



Children's Exposure to Domestic Violence & its Effects on them: Implications for  
Social Work in Botswana

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MSW Research Essay

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**DEDICATION**

This work is dedicated with adoration to all children who have been exposed to domestic violence.

**APPROVAL**

This essay has been examined and approved as meeting required standards of scholarship for partial fulfilment of the requirements for Master's Degree in Social Work.

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**STATEMENT OF ORIGINALITY**

The work presented in this research essay was completed in August 2017 by the author at the University of Botswana. It is an original work except where due reference was made and it has not been submitted for the award of Masters' degree to any other institution.

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Student's signature Date

**ACRONYMS AND ABBREVIATIONS**

<b>ACPF</b>	African Child Policy Forum
<b>ARVAC</b>	African Report on Violence Against Children
<b>CDV</b>	Child Domestic Violence
<b>CEDV</b>	Children Exposed to Domestic Violence
<b>CRC</b>	Convention On The Rights Of A Child
<b>DVA</b>	Domestic Violence Agency
<b>DV</b>	Domestic Violence
<b>GBV</b>	Gender Based Violence
<b>HIV and AIDS</b>	Human Immuno Virus and Acquired Immuno Deficiency Syndrome
<b>IPV</b>	Intimate Partner Violence
<b>NGO</b>	Non-Governmental Organisation
<b>PTSD</b>	Post Traumatic Stress Disorder
<b>SW</b>	Social Work
<b>VAC</b>	Violence Against Children
<b>WAD</b>	Women Affairs Division
<b>WLSA</b>	Women and Law in Southern Africa

**ABSTRACT**

*Domestic violence is one of the causes of long-term problems faced by children, and has been found to adversely affect their wellbeing. This study explores the various ways in which children experience violence in the home; risk factors associated with such experiences; the effects of violence on children as well as the role of social work. To achieve this, the study used literature on children and violence internationally, regionally and nationally. In addition, the study used the ecological model to explain the experiences of children living in violent households. The findings suggest that domestic violence has significant implications for children's wellbeing, and that early interventions by social workers would go a long way in either preventing children's exposure to domestic violence or cushion the effects of domestic violence on children.*

**Key Words:** *Domestic violence, children and social work.*

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## CHAPTER ONE

### 1.0 Introduction and background information

Violence against children (VAC) is globally acknowledged as both a social problem and a human rights violation. The issue continues to steer debates among scholars, clinical practitioners and mental health professionals. Despite widespread interest in the phenomenon across different fields of study, existing literature on VAC is scarce and its dynamics are insufficiently understood and discussed. Furthermore, incidence and prevalence rates in Botswana are unknown. However, the scanty literature and insights from the field demonstrate that the numbers of children who experience violence cannot be ignored.

Research on domestic violence shows that between 3.3 million and 10 million children world-wide witness violence in their homes (Straus, 2005). Moreover, nearly 900,000 young children are categorized as abused by parents and other caretakers (World Health Organization, 2005). There is evidence that most children who are exposed to domestic violence often experience child abuse (Edleson, Tajima, 2011). A body of knowledge on family studies has also affirmed that children witnessing domestic violence are more likely to experience different forms of adverse psychosocial and behavioural outcomes (Herrenkohl, Sousa, Tajima, Herrenkohl, & Moylan, 2008; Sternberg, 2006; Wolfe, Crooks, Lee, McIntyre-Smith, & Jaffe, 2003). These studies further show that when children experience “double whammy” or dual exposure effect (that is when they are exposed to both child abuse and domestic violence), they fare worse mentally, than when they are exposed to only one form of violence (Herrenkohl et al., 2008).

In addition, research on domestic violence confirmed significant relationships between exposure to domestic violence (DV) and children’s development. This means that when children experience domestic violence directly or indirectly their mental health is impacted negatively (Hughes, 2012). Research has also revealed that African communities offer limited support to tackle the issue of children witnessing domestic violence. This is due to the increase in traditional and socio-cultural factors that mitigated such aggressive behavior in society according to McIntosh, (2010). Literature has established that most children living in violent environments are prone to be violent. It revealed that children living in hostile environments tend to display antisocial behavior; low-level of social

capability; and poor learning outcomes in schools (Kitzmann, Gaylord, Holt & Kenny, 2011; Wolfe, Crooks, Lee McIntyre-Smith & Jaffe, 2011, Edleson&Nissley, 2011).

### **1.1 Statement of the problem**

Children's exposure to violence appears to be one of the social problems that has not been adequately researched, however, the issue remains a major crime in many societies. The African Report on Violence against Children conducted in 2014 indicates that 60% of children in Zambia, Mozambique, Morocco and Uganda and around half of children in Mali and Ethiopia experienced domestic violence and abuse as well as physical punishment from family members daily. It has also been documented that fathers are the most frequent perpetrators of domestic violence and child abuse in the home setting.

Most research has been conducted on adult victims of domestic violence (Eldeson, et al 2011; Kitzman Gaylord, Hott& Kenny, 2011; Margolin&Gordis, 2011). However, evidence shows that domestic violence has turned into a global matter; the frequency of its occurrence has further raised concern on its implications regarding children and families, hence, made the subject more interesting for researchers globally. For example, a majority of research on violence against children (VaC) in the community has been conducted in the U.S.A (Pinheiro, 2006). This research suggests that around 25% of children have been exposed to community violence (Finkelhore *et al.*, 2010). Among the few international studies that exist, research among 8–13 year olds in Cape Town, South Africa, found that 40% had witnessed someone being killed in their neighborhood (Shields *et al.*, 2009). Not sufficient information has been documented about violence against children in the community in the context of Botswana, however according to Kgwatalala, (2009), evidence from the field shows that this kind of violence prevails in large numbers even though there is a Domestic Violence Act (No. 10 of 2009) which aims to protect people facing domestic violence. While children experiencing domestic violence usually look fine to the outside world, inside, they are in terrible pain and their families are disordered and in shamble. Such children experience psychological and social disorders that impact on their development and quality of life.

Recent developments on domestic violence call for urgent attention from policy makers, researchers and professionals working with children and families. While, earlier research on the subject emphasized system responses and mostly targeting adult victims, limited attention has been

given to child victims of domestic violence. In addition, previous government initiatives in Sub Sahara Africa, particularly Botswana, have conceptualized domestic violence as a parenting problem, and not as a method of child abuse (Pinheiro, 2006). However, the need to protect child victims of domestic violence has brought new dimension and understanding of the issue (Pinheiro, 2006). Therefore, this current study sought to fill a gap in existing literature because there is scanty literature on these issues in the context of Botswana.

## **1.2 Aim of the Study**

The overall aim of this research was to explore issues related to effects children's exposure to domestic violence in Botswana.

### **1.2.1 Objectives of the research**

1. To explore the various ways in which children experience violence in the home.
2. To examine risk factors for violence against children.
3. To explore the effects of domestic violence on children.
4. To examine the roles of social workers in the lives of children exposed to domestic violence.

## **1.3 Research Questions**

1. What are the various ways in which children experience domestic violence?
2. What are the risk factors associated with children's exposure to domestic violence?
3. What are the effects of domestic violence on children?
4. What roles could social work play in the lives of children exposed to domestic violence?

## **1.4 Significance of the study**

This study was motivated by the need to document the various ways in which children world-wide as well as in Botswana experience violence in the home; the risk factors as well as the effects. Research shows that domestic violence affects children and therefore it has implications for policy, practice and research.

### **1.4.1 Implications for Policy**

The theme of children witnessing domestic violence and / or directly experiencing domestic violence remains a major issue of concern not only to policy makers, but also to families and

society at large. This study justifies significant importance of policy as it analyses implications of domestic violence for children. Though, national awareness of the effects of spousal violence on women has developed lately, proper acknowledgments of the needs of children who live in violent homes remain unnoticed. Based on this assumption the findings of this research will inform existing policies.

#### **1.4.2 Implications for Practice**

The study will be beneficial to professionals such as social workers, pastors, counsellors and educators as these work closely with children who are abused. It will also benefit children and their parents, in that it will highlight risk factors for violence against children, the effects of violence on children as well as suggest strategies that could be used to assist children. In addition, the findings and recommendations of this study will provide social work practitioners with a strong knowledge base for conducting comprehensive assessment that can be used to identify a protective and risk factors, and support for children witnessing domestic violence. For example, social workers could use the information and evidence presented in these current study to strengthen parent-child relationships, which may be jeopardized, when children are exposed to violence at home.

#### **1.4.3 Implications for Research**

This study will contribute immensely to the existing body of knowledge in the field of social work and children's mental health. It will promote knowledge that focuses on the application of theory to practice in children and family studies. Furthermore, the study may instigate broader research that covers more geographical areas, socioeconomic backgrounds, ethnicity and cultural backgrounds of children witnessing domestic violence. Lastly, the study is likely to raise pertinent questions and expose gaps that might need further investigation and involve multi-disciplinary approaches and methodologies.

#### **1.5. Definition of key concepts**

*Domestic Violence:* In terms of section 2 of the Domestic Violence Act of 2009, domestic violence means any controlling or abusive behavior that harms the health or safety of the applicant. It includes; physical abuse or threat of; sexual abuse or threat thereof; emotional, verbal or psychological abuse; economic abuse; intimidation; harassment; damage to property; where the

applicant and the respondent do not stay in the same home, entry into the applicant's home without his or her consent; unlawful detainment; or stalking.

*Violence*: is the use of physical force to apply a state to others contrary to their wishes and may include some combination of verbal, emotional, economic, physical and sexual abuse (WHO, 2010).

*Children Exposed to Domestic Violence, (CEDV)*: refers to children seeing, hearing or being conscious of fierceness against one blood relation figure, which is committed by another parent symbol. This concept is used interchangeably in this study as children living with violence (WHO, 2010).

*Children*: for the purpose of this study and in accordance with the definition provided in the Convention on the Rights of a Child (CRC) as well as the Children Act of 2009, a child is every human being below the age of 18 years.

*Physical violence*: is an act of another party involving contact intended to cause feelings of physical pain, injury, or other physical suffering or bodily harm (Barnett, et al. 2004., pp. 4).

*Emotional/psychological abuse*: it is a form of abuse characterized by a person subjecting or exposing another to behaviour that may result in psychological trauma, including anxiety, chronic depression, or post-traumatic stress disorder (Saltzman, 2002).

*Victimization*: is the process of being victimised or becoming a victim and the individual can suffer any other injury, loss, or damage as a result of a voluntary undertaking (Max, et. al. 20).



## CHAPTER TWO

### 2.0 LITERATURE REVIEW

#### 2.1. Introduction

This chapter reviews literature that focuses on: the various ways in which children experience domestic violence; the risk factors associated with children's exposure to domestic violence; the effects of domestic violence on children as well as the roles of social workers in the lives of children exposed to domestic violence. The chapter also discusses the theoretical approach that informs this study. However, before reviewing literature on the above issues, an overview of domestic violence and children is provided.

#### 2.2. Overview of Domestic Violence and children

Children's exposure to domestic violence is a major challenge across the world. The prevalence of violence against children by parents, other family members and care takers has been acknowledged and documented in recent decades (Pinheiro, 2006). Existing literature shows that children experience domestic violence directly and indirectly. They face economic abuse, sexual abuse, physical abuse and emotional abuse. Children facing these experiences tend to show depressive symptoms, anxiety, and worry unlike their counterparts who have never experienced such menace (Graham-Bermann, Lynch, Banyard, DeVoe, & Halabu, 2007). Research shows that children's social care departments in England and Wales reported high incidents of domestic violence cases in families with children (Social Services Inspectorate of Wales 2004; Ofsted 2008; Laming 2009). Around the world, nearly 95 per cent of the victims of families and domestic violence are females, while 90 per cent of the perpetrators of domestic violence are males (Bagshaw & Chung, 2000). Therefore, gender remains a crucial factor for understanding the aetiology and experience of domestic violence.

Moreover, approximately one quarter of young adults in Africa have experienced at least one instance of domestic violence in their lifetime (Radford, 2011). Violence against children in the home tend to be a hidden experience that happens out of public glare, therefore reporting the incidence to institutions that address it can evoke shame and stigma (McGee 2000; Mullender et al 2002; Gorin 2004; Buckley et al., 2007). While the awareness of the consequences of domestic

violence on children increases, care takers still deny that their children live in violent environments.

Research on domestic violence also shows that, children are major victims, and this occurs daily in three out of ten households (Carlson, 2005). However in regard to the victims of domestic violence (children), the brutal exposure is often accompanied with many negative evolving features, such as, poverty, female-headed households and lack of education on the part of the main caregiver (Fantuzzo, Boruch, Beriama, Atkins, & Marcus, 1997). In addition, children witnessing violence in a household may get involved in violence, by having the feeling that they can seek for support or being branded as the cause of the event that led to the abusive situation (Peedicayil et al., 2012). It is also common that child victims of domestic violence are prone to the menace of physical harm both during prenatal and postnatal stages (Peedicayil et al., 2012). In addition, these situations increase the risk of mental health issues, including depression and anxiety disorders.

Research has also revealed that child victims of domestic violence tend to display high levels of trauma in their life (Kitzmann et al., 2011), and they respond to domestic violence in different ways (Osofsky, 2009). For instance, while some showed signs of distress in their development, others showed high sense of resilience to the negative exposure in life. However, children living in violent households tend to display signs of social and emotional problems, compared to those who never experience DV (Graham-Bermann, 2001). In addition, those who often experience incidents of domestic violence against their parents, always bear the worst result of its effects later in life. For example, exposure to violence in the home can lead young people to develop inappropriate norms concerning violence and aggression, and to model the behaviour and attitudes to which they have been exposed, increasing the risk that an individual will enter into an abusive relationship in adulthood, either as the perpetrator or victim (Pinheiro, 2006).

### **2.3. Ways in which children experience violence in the home.**

Existing literature shows that children experience domestic violence either as direct or indirect victims. As direct victims, children experience the following forms of violence in the home: economic abuse; physical abuse; sexual abuse; and neglect. These types of violence are discussed in some detail below.

### **2.3.1. Economic abuse and financial hardships**

Children experience economic abuse in various ways. One of such ways is when care takers fail to maintain children financially. Failure to maintain children is a serious issue affecting children. This emanates from factors such as unemployment, lack of communication and physical assaults. Anecdotal data shows that in the context of Botswana, for example, some men deny paternity and then refuse to provide maintenance for their biological children (Women's Affairs Department, 2007). Another way in which children experience economic hardships is when they loose out economically when their parents' divorce or separate. For example, in Botswana there are numerous maintenance cases where fathers fail to support their children born out of wedlock (Letamo and Rakgoasi, 2000). Some men in cohabitation relationships beat up or threaten to beat up the mothers of their children for taking them to court, or threaten to kill the children to avoid maintaining them. Many women are reluctant to claim maintenance for their children, fearing that the men would bewitch the children and cause them to die to avoid maintenance (women's affairs division, 2007).

Another way in which children experience economic hardships is through property grabbing. Property grabbing is taking of property of a deceased person from the surviving child to whom it stands to be distributed pursuant to inheritance (women's affairs division, 2007). Such property may include the marital home, land, and any other moveable or non-moveable property. According to United Nations (2006), with limited and insecure land rights, it is difficult, if not impossible, for the poor to overcome poverty. For poor families, a house and a small patch of land are often their only source of shelter, food and desperately needed income. But for many people in poverty particularly widowed women and orphaned children, powerful relatives or neighbours often steal their meagre property with violence or lies, because they have power and influence over them. Property grabbing was not a significant problem in Botswana until 1990s. During that decade, AIDS deaths triggered a sharp increase in incidents of property grabbing (Women's Affairs Division, 2007).

### **2.3.2. Physical abuse**

Besides economic abuse, children also experience physical abuse in the home. Most physical violence against children in the family is not fatal, nor does it cause permanent or serious visible

injury. However, some violence against very young children in the family causes permanent damage and even death, although perpetrators may not aim to cause such harm (Women and Law in Southern Africa, WLSA, 2002). Studies from various countries indicate that 15% of the “shaken baby syndrome” or the abuse of small children by shaking is frequently related to a head injuries and severe brain injury (W L S A, 2002).

According to Women ‘s Affairs Department (2007), 80% of violence against children in Southern African families frequently take place in the context of discipline and takes the form of physical, cruel or humiliating punishment. Harsh treatment and punishment in the family are common in both industrialized and developing countries. Children, as reported on child maltreatment studies and speaking for themselves during the study’s regional consultations, highlighted the physical and psychological hurt they suffer as a result of these forms of treatment and proposed positive and effective alternative forms of discipline. Besides, research(Ntshwarang, 2012) has revealed that 20% of children who experience domestic violence are confused and often receive mixed messages as schools used corporal punishment and taught them that hitting was wrong and at home they learnt that hitting could be used to solve problems and keep a person in line (Sternburg, Lamb, Gutterman, & Abbott, 2006). This creates a living nightmare for them and they may grow up being afraid of everything and trusting no one. Carlson, (2005) supported the above statement by commenting that abused children often fell isolated in the community they lived in and spent most of their time blaming themselves for the violence that occurred. Furthermore, children who experienced violence or has victims of crime continuously developed a "love/hate relationship". Sometimes they feel close to the abuser; other times, they may hope he or she would go away forever or die (Sternburg, Lamb, Gutterman, & Abbott, 2006). Additionally, research measured the association between children’s cognitive development and domestic violence. Sometimes studies that were no differences in academic abilities of children witnessing domestic violence and those living in violence free household, (Marcus & Braaf 2007), other studies reported that exposure to domestic violence has related to lower cognitive functioning (Masten, 2002). One of the main consequences of living in a domestic violence environment is that children develop the habit of using violence to resolve issues (Graham, 2001). This is because children tend to justify their own use of violence based on the observed behaviour of the significant person around them. This association was supported by Tajima, (2004) in a study and found out that adolescent boys

who had been exposed to and imprisoned for violent misconduct strongly believed that ‘acting aggressively enhanced one's reputation or self-image’ (p. 400). Therefore the notion that violence enhances self-image significantly predicted their violent conduct.

### **2.3.3. Emotional abuse and Neglect**

Literature on emotional abuse of children in Botswana is scanty and shows that such violence is revealed in passing in the course of studying other forms of child domestic violence (Sinkamba, 2012). Emotional abuse takes the form of a relationship rather than an event. According to the World Health Organisation (2002), emotional abuse is the failure to provide a developmentally appropriate, supportive environment, including the availability of a primary attachment figure, so that the child can develop a stable and full range of emotional and social competencies commensurate with her or his personal potentials and in the context of the society in which the child dwells.

Neglect by a caregiver is a situational factor because it tends to have devastating consequences for children's wellbeing and affects the physical, mental, and emotions regardless of whether the child is a direct victim or witness. Neglect involves lack of provisions for the child's development and failure to provide the child with basic requirements like health, nutrition, shelter, safe living conditions and education (Pickup, 2001). In addition, studies have found out that there is inadequate protection of children from environmental dangers, poor hygiene of children, depriving children of education and inadequate supervision, hence all these forms of abuse constitute neglect of children.

Research shows that a majority of caregivers have the resources that can be used to provide for children's needs but do not do so. Some caregivers deliberately deprive children of their needs or to some this occurs by default. Pinheiro, (2006) asserts that 20% of children who were found to be neglected by their parents around the world were victims of substance abuse and were found to be mentally ill. This statement is supported by the United Nations (2006) which states that 40% of parents in Southern Africa failed to comply with health care practitioner's advice, failing to seek appropriate health care and were exposing children to alcohol and drugs. More-over, these children showed significant developmental delays in language which in turn affected intellectual development, attention, school readiness and academic achievement, socio-emotional development and as a result these resulted in behavioural problems. Pickup (2001) in his study found out that vulnerable children especially those who lived in poor conditions were at high risk

of neglect because there was no education, recreation, rehabilitation or other programmes. As a result there were often left in their beds or cribs for long time periods without human contact or stimulation. This could result in severe physical, mental and psychological damage (WAD, 2007). Studies have shown that many children who were adopted as babies did not know their biological parents around the world and some did not know have information about their real parents, but knew their foster families only and feel neglected. For example they never felt the real love from their original parents both financial and emotionally (WAD, 2007).

#### **2.3.4. Sexual abuse**

Sexual abuse is an umbrella term for a number of sexual offences including rape, marital rape, incest, defilement, inter-generational sexual relations and early marriages. These are violations of an individual space, body and can make a child vulnerable to getting HIV through unprotected sex. This review will focus on issues of rape, defilement and Incest:

A majority of rape cases in Botswana affects females ranging from 4 years of age up to women in their 80s. According to Kaeser, (2014) a study conducted by Fowler, et.,al (2007) in Southern Africa showed that, 27% of rape victims were girls under 16 years of age and over half (57.5%) were aged between 16 and 30 years in . The majority of them were in their teenage years and there has been a rapid increase in the number of reported cases of rape: from 1056 on the year 2001 to 1598 on the year 2006, there was 50% increase in Southern Africa.

Defilement according to the laws of Botswana means having sexual intercourse with a person under the age of 16 years. The Botswana Penal Code (Amendment) Act 1998 is explicit on the offence of defilement. Defining it as an offence whereby one has ‘unlawful carnal knowledge of any person under the age of 16 years (CAP 08:01 sec 148). The defence consent is irrelevant and inconsequential in this case as the child is said to have no legal capacity to consent in matters of a sexual nature. Anecdotal men data points to the emerging offense of defilement of boys and this could be a result of the increasing awareness on the rights of children in general that such cases are beginning to emerge. Nonetheless to date, study findings indicate that girls are by far the majority as survivors of defilement.

Large numbers of rape cases go unreported due to difficulties in reporting or the stigma associated with rape (Maundeni, 2010). Sexual abuse of girl children under the age of 18 is also a major problem and there are relatively few cases of defilement reported (408 cases in 2005). The high rate of teenage pregnancy shows that sexual abuse of teenage girls is a huge problem, especially given that 85% of the pregnancies were caused by older men, hence this problem is a clear indicator of inter-generational sex which is one of the major factors driving the HIV epidemic. An additional problem is the customary law, which in some areas allows marriages of girl children and in effect this is a form of abuse perpetuated against the girl child.

According to Botswana laws, incest is a sexual offence whereby a person knowingly has carnal knowledge of another person knowing that person to be his or her grandchild, child, brother, sister, or parent (Penal Code CAP 08:01 sec. 147) and either a male or female can commit this crime. Incest can also mean sexual intercourse or cohabitation between blood related family members such as maternal and paternal uncles and aunts and their children (Women in Action for Abused Women and Children 2006).

(Kaeser, 2014) In 2014, an international survey was conducted, with the aim of studying the sexual behaviour of people of different regions and the survey revealed that 32.1% of people around the world practice incest, in Africa 29.2% of people practice incest and Southern Africa 20.5% practice incest.

Incest is a significant problem in Botswana according to (Maundeni, 2001). It is largely perpetrated by male relatives against girl children under the age of 18 years. The numbers of report cases of incest are relatively few but anecdotal evidence suggest that the evidence of incest is much higher and few cases are reported because of taboo nature and fear of loosing economic support by mothers of the child abused. Few cases of incest are prosecuted because of requirement by the police getting permission from Attorney General to prosecute. Sexual harassment of children in Botswana is common and there are statistics of it but anecdotal evidence suggest that it is a problem for every female in Botswana.

The true extent of incest in Botswana remains unknown because of under-reporting. The issue of incest is a taboo topic for discussion anywhere in Botswana within the family, in the community,

in government institutions including the police, in the Attorney General's chambers and in both custody and general law courts. In a national study on Violence against Women (WAD, 2007), many of the focus groups refused to talk openly about incest and denied that it existed. A few groups, however, noted that incest was commonly practised and needed to be confronted and eradicated. In cases of incest reported to the police, most of the survivors are girls under the age of 18 years, sometimes even as young as three years of age (WLSA, 2002). Most times the crime goes unreported as explained by one social worker in Maun, the perpetrators of incest are largely fathers, grandfathers, uncles, cousins. They sexually abuse children from the age of 4 years to 15 years. These cases are reported to the social workers by villagers, teachers or abused children themselves and they provide counselling but there are gaps because many times the police are not involved (WAD, 2007).

As noted above, a number of reported cases of incest in Botswana is relatively few (39 cases between 2008-2015), but anecdotal evidence suggests that the incidence of incest is much higher. The perpetrators of incest are often step fathers or maternal uncles who are not included in the definition of incest, so their abuse of children is prosecuted as defilement (WLSA, 2002). The legal definition of incest has been criticized as narrow. Other definitions includes sexual intercourse or cohabitation between blood related family members such as maternal and paternal uncles and aunts (Kgwatalala, 2009). Why such relatives are not included in the definition of incest laws of Botswana, is not clear. One could argue that if the legal definition is inclusive of all blood related family members, this could prove to be problematic in certain tribal groups of Botswana. Some tribes in Botswana have been known for the Setswana saying '*ngwana waga malome nnyale, kgomo di boele sakeng*'. 'child of maternal uncle, marry me so that the cattle (for the bogadi paid by the speaker's father for the mother's bride wealth are reciprocated')' (Maundeni, 2001).

The reality of the situation in Botswana is that a significant number of Botswana women have children out of wedlock. When and if they eventually marry, the men they marry are often not fathers of the children born before marriage. Even if no legal arrangements according to the Adoption Act have been fulfilled, in many cases Setswana customary procedures are carried out to make those children, children of the marriage (Ntshwarang, 2012). For all intents and purposes such as maintenance, inheritance and marriage of those children, they are recognized by the family



and community as such, children of the marriage. In Setswana the concept of step child, father or mother does not exist. For these reasons therefore, the proper definition of incest should include sexual intercourse between children and their 'step' parents; and not simply be based on the biological implications on the potential offspring of such a union, but on the role of the parent to his or her child, in this situation as one who gives his or her child unconditional love, care and protection from all harm (Maundeni, 2000).

### **2.3.5 Children as indirect victims of domestic violence**

Indirect victims of domestic violence can mean those who see or witnessing actual incidents of physical or sexual abuse. It can also mean children who hear threats or fighting noises from another room (Allen, 2007). Children may also observe the aftermath of physical abuse such as blood, bruises, tears, torn clothing, and broken items (Azar, Barnes, 2007 & Twentyman, 2006). To begin with, children may be aware of the tension in their homes such as their mother's fearfulness when the abuser's car pulls into the driveway (Barahal, 2013). A study on children who witness the abuse of their mothers showed that 1-2 million children between the ages of 3-18 years in Southern Africa are at risk of exposure to domestic violence each year (Beck, Ward, 2011, Mendelson, Mock & Erbaugh, 2013). Statistics reflect that 55% of domestic violence cases involve women victims of male partners and children who indirectly witness the domestic violence.

Bousha, (2006) confirmed the above statement by stating that children who witness domestic violence indirectly at their homes suffer emotional and psychological trauma as a result of living in homes where fathers abuse their mothers. Children whose mothers are abused are denied the kind of home life that fosters healthy development (Bousha, 2006). Children who grow up observing their mothers being abused, especially by their fathers, grow up with a role model of intimate relationships in which one person uses intimidation and violence over the other person to get their way (Bradley, 2008). In addition, children have a natural tendency to identify with strength, they may partner themselves with the abuser and lose respect for their seemingly helpless mother (Bradley, 2008).

Abusers usually place the mother down in front of her children and tell them that their mother is "foolish" or "unwise" or useless and that they do not have to listen to her hence this results in children ending up disrespecting their mothers. Moreover, children from violent homes have higher risks of alcohol and drug abuse, post-traumatic stress disorder, and juvenile delinquency

(Davis, 2010). Witnessing domestic violence is the single best predictor of juvenile delinquency and adult criminality. It is also the number one reason why children run away from their homes. A body of knowledge on family studies also affirmed that Children who are exposed to battering become fearful and anxious and they are always on guard, watching and waiting for the next event to occur (Erickson, 2010, & Pianta, 2008). They never know what will trigger the abuse, and therefore, they never feel safe. They are always worried for themselves, their mother, and their siblings. They may feel worthless and powerless (Erickson, 2010, & Pianta, 2008). To link on the above statement, children who grow up with abuse are expected to keep the family secret, sometimes not even talking to each other about the abuse and they often look fine to the outside world, but inside they are in terrible pain (Bousha, 2006). Children who experience domestic violence indirectly at their homes may suffer physical responses which include stomach-aches or headaches, bedwetting, and loss of ability to concentrate (Bousha, 2006). Some children may also experience physical abuse, sexual abuse and neglect concurrently. Others may be injured while trying to intervene on behalf of their mothers or siblings.

#### **2.4. Risk factors for Violence against children in the home.**

Literature shows that there are several risk factors that make children vulnerable to violence in the home. There are many such factors, however this section focuses only on factors such as: drugs and alcohol; parental conflict/s; separation and divorce; women's economic dependence on men as well as power differences between children and parents

##### **2.4.1. Drugs and alcohol**

Drugs and alcohol are a significant risk factor associated with domestic violence, with research suggesting that children whose caretakers frequently consume alcohol at excessive levels are more likely to experience domestic violence (Marcus & Braaf 2007; Mouzos & Makkai 2004). The involvement of alcohol in domestic violence is a bigger issue within indigenous communities than in other communities because it affects children tremendously especially physically and psychologically in their development (Dearden & Payne, 2009).

Drugs and alcohol use is also prevalent among victims of domestic violence (Nicholas 2005; White & Chen 2002). There is strong evidence of a relationship between heavy drinking and aggression on children by caretakers. However, not all people who consume alcohol and use drugs become violent. One explanation for the role of alcohol in domestic violence is that the consumption of

alcohol may facilitate an escalation of an incident from verbal to physical abuse because alcohol lowers inhibitions and increases feelings of aggression (Nicholas 2005). Research has also shown that because of its impact on aggression the consumption of alcohol, either by the offender or victim, may increase the seriousness of a domestic violence incident, the severity of injuries and risk of death (Dearden & Payne 2009).

#### **2.4.2. Parental separation and divorce**

When divorce takes place, children are the most affected at their homes. The effects could be socio-economic, psychological or educational (Dearden & Payne 2009). The socio-economic effects of divorce include decline in standard of living such as financial problems, loss of surroundings, change of schools and the psychological effects which include depression, loss, anger and low academic achievement of children.

Some children who experience domestic violence from their caretakers suffer economic abuse due to parental divorce. Maundeni, (2002) corroborates this statement by stating that parental divorce results in financial hardships for some children. When a couple divorces, there is an instant change in financial income leading to financial problems resulting in a decline in the standard of living for many children (Pinheiro, 2006). In addition children may also lose their surroundings, especially where they are forced to move to another area and as a result these block children from accessing the resource needed to survive. Botswana has no statistics of children who are exposed to domestic violence, but taking into account: high rate of domestic violence (67.3% of women interviewed in a recent Gender Based Violence survey had experienced some form of GBV in their lifetime, 44.4% of all men said they perpetrated some form of violence); the relatively high divorce rates in the country as well as the fact that most women who divorce had experienced domestic violence, one can hypothesise that a significant number of children in the country are exposed to domestic violence (UNICEF, 2006).

Studies conducted in developed countries such as Great Britain, United States of America and Australia and in developing countries such as Nigeria, South Africa and one study conducted in Botswana all confirm that divorce affects children one way or the other (Flood & Fergus, 2014). When parents go through divorce, there is sometimes a lot of violence in the homes. Children witness fighting between their parents and this can make them to bully their mates at school and

in the neighbourhood. Western literature highlights that divorce affects children differently even when they are from the same family (Flood & Fergus, 2014).

### **2.4.3. Children's lack of awareness of their rights**

Children are often times directly and indirectly exposed to domestic violence because a majority of them are not aware of their rights and how to take legal action. Caretakers exploit their ignorance about their rights and their powerlessness (Seloilwe and Thupayagale-Tshweneagae, 2009). Children's lack of awareness of their rights is more profound for those living with disabilities since they have limited access to forums or education programs that focus on their rights.

### **2.4.4. Socio-economic factors**

Financial stress may increase the likelihood of violence against children at home. Fathers in particular, may feel anger and frustration at not being able to provide for their family, as this is seen as part of the traditional masculine role (Flood M & Fergus L, 2014). Some men fail to meet their children's economic needs due to circumstances such as unemployment. Unemployment shatters the breadwinner's wellbeing and some take their anger out on children (Pinheiro, 2006). The men will eventually engage in deviant behaviour such as battering children and spouses. Women and their children are then forced to resort to a variety of means to survive economically. They try farming, drought relief, selling things, or if all else fail, they sell their bodies. Girl children who resort to looking for money in the bars are often beaten by men especially when they refuse to sleep with them (Fidzani, Ntseane & Ncube, 2000). Unemployment also creates an environment where sexual exploitation of teenage girls flourishes.

The above statement is supported by Pinheiro (2006) who found that 24% of care-givers controlled all the access to finances of the children and as a result preventing them from acquiring resources hence exploiting them from economic resources. The motive behind this is to show the child that the caregiver owns his/her life, has full control of the child's activities. The laws dealing with maintenance of children born outside wedlock e.g. (the Affiliation Proceedings Act) and within marriage (the Deserted wives and Children Protection Act) provide for support for children, however there are limitations in the way the laws are enforced. Studies have shown that many women raise children on their own without support from the fathers of the children (Maundeni, 2000).

A related issue is women's economic dependency on men. Existing literature (Maundeni, 2002) shows that women's economic dependence on men makes it difficult for some women to leave their abusive partners when there is a marked discrepancy between the caregiver's explanation for the injury and the nature of the injury (Seloilwe & Thupayagale, 2009). Shaken baby syndrome is often associated with very young children and externally there is often no immediate sign of abuse. Shaken baby syndrome is also known as abusive head trauma, shaken impact syndrome, inflicted head injury or whiplash shake syndrome and is a serious brain injury resulting from the abuser forcefully shaking an infant or toddler (Pinheiro, 2006). Violently shaken infants can suffer severe brain damage and spinal cord injuries which can lead to learning and behavioural problems, blindness, deafness, paralysis or death.

#### **2.4.5. Loop holes that exist in some laws**

The constitution of Botswana guarantees fundamental human rights and freedom to every individual irrespective of sex, political opinion, creed or place of origin. Among others, these rights include the right to life, liberty, conscience, freedom of expression, assembly, movement (section 3). (Women in Action for Abused Women and Children, 2006) The constitution therefore affords protection to all persons including children. Child Domestic Violence is a direct threat to their life, liberty and security and as such a violation of their rights is reflected in the constitution. (Women's Affairs Department 2007). To begin with, In Botswana, the penal code (Cap.08:01), addresses the various forms of violence. These include physical and sexual violence, including assault, rape, incest and defilement. The provisions of the Penal Code are framed in gender-neutral terms to refer to any person irrespective of their sex. Thus, a male or female could be the perpetrator or survivor of violence.

In Botswana the Penal Code is silent on Child domestic Violence, family violence or Gender Based Violence except in some cases of sexual offences such as rape, incest and defilement (WAD, 2007). Even then the provisions and their enforcement are not adequate to protect the survivors (WAAWC, 2006). These settings are not quite effective as they assume that the law enforcement officers will treat these forms of violence with the same impartiality that they treat other crimes which is not always the case (Emang Basadi, 2002). Until recently, there was no specific statute that dealt specifically with child domestic violence in Botswana. The Domestic Violence Bill was

passed in November 2007, but has not yet been signed by His Excellency, The president of Botswana.

#### **2.4.6. Inadequate prevention and support programs**

Prevention and support structures or programs are very important for the wellbeing of children because they reduce the rate at which children can be exposed to domestic violence. Laws and the justice delivery system that deal with child domestic violence are not adequate in Botswana. According to Pinheiro (2006) support services need to be part of a broader society that provides services to the public. Survivors of child domestic violence need counseling, legal aid, support (including shelter and relief services) and protection according to (Marcus & Braaf, 2007). Currently, Botswana has very few institutions providing support to survivors of DV. These services are mainly provided by the Non-Governmental Organizations (NGOs) such as Child line, Emang Basadi, Kagiso Women's Shelter, Women against Rape and Women and Law in Southern Africa. In Botswana, the majorities of them are found in urban areas or developed places as opposed to rural areas or undeveloped places.

The mandate of these organizations is to address issues of legislation in order to support victims and manage offenders. They are also responsible for offering effective interventions, evaluation, performance and monitoring in order to reduce domestic violence. For example, they are produced in primary prevention, victim support services, perpetrator programs, criminal justice interventions, risk assessment and management (WAD, 2002). In addition, most government's social services are largely directed at other needs such as community development. As a result most of the counseling and social support services currently provided to survivors of violence are short term and the majorities are found in urban areas (Maundeni, 2000). More-over these services focus mainly on the immediate crisis rather than the longer-term psychological damage faced by the survivors. Most children who are exposed to domestic violence cannot access these forms of support because they are not available in their villages or they are not aware of their existence. Fidzani, (2000), Ntseane and Ncube,( 2000) corroborated this statement by asserting that, there are few government organizations in Botswana which provide services for CDV and most of the NGOs which provide these services are based in the cities, making them inaccessible to majority of Botswana children who live in rural in areas. The shelters available to CDV survivors are based in Maun, Serowe and Francistown, while the rest are based in Gaborone. Except for the Jwaneng

center, all are provided by NGOs who focus on protection for CDV survivors. They are Botshabelo Rehab Crisis Center, Child line Botswana, The Haven Trust, Kagiso Women's Shelter, SOS Botswana and Women in Action for Abused Women and Children Living with HIV. The one exception is the shelter for neglected children in Francistown, run by SOS (Fidzani, 2000, Ntseane and Ncube, 2000).

The overall cost of service provision to deal with violence is substantial. However, most of those costs are directed to the justice delivery system. It is estimated that less than 10% of the annual costs goes to support services (WAD, 2002). There are no services to help the perpetrators of violence against children to cope with their problems. If CDV is going to be eliminated, these services need to be provided along with legal action (WAD, 2002). While legal and punitive services are necessary, they are not in themselves the solution to the problem.

There are a range of potential barriers that can prevent a victim from seeking help from service providers including: lack of available services, the cost or limited availability of transport, limited awareness of available services, a lack of culturally appropriate services, a perception that services will be unsympathetic or judgemental, shame or embarrassment, fear that they will not be believed, fear of the perpetrator and the potential for retribution, and a perception that services will not be able to offer assistance (Marcus & Braaf 2007; Taft 2002). Strategies to overcome these barriers are necessary to ensure that victims, particularly those within the most vulnerable groups, are able to access support services to reduce the risk of violence. Improving service provision and support for victims is an important factor in reducing the impact of geographic or social isolation (Mommott et al. 2001). Similarly important is the need for services that work with perpetrators to reduce the likelihood of reoffending, particularly voluntary programs.

Lastly, there is a permanent shortage of skilled expertise in legal aid and counseling for Child Domestic Violence survivors. Young law school graduates and social workers are recruited or volunteer to provide the required services without professional training in counseling survivors of CDV (Seloilwe et al, 2009). The social workers trained at the University of Botswana receive 'generalist' training. They are not specialists in counseling survivors of CDV. In some NGOs some of the 'counselors' are not even trained social workers or lawyers and majority of them, learn through on the job experience (Maundeni, 2000). This situation has

potential for misinformation and inappropriate or even dangerous advice. There is need to map out and audit the existing institutions and services available; produce a directory as a vehicle for planning; assess the need for services in each district; and then draw up a plan to provide these services on a comprehensive basis (WAD, 2002).

## **2.5. Effects of Domestic violence on Children**

Different studies conducted around Africa and the world have shown that domestic violence affects children in various ways. These are discussed below.

### **2.5.1. Emotional effects**

Research has confirmed that domestic violence affects the emotional development of children (Bogat, DeJonghe, Levendosky, Davidson, & von Eye, 2006). Furthermore, family violence does not occur as a singular violent event, but rather, as a process built on earlier episodes and rooted in a web of family relationships (Williams, 2003). These findings linked the significant effect of domestic violence on children's development together with existing difficult interaction between individual's child and environmental influences. It was observed that, probing the effect of domestic violence on children's wellbeing is not straightforward and those who carried out reviews (Edleson 2011; Holt et al 2008) have long recognized the key challenges in this area. According to literature, differentiating the effects of experiencing domestic violence and other forms of child abuse is then cumbersome. This was confirmed in most studies on domestic violence, as researchers are deeply dependent on data collected from women and children in refuge shelters, who were not necessarily the representative of victims of domestic violence in the broader population. It was also confirmed that most domestic violence research depends on the mothers' accounts of the situation and its impact on children (Chan & Yeung, 2009). This evidence is subjective, as parents' victims always protect their abusers.

Violence against children is a significant problem that has affected Africa and the world at large and children are highly emotionally sensitive to domestic violence at any age (Sinkamba, 2012). They are able to detect and remember abuse that happened within their homes and where abuse was directed at them or to their caregivers. Findings from a small scale study conducted in Botswana indicated that the boy child was more sensitive and was affected more than the girl child. However, boys are raised in such a way that they are tough, they should not cry and they should not show their emotions (Sinkamba, 2012). The above mentioned study relied on a small sample,



therefore there is need for large scale studies that compare the emotional effects of domestic violence on boys and girls.

Kolbo (2012) supports the above statement by stating that, 46% of children exposed to domestic violence at their homes around the world were found to have developed conflicting feelings towards their parents. For instance, distrust and affection often coexisted for the abuser. The child becomes overprotective of the perpetrator and felt sorry for them. They often developed anxiety, fearing that they must be injured or abandoned, or that they were to blame for the violence occurring in their homes (Kolbo, 2012). Studies conducted in Southern Africa by (Mathias 2013, Mertin 2011 & Murray 2010) found that child witnesses of domestic violence exhibit more aggressive and antisocial (often called "externalized" behaviours as well as fearful and inhibited "internalized" behaviours), and show lower social competence than other children. Children who witnessed violence were found to show more anxiety, self-esteem, depression, anger, and temperament problems than children who did not witness violence at home (Mathias, 2013 Mertin, 2011 & Murray, 2010).

Further, restrictions of movement, patterns of belittling, denigrating, scapegoating, threatenating, scaring, discriminating, ridiculing can have a high probability of causing harm to the child's health and physical, mental, spiritual, moral or social development (Mathias,, 2013 Mertinnd, 2011 & Murray,. 2010). Emotional abuse is inherent in other forms of child abuse thus sexually abused children or physically abused children experience emotional abuse. Further, children living in a domestic violence home are also prone to physical aggression and rated by their parents and teachers as having behaviour issues (Sternburg, Lamb, Gutterman, & Abbott, 2006). Apart from showing signs of aggression, children witnessing domestic violence also experience trauma symptoms, such as baddreams, hyper arousal, overstated startle response, and emotional withdrawal (Graham-Bermann & Levendosky, 1998; Vickerman & Margolin, 2007). This evidence was supported by early findings on domestic violence that found out that, children experiencing domestic violence scored higher on posttraumatic stress disorder (PTSD) scales (Rossman, 2009) and met diagnostic criteria for PTSD (Perry, 2006). Interestingly, despite the forementioned, it is surprising to note that only few studies have looked at the experience of children's exposure to domestic violence, compared to that of adults. This therefore, makes it important to study children exposed to domestic violence in their homes.

Research has confirmed that children's learning experience assists in regulating their behaviour (Gewirtz & Edleson, 2007). Children learn to comprehend and manage their emotions through their relationships with sensitive and responsive caregivers. For example, Cicchetti and Toth (2005), maintain that maltreatment is a significant risk for developing effective regulation in children, with clear deficits in recognition, understanding and expression of emotion. It was also confirmed that children witnessing DV seek alternative ways to express themselves by showing their distress in different forms (McGee (1997). However, some child victims of domestic violence reacted emotionally with fearful, inhibited or over controlled and internalizing behaviours. While it was established that children witnessing domestic violence displayed aggressive, destructive and externalizing behaviours, some did not show any signs of aggression or forms of behavioural changes in life. This is due to fear and anxiety for their safety (Carlson, 2000). However, this is significantly related to psychosomatic problems, e.g., headaches; stomach aches (Holt et al. 2008), and regression in language and toileting. Therefore, children witnessing domestic violence negotiate an increasingly complex social milieu and develop necessary skills that help them to improve or develop effective communication with their peers and other people around them.

Research has also confirmed that early exposure of children to violence influence the way they develop competencies needed to cope with life; threatening their skills or capabilities to process and managed their emotions successfully; and leads to an increase in their internalizing and externalizing behaviours (Cole, Zahn, Fox, Usher, & Welsh, 2010). For example, children experiencing domestic violence demonstrate high levels of distress to adult conflicts than those who are not experiencing violence in their home (DeJonghe, Bogart, Levendosky, von Eye, & Davidson, 2005). This evidence clearly shows that, there is a high level of trauma symptoms reported in young children from the age one (Bogat, DeJonghe, Levendosky, Davidson, & von Eye, 2006). Thus, McIntosh (2012) reported that witnessing domestic violence disrupts children's psychological development. However, Gewirtz and Edleson (2007) came up with the idea of developmental risk and resilience framework to support the impact of domestic violence on children's development. The framework conceptualized children witnessing domestic violence as:

“A child’s adaptive functioning results from a complex interplay among an individual’s physical and mental capacities, developmental stage and external factors in the social and physical environment (e.g. caregiver, family, community).” (Gewirtz & Edleson 2007 p.151).

It was also established that children developed stress response systems before they attained the age of three. Thus, early exposure to stress, affects children’s ability to respond positively to future stress (Gerhardt 2004), and coexisting psychological expectations in children, create emotional frameworks that guide their responses. Based on this, a bio-psychosocial model of emotional and physiological reactivity is needed to help children experiencing domestic violence in their home.

All children living with abuse are under stress and that stress may lead the child to feelings of inferiority, eating disorders, withdrawal, aggression or bullying, tantrums, vandalism, attention seeking, nightmares or insomnia, problems in school, truancy, speech problems and difficulties with learning (Wolfe et al., 2014). Studies using the Child Behaviour Checklist (CBCL; Achenbach & Edelbrock, 2012) and similar measures have found child witnesses of domestic violence to exhibit more aggressive and antisocial (often called "externalized" behaviours) as well as fearful and inhibited behaviours ("internalized" behaviours), and to show lower social competence than other children. (Hughes, 2012) Children who witnessed violence were also found to show anxiety, self-esteem, depression, anger, and temperament problems than children who did not witness violence at home. Children from homes where their mothers were being abused have shown less skill in understanding how others feel and examining situations from others' perspectives when compared to children from non-violent households (Hughes et al., 2014).

Studies have further indicated a consistent finding that child witnesses of domestic violence exhibit a host of behavioural and emotional problems because it was found that recent exposure to violence in the home was a significant factor in predicting a child's violent behaviour. (Carlson, 2000) another aspect of the effects of Domestic Violence on children is their own use of violence and social learning theory would suggest that children who witness violence may also learn to use it. Several researchers have attempted to look at this link between exposure to violence and subsequent use of it. Some support for this hypothesis has been found. For example, Jaffe et al., (2010) further, children exposed to violence in their home often have conflicting feelings towards their parents; For instance, as noted earlier, distrust and affection often coexisted for the abuser. The child becomes overprotective of the victim and feels sorry for them. They often developed

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.

Grief, shame, and low self-esteem are common emotions that children exposed to domestic violence experience (Jaffe et al., 2010). Depression is a common problem for children who experience domestic violence. The child often feels helpless and powerless. (Holt et al. 2008). Girls internalize their emotions and show signs of depression more than boys. Boys act out with aggression and hostility. 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 (Edleson, 2012). Some children act out through anger and are more aggressive than other children. Lastly, (Hughes, 2012) even in situations that do not call for it, children will respond with anger and post-traumatic stress disorder can result in children from exposure to domestic violence. Symptoms of this include are nightmares, insomnia, anxiety, increased alertness to the environment, having problems concentrating, and can lead to physical symptoms (Gerhardt, 2004).

### **2.5.2. Physical Effects**

Research indicates that 60% of the entire population cohort of children in Zambia, Morocco, and Uganda and children in Mali and Ethiopia reported experiencing physical punishment from family members. Sixteen percent of those children shared that the physical violence left scars on their body, and 25% said the afflicted pain stopped them from going to school or playing outside the house Carlson, (2010). Every year, an estimated 3.3 million to 10 million children are exposed to domestic violence in their homes around the world (Wolfe et al., 2014). Studies investigating the prevalence of child abuse found out that almost 900,000 children are classified as maltreated by parents and other caretakers (Edleson, 2012). Physical symptoms are a major effect on children's development and are caused by parental domestic violence. Research states that statistics show that abusive relationships also tend to get violent with their children. Holtzworth et al., (2013) corroborate the above statement further by commenting that, the violence imposed to these innocent children can in some cases be life-threatening. For example, if a mother is pregnant during the abuse, the unborn child is at risk of lifelong impairments or at risk of life itself. Researchers have studied, amongst prenatal and neonatal statistics; mothers who experience domestic violence had more than double the risk of child mortality (Margolin, et al., 2014).

To substantiate further on the above statement, the physical effects of domestic violence on children can start before conception (i.e. in their mother's womb), and can result in low infant birth weights, premature birth, excessive bleeding, and fetal death, due to the mother's physical trauma and emotional stress. DuRant et al., (2012) added to the above statement by stating that increased maternal stress during the times of abuse, especially when combined with smoking and drug abuse, can also lead to premature deliveries and low weight babies. When a woman is stressed while pregnant, the baby can be born with stress and anxiety and can sometimes have problems with growth.

Moreover, Henning et al., (2013) stated that infant children who are present in the home where domestic violence occurs often fall victim to being "caught in the crossfire." They may suffer physical injuries from unintentional trauma as their parent is 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 (Carlson, 2013). Infants are most affected by the environment of abuse because the child's brain hasn't fully developed.

Physical effects of witnessing domestic violence in older children are less evident than behavioural and emotional effects according to Margolin, et al., (2014). The trauma that children experience when they witness domestic violence in the home plays a major role in their development and physical well-being. Some children may turn the stress towards behavioural problems (Margolin, et al., 2014). Sometimes children who see the abuse turn to drugs, hoping to take the pain away. The children, however, will exhibit physical symptoms associated with their behavioural or emotional problems, such as being withdrawn from those around them, becoming non-verbal, and exhibiting regressed behaviours such as being clingy and whiney (DuRant et al., 2012). Anxiety often accompanies a physical symptom in children who witness domestic violence in the home. These children harbour feelings of guilt, blame, and are constantly on edge. They may startle at the smallest things, such as a car door slamming or a glass cup accidentally falling to the floor. If their anxiety progresses to more physical symptoms, they may show signs of tiredness from lack of sleep and weight and nutritional changes from poor eating habits (Carlson, 2013). Furthermore, children who witness domestic violence in the home can suffer an immense amount of

physical symptoms along with their emotional and behavioural state of despair (Henning et al., 2013). These affect children's development as they will continue to complain in their life time on issues of general aches and pain, such as headaches, stomach aches, chronic fatigue, shortness of breath, muscle tension, involuntary shaking, bed-wetting, changes in eating and sleeping patterns.

Lastly, domestic violence has significant effects on children's physical developmental stages. According to literature, children witnessing domestic violence develop attachment problems with their parents (Gerhardt, 2004). This was linked to the emotional regulation between parents victims and their children as children showed signs of anxiety in life.

### **2.5.3. Social Effects**

Not only does domestic violence affect children emotionally and physically, it also affects them socially. For instance, some children may become withdrawn and find it difficult to communicate. Others may blame themselves for the abuse. Teens who were abused as children are also more likely to exhibit externalizing behaviour problems, such as delinquency and violence perpetration (Singer, et al., 2012). Some findings point to different factors for boys and girls that are associated with witnessing violence. In general, boys have been shown to exhibit more frequent problems and ones that are categorized as external, such as hostility and aggression, while girls generally show evidence of more internalized problems, such as depression and somatic complaints (Carlson, 2000). There are also findings that dissent from this general trend by showing that girls, especially as they get older, also exhibit more aggressive behaviours.

Despite this assertion, research continues to establish that children raised in environments that are characterized by violence tend to display high risk of maladjustment in life, when compared with their peers who are raised in a violence free environment. For example, too many places for bracket, Osofsky, (2009) according to the social disturbance in children victims of domestic violence is mostly observed by teachers in schools, particularly, during teachers systematic observation of traumatic violence exhibited by children in their play with peers, and also by pediatricians in the hospital, through assessment of their loss or slow developmental progress (Osofsky, 2009). More-over, this is observed in children, through their aggressive behavior or relationship with peers, as they show signs of depression and withdrawal in their day-to-day

activities (Singer, et al., 2012). Thus, the higher the level of family or social support available to children experiencing domestic violence, the more resistant they will be (Masten & Reed, 2002). Literature reveals that, there is a need for a proper assessment of the occurrence of children observing DV, as this will aid professionals working with vulnerable children to determine effective intervention for children's victims.

Peer relationships, autonomy, self-control, and overall competence were also reported to be significantly lower among boys who had experienced serious physical violence and been exposed to the use of weapons between adults living in their homes (Gewirtz & Edleson, 2007). In addition, domestic violence can negatively impact children's worldview and outlook on life. Edleson, (2012) support the above statement by stating that being in a situation where a child is being abused by caretaker can create feelings of hopelessness. A child may develop a negative outlook in which he or she may feel and subsequently regard themselves "damaged" or unworthy of a better life (Masten & Reed, 2002). A perpetrator can chip away at a person's self-esteem with constant criticism or insults, which can lead the child to question his/her sense of self in relation to the world. A faulty belief system can contribute to feeling discouraged and apprehensive about the future.

Domestic violence can also take away a child's sense of safety and security, influencing his or her ability to trust others (Gerhardt, 2004). Conflicts with spirituality are also common, especially in situations where the perpetrator used the person's faith to control him or her (Edleson, 2012). Survivors might feel unmotivated, empty or like reaching out is not worth the effort. Holtzworth, et al., (2013) support the above statement by stating that children exposed to domestic violence are likely to develop behavioural problems, such as regressing, exhibiting out of control behaviour and imitating behaviours. Children may think that violence is an acceptable behaviour of intimate relationships and become either the abused or the abuser (Holtzworth, et al., 2013). Some warning signs are bed-wetting, nightmares, distrust of children, acting tough, having problems becoming attached to other people and isolating themselves from their close friends and family. Another behavioural response to domestic violence may be that the child may lie in order to avoid confrontation and excessive attention getting (Masten & Reed, 2002).

#### 2.5.4. Effects on children's intellectual development

Adolescents are in jeopardy of academic failure, school drop-out, and substance abuse due to the consequences of child domestic violence (Singer, et al., 2012). Their behaviour is often guarded and secretive about their family members and they may become embarrassed about their home situations. Domestic abused children generally don't like to invite friends over and they spend their free time away from home because they don't want people to know about what is happening at their homes (Masten & Reed, 2002). Denial and aggression are their major forms of problem solving skills and often times they cope with domestic violence by blaming others, encountering violence relationship (Holtzworth, et al., 2013).

An estimated 1/5 to 1/3 of teenagers subject to viewing domestic violent situations experience teen dating violence, regularly abusing or being abused by their partners verbally, mentally, emotionally, sexually and/or physically. Thereby 30 to 50% of dating relationships can exhibit the same cycle of escalating violence in their marital relationships (Knutson, 2009).

Children exposed to domestic violence frequently do not have the foundation of safety and security that is normally provided by the family (Jaffe et al., 2010). The children experience desensitization to aggressive behaviour, poor anger management and problem solving skills, and learn to engage in exploitative relationships, according to Jaffe et al., (2010).

Singer, et al., (2012) substantiate the above statement by stating that symptoms of domestic violence in children include isolation from friends and relatives in an effort to stay close to siblings and victim the victimized parent. The child may display these symptoms by joining a gang or becoming involved in dating relationships that mimic the learned behaviour (Singer, et al., 2012). Children may portray a wide range of reactions to the exposure of domestic violence in their homes. The preschool and kindergarten child does not understand the meaning of the abuse and may believe they did something wrong; this self-blame may cause the child feelings of guilt, worry, and anxiety (Jaffe et al., 2010). Younger children do not have the ability to express their feelings verbally and these emotions can cause behavioural problems. They may become withdrawn, non-verbal, and have regressed behaviours such as clinging and whining (Gerhardt, 2004). Other common behaviours for a child being a victim of domestic violence are eating and sleeping difficulty, and concentration problems.



Pre-schoolers living with violence internalize the learned gender roles associated with victimization, for instance seeing males as perpetrators and females as victims (Jaffe et al., 2010). This symptom presents itself as the pre-schooler imitating learned behaviours of intimidation and abuse. The pre-schooler may present with aggressive behaviour, lashing out, defensive behaviour, or extreme separation anxiety from the primary caregiver (Jaffe et al., 2010).

## **2.6. The Roles of Social work in Domestic Violence**

Social workers often play an important role in the lives of children who have been exposed to domestic violence and they do this by following the Code of ethics. The National Association of Social Workers (NASW) Code of Ethics is intended to serve as a guide to everyday professional conduct of social workers in order to create and maintain professional standards, and to advance sound social policies (Holt, Buckley & Whelan, 2010). It is a common misconception that social workers deliberately set out to remove children from their parents' care, however that is not their intention. Their intention is to simply protect children from suffering harm, whether being a victim of violence themselves or witnessing it instead. Both are equally damaging to a child (Holt, Buckley & Whelan, 2010).

This section will discuss the roles that social workers play when helping children who are directly and indirectly exposed to domestic violence. Social work offers services such as educating the community, counselling, policy formulation and implementation and research. These roles are discussed below:

### **2.6 .1 Educating the community**

Children's rights are violated when they are witnesses or victims of domestic violence and social workers provide education and child protection services to the public. Social workers working in the area of domestic violence coordinate and provide domestic violence education and prevention programs to groups and communities, such as civic or governmental organizations. They engage and educate groups of people to try to help put an end to domestic violence (Erickson, England, 2010 & Pianta, 2008). For example, social workers who deal with domestic violence might teach people to recognize the signs of abuse or the behaviours used by batterers to coerce their victims. Cultivating public awareness of the impact and extent of domestic violence enables people to make a significant impact on the community and society as a whole.

Social workers do not work alone in this process because they engage pastors, counsellors and educators as they are the ones who work closely with children who are abused (Barahal, 2013). Education as a technique used in methods of social work is very important because it benefits children and their parents, in that it highlights risk factors for violence against children, the effects of violence on children as well as suggests strategies that could be used to assist children by both stakeholders. To offer the skills and knowledge needed to effectively help families, social workers should keep up-to-date with domestic violence and abuse case law, learn from relevant serious case reviews and attend training (Davis, 2010). The Colleges and universities offering social work produce domestic violence and abuse practice guidance outlining which help to deepen the understanding of domestic abuse and help learners to reflect on how complex the experience is for families living with abuse and this helps training of social workers on issues of child domestic violence.

In addition, social workers enhance capacity of all people who are involved with abused children both formal and informal e.g. at micro-systemic level, exo-systemic level and macro-level (Erickson, Egeland, 2010, Pianta, 2008). They do this by capitalising on building resiliency on children who have experienced violence through the use of community education in towns, villages and cities with the aim of securing attachment of the child to an adult family member, encouraging high levels of parental care during childhood, promoting a warm and supportive relationship with a non-abusing parent and promoting a supportive relations with peers so that they do not engage in them from risky behaviours like substance abuse or criminal behaviours (Erickson, Egeland, 2010, Pianta, 2008). More-over, Irwin and Waugh, (2007) added that social workers have a community education coordinator who is accountable for managing all types of community education from professional development and training in order to provide speakers for civic or social groups. Bourassa et., al (2006) support the above statement by stating that social workers provide therapy to victims of domestic violence while they are in a shelter or living in their community and others serve as executive directors of domestic violence organizations. On the state level, social workers provide training and technical assistance to shelter programs across their respective states.

### 2.6. 2 Counselling

Counselling is an interactive learning process contracted between counsellor(s) and client(s), be it individuals, families, groups or an institution, which approaches in a holistic way, social, cultural, economic or emotional issues (Lundberg, 2012). Social workers offer direct services to victims of domestic violence which include counselling and support through shelter programs across different countries. Counselling could be offered to change an abuser's behaviour. In many cases perpetrators perpetuate the cycle of abuse throughout their entire lives, but in some cases, they might be able to change their ways after participating in batterer's intervention programs, which are designed to educate and rehabilitate offenders (Erickson, Egeland, 2010 & Pianta, 2008). Batterers are usually mandated to attend such programs after involvement in the legal system, but in some cases, they decide to participate on a voluntary basis. Social workers who work in the area of domestic violence helping change an abuser's behaviour and stop his/her abuse for good (Erickson, Egeland, 2010 , Pianta, 2008).

Social workers in Botswana offer counselling in institutions such as Child line, Emang Basadi, Kagiso Women's Shelter, Women against Rape and Women and Law in Southern Africa, Mpule Children's Center in Jwaneng, Botshabelo Rehab Crisis Center, Childline Botswana, The Haven Trust, Kagiso Women's Shelter, Save Our Soul Botswana (SOS), Women in Action for Abused Women and Children Living with HIV (Fidzani, 2000, Ntseane and Ncube, 2000). Social workers provide counseling to perpetrators and victims of domestic violence in order to promote good parenting skills, building strong attachment bonds between parents, children and as a result this practice will help to reduce domestic violence through promoting positive non-violent discipline (Bousha, 2006). For example, if children are victims of domestic violence, social workers will want to meet with their care takers and find out what is happening in their families. Depending upon the circumstances, the social worker may well want to do some more detailed investigations and meetings may well take place to decide whether any children should be subject to a Child Protection Plan due to a risk of harm, be it physical, sexual, emotional and care takers are entitled to attend such a meeting (Bousha, 2006).

Social Services could potentially be involved with the family for a long time, and court hearings in Botswana or elsewhere may take place (Irwin and Waugh 2007). This whole process can be

incredibly frustrating for the care taker, especially when the social worker wants to meet with them and children both on announced and unannounced visits. As professional committed to social justice, domestic violence is a social justice issue and it is the role of social workers to provide services to victims of domestic violence through shelter programs across the country (Allen, 2007).

The context in which services are provided is empowerment and advocacy oriented. More-over, social work professionals collaborate with other health care professionals to offer early intervention and support, for children and families experiencing domestic violence. This includes making referrals, providing personal safety, physical and mental health support, family support programs, community based support, housing, employment, and child care (Edleson, Tajima, 2011). Social workers working with children exposed to domestic violence also carry out child protection duties. This entails offering assistance when children and family's safety is threatened by domestic violence, taking the abuser to court, and preventing the abuser from continuing perpetrating the violence act (Conger, et. Al 2013). Counseling provided by social workers helps to reduce the effects of other sources of stress, for example frequent moving or changes in place of residence, long periods away from family and friends, pressures at school, transportation problems and fighting within the family (Barahal, 2013).

### **2.6.3 Policy formulation and implementation**

Social workers play a role in policy making and development. To start with, they identify the gaps in existing policies, and make recommendations that could safeguard children witnessing domestic violence. This helps the government to eliminate or revise legislation that was used to sanction (oppress) children's rights and construct policies that support non-violent and non-discriminatory attitudes and behaviours on children (Azar, Barnes, 2007, Twentyman, 2006). This helps the government to develop policies and legislations that are legitimate and acceptable to citizens in their strict parameters of legislation, for example in the frame of the Customary Courts Acts, the Penal Code and the Education Act. The policies that social workers make and suggest have strong advocacy on children's rights and also influence political leaders to address issues and find solutions about the factors associated with children's exposure to domestic violence and its effects on children . Social workers help to expand the policy making process by incorporating more stakeholders in addressing the issues of violence against children (VAC) as a key social problem.

### 2.6.4 Research

Research has shown that the prevalence, health, social and economic costs of domestic violence require early identification and intervention (McIntosh, 2010). Social workers contribute vastly to the existing body of knowledge in the field of social work and children's wellbeing. They provide evidence based knowledge about factors associated with children's exposure to domestic violence and its effects on Children with strong focus on the application of theory to practice in children and family studies (Edleson, Tajima, 2011 ).

Cunningham and Baker (2004) add to the above statement by stating that currently, domestic violence is virtually impossible to measure due to the numerous complications, including societal stigma that stops victims from revealing abuse. Estimates in Africa in the years 2013 and 2015 range from 960,000 incidents of violence against children to 3.9 million of children raped, emotionally, economically and physically assaulted by the caretaker (Cunningham, Baker, 2004). This creates an overwhelming need for social workers and other helping professionals to make screening a routine part of healthcare. Social workers instigate broader research, covering more geographical areas, socioeconomic backgrounds, ethnicity and cultural backgrounds of children witnessing domestic violence and this helps to raise more pertinent questions and expose gaps that will need further investigation and involve multi-disciplinary approaches and methodologies. This requires social workers to conduct national surveys on violence against children (VaC) more often (Herrenkohl, Sousa, Tajima, Herrenkohl, & Moylan, 2008; Sternberg, 2006; Wolfe, Crooks, Lee, McIntyre-Smith, & Jaffe, 2003).

## 2.7 Theoretical Approaches to understanding Domestic Violence

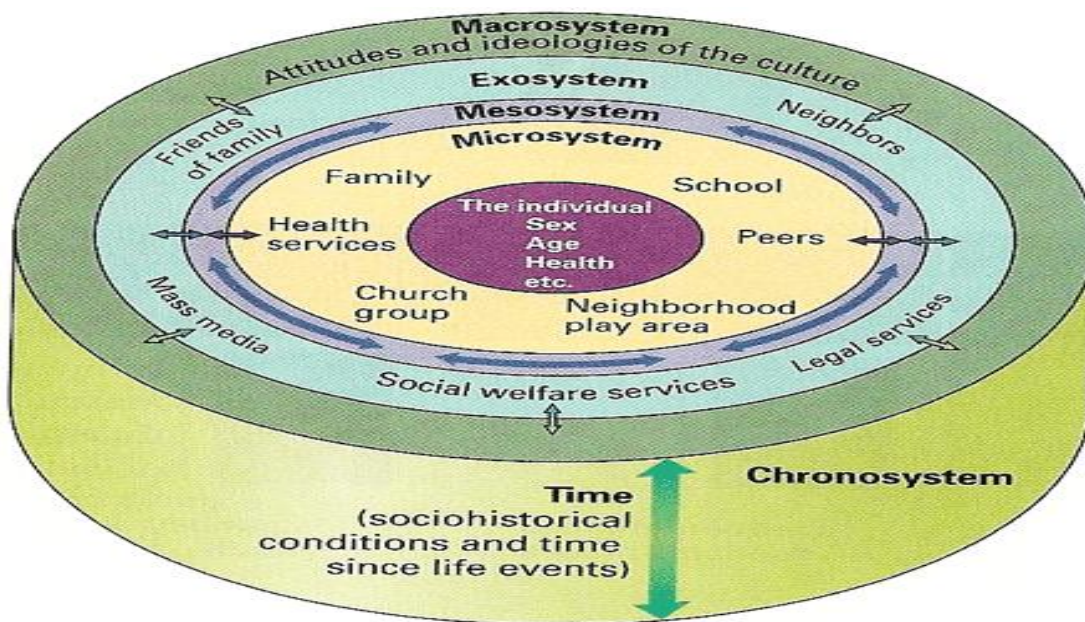
### Introduction

Many theories, models and approaches have been suggested in the area of child domestic violence but this study utilises the Ecological model in order to understand factors associated with children's exposure to domestic violence and its effects on children. The ecological systems theory was developed by Urie Bronfenbrenner (1994) who believes that a person's development is affected by everything in their surrounding environment. He divided the person's environment into five different levels: the microsystem, the mesosystem, the exosystem, the macrosystem, and the chronosystem. Research has demonstrated that child maltreatment is more likely to occur in families experiencing intimate partner violence (IPV), maternal distress (depression, physical

symptoms), poverty, family stress, social isolation, parental history of physical abuse and corporal punishment as children (Mohr & Tulman, 2000). The Ecological model examined how the causal factors of domestic violence works at different levels, and called it “an ecological model of human development”. (Bronfenbrenner, 1994). The Ecological models offers a broad-based conceptualization that take into account the complex interactions among individual family, community, societal risk factors in the occurrence among individual family, community and societal risk factors in the occurrence of child maltreatment.

### Elastration of an Ecological Model of human development

(Bronfenbrenner, 1994) below is the model used to show five different levels of the environment affecting the well bringing of the child.



Levels of Analysis	Features

Individual or ontogenic level	<p>personal characteristics</p> <p>perceptions</p> <p>childhood experiences and relationships</p>
Micro-systemic level	<ol style="list-style-type: none"> <li>1. interpersonal relationship</li> <li>2. family context</li> </ol>
Exo-systemic level	<ol style="list-style-type: none"> <li>1. socioeconomic status</li> <li>2. social networks</li> <li>3. identity/peer groups</li> </ol>
Macro-level	<ol style="list-style-type: none"> <li>1. cultural influences</li> <li>2. history</li> <li>3. social norms</li> </ol>
Chrono-system	<ol style="list-style-type: none"> <li>1. socio historical</li> <li>2. conditions and time</li> <li>3. life events</li> </ol>

To begin with, at the individual level, factors categorized as risk factors include parental substance abuse, depression and IPV. These parental factors increase the likelihood of child maltreatment and neglect. Other risk factors include the child's age, developmental stage, coping abilities,

intelligence and presence of social supports or affectionate families (Holden & Nabors, 1999). Secondly, the microsystem is the system closest to the person (child) and the one in which they have direct contact e.g. personal relationships with family members, classmates, teachers and caregivers, in which influences go back and forth. Relationships at the microsystem layer impact in two directions referred to as both away from the child and toward the child. For example, a child's parent may affect his beliefs and behaviour; however, the child also affects the behaviour and beliefs of the parent (Bronfenbrenner, 1994). These bi-directional influences are the strongest and have the greatest impact on the child. Mohr & Tulman, (2000) add to the above statement by saying that the microsystem may provide the nurturing centrepiece for the child or become a haunting set of memories. The real power in this initial set of interrelations with family for the child is what they experience in terms of developing trust and mutuality with their significant people. The family is the child's early microsystem for learning how to live. The caring relations between child and parents (or other caregivers) can help to influence a healthy personality. For example, the attachment behaviours of parents offer children their first trust building experience.

The next level is the mesosystem, which Bronfenbrenner, (1994) says it consists of the interactions between the different parts of the child's microsystem. The mesosystem is where a person's individual microsystems do not function independently, but are interconnected and assert influence upon one another. These interactions have an indirect impact on the individual. For example, the connections between the child's teacher and his parents or between his church and his neighbourhood. The other example is; if a child's parents are actively involved in the friendships of their child, invite friends over to their house and spend time with them, then the child's development is affected positively through harmony and like mindedness (Mohr & Tulman, 2000). However, if the child's parents dislike their child's peers and openly criticize them, then the child experiences disequilibrium and conflicting emotions, probably affecting his development negatively.

More-over, the other level of the ecological systems theory is called the exosystem which is a setting that does not involve the person as an active participant, but still affects them (Bronfenbrenner, 1994). This implies decisions that have bearing on the person, but in which they have no participation in the decision-making process. An example would be a child being affected



by a parent receiving a promotion at work or losing their job. The fourth level of ecological systems theory is the macrosystem which encompasses the cultural environment in which the person lives and all other systems that affect them (Bronfenbrenner, 1994). Examples could include the economy, cultural values, and political systems. The macrosystem can have either a positive or a negative effect on a person's development.

Finally is the chronosystem, this system encompasses the dimension of time as it relates to a child's environment (Bronfenbrenner, 1994). The chronosystem may thus include a change in family structure, address, parent's employment status, in addition to immense society changes such as economic cycles and wars. Bronfenbrenner, (1994) deduced that elements within this system can either external, such as the timing of a parent's death, or internal, such as the physiological changes that occur with the aging of a child.

### **2.8 Assumption of the Ecological Model in Relation to the Study**

The model assumes that an individual (child) is a member of the environment that consists of overlapping subsystems such as the family, the workplace and the community. For an individual to function appropriately there should be a goodness of fit between the individual and the environment, therefore if the individual and the environment do not have a goodness of fit, the individual becomes dysfunctional. The ecological model makes this assumption in order to merge the individual perspective with the social cultural perspective, so as to incorporate the range of personal and social factors that interrelate to predict children's experiences of domestic violence. Risk and opportunities exist for all individuals at each of the environmental levels to encourage individuals to meet their needs (Ambrosino, Heffernan & Shuttlesworth, 2005).

### **2.9 Application of the theory to the study**

The ecological system theory is considered suitable for this research as it argues that in order to understand human development, one must consider the entire ecological system in which growth occurs (Bronfenbrenner, 1994). The ecological framework is fairly suitable as an intervention strategy for factors associated with children's exposure to domestic violence and its effects on children because the theory includes concepts that cover a full range of clients that social workers serve, including individuals (child), couples, families and broader societal systems. This theory also views individuals as active participants in their environments, capable of change and

adaptation as well as incorporating the concept of client self-determination and recognition that multiple approaches necessary in bringing about change. It also helps social workers to be cognizant of the fact that change in one level of the system creates changes in other levels; therefore interventions must take this into account (Mohr & Tulman, 2000). According to Bronfenbrenner, (1994) the child is at the centre of five environmental layers of the ecological systems theory, and the child is influenced by experiences related to each of the five systems. The most central influential system on the child among all the five systems is the microsystem e.g. the home or school, in which the child has most of her direct interactions (Bronfenbrenner, 1994). Ambrosiano et., al (2005) assert that people that make up the microsystem have immediate effect on the child, and the theory suggests that if the relationships in the microsystem break down it will pose difficulty for the child in exploring other parts of the environment, for example, when children experience domestic violence such as abuse 'physical abuse, sexual abuse, and neglect'. This usually affects children negatively.

Mohr et., al (2000) assert that child domestic violence is associated with adversities for the children involved and they have been prone to emotional and academic difficulties, conduct and adjustment problems and increased substance use when compared to their counterparts from intact families. In the microsystem that the social worker acts as a mediator in achieving a healthy parent-child, parent-parent and child relative relationship. The mediation processes conducted by the social worker at home is vital because once the child, parent and other close relative come to terms with economic abuse, physical abuse, emotional, sexual abuse, and neglect, they all tend to cooperate on issues that directly affect the child and the intention is to simply protect children from suffering harm, whether being a victim of violence themselves or witnessing it instead. Both are equally damaging to a child (Holt, Buckley & Whelan, 2010).

The social worker does this through offering services such as educating the community, counselling, policy formulation and implementation and research. The above statement is shared by Holden et.,al (1999) who claim that, as the microsystem breaks down, it affects child-parent or child and other important adults (grandparents, uncles etc.) relationships, these deficiencies show themselves especially in adolescence as anti-social behaviour, lack of self-discipline, and

inability to provide self-direction. Moreover this is supported by a Setswana saying that goes thus 'it takes a village to raise a child', meaning that all members of the extended family and other distant relatives play a pivotal role in bringing up a well-rounded and well-disciplined child.

The mesosystem is the second immediate layer and contains the microsystem (Ambrosiano et. al 2005). Bronfenbrenner ,(1994) further explains that the mesosystem focuses on the connection between two or more systems, essentially different Microsystems, such as home, playmate setting and the school. Therefore what happens in a micro system, such as home in which a child lives can influence what happens in the school or playground. Mohr et. al (2000) asserts that children who experience domestic violence experience more problems of behavioural, poor psychological adjustment, more negative self-concepts and more social difficulties.

Therefore it is the role of a social worker to act as a broker and advocate for the children that are experiencing domestic violence. The social worker should protect such children by informing teachers that they are going through a hard time and must be treated with extra care. Where children are doing badly academically, it is the role of the social worker to advocate that they be given extra lessons and adequate learning resources be made available to aid their learning process. Moreover, as clinicians, social workers must provide counselling to individuals or even in group set up to children who display behaviour problems' social workers can refer such children to practitioners who have specialised resources to help them.

The exosystem contains micro and meso systems, and thereby impacts the wellbeing of all those who come into contact with the child. If policies on co-parenting are not fully implemented this may affect the child's development as the other parent may tend to neglect his his or her responsibilities. The negligence by the one parent may affect the child negatively hence emotional and neglect abuse of the child. A Parent's workplace schedule can also disadvantage development of the child. In cases where an abusive parent cannot get time off to attend a group counselling session with teachers and councillors. The parent will have limited interactions with the teachers, thereby influencing a child's development adversely (Holt, Buckley & Whelan, 2010).

It is the role of the social workers to see to it that policies that are geared towards improving children experiencing domestic violence are implemented accordingly and monitoring and

evaluation mechanisms are in place. In this case, the social worker will be advocating for the rights of such children. According to the National Association of Social Workers; Social Justice Brief (2013) it is reasonable to expect that social workers advocate for policies and programmes that help disadvantaged individuals and groups.

According to Holden et.al (1999) the macrosystem influences all lower layers of the ecosystem. Aspects of the macrosystem that influence other lower layers include cultural characteristics, political upheavals, or economic disruption, all of which can solely or collectively shape development. For example, cultures that have more liberal domestic violence laws are more likely to have more violent families thereby disadvantaging children.

In conclusion, the Ecological System appears to explain that all the five layers of this system influence a child one way or the other. But the most influential is the inner layer as it is the closest to the child's upbringing. Therefore when domestic violence occurs, health systems, schools, peers, neighborhood, church groups, families together with social workers (as they are in the inner layer of the Ecological system) should assist the child to cope with all the changes that are brought about by domestic violence. This is because they have close contact with the child as compared to other layers of the Ecological system.

## **2.10 Summary**

The chapter has reviewed literature on factors associated with children's exposure to domestic violence and its effects on the wellbeing of children. It has also used the ecological model of Bronfenbrenner (1994) in order to identify the above factors. The literature has shown that families should be recognised as the key socialization agents who are supposed to protect their children and ensure that children are safe. However, the literature showed that some families are unable to protect their children. The chapters looked at the factors associated with Children's Exposure to Violence such as Situational factors, Drugs and alcohol, Divorce, Economic abuse, Property grabbing, Failure to maintain children, Children's virtue of status, Loop holes in laws and Inadequate prevention and support programs. Secondly the literature showed the Effects of Domestic Violence on Children which are devastating since they affect all aspects of children's health and wellbeing from conception through to adulthood. For example, they face Emotional abuse, Physical abuse, Sexual abuse and Children's development (Osofsky, 1999; Perry, 2007). In

addition, the literature looked at the role of Social work in Domestic Violence. Lastly, Bronfenbrenner's ecological model was considered an alternative used to understand the circumstances in which violence against children occurs.

The model highlights that individuals including children, influence their social environments and that the various contexts of the social environments influence each other as well as the individual. When applied to violence, this model provides a framework for understanding the factors that increase or decrease a child's risk for violence. The ecological model considers the complex interplay between individuals and their spheres of influence (or the places they inhabit) at multiple levels: individual, relationship, community and society throughout their lifetime. The theory is useful because it can combine an understanding of the historical and social factors of a particular society and other factors influencing a child's life and thus promote an understanding of the factors that increase vulnerability in each of the different spaces.

### **3. CHAPTER THREE**

#### **3.0 RESEARCH METHODOLOGY**

##### **3.1 Introduction**

The purpose of this study was to analyse: factors associated with children's exposure to domestic violence; the various ways in which children experience violence; the risk factors for violence against children, and its effects on children and the implication for social work practice. This chapter presents the research design and method.

##### **3.2 Research Design**

A research design is a blueprint on how the researcher intendeds to conduct the research according to Mouton (2001). This study used desk research because the researcher relied on the information that was readily available (secondary data) from search strategies in the library, documents, Internet and On-line Database Websites. An important feature of this type of research is locating and identifying the different factors involved. The material was critically analysed according to the themes of the topic of study. The method gave the researcher the opportunity to critically review a number of documents so as to understand the root cause of 'factors associated with children exposure to DV and its effects on children'. Moreover, the researcher identified gaps in the existing literature and this helped to have facilitated reliability, and validity in order to make generalizations of findings and to make sound conclusions and recommendations in relations to policy, practice and research hence professionals such as social workers and educators can benefit from this research findings.

##### **3.2.1 Research Method**

Mouton (2001), defines research methodology as a systematic methodical and correct ways of implementation of research design, where they use various methods and tools to perform different tasks. However, Maxfield and Babbie (2005, p.209) emphasize that the worth or assessment of any research depends on how the researcher gathers the data for his /her study. In this instance the researcher collected the required data, using the desk research method. Desk research method is a method of collecting secondary data without the researcher doing or engaging in fieldwork.

Multiple sources were used to identify the relevant data that best describe and analyse children's experiences of domestic violence. These sources included:(a) studies identified in qualitative review on the effects of (experiencing) marital violence; (b) reference lists from the various studies cited in these reviews; (c) reference lists of published books on the common topic of family violence; and (d)various abstracts identified in computer searches of the PsycINFOdatabase (<http://www.apa.org/psycinfo/>) and Dissertation Abstracts (<http://newfirstsearch.oclc.org>), with boolean combinations of multiple keywords and the names of prominent researchers in this field used as search terms. Other sources used include, combination of library research, handbooks, internet portal, documentary analysis, articles, journals, encyclopedias, on-line databases web-search and other forms of secondary data that test the appropriateness and characteristic of such data or information to the research study. The choice of research method is suited for answering the research questions in this study, as the investigative process is one of the most crucial and vital elements of conducting life research exercise (McNeill, 2005). While much attention is given to theory within the method used by the researcher, it is also very important to consider the real research tools which support the theoretical decisions made and offered necessary data through which we can test or answer the research questions in this study. Therefore, research tools play a leading or decisive role in the success or failure of any research study. Based on this, the researcher used the following research methods to generate or gather information in this study:

### **3.2.2 Search Strategy**

The study employed a search strategy to systematically track down available sources in the library. To achieve this, the researcher discussed with a reference librarian, who helped checking the library's Web site, which provided an overview of available resources. As an information specialist, the reference librarians helped the researcher to save time by steering him towards relevant and reliable sources that are useful to this study and at the same time gave the researcher advice on how to make use of the electronic database and other reference tools in the library. Hence, with the help of the reference librarian, the researcher was able to make the best use of the electronic databases, documents, Web search engines, and other reference tools"(Diana, 2002).

### **3.2.3 Documentary Analysis**

The study also used documentary analysis as a source of data collection. Documentary methods refer to the analysis of documents that contain information about the phenomenon the researcher wish to learn on the study (Bailey, 1994)., Payne and Payne, (2004), explained that documentary

method was a the techniques used to categorize, investigate, interpret and identified the limitations of physical sources, most commonly written documents, whether in the private or public domain. Although written with a clear purpose, based on particular assumptions and presented in a certain way or style, it is imperative for researchers to be fully aware of the origins, purpose and the original audience of the documentary analysis (Grix 2001).

### **3.2.4 Internet**

There are billions of search Web pages on the Internet which have links with governments, business organizations, libraries, research institutions, universities, international organizations and people. However, in order to prove the reliability of the data used in this current study, the researcher used information provided by governments, libraries, universities, research institutions; international organizations to support the research aims. Additionally, the researcher also used multiple search engines such as Google and Yahoo, to frame the research query generated for the study.

### **3.2.5 On-line Database Websites**

The study used of online databases such as PsycINFO, Pro-Quest Research, The Educational Resources Information Center (ERIC), Academic and Business Source Premier (EBSCO), JSTOR, Zetoc, Web of Science (ISI), and Science Direct (Elsevier), Google Scholar web-based search engine etc., as a sources of data collection. To facilitate in-depth exploration of knowledge based for different forms of violence, the researcher extracted information on empirical data from different selected scientific journal articles and research-based publications. Based on this methodology, it was possible for the researcher to capture state-of-the-art qualitative evidence on various psycho-social factors that impact on children witnessing domestic violence in a household. Although only a few studies on children witnessing domestic violence in Sub Sahara Africa could be found, however various studies from other parts of the world threw some light onto the causes, effects and implications for domestic violence on children's development.



## 4.0 CHAPTER FOUR

### 4.0 DISCUSSION AND ANALYSIS

#### 4.1 Introduction

The preceding chapters reviewed literature focusing on various ways which children experience domestic violence, risk factors associated with children's exposure to domestic violence, the effects of domestic violence on children as well as the roles of social workers in the lives of children exposed to domestic violence. Therefore this chapter will discuss and analyse the literature of the above preceding with the use and application of the ecological perspective in order to address the study objectives which are: ways in which children experience violence in the home, the risk factors for violence against children in the home, the effects of domestic violence on children and the roles of social work in domestic violence.

Discussing and analysing the literature using the study objectives helped the researcher to link domestic violence with the broader parts of the social environment, such as the individual, interpersonal, community and cultural context. The literature showed that, the family and the home environment gave birth to different types of domestic violence experienced by the child (Edleson, Tajima, 2011). The ecological model provided background knowledge on how different level of the environment affect the child's well-being for example the interaction between parents, important family members, (e.g., siblings, grandparents).

#### 4.2 Ways in which children experience violence in the home

Research on domestic violence demonstrated that the perpetration of domestic violence has a strong bias towards individuals and their development. Domestic violence is related to the interaction between an individual and his/her environment. For example, research indicates that it causes economic abuse and financial hardships, physical abuse, emotional abuse, neglect and sexual abuse (Bronfenbrenner, 1970's). While it has been established that data has been accumulated on the issue, advanced statistical methods can be overwhelmed by the interpretations that often influence debate on domestic violence. According to Belsky, (1980), ontogenic or individual factors are features within a person that are linked with perpetrators of violence for example personal characteristics, perceptions, childhood experiences and relationships.

Though, research shows that individual proximity increases with the next level of the ecology, (from the macro-system in the octogenic context). Therefore the risk factors within a person's immediate environment exert a significant direct influence on their development. This means that negative family interactions will have an adverse effect on the children's development.

As it has been stated in the study objective, this study investigation has critically explored to look at the effects of domestic violence on children's development. Research revealed that exposure of vulnerable young children to domestic violence has significant effect on their wellbeing and development. Therefore, children raised in environments that are characterised by domestic violence are at risk of abuse themselves (Capaldi & Clark 1998). For example, a longitudinal study conducted by Capaldi and Clark (1998), found that witnessing domestic violence at home as "model" for imitation, or being a victim of direct violence is a strong predictor of later own use of violence. Therefore, parents' failure to offer support and care for their children is related to children's future violence behaviour. Based on this notion, poor parenting damaged the basic emotional security in a child, influenced the images of interaction that a child acquired from the family, and limits the child's capacity for empathy.

Overall, this study found out that the models that take into account the direct effects of domestic violence on parenting and children's adjustment are lacking the important environmental factors that analyse the differences in cognitive functioning between women and children in these circumstances. The use of ecological model as a framework in this study systematically complements the data. This further propels a significant relationship between domestic violence and children's development. Therefore; children are vulnerable and generally affected by the quality of relationship they experienced from their family. This result further strengthened the general perspectives of ecological model on domestic violence and children's wellbeing.

The review of literature in this current study revealed that domestic violence has an adverse effect on children's emotional, social, behavioral, physical and cognitive abilities. This was critically examined in this study using developmental risk and resilience framework. This framework shows that domestic violence influences children's development. This effect was linked to the various complex interactions between individual's child characteristics, developmental stage and environmental factors. Moreover the study revealed that moderating factors, such as age and

gender influenced children witnessing violence in their home. Furthermore, early childhood experiences were found to be disruptive to infant's brain. For example, research on children exposed to household trauma shows that the excessive secretion of potent neural chemicals intended to protect the individual, definitely compromise the neural development in the immature brain. However, such early experience jeopardized the development of important neurobiological systems involved in core stress regulation up to the highest order networks involved in emotion modulation (Cozolino 2006; Perry & Szalavitz 2006 Schore, 2001; 2003a; 2003b; Streeck-Fischer & van der Kolk 2000).

#### **4.3 Risk Factors for Violence against children in the home**

A number of risk factors were identified as being associated with perpetrators of domestic violence by the literature review. These include drugs and alcohol, parental separation and divorce, children's status as minors/ power differentials between caretakers and children, socio-economic factors, loop holes that exist in some laws, inadequate prevention and support programs. For the purpose of this paper, not all risk factors are discussed because these factors do not occur in isolation but rather as the literatures reflects that, there is a link between all various factors (Marcus, Braaf 2007; Mouzos , Makkai 2004). Many of these risk factors show that, there is an increased likely-hood of aggressive behaviour and offending generally practiced by the perpetrators of child domestic violence. The links between the risk factors against children in the home are highly consistent with the ecological perspective (Belsky, 1984).

The ecological model explained that these risk factors occurred as a result of biological and personal history of perpetrators of child domestic violence and these factors occur at the micro level. For example, abuse of alcohol by the batterers, parental separation and divorce. Carlson et al, (1977) added that these risk factors interacted with other psycho-social aspects of the perpetrator's circumstances, such as stress at work, unemployment, or marital problems which influence violence outcome in a household. (Nicholas (2005) and White, Chen ( 2002) found that, among those children who had experienced domestic violence, the most commonly reported aspects of perpetrator's behaviour (and therefore risk factors for violence) were parental separation and divorce, children's status as minors, general levels of aggression and controlling behaviour.

These statement links with the meso system of the ecological system because it believes that different family characteristic significantly promote conflict and tension in a household, compared to other similar social groupings due to various psycho-social factors such as attitudes, values, and beliefs acquired in one's family of origin; personal resources, skills, and abilities; subjective perceptions of reality and views of the world; and personal weaknesses, problems, and pathologies (Ambrosino et al ., 2005, Holden & Nabors, 1999).

Alcohol is a significant risk factor for domestic violence, with research suggesting that children whose caretakers frequently consume alcohol at excessive levels are more likely to experience violence (Dearden & Payne 2009). The involvement of alcohol in domestic violence is an even bigger issue within Indigenous communities. There is strong evidence of a relationship between heavy drinking and aggression (Pinheiro, 2000). However, not all people who consume alcohol become violent. One explanation for the role of alcohol in child domestic violence is that the consumption of alcohol may facilitate an escalation of an incident from verbal to physical abuse by the perpetrators because it lowers inhibitions and increases feelings of aggression. These can also cause socio-economic factors and power differentials between caretakers and children in the families (Nicholas, 2005).

There is also research that suggests that because of its impact on aggression the consumption of alcohol, either by the offender or victim, may increase the seriousness of a domestic violence incident, the severity of injuries and risk of death, with almost half of all perpetrators homicides found to be alcohol-related (Dearden & Payne 2009).

Taken as a whole, the research findings presented in this summary paper suggest that there are a number of specific areas that can be targeted to prevent child domestic violence and reduce repeat victimisation which are areas of drugs and alcohol, children's status as minors, socio-economic factors, loop holes that exist in some laws, inadequate prevention and support programs. To begin with, these can be achieved by coordination and collaboration across sectors and across all levels of government and non-government (Seloilwe et al, 2009). There should be a fundamental principle underpinning any approach to the prevention of, and intervention with, domestic violence.

All stakeholders need to improve coordination between domestic violence and child protection services to assist in preventing early exposure to domestic violence in order to combat these risk factors (Fidzani, 2000, Ntseane & Ncube, 2000). Strategies must focus not only on the prevention of early exposure to domestic violence, but deal with any associated physical and sexual abuse, neglect and emotional abuse in a holistic manner. A holistic approach should deal with the effects of children's exposure to domestic violence and other maltreatment in order to help prevent the intergenerational transmission of violent attitudes and behaviours or subsequent victimisation (Fidzani, 2000, Ntseane & Ncube, 2000).

Secondly, in order to address the risk factors for violence against children in the home the literature has shown that it is important to increase the availability and awareness of services for the victims and perpetrators in all settlement patterns across developing country like Botswana the country (Marcus & Braaf, 2007). These will enhance referral mechanisms in order to improve collaboration between service providers and ensure that the complex needs of all parties are met through an integrated service system (Marcus & Braaf, 2007). This includes (but should not be limited to) services such as advocacy, support, accommodation, skill development and counselling for both women and children who are exiting or attempting to exit violent relationships, as well as programs for perpetrators of domestic violence to reduce repeat victimisation.

Lastly, in terms of loop holes that exist in some laws, the literature showed that it is important to enhance linkages between criminal justice processes, support services and prevention programs (Women in Action for Abused Women and Children, 2006). There has been considerable work undertaken to improve the legal response to domestic violence and an integrated response from criminal justice agencies. This includes the introduction of pro-arrest police policies, specialist courts and support services for victims (WAAWC, 2006). It is important that a greater level of support is offered to children throughout the legal process, and that barriers preventing access to justice, particularly for vulnerable children are overcome.

#### **4.4 Effects of Domestic violence on Children**

Research shows that domestic violence results in emotional effects, physical effects, social effects and poor intellectual development to the child. The literature also established a significant

relationship between child's lower psychological functioning and poor parenting, as studies on domestic violence reported the deleterious effects of depression on parenting, (Kolbo, 2012). Therefore, the links between parental psychological health and parenting differences are highly consistent with the ecological perspective (Belsky, 1984). The ecological model explained that mother's psychological functioning have its own direct effects on children's wellbeing. However, these were not solely mediated, due to its significant effects of parenting. Even when a mother offers good parenting, the unpredictability of her mood and behaviour could have harmful effects on her children's emotional well-being, that is, a child may show signs of pity or worry about his /her mother's health. Based on this, we can suggest that maternal depression has significant effect on children's adjustment, (Sternburg, Lamb, Gutterman, & Abbott, 2006) and children react more to their mother's depression, than overall style of parenting. Research shows a significant correlation between poor social supports, negative life events and women's psychological functioning. Therefore, the differences in psychological reactions of parents victims of domestic violence is linked to their knowledge, and availability of social support systems in their environment, i.e., family, friends, and social service agencies, as well as their understanding of recent difficult experiences. This is consistent with Belsky's, (1984) ecological framework of the determinants of parenting. In addition, research also established that harmful life events, negatively affect psychological functioning, i.e., (depression and posttraumatic stress symptoms) of parents victims of domestic violence (McMahon *et al.*, 1993), and this impact on their children's socio-cognitive development.

According to Mathias (2013) Mertin, 2011) & Murray, (2010), children are highly sensitive to conflict and discord in their home, even when it was not violent. In addition, (Edleson, 2012) explained that physical abuse between parents impact more on children, than marital discord in the family. Grych, et al. (2000), corroborated these findings, by linking children's high increase in behavior problems to intensity of their parents' conflict. They also suggested that inter-parental aggression exacted serious toll on children's adjustment. Similarly, Henning et al. (2013), established a significant relationship between verbal and physical violence and psychosocial functioning of preschoolers. The literature concluded by highlighting that children exposed to conjugal violence as well as verbal conflict fared are worse, compared to children exposed to only verbal conflict.

#### 4.5 Roles of Social work in Domestic Violence

Research reveals that social workers use the Ecological model in order to understand factors associated with children's exposure to domestic violence and its effects on children. This model helps them to work with children, families and identify maltreatment and high-risk situations so they can intervene appropriately. It must be emphasized, however, that while certain factors often are present among families where maltreatment occurs, this model does not mean that the presence of these factors necessarily lead to child abuse and neglect.

Existing literature shows that one of the models that social workers uses is Bronfenbrenner's ecological model which has different levels or systems. These levels are micro, meso, exo and macro systems. (Holt, Buckley & Whelan, 2010) Social workers use these systems to explain the link between domestic violence and children development, mental health, and how the relationships within the system influence the occurrence of domestic violence. The National Association of Social Work (NASW) Code of Ethics uses this model as a guide to everyday professional conduct of social workers so as to create and maintain professional standards, and to advance sound social policies (Holt, Buckley & Whelan, 2010).

In addition, research shows that social workers provide myriad services to victims and perpetrators of child domestic violence which include educating the community, counselling, policy formulation and implementation and research. Holt, Buckley and Whelan, (2010) the literature showed that, direct services to victims of child domestic violence include counseling and support through shelter programs across the southern African countries, individual counseling through private practice settings, court advocacy through county victim service agencies, and social justice community organizing efforts to prevent domestic violence from occurring in the first place.

Social workers provide services to perpetrators through voluntary and court mandated batterer intervention programs and as professionals committed to social justice, they believe that domestic violence is a social justice issue (Lundberg, 2012). Secondly, the literature shows that social workers support, assist, and advocate on behalf of men, women and children affected by domestic and family violence. They ultimately seek to empower family members to take control of their lives and move beyond the effects of child domestic violence. In addition, (Erickson, Egeland, (2010) and Pianta, (2008).

Research has uncovered that social work profession is committed to maximising the well-being of individuals and society through educating the community, counselling, policy formulation and implementation together with research. Social work considers that individual and societal wellbeing is underpinned by socially inclusive communities which emphasise principles of social justice and respect for human dignity and human rights, including the right to freedom from intimidation and terror in society (Bousha, 2006). Research also had shown that social workers work with children, young people, and adult's and families to prevent family violence and assist families exposed to violence. Many of these social work roles focus on intervening before domestic and family violence occurs, supporting parenting, educating young people and influencing other social determinants of violence (Bousha, 2006). The social workers use their ethics and formulate policies that helps to reduce not only physical assaults but an array of power and control tactics used by caregiver including direct or indirect threats, sexual assault, emotional and psychological torment, economic control, property damage, social isolation and behavior which causes a person to live in fear (Irwin and Waugh 2007).

According to the literature, certain behaviours and action defined as child domestic violence are criminal offences and any behavior that constitutes to child domestic violence is unacceptable (Holt, Buckley & Whelan, 2010). Moreover research demonstrates that child domestic violence contributes to compromised mental health, homelessness, reduced relationship, educational and employment for children. The research on child domestic violence is still evolving in Botswana and there is positive progress in the development of how the Government and the non- Government sectors are responding with evidenced based programs and resources which are emerging, both for survivors of violence and for perpetrators who are seeking to change their behavior (Fidzani, 2000, Ntseane and Ncube, 2000).



## **5.0 CHAPTER FIVE**

### **5.1 SUMMARY OF MAJOR ISSUES, CONCLUSION AND RECOMMENDATIONS**

#### **5.1. Summary of major issues**

The decision to conduct this research study was influenced by the recent increase in domestic violence occurrence in Botswana. However, despite an increase in research and debate on the topic, reports show that less consideration has been to children witnessing domestic violence in their homes. Most studies on the concept emphasise more on the adult's victims, with little consideration given to child's victims of domestic violence. According to research studies, domestic violence is a severe social problem that violates children's rights through damaging their bodies and self-esteem. Therefore these current study explored the experiences of children witnessing domestic violence together with how these exposures to violence impact on children's wellbeing and quality of life. In order to realize this goal and address the problems associated with children's exposure to domestic violence, these study used systematic review of literature to find the gaps in earlier studies on domestic violence and analysed recent evidence on children witnessing domestic violence. The chapter also suggested recommendations or strategies that will go a long way in reducing children's exposure to domestic violence in Botswana.

Lastly, laws in Botswana are not firm against child domestic violence. To substantiate the above statement the constitution of Botswana in the Penal Code Cap. 08:01 addresses the various forms of violence such as physical and sexual but silent on domestic or family violence except in cases of sexual offences such as rape, incest, and defilement. Even then, the provisions and their enforcement are not adequate to protect the survivors. In a nutshell, Child Domestic Violence (CDV) is caused by poverty, unemployment, power dynamics, characteristics of parents, carers and Intimate partner violence (Fidzani, 2000 & Ncube, 2000).

#### **5.2. Conclusion**

Children living in environments characterised by domestic violence represent a significantly disempowered group. Domestic violence is described as a serious cause of vulnerability to children's development. Though, studies have long identified the correlation between domestic violence and children's development, only few attempts have been made to explain the meaning of the concept. However, taking a clue or insights from the ecological theory

and recent research on family violence, it was clear that limited studies have examined the contextual hypothesis about this correlation. While children experience domestic violence in different ways, the impact is reflected in their wellbeing and development. The current study expands the common definitions of children witnessing domestic violence in their homes. The study proved that children do not only see violence, but also hear it occurring, and sometimes part of it in their homes. These experiences have far reaching consequences for children's wellbeing.

The current literature offers little hint on children's resilience and the factors in their environments that cut or heighten the impact of violent events swirling around them, however the knowledge we have on these factors would motivate and lead us to designing more effective intervention strategy that will not only ease the effects of family violence on children, but also promote their safety. Therefore, we can assume by suggesting that over dependence on adult reports, on reports of children in immediate crisis, and on standardized measures that misses many important factors in a child's life , leaves many questions unanswered.

### **5.3. Recommendations**

The recent increase in domestic violence and recent debates about child victims of domestic violence has increased and highlight the calls for mutual collaborative interventions between the arenas of child protection and domestic violence. While a number of excellent studies are clear among those reviewed, there is still more work to be done in developing in advanced understanding of how children are negatively affected by exposure to domestic violence and collaborative intervention to prevent the re-occurrence of such social problems in children's life.

Therefore, based on various findings, from the review of literature on domestic violence and its relationship to children's wellbeing, the following specific recommendations were suggested in relation to issues relating to policy, practice and research:

#### **5.4.1. Recommendations for Policy**

1. Research should help policy makers to become proactive and take corrective measures to develop a national policy on prevention and eliminating Child Domestic Violence in Botswana hence this will help to fill the gaps in existing policies in Botswana.
2. This study can contribute to policy by offering strategies and ideas that promote wellbeing and development of children exposed to domestic violence especially to children who live in violent homes.

3. The knowledge acquired from this study should be used to lead to safety for children who experience domestic violence and aid in developing better policies and treatments through making recommendations that will safeguard children witnessing domestic violence in Botswana.

#### **5.4.2. Recommendations for Practice**

1. Vulnerable children at risk of domestic violence must be registered and protected by the support services, so that proper intervention can be offered to them, if necessary, as early as possible to prevent negative outcomes of exposure to DV.
2. Adequate efforts should be directed towards promoting awareness on the needs of children experiencing domestic violence at all levels within Children's Services. This should encompass systemic work around issues such as training, research and evaluation of intervention programs.
3. There is a need, therefore, to develop counseling and crisis intervention/ shelter services which are available to CDV survivors in all districts of the country.
4. Professionals such as social workers should use evidence based practice from the study to support social work domestic violence environment. In addition, this study link the theory with practice and recommends intervention strategies that protect children witnessing domestic violence in their homes hence it is recommended for social workers, counsellors, pastors and educators.

#### **5.4.3. Recommendations for Research**

1. Effort should be directed towards investigating the psychosocial adjustment of children living in domestic violence homes.
2. The study should be used in research to instigate broader research, covering more geographical areas, socioeconomic background, ethnicity and cultural background of children witnessing DV.
3. Gaps raised in the study raise more pertinent questions that need further investigation and require multi-disciplinary approaches and methodologies.

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