



Effects of Physical Family and Community Violence on Child Development

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Topic

[Social violence](#)

Introduction

Violence exposure in the lives of children includes both indirect forms of witnessing and direct forms of victimization across family and community contexts. Violence includes physical, emotional and sexual forms. We focus here predominantly on physical violence exposure. Community violence includes acts intended to cause physical harm against a person in the community.¹ The majority of research on community violence has been conducted in the U.S.,² indicating about 25% of children ages 2-17 have this form of exposure.³ Recent international data show high levels among 8-13 year olds in Cape Town, South Africa where 40% have witnessed someone being killed in their neighborhood.⁴ Cross-national comparative data are available from the World Studies of Abuse in the Family Environment (WorldSAFE) project where 4% of children in the U.S.A. and Chile are estimated to have been hit with an object (not on the buttocks).⁵ Exposure to this form of parent-to-child physical aggression is estimated at 26% of children in Egypt, 36% of children in rural areas of India, and 21% of children in the Philippines.⁵ Estimates of threatening children with a knife or gun or choking the child are uniformly low across all countries ranging between 0-2%.⁵ International research estimates globally that 133-275 million children witness violence in the home annually.² Estimates in developed countries range from 4.6-11.3 million, with estimates of 40.7-88 million in South Asia, 34.9-38.2 million in Sub-Saharan Africa, and 11.3-25.5 million in Latin America and the Caribbean.²

Subject

Research has found pervasive detrimental effects of violence exposure on internalizing (e.g, depressive/anxiety symptoms), externalizing problems (e.g., aggressive behaviours), and social and educational outcomes across childhood and adolescence.⁶⁻⁹ Recent research also finds consistent links between community violence exposure and asthma in children^{10,11} including wheezing among preschoolers.¹² Effects can be further summarized by type of violence exposure. First, across multiple studies, a recent meta-analysis found total exposure to community violence more strongly predicted externalizing than

internalizing problems, with the strongest effects found for post-traumatic stress disorder (PTSD).¹³ Across sub-types of community violence exposure, the meta-analysis found direct victimization had stronger effects than witnessing violence on internalizing problems. Victimization and witnessing had stronger effects on externalizing problems than hearing about community violence. Finally, effect sizes vary by age. Stronger community violence effects were found among adolescents than children. However, after taking study characteristics into account, further analyses suggested stronger effects of community violence on externalizing problems among adolescents (ages 12-25), while stronger effects were found among children (ages 11 and below) compared to adolescents on internalizing problems.¹³

Second, regarding parent-to-child physical aggression, detrimental effects have been found on children's internalizing, externalizing and academic problems.^{14,15,8} Net of other victimizations, child maltreatment had the strongest relative effect on depressive symptoms among 2-9 year olds and 10-17 year olds.¹⁶ Reviews demonstrate a pervasive detrimental link between domestic violence exposure and behaviour problems.¹⁷ Third, recent research also points to the role of multiple violence exposures on children's outcomes. In the previous year, research on "poly-victimization," which is the co-occurrence of multiple victimizations in one person, has shown that it increases traumatic symptoms (e.g., anger, depression and anxiety).¹⁸ Another study found lower grades among youth exposed to multiple victimizations than youth with low victimizations.¹⁹

Problems

More research is needed on the effects of violence exposure over time. This would require longitudinal studies. These studies would best isolate the influences of violence exposure by also taking into account other adversities and prior behaviour problems. In research on violence exposure with young children, most studies use highly disadvantaged samples. More research is needed on the prevalence and consequences of violence exposure in young children's lives in comparative general community samples. Furthermore, since violence exposure sequelae are found in existing research to be pervasive, studies need to continue to include a broad range of outcomes. More cross-national research is needed on community violence.

Research Context

Research on community and family violence needs to be understood in relation to risk factors for exposure. Violence exposure varies by neighbourhood, family and individual factors. Higher levels of parent-to-child physical aggression is associated with living in economically-disadvantaged neighbourhood contexts as well as those with high violent crime levels.²⁰ Socio-economic status and family structure are also risk factors for violence exposure at the family level.^{6,9} Socio-economic status is predictive of exposure to violence co-occurrence.²¹ Ethnic minorities are more likely to be exposed to community violence.^{6,22} There is also some evidence of gender differences although the type of violence considered is important. Males are more likely to be exposed to community violence.⁶ However, some research finds no gender differences in the home,²³ while other studies find females are more likely than males to witness domestic violence.²⁴

Key Research Questions

School and community contexts are promising sites for intervention and prevention of violence exposure influences but more research is needed. What neighbourhood and school factors reduce the impact of children's violence exposure? Furthermore, what family and individual factors buffer the influences of violence exposure in children's lives? Do buffering factors vary in influence by children's developmental stage? What neighbourhood and school factors are associated with risks of poly-victimization, or the co-occurrence of violence exposure in children's lives? What forms of violence co-occurrence are seen across different developmental stages of children's lives?

Recent Research Results

Among preschoolers, community and family violence exposure are associated with more child problem outcomes. However, research shows the influence of community and family violence exposure works through a "meditational" model, or by a pathway of influence through caregivers. In this work, maternal distress is theorized to be central for preschool children as they are likely to experience community violence in their mother's company. Children seek information from their mothers, and maternal distress in response to violent events is thought to affect child behavioural outcomes.²⁵ For example, among young children (ages 3-5) in a Head Start program, community violence was found to increase maternal distress which in turn increased children's hesitancy with peers, decreased cognitive functioning and decreased positive peer interaction.²⁶ In another study, maternal depressive symptoms constituted part of the pathway through which community violence exposure affects child distress among preschool children.²⁷ Among a high risk sample of 3-5 year olds it was found that each of family aggression and community violence increased maternal distress which in turn increased child problem behaviours.²⁵

Research on older children points to factors that "moderate" or buffer the influences of community violence on children's problem outcomes. Social support has consistently been found to buffer the effects of violence on children's problem outcomes.^{28,9} Furthermore, family cohesion attenuates the effects of community violence exposure on male violence perpetration.²⁹ Research is also emerging on protective factors in school and community contexts. A Canadian study on child maltreatment effects on violent delinquency found an offsetting influence of a school intervention: the risk effect of maltreatment was lower in the group receiving a skills and relationship focused program.³⁰ This buffering effect of the school intervention program was observed again two years later.³¹ Another study of youth in Gambia, Africa found positive school climate reduced the effect of witnessing community violence on post-traumatic stress symptoms.³² Finally, a study of First Nations youth in Canada found individual, family and community resilience each buffered the effects of a broad measure of violence exposure on the re-experiencing post-traumatic distress disorder symptom cluster.³³

Research Gaps

Preschoolers' exposure to violence has received less attention than studies of older children, but it is an especially important developmental period when children are developing social and cognitive skills and preparing for transition to formal

schooling.^{26,27} Future research is needed on young children in representative large scale community studies. Longitudinal studies of preschoolers' violence exposure and its consequences are also needed that can examine changes in child behavior over time.

More research is needed on pathways that lead from violence exposure to problem outcomes at different developmental stages. Further work is also needed on the potential buffering influences of school and community resources in addition to family and individual resources across developmental stages. Research has begun on community and school resources with older children but these influences in younger children's lives should also be examined. Also, the buffering effects of social and personal resources should be tested across multiple types of violence exposure. Studies need to measure multiple types of violence exposure in their research design. More studies that examine buffering resources of violence exposure in longitudinal research designs and on multiple outcomes are needed. Further internationally-comparative research is also needed.

Conclusions

Violence exposure occurs in different social contexts of children's lives including families and communities and often co-occurs in the form of multiple violence exposures. Children are exposed to violence at both young and older ages. Children in disadvantaged neighborhood and family contexts are particularly at risk for violence exposure. For young children, pathways have been identified where violence exposure affects caregiver mental health which in turn affects child outcomes. Among older children, violence exposure has direct detrimental influences on a broad range of social, emotional and academic outcomes. Some promising research is emerging on features of families, schools and communities that further buffer the effects of violence exposure in children's lives. Social support is emerging as a protective resource in reducing the impact of community violence exposure in children's lives. Additionally, features of communities and schools (e.g., school climate and community resilience) are emerging as protective in reducing community violence exposure and child maltreatment influences in older children's lives. Further work on these prevention and intervention efforts are needed on a broad range of outcomes and age groups of children.

Implications for parents, services and policy

Ideally, more resources would be targeted at initiatives to reduce overall levels of violence exposure in communities and families. However, more immediate policy and prevention opportunities that build on research findings are also available. First, among preschoolers, it may be especially useful to offer support to caregivers exposed to violence.²⁵ Supportive resources may decrease caregiver distress which may in turn reduce child behaviour problems. Second, among older youth, efforts to support family functioning may reduce violence perpetration.²⁹ The role of buffering resources across contexts that decrease the effect of violence exposures on children's outcomes should include a broad range of outcomes including educational attainments. School factors are emerging as protective resources among older youth with findings emerging from Canada and Gambia, Africa.^{30,33} School factors should be further investigated among younger children. Efforts to foster community and school buffering resources are promising as they may reach a broad range of students. Research findings suggest that resources in

multiple social contexts may best be garnered to reduce the impact of violence exposure on children.²¹

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