

Domestic Violence: A Cog on the Bio-Psycho Social Wheel of Children

***Ubochi N. E¹ and Nnamani A.J.¹**

¹Department of Nursing Sciences, Faculty of Health Sciences and Technology,
College of Medicine, University of Nigeria Enugu Campus.

Corresponding Author: nneka.ubochi@unn.edu.ng

Abstract

Domestic violence includes an entirety of intentional actions or omissions through which physical, psychological, sexual and economic maltreatment is meted out to an individual, by a person which is or have been in a family relationship with the victim. The victims of domestic violence are predominantly women in family relationships but recent studies show that children are exposed to domestic violence. As many as 275 million children are exposed to domestic violence globally. Children are exposed to domestic violence not only when they are victimised but when they witness the actual abuse, hear the threats or see the aftermath of actual violence or observe the tension in the house. Children have some developmental milestones which they should accomplish at each stage, and exposure to domestic violence robs the child of the ability to accomplish these normal developmental milestones at appropriate time. Exposure to domestic violence in childhood has been linked to adverse outcomes, including difficulties in cognition, low self-esteem, social withdrawal, anxiety; aggression, and delinquency, including continuing the abusive cycle. These negatively affect the physical, social and psychological development of the child. There is therefore a need for urgent and serious interventions, if the society intends to give billions of children worldwide a future devoid of chaos, anarchy and doom.

Keywords: Domestic violence, bio-psycho social wheel, children, Cog, family development

Introduction

Across the globe, an estimated 1 billion children aged 2-17 years, have experienced domestic violence in the past year, in the form of physical, sexual or emotional violence or neglect (Hills, et al., 2016; WHO, 2022). The silence around the reporting of domestic violence mask the real figure, therefore it is believed that millions more are being exposed across the globe. In 2009, in the Philippines, it was estimated that as

many as 7 to 14 million children were exposed to domestic violence and about 3.3 million children exposed to domestic violence in their homes (Eldest, et al., 2010). UNICEF (2020) reported that 1 in 3 children under age five live with a mother who is a victim of intimate partner violence. The children of these women often witness the domestic violence. Domestic Violence Roundtable Organization (2017) asserted that witnessing domestic violence in a home

where one of the parents is abusing the other parent plays a tremendous role on the well-being and the development of children witnessing the violence.

Research on children who witness family violence is a special case of counting the hard-to-count and measuring the hard-to-measure (Fantuzzo, et al., 1999; WHO, 2020), so it is impossible to be definitive about the number of families affected. However, several studies have found that in 85-90% of the time when a violent incident took place in a domestic situation, children were present and children were also abused during the violent incidents in about 50% of those cases (Khemthong & Chutipongdech, 2021). One woman in three has been abused during her pregnancy (Roman-Galvez, et al., 2021) and this has grave consequence for the growing fetus.

Numerous studies have demonstrated that children exposed to domestic violence and/or child abuse are more likely to experience a wide range of adverse psychosocial and behavioral outcomes (WHO, 2020; Herrenkohl, et al., 2008; UNICEF, 2020). Up to 90% of children who have been abused will develop mental health issues by the time they are 18 (NSPCC, 2017, WHO, 2021). Exposure to domestic violence in childhood has been linked to a set of outcomes, including low self-esteem, social withdrawal, depression, and anxiety (Edleson, 1999; Fantuzzo, et al., 1997; Hughes, 1988) aggression, violence, and delinquency, including continuing the cycle of abuse. Studies from various countries support the findings that rates of abuse are higher among women whose husbands were abused as children or who saw their

mothers being abused (UNICEF, 2010, WHO, 2020).

The biological, psychological and social development of children is influenced by the nature/nurture controversy and the experience of domestic violence contributes significantly to the development of negative milestones in children. McLeod (2018) hypothesised that genetics as well as environmental factors have effect on human behaviour. The developmental wheel of children needs to be oiled at all times if the society desire a future devoid of pains, aggression and state of anarchy for our children. This paper therefore discusses the bio-psychosocial effect of domestic violence on the development of children.

Concept of Domestic Violence

Domestic violence has neither any precise definition nor universally accepted definitions. In-fact, its definition changes from country to country and across regions (Sunitha, 2016). In some countries and region, domestic violence is seen as justified particularly in actual or suspected cases of infidelity on the part of the women. Evidence suggests a direct and significant correlation between a country level of gender inequality and actual rate of domestic violent (Esquivel, et al., 2013). However, there is usually an underlining issue in domestic violence-the perpetrator is usually a family member or someone who has lived with the victim in a marriage relationship or among partners who are cohabiting (Kumar, 2010). It is an incident or pattern of incident of controlling, coercive, threatening, degrading and violent behaviour; including an entirety of wilful actions or omissions through

which is exercised physical, psychological, sexual and economic maltreatment, by a person which is or have been in a family relationship with the victim (Women Aids, 2015; Robert et al., 2015).

Consequently, domestic violence includes every behaviour that frightens, manipulates, humiliates, isolates, fears, terrorizes, threatens, damages, hurts or injures the other person in which the perpetrator is or have been a family member. According to Arizona Coalition to End Sexual and Domestic Violence (2017), domestic violence is any behaviour the intention of which is gaining power and control over a partner or intimate family member. Abuse is a learned behaviour and not necessarily orchestrated by anger, mental problems, drugs, alcohol or other excuses. Contrary to held belief on the cause of abuse, in domestic violence, abuse is not due to abuser's loss of control over his behaviour or anger but a deliberate choice made by the abuser (Cross government, 2017; Arizona Coalition to End Sexual and Domestic Violence, 2017). In majority of cases, the abuser is not violent with other people such as his boss, he is able to stop and comport himself before other people and is selective of whom to attack.

The menace of domestic violence on family can only be imagined. The abuser, the abused and other family members, may experience psychological problems, physical disability, social isolation, limited finances and poor ability to create a healthy family relationship. The effects of domestic violence on children who live in a household of abuse/violence are remarkably deleterious, children often show psychological problems from an early

age such as deregulated aggression which may later contribute to continuing the legacy of abuse in adulthood (Alabama Coalition Against Violence, 2010). As such intergenerational cycle of abuse may exist if the society condones the abuse.

Concept of human development

Many theorists conceptualised theories of human development to explain milestones in the physical, cognitive, personality and social domains. Other theories on child development classified developmental patterns of children and measured certain abilities for each developmental milestone. Physical development emphasizes how brain, nervous system, muscle, sensory capabilities, needs for food, drink and sleep affect behaviour. Personality and social development emphasize the enduring characteristics that differentiate one person from another and how social relationships grow and change over time.

Biologically, man develops from the germ cell of the primordial follicles resulting from the fertilization of an oocyte with a spermatozoon. There is imprinting of genetic material, subsequent cell division, growth and development resulting in the birth of a full term baby after 9 months. Prenatally, cognitive, social and personality developments occur and intelligence is partly determined (Wede, 2021). Genetically determined personality traits are also present; as such foetus in-utero can perceive emotion, touch and movements of the mother. The foetus assimilates the environmental stimuli through the process of perception. *Perception* is the psychological process by which the human brain processes the

sensory data collected by the sensory organs. This ability is necessary for infants to learn about events and objects. Prenatal environment that is characterised by violence, alcohol or drug use in the mother could result in some psychological disorders and impaired cognitive functions of the child in later life (Vameghi et al, 2016). A child who experiences psychological problem at an early stage of life is most likely to experience problem with accomplishing tasks in each development milestone which ultimately may initiate some problems in adulthood.

The Menace of Domestic Violence on Child's Bio-Psycho Social Development

Children who live in homes where there is domestic violence grow up in an environment that is unpredictable, filled with tension and anxiety and dominated by fear. This can lead to significant emotional and psychological trauma, similar to that experienced by children who are victims of child abuse. Studies posit that the effect of domestic violence during pregnancy is felt by the fetus (Doi et al., 2022; Shah & Shah, 2010). The internal and external environment of the child during the developmental stages, affect their health in-utero, in childhood as well as in adulthood (Doi, et al., 2022). Adverse prenatal environment may result in low infant birth weights, premature birth and fetal death, due to the mother's physical trauma and/or emotional stress (Shah & Shah, 2010). Increased maternal stress during the times of violence, especially when combined with smoking and drug abuse, can also lead to premature deliveries and low weight babies (Homer, 2005, Capara et al., 2020).

Infants present in the home during domestic violence episodes often fall victim and "caught in the crossfire." They may suffer unintentional physical trauma as their parent is being battered. Infants may be inconsolable and irritable, have a lack of responsiveness secondary to lacking the emotional and physical attachment to their mother, suffer from developmental delays, and have excessive diarrhoea from both trauma and stress (Vameghi, et al., 2016). Infants are most affected by the environment of abuse because the child's brain is yet to be fully developed. Erickson's Psychosocial Stage 1- Trust versus Mistrust provides that during the years of early infancy, the child must develop a sense of trust for their caregiver. The experience of trauma; specifically, domestic violence during this beginning stage, can lead to inadequate emotional development, causing this child to remain at this stage instead of passing through to the appropriate subsequent stages. If this trust is not gained at an early age, the child will grow up anticipating that the world will reflect danger and volatility and that people are not to be trusted (McCluskey, 2010). Battered women have problems with attachment in their personal relationship, a lack of trust, a lack of ability to soothe their child or to be soothed by another person, difficulty sleeping, self-harm, and a lack of empathy or over-involvement in the distress of others (Lowell et al., 2014).

Middle aged children who witness domestic violence in the home can suffer an immense amount of physical, emotional, and behavioural effect. These children may complain of general aches and pain, such as headaches and stomach aches. They may also have

irritable and irregular bowel habits, cold sores, and they may have problems with bed-wetting (WHO, 2020). These complaints have been associated with depressive disorders in children, a common emotional effect of domestic violence. Along with these general complaints of not feeling well, they may always appear nervous, and have short attention spans. Children may show symptoms of fatigue and constant tiredness may fall asleep in school due to the lack of sleep at home or disinterestedness. Children of domestic violence victims are frequently ill, and suffer from poor personal hygiene with tendency to partake in high risk play activities, self-abuse, and suicide as an escape to the problem (Alabama Coalition against Domestic Violence, 2010).

Adolescents are also exposed to physical symptoms, emotional and behavioural issues. They may feel shame, anger and desire for retaliation. They are in jeopardy of academic failure, school drop-out, and substance abuse. Their behaviour is often guarded and secretive about their family members and they may become embarrassed about their home situation. In a meta-analysis of studies that examined the relationship between domestic violence exposure in childhood and adolescent internalizing and externalizing behaviours. Adolescents feel the insecurity in the house and generally do not invite friends over and tend to spend their free time away from home. Denial and aggression are their major forms of problem solving. Teens cope with domestic violence by blaming others, encountering violence in a relationship, or by running away from home. An estimated one fifth to one third of

teenagers subjected to viewing domestic violent situations experience teen dating violence, regularly abusing or being abused by their partners verbally, mentally, emotionally, sexually and/or physically. 30 to 50% of dating relationships can exhibit the same cycle of escalating violence in their marital relationships (UNICEF, 2019).

Generally, irrespective of age, it is common for children of victims to feel self-blame, helpless, grief for loss of family cohesion or in some circumstances the child may be ambivalent. Fear, dread, terror, worry and sadness are common. In a study, 60% of children witnessing domestic violence feel they are to be blamed, 52% have behavioural problem (CAADA, 2014). When the unfortunate violent situation is at its peak and a child tries to intervene, logically one would have thought that in order to save the child from harm, parents would control themselves, however statistics show otherwise. It is said that about 50% of the abusers also end up abusing their children. Another alarming statistic is that 25% of the victims of the abusive relationship also tend to get violent with their children (UNICEF, 2019). The violence imposed on these innocent children can in some cases be life-threatening. If a mother is pregnant during the abuse, the unborn child is at risk of lifelong impairments or at risk of life itself. Researchers reported that mothers who experience domestic violence had more than double the risk of child mortality (Doi et al, 2022, WHO, 2020).

There is substantial evidence indicating that children who witness domestic violence (DV) have psychosocial maladaptation that is

associated with demonstrable changes in the anatomic and physiological make up of their central nervous system. Individuals with these changes do not function well in society and present communities with serious medical, sociological, and economic dilemmas (Doi et al., 2022). Children exposed to violence in their home often have conflicting feelings towards their parents; For instance, distrust and affection often coexist for the abuser. The child becomes overprotective of the victim and feels sorry for them. They often develop anxiety, fearing that they may be injured or abandoned, that the child's parent being abused will be injured, or that they are to blame for the violence that is occurring in their homes (UNICEF, 2019).

It is very common for abusers to see one or some children of the abused as a replica of their victim and therefore abuses same, with the intention of hurting the victim through acts of punishment not measurable with the child's offences. Some children act out through anger and aggression even in situations that do not call for it (UNICEF, 2019). Physical aggression can also manifest towards the victim from the children as the victim does not have the ability to develop authority and control over them.

Depression is also a common problem for children who experience domestic violence. The child often feels helpless and powerless. More girls internalize their emotions and show signs of depression than boys, while boys are more likely to act out with aggression and hostility (Moyan et al., 2010). Witnessing violence in the home can give the child the idea that nothing is safe in the world and that they are not

worth being kept safe which contributes to their feelings of low self-worth and depression. Symptoms include isolation from friends and relatives in an effort to stay close to siblings and victimized parent (Brady et al, 2005). The adolescent may display or join a gang or become involved in dating relationships that mimic the learned behaviour.

Socially, there is sometimes role reversal between the child and the parent where the responsibilities of the victim, who is emotionally and psychologically dysfunctional, are transferred to the child (Pantazi, 2019). In this situation, the parents treat their child as a therapist or confidant, and not as their child. They are forced to mature faster than the average child. They take on household responsibilities such as cooking, cleaning, and caring for younger children. The responsibilities are usually far beyond normal assigned chores, and are not age appropriate. The child becomes socially isolated and unable to participate in activities that are normal for a child their age. The prettified child is at risk of becoming involved in rocky relationships because they have been isolated and are not experienced at forming successful relationships. Also they tend to become perfectionists because they are forced to live up to such high expectations for their parents (WHO, 2020).

In general, children exposed to domestic violence frequently do not have the foundation of safety and security that is normally provided by the family (UNICEF, 2019). The children experience desensitization to aggressive behaviour, poor anger management, poor problem solving skills, and learn to engage in exploitative relationships.

Efforts Made to Curb Domestic Violence: Several efforts had been made in the past to curb the menace of domestic Violence in the traditional African setting, by non-governmental organisations, and the legislative arm of government.

Cultural provision

Culturally, among certain communities in Igbo land, during the traditional marriage ceremony the groom is made to pay a certain amount known as “ego otiti” in addition to bride price. The “ego otiti” signifies zero tolerance to domestic violence and sends a message across to the groom and family to handle the bride with care. During the traditional marriage rite, an elder is designated to educate the groom and family on the significance of “Ego otiti”. Following good understanding, the groom pays the designated amount before the bride is handed over to the groom’s family. Payment of the sum denotes an agreement between the families that the new couple was never to settle matters between them with the fist. The said sum is usually set aside for special purposes especially reported cases of domestic abuse. The said sum is used to buy intoxicating drinks for young men, as well as to transport them to the groom’s house to manhandle him if he resorts to violence on their daughter and sister. This payment is still practiced till date among the Nri people. However, the silence surrounding domestic violence, urbanization and religion has grossly affected implementation.

Efforts by Government, Non-Governmental Organizations and international Agencies

Several agencies have also raised their voices against the abuse of women and children and all forms of domestic violence. While some are offering counselling to the victims, others are providing shelters for the abused, legal services and legislations. For example, the Lagos State house of assembly in 2017 passed a law “Protection Against Domestic Violence Law of Lagos State” (Akintola, 2010). Other agencies advocating against domestic violence in Nigeria include the Cleen Foundation located in Abuja with branches in Edo, Lagos and Ibadan; ACTS Generation, CIDDORC in South Eastern Region, BAOBAB for women’s human rights in Lagos and the Rayuwu sexual assault referral centre in North-central Nigeria.

Many international organisations are partnering with the government, businesses and civil society organizations to respond and prevent domestic violence against women and children. Notable among them is United Nations International Children Emergency Fund (UNICEF) with presence in many countries across the globe. These agencies provide nurturing environment, the space and respect for child victims to progress at their own pace, provide reassurance and increased senses of security by providing explanations and comfort for the things that worry the children, like loud noises (UNICEF, 2009). They also help victims develop and maintain positive contact with significant others such as distant family members because in majority of cases, children whose mother are being abused are denied access to relatives, made to take oaths of secrecy and

encouraged to swallow bitter pills of lies by parents (UNICEF, 2009) . Despite these efforts, domestic violence is still crowded with secrecy, masked by culture and religion thereby posing lots of challenges in the reporting and prosecuting of offenders.

Conclusion

Domestic violence is a canker worm that is eating deep into the fabric of the society. The effect on children is quite devastating not just during and after the violence but can lead to lifelong disability in children which progresses into adulthood. If domestic violence is not treated with utmost sense of responsibility and urgency, the society might be creating a monster that will unleash terror on the society in the nearest future. The society is currently battling with issues of terrorism and other violent crime, and there is every need to ensure that child victims of domestic violence are well assisted and cared for, to ensure recovery and prevent the physical, social and psychological consequences on their physical, social and psychological development.

Recommendations

1. I recommend that children who are exposed to abuse should be assisted with the optimal intervention that will help them move on in life without disabilities.
2. There is need to promulgate law with serious consequences for the perpetrators of domestic violence so that it will deter them from such act.
3. Cultures that militate against domestic violence should be encouraged and supported by law since the eroding of cultural values contributed significantly to the recent

perceived power tussle resulting in violence.

4. Individuals, family and organizations including non-governmental organizations and agencies should devote more effort to reporting domestic violence and prosecuting offenders so that the real nature of the menace is brought to the full glare of the public.
5. Efforts should be made to desensitize the young victims and also to teach the children that violence is not the means to settling scores but rather a weakness with utmost consequences.

References

- Akintola, E. (2010, March 25). Law on domestic violence; How far can it bite? Law & Human Rights. *The Guardian Newspaper*.
- Brady, K. T., & Sinha, R. (2005). Co-occurring mental and substance use disorders: the neurobiological effects of chronic stress. *The American Journal of Psychiatry*, 162(8), 1483-1493. <https://doi.org/10.1176/appi.ajp.162.8.1483>
- CAADA, (2014). In plain sight: The evidence from children exposed to domestic violence. safelives.org.uk.
- Capara, G.L, Berbardii, J.R., Bosa, V.L, Da Silva, C.H.& Goldania, M.Z. (2020). Does domestic violence influence the beginning of complimentary feeding? *BMC Pregnancy, Childbirth* 20, 447. <https://doi.org/10.1186/s12884-020-03144-y>
- Doi, M., Usui, N. & Shimada, S. (2022). Prenatal environment and neurodevelopmental disorders. *Frontiers in Endocrinology*, 15 (13):860110. <https://doi.org/10.3389/fendo.2022.860110>.
- Domestic Violence Roundtable (2008). Effects of domestic violence on children. <https://www.domesticviolenceroundtable.org>

- Edleson, J. L., Ellerton, A. L., Seagren, A. E., Kirchberg, S. O., & Ambrose, A. T. (2007). Assessing child exposure to adult domestic violence. *Children and Youth Services Review*, 29(7), 961-971.
- Esquivel, S., Esteben, E., Lambert, Teri, L. & Hamel, J. (2013). Partner abuse worldwide. *Partner Abuse* 4(1) 6-77.
- Fantuzzo, J. W., Boruch, R., Beriama, A., Atkins, M., and Marcus, S, (1997), 'Domestic violence and children: Prevalence and risk in five major US cities', *Journal of the American Academy of Child and Adolescent Psychiatry*, 36, 1, 116-122.
- Hills, S., Mercy, J., Amobi, A. & Kress, H. (2016). Global prevalence of past year violence against children: a systematic review and minimum estimates. *Pediatrics*, 137(3): e20154079.
- Horner, C. (2005). Domestic violence and children: Effect of domestic violence on children. *Journal of Paediatric Health Care*, 19 (4) 206-212.
- Khemthong, O. & Chutipongdech, T. (2021). Domestic violence and its impact on children: A concise review of past literature. *Walailak Journal of Social Science*, 14(6), 1-121.
- Kumar, A. (2010). Domestic violence in India: Causes, consequences and remedies. *Society of Youth Ki Awaaz Piliani*. <https://www.youthkiawaz.com>
- Lowell, A., Renk, K. & Adgate A.H. (2014). The role of attachment in relationship between child maltreatment and later emotional and behavioural functioning. *Child Abuse and Neglect*, 39(9), 1436-1449
- Moylan, C.A., Herrenkohl, T.I., Sousa, C., Tajima, E.A., Herrenkohl, R.C. & Russo, M.J. (2010) The effects of child abuse and exposure to domestic violence on adolescent internalizing and externalizing behavior problems. *Journal of Family Violence*. 25(1):53-6310.
- National Society for the Prevention of Cruelty in Children, (2017). *Child Protection in the UK*. NSPCC. <https://www.nspcc.org.uk>
- Pantazi, J. (2019). The Trauma of Parentification. <https://www.youniversetherapy.com>
- Roberts, N. & Price, D. (2019). Perception of domestic violence: how young females are more likely than young males to know controlling domestic violence behaviours. Working paper, CASS. University of Sunderland, <http://sure.sunderland.ac.uk/id/eprint/10722/>
- Roman-Galvez, R., Martin-Pelaez, S, Zamora, J, Khan, K.S. & Bueno-Cavanillas, A. (2021). Worldwide prevalence of intimate partner violence in pregnancy. A systematic review and meta-analysis. *Frontiers in Public Health* 9:738459.
- Shah, P.S. & Shah, J. (2010). Maternal exposure to domestic violence and pregnancy and birth outcomes: A systematic review and meta-analysis. *Journal of Women's Health*, 19(11), 2017-2031
- Sunitha, P.S. (2017). Domestic violence and theories *International Journal of Research in Economics and Social Sciences* 6(12), 206-214.
- UNICEF, (2009). Behind closed doors: Impact of domestic violence on children. <https://www.ijp.gov>
- UNICEF, (2019). Violence against children. protection
- Vameghi, R. Amir A. S., Sajedi, F, Sajjadi, H., & Alavi M. H. (2016). Path analysis: Association between domestic violence and perceived stress in mothers and children's development. *Child Neurology* 10(4): 36- 48.
- Wede, J. (2021). Development from conception to adolescence. <https://www.psu.pb.unizin.org>
- Women's Aid (2020). What is domestic violence? Women's Aid Federation of England. <https://www.womensaid.org.uk>



World Health Organisation (2020). Child maltreatment. <https://www.worldhealthorganisation>child maltreatment>

World Health Organization (2021). Adolescent mental health. <https://www.who.int>

