 2008:76). Furthermore, in the United States, intervention programmes for young children exposed to domestic violence are offered in shelters and within community settings (Jaffe, Baker & Cunningham, 2004:41). These children present with a broad range of problems and the programmes specifically aim to enhance the child's coping strategies, build social skills, and reduce the negative effects of violence exposure. Unfortunately, not all of these programmes include the children's parents in the intervention programme.

Treatment groups were also created by Honore Hughes in 1982 and implemented for children and battered women (Jaffe et al., 2004:41). The programme, called the Programme for Sheltered Children, contains five intervention steps, namely:

- Fostering of parenting skills
- building children's self-esteem
- reducing anxiety
- improving coping behaviours, and
- altering attitudes towards family violence.

Whereas the United States caters for children who have been exposed to domestic violence as seen above, intervention programmes to these hidden victims in South Africa was found to be limited, as indicated in the rationale and problem statement of the study (refer Chapter 1, point 4). This is despite the fact that South Africa is regarded as having the highest rate of intimate partner violence in the world (De la Harpe & Boonzaaier, 2011:147; Gass et al., 2010:582).

The goal of this study was therefore to gather in-depth information from young adults on their experiences of exposure to domestic violence during their childhood. The findings could lead to a better understanding of the phenomenon and could be used to consider appropriate intervention programmes to help children who are or have been exposed to domestic violence. Programmes from a South African perspective may alleviate the destructive effects of domestic violence and may further prevent the perpetuation of the cycle of domestic violence.

2.9   CONCLUSION

Domestic violence have harmful effects on children who are exposed to it, as well as on the parents involved and on the home environment. Domestic violence is an intergenerational phenomenon and children who are exposed to it tend to be hidden victims that are often overlooked. The goal of the study was thus to explore and describe the experiences of adults who have been exposed to domestic violence during their childhood. The research methodology that was followed, the ethical considerations that applied to the study, and the findings of the study are presented in the next chapter.

CHAPTER 3

RESEARCH METHODOLOGY AND EMPIRICAL FINDINGS

3.1   INTRODUCTION

South Africa is regarded as the country with the highest incidence of intimate partner violence in the world (De la Harpe & Boonzaaier, 2011:147; Gass et al., 2010:582). Children who live in households in which domestic violence occurs, are exposed to extremely violent situations (Hutchinson, 2003:186). Intimate partner violence often takes place in the presence of children and can result in severe trauma for these children (Idemudia & Makhubela, 2011:3445). However, there appears to be limited research on the experiences of children as victims of domestic violence (Goddard & Bedi, 2009:16; Idemudia & Makhubela, 2011:3343). Therefore, children often remain the hidden victims of intimate partner violence (McCue, 2008:22). This study focused on the experiences of children who were exposed to intimate partner violence in the home.

The goal of the study was to explore young adults' experiences of domestic violence during their childhood. In order to accomplish the abovementioned goal, the following objectives were formulated for the research:

- To describe theoretically the phenomenon of domestic violence, with a specific focus on intimate partner violence and its effect on children exposed to domestic violence.

- To explore and describe the experiences of young adults regarding exposure to intimate partner violence as a form of domestic violence during their childhood.

- To explore and describe how young adults attempted to cope with domestic violence as children.

- To explore and describe how domestic violence impacts on the current functioning of the young adult participants.

- To explore and describe participants' suggestions regarding social work services to children exposed to domestic violence.

- To reach conclusions and make recommendations based on the findings of the study regarding service delivery to children who are exposed to domestic violence.

The objectives that are relevant to this particular chapter, are the ones related to the empirical study, namely the second to the fourth objectives listed above. The empirical results of the study, obtained from the participants by means of one-to-one interviews, will be presented and discussed. In this way the researcher will respond to the research question, namely: What are young adults' experiences regarding exposure to domestic violence during childhood?

Before presenting the empirical findings, the research methodology followed during the study will be described. The ethical considerations that were relevant to the study, will thereafter be presented.

3.2   RESEARCH METHODOLOGY

The research methodology will be described according to the research approach, the type of research, the research design, study population and sampling, data collection and analysis, and the pilot study.

3.2.1   Research approach

The qualitative research approach was implemented in the study, as the research relied on qualitative and descriptive methods of data collection (Grinnell & Unrau, 2011:20). The researcher attempted to explore and describe the experiences of young adults regarding their exposure to domestic violence during childhood. The qualitative approach was the most appropriate approach to utilise as the researcher aimed to gain in-depth information from the participants. The researcher considered the research participants as experts regarding their experience of domestic violence and elicited detailed information from the participants. Considering that young adults are more verbally expressive than children, the researcher was able to probe and elicit information which contributed to the richness of the study.

The purpose of the research study was explorative in nature. By following an exploratory study, the researcher could explore the topic by gathering basic data in order to understand the phenomenon of domestic violence; thus the 'what' of the phenomenon (Fouché & De Vos, 2011:95; Grinnell & Unrau, 2011:21). The researcher gathered information on the experiences of young adults (the 'what') of growing up

being exposed to domestic violence, as well as on the effect it had on them as young adults. Exploratory research is also seen as more appropriate for persistent phenomena (Babbie, 2013:90), which can be said of the problem of domestic violence.

3.2.2 Type of research

The type of research for the study was applied research, as this type of research aims to lead to solutions for problems in practice (Grinnell & Unrau, 2011:20). In applied social research, many topics and questions come from the world of professional practice as the researcher is often a professional practitioner and has knowledge regarding the topic (Punch, 2005:41). Domestic violence is a troublesome reality and the researcher is familiar with the problem in her role as social worker in practice. The researcher intended to conduct the study to make a professional contribution to addressing the problem of domestic violence by means of gaining knowledge that could be utilised in social work service delivery to children who are exposed to domestic violence. Therefore, applied research was the most appropriate type of research for this research study.

3.2.3 Research design

For this particular research study, the phenomenological research design was the most appropriate. The researcher's aim was to gain insight into a phenomenon by investigating young adults' lived experiences of domestic violence during their childhood, based on the information provided by the research participants (Fouché & Schurink, 2011:316; Wertz et al., 2011:126). The mentioned authors emphasise the importance of individuals being investigated with regards to their ways of being-in-the-world; in the case of this study, young adults who were exposed to domestic violence as children. Exploration of their lived experiences involved that the participants descriptively elaborated on what they have experienced in relation to domestic violence in their homes, and how it affected them as young adults.

The advantage of a phenomenological study was that the researcher could gain an in-depth understanding of domestic violence from the perspective of young adults who were exposed to it during their childhood, as this research design allowed for the gathering of information by means of long interviews. It was important that the

researcher entered the life world of the participants in order to understand what effects domestic violence had on their lives during their childhood and what effects it had on their current functioning as young adults. The researcher was therefore able to obtain rich, however not generalisable information; the latter which is regarded as a disadvantage of a phenomenological study (Offredy & Vickers, 2010:103).

3.2.4 Study population and sampling

The research population for the study were young adults who have been exposed to domestic violence during their childhood and resided in the Eersterust community in Gauteng. The research population was therefore "the total target group who would, in the ideal world, be the subject of the research, and about whom one is trying to say something" (Punch, 2005:101). The researcher decided to involve young adults in the study, as young adults have a capacity for enhanced self-awareness and are better able to see situations from multiple viewpoints and from various perspectives (Aloni & Katz, 2003:12; Hutchison, 2003:319). Therefore, the participants in the study were able to describe their experiences of exposure to domestic violence with more insight. It was also expected that young adults would show less resistance during interviews due to time and physical distance from their actual exposure to domestic violence. The researcher chose not to select children as participants, as the research might have created severe emotional distress for them while still being exposed to domestic violence. Further, parents or care-givers might also refuse the children's involvement in the study in the case where the child was still exposed to domestic violence within the home. Permission to conduct the research at the organisation was granted by the Director of Child Welfare Tshwane, Mrs Linda Nell (letter of permission attached as Appendix A).

The research focused on the experience of young adults who were exposed to domestic violence, specifically intimate partner violence, during their childhood. The selection of the sample, a small part of the population who were included as participants in the study (Strydom, 2011a:223-224), was therefore not a matter of pure chance as these young adults were selected on the basis of certain criteria (Denscombe, 2010:25). The sampling criteria for the study were as follows:

- Young adults, male or female, between the ages of 20 and 35 who were exposed to domestic violence, specifically intimate-partner violence, when they were children.

- Exposure to domestic violence occurred when participants were in their middle childhood and adolescent years (thus between seven and 18 years).

- Participants lived in the community which received services from the Child Welfare Tshwane Eersterust Community Office.

- Participants had been exposed to more than one incident of domestic violence in the home.

- Participants heard, observed or tried to intervene in the domestic violence incidents, but were not direct victims of abuse themselves.

- Participants did not live with their parents or care-givers who exposed them to domestic violence.

- Participants are or were not on the researcher's social work caseload at the Child Welfare Tshwane Eersterust Community Office.

- Participants should be Afrikaans or English speaking.

Two sampling methods were employed. Firstly, purposive sampling was utilised to select participants according to specific criteria that allowed the researcher to obtain an understanding of the research problem (Strydom & Delport, 2011:392). Participants were identified with the help of the social workers and social auxiliary workers at the Child Welfare Tshwane Eersterust Community Office, from the data base of the office. Potential participants were on the case load of the intake services at the office or on the case load of the social workers and social auxiliary workers. As domestic violence is an extremely sensitive and hidden problem, the researcher also made use of snowball sampling. Snowball sampling, which is used with populations that are difficult to locate, allowed the researcher to ask participants whom could be located to bring the researcher into contact with another members of the population who were known to them (Babbie, 2013:129; Strydom & Delport, 2011:393).

The researcher became aware of the hidden nature of domestic violence as she struggled to find persons who were willing to participate in the study, even though they were identified by the social workers and social auxiliary workers or other participants.

Ten participants were included in the sample; nine females and one male. Due to the problem to find persons who would voluntarily participate in the study, the researcher conducted interviews with eight participants and decided to include the information gathered from the two interviews from the pilot study in the data, as rich information was obtained from these two interviews. The researcher is of the opinion that data saturation was obtained (Strydom & Delport, 2011:391), as no new data themes emerged at the time of the last interview. Initially, the researcher also planned to interview participants between the ages of 25 and 35. However, due to the difficulty in finding participants, the researcher decided to change the age criterion to include participants between the ages of 20 and 35 years.

3.2.5 Data collection

In qualitative research the researcher uses data collection methods that are interactive and humanistic, involve active participation by participants and show sensitivity to the participants in the study (Creswell, 2003:181). Generally, interviews are the methods used for data-collection by qualitative researchers. The researcher made use of in-depth one-to-one interviews, as the one-to-one interview "is a valuable method of gaining insight into people's perceptions, understandings and experiences of a given phenomenon and can contribute to in-depth data collection" (Ryan et al., 2009:309). In-depth interviews was relevant as it could help the researcher to gain insight into the worlds of the participants (Marshall & Rossman, 2006:106) regarding their experiences related to exposure to domestic violence during childhood. The advantage of the method of data-collection was that it proved to be an effective way to obtain a large amount of in-depth information, whereas a negative aspect of one-to-one interviewing was that "responses could be mis-constructed or even, at times, untruthful" (Greeff, 2011:299). The latter not was observed by the researcher, although it was found that some of the participants attempted to protect themselves against talking about painful experiences by showing resistance to share more sensitive information. Their decision in this regard, was respected by the researcher.

In-depth or unstructured interviews by means of an interview guideline were utilised to get information on the first-hand experiences of the participants' life-world (Welman et al., 2012:198). The researcher introduced the general theme for the discussion,

explored information that came up in the spontaneous development of the interview by means of a few open-ended questions that guided the conversation, probed responses for more detail and clarity, and asked follow-up questions to further explore answers to the main questions (Greeff, 2011:349; Welman et al, 2012:198). The researcher firstly ensured that good rapport had been established with the participants by getting to know them better by means of an informal conversation (Greeff, 2011:351; Willig, 2013:30). In the research, the main question focused on the experience of young adults of domestic violence, with two themes being explored: the participants' experiences related to domestic violence as children and young adults, as well as coping measures during childhood and support suggested for children exposed to domestic violence. The interview guideline is attached as Appendix B.

Interviews were audio recorded in order to capture the entire interview as the verbal information was imperative to the findings (Willig, 2013:30). The researcher also made field notes of the participants' non-verbal communication during the interviews in order to develop a thorough understanding of the participants' experiences related to being exposed to domestic violence (Miczo, 2003:469-490).

3.2.6   Data analysis

The researcher carefully planned for the collection of data, by securing the setting for the interviews and preparing for the voice-recordings of the interviews (Schurink, Fouché & De Vos, 2011:404). Qualitative data analysis involved searching the collected data for general relationships and underlying themes (Marshall & Rossman, 2006:154). Before analysing the data, the voice recordings of the interviews were transcribed. Thereafter the researcher analysed the data according to the data analysis process described by Tesch (1990) in Creswell (2003:192). The eight steps that were followed are as follows:

- The researcher obtained a sense of the whole of the data by reading all the transcripts carefully and jotting down in the margin some ideas as they came to mind.
- One transcript was chosen randomly and the researcher read through it to get the underlying meaning of the information and thoughts and then determined the relevance of the information in terms of the research question.

- This process was repeated with all the transcripts until a list of themes was acquired from the information. The themes were then clustered together into columns that were labelled as main themes, unique and leftover themes.
- The researcher then revisited the data, taking into account the list of themes. An abbreviation of the themes were made by means of coding.
- The researcher found the most descriptive wording for the themes by grouping, naming and categorising them. Lines were drawn between categories to show interrelationships.
- A final decision was then made on the abbreviation for each category.
- The information belonging to each category was then grouped into main and sub-themes.
- The researcher then started writing up the research findings by means of discussing the themes and supporting them with direct quotes from the interviews, as well as with literature that were consulted for the literature review.

3.2.7 Trustworthiness

The researcher ensured the trustworthiness of the data by means of member checking, reflexivity and peer debriefing (Lietz et al., 2006:447-451). Member checking involved that the researcher clarified information with the participants during the interviews to make sure that she accurately understood the information obtained from them. As it is important to analyse data as objectively as possible, reflexivity required of the researcher to be aware of the possibility that her personal perceptions on the problem of domestic violence could lead to bias. Peer debriefing was implemented in order to counter possible personal bias and to enhance the understanding of the information. For peer debriefing the researcher involved a social work colleague to review the data transcripts for consistency in the data analysis. The discussion resulted in a consensus that the researcher managed to identify relevant main themes and sub-themes from the transcripts.

Schurinck et al. (2011:419-421) emphasise the importance of trustworthiness and consider credibility or authenticity, transferability, dependability and conformability as important elements related to trustworthiness. With regards to credibility, the researcher ensured that the reconstruction and presentation of the data correlated

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with the participants' views; an exercise which are also supported by peer debriefing and member checking. As for the aspect of transferability, the researcher linked the information gathered in the study to applicable theory. In order to apply the element of dependability, the researcher thoroughly documented and audited the research process. Lastly, when applying conformability, the researcher focused on objectively presenting the findings and interpretations of the findings.

3.2.8 Pilot study

The researcher conducted a pilot study before the main study in order to determine whether the main questions that were prepared for the interviews were understandable and could elicit sufficient information from participants. The pilot study entailed interviews with two female young adults who complied with the sampling criteria. The pilot study allowed the researcher to become aware of the practical aspects of making contact with the participants, conducting the interview and the researcher's interviewing skills (Greeff, 2011:351-352). The researcher thereby assessed her ability to collect sufficient information for the main study and thus ensured that the study was feasible and that the best possible results could be obtained. The researcher eventually included the information obtained in these two interviews into the data for the main study, as motivated in point 3.2.4 in the discussion of sampling.

3.2.9 Ethical considerations

The following ethical principles were maintained during the research study:

- **Avoidance of harm**

Based on the literature consulted and practice experience as a social worker, the researcher was aware of the fact that domestic violence is a sensitive topic. She therefore looked out for subtle signs of distress and guarded against any harm, even though participants volunteered to participate (Babbie, 2013:34; Welman et al., 2012:181). As interviewing a child who lives in a home with domestic violence risks re-traumatising the child, the researcher rather interviewed young adults who were exposed to domestic violence during childhood. Although it provided some time and physical distance from the actual events of domestic violence, the researcher did not

underestimate the possibility of harm due to traumatising memories that might be re-visited due to the research.

In an effort to prevent harm, the participants were made aware of the potential emotional impact that the research study could have on them, by stating this in the letter of informed consent. They were thus aware of possible risks when they were recruited to take part in the research (Welman et al., 2012:181) and they were also informed about the research procedures, that participation would be voluntary and that they could withdraw at any time during the course of the study, with no negative consequences (Strydom, 2011b:115). Negative emotions might arise during the interviews, therefore, the researcher handled the interviews sensitively in order to create an atmosphere of safety. In the case where participants would experience emotional discomfort, the researcher would refer them for counselling to a social worker at Child Welfare Tshwane's Eersterust Office. Arrangements were made with the social worker before the study commenced. No participants required counselling as a result of their participation in the research.

- **Informed consent and voluntary participation**

The researcher was responsible for explaining the way in which the participants would be involved in the research study and how risks would be minimised and managed so as not to negatively affect the participants or any other individuals (Kirby, Greaves & Reid, 2006:54). The mentioned authors also point out that the researcher should portray cultural sensitivity; a factor which the researcher kept in mind at all times. An informed consent letter (attached as Appendix C) was provided to each participant. In this document the participants were informed about the goal of the investigation, possible advantages, disadvantages or any dangers that they might be exposed to. The researcher also afforded participants the opportunity to ask any questions that might be a concern to them, so that they would be able to make an informed decision whether they were willing to participate in the research. Participation was thus voluntarily (Strydom, 2011b:116).

The fact that participants could withdraw from the research at any time, with no negative consequences, was clearly stated in the letter of informed consent. In the

informed consent letter the researcher also stipulated that an audio recording would be made in order to capture all data, and participants had to provide their consent for the use of the audio recording. The information in the informed consent letter was verbally confirmed with the participants prior to the interviews with them. The researcher is of the opinion that her experience as an employee at Child Welfare Tshwane Eersterust for more than three years helped her to get to know the community, which contributed to the clarity of information during the interviews.

- **Deception of participants**

The researcher did not withhold information or offer incorrect information to participants for the purpose to gain their participation or in order to gain more detail from participants. The abovementioned aspect was especially important in the study, as domestic violence is a sensitive topic and a hidden phenomenon and that snowball sampling, thus gaining access to participants via other participants, were employed. In the case where deception might have unintentionally occurred, the researcher would have rectified it immediately during the debriefing session (Strydom, 2011b:119). However, no such measures were needed in the study.

- **Violation of privacy/confidentiality/anonymity**

The researcher ensured privacy for the research study by taking measures so that information could not be linked to specific participants (Smith Iltis, 2006:11). Pseudonyms were utilised to identify participants, so that their identities would be protected (Weber, 2012:39). Participants were also be informed that they could only share information to the extent that they were willing to (Strydom, 2011b:119). Privacy was important due to the sensitivity of the topic, where participants might have felt uncomfortable and embarrassed when having to share violent events that occurred in their homes during their childhood, or where they could be afraid that a family member would discover that they have shared these experiences with the researcher. Anonymity could not be ensured in the study as the researcher made use of face-to-face interviews.

Confidentiality, which is a continuation of privacy, implied that the researcher handled information in a confidential manner (Strydom, 2011b:119). The researcher thus

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limited access to private information of the participants. Considering that the researcher had to make use of purposive and snowball sampling, confidentiality in the particular research study implied that other staff members or participants could be aware of the identity of the participants. For this reason the social workers and auxiliary social workers were also requested to uphold their professional principle of confidentiality (Strydom, 2011b:120). Although participants identified other members of the population for possible inclusion in the research, the researcher did not make it known to participants which of the persons they identified eventually participated in the study. Therefore, even though staff and participants themselves assisted with the sampling, the researcher was the only one who knew which participants decided to participate in the study, as well as the information they shared during the interviews.

The participants were also informed that the researcher, the social worker involved in peer debriefing and the research supervisor would be the only individuals to have access to the transcripts of the interviews. The use of pseudonyms on the transcripts of the interviews ensured that confidentiality was upheld at all times. The researcher also made it clear to each participant that participants' identities would not be revealed to anyone during the research or in the final research report. Participants were ensured that raw data would be securely stored according to the stipulations of the University of Pretoria.

During the research, the researcher became aware of the exceptionally sensitive nature of domestic violence, and of the importance of confidentiality specifically in this study. She found it extremely difficult to recruit participants for the study and experienced that many of the persons who had been identified as possible participants by either the staff or other participants, refused to take part in the study. The researcher respected their decisions and did not coerce any participants into taking part in the study.

- **Actions and competence of the researcher**

It is imperative that a researcher is competent to conduct a research study. Researchers should be aware of research procedures for meeting the objectives of the study and be knowledgeable about ethical guidelines and local customs and norms

(Cottrell & McKenzie, 2011:100; Welman et al., 2012:182). The researcher completed a research module as part of her studies and was familiar with the Eersterust community, based on her work experience of more than three years in the community. The researcher was also guided by an experienced research supervisor from the University of Pretoria. The researcher further informed the participants that no judgements would be made at any stage before, during or after the investigation on the basis of culture or social norms, but that the research was rather an attempt to understand the lived experiences of the participants of their exposure to domestic violence.

- **Debriefing of participants**

At the conclusion of the interviews, participants were given the opportunity to reflect on their experience of being part of the study. This was also an opportunity to resolve any possible misperceptions or emotional reactions that might result from the interview (Strydom, 2011b:122). Debriefing by the researcher also entailed a summary of the study which included the purpose of the study as well as the way in which the study was conducted (Johnson & Christensen, 2012:123). As domestic violence is a sensitive topic that might trigger memories and emotions, debriefing was important and would also have been done with participants who might have decided to withdraw from the study. These participants would also have been offered the opportunity for counselling if needed. No participants withdrew from the study.

3.3   EMPIRICAL FINDINGS

The empirical findings of the study will be divided into the following two sections:

Section A: Biographical information of participants. In this section a brief description of the biographical details of the participants is provided.

Section B: Qualitative research findings. The empirical findings of the research are presented in this section.

3.3.1 Section A: Biographical information of the participants

A total of ten participants were involved in the study. The participants were recruited by means of purposive and snowball sampling. The researcher became aware of the

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sensitive nature of the topic as it became evident that many of the persons who were identified as potential participants, were not willing to participate in the study. As the researcher struggled to find participants, one of the selection criteria, namely the age of the participants, was adjusted to include persons between the ages of 20 and 35. The initial plan was to select participants between the ages of 25 and 35. Because of the problem to recruit participants, the researcher further decided to include the information gained from the two interviews for the pilot study in the research data.

Nine of the ten participants were female and the other participant was male. The average age of the participants was 27, with five participants being between the ages of 20 and 25, three between the ages of 26 and 30, and two participants between the ages of 31 and 35. All the participants were either married or were in a long-term relationship. Seven of the participants had dependent children who lived with them.

All the participants were Coloured and their home language was Afrikaans. The researcher is fluent in Afrikaans and the interviews were conducted in Afrikaans in order for participants to be able to clearly express themselves.

3.3.2 Section B: Qualitative research findings

In this section the empirical findings of the study are presented in the form of main themes and sub-themes. The findings are supported with quotes from the interviews. The interviews were conducted in Afrikaans; however, for the purpose of the study the selected quotes were translated and will be presented in English. The discussion of the findings are further supported with relevant literature. A summary of the themes and sub-themes is presented in Table 1 below.

Table 1: Summary of themes and sub-themes

THEMES	SUB-THEMES
Theme 1 The experiences of domestic violence during childhood	1.1 Types of domestic violence exposed to 1.2 Reasons for domestic violence
Theme 2 The effects of domestic violence on the child	2.1 The role of the child in the home 2.2 The family and home environment 2.3 The emotional impact on the child 2.4 The effects on the child's school performance 2.5 The effects on the child's behaviour 2.6 The effects on the child's social relationships 2.7 Police involvement 2.8 Domestic violence as a hidden phenomenon
Theme 3 Coping strategies that participants used as children	3.1 Temporarily leaving the scene of the violent events 3.2 Talking about the domestic violence 3.3 Efforts to deny or normalise the problem 3.4 Positive self-talk and self-motivation 3.5 Substance use
Theme 4 The effects of domestic violence on participants as young adults	4.1 Parenting practices 4.2 Negative behaviours 4.3 Effects on interpersonal/intimate relationships 4.4 Personal resilience 4.5 Signs of trauma
Theme 5 Suggestions for social work services to children exposed to domestic violence	5.1 A trusting relationship with the child 5.2 Educational and support groups 5.3 Awareness campaigns at schools and in communities 5.4 One-on-one counselling 5.5 Placement in alternative care 5.6 Removal of the perpetrator from the home

Five main themes, each with a number of sub-themes, were identified from the data. The first three main themes focused mainly on the participants' experiences of exposure to domestic violence during their childhood years and how they attempted to cope as children. The last two main themes focused on the impact of the exposure to domestic violence on the participants' lives as young adults, as well as their suggestions for possible interventions by social workers.

3.3.2.1 Theme 1: The experiences of domestic violence during childhood

From the participants' responses with regards to their exposure to domestic violence, the researcher identified two aspects that highlight the participants' experience in terms of domestic violence during their childhood. These two aspects relate to the type of domestic violence they were exposed to, and their perceptions about the reasons for the violence in the home.

- **Sub-theme 1.1: Types of domestic violence exposed to**

All the participants indicated that the mother of the participant was the victim of domestic violence in their childhood homes, while the perpetrator was either the participant's biological father, stepfather or life partner of the mother. All of the incidents of domestic violence that the participants described included acts of physical and verbal abuse. Two participants stated that the victim was pushed or "thrown around" by the perpetrator and two participants mentioned that the victim was burnt, either by means of fire, petrol or paraffin. The following quotes provide examples of the types of domestic violence observed by the participants:

> "[hit her] always in the face … using his hands. Sometimes he would use objects to hit her with."

> "… throw her against things because he was a huge man and she was small and skinny."

> "There was a stage where it became worse where he started to burn her."

> "He would start swearing at her and then he would start hitting her. He would throw furniture … glasses ..."

"… his boots, he used to kick her with it … hands, fists … if he got hold of a stick, a pipe, a plate on the table he would throw it at [her] … he would use anything …"

The acts of domestic violence observed by the participants included incidents where the victim was severely physically and verbally abused. Domestic violence is indeed characterised by abusive behaviour where the victim is slapped, punched, kicked, thrown, hit with objects, cut, choked, bitten, stabbed or shot (Vito & Maahs, 2012:272). Beach, Heyman, Slep and Foran (2013:10) mention that victims are also burned. Typically, domestic violence is not a single behaviour, but is characterised by various forms of abusive behaviours (Baker et al., 2002:7).

Some participants stated that the incidents of domestic violence occurred on a regular basis, while others mentioned that it happened over the weekends or at times when the perpetrator visited the home:

"It was a regular thing ..."

"After every incident or fight he would call my mother and I, and ask us to forgive him. But that lasted only a while, a few days, then it would be the same ..."

"… twice a week for about six years."

"… on Fridays he started to drink … then he starts swearing at my mother and if she talks back, he hits her."

"Our house was a normal house during the week ... Come Fridays, then it would get bad … they would drink … my mom would start to get nervous because my dad would come home and start fighting."

"Then he was away from home for a few weeks and then everything was fine at home."

It further appeared that the participants as children were acutely aware of the effects of the domestic violence on the victims, which in the case of this study were the mothers. This awareness is evident in the following statements by the participants:

"It was hard for her. Most of the times she had to go to work with that face … with bruises and lesions. Later, as things became worse, she did not go to work anymore … she could not go because of the state she was in."

> "He [stepfather] hit my mother ... more than once she had to go to hospital. … Her back hurt, her hip or her kidney hurt; then she needed treatment …"

> "He would hit her until she could not see anything, until her face was swollen. … Her eyes were swollen … blue … blue bruises on her arms and legs. … very painful, we could not even touch her."

> "There was a time that my mother was hit so badly that she could not go to work … her eyes were bruised … her body was literally blue, blue … she stayed in bed. ... [Eventually] she lost her job."

> "… [once] there was blood … everywhere, on the kitchen floor … the door. Then she went to hospital and they stitched it [the wounds]."

Observing a parent victim of domestic violence can make a child feel helpless, as children are mostly unable to help the victim (Child Welfare Information Gateway, 2009). The children may also become aware of the constant fear that the mother, as victim of domestic violence, may experience (Van der Bosse & McGinn, 2009:55), which could undermine their perception of the home as an environment in which they should feel safe (Thompson & Henderson, 2007:6).

Some children may try to intervene in the violent incident in an effort to protect the victim parent, while others feel helpless and unable to do anything (Child Welfare Information Gateway, 2009; Hatfield, 2014:726). This was evident in the responses of some of the victims:

> "I would pick something up and I would hit him, chop him, stab him … I used anything I could find to make him leave her alone."

> "I always told him not to hit my mother. I swore at him when he hit my mother."

> "Every time they fought, we would scream and try to stop them."

> "I started to interfere … I would jump on him and say 'Stop, do not hurt my mother.' … I wanted to be a hero for her."

> "… that hopeless feeling as I could do nothing to help may mother. … We were too scared to say or do anything, because it could trigger something in him."

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The participants were mostly aware of the reasons for the domestic violence in the home, as will be discussed in the next sub-theme.

- **Sub-theme 1.2: Reasons for domestic violence**

During their childhood years the participants, based on what they observed in the parental home, formed certain perceptions as to why the domestic violence occurred in their homes. Their perceptions on what lead to domestic violence incidents in the home brought the following aspects to the fore:

- Alcohol abuse by the perpetrator,
- Jealousy,
- Controlling behaviour.

Nine participants mentioned that the perpetrator was under the influence of alcohol when he started to act violently towards the victim. Participants described these situations as follows:

> "Some evenings my father was very drunk. [He] gets home … any mistake my mother makes, the food is not cooked right … or he just looks for anything to get physical and then he hits my mother."

> "My father always hit my mother, especially if he came home from work and he was drunk."

Six participants mentioned incidents where the perpetrator blamed the victim for having an affair with another male person; examples of which are seen in the following quotes:

> "And when he gets jealous and my mother talks to the men or if his friends come over then he gets aggressive."

> "… because he thought my mother had an affair with someone else."

Six participants provided examples where the perpetrator made unreasonable demands, attempted to gain power and control over the mother, or vented his frustrations by physically abusing the mother. Participants mentioned the following:

> "If she did not do as he pleases or give him what he wants then he starts to hit her."

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> "I did not know what it was all about, but as I noticed it [the violent incidents] happened when he did not get things his way or if he got angry, and now he looks for someone on whom he can vent his frustrations."

All of the perceived reasons for domestic violence, as stated by the participants, are confirmed by literature. Most of the participants mentioned that the perpetrator was under the influence of alcohol prior to a violent incident at home. Literature indicates that there is a correlation between alcohol abuse and the perpetration of intimate partner violence (Durose, Harlow, Langan, Motivans, Rantla & Smith, 2005:15). It has been found that alcohol and drug abuse is a significant contributing factor to domestic violence in South Africa (De la Harpe & Boonzaaier, 2011:149).

More than half of the participants verbalised that the perpetrator was jealous and suspicious of the victim and accused her of having an affair with someone else. Barnett, Miller-Perrin and Perrin (2011:313) point out that jealousy is a sign of controlling behaviour and may be a danger sign that signifies intimate partner violence.

Six participants mentioned controlling behaviour by the perpetrator towards the victim. Sanderson (2010:181) mentions that domestic violence is characterised by controlling behaviour that escalates over time, which reflects the perpetrator's need to dominate and gain the victim's submission. The perpetrator uses acts of violence to intimidate, humiliate and frighten the victim as a way to maintain control over the victim (Baker et al., 2002:4).

Sometimes the participants were however not aware of the reasons for the incidents of domestic violence, as the following examples indicate:

> "I did not always know what it was all about … I was still young, about six or seven when it started."

> "He would just come in … nothing happened beforehand, he would come into the house and fight."

> "As children we could never figure out why it started, because they [the parents] would never say why they started fighting."

It was clear that their exposure to domestic violence affected the participants in various ways during their childhood years. These effects are discussed as the sub-themes under the following theme.

3.3.2.2 Theme 2: The effects of domestic violence on the child

Participants highlighted a number of ways in which their exposure to domestic violence affected them. The effects related to their role in the home, the home environment, as well as the effects of domestic violence on their emotions, education, behaviour and their social relationships. The mentioned effects will be discussed as sub-themes in this section.

- **Sub-theme 2.1: The role of the child in the home**

The participants' responses indicate that their exposure to domestic violence influenced their role as children in the home. Some participants recalled how they attempted to protect their mothers, while others took over the role of the mother in the home.

Five participants actively attempted to protect the mother as the victim of domestic violence from being abused by the perpetrator, who was either the participant's biological father, stepfather or the mother's life partner. Some participants also took on a nurturing role towards the mother. Participants described these attempts as follows:

> "… we were always close to my mother. So when it happened we would never leave her alone."

> "I was always with my mother, because I did not want her to get hurt."

> "I wanted to protect my mother against him, but I can understand why she sent me back to my room. It was because I was still small … and I had to protect my sister against him [the perpetrator]."

> "I did not really want a safe place for myself … I just wanted my mom to feel better. If she smiled, I would also smile."

> "… then [after the abusive incident] I'd make my mother some tea and take it to her in bed."

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The above statements reflect findings in the literature that children who are exposed to domestic violence often take on a protective role towards the victim. These children may even blame themselves if they failed to protect the abused parent (Allen, 2013:120).

Three participants took over the parental role in the home because the domestic violence affected the mothers' capacity to fulfil her role. The participants described how they would take over the mother's tasks including taking care of a sibling, cooking and cleaning the house, as is highlighted in the following quotes:

> "Then I had to clean the house, put the pots on the stove, when everybody got home from work see that they had something to eat, go to church and then I had to look after my little sister as she was not yet in school."

> "… I had to take over the household, cook and make sure my sister did her homework. I wanted to make sure that my sister was all right, that my sister had something to eat, that my mother had eaten, that the house was clean and that there were clean clothes for us to wear and that my mother had clean clothes for work."

> "We learnt from a young age to keep the food ready so that he [the perpetrator] does not have to ask for food and all those things … but then he still starts a fight … and starts to hit my mother."

The above quotes highlight the fact that mothers who are victims of intimate partner violence may struggle to perform everyday childcare and household tasks (Sterne et al., 2010:50), as well as the extent to which children could adopt the role of the mother in the home where domestic violence occurs. The participants clearly fulfilled numerous tasks that would normally be fulfilled by the mother. The reversal of parent-child roles as a result of domestic violence is also described by Malchiodi (2015:260) who states that children may take on parental or care-giver roles, often because the perpetrator alleges that the mother's failure to fulfil household tasks is the reason for the abuse (Sgarzi & McDevitt, 2003:126). It appears that especially the older child in the family tends to take on a parental role and provides support to the parent who is the victim of domestic violence (Sterne et al., 2010:50-51).

- **Sub-theme 2.2: The family and home environment**

Six participants described the negative effects that domestic violence had on the family and home environment. Some of the participants went to live temporarily with other family members and in other instances the family's sleeping arrangements changed as the mother felt afraid of being abused during the night. Participants described these situations as follows:

> "And then there was a request whether I could stay with any family member because of the pressure at home."

> "… then he starts to hit my mother and we have to go next door and sleep over at the neighbours."

> "Sometimes my mother slept with us in our room and then we moved the wardrobe in front of the door because you could never know what he [the perpetrator] would do next while we were sleeping."

Four participants mentioned that, due to the domestic violence occurring in the home, their mothers were emotionally unavailable to them:

> "… she never listened [when the participant spoke to her], she just always swore, swore, swore. Swore, swore, that's all."

> "My mother was edgy again and just kept herself busy with all sorts of things … she was not with us a lot of times, we were in our rooms most of the time."

> "She would always shout and swear (at us). She was never in a good mood, never."

Other participants blamed their mother for allowing the violent incidents, or developed negative feelings towards the perpetrator:

> "I thought, how could she allow it? That is what made me angry. She allowed it to continue, to happen each time."

> "This [the violence] made that I did not have respect for him [father]."

> "We started to reject him. We would not call him 'Dad' when we spoke to him. … (we became) very hateful towards him."

> "I started to hate my father."

> "… but I have never told him that I hated him. I was scared, because he might hit me if I told him that I hated him."

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The participants' quotes are reflected in the literature. Domestic violence incidents have an impact on various areas of family life and on the home environment (Ellens, 2008:27). It creates a home environment in which the child lives in constant fear and uncertainty (Humann, 2014:106) and, as is evident from the above quotes, may necessitate practical changes in the living arrangements. Further, it was clear that the domestic violence had an impact on the parent-child relationship. Domestic violence affects children's attachment relationships with their caregivers (Oppenheim & Goldsmith, 2007:140). Many parents who are victims of domestic violence become emotionally unavailable to their children as they are often depressed and preoccupied with the abuse and with their personal safety (Hutchison, 2011:170; McNeil & Hembree-Kigan, 2010:260-261). The effects of domestic violence on the home environment and the participants' sense of safety, are evident in the following quotes:

> "That is why we always had to be on our toes [be vigilant]."

> "The one moment they would sit and we would play; the next moment they [fight] and then we had to run and hide …"

Incidents of domestic violence are often unpredicted and without specific triggers. Due to this unpredictability, children who grow up in homes in which domestic violence occurs tend to be in a state of constant vigilance (Van der Bosse & McGinn, 2009:55). Children exposed to domestic violence may be hypervigilant and watchful of others as their exposure to domestic violence have led them to believe that people are unpredictable (Ahmed, 2009:65; Malchiodi, 2015:250).

- **Sub-theme 2.3: The emotional impact on the child**

All of the participants described how domestic violence had a negative impact on their emotional state. They indicated that their predominant emotion was a generalised feeling of fear as well as fear due to the unpredictability of the perpetrator's acts of violence. Participants further mentioned that they tended to feel nervous. The following quotes highlight the emotional impact that the domestic violence had on the participants as children:

> "While he [the perpetrator] was there, I was always nervous. You never knew when they would fight again."

> "How did I feel? I was nervous, I was scared, I was sad, I was angry … all in one … Every negative emotion that you can get, I always experienced. … I was very sad, I always cried a lot."

> "In such incidents I was always scared, always hysterical, shouted when they were fighting … it affected me a lot."

> "… there was not really a day that I could say that I was very happy."

> "… [the only time the participant was not scared] was the time when he was not at home; then it would be only me, my mother and my sister."

All the participants described the negative emotional impact that domestic violence had on them. Most participants experienced feelings of fear and nervousness, which reflect the emotional effects of domestic violence mentioned by Allen (2013:120-122), Appleton (2008:24) and Singh (2005:30).

Due to the emotional distress caused by the domestic violence, six participants either attempted to commit suicide or had suicidal thoughts. Suicide attempts or suicidal thoughts are a recognised effect of exposure to domestic violence (Hague et al., 2012:25; Howson, 2006:120). Participants mentioned the following in this regard:

> "There was a time that I took pills before school started with the intention to commit suicide."

> "One morning I took two bags of pills from mother. … I got dehydrated and drank a lot of water … I think that saved me in the end. … My parents never knew about it."

> "I once saw a Social Worker when I was younger because I tried to commit suicide because of my mother and the things and problems … I was about 10, 11 … I just wanted to die … to get away from everybody and everything."

Their exposure to domestic violence also had a negative effect on the participants' school performance and education.

- **Sub-theme 2.4: The effects on the child's school performance**

Six participants explained how domestic violence caused their school performance to drop. They ascribed their lower academic achievement to the fact that they struggled

to concentrate in the classroom and were often absent from school. Participants mentioned the following:

> "When you are in school, you sit in class and you think it's Friday and it's going to happen again, the fighting. You cannot concentrate. I failed twice because I became withdrawn."

> "I could not concentrate in school … she [the teacher] always hit me and asked why do I not concentrate. … I go to school and my thoughts are not with the school but with my mother."

> "I repeated one grade twice … and my parents did not see it as because of the abuse in the house, they merely assumed that I did not want to study."

> "Because [of the domestic violence] … I started to miss classes, I did not want to go to school."

Domestic violence had a negative effect on the academic performance of more than half of the participants. Incidents of domestic violence can affect children's school attendance as they may be absent from school after such incidents (Allen, 2013:119). Others who attend school may find that they cannot concentrate. Academic problems such as low school performance and difficulty to concentrate are linked to domestic violence (Ahmed, 2009:65; Finley, 2013:77; Jones Brewer, 2008:22). These children run the risk of eventually losing interest in their school work or of developing learning problems (Sqarzi & McDevitt, 2003:126). The information gained from the participants supported the descriptions in the mentioned literature.

- **Sub-theme 2.5: The effects on the child's behaviour**

Four participants mentioned that domestic violence had a negative effect on their behaviour in that they became aggressive and disobedient. The following quotes provide examples of these effects:

> "I started to fight in the streets and at the age of 18 I started drinking, to run away when I was in a fight. I just felt I had to protect myself because there was no one else to protect me."

> "I just started a fight with anybody just to get rid of the anger and hurt. So if I think carefully, that made me a bully."

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The exposure to domestic violence resulted in the participants presenting with negative behaviours. Troublesome behaviours such as aggression and disobedience may be found in children who are exposed to domestic violence, as confirmed by Walker (2004:256) and Faller (2003:337). Children who are exposed to domestic violence also tend to engage in bullying behaviours (Allen, 2013:119; Sgarzi & McDevitt, 2003:126). Negative behaviours resulting from domestic violence could affect a child's social relationships, as discussed in the following sub-theme.

- **Sub-theme 2.6: The effects on the child's social relationships**

Five participants were of the opinion that their exposure to domestic violence had a negative impact on their friendships and peer interaction. They mentioned that they tended to withdraw from the peer group and that they had no or few friends:

> "I was very reserved. I did not mix with other people, not with other children."

> "I had no friends. Actually I did not want to leave the house."

> "I did not have many friends … because I thought they did not feel as I did. I could see the happiness in them and I did not really feel the same."

> "It [the violence in the home] made me very withdrawn … I did not really have friends. … Many people thought I am weird, why am I on my own? The thing is, they did not understand."

> "It [the domestic violence] made me very insecure, very withdrawn. I was not a person that took part in any activities, because I was not sure when to do something or not, or when to say something or not. … I also had too many responsibilities at home … look after my little sister … cook …"

Cohen, Mannarino and Deblinger (2006:208) confirm that domestic violence causes children to withdraw from peers and social contacts and that they also, overall, have poor peer relationships. These children often avoid bringing friends to their home, with the result that they restrict social interaction with peers (Allen, 2013:120). The participants' quotes highlight these effects on their social relationships and interactions with the peer group during their childhood.

- **Sub-theme 2.7: Police involvement**

Three of the participants expressed their experience of the involvement of the police as a result of domestic violence. The participants described these experiences as negative. They felt that the police did not do enough to protect the family from the perpetrator by either not understanding the seriousness of the situation or by discharging the perpetrator without following up on the case. Participants mentioned the following:

> "The police can't help. They tell you its domestic violence, go to court, and get a restraining order. That's what they tell you and I am a living witness of it. … They tell you they can't help you. If the police can't help you, then who must help you?"

> "The police just took him [the perpetrator] away and then they let him go the following day, when he was sober … but the case never went further."

One of the participants was relieved when the police removed her father from the home. She said:

> "The time that he was in jail for assault, that he abused my mother … that time I did not feel bad. … That time we received more love from my mother."

Families who experience domestic violence may find themselves in situations where the police needs to intervene in the violent events at the family home (Jackson, 2007:178). The police's involvement can play a significant role in the way that children will perceive domestic violence in terms of justice being done. McGee (2013:90) mentions that children and young people have a very strong sense of fairness and can feel wronged if they do not see justice being done.

Participants further experienced the domestic violence as a situation about which nobody would talk. The hidden nature of domestic violence is discussed in the next section.

- **Sub-theme 2.8: Domestic violence as a hidden phenomenon**

Six participants verbalised that the domestic violence they were exposed to as a child, was a secret. In other words, these children were not allowed to talk about the

domestic violence that occurred in their home. Participants explained the situation as follows:

> "My mother said that we should not talk about the fighting."

> "My mother said that you don't tell the teacher what happens at home."

> "As a child you know the rules in the house … if you talk, you will be punished. … [Children do not talk] because of fear."

> "… it was our issue, the things in our home. I did not want people to think less of my mother or that my mother was a bad person."

> "Children tend to keep secrets. It is only today [during the interview] that I open up after all these years … you are the only person to whom I have spoken. … When a child's mother tells the child not to talk about it [the domestic violence] they try to forget."

Domestic violence is regarded as a hidden phenomenon (McClennan, 2010:207), with children being the silent and hidden victims (McCue, 2008:22; Singh, 2005:29). The instruction by parents not to talk about the domestic violence may contribute to the fact that domestic violence remains a hidden phenomenon. Research indicates that many adults who were exposed to domestic violence when they were children, commonly remain silent about it (Hague et al., 2012:142). This was the case with three participants in this study. The three participants indicated that the interview with the researcher was the first time that that they discussed their exposure to domestic violence during their childhood. It is recognised that remaining silent about the domestic violence may magnify the child's trauma (Idemudia & Makhubela, 2011:3445).

The sub-themes in this section highlighted the effects of exposure to intimate partner violence on children. These effects can be related to the ecological systems theory, which serves as the theoretical framework for the study. The ecological systems theory points to the interrelatedness of the different systems in which people function (Berk, 2006:26; Shaffer & Kipp, 2010:63). The above themes indicate how domestic violence in the home can negatively affect the child's functioning in other systems such as the school and the peer group. The systemic effect of domestic violence is reflected in the statements by Adams (2006:334), Ybarra et al. (2007:33) and Sox (2004:68), indicating that exposure to domestic violence impacts children in five areas of their

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functing, being their biological, behavioural, emotional, cognitive and social functioning.

The following main theme will highlight the efforts of the participants to cope with the domestic violence when they were children.

3.3.2.3 Theme 3: Coping strategies that participants used as children

The participants in the study shared their ways of coping with the domestic violence they were exposed to during their childhood. The coping strategies included temporarily leaving the scene of the violent incident, confiding in another person, efforts to deny or normalise the problem, positive self-talk and substance abuse.

- **Sub-theme 3.1: Temporarily leaving the scene of the violent events**

Five participants indicated that they walked away from the scene of the domestic violence in order to cope with these incidents. The participants either left the home to sit outside, went to their room or went to a family member. Participants described these experiences as follows:

> "I walked out [of the house]. He hit my mother and then I always sat … behind the danger box [the municipal electric sub-unit on the sidewalk] so I could not see them fighting."

> "I ran out of the house and went to my mother's friend across the road."

> "We [the participant and her sister] took our bicycles and went to our friends' home."

> "So I felt I would rather be with my grandmother or I want to be outside in the garden. But in the house, I did not want to be in the house at all."

> "I locked myself in my room, put on the music. … listen to how they swear and you blow off steam … the way they swear in gangster music. … I say thank you to … Eminem."

Hearing or witnessing violent events are ways in which children are exposed to domestic violence (Child Welfare Information Gateway, 2009) and children may want to physically distance themselves from the event. While the participants indicated that they physically distanced themselves from the domestic violence incident, Davis

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(2008:209) mentions that some children who are exposed to domestic violence may even run away from home. Some participants talked to a trusted person to cope with the domestic violence, as will be discussed in the next sub-theme.

- **Sub-theme 3.2: Talking about the domestic violence**

Four participants found it helpful to talk to someone, such as an adult family member, about the violence they were being exposed to at home. Participants mentioned the following:

> "So when I was with my grandmother, I said 'Grandmother, mom and dad had a fight again yesterday, they yelled at each other again and then dad hit mom again.' "

> "When I go there [to an aunt], there will be someone to comfort me, who will understand what I am going through … then my aunt (would) ask 'Are they fighting again?' "

A trusted adult outside of the immediate family unit could provide emotional support and help the child to feel understood. Hague et al. (2012:29) confirm that children often talk to a grandmother or any trusted adult about their problems as a coping mechanism.

One participant found it helpful to talk to a stuffed toy:

> "I had a big teddy bear and a big doll … then I would sit with my toys and talk to them. … Sometimes I would also fight with them."

Two participants would find solace in prayer:

> "I started to pray a lot … I told the Lord that I did not want … to live like this. I started to go to church and there were people who also prayed for me."

> "As we come from a Christian background I would always just pray."

Participants indicated that they found it helpful to talk about the issues in their home and express their emotions about it. Other participants indicated that they tried to deny or normalise the domestic violence, as will be discussed in the next sub-theme.

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- **Sub-theme 3.3: Efforts to deny or normalise the problem**

Three participants mentioned that their attempt to cope with the domestic violence they were exposed to was to block it out of their awareness or see it as normal behaviour that will pass. Participants stated the following:

> "Won't say I had something to help me cope, I actually just blocked it out."

> "I basically kept everything inside, it's like things have happened at home today, oh well, it will pass and then it's over."

> "We did not have enough space [in the house] for us to run to a bedroom. … We knew that it would eventually stop, it will not last the whole day or the whole night."

> "I blocked out the feeling and I blocked out the thoughts …"

From the above quotes it seems as if denying or blocking out thoughts of the domestic violence were quite regular attempts among the participants to cope with the domestic violence in the home. The literature indicates that the mentioned efforts to cope are commonly found in children exposed to domestic violence. Although children are not necessarily directly exposed to domestic violence, they are still indirectly a victim and are prone to denial and normalisation of the abuse (Johnston, Roseby & Kuehnie, 2009:310). Some participants tried to cope by efforts to support the self.

- **Sub-theme 3.4: Positive self-talk and self-motivation**

A number of participants attempted to cope with the domestic violence by means of self-talk and self-motivation. Four participants mentioned that they used to practice positive self-talk and motivated themselves to cope with the situation. Participants explained these strategies as follows:

> "I always told myself I have to cope and I have to start somewhere and I have to get somewhere to get away from those circumstances."

> "I taught myself that while my mother was alive I lived a negative life, but if you carry on like that you will not reach your dreams."

> "So my main goal was [to] do better in school. The better I did in school, the sooner I could finish school and that would be my chance to get away from the circumstances [at home]."

It is known that children practice self-talk, but in such a way that others are not aware of it (Iwi & Newman, 2011:63). In contrast to children who take on a victim role, some children tend to have a high achievement motivation. Children with high achievement motivation tend to relate success in life to a person' ability and they have a perception that external factors can be influenced, changed or controlled (Berk, 2006:453). Children with these attributes may use their reasoning abilities to motivate themselves. The efforts of the participants to use their reasoning abilities in self-talk and self-motivation is evident from the above quotes.

- **Sub-theme 3.5: Substance use**

Five participants mentioned that they used substances such as cigarettes, alcohol, dagga (marijuana) and Ecstacy during their childhood in an effort to cope during the times they were exposed to domestic violence. These participants shared the following information:

> "I started sitting at the drug houses and not long after that I started smoking cigarettes and then I started smoking dagga. Then I ended by starting to drink pills and smoking Ecstasy."

> "I started to use drugs, I smoked dagga. … I was 14 years old."

> "The times that I was not scared were the times that I used drugs. I would be in my own world … the problems at home were too much for me. The drugs helped to calm me … I was 10 when I started using drugs."

> "I started to smoke … when I was in high school. … I felt that I had to have something. … This is how … cigarettes became part of my life."

> "When I was … 17 I started to drink beer."

The pain of being exposed to domestic violence led half of the participants to use drugs. They used licit forms of drugs, such as cigarettes and alcohol, as well as illicit drugs, such as marijuana and Ecstasy. The vicarious trauma experienced by children exposed to domestic violence contributes to them being more at risk for behaviours such as experimenting with drugs and other mood altering substances (Fischer & Lerner, 2005:370; Lessenger & Roper, 2007:53; Maree, 2003:63; Singh, 2005:29). A study mentioned by Pyrek (2006:224) found that children who are exposed to domestic violence are more likely to abuse drugs. The quotes above indicate that some

participants started to use substances while they were still in their early adolescent years.

3.3.2.4 Theme 4: The effects of domestic violence on participants as young adults

Literature indicates that domestic violence can have immediate and short-term effects on the lives of children who are exposed to it. However, the effects of domestic violence can also be long-term and can last into the adult life stage of those who were exposed to domestic violence in their childhood years (Allen, 2013:2-4; Van der Bosse & McGinn, 2009:57). The participants in this study, as young adults, pointed out five areas of their lives upon which domestic violence had had a noticeable impact. These areas were related to their parenting, behaviour, relationships, resilience and symptoms of trauma.

- **Sub-theme 4.1: Parenting practices**

Five of the participants in the study expressed that the domestic violence incidents that they were exposed to as a child had led them to strive towards being good parents for their own children. However, two other participants admitted that, as a result of exposure to domestic violence during their childhood, they tended to follow the negative examples of their parents when dealing with anger. Participants mentioned the following in this regard:

> "I want to be a good, positive example to them [own children]."

> "I said to myself that I would never in my life let my children go through what I had to … [as a child] I was robbed of my dreams."

> "I feel that my children do not need so much violence in their lives."

> "What I went through, the domestic violence, I often took that out on my children, especially my son, because when he was naughty I would shout at him and hit him and things like that."

> "It makes me sad that I am such a parent. I know I come from that situation, but why do I do it? Why do I go back to that time?"

Harsh discipline and a lack of emotional support and affection often characterise the home environment where domestic violence is present, and children from such

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households can perpetuate this cycle as adults caring for their own children (Waterhouse & Nagia-Luddy, 2009:3). Research indicates that for some women, the physical and emotional effects of domestic violence can have a detrimental impact on their mothering and their relationship with their own children (Hester, Pearson, Harwin & Abrahams, 2007:29). Two participants mentioned the negative effects of their childhood exposure to domestic violence on their parenting practices. On the other hand, some participants made an effort not to perpetuate the parenting practices of their own parents, as they did not want to expose their children to negative experiences they had during childhood.

- **Sub-theme 4.2: Negative behaviours**

Four participants shared that they were physically or emotionally abusive towards their partners and other individuals. They ascribed these behaviours to their inability to control their anger and frustrations as a result of being exposed to domestic violence during their childhood years. Participants said:

> "When he [her husband] just starts to talk loudly, I already start defending myself and then I hit him."

> "There are days that I cannot control it [anger]. There are days that I'm on drugs and then I completely lose control … then I will really hurt people and then I will not even realise that I am hurting them emotionally."

> "I (easily) become aggressive … short tempered."

Children who have been exposed to domestic violence tend to make use of violence and aggression in their interpersonal relationships (Allen, 2013:119; Faller et al., 2003:337-339). Due to socialisation, these children are at risk of regarding such negative behaviours as normal (Singh, 2005:31-32). Almost half of the participants verbalised how the domestic violence that they were exposed to as a child had a negative impact on their behaviour. Fisher and Lab (2010:1063) point out that women's aggression can be linked to their own victimisation.

According to the ecological systems theory, the environment is not static and people live in ever-changing systems (Berk, 2006:29). Children, as they get older, are exposed to new settings and experiences. Exposure to domestic violence during

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childhood, as is evident from the information gained from the participants, can affect children when they reach adulthood. Domestic violence thus contains an element of time, as related to the chronosystem in the ecological systems theory (Berk, 2006:29)

- **Sub-theme 4.3: Effects on interpersonal/intimate relationships**

Three participants admitted that they were, at the time of the study, in an abusive relationship with their intimate partner, while another three participants expressed that they have previously been in abusive adult relationships. One participant indicated that her exposure to the intimate partner violence of her parents created the impression for her that all intimate relationships were like that. Seven participants verbalised that they had an inability to trust their intimate partners. Participants mentioned the following:

> "The times when my children's father and I quarrelled, I felt that maybe a woman should go through this. I thought it was part of relationships, it must happen."

> "I am afraid at this moment. I am afraid to have a relationship, because I fear for my children's lives … I fear more for my children's lives than for my own."

> "I am not interested in a relationship."

> "I do not trust anyone."

> "I do not want a man in my life because I do not want my children to go through the same experiences [the participant had as a child]."

Participants who experienced intimate partner violence in their adult relationships at the time of the study, mentioned the following:

> "He [her partner] says that I do not respect him, that I talk to him as I would talk to my father … The physical violence [in her current relationship] is the same [as in her childhood home]. So there is not a huge difference."

> "Everything is exactly the same as with my father and mother. He [her partner] does exactly the same [as her father]."

One of the characteristics of domestic violence, is the intergenerational nature thereof (Moffat, 2002:91). This is often due to the internalised views children form based on

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the observation of the relationship between their parents (Thompson & Henderson, 2007:89). The findings of the study support research indicating that children who witness domestic violence between their parents are at risk for the perpetration of domestic violence in adulthood (Salkind, 2008:275). The findings further highlights the fact that individuals who were exposed to domestic violence during their childhood tend to mistrust their partners in intimate relationships (Ackerman & Kane, 2007:565).

- **Sub-theme 4.4: Personal resilience**

Three of the participants mentioned that the domestic violence they were exposed to as children helped them to be resilient as adults. They were motivated to rise above their circumstances and be good parents for their own children. Participants stated:

> "I am much more balanced and on my own two feet. Although my mother was not there for me, I will be there for my children."

> "There were times when I felt it was the last train station, throw myself before the train, but then I won and told myself not to let this thing get me down. Maybe I was tripped, but the best thing to do is to get up, shake things off even though I might get tripped again."

> "I believe that what I went through as a young girl made me strong and there are not many things that will get to me. … I know how to stand up for myself and how to protect my family."

Some participants were thus motivated to move on from the traumatic incidents they were exposed to as a child. Becvar (2013:499) highlights that adult resilience is possible despite childhood exposure to domestic violence. It is possible that children who have been exposed to domestic violence may grow up to be adults who are well adjusted (Hutchison, 2011:170). Different factors could play a role in how children react to exposure to domestic violence, amongst others the child's temperament, the type and severity of the violent acts observed, and the availability of support by family members and friends (Barry et al., 2012:29; Webb, 2007:75).

- **Sub-theme 4.5: Symptoms of trauma**

Four participants thought that the domestic violence that they were exposed to as a child caused them to feel distressed when they currently experience incidents which triggered memories of their childhood years. Participants mentioned the following:

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"But the damage is permanent damage … it is permanent damage. Sometimes a person will (just) talk loudly, then I become aggressive."

"If I see other people fight … I don't want to see it because it makes me think back."

"I feel scared, useless, worthless, sad … I cry easily, very easily. … Certain small things … starts a trigger … it can be something that I watch on TV or something that somebody says, or that I see. … and then I remember something, or I dream about things that happened at that time."

"This [childhood exposure to domestic violence] was years ago. I cannot remember the specific words … but the emotions, the movements is still in my hindbrain. … For years I have tried to forget and everything just pops up and once you start talking … it seems like yesterday."

Some participants described how the domestic violence they were exposed to as children caused them to experience long-term symptoms of trauma. The fourth category of exposure to domestic violence described by the Child Welfare Information Gateway (2009) refers to children who deal with the aftermath of the domestic violence and experience post-traumatic stress disorder. These persons may experience long-term emotional and behavioural challenges, and may present as hyper vigilant (Ahmed, 2009:65; Baker et al., 2002:7). Pandey (2008:79) explains that individuals exposed to domestic violence often disclose lifelong symptoms of trauma, such as ongoing flashbacks and nightmares.

3.3.2.5 Theme 5: Suggestions for social work services to children exposed to domestic violence

The findings that were presented in the previous themes, provide evidence that children who are exposed to domestic violence experience both short-term and long-term effects that could have a negative impact on various areas of their lives. It is therefore important to render professional services to these children. The participants were asked to provide suggestions in terms of professional services to children who are exposed to domestic violence. The suggestions made by the participants are discussed as the sub-themes in this section.

- **Sub-theme 5.1: A trusting relationship with the child**

Six participants stressed the importance that professionals, such as social workers and teachers, build a trusting relationship with the child exposed to domestic violence. They mentioned that one could not expect a child to share information about the domestic violence that he or she is exposed to unless a relationship of trust is in place. The following quotes portray the participants' views:

> "… I feel you first have to build that level of trust with the children so they can be totally open with you."

> "… you have to get into the child's mind. You have to be in the child's space, like you are the person who walks with that child step by step. You are not that child, but you feel it with him as if it happened to you."

> "… sit with them and listen to them … try to understand what they are going through … That is what they need … you do not have to say anything, just listen."

The participants' suggestions in terms of a positive relationship with the child correlate with the views of McGee (2013:84) who states that children appreciate a social work response that emphasises empathy and allows them to work at their own pace.

- **Sub-theme 5.2: Educational and support groups**

Four participants stated that they thought that children who are exposed to domestic violence would benefit from group work programmes where information with regards to domestic violence could be communicated in a playful or informal manner. They mentioned that group talks, games and puppet shows could help to teach children and help them talk more freely about their experiences and emotions. Participants had the following views on the use and value of groups:

> "Explain to them on their level of language … small things. If it is in a group session, it must be like a game so they can get into their comfort zone … usually when they play a game or when questions are asked and they get everything right, they feel very proud of themselves."

> "I feel you should take the children in a group, like in a general talk with the grade five kids. And then you explain to them that at the end of the talk if anybody wants to talk about something, they can come to you. … you have to first have a one-on-one session where you can explain to the child that he does not have to be scared [to participate in the group]."

The above views on the value of group work, are reflected in the literature. It can be expected that children who are exposed to domestic violence can benefit from group work sessions where they could share their experiences with one another. Hague et al. (2012:117) mention the value of group work, as children can talk, share and learn from each other and enjoy moments of cheerfulness within the group. Group work can focus on aspects such as building children's self-esteem, teaching them strategies to reduce anxiety and learning healthy ways of coping (Jaffe et al., 2004:41).

- **Sub-theme 5.3: Awareness programmes at schools and in the community**

The importance of creating awareness of domestic violence was suggested by four participants. They were of the opinion that information on domestic violence should either be provided in the classroom or be presented by means of posters in the community. These interventions should highlight children's right to talk about issues of domestic violence and abuse. The participants' suggestions in this regard included the following:

> "… orientation classes can be held and if that can be made part of their curriculum, many identifications [of children being exposed to domestic violence] will be made."

> "I think children should be more exposed to what domestic violence really is … for example a campaign or a banner, or that the community get together in the community hall … so that the children know it is their right to talk about abuse."

> "There are life orientation classes where children learn about sex, HIV and AIDS and all those illnesses, but there should be a topic about growing up in an environment where there is violence. … They can present a drama … in which children are the actors … parents should be invited to attend … so that they can see how the violence affect the children."

Humphreys and Stanley (2006:77) emphasise the importance of increasing awareness and of presenting prevention programmes at schools, as children can get messages about disclosing domestic violence and seek help. Prevention programmes at community level are also advocated by Jaffe et al. (2003:41).

Some participants advised that teachers specifically should be made aware of the effects of domestic violence on children so that they can identify and support children who are exposed to domestic violence. Participants expressed the following views:

> "The teacher does not know what happens at home and she assumes that you should have done your homework and concentrate in class. … You do not talk in class, you are quiet and then you just start to cry. … [the teacher] shouts … 'Why don't you listen … come stand in front of the class.' Then she puts me in the eyes [on the spot]. It was terrible. … I think teachers should look out [for such children]."

> "They should reach out at schools … if teachers notice that children lag behind, they should try to determine the cause. … Children themselves cannot reach out and ask for help. … When I was young my mother used to tell me 'You do not tell the teacher what happens at home' … If teachers take the trouble to get to know the child and build a relationship, then I think they will … achieve something."

As will be discussed in the next sub-theme, some participants were of the opinion that children who are exposed to domestic violence should receive therapy.

- **Sub-theme 5.4: One-on-one counselling**

Three of the participants suggested that one-on-one counselling would benefit children who were exposed to domestic violence. Other participants pointed to the benefits of helping children to talk about their experiences. Participants were of the opinion that therapeutic interventions could support the child to express him/herself and could contribute to the child's well-being. Participants suggested the following:

> "Give that child counselling … support. Like this interview; it also helps. He [the child] can then start opening up and it will help."

> "There are also many children who should have gone for therapy. Domestic violence abuses children."

> "[If children do not talk] they bottle things up … that is when suicide runs through you … things become too much for them. They start to cut their wrists …"

> "[social workers] should visit schools, because the teachers are too busy … to accommodate children who experience problems at home."

> "Counselling should start when children are still young, not when a child is 18 years old, because then the damage has already been done."

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"To talk to them to hear their side of the story, because more and more children use drugs because they are exposed to such situations. … but not force it [the child to talk] …"

"Children should talk … if one can only express oneself."

The above views are confirmed by Hester et al. (2007:199) who emphasise that individual counselling with children could help them to recognise and understand their experiences of domestic violence. Children should be supported to talk about the domestic violence and deal with the complexity of their emotions. Some participants in the study further advocated for the removal of the child from the home environment.

- **Sub-theme 5.5: Placement in alternative care**

Three participants mentioned that, if they were professionals who knew that a child was being exposed to domestic violence, they would remove the child from the parents' care. The following quotes portray the participants' views:

"I always told my mother I wish I knew somebody who can just take me away. You know sometimes when you remove the child from those circumstances, you know like in a … I won't call it a shelter, but just a place where the children can be accommodated. … Because most, 99.9% of children going through this, are talented children. Now they are humiliated because of the circumstances and the situation at home."

"I will remove the child from where the fighting is."

"Take the children and put them in a school … in a school hostel. Then they will concentrate on their school work … they are in the hostel and they do not see all those stuff [the violence at home]."

The participants quoted above made suggestions for care of the children away from the home, for example in a school hostel or shelter. It is recognised that children exposed to domestic violence can be regarded as children in need of care and protection and can be placed in alternative care (The Children's Act, Section 46). However, Francis (2008:12) cautions against taking this route as the first choice for intervention and therefore suggests that children who are removed from their mother's care are not only victimised by the abuser, but by the welfare system as well. The mentioned author stresses that the system may then also fail to support the mother in

her efforts to protect herself and her children, and may further fail to hold the perpetrator accountable for the violence.

- **Sub-theme 5.6: Removal of the perpetrator from the home**

Two participants were in support of removing the perpetrator from the home where the domestic violence occurs. They viewed this as the best solution as the perpetrator was the one that created the problems in the home. They made the following suggestions:

> "I will say they had to take my dad away from my mother and me, because I do not believe that counselling would have helped my dad. The hurt that he brought to me will not go away easily. It would have been best if my dad left the house."

> "… get someone to take him away from us. If you go through it [domestic violence] in the home, go to the police and get help, because things can get very heavy. … you think that everything will be all right but … somebody can get hurt badly."

The removal of the perpetrator can be a solution when considering the best interests of the parent victim and the children who are exposed to domestic violence. Postmus (2014:320) agrees that, instead of removing the children and mother from the family's home, an alternative is to remove the perpetrator by having him arrested or by getting a restraining order. In the South African context, both of these options are stipulated in the Children's Act, Section 46, as orders that the children's court could make.

3.4 CONCLUSION

Chapter 3 focused on the research methodology and the ethical considerations that were followed during the research study. The empirical findings of the study were subsequently presented and discussed. The research findings indicated that exposure to domestic violence, specifically intimate partner violence, negatively affected various areas of the participants' lives. For some participants, these negative effects persisted over the longer term and lasted into adulthood. As indicated by the ecological systems theory, what happened in the child's home negatively affected the child's functioning in other systems such as the school and the peer group, as well as later in life. Participants further provided information on the strategies they used in an attempt to cope with their situation as children, and made suggestions as to how social workers

could best assist children who are exposed to domestic violence. The key findings of the study will be discussed in Chapter 4. The chapter will also contain the conclusions and recommendations that are based on the key findings.

CHAPTER 4

CONCLUSIONS AND RECOMMENDATIONS

4.1 INTRODUCTION

Domestic violence is a worldwide concern (Panday, 2008:29). South Africa has the highest incidence of intimate partner violence, a form of domestic violence, in the world (De la Harpe & Boonzaaier, 2011:147; Gass et al., 2010:582). However, this form of violence seems to be underreported (Aleem, 2013:18) and, although domestic violence has harmful psycho-social effects on children who are exposed to it, these children often go unnoticed (Allen, 2013:120-122; Berns, 2004:23; Panday, 2008:82; Singh, 2005:29). As limited research on children's experiences of exposure to domestic violence were found (Goddard & Bedi, 2009:16; Idemudia & Makhubela, 2011:3343), this study focused on the experiences of children being exposed to domestic violence. Therefore, the goal of the study was to explore the experiences of young adults regarding their exposure to domestic violence during childhood. The objectives for the study were as follows:

- To describe theoretically the phenomenon of domestic violence, with a specific focus on intimate partner violence and its effect on children exposed to domestic violence.

- To explore and describe the experiences of young adults regarding exposure to intimate partner violence as a form of domestic violence during their childhood.

- To explore and describe how young adults attempted to cope with domestic violence as children.

- To explore and describe how domestic violence impacts on the current functioning of the young adult participants.

- To explore and describe participants' suggestions regarding social work services to children exposed to domestic violence.

- To reach conclusions and make recommendations based on the findings of the study regarding service delivery to children who are exposed to domestic violence.

The following research question guided the research study: What are young adults' experiences regarding exposure to domestic violence during childhood? The answer to this research question will be addressed in the following section, in which the key findings, conclusions and recommendations will be discussed.

4.2 KEY FINDINGS, CONCLUSIONS AND RECOMMENDATIONS

Six objectives were formulated for the research study. The key findings, conclusions and recommendations of the study will be discussed according to the six objectives of the research.

4.2.1 Objective 1: To describe theoretically the phenomenon of domestic violence, with a specific focus on intimate partner violence and its effect on children exposed to domestic violence

As a background to the empirical research, the researcher firstly contextualised the phenomenon of domestic violence, specifically intimate partner violence, and the effects that domestic violence could have on children. This information was presented in Chapter 2 and formed the literature review for the study. The key findings from this section are as follows:

- Domestic violence refers to abusive behaviours including physical, sexual and emotional abuse, with the intent to maintain control and power over a person in a domestic relationship. Intimate partner violence as a form of domestic violence, refers to abusive behaviours between individuals within an intimate relationship.

- Domestic violence occurs in all socio-economic, racial and cultural groups, however it is an underreported phenomenon. South Africa has the highest incidence of intimate partner violence in the world. Despite its high incidence, domestic violence is not specifically categorised as a crime in South Africa. Statistics of domestic violence is therefore inaccurate.

- Children's exposure to domestic violence either involves hearing, seeing, intervening in and experiencing the aftermath of violence in the home. Children are considered to be the hidden or silent victims of domestic violence because of wrongful thinking that children are only harmed by domestic violence if they are the

direct victims thereof. Also, children exposed to domestic violence tend to remain silent about it.

- Exposure to domestic violence can negatively affect children in all domains of their development and functioning, namely in the physical, intellectual, behavioural, social and emotional domains. The effects of exposure to domestic violence can manifest in emotions and behaviours such as anxiety, fear, aggressive behaviours, suicidal thoughts, isolation and a drop in academic performance.

- Domestic violence further negatively affects the family and home environment, while it hampers secure attachment and parenting capacity.

- Children exposed to violence in the home are at risk of perceiving violence as normal behaviour within the home environment. They consequently get involved in violent relationships in their adult life and may perpetuate the violence when they become parents. These aspects contribute to domestic violence being an intergenerational phenomenon.

- Although many intervention strategies are suggested for dealing with domestic violence, in South Africa there seems to be limited intervention programmes aimed specifically at children who are exposed to domestic violence.

4.2.2 Objective 2: To explore and describe the experiences of young adults regarding exposure to intimate partner violence as a form of domestic violence during their childhood

The following key findings are based on the exploration of the participants' experiences of their exposure to intimate partner violence during their childhood:

- All the participants were exposed to intimate partner violence in which the mother was the victim, while the perpetrators were either the biological father, stepfather of the mother's male partner. The intimate partner violence included physical and verbal abuse of the mother.

- Most of the participants expressed alcohol abuse, jealousy and unreasonable demands as reasons for the male partner becoming abusive towards the mother. However, as children the participants were not always aware of why some events of intimate partner violence occurred.

- The participants were aware of the effects of the domestic violence on the mother, as they could observe the bruises inflicted on the mother, the physical pain that the mother experienced and, in some cases, the mother's need for medical care.

- The domestic violence affected the home environment in different ways. Participants at times had to sleep over at family or neighbours, while their mothers were often emotionally available to them as children. Further, the acts of domestic violence could not always be predicted, which affected their sense of safety in the home and resulted in some participants becoming anxious and hyper vigilant.

- The domestic violence also affected the children's role in the home. Half of the participants wanted to protect their mother, while some participants took over the parental role of the mother in the home.

- Their exposure to domestic violence had severe emotional effects on the participants. They mostly experienced anxiety and fear, to the extent that some participants either had suicidal thoughts or tried to commit suicide.

- The domestic violence also affected the relationships in the home. Some participants blamed the mother for "allowing" the violent incidents to happen and others developed hateful feelings towards the perpetrator.

- Participants mentioned that the violence in the home negatively affected their behaviour. Most of these participants experienced increased aggressive behaviours.

- The domestic violence affected the participants' functioning in other social systems, in line with the theory of the ecological systems theory. Some participants' school performance dropped, mainly as a result of an inability to concentrate. A number of participants tended to isolate themselves, with the result that they had very few or no friends or that they withdrew from their peers. In some cases their isolation was a result of a lack of time for peer interaction because the participant took on the mother's responsibilities in the home.

- Some participants had a negative experience of the police and reported that the police were found to be unhelpful towards the victims of domestic violence.

- More than half of the participants were forced to keep quiet about the violence in the home when they were children, with a result that their exposure to domestic violence remained a secret. For three participants the interview with the researcher

was the first time that that they discussed her exposure to domestic violence during their childhood.

4.2.3   Objective 3: To explore and describe how young adults attempted to cope with domestic violence as children

The participants expressed different ways in which they attempted to cope with domestic violence when they were children.

- Half of the participants mentioned that, in an attempt to cope with the domestic violence, they left the home temporarily by going to family members or friends, by sitting outside or by locking themselves in their room until the violence stopped.
- Some participants felt that it helped to talk about the violence they were exposed to in the home, to someone they trusted. These trusted persons were mostly adults such as a grandmother or aunt. In one case the participant talked to her toys, while others reported that they used prayer to cope.
- Some participants tried to deny or normalise the domestic violence. They mostly blocked out their awareness of the domestic violence incidents or suppressed their awareness thereof by telling themselves that the incident would soon be over.
- Almost half of the participants practiced self-talk or self-motivation in order to encourage and motivate themselves to cope with the situation.
- Five participants admitted that the violence they were exposed to as a child caused them to abuse substances. These substances included licit and illicit substances and some participants were as young as 10 and 14 when they started to use the substances.

4.2.4   Objective 4: To explore and describe how domestic violence impact on the current functioning of the young adult participants

Participants expressed different ways in which the domestic violence they were exposed to as a child, impacted on their current functioning.

- Half of the participants indicated how their exposure to domestic violence as children had a positive effect on their parenting, as it encouraged them to be better

parents to their children. However, two participants verbalised that they had harsh parenting styles as they took out their anger on their children.

- Some participants expressed that they engaged in negative behaviours towards their partners or other individuals. Aggressive behaviours were especially common.

- Three participants indicated that they were in an abusive intimate relationship at the time of the research, while another three participants were previously in abusive adult relationships. Most of the participants indicated that they have developed a mistrust in intimate relationships as a result of their exposure to domestic violence during their childhood.

- Three participants mentioned that being exposed to domestic violence as a child made them to be resilient. They believed it made them to be stronger and able to stand up for themselves.

- Four of the participants experienced triggers of past events in that they still felt upset when they observed any type of violent behaviour.

4.2.5 Objective 5: To explore and describe participants' suggestions regarding social work services to children exposed to domestic violence

Participants had different views on what they felt would be necessary to help children who are exposed to domestic violence.

- Most of the participants believed that it was important to firstly build a trusting relationship with a child when one wants the child to share his or her experiences of domestic violence, as it was such a sensitive issue.

- Four participants indicated that group work intervention with the use of play activities could facilitate the process of the child opening up towards a professional. Children would also be able to find support in the groups.

- Almost half of the participants expressed that awareness campaigns within schools and communities could educate children about the dynamics of domestic violence. Awareness programmes could be helpful to identify children who are exposed to domestic violence, so that these children can be supported to talk to someone about their problems. Teachers should also be made aware of the effects of domestic violence on children, so that they can identify, understand and support these children in the school setting.

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- Three participants felt that one-on-one counselling could help children to express their experiences and emotions towards a professional person. Most of the participants emphasised the importance of providing children with an opportunity to talk about their experiences.

- Three participants indicated the need to remove children from their homes when they are exposed to domestic violence. Growing up in another environment would give the child the opportunity to develop their talents and concentrate on their school work.

- Two participants felt that the best solution to help children being exposed to domestic violence would be to remove the perpetrator from the home so that the child could grow up in a safe home environment.

4.2.6 Objective 6: To reach conclusions and make recommendations based on the findings of the study regarding service delivery to children who are exposed to domestic violence

Based on the key findings of the research, the following **conclusions** are stated:

- Domestic violence is a social issue, globally and in South Africa. South Africa is the country with the highest incidence of intimate partner violence in the world.

- Exposure to domestic violence can have extremely harmful consequences for children, even when they are not direct victims of the violent acts.

- Children who are exposed to domestic violence experience the negative effects thereof in all domains of their development and in various areas of their functioning, including their emotional, educational and social functioning.

- Domestic violence has a negative effect on the child's home environment and some children may take on adult roles in the home. However, the negative consequences are not limited to the home environment, but can circle out to other areas of their lives, for example to their school situation and the formation of friendships. The negative effect on their school performance can prevent children from achieving good academic outcomes and subsequently their chances of further studies and future employment.

- Although children may know the reasons for domestic violence, for example alcohol abuse, they may not always be able to predict when the violent events will

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occur. This fact makes the home environment unpredictable and can lead to a loss of a sense of safety for the child. Children exposed to domestic violence therefore tend to be constantly vigilant and "on their toes." For their healthy development, children should experience the home as a safe environment.

- Children generally do not talk about their exposure to domestic violence. One of the reasons is that they are being told by the adults to remain silent about what happens in the home. This silence can last into the adult years and can be seen as one of the reasons why children remain the silent or hidden victims of domestic violence. Remaining silent about the domestic violence can also prevent children from receiving help from professionals.

- The ecological systems theory provides support for the wide spread effects of domestic violence. This theory helps researchers to understand the effects of domestic violence on different areas in a person's life, as well as on its influence over time.

- Children exposed to domestic violence may use different strategies to cope with the situation. Some of the strategies include efforts to distance themselves from the violent events or talk to a trusted adult. Other strategies can be seen as less healthy coping mechanisms, for example by blocking out or suppressing thoughts and emotions about the domestic violence.

- Negative emotions and behaviours may be carried over into the adult lives of children who are exposed to domestic violence. Aggressive behaviours and emotional distress seem to be common consequences, and can play a role in the intergenerational nature of domestic violence. These behaviours and emotions are often triggered by situations that remind the adult person of the domestic violence in his or her childhood.

- Some persons may develop greater resilience due to their exposure to domestic violence. The development of resilience seems to be the result of the person's reasoning based on achievement motivation, which supports thoughts that a person can become strong despite negative environmental factors. Another factor that supported resilience, was the participants' aspirations not to expose their own children to the circumstances that they grew up in. Social workers and other helping professionals who provide counselling to children exposed to domestic

violence can look out for opportunities to identify strengths that can support the resilience of these children.

The following **recommendations** are based on the findings of the study:

- Due to the extremely high incidence of domestic violence in South Africa and the harmful short- and long-term effects and intergenerational nature thereof, persons in the social sciences professions need to prioritise interventions that focus on children who are exposed to intimate partner violence.

- Educational and awareness campaigns in schools and within communities need to be implemented to teach individuals the dynamics of domestic violence and offer relevant solutions. As domestic violence was found to be a hidden problem, it is important to share information with the general public, as domestic violence is prevalent in all socio-economic and socio-cultural groups. Welfare organisations and schools can incorporate such awareness campaigns into the planning of their annual programmes.

- National and provincial departments of education can plan specific educational programmes that can be presented in schools as part of the curriculum. Subjects such as life orientation can place emphasis on the phenomenon and dynamics of domestic violence, and encourage children to not keep it hidden or a secret when they are exposed to domestic violence.

- Social workers, as a profession that focuses on social issues, can take responsibility of offering training to teachers and other professionals on the identification and handling of children exposed to domestic violence. The training can include information on, amongst others, the emotional, behavioural and academic effects of exposure to domestic violence, building a trusting relationship with a child when suspecting the existence of domestic violence, as well as the teachers' legal obligations and reporting protocols.

- Social workers can further offer training to police officials on the dynamics of domestic violence and the importance of their involvement in the process in order to encourage people to report domestic violence. Police officers are often involved in domestic violence cases when the victims, family or neighbours report the violent incidents to the police.

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- Priority should be given to keep the child who is a victim of domestic violence in the home and safe from violence. Removing the perpetrator from the home instead of removing the children from the home should be considered first, as statutory intervention and placement in alternative care can re-victimise this vulnerable group of children. Social workers and other professionals who are responsible for the implementation of the Children's Act 28 of 2005 and the Domestic Violence Act, Act116 of 1998, need to familiarise themselves with the Acts and be aware of the different interventions to protect vulnerable children.

- In the light of the lack of existing programmes that focus on children who are exposed to domestic violence, social work organisations and universities should develop and evaluate programmes that focus specifically on the child who is the direct or indirect victim of domestic violence. Early intervention and preventative programmes can help to break the cycle domestic violence.

- Based on the high prevalence of domestic violence, large scale South African studies should be conducted to focus on different aspects of the phenomenon. The focus of the studies can be on factors such as the effects of domestic violence on children and families, the perceptions and experiences of perpetrators of domestic violence, and the evaluation of intervention strategies for the prevention and handling of domestic violence.

4.3 ACCOMPLISHMENT OF THE GOAL AND OBJECTIVES OF THE STUDY

The goal of the study was to explore the experiences of young adults regarding their exposure to domestic violence during childhood. Table 2 summarises how the objectives of the study were met in order to reach the goal of the study.

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Table 2: Accomplishment of the objectives of the study

Objective	Accomplishment of the objective
Objective 1: To describe theoretically the phenomenon of domestic violence, with a specific focus on intimate partner violence and its effect on children exposed to domestic violence	This objective was achieved by means of the literature study in Chapter 2, which focused on domestic violence and specifically on intimate partner violence and its effects on children.
Objective 2: To explore and describe the experiences of young adults regarding exposure to intimate partner violence as a form of domestic violence during their childhood	The experiences of the participants regarding their exposure to domestic violence was discussed under the empirical finings in Chapter 3. The types of violence they were exposed to, as well as the effects on them as children, were described; thereby achieving the objective.
Objective 3: To explore and describe how young adults attempted to cope with domestic violence as children	Objective 3 was achieved by describing young adults' coping strategies as children in the empirical findings in Chapter 3. Different coping mechanisms were described.
Objective 4: To explore and describe how domestic violence impacts on the current functioning of the young adult participants	Objective 4 of the study was achieved by means of the presentation of the empirical findings in Chapter 3 that highlighted how exposure to domestic violence during their childhood affected the participants in their adult life.
Objective 5: To explore and describe participants' suggestions regarding social work services to children exposed to domestic violence	Related to Objective 5, the empirical findings described in Chapter 3 contained the participants' suggestions for social work services to children exposed to domestic violence.
Objective 6: To reach conclusions and make recommendations based on the findings of the study regarding service delivery to children who are exposed to domestic violence	In Chapter 4 the researcher provided conclusions and recommendations based on the key findings of the study. Objective 6 was thus achieved.

4.4 CONCLUDING STATEMENT

This study aimed to explore the experiences of young adults regarding their exposure to domestic violence during childhood. The findings of the study made it clear that domestic violence had an extremely negative effect on the participants during their childhood, but that it also affected them as young adults. Their exposure to intimate partner violence negatively affected various areas of the participant's lives during their childhood. It further affected the home environment in which they grew up. Further, the participants' functioning in the wider environment such as the school and the peer group were affected. The participants tended to remain silent about the intimate partner violence in their homes. The findings of the study correlates with international research on the experiences of children who are exposed to domestic violence.

As children tend not to talk about their experiences of domestic violence, the domestic violence remains a hidden phenomenon. Social workers should therefore take responsibility to reach out to this vulnerable group of children. This is especially important due to the high prevalence of domestic violence, specifically intimate partner violence, in South Africa. Apart from the need for individual therapy, a large focus of intervention should be on prevention and early intervention programmes to curb the prevalence and intergenerational trend of domestic violence.

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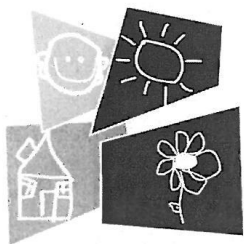Moffatt, G.K. 2002. *A Violent Heart: Understanding Aggressive Individuals.* Westport: Praeger Publishers.

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APPENDIX A

PERMISSION LETTER OF ORGANIZATION

Child Welfare Tshwane

77 Nicolson Street
Bailey's Muckleneuk
PO Box 503
Pretoria 0001

Tel: 012 460 9236
Fax: 012 460 6333

E-mail: info@childwelfare.co.za
www.childwelfare.co.za

Child Welfare Tshwane
NPO Reg No 001-612

1 Julie 2014

Head Office
77 Nicolson Street
Bailey's Muckleneuk
Tel: 012 460 9236
Fax: 012 460 6333

Risk Assessment
Intakes
Tel: 012 343 9392
Fax: 012 343 8788

Therapy Unit
Tel: 012 343 0535
Fax: 012 343 8788

Adoptions
Tel: 012 460 9236

Atteridgeville
Tel: 012 373 8131
Fax: 012 373 8306

Bramley
Children's Home
Tel: 012 460 6375
Fax: 012 460 6372

Centurion
Tel: 0861 298 298
Fax: 012 343 8788

Olievenhoutbosch
Tel: 072 385 1030

Eersterust
Tel: 012 806 7046/7
Fax: 012 806 7283

Elandspoort
Tel: 012 754 5981/2

Mamelodi
Tel: 012 805 4056/7
Fax: 012 805 4997

Mid City
Tel: 012 322 5803
Fax: 012 343 1373

Affiliated to
Child Welfare
South Africa

CHILD WELFARE
SOUTH AFRICA

Ons Verw: L Nell/fs
Afskrif aan: Dr M P Le Roux

Prof Lombard
Departementshoof:
Departement Maatskaplike Werk en Kriminologie
Universiteit van Pretoria

Geagte Prof Lombard

TOESTEMMING TOT NAVORSING BY CHILD WELFARE TSHWANE, EERSTERUST

Hiermee word toestemming verleen vir Me Yolandi Strydom om die navorsing te
onderneem en dat sy by Eersterust kantoor haar proefpersone mag selekteer.

Ons sal baie graag 'n afskrif van die verhandeling wil ontvang.

Die uwe

LINDA NELL
DIREKTEUR

108

APPENDIX B

UNSTRUCTURED INTERVIEW SCHEDULE

Research: Young adults' experience of domestic violence during childhood

Section A: Biographical information

1. How old are you?
2. Home language
3. Where do you live?
4. Who lives with you?
5. How old were you when you were exposed to domestic violence?
6. Were you exposed to more than one incidence?
7. What type of domestic violence were you experienced to?

Section B: Interview schedule:

As discussed with you, this interview is about your experiences of domestic violence during your childhood. By domestic violence, it refers to any type of violence, including verbal, emotional, physical, etc.

1. Tell me about your experiences of domestic violence as a child and as a young adult.
2. Tell me what you did and how you attempted to cope with the violence in your home during your childhood and what you think can be done to support children who are exposed to domestic violence.

APPENDIX C

INFORMED CONSENT LETTER

UNIVERSITEIT VAN PRETORIA
UNIVERSITY OF PRETORIA
YUNIBESITHI YA PRETORIA

Faculty of Humanities
Department Social Work and Criminology

INFORMED CONSENT (RESPONDENT)

Researcher	:	Yolandi Strydom
Contact details	:	012 420 5321
Academic institution	:	University of Pretoria, Department of Social Work and Criminology

Name of respondent: _____

1. **Title of the study:** Young adult's experiences of domestic violence during childhood

2. **Goal of the study:** The goal of the study is to gather information on young adult's experiences of domestic violence during their childhood within the Eersterust community. The information gathered in the research study could help social workers to understand the experiences of children when being exposed to domestic violence and to determine service delivery to these children.

3. **Procedures:** I would be asked to take part in a face-to-face interview with the researcher, Miss Strydom. The interviews will last approximately 30-45 minutes and I will be asked about my experiences of being exposed to domestic violence, specifically intimate partner violence during my childhood. The interview will also include how I attempted to cope with the domestic violence, the impact it has on my current functioning as well as suggestions from my part on how social work services could help children who are exposed to domestic violence.

    The interview will be private and will take place in an office at the Child Welfare Tshwane Eersterust community office. The interview will be audio recorded so that only my voice will be heard. The recording and Miss Strydom's notes will be stored safely at the Department of Social Development and Criminology at the University of Pretoria after the interview.

4. **Risk factors:** I understand that during the interview I will be sharing personal experiences and that I will be talking about myself, my family and possibly my community. If at any time I feel emotionally upset, I can contact Miss Strydom to arrange counseling en support for me by a social worker from Child Welfare Tshwane.

APPENDIX D

LETTER OF ETHICAL CLEARANCE

Faculty of Humanities
Research Ethics Committee

5 August 2014

Dear Prof Lombard

Project:	**Young adults' experiences of domestic violence during childhood**
Researcher:	**Y Strydom**
Supervisor:	**Dr MP le Roux**
Department:	**Social Work and Criminology**
Reference numbers:	**29053732**

Thank you for the application that was submitted for ethical consideration.

I am pleased to inform you that the above application was **approved** by the **Research Ethics Committee** on 31 July 2014. Data collection may therefore commence.

Please note that this approval is based on the assumption that the research will be carried out along the lines laid out in the proposal. Should the actual research depart significantly from the proposed research, it will be necessary to apply for a new research approval and ethical clearance.

The Committee requests you to convey this approval to the researcher.

We wish you success with the project.

Sincerely

Prof Karen Harris
Acting Chair: Postgraduate Committee &
Research Ethics Committee
Faculty of Humanities
UNIVERSITY OF PRETORIA
e-mail:Karen.harris@up.ac.za

Research Ethics Committee Members: Dr L Blokland;Prof Prof M-H Coetzee; Dr JEH Grobler; Prof KL Harris (Acting Chair); Ms H Klopper; Dr C Panebianco-Warrens; Dr Charles Puttergill, Prof GM Spies; Dr Y Spies; Prof E Taljard; Dr P Wood