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Unseen but Not Unheard

**A Qualitative Study on Social Workers in Illinois, USA, That
Work with Children Who Witness Domestic Violence**

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Abstract

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Title: Unseen but Not Unheard: A Qualitative Study on Social Workers in Illinois, USA, That Work with Children Who Witness Domestic Violence

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According to a previous study on domestic violence, in homes where violence occurs, 90 percent of children witness the abuse that takes place. The aim of this study is to understand how *witnessing* domestic violence affects children. Through six semi-structured interviews with social workers in Chicago and Decatur, Illinois, the impact on children who have witnessed violence in the home, and the methods used to help these children, will be discussed. This study was conducted using a qualitative research method. The study's findings have been analyzed using Abraham Maslow's theory of *Maslow's Hierarchy of Needs* and Richard Lazarus and Suzan Folkman's theory of coping. The results show that social workers describe domestic violence as a multifaceted problem that, when witnessed by children, can significantly impact a child's general health and well-being. Two methods, Child-Parent Psychotherapy and Child-Centered Play Therapy, that are used to help children exposed to domestic violence overcome their anxieties and traumas are also discussed.

Keywords: Domestic Violence, Children Witnessing Violence, Social Work, Human Needs, Coping

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1. Introduction

1.1 Problem Statement

A child's right to a healthy life free from violence and abuse is one of the main agendas of the United Nations Convention on the Rights of the Child (Unicef, n.d). Yet even with this goal in place, children around the world struggle for the most basic human rights. This is mainly due to insufficient child protection laws that fail to address unfair discrimination towards minors (Daly, Thorburn Stern & Leviner, 2022; Wessells & Kostelny, 2021). Each year, one in two children, globally, are subjected to some form of violence, most often suffered at home by a parent or guardian (Daly, Thorburn, Stern & Leviner, 2022; Wessells & Kostelny, 2021). Still today, violence that takes place domestically is often considered a private family matter. Because of this, many children have gone unrecognized and not received the help they need (Bala, 2008; Wessells & Kostelny, 2021).

Domestic violence remains a widespread issue in the United States and children are often victims. One in four children are either abused themselves or bear witness to the abuse that occurs in the household (Schubert, 2022). Domestic violence includes any form of physical, sexual, psychological, and/or economic abuse, that occurs within the home, by a family or household member (Finnbogadóttir & Dykes, 2016; Enache, Matei & Tuşa, 2018; Meltzer, 2009). Although many studies on domestic violence often identify men as the main perpetrators of violence, and women as their victims (Barbosa, 202; Clements et al. 2021; Schubert, 2022: 176; Payne, 2007: 292), the roles can, in some cases, be reversed (Schubert, 2022: 176; The Network, 2020: 12). However, regardless of the perpetrator's gender identity, all forms of domestic violence, in this study, will be recognized as harmful to a child's development and well-being, as followed by other studies (Pirneeci, 2012: 23; Wessells & Kostenly, 2021:6). Therefore, I have made the conscious decision to use the term domestic violence and not, men's violence against women.

Recent studies show an increase in domestic violence cases in the United States, since the Coronavirus pandemic, when many families were forced to stay at home (Baidoo et al. 2021; Leslie & Wilson, 2020). In the state of Illinois, domestic violence during the Coronavirus

pandemic became an acute issue due to an increase in more serious injuries. For example, in 2020, Illinois domestic violence hotlines had a 36 % increase in phone calls from residents seeking counseling (The Network, 2021:123). In 2021, a 64 % increase in domestic violence-related shootings was recorded by the Chicago Police Department (The Network, 2021: 117, 5). Another study showed that 94% of victims calling for support also stated that their children needed help (ibid.). Against this background, I was granted permission by the Department of Social Work at Lund University to conduct fieldwork in Chicago and Decatur, Illinois, for this thesis.

In homes where violence occurs, about 90% of children witness the abuse that takes place (The Network, 2021:69). Studies also show that both witnessing violence and experiencing it firsthand can have long-term emotional and physical consequences: such as poor health, underachievement in education, and an increased risk of mental illness (Gerhardt, 2015; Forke et al. 2019; Hall, 2019; Wessells & Kostenly, 2021). Even when the violence is not directed at the child, witnessing domestic violence can be a traumatic experience, causing high levels of stress that can affect a child's neurobiological system, including brain development and growth (Gerhardt, 2015: 65, 66; Mueller & Tronick, 2019). High levels of stress, as a result of being subjected to violence, are also known to lead to post-traumatic stress disorder (PTSD), which can affect an individual throughout their lifetime (Gerhardt, 2015:176; Levendosky et al. 2013; Meltzer et al. 2019). Several studies support the notion that witnessing domestic violence is as harmful to a child's emotional and physical development as enduring abuse firsthand (Finnbogadóttir, Baird & Thies-Lagergren, 2020; Mueller & Tronick, 2019; Schubert, 2022; Wathen & MacMillan, 2013).

This study is relevant to social work based on the crucial role social workers have in helping protect children (Enache, Matei & Tuşa, 2019). Because of the many detrimental effects witnessing violence can have on a child, social workers have acknowledged all forms of child exposure to domestic violence as a type of child maltreatment (Enache, Matei & Tuşa, 2019; Mürger & Mattson, 2020). A social worker's job is not only to help victims of violence by steering them from harm's way but also to help the victims overcome their traumas (ibid.). This paper will mainly focus on understanding how children, up to six years old, can be impacted by witnessing domestic violence. Although many studies have already been made on the effect violence in the home can have on a child, this study wants to further an awareness of the severity of the problem from a social worker's perspective.

1.2 Purpose and Research Questions

The purpose of this study is to understand how social workers in Illinois working with children who have witnessed domestic violence, describe the impact that witnessing violence can have on a child. This study will also look at some methods that social workers use to help these children. The questions that this paper addresses are:

1. How do social workers define domestic violence?
2. From a social worker's point of view, how does witnessing domestic violence impact children?
3. What methods do social workers use to help children who have witnessed domestic violence?

2. Literature Review

This section of the paper looks at previous research that addresses the impact witnessing domestic violence has on a child. A general definition of domestic violence will be given, followed by a social work perspective. My aim is not only to provide an understanding of the complexity of the problem but also to create awareness as to how the understanding of domestic violence has changed over time. A few examples of how witnessing domestic violence impacts a child's health and wellbeing, will also be given. Lastly, clinical methods used by social workers will be discussed.

2.1 Finding Literature

The articles referred to in this paper were mostly found through the research platform LUBsearch. Some of the search terms used were: "Witnessing Domestic Violence: The Effects on Children", "Social Work-Domestic Violence- Children", "Domestic Violence in The United States - Children", "Early life Exposure - Violence", "Interventions: Children Who Experience Domestic Violence", "Child-Parent Psychotherapy" and, "Play Therapy and Witnessing - Violence". References from the different books and articles used were also considered. Scopus, an online database that provides an overview of peer-reviewed literature worldwide, was also helpful. In addition to applying the "Peer Reviewed" filter to each of my searches, I used the website Ulrichsweb, to help me establish that each article came from a peer-reviewed source.

2.2 Domestic Violence

2.2.1 A General Definition of Domestic Violence

The term domestic violence emphasizes the complex issue of violence within the home. It can be defined as any threat or execution aimed to cause harm (Clements et al. 2021; Hamby, 2017). More specifically, this may include physical abuse: hitting, slapping, or punching; sexual abuse, including all forms of rape, sexual trafficking, sexual harassment, intimidation, and psychological abuse (Sinisalo & Moser Hällén, 2018: 45; Ticu, 2022). Because of its multifaceted character, domestic violence is complicated to define. The use of mind games,

manipulation, mockery, scare tactics, shaming and isolating the victim are only some examples of the subtle complexity of violent tactics (Sinisalo & Moser Hällén, 2018: 38, 316). In many cases, the perpetrator uses these forms of abuse simultaneously, in order to enhance a sense of power and control (Enache, Matei & Tuşa, 2019; Sinisalo & Moser Hällén, 2018: 15). Although this study focuses on children who witness violence, particularly witnessing abuse between parents, it is also important to shed light on the severity of domestic violence directed against children (Bala, 2008; Clements et al. 2021; Kostelny & Wessells, 2021). Adults who have been abused in the past are more than likely to abuse their own children (Pirneci, 2012). Other types of domestic abuse directed toward children involve various forms of corporal punishment (Hamby, 2017; Kostelny & Wessells, 2021). Still today, in many cultures and homes, spanking, slapping, or hitting a child is accepted as a reasonable form of discipline, allowing the abuse to seem “normal” (ibid).

Although domestic violence is nowadays an openly discussed and debated topic by politicians and lawmakers, this has not always been the case (Bala, 2008; Ticu, 2020; Sinisalo & Moser Hällén, 2018: 15, ff.). Until relatively recently, domestic violence has been considered a private matter (Kostelny & Wessells, 2021). It was not until the 1960s and 70s in the United States that awareness surrounding intimate partner violence, such as violence between a husband and wife, and child abuse, started to develop. This change primarily had to do with the growing feminist movement (Bala, 2008). However, the notion that what happens in the home is a private matter, still exists, and keeps many from reporting domestic violence (Ticu, 2020). Furthermore, when a victim is afraid of not being believed or taken seriously, there is even more hesitation to report the violence (Baidoo et al. 2020; Pirneci, 2012; Payne, 2007). And, as a result, many victims of domestic violence, including children who are witnesses, will go unseen, making it hard to accurately measure the extent of the problem (Kostelny & Wessells, 2021; Bala, 2008).

Being a victim of domestic violence is a traumatic experience, which can cause both physical and mental harm (Pirneci, 2012; Wessells & Kostenly, 2021). Physical injuries may cause serious health problems and even death (ibid.). Other common consequences of domestic violence may involve post-traumatic stress, anxiety and depression (Bright, Burton & Kosky, 2020; Forke et al. 2019; Pirneci, 2012). For children, early exposure to violence is likely to stunt brain growth and normal development (Gerhardt, 2015: 65, 66; Mueller & Tronick, 2019). Addressing domestic violence as a social problem is relatively new, even though it has existed throughout the centuries (Moser Hällén & Sinisalo, 2018: 17; Ticu, 2020). Up until the 1980s,

few studies focused on addressing the issue of domestic violence and its effects on children (Bala, 2008). Today, however, it is a field of research that is integrated into many academic disciplines, such as medicine, psychology, and social work.

2.2.2 A Social Work Definition of Domestic Violence Involving Children

Domestic violence is recognized and defined by social workers as a complex phenomenon, involving various forms of physical, sexual, psychological and financial abuse that cause both short and long-term consequences in victims (Enache, Matei & Tuşa, 2018; Münger & Mattson, 2020). However, by acknowledging the interdependent relationship between social structures and individual behavior, social workers acknowledge that domestic violence should not solely be reduced to the level of the aggressor (Enache, Matei & Tuşa, 2019; Sinisalo & Moser Hällén, 2018: 25, 30, 535). Certain social norms, values, and traditions must also be held accountable for the justification and normalization of domestic violence and violence against children (Kostelny & Wessells, 2021). For example, patriarchal structures, systematically favoring the rights and privileges of men over women, play an essential role in the widespread problem of domestic violence and violence against children (ibid.). Wives most often become the victims of a husband's abusiveness, but children also suffer inherently (Bernstein, Timmons & Lieberman, 2019; Clements et al. 2021; Hamby, 2017). As mentioned before, witnessing one parent use violence against the other can be traumatizing for a child (Clements et al. 2021; Levendosky et al. 2013; Meltzer et al. 2019). This may include hearing yelling, seeing bruises and other injuries, or watching property being destroyed (Schubert, 2022). Despite this, some children take it upon themselves to protect the parent who is being abused, by intervening or calling for help. This puts the child at risk of being hurt or punished themselves (Kostelny & Wessells, 2021; Osofsky, 2003). Moreover, studies show that early childhood exposure to violence can have a crucial impact on a child's neurological development, general health and well-being (Gerhardt, 2015:59; Mueller & Tronick, 2019; Forke et al. 2019). Taking all these factors into consideration, many social workers have defined all forms of child exposure to domestic violence to be a type of child maltreatment (Enache, Matei & Tuşa, 2018; Münger & Mattson, 2020).

2.3 The Impact of Domestic Violence on Children

This section focuses on understanding how and in which ways exposure to domestic violence can cause such significant consequences in children.

2.3.1 Domestic Violence: The Brain and The Body

Research done on childhood exposure to domestic violence has shown that it can have a negative impact on a child's neurological development, because it can cause cortisol levels to spike, which leads to stress and anxiety (Gerhardt, 2015: 65, 66). The younger the child is, the higher the impact of stress on the body. Babies, with their undeveloped systems, are particularly vulnerable (ibid.). Studies have also shown that children, up to the age of five years old, who have experienced a high level of stress due to experiencing violence are more likely to have smaller brains (Ghosh Ippen, et al. 2011; Mueller & Tronick, 2019). Even unborn children, still in the womb, may be harmed as a result of violence directed against the mother. The unborn child is not only at risk of being physically harmed by the perpetrator but is also likely to be affected by the high levels of cortisol that circulate throughout the mother's body (Finnbogadóttir & Dykes, 2016; Mueller & Tronick, 2019).

2.3.2 Domestic Violence: Post-Traumatic Stress

For most children, experiencing violence is traumatic, and will likely affect them throughout their life (Gerhardt, 2015: 149; Meltzer et al. 2019; Wathen & MacMillan, 2013). Post-Traumatic Stress Disorder (PTSD) is a common consequence among children who witness domestic violence (Gerhardt, 2015:135; Levendosky et al., 2013). Intensive and intrusive thoughts, flashbacks, 'reliving' the trauma and panic attacks are some characteristics of PTSD. As a result, PTSD often causes poor mental health and can lead to further anxiety and even depression (Gerhardt, 2015:135). Children who do not receive adequate help for their traumas are more prone to suffer from further consequences, such as substance abuse and other forms of self-harm; which may cause long-lasting, general health problems (Forke et al. 2019; Geddes Hall, 2019). And furthermore, children subjected to domestic violence, who do not receive help, are more likely to become either victims or perpetrators of violence themselves in future romantic or intimate relationships (Osofsky, 2003; Geddes Hall, 2019; Wathen & MacMillan, 2013).

2.3.3 Domestic Violence: Children's Behavior

Witnessing domestic violence can psychologically harm a child, by affecting their emotional and behavioral development (Gilbert et al. 2009; Levendosky et al. 2013; MacMillan et al. 2008). Studies show that it is not uncommon, amongst children who have witnessed domestic violence, for their behavior to change. For example, many children may feel afraid, angry, confused, or experience a sense of helplessness, leading them to display more externalized and sometimes aggressive behavior. Other children might instead become quiet and withdrawn (Bernstein, Timmons & Lieberman, 2019; Mueller & Tronick, 2019). A child's external behaviors are often misunderstood by the adults around them (Levendosky et al. 2013). Instead of recognizing the internal struggle that these children are trying to manage, as a result of PTSD, they are instead often inadequately diagnosed with ADHD (ibid.). And, as a result, they do not get the help they need to overcome their traumas (Gilbert et al. 2009; Levendosky et al. 2013). Other emotional challenges, as a result of witnessing domestic violence, may lead a child to regress to earlier developmental stages. A typical example is a child's loss of toilet training (Mueller & Tronick, 2019; Osofsky, 2003). In addition, studies also show that children with PTSD caused by witnessing violence are more likely to develop new fears such as feelings of separation anxiety (Levendosky et al. 2013). These changes in behavior can continue to grow, affecting the child's overall well-being (ibid.). Therefore, it is crucial that we continue to expand our knowledge of the impact witnessing domestic violence has on a child (Mueller & Tronick, 2019; Schubert, 2022).

2.4 Helping Children Who Have Witnessed Domestic Violence

There are various programs and interventions that have proven to be effective in order to help children deal with and overcome traumatic experiences (MacMillan, 2008; Woollett, Bandeira & Hatcher, 2020). Some examples include Child-Parent Psychotherapy (CPP) and Child-Centered Play Therapy (CCPT) (ibid.). CPP is a form of talk therapy that focuses on building and strengthening the attachment relationship between the parent and the child (Alto, et al. 2022; Bernstein, Timmons & Lieberman, 2019; Wathen & MacMillan, 2013). CCPT which does not have to involve verbal communication, looks to creativity, and play to help children communicate and understand their emotions (Drisko et al., 2020; Geddes Hall, 2019; Woollett, Bandeira & Hatcher, 2020). Before an intervention is implemented, the child must first be assessed adequately, based on their individual needs. Critics claim that, in many cases, interventions are carried out too quickly, before a proper assessment of the child's situation has

been made (Gilbert et al. 2009; Levendosky et al. 2013; MacMillan, 2008). In these cases, children are not given the proper help that they need in order to face the problem at hand (MacMillan, 2008).

Because social work is an interdisciplinary field of study, social workers are often inspired by and will use treatment methods from other disciplines (MacMillan, 2008; Woollett, Bandeira & Hatcher, 2020). It is not uncommon that social workers, in order to find the “right” approach, choose to combine different methods. For example, different forms of play therapy in combination with talk therapy have been shown to be highly effective (MacMillan, 2008; Woollett, Bandeira & Hatcher, 2020). Methods used to help children who have witnessed domestic violence will be the focus of the next segment.

2.4.1 Child-Parent Psychotherapy

Many researchers agree on the importance of a caregiver’s ability to be attentive in identifying a child’s needs, particularly after a traumatic incident has occurred (Geddes Hall, 2019; Woollett, Bandeira & Hatcher, 2020). However, in cases where both the caregiver and child are victims, as is often the case of domestic violence, this parental expectation is often hard to achieve (Bernstein, Timmons & Lieberman, 2019). Studies show that parents, most often mothers, who are victims of intimate partner violence, struggle to meet their child’s emotional needs due to working through their own traumatic experiences (Meltzer, 2009; Osofsky, 2003). In an attempt to rebuild and strengthen the attachment relationship, CPP is an evidence-based psychodynamic-based intervention that focuses on helping the caregiver identify and alleviate their own trauma triggers, and thereby, hopefully, they can be more attentive to their children’s needs (Bernstein, Timmons & Lieberman, 2019; Ghosh Ippen, et al. 2011). CPP also focuses on helping the child create a dialogue with their caregiver regarding the thoughts and emotions that may occur after witnessing a violent interaction within the home (Alto, et al. 2022; Bernstein, Timmons & Lieberman, 2019; MacMillan, 2017). This long-term intervention, lasting between 10-12 months, typically involves children up to six years old (ibid.). CPP has been shown to be effective in reducing symptoms of PTSD in the child and caregiver (Bernstein, Timmons & Lieberman, 2019; Ghosh Ippen, et al. 2011). It is crucial that the therapist guiding the CPP intervention show respect, empathy and concern toward the caregiver, in order for a successful outcome. A positive therapeutic relationship allows for the caregiver to heal and restore a healthier emotional mindset, allowing them to approach their child with healthier emotional responses (Alto et al. 2022). Although CPP is a well-known intervention and used

broadly, studies on CPP are still lacking. For example, researchers are still missing information on the specific factors that help CPP to succeed. This information could be crucial in making the method more effective and thereby supporting clients to persevere throughout their treatment (ibid.).

2.4.2 Child-Centered Play Therapy

CCPT is another popular method that social workers have used since the 1930s (Drisko et al. 2020; Woollett, Bandeira & Hatcher, 2020). This method has shown promising results in helping children who witness domestic violence to rebuild a sense of control and empowerment (Geddes Hall, 2019). For some children, verbally communicating their experience of the trauma can be hard. Perhaps they feel too afraid to share or, maybe the child was preverbal when the trauma took place (ibid.) Whatever the case may be, play has proven to be an optimal method of communication allowing the child to naturally express their thoughts and emotions (Drisko et al. 2020; Geddes Hall, 2019). While some children use creativity and play to convey themes of power, conflict, and control, others use their fantasies to make up alternative scenarios, creating a new narrative for themselves as a method to regain a sense of control (Geddes Hall, 2019; Woollett, Bandeira & Hatcher, 2020). Play can therefore be described as a powerful tool in helping children work through their traumas (Geddes Hall, 2019). However, when a child revisits their trauma using play, feelings of anxiety can reappear (ibid.). This can make them feel like they are reliving their trauma in the present. In this situation, it is up to the social worker to help guide and ground the child back into feeling safe, for example by using a softer and slower voice tone, to help soothe them (Geddes Hall, 2019). Some researchers state that combining both verbal and non-verbal interventions can be highly effective. For example, using Child-Centered Play Therapy and Trauma-Focused Cognitive Behavior Therapy, which is a verbal therapy method that is considered to be effective in treating PTSD, with art and play therapy (Woollett, Bandeira & Hatcher, 2020). This offers young clients a variety of ways to communicate and process their trauma (ibid.). Although many researchers agree that CCPT is effective (Drisko et al. 2020; Geddes Hall, 2019; Woollett, Bandeira & Hatcher, 2020), some researchers state that play therapy is only effective during a certain stage of treatment. To what extent CCPT is beneficial, should be further examined (Drisko et al. 2020).

3. Theoretical Framework

This chapter will present the two theories used for this study: Abraham Maslow's theory of *Maslow's Hierarchy of Needs* and Richard Lazarus and Susan Folkman's theory of coping. Together they support and frame the results of this study. Maslow's theory is relevant since it can give insight into which human needs a victim is denied as a result of domestic violence. Furthermore, it can enrich an understanding of how the lack of certain human needs, especially in childhood, can have an impact, both short and long-term, on a person's life. Lazarus and Folkman's (1984) theory of coping is useful to my study since it is a flexible tool for making sense of *why*, or rather, *what* motivates a perpetrator of domestic violence to abuse their victims. Just as useful, this theory can be applied to understanding a victim's perspective, by examining what coping strategies are used to deal with and even survive a home life distressed by violence and abuse.

3.1 Maslow's Hierarchy of Needs

Recognized as one of the most influential psychologists of the twentieth century, Abraham Maslow, most famous for his theory of Maslow's Hierarchy of Needs, states that all humans have a set of needs in order to live a happy and contented life. According to Maslow, these needs can and should be ranked according to a certain order (Maslow, 1970: 36). This ranking model consists of five different levels. The first two levels address physiological needs, such as food and safety. The third and fourth levels address the need for belonging, to feel loved, and esteemed. The fifth and final level explores the need for self-actualization.

3.1.1 Human Needs

Physiological Needs

The first level consists of basic physiological needs, such as food and water: essential needs. Maslow stated that without them, we not only are unable to survive but also unable to fulfill any other needs within the hierarchy. He argued that an individual who lacked fulfillment in all human needs - food, water, safety, love, and self-esteem - would likely put food and water above anything else (Maslow, 1970: 36).

Safety Needs

Feeling a sense of safety, and security is crucial for all human beings. According to Maslow, it is one of our most fundamental needs in order to survive and live a fulfilled life. For children, this is particularly true (Maslow, 1970: 59). Unlike adults, children are unable to fend for themselves, and must rely on their environment to protect them. In homes where there is arguing and abuse or situations of separation and death, children are often left feeling unsafe and anxious. Maslow believed that creating a safe environment also includes growing up with a safe caregiver. Moreover, Maslow believed that, if human safety needs were properly met, it would most likely contribute to a safer society, without chaos or crime (Maslow, 1970: 39).

The Need for Belonging and Love

The need to feel loved and accepted moves us on to Maslow's third level within the hierarchy. After our physiological needs are met, humans start, as Maslow expresses it, to "hunger for affectionate relations with people". In other words, we start to crave a sense of love, affection and belonging. Friends, family, romantic relationships, and children are examples of how a person might fulfill this need. However, it extends further than to our loved ones. It also encompasses our need to feel like we belong to a group or community. This may involve feeling accepted among our work colleagues or within our neighborhood (Maslow, 1970: 44).

Esteem Needs

The fourth level addresses self-esteem. Maslow understood self-esteem as consisting of two parts. The first part looks at an individual's confidence. Confidence can be described as a person's strengths, achievements and sense of independence. However, according to Maslow, feeling good about oneself is not enough, without a sense of love and acceptance (Maslow, 1970: 44). The second part, therefore, describes an individual's journey in seeking confirmation

from others, for example, by trying to achieve a higher status, fame, and a good reputation (Maslow, 1970: 45.)

The Need for Self- Actualization

The final level in Maslow's model looks at an individual's desire to achieve self-actualization. This can be described as the need for self-fulfillment. It may, for instance, involve developing a skill to its full potential, like becoming a successful painter or an exceptional athlete (Maslow, 1970: 46, 47). Moreover, self-actualization also has to do with an individual's ability to be independent and self-sustaining. Maslow describes self-actualizing people as highly independent individuals who do not look so much to other people or their environment to maintain a sense of fulfillment. They are instead motivated by their own development and growth.

3.1.2 Limitations Within Maslow's Hierarchy of Needs

Although *Maslow's Hierarchy of Needs* continues to be a popular theory today, it also faces considerable criticism. Firstly, the theory is not supported by evidence (Noltemeyer et al. 2021). Although various studies have been explored, none of the studies show the same results (ibid.). Secondly, researchers have raised questions about the way in which the needs are ranked within the hierarchy (Noltemeyer et al. 2021; Soliman, AlTabtabi & AlMeer, 2020). Some researchers disagree that needs, such as food, safety, love, belonging, esteem, and self-actualization must follow a certain order (ibid.). A study done on workers in Kuwait showed that the workers valued security over physiological needs (Soliman, AlTabtabi & AlMeer, 2020). Thirdly, critics have come to question Maslow's use of the term 'satisfaction'. Maslow states that a need must first be satisfied in order to meet the next need within the hierarchy (Maslow, 1970). However, some researchers are skeptical of this and ask the questions: How do we know that a need is properly satisfied? And how do we measure to what extent a need is satisfied? (Tay & Diener, 2011). Critics also state that Maslow's theory, based on American norms and values, assumes that all humans, regardless of where they come from, define and rank human needs in a similar way. This is not the case. Other, more collective cultures and societies such as China and Korea, are likely to value belonging and security over self-actualization (Noltemeyer et al. 2021; Soliman, AlTabtabi & AlMeer, 2020). Despite these limitations, I have chosen to use Maslow's theory, as a conceptual apparatus, that can help clarify the impact that domestic violence can have on a victim's ability to fulfill some of their fundamental human needs, especially those of young children.

3.2 Coping Theory

The term ‘coping’ became widely recognized as a popular field of research within psychology during the 1960s (Lazarus & Folkman, 1984: 6). Theorists such as Pearlin and Schooler (1978), Lazarus and Folkman (1984) and Billings and Moos (1984), among others, have been at the forefront of coping research history, developing a range of concepts in which coping can be understood as a behavioral phenomenon (Frydenberg, 2014: 83). This section will, however, look at Lazarus and Folkman’s (1984) theory of coping.

3.2.1 Definitions of Coping

Richard Lazarus and Susan Folkman (1984) described coping as “constantly changing cognitive and behavioral efforts to manage specific external and/or internal demands that are appraised as taxing or exceeding the resources of the person.” (Lazarus and Folkman, 1984: 141). In other words, coping seeks to explain why a person, in a challenging or difficult situation, adopts certain behaviors or mindsets in order to deal with a specific situation. For example, an ill patient may deny the severity of their illness and thereby fail to recognize their need for treatment (Lazarus and Folkman, 1984: 154). Or a person might choose to avoid situations that they find scary (Lazarus and Folkman, 1984: 70). In other cases, a person might start to act aggressive or hostile as a result of being faced with a threatening or scary situation (Lazarus and Folkman, 1984: 13, 15, 254). These styles of coping are what Lazarus and Folkman (1984) refer to as *emotion-focused forms of coping*. Another form of coping is *problem-focused forms of coping* which, as stated in the name, is a problem-solving-oriented coping strategy. It can involve a person developing new forms of behavior or finding alternative ways to sustain happiness and fulfillment. These two categories of coping, according to Lazarus and Folkman’s theory, can give insight into changes in a person’s behavior and/or mindset (Lazarus and Folkman, 1984: 147).

Lazarus and Folkman (1984) state that people cope in different ways. One type of coping, relevant to this study, is what they call the “type A coping style”. Individuals who fit into this category are known to be particularly vulnerable in situations where a sense of control is lost or taken away from them. These instances cause heightened emotions and stress, resulting in excessive attempts to gain back control.

3.2.2 Stress and Coping

In order to understand why coping strategies, manifest themselves, Lazarus and Folkman (1984) claim that one must first understand the origins from which they come, which, according to their theory, is almost always because of stress. Within psychology, the terms stimulus and response are central to understanding the human mind and human behavior. A stimulus can be described as anything, such as an event, that evokes a response (Lazarus and Folkman, 1984: 13, ff.). To understand coping, stress is seen as the main stimulus in which a response, in this case coping, transpires. Stress is referred to by Lazarus and Folkman (1984) as “a particular relationship between the person and the environment that is appraised by the person as taxing or exceeding his or her resources and endangering his or her well-being.” (Lazarus and Folkman, 1984: 156). The extent to which a sense of threat or feeling of lack of control affects one varies depending on the individual’s ability to handle and cope with the situation. For instance, suffering a traumatic event can make us more susceptible to feelings of anxiety and stress, which may affect our coping styles and affect us throughout our lifetime (Lazarus and Folkman, 1984: 19).

3.2.3 Limitations Within Coping Theory

One of the main critiques against coping theory is the term ‘coping styles’, and its inability to take into consideration individual variations within coping styles (Lazarus, 1993). Although Lazarus and Folkman (1984) describe coping styles as a helpful way to gain a general understanding of how people handle a stressful or difficult situation, Lazarus (1993) states that coping styles would be far more useful if an individual’s thoughts and actions were also considered and examined in relation to different coping styles. Another critique that Lazarus (1993) raises has to do with the extent to which coping theory is applied. He claims that coping theory should not only be used to understand how a person deals with a stressful situation but should also be considered as a more comprehensive modality that can help make sense of a person’s whole life, and how humans relate to the broader world around them.

4. Method

In this chapter, I will present the methods used to carry out this study, and a short description of the research design and methods used to find my research participants, followed by a discussion of how the data was collected, coded, and analyzed. Lastly, I touch upon ethical considerations, my role as a researcher, as well as the limitations of this study.

4.1 Research Design

4.1.1 Qualitative Research Method

The term research design is, as Qais Faryadi describes it, like a road map. It is the plan or strategy that a researcher uses in order to get from start to finish on their research project. The first step, in designing a “road map”, after choosing the research topic, is to establish what type of research data needs to be collected (Faryadi, 2019). For this study, my objective has been to focus on a more individual-based perspective. A qualitative research method was therefore the best approach since, as a method, it can capture and represent an individual’s experience, putting emphasis on a person’s thoughts, feelings, and opinions through, for example, conducting one-on-one interviews (Ahrne & Svensson, 2015: 8; Bryman, 2018: 454). This type of in-depth perspective was optimal in order to meet my research aim, which was to understand how social workers, in Illinois; working with children who have witnessed domestic violence, describe the impact that witnessing violence can have on a child. It also looked at some methods social workers use to help these children.

4.1.2 Semi-Structured Interviews

I chose to conduct semi-structured interviews. This type of interview method aims to create a sense of structure, and as well, give the interviewee the choice and opportunity to elaborate on questions that they find most interesting (Aspers, 2011:143; Bryman, 2018: 33). Some of my interviewees confirmed that this type of interview was optimal. They said it made the interview situation feel more natural. Furthermore, semi-structured interviews do, inevitably, to a certain degree, control what is being discussed (Aspers, 2011:143; Bryman, 2018: 33, 500). This is something I was aware of in my role as an interviewer, which will be discussed more later in

this chapter. In preparation for my interviews, I created an interview guide (Rennstam & Wästerfors, 2015: 251). My interview guide consisted of my three research questions (see section 1.2). However, after each question, I had a series of themes (listed below), that I used as a guide for possibly expanding the questions. These themes were mainly inspired by recurring words and statements that I came across during my search for relevant literature (Aspers, 2011: 143; Blaikie, 2009: 63; Bryman, 2018: 565). Additional themes were added to my interview guide throughout my interview process, inspired by topics that my research participants had discussed. A copy of my interview guide can be found in the appendices of this paper (See *Appendix II*).

4.2 Delimitations

This study was based on purposive sampling. This means that each research participant was carefully selected in order to meet the research aim (Blaikie, 2009: 178; Bryman, 2018: 496). Below I have listed the following three criteria that would make someone eligible for my study:

1. A bachelor's degree in social work.
2. Professional experience as a social worker, working with children who have witnessed domestic violence.
3. Employed as a social worker, within the state of Illinois.

Firstly, I looked for research participants that had a bachelor's degree in social work. This is because social work is a broad field of work that can entail both professional and nonprofessional social work. Therefore, it was important for me to make this distinction clear. It turned out that all the social workers I interviewed had degrees. Secondly, I was specifically looking for social workers who had experience working with children and domestic violence. I managed to interview two social workers who had previously worked in schools, as well as a team of four social workers, working at a domestic violence organization agency. All six research participants had considerable amounts of experience working with children who specifically had witnessed domestic violence. Lastly, I was fortunate enough to be granted permission by Lund University to go abroad for this study. My study was based in Chicago, and a small part in Decatur, therefore, the state of Illinois became my geographical delimitation. It is important to note that each state, within the United States, has different child protection

laws and laws against domestic violence, which means that social workers tend to work differently based on their geographical location (NCSL, 2019).

4.3 Data Collection

The answers collected from my interviews with social workers in Chicago and Decatur, Illinois, have been the basis for this study. This section will take a closer look at the interview process.

In preparation for this study, I had written a letter of information, presenting myself and a description of the purpose of my research project (Eldén, 2020: 89, 91). The letter was then sent out to several domestic violence shelters and organizations that I had found through Google. They were all located within the Chicago area. This is how I came in contact with my first four participants, all employed at the same domestic violence agency. The letter was also sent out to some family friends and their social work colleagues. This is how I came to include three more social workers in my study. My letter was sent out as an e-mail, rather than a phone call, which gave my research participants a chance to consider my offer and respond at their convenience (Eldén, 2020: 117; Eriksson-Zetterquist, 2015: 72)

4.3.1 Challenges

For me to be granted permission to go abroad, I was told by the international coordinator at Lund University's Department of Social Work that first, potential research participants had to be found before the thesis course began. I was successful in quickly finding eight people who were willing to be interviewed. However, when the course started in November, the students were told by the course instructors to wait before reaching out to potential interviewees. After meeting with my supervisor, and discussing my research purpose and questions more thoroughly, we agreed that I could send out a new information letter that contained more details and updates on the purpose and limitations of my study. I was concerned that some of the research participants would be confused by a second letter, and more importantly, that some of them would not meet the new criteria. In the process, two of my booked interviews were canceled, since they did not meet the requirement of having a bachelor's degree in social work. If I were able to redo anything, I would have double-checked the requirements of the study with another faculty member at the Department of Social Work, before sending out a letter. Luckily, no one was offended or discouraged by the changes I had to make, I found new interviewees, and was able to proceed as planned.

4.3.2 Conducting the Interviews

A few days before each interview began, I sent out a copy of my interview guide, in order to give the research participants a “head’s-up” on what to expect. It also allowed my research participants to prepare notes, which some of them did. However, I was aware that sending out my interview guide, prior to the interview, might possibly affect how my research participants chose to respond to each question. Each interview lasted about an hour. Before the interview began each participant was asked for their consent to take part in the study and for their permission to be recorded. (Eldén, 2020: 30). Recording the interviews helped me to be more present. Instead of focusing on taking notes, I could concentrate on listening. The recordings also facilitated the process of transcribing all six interviews (Aspers, 2011: 577; Bryman, 2018: 56).

All the research participants, apart from one, were able to meet in person. Conducting in-person interviews is optimal, particularly when the topic of discussion is a more difficult one (Eldén, 2020: 116), such as domestic violence and its impact on children. In many cases it provides a more natural and friendlier way to talk to someone, especially when meeting the research participants for the first time (Ahrne & Eriksson-Zetterquist, 2015: 56). As mentioned, one of the interviews was not done in person, but instead carried out using the online video conferencing forum Zoom. Although meetings via Zoom or other video conferencing platforms have for many become standard, after the Coronavirus pandemic, it is still viewed as an unconventional option when conducting interviews for a research-based purpose (Ahrne & Eriksson-Zetterquist, 2015: 72; Robinson, Shin & Gangadharan, 2020: 1178). More on my experience of conducting an online interview will be discussed below.

4.3.3 One-On-One Interviews

In the early stages of setting up each interview, I was asked by the team at the domestic violence agency if I preferred to do the interviews on a one-on-one basis, or in a group setting. I preferred to conduct the interviews separately. In a group interview situation, there is a risk that the shyer individuals will fall into the background, choosing to agree with what has already been said (Dahlin-Ivanoff, 2015: 106; Källström, 2015: 96). This scenario would have made for a homogeneous interview session and defeat the purpose of my study, which was to understand how different social workers work with children who witness domestic violence. It is the differences, comparing the answers that each social worker gave, that hopefully made the study more nuanced (Aspers, 2011: 45; Dahlin-Ivanoff, 2015: 106).

4.4 Coding and Analysis

4.4.1 Transcribing the Interviews

After each interview was completed, I quickly began the process of transcribing. This was done intentionally, mainly in order to not confuse the interviews with each other. Also, the faster I was able to get each interview written down on paper, the more likely I was to remember and reflect upon what had been discussed (Aspers, 2011: 155, 156; Öberg, 2015: 88). My aim was for the transcripts to be as accurate as possible, not only for the sake of attaining high accountability but also to aid in the process of coding and analyzing (Ahnre & Svensson, 2015: 31, 32).

4.4.2 Coding

After completing my transcription, I began the process of coding (Öberg, 2015: 88). I mainly used color coding. This involves creating a color system where each color represents a certain idea or topic, enabling the researcher to see if certain themes recur (Aspers, 2011: 187). In some cases, a certain passage of text may include several different themes. In this case, various colors are applied, each one, purposefully representing a new theme. Because I am a visual learner, this method was optimal for me. I was able to quickly see connections between the six research participants. I also circled key terms that recurred. The words 'safety', 'guilt', and 'boundaries' are some examples of recurrent words.

4.4.3 Analysis

I used a thematic analytical method in order to study my collected data. This method requires focusing on themes and finding patterns (Bryman, 2018: 702). Because many of my research participants had similar answers and reflections, this method helped me summarize what each social worker had said. It also helped me discern if there were any opinions or statements that disagreed with what the majority had said.

This study is based on an abductive research strategy. An abductive strategy consists of both inductive and deductive reasoning. This means that the conclusion of a study is not solely based on the findings within the research material (Blaikie, 2009: 156). Instead, it can be described as an alternating process in which theories and research findings are interwoven and together determine the study's outcome (ibid.). In my study, I used both my empirical findings as well

as previous studies on domestic violence and how it affects children in order to come to conclusions.

4.5 Limitations of the Study

Qualitative studies are unique in that they allow for a more direct interpretation of a person's thoughts, feelings, and opinions (Ahrne & Svensson, 2015: 8; Bryman, 2018: 454). Bryman (2018) claims that interviews, which are one of the most common methods used in qualitative research, also provide a more flexible situation (Bryman, 2018: 561). There are many ways in which interviews can be conducted, for example, structured interviews, semi-structured interviews, and unstructured interviews (Aspers, 2011: 143). A semi-structured interview method was used for this study. This method offers structure as well as allowing the interviewee the alternative to freely discuss questions that they find most interesting (Aspers, 2011:143; Bryman, 2018: 33). Bryman (2018) states that semi-structured interviews are often optimal if the topic of discussion is controversial or sensitive (Bryman, 2018: 68), because it allows the researcher to listen and observe the interviewee's body language, and modify or adapt the questions in a way that is most considerate to the interviewee (ibid.)

Qualitative research methods have also been criticized, mainly because, unlike a quantitative research method, it is harder to make broader assessments about a population (Ahrne & Svensson, 2015: 34). But this is not to say that generalizing qualitative research results is impossible. Svenson and Wästerfors (2015) explain that by comparing the study's results with previous research more general statements can be drawn (Dahlin-Ivanoff, 2015: 112). In this study's case, six interviews would be considered a small sample group for a qualitative research project. Although no generalized statements were able to be made based on my study, I was still able to compare my research findings to previous studies on domestic violence. Interviews, as a method of data collection, have also raised disputes, regarding the researcher's inability to guarantee that a research participant gives fully truthful answers (Eriksson-Zetterquis & Ahrne, 2015: 78). I trusted my research participants' answers, but I am also aware that in an interview situation, one can feel 'put on the spot', and therefore opts to give the 'best' answer possible.

As previously stated, semi-structured interviews, to a certain degree, control what is being discussed (Aspers, 2011:143; Bryman, 2018: 33, 500). It was important for me to keep in the

forefront of my mind, that the interviews were a professional set-up. My job was to gain knowledge from the research participants, which inevitably makes for an unequal balance of power: a researcher should be aware of her position (Ahrne & Eriksson-Zetterquist, 2015: 69; Aspens, 2011: 141; Eldén, 2020: 104). In order to try to make the power balance feel more equal I was conscious of not changing the topic too quickly or interrupting. I did my best to just listen to what was being said.

Because this study was based on a small group, I was unable to reach data saturation, a term that refers to the stage within the research process where enough data has been collected that no further insights or conclusions can be made due to an already extensive study result (Bryman, 2018:507). I am aware that, despite my attempt to attain a more multifaceted perspective by adding two more social workers to the study, who were not a part of the same organization, it still did not make for diversity. Furthermore, I am also aware of the fact that five out of six of my interviewees identified as female. This can, as previously stated, make for a homogeneous study (Dahlin-Ivanoff, 2015: 107).

As mentioned, one of my interviews was conducted online, using Zoom. Conducting an online interview was slightly challenging. An unstable internet connection, which was the main cause of disruption, and trying our hardest not to interrupt each other, made for what felt like a rather unnatural interview. Mainly, I experienced that my role as an interviewer became less professional. During my in-person interviews, I was able to ‘read’ through body language when it was time for me to change the subject or, just let my research participant speak freely (Bryman, 2018: 126). In a Zoom situation, reading a person’s body language is more difficult.

4.6 Credibility

Credibility looks at the extent to which a study is regarded as trustworthy (Bryman, 2018: 467; Eidevald, 2015: 150). A crucial factor in obtaining credibility lies in the researcher’s ability to provide an honest presentation of their work process. As much as a researcher’s successes should be acknowledged, so should their potential faults and errors (Aspens, 2011: 227; Eidevald, 2015: 151, ff.). This section will discuss some ways a study can be deemed credible.

Transferability is one method that can be used in order to evaluate a study’s credibility. This involves finding other studies that have results that are similar or comparable to one’s own

(Blaikie, 2009: 194; Bryman, 2018: 75). The answers that I collected from my six interviewees do correspond with other studies that I found in my search for relevant literature. However, I am conscious of the fact that this makes up a relatively small group (Bryman, 2018: 468), and therefore it is harder to draw general conclusions (Bryman, 2018: 71; Blaikie, 2009: 76).

The term **dependability** is a second method that can be used in order to decide if a study is credible (Bryman, 2018: 75). Dependability examines how transparent the researcher has been throughout the research process (Bryman, 2018: 468; Eldén, 2020: 10). During my study, I have aimed to give a sincere description of my research process by, for example, discussing the challenges of writing my letter of information and the insecure situation that I faced after two of my research participants were unable to be a part of the study.

Confirmability also focuses on the researcher's role. In this case, it evaluates how objective the researcher was able to be throughout the process (Bryman, 2018: 75). Although my motive was to be as objective as possible this was sometimes difficult for me. For example, I felt the urge to draw comparisons to how social workers in Sweden describe and work with children who are witnessing domestic violence. Being both American and Swedish, I have learned some of the differences in how social work is approached in the two cultures. However, I refrained from sharing my Swedish point of view as I was afraid that my words might influence the answers that would be given. I was also afraid of coming off as judgmental or a know-it-all.

5. Ethical Considerations

Maintaining a high standard of research ethics is crucial throughout the research process. Research ethics are guidelines that help prevent scientific misconduct. Their role is also to ensure the integrity of the research participants (Aspers, 2011: 117; Bryman, 2018: 171, ff.). There are four fundamental principles: voluntary participation, informed consent, confidentiality and requirement of use. Together they make up the foundation of research ethics (Eldén, 2020: 30). This section will discuss my attempt to maintain research ethics during my study.

Voluntary participation involves giving all research participants the right to choose if they want to take part in a study. A research participant also has the right to withdraw from the study if they decide to not continue (Eldén, 2020: 30, 96). As well as asking all social workers I interviewed for their consent, at the beginning of the interview, their permission was also documented through a recording.

Informed consent involves informing each research participant about the purpose of the study and their role in it (Eldén, 2020: 30). Prior to the interviews all six social workers received a copy of my letter of information and my interview guide. To make sure they had received them I started the interview by introducing copies of the two documents. When placing them on the table I asked if they had read them and if they had any further questions about the study. My aim was to give my research participants the chance to ask questions or raise any other comments or concerns.

Confidentiality refers to the participant's right to be anonymous. During the research process, the researcher is responsible for concealing the identity and protecting the privacy of the people taking part in the study (Aspers, 2011: 131, 225; Bryman, 2018: 143; Elden, 2020: 30, 118). I made sure to change each interviewee's name, and to leave out any details about place of employment and any personal information that could risk revealing their identities.

Lastly, a **requirement of use** implies that any data collected throughout the research process should be used solely to fulfill the purpose of the study, and nowhere else (Bryman, 2018: 181;

Eldén, 2020: 31). Answers from these interviews have been the basis for this study, and this study only. After finishing this paper all transcripts and recordings were.

6. Results and Analysis

In this chapter, I will discuss my research findings, based on the three research questions and the answers received from the six social workers who were a part of this study. They share their understanding of domestic violence and its impact on children and describe some of the methods they use to help these children. I incorporate Maslow's theory of *Maslow's Hierarchy of Needs* and Lazarus and Folkman's coping theory to help explain and understand the results of this study. I also refer to previous studies on domestic violence that have been presented in this paper's literature review. But first, a short presentation of the social workers who took part.

6.1 Research Participants

Social worker 1 (SW1): Has both a master's in social work and a license in clinical social work. He has worked at a domestic violence agency as a counselor for four years but has a total of five years of experience working with families and domestic violence.

Social worker 2 (SW2): Has both a master's in social work and a license in clinical social work. She has worked at a domestic violence agency as a counselor for eight years but has a total of ten years of experience working with families and domestic violence.

Social worker 3 (SW3): Has a master's degree in social work and has worked at a domestic violence agency as a counselor with families for three years but has a total of four years of experience working with families and domestic violence.

Social worker 4 (SW4): Has a master's degree in social work and has worked at a domestic violence agency as a counselor with families for two and a half years but has a total of three years of experience working with families and domestic violence.

Social worker 5 (SW5): Has a master's degree in social work and has worked with children for forty-four years in various settings, such as family services, private practice with families and children, and as a school social worker.

Social worker 6 (SW6): Has a master’s degree in social work and has worked as a school social worker with children for seventeen years.

6.2 A Social Worker’s Perspective of Domestic Violence

The social workers in this study described domestic violence as consisting of two main parts: a dynamic of power and control and, what they called, ‘a cycle’ of violence. This section will look at what these components mean. It will also give some concrete examples of violence and abuse that the social workers discussed.

6.2.1 Power and Control

All the social workers in this study, in different ways, described domestic violence as a power dynamic where the perpetrator exerts power and control over the victim. SW3 explained that domestic violence can and should be understood as a series of abusive and manipulative behaviors that reoccur:

“It’s instances of patterns repeating, where someone is trying to control you and have power over you”

-SW3

SW6 emphasized the power and control the caregiver holds:

“It is really about that power and control. Someone inflicting power and control over someone else. Domestic violence is, generally...we think of those immediate family members but really it covers anyone who is in a caregiving role.”

-SW6

And SW1 pointed out the different forms abuse can take:

“Domestic violence is any type of violence committed within an intimate personal relationship with someone that you know. It can be family and family, partner, and partner, it can even be violence committed by an adult to a child. Utilizing power and control over a situation, control over a person by using physical, emotional, financial - all types of abuse over a person.”

-SW1

Most of the clients that these social workers meet with are women with their children. All of them referred to domestic violence as violence and abuse that is being perpetrated by a man towards a woman, within an intimate relationship. Previous studies on domestic violence have also mostly identified men as the main perpetrators of violence, and women and children as the victims (Barbosa, 2021: 2; Bernstein, Timmons & Lieberman, 2019: 309; Clements et al. 2021: 1050; Schubert, 2022: 176; Payne, 2007: 292). In this study, the focus has been on children who witness domestic violence between their parents.

Some examples of the types of violence that all six social workers have worked with are: physical, sexual, emotional, and financial abuse. They will be discussed below.

6.2.2 Forms of Abuse

SW6 claimed that, most often, emotional abuse is what comes before physical abuse. She explained it like this:

“You know physical abuse and domestic violence...generally, is not the first thing. There’s often that emotional abuse...it kind of starts and then it oftentimes will gradually lead to the physical abuse side of things.”

-SW6

Several of the social workers explained that, contrary to popular belief, domestic violence does not begin with physical abuse; like hitting, slapping, and kicking. Instead, it gradually escalates through various forms of emotional abuse; like name-calling and degrading comments, and even financial abuse; like controlling how and in which way money is spent. SW6 continued to explain that perpetrators often attempt to use different forms of abuse in order to tear their

victims down, making them feel like they are powerless and unable to manage without their partner:

“It’s often telling a person they are not good enough. Telling them ‘they couldn’t possibly do that without my help’...Emotional abuse really is trying to get another person to understand ‘you can’t survive’ and ‘you can’t go on without me’. ‘You need me in order to do these things.’”

-SW6

A form of emotional abuse that was mentioned was the perpetrator’s use of gaslighting, a tactic used to minimize the victim’s feelings, while also making them doubt their own memory. SW4 claimed that victims are often told that “they are crazy” or that “they are making stories up”. Research on domestic violence shows that mind games, manipulation, and scare tactics are typical examples of psychological abuse that a perpetrator will use to gain power and control (Clements, 2022; Moser Hällen & Sinisalo, 2018: 38, 316).

By applying Maslow’s theory one can gain an understanding of the human needs a victim is being deprived of by an abuser and how this affects them as a whole. By perpetrating violence, an abuser not only takes away a victim’s right to safety and security, which Maslow states are fundamental human needs, but also their right to a sense of self-worth and self-esteem, which affects a person’s general health. Research shows that a victim of violence risks serious health problems, and in severe cases, the violence leads to death (Oana, 2012; Wessells & Kostenly, 2021).

6.2.3 A Cycle of Violence

The social workers in this study also claimed that domestic violence should be understood as ‘a cycle’ of violence that involves repetitive patterns of manipulation and abuse, whereby the perpetrators often exhibit various behaviors, as tactics, to gain power and control. For example, two of the social workers stated that a perpetrator will likely switch from being aggressive and violent one moment to remorseful the next. SW6 stated:

“With domestic violence, there are those cycles. You often have that built-up and then blow up whether it is physical or, emotional... then, ‘you are showering me

with gifts. It's very confusing and hard. Again, because there's such a drastic difference depending on what stage of that cycle one is in."

-SW6

SW6 explained that buying gifts and then telling their victim that they "will never do it again" is a form of manipulative behavior that a perpetrator will use to pull their victim back within their hold. Previous studies on domestic violence also claim that changes in behavior is a standard method used by the abuser to control a victim (Clements, 2022: 1050; Moser Hällén & Sinisalo, 2018: 38, 316). As a result of this type of on-and-off behavior, a victim might start to feel uncertain in the presence of their abuser. This may lead them to change themselves accordingly, in order to please the perpetrator:

"When going through that cycle of violence, a lot of times, there is that 'walking on eggshells feeling'. They begin to change who they are to please their abusive partner."

-SW4

SW5 explained how these changes in the perpetrator's behavior also affect a victim's ability to get their needs met. She gave some examples of how a perpetrator, in the cycle of violence, may start to control, for instance, a mother's ability to see her children:

"What is dangerous is when one person becomes dependent and little by little says: 'I'll let you see the kids', 'I'll let you pick the kids up.' 'I'll let you come in and visit the kids', and it grows back to the old way and it happens all over again."

-SW5

Here, the perpetrator plays with the mother's ability to fulfill her needs, through mental manipulation. This, in turn, affects both the child and the mother. Deprived of their needs, such as a sense of safety and belonging, it is easy to see the cycle continuing with a breakdown of self-esteem. In this kind of scenario, the ability to build a sense of independence and self-fulfillment or, self-actualization (as Malow would refer to it as) would be tough to achieve.

SW4 explained that the cycle of violence is an aspect of what makes domestic violence truly complex. She explained that oftentimes a victim will tolerate the violence because they believe there is still hope that their partner will change or that things will go back to the way they were before the abuse began. Lazarus and Folkman's coping theory (1984) states that when a person feels threatened, they are likely to start to avoid and deny certain truths (Lazarus & Folkman, 1984: 128). Both strategies, avoiding a dangerous situation by 'changing' oneself, as SW4 described in the previous quote, and tolerating abuse in the hope that the perpetrator will change, can be understood as ways to survive the abuse. Similar to the way an ill patient may deny the severity of their life-threatening illness (Lazarus & Folkman, 1984: 154), a victim of domestic violence may deny the severity of their life-threatening situation. Maslow explains it this way: "The difference is like that between a fighter who still hopes to win and the one who has no hope of winning, trying only to lose as painlessly as possible (Maslow, 1970: 50). In other words, the victim is looking to lose with as little harm done as possible.

6.3 The Impact Witnessing Domestic Violence Has on Children

This section will look at how the social workers described the impact of domestic violence on a child's life, with examples of how it can affect a child's physical development, sense of self-esteem, social relationships, and behavior. Also mentioned, are some ways in which a child might witness the violence that takes place.

6.3.1 Witnessing the Abuse

The social workers in this study explained that there are many ways in which children can witness the abuse that takes place. For example, they might hear it through the walls or vents, or they might see it when nobody knows they are looking. A study by the domestic violence organization, The Network (2021), also finds this to be true. It states that 90 percent of children living in homes where domestic violence takes place, are likely to witness it.

SW4 explained:

"There is this common myth that goes around. 'My child wasn't in the room, so they don't know it happened', which is not the case. Children are aware of a lot more than we know. It could be that they were listening through the vents. You can hear it from the vents. It could be that the walls are thin, and they could hear next

door. It could be that they were peeking in the room, and something was happening.”

-SW4

Some examples of how witnessing domestic violence impacts a child will be discussed below.

6.3.2 Physical Impacts: Motor Skills

According to some of the social workers, parents who are victims of domestic violence are likely to be in a state of crisis, as they fight to protect their own lives and as a result, these parents may be less emotionally and even physically available to their children. SW4 said:

“It can depend on how attuned the non-offending parent is. Even with the physical development of motor skills, at a young age. If the non-offending parent is experiencing violence or, is in crisis mode or survival mode, they may not have the capacity to emotionally be there for the child. Even physically be there with the child to take those extra minutes a day to practice the development of motor skills. In that way, there can be delays emotionally and physically. Like speech, and motor skills.”

-SW4

By understanding the situation from a child developmental perspective, SW4 stated that children who are not given that extra time to practice their motor skills are, as a result, more likely to fall behind in development. Although Lazarus and Folkman’s (1984) theory does not focus so much on children themselves, or the physical development of a child, they do discuss children in regard to how able they are to cope with their environment and the different factors - physical, social and emotional - that may contribute to making a person more vulnerable or less likely to cope with a situation (Lazarus and Folkman, 1984: 50, ff.). SW4 claimed that it is not hard to see how a child who falls behind in their physical development, for example, speech and motor skills, would quickly become more vulnerable. Lazarus and Folkman (1984) claim that a person must learn skills in order to be able to adapt and keep up with their environment (Lazarus and Folkman, 1984: 130).

6.3.3 Emotional Impacts: Low Self-Confidence

Three of the social workers discussed the frequency with which they see children take on the emotional responsibility of the violence, blaming themselves, as the cause of the abuse:

“I see my parents fighting.” ‘I wonder if I can be the person who stops that by being the perfect child, by being the person who is doing everything right’. It’s actually not on them to do that because, one of our philosophies here is that it’s not the victim’s fault that the violence is happening, it’s the fault of the person who is perpetrating violence and going forward. It is not the fault of the child. They can be perfect, and violence can still happen, and abuse can still happen. That can create a sense of ‘I didn’t do enough’ or, ‘I was bad...so this happened, I am guilty because this happened’.

-SW1

Here, SW1 emphasizes that violence is outside of the child’s control and that no matter how well-behaved a child acts, the violence is still bound to happen. All the social workers agreed that the perpetrator is the only one who should be held accountable for the violence.

SW4 also discussed how some of her clients take it upon themselves to get between their parents in an attempt to stop the violence:

“They may try to get in a middle of a physical fight. They may try to hit the abusive parent back or they might try to step and verbally hurt them by saying hurtful things to the perpetrator like, ‘stop it’ ‘leave her alone’ or ‘you’re the stupid one’ - whatever it may be, they try to intervene as a form of ‘I’m needing to protect mom’ ‘I’m needing to protect my safe parent’”.

-SW4

SW4 continued to explain that when children feel like they have not been ‘perfect’ enough or well enough behaved, they get down on themselves, which affects their sense of self-esteem. Previous studies on domestic violence also confirm that children can feel responsible to protect the abused parent (Kostelny & Wessells, 2021; Osofsky, 2003). Maslow’s theory of self-esteem, the fourth step in the Hierarchy of Needs, can be applied here. Maslow claimed that a part of having good self-esteem involves feeling strong, confident and even useful (Maslow,

1970: 45). On the one hand, Maslow might state that a child's sense of responsibility to protect the abused parent makes them feel 'useful'. On the other hand, Lazarus and Folkman (1984) might claim that these children simply have taken on, what they refer to as, a 'problem-focused coping' strategy. This coping strategy focuses on behaviors that attempt to solve the problem at hand (Lazarus and Folkman, 1984, 152). As stated above, a child might try to act extra good or, be extra perfect.

6.3.4 Emotional Impacts: Low Self-Worth

In SW3's experience of working with children who witness domestic violence, many of the children express that they do not feel like their needs are met. I asked if these needs involve basic human needs such as food, shelter, and clothes. Although SW3 meets mainly children from low-income backgrounds, she confirms that most of the children's basic needs have been met. These children, she explained, are seeking emotional support. But, as a result of not feeling listened to, they start to feel unworthy:

“Them thinking that their needs don't matter and not advocating for themselves and their boundaries. Also, feeling disappointed as well as seeing that things won't change because 'no one is listening to me', and 'my needs are not mattering'. 'No one is helping me' and that just makes a person, in their mind, feel 'I don't matter, I don't have support', which is very lonely.”

-SW3

Although these children may have some of their psychological needs met, their emotional needs are not met to the extent to which they should be. Basic needs, according to Maslow, consist of both. Children need to grow up in safe environments, with safe and secure caregivers (Maslow, 1970: 4). While it may be apparent that the caregiver perpetrating violence is unsafe, Maslow might also argue that even the non-offending caregiver is unstable as they are unable to be present and give the emotional support their child craves.

6.3.5 Social Impacts: Attachment Relationship

The social workers in this study explained that domestic violence can have a negative impact on the attachment relationship, which affects the child, even before they are born. SW4 explained:

“We talk about the experience of violence during pregnancy and the impact that it can have on a child when it is born. Even the ability for the mom to connect with the child because of the way the conception happened. Especially if there was sexual abuse. That can lead to difficulties in connecting with the child emotionally.”

-SW4

Maslow believed that for a child to feel safe and secure there must be consistency and calmness in their lives. He might argue that, if a child, when it is born, interacts with a caregiver who shows apathy, or is inconsistent with their affection, this will make the attachment feel inconsistent, which in turn affects the child’s need for safety and security.

6.3.6 Social Impacts: Attachment Relationship Friendships

The results of this study found that children who witness domestic violence have a harder time making friends. SW6, who previously worked as a school social worker, explained that many of the children whom she came in contact with, who had a background of domestic violence, generally had fewer friends. This she said was largely due to the fact that these children were not allowed to invite friends over to their homes:

“Oftentimes, the people who are in those situations are isolated by the perpetrator. You might not see a lot of social relationships with these kids. They aren’t inviting kids over to spend the night at their house or, come play at their house because of what goes on there. Not only do they not want others to see it, but it also wouldn’t be allowed by the parents who don’t want other eyes looking in and seeing what going on”

-SW6

This quote shows how a perpetrator will try to isolate everyone in the family as a tactic to not be discovered. Previous studies concur that isolation is one example of a subtle tactic that the perpetrator uses in order to gain power and control (Clements, 2022: 1050; Moser Hällen &

Sinisalo, 2018: 38, 316). Lazarus and Folkman (1984) might argue that children who live, to a larger extent, in isolation, as a result of domestic violence, are not only denied a sense of happiness and connection but also support when they need it the most. They claim that friendships are important, not only because they make us happy but because they help us cope with difficult situations. Maslow would most likely agree with this reasoning. According to his theory, the need for love and belonging is so strong that a person will go to great lengths just in order to fulfill this need. He even states that the hunger for this need is so powerful one might even start to forget the hunger for food (Maslow, 1970: 43).

6.3.7 Behavioral Impacts: Internalized and Externalized Behaviors

The social workers in this study stated that children who witness domestic violence do not all express themselves in the same way. While some children become quieter, other children display more externalized behavior. SW6 explained that:

“Not every kid would react the same way. Some kids were very withdrawn and would be startled easily. They would be more of those loners, the quiet ones that often go unseen or, get overlooked, and then you would see another extreme where kids who were acting out would take a good amount of time and manpower to help them be able to get through the day and manage their emotions. It’s interesting how each kid, even kids in the same family reacts differently to what they are experiencing at home “

-SW6

SW6 went on to explain that while some children are given a lot of attention, others are overlooked. She also made it clear that even siblings may vary in their responses to witnessing domestic violence. Previous research on domestic violence has also found that children react differently after having gone through a traumatic experience, like witnessing domestic violence (Levendosky et al. 2013: 189; Mueller & Tronick, 2019:2; Schubert, 2022, 176). Lazarus and Folkman (1984) state that most individuals make use of different coping strategies when faced with a violent situation. Aggressive behavior, hostility or withdrawal are the most common coping strategies (Lazarus & Folkman, 1984: 13, 15, 254).

SW5 also discussed the variations of behavior that she saw among children who live in homes with domestic violence. She gave one example of a three-year-old boy who, at preschool, would

shout the words “Fuck you” repeatedly to the teachers and peers around him. SW5 explained that this child went unseen and unheard by many of the adults around him. While the staff saw him as a burden, SW5 understood that something was wrong. Her approach was, instead, to ask the question, “what happened to this child in order for him to act like this?” She later found out that this child had witnessed his mother be viciously sexually assaulted by his father. Lazarus and Folkman (1984) might have identified the three-year-old boy’s aggressive and hostile behavior as a coping strategy used to deal with his trauma. By applying both coping theory and Maslow’s Hierarchy of Needs to this case, one might even see that the three-year-old boy’s reaction was an expression of a deep need for attention and a cry for help. Luckily this was heard and recognized by SW5

6.3.8 Behavioral Impacts: Generational Abuse

According to SW4 and SW5, a child who witnesses domestic violence is likely to mimic similar behaviors later on:

“Okay, so you witness that and that is what you think is normal. That is what you think you are able to do, should do, can do, will do, or want to do. Daddy hits mommy when he is mad so I can hit my friend Suzie at daycare today when I’m mad. Believe me, when I grow up, I will be hitting my wife unless I do the treatment. I saw it, I saw that it was normal or, I was directly taught it. I had the absence of healthy social skills.”

-SW5

Here, SW5 shows that tendencies of violent behavior can be detected at an early age, even as young as in daycare. To prohibit violence from being passed on, she claimed that these children need to get professional support and treatment. Studies on domestic violence and its impact on children have also shown that children are more likely to perpetrate violence in adulthood, as a result of witnessing it in childhood (Osofsky, 2003; Geddes Hall, 2019; Wathen & MacMillan, 2013; Wessells & Kostelny, 2021). Lazarus and Folkman (1984) also state that children are particularly susceptible to their environment during their formative years. Therefore, the family should be seen as crucial role models from which the child learns to develop socially (Lazarus and Folkman, 1984: 228). By viewing a child’s behavioral development using this premise one might come to understand why a child learns to use violence when upset. Lazarus and Folkman (1984) would argue that is a mere reflection of how they have been taught to cope when angry.

6.4 Helping Children Who Have Witnessed Domestic Violence

6.4.1 *Child-Parent Psychotherapy*

Child-Parent Psychotherapy was described by four of the social workers as an effective method used to help the abused parent and their child rebuild and strengthen the attachment relationship between them. SW1 explained that this method consists of two parts. The first part involves private therapeutic sessions that aim to help the parent work through their traumas of domestic violence. The second part also involves a series of therapeutic sessions, however, this time with the child and parent together. The aim is to help both parties process specific traumatic events of domestic violence. However, the main focus is for the child to convey their needs to the parents. The focus of the sessions is to help put words to thoughts and feelings in order to better understand and communicate them to the other person. SW2 explained:

“Utilizing a model called Child-Parent Psychotherapy, which is based on attachment theory and also domestic violence. So, it’s a model that kind of assumes that there is a kind of attachment that was broken or severed by the violence witnessed. The hope is to restrengthen the bond between the parent and the child. But it is a very specific modality where there is an assessment period with the parent where we are trying to work through understanding their understanding of the experience, their understanding of the child’s experience”.

-SW2

Four of the social workers told me that this Child-Parent Psychotherapy is mainly directed toward children who are under the age of five. Previous studies on trauma and violence have shown that this method has been successful in helping to reduce symptoms of PTSD in both children and adults who are victims of violence (Bernstein, Timmons & Lieberman, 2019; Ghosh Ippen, et al. 2011). Child-Parent Psychotherapy can also be understood, using Maslow’s Hierarchy of Needs. As previously discussed, (see, 6.3.3), Maslow defines a child’s need for safety as consisting of a safe home environment and a safe caregiver. Helping to stabilize that sense, by treating the caregiver of their traumas, is one of the aims of this intervention, and one way to help the child fulfill the need for safety (Bernstein, Timmons & Lieberman, 2019; Ghosh Ippen, et al. 2011).

Furthermore, SW4 stated that Child-Parent Psychotherapy is also a relevant method to use even for pregnant women to help them practice communicating with their children. Although the child is not yet born, she believes that building a dialog early on is a good way to help the mother connect with her child, especially after an abusive situation has occurred. She explained:

“Similar to a woman that may be pregnant, we would acknowledge the event even though the baby cannot talk back. They are still trying to connect with their baby. ‘Your daddy yelled at me pretty badly yesterday and I felt scared. I am wondering if you felt scared. I am going to try to protect you’, and ‘I am going to try to be there for you.’ Trying to build that connection early on. Give them a sense of communication with their child so that they can continue that once the child is born.”

-SW4

As previously discussed, (see 6.3.4.), SW4 explained that women who become pregnant as a result of sexual violence sometimes have a harder time bonding with their babies. Therefore, she believes that using Child-Parent Psychotherapy can help a mother both prepare and practice building a healthy attachment relationship. By applying Lazarus and Folkman’s (1984) coping theory one can understand Child-Parent Psychotherapy as a method that helps both the caregiver and child adopt more healthy and sustainable coping strategies. For example, building better communication between the parent and child could be thought of as taking on a more problem-focused coping strategy (Lazarus and Folkman (1984).

6.4.2 Child-Centered Play Therapy

During our interview, SW2 emphasized the importance of letting children, who have come with traumatic experiences, play freely. According to her, play can be understood as a means of communication. Play can build an opening where the social worker can more naturally interact with the child or choose to step back and observe. She stated that:

“We (social workers) can actually pick up on a lot of themes if we just let them free play and either interpret or engage with them in their play. Just see the outcome using play. I think that children can use play as a means of communication and will play out their experiences. “

-SW2

Five of the social workers expressed that they use play as a way to communicate and build trust with their young clients. SW4 gave an example of when she was playing a card game with one of her clients, which suddenly led to the child spontaneously opening up and talking about his experiences. Previous studies also show that play is an effective way to communicate with children as a clinical method (Drisko et al. 2020; Geddes Hall, 2019; Woollett, Bandeira & Hatcher, 2020).

SW3 also shared:

“We also see children making up things. Making up beautiful scenarios of a family that is together, a family that is taking trips. Some people could say it is like lying, I like to think about it like they are being very creative. They are imagining and envisioning what it could be like, a healthy family”.

-SW3

Previous studies on trauma interventions also acknowledge play as an effective tool to help children work through their traumas (Geddes Hall, 2019). Moreover, Lazarus and Folkman (1984) would most likely agree, since they advocate for similar therapeutic methods that involve using one’s imagination as a tool to relieve a stressful and traumatic experience. For instance, they refer to methods such as role-playing and psychodrama as effective tools for coping (Lazarus and Folkman, 1984). Moreover, by continuing to examine a child’s use of play and imagination to communicate their wants and needs, one could argue that these children are playing with the concept of self-actualization. Although self-actualization can be described as a multifaceted concept that involves many different things, in essence, it refers to an individual’s ability to recognize their full potential (Maslow, 1970). In this case, these children’s idea of themselves at their fullest potential may involve belonging to a healthy family that takes trips together.

6.4.3 Building Boundaries

The social workers in this study argued for the importance of helping children identify their emotions after witnessing domestic violence, in order to further help them understand their own boundaries:

“Again, talking about emotions, identifying emotions, and a lot of work with boundaries. Explaining what a boundary is and identifying what they are comfortable with, identifying what they are not comfortable with. Having the language to say no”

- SW3

SW3 went on to explain that her work with identifying emotions and working with boundaries is aimed to help a child build a sense of worth and self-respect. Some common games that she uses in order to specifically practice building boundaries are ‘Simon Says’ and ‘Red Light-Green light’. She explained that both games involve one person giving directions while the rest have to follow. According to SW3, this is a good way to help children learn how to listen to their environment and the people around them. It also gives a sense of being in charge and advocating for what they want. A study by Geddes Hall (2019) supports SW3’s suggestion of play as a symbolic way of helping a child rebuild a sense of control and empowerment. Furthermore, to understand how these types of exercises can be associated with coping theory Lazarus & Folkman (1984) state that coping should not be mistaken for mastering or overcoming all forms of stress. In some cases, stress cannot be won over. Instead coping should be seen as a strategy that helps an individual handle, minimize, accept, or even ignore a situation that is out of one’s control (Lazarus & Folkman, 2022: 139). While a child might not be able to control the violence that occurs at home, learning to build boundaries can be understood as a way for the child to find their own sense of control. Furthermore, Maslow might argue that learning to build boundaries and learning to advocate for themselves also has to do with a child’s ability to get their needs met.

7. Conclusion

This section will conclude the results of my study which were based on three research questions and the answers received during interviews with six social workers. It will briefly recap the research method and theories that were used. Lastly, I state the importance of why further research on children who witness domestic violence should be made.

The purpose of this study sought to understand how social workers, in Illinois, working with children who have witnessed domestic violence, describe the impact that witnessing violence can have on a child. In summary, this study found that the social workers who were interviewed, all agreed that witnessing domestic violence as a child has as significant an impact on a child's general health and development, as experiencing the violence personally. This study also found that social workers use various methods in order to help children overcome their anxieties and traumas.

Understanding the different ways social workers might describe domestic violence, was the focus of the first question. Overall, the participants in this study referred to it as a power and control dynamic, whereby various manipulative behaviors and strategies are used to achieve dominance. A changing cycle of aggressive and passive-aggressive tactics - physical, sexual, psychological, and financial violence - are used to gain control. Most of them described domestic violence as mainly involving intimate partner relationships in which men were identified as the main perpetrators of violence, while women and children were identified as the victims of this abuse.

The second question focused on understanding the impact of witnessing domestic violence, which is the case for many children in homes where domestic violence occurs. The six social workers in this study emphasized the effect and traumatic consequences of witnessing domestic violence as an experience that can stay with a child throughout her life. A child's physical, social, and emotional well-being and behavioral development can be affected. As well, the attachment relationship between child and parent can be negatively impacted, through the witnessing of violence. In short, witnessing domestic violence does not only affect the child, at the moment, but stays with them and can affect them in future social relationships.

The final question that the study aimed to evaluate concerned the methods social workers use to help children who have witnessed domestic violence. Some of the social workers practiced a method called Child-Parent Psychotherapy, which focuses on rebuilding and strengthening the child and parent relationship. Others focused on different forms of play methods, which encourage the child to use their imagination in order to make sense of the violence they have witnessed. Games and activities that help a child build and set boundaries were also helpful.

This was a small study that employed a qualitative research method. Therefore, I was unable to make any general conclusions regarding Illinois social workers' work with children and domestic violence. Two main theories were referred to throughout, as frameworks for analyzing the data from the interviews: Abraham Maslow's theory of *Maslow's Hierarchy of Needs*, helped frame how lacking certain human needs, especially in childhood, can have both a short-term and long-term impact on a person's life; and Lazarus and Folkman's (1984) coping theory, helped highlight what motivates a perpetrator of domestic violence to abuse their victims, and to identify what coping strategies victims take on in order to deal with domestic violence.

The results of this study showed that witnessing domestic violence is a complex issue that causes both long-term and short-term consequences in children. Many of the social workers stated that many children go unseen or are overlooked. These research findings are important in order to understand that despite effective interventions used by social workers to help these children, this does not take away the entirety of the struggles that these children face, nor does it eliminate the problem of domestic violence. Further research on understanding and helping children overcome and deal with the complexities of witnessing domestic violence is still needed to further help and support children in their right to a healthy and happy life.

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9. Appendices

Appendix I

Dear (X),

As it is almost time for our interviews to begin, I thought I would send out another e-mail explaining more precisely the purpose and plan for my study.

As you know, my name is Mei Johnson Petri. I am in the last year of my social work bachelor's program at Lund University, which is located in the south of Sweden. This fall I am in Chicago to conduct a study for my final thesis. The purpose of this study is to understand how social workers, in the state of Illinois, describe the effect *witnessing domestic violence* can have on a child and what methods they use to help these children.

The interviews are planned to take about one hour. In preparation, I have prepared a set of questions. Participation in this study is voluntary. Before each interview begins I will ask for your consent to partake in this study. I will also ask for your permission to record the interview. This will not only help me be more present during the interview, but it will also be helpful when I later transcribe the interviews. If you decide that you no longer want to be a part of this study, you, of course, have the right to withdraw. It is also important to mention that the answers collected from each interview will only be used for the purpose of this study. Each research participant's identity will also be kept anonymous.

Lastly, I have listed a few points that are important in order for you to be eligible for this study.

1. You must have a degree in social work
2. You must have professional experience as a social worker working with children who have witnessed domestic violence.
3. You must be working, as a social worker, within the state of Illinois.

Please feel free to contact me if you have any questions or concerns regarding this study.

I look forward to meeting you!

Sincerely,
Mei Johnson Petri

Researcher's Contact: For any further questions about this study please contact my e-mail: mjohnsonpetri@gmail.com.

Appendix II

Interview Guide

Introduction

- Short presentation of myself and the purpose of my study.
- Review the letter of information and secure confirmation of voluntary participation and, consent.
- Information regarding the time frame for each interview- approximately one hour each.
- Ask the interviewee for any questions or concerns regarding the study.

Background Questions

- Introduce yourself. (example: What is your name? How old are you? Details about your education.)
- How long have you worked as a social worker?
- Where and what do you work currently? How long have you worked there?
- What type of clients do you meet? (Example: children of a particular age, from a certain area, economic background, or race.)

1. Defining Domestic Violence

How would you define domestic violence?

- Physical abuse
- Sexual abuse
- Emotional abuse
- Verbal abuse
- Similarities/differences between violence and abuse
- Who fights? (violence between parents, between parents and siblings, and/ or pets?)

2. Witnessing Domestic Violence

How do you think witnessing domestic violence impacts children?

- Physical development
- Emotional development
- Behavior
- Social Relationships
- Education
- Self- esteem
- Age the child became aware of the violence and abuse

3. Methods

What methods do social workers use to help children who have witnessed domestic violence?

- Trauma-related treatments
- Stress-related treatments
- Behavior-related treatments
- New methods that are valuable
- Old methods that are valuable

4. Last comments

Is there anything I forgot to ask or, an answer that you would like to develop?

Closing the interview

- Ask if there are any questions that I forgot or that they would like to elaborate on.
- Ask if it would be okay to contact them if I have any further questions after the interview today is completed.
- Ask the interviewee if they would like a copy of the final thesis.
- Thank you for your participation.