



**FINAL REPORT: IDENTIFYING SUPPORTS AND SERVICES AVAILABLE TO
CHILDREN AND YOUNG PEOPLE AFFECTED BY DOMESTIC VIOLENCE
ACROSS SLIGO AND LEITRIM.**

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The MACE Project

The Multiple Adverse Childhood Experiences (MACE) Project is a cross-border initiative which was awarded funding in 2017 of over €5 million. The funding included 15% from both cross-border Departments of Health. The MACE project began in 2018 and was due to terminate in June 2021 however it has been awarded an extension until March 2023 due to the criticality of its work in transforming the lives of children, young people and their families. The MACE project operates delivery sites between the Republic of Ireland and Northern Ireland. These sites include; (1) Derry, Letterkenny & Inishowen, (2) Strabane & West Donegal, (3) Fermanagh, Sligo & Leitrim, (4) Armagh, Cavan & Monaghan, and (5) Newry & Louth. Each area has one designated full-time project coordinator. For the duration of my placement experience I have been working closely alongside Georgina O' Brien who coordinates the Fermanagh, Sligo & Leitrim area. The MACE project aims to transform the lives of children and young people ages 0-3 and 11-13, and their families, who are at risk from multiple adversities in their lives, through identification, early intervention and the provision of nurturing support within their own communities. This project also intends to create trauma aware and trauma informed communities.

The MACE project focuses on specific age groups for essential reasons. There is a focus on the 0-3 age group due to extreme levels of vulnerability, from a neurodevelopmental perspective, in relation to a child's physiology and developmental burst in terms of sensitive brain development. Moreover, there is also a focus on the 11-13 age group as this cohort go through a period of rapid transitions in terms of physical, emotional and psychological development, educational changes and identity formation, plus the influence of social media. The MACE project works in collaboration with several project partners including the Western Health and Social Care Trust, TUSLA, the Public Health Agency, the Southern Health and

Social Care Trust, the Health and Social Care Board and CAWT (Cooperation and Working Together), in order to achieve their project goals and outputs.

As part of my placement experience with the MACE project I have teamed up with the Children and Young Peoples Services Committee (CYPSC) and the Domestic Violence Advocacy Service (DVAS) to undertake a mapping exercise on behalf of CYPSC's Domestic Violence Working Group in order to identify supports and services available to children and young people affected by domestic violence across Sligo and Leitrim. This mapping exercise will be discussed in detail throughout the report and the key findings will be elicited to inform a single tender application under the MACE project for a funded intervention to support these children and young people in coping with such adverse circumstances.

CYPSC's Domestic Violence Working Group

CYPSC are consistently working towards providing improved positive outcomes for children, young people and their families through integrated planning and service delivery across the Sligo and Leitrim area. The development of the Safe & Protected from Harm Working Group was influenced by Better Outcomes, Brighter Futures, as it is listed as one of five national outcomes for children and young people in Ireland. This working group is guided by specific aims that all children and young people;

- Have a secure, stable and caring home environment.
- Are safe from abuse, neglect and exploitation.
- Are protected from bullying and discrimination.
- Are safe from crime and anti-social behaviour.

These guiding principles led to the development of the 'Domestic Violence Working Group' in 2020 in order to achieve specific priority actions of the Safe and Protected from Harm Working Group. The Domestic Violence Working Group is currently led by DVAS and includes the MACE project.

The purpose of the Domestic Violence Working Group is to add to the existing Domestic Violence Awareness Campaign and encourage individuals to understand and know what they should do in certain situations. The working group also intended to map services and supports available throughout Sligo and Leitrim who provide specific supports to children and young people affected by exposure to domestic violence. As part of my placement experience I took on the role of completing the mapping exercise for the benefit of this group and the children and young people of Sligo and Leitrim. The Domestic Violence Working Group also aspires to increase the knowledge and understanding of DV across service providers in Sligo and Leitrim as well as ensuring best quality practices in responding to children and their families

exposed to DV. However, most importantly, this working group intends to consider the provision of a specific DV programme/initiative to support children and young people in Sligo and Leitrim.

Introduction & Rationale

Domestic violence (DV) is a term which can be interpreted in a variety of ways dependent upon the context and the individual's understanding. It typically refers to "a pattern of many physical, sexual, and/or psychological behaviours perpetrated by a current or former intimate partner, designed to manipulate, control, and dominate another to achieve compliance and dependence" (Rodriguez, Bauer, McLoughlin & Grumbach, 1999; Vantage, 1998). A multitude of terms are used to refer to young children who have experienced DV within their home environment. These terms include 'observers', 'witnesses' and 'bystanders' of such violence, however they have recently been replaced by the term 'exposure', as the nature of a child's experience with DV cannot be assumed (Fantuzzo & Mohr, 1999). Exposure to interspousal DV is understood to be one of the most traumatising experiences for young children which can consequently exacerbate disrupted development and psychological damage persisting into adulthood (McIntosh, 2003). Extensive research carried out by the United Nations Secretary General's Study on Violence Against Children found that approximately 275 million children worldwide are exposed to DV in their home (UNICEF, 2016). Literature and theoretical research consistently highlights that some of the main victims of DV are the smallest, most vulnerable children in our society and these victims often remain excluded from support services (UNICEF, 2016). Article 19 of the United Nations Convention on the Rights of the Child outlines children's basic right to protection from violence, abuse and neglect and emphasises the role of the state, education professionals and parents in providing such protective factors (Children's Rights Alliance, 2010). Young children under the age of 5 tend to be undermined in domestically violent household environments due to the idea that they do not have the capacity to understand such actions nor the ability to recall stressful situations (Lieberman, Chu, Van Horn & Harris, 2011). However, continuous research has proven that young children possess explicit memories of childhood trauma and consequently struggle to

overcome such adverse experiences (Bartlett & Smith, 2019). It is understood that from 9-months-of-age, infants obtain the appropriate neurological functions necessary for long-term memory recall and these infants who have witnessed DV can subsequently re-enact such traumatic experiences in multiple manners during their school years (Gaensbauer, 2000).

This project has been guided and influenced by the significant long-term negative impacts associated with exposure to DV throughout a child's life. Hughes, Graham-Bermann and Gruber (2002) have indicated the significant level of psychological and behavioural damage which children endure when exposed to DV. This is supported by the stark statistic of 40-50% of young children living in violent households presenting with increased externalising behaviours, disrupted patterns of emotional arousal, and heightened levels of clinical disturbance in their emotions and behaviours, through exposure to DV during their childhood (De Bellis, 2001; Mertin & Mohr, 2002; Lieberman & Van Horn, 1998 as cited in McIntosh, 2003). In addition, there is an enhanced risk of causing harm to young children's physical and social development. Young children who are exposed to DV in their home environment experience a heightened level of toxic stress which subsequently alters their developing brains and impedes their cognitive and sensory functioning (UNICEF, 2016). This, in turn, leads to a disrupted attachment cycle which contributes to several social challenges including an inability to feel empathy towards others and a fear of being alone. A recent study highlighted that 40% of children who have grown up exposed to DV in their childhood have continued to display signs and symptoms of trauma throughout their entire education. These signs and symptoms have presented in the form of poor school attendance, poor academic performance, delayed language development and lower reading capabilities in comparison to those who have not experienced DV (UNICEF, 2016). There are also a myriad of neuro-developmental impacts that go hand in hand with prolonged exposure to DV throughout a child's development. Experiencing DV as a young child significantly harms the way in which a child perceives their

world around them and can damage the development of the frontal cortex which can cause personality issues, impulsivity and decreased motor function among these children (McIntosh, 2003). Global research has accentuated a strong link between children who have been exposed to DV in their childhood and those who have become victims or perpetrators of DV in their adulthood (UNICEF, 2016). These individuals have grown up exposed to DV from an early age and have subconsciously learnt early, powerful lessons which were considered normal to their family life. Despite that, some children can grow up extremely opposed to all forms of violence based on previous trauma and damaging experiences which they had witnessed as a child.

It is evident that young children need to be better protected and supported following exposure to DV within their home environment in order to both prevent and/or alleviate the damaging effects of such experiences. It is suggested that young children need a safe and secure home environment where they feel protected from harm, they need adults in their lives who can provide them with support and reassurance such as parents and educators, plus they need to learn that DV is wrong and to understand how to appropriately manage and resolve conflicts from an early age (UNICEF, 2016). Moreover, most importantly, young children need to be able to access services and organisations who can support their differing needs. The lack of services available to support young children experiencing DV has been highlighted as a pertinent issue throughout my placement experience with the MACE project. The issue surrounding domestic violence has gained increasing attention due to COVID-19 and the number of children exposed to such violence has drastically increased. However, there is a lack of knowledge regarding the services and organisations who offer specific supports to young children affected by DV. Therefore, as part of my placement experience and on behalf of the MACE project and CYPSC I carried out research and undertook a mapping and scoping exercise in attempt to identify services and organisations who offer supports to young children

who are/have been affected by DV across the Sligo and Leitrim area. The data was elicited through a SurveyMonkey questionnaire designed with 21 open-ended questions to gather responses. The data was then analysed to form the basis for a single tender action under the MACE project for a funded intervention to assist and support young children affected by DV in the Sligo and Leitrim area. I carried out in-depth research related to the effects of exposure to DV on young children's overall development in the early years and created a PowerPoint presentation which was delivered at a variety of meetings to a diverse range of organisations with the aim of enhancing individuals awareness of DV and its devastating impacts on young children. This project will be used for the benefit of both the MACE project and CYPSC's Safe & Protected from Harm working group to inform strategic plans for children and young people as well as provide an evidence-base for the application for funded interventions to provide high quality support to young children in such adverse circumstances.

Mapping Exercise

Aim: to identify supports and services available to support children and young people exposed to domestic violence.

Target: organisations and services who work alongside children and young people in the Sligo and Leitrim area.

Method: SurveyMonkey questionnaire with 21 open-ended questions to elicit specific responses.

Respondents: 24 individuals from 18 different organisations.

Respondents Included:

An Garda Siochana.

TUSLA.

The Probation Services.

Focus Ireland.

TUSLA Leaving & Aftercare Service.

Sligo Springboard Family Support Service.

HSE Addiction Service.

Sligo County Council.

Sligo/Leitrim Home Youth Liaison Service.

Sligo Family Resource Centre.

Foróige Sligo/Leitrim.

Mayo, Sligo and Leitrim ETB.

Sligo Social Services.

Mohill Family Support Centre.

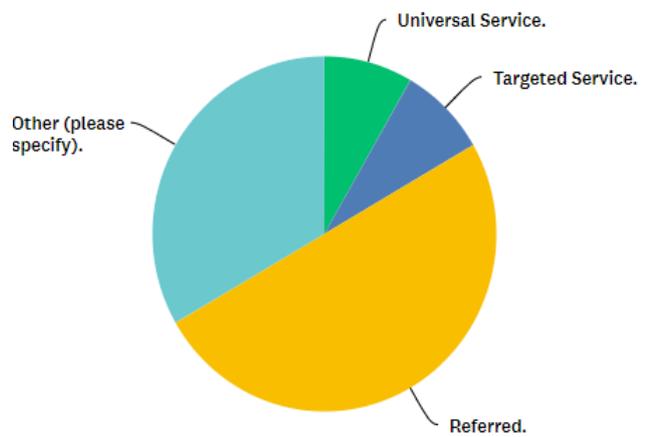
Scoil Mhuíre Naofa.

Leitrim Development Company.

Key Findings

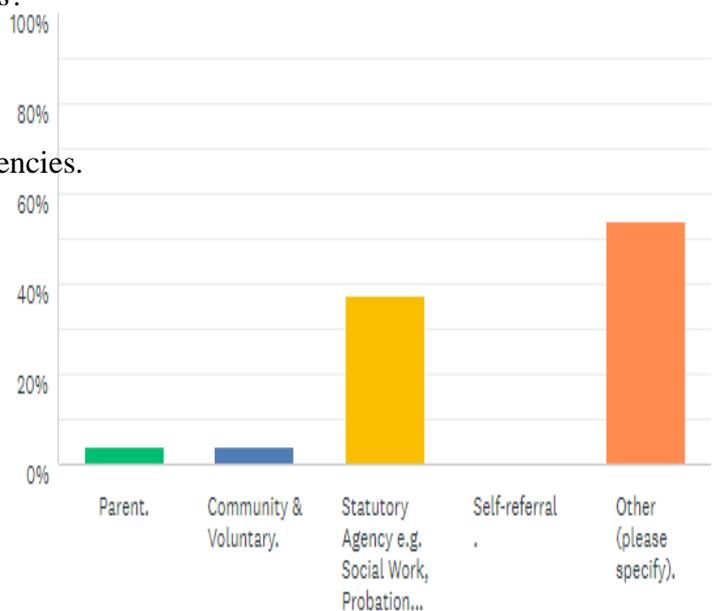
Q. How does a young child become involved in the services?

- 8.33% Universal Service.
- 8.33% Targeted Service.
- 50% Referred.
- 33.33% Other:
 - All of the above.
 - Children in Care.
 - Family Support Services.
 - Parent/Guardian.
 - Universal & Targeted.



Q. Who are the referral agencies/individuals?

- 4.17% Parent.
- 4.17% Community & Voluntary Agencies.
- 37.50% Statutory Agency.
- 0% Self-referral.
- 54.17% Other:
 - Mix/All of the Above.
 - Courts.
 - Prison.



- GP.

- Psychiatrists.

99% of responding organisations stated that they do not currently provide specific supports to young children affected by domestic violence. However, they reiterated that they could provide less specific support through listening to the children and young people and signposting them to other services, mainly DVAS.

TUSLA can offer therapeutic supports.

Focus Ireland can offer emergency accommodation and often refer to DVAS.
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TUSLA Leaving & Aftercare Services can provide assistance to young people in moving accommodation.
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Meitheal are open to providing support for children and young people affected by DV on the grounds that no social work is involved.

Foróige can offer emotional and practical support to children and young people. They can also offer online supports due to COVID-19.
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Sligo/Leitrim HYLS help children and young people throughout school by directing them to specific services.

Scoil Mhuíre Naofa offer in school play therapy which they fund privately.
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Tubbercurry FRC offer play therapy and brief interventions such as Relax Kids and Rainbows.

Services and organisations identified by respondents who provide support to children and young people experiencing domestic violence:

Domestic Violence Advocacy Service.
Children & Young Peoples Services Committee.
The MACE Project.
Northwest Stop Counselling Service.
M-PACT Counselling Service.
Epic (online support).
Women's Aid.
Childline.
Sligo Social Services.
Foróige.

99% of the responding organisations confirmed that they actively engage with the parents of all children in order to create a strong support network.

The majority of responding organisations found it difficult to quantify the number of young children affected by domestic violence, who avail of their services each year, as they had no data available/do not gather such information.

Gaps in Service Provision (as outlined by the respondents):

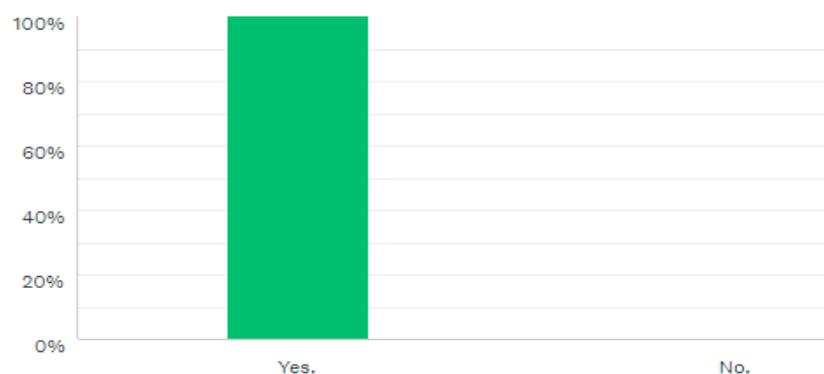
No direct counselling for young children.
No specific focus on children in DV scenarios.
A lack of prevention strategies and awareness.
A need for enhanced discussions in school environments related to DV.
A need for more readily available counselling and public awareness.
Lack of funded interventions for children and young people.
No specific supports for children.
A lack of awareness leading to an inability to signpost children to correct services.
A need for a tailored programme to inform practitioners.
A need to connect community supports with the Gardaí.
A need to connect children with local community supports.
A need for clinical intervention which can be accessed immediately.

Barriers perceived to prevent children and young people from accessing support (as outlined by respondents):

Distance.
Transport.
Suitable times (outside of school/extra-curricular activities).
Ongoing stigma associated with getting help.
Loyalty.
Denial & shame.

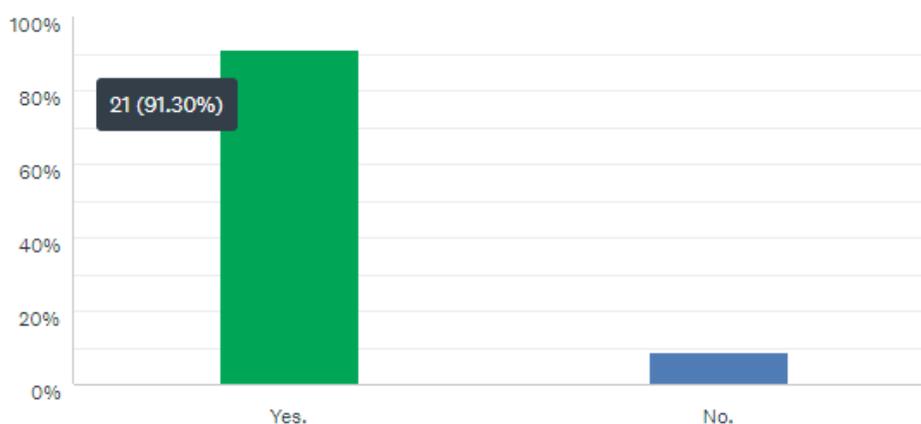
Pressure from the perpetrator.
Taking the first step towards seeking help.
COVID-19.
A lack of locally available services.
Fear of repercussion from abusive parent if they were to find out (this becomes an issue when 99% of responding organisations stated that they do engage with the parents/guardians of all children and young people).
Lack of awareness.
Fear of the next steps.
Lack of access to supports specifically in Leitrim.
Confidentiality.
Fear of being recognised.
Refusal of consent by a parent/guardian.
Fear of becoming homeless.

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- 100% of responding organisations indicated that they would be willing to engage in further training related to supporting children and young people exposed to domestic violence, on the basis that it is offered to them.



Respondents willingness to support children and young people experiencing domestic violence:

- 91.30% of respondents stated that they would be willing to provide support to children and young people affected by domestic violence.
- 8.70% indicated that it would not be feasible for their organisation to provide such support to children and young people across Sligo and Leitrim.



Respondents recommendations for domestic violence support provision in Sligo and Leitrim:

The MACE Project.
A quicker response from the Gardaí and TUSLA.
Domestic Violence Advocacy Service.
Specific training for practitioners.
Helping Hands (Universal intervention to be funded by MACE as a result of this exercise).
Barnardos (TLC Kids).
Promoting resilience workshops.
Respite breaks for children and young people experiencing DV.

Reflective Conclusion

It is conspicuous throughout the reviewed widespread relevant literature and theoretical research that exposure to domestic violence throughout a child's early years is becoming a progressive issue (UNICEF, 2016; McIntosh, 2003; Lieberman, Chu, Van Horn & Harris, 2011, Hughes, Graham-Bermann & Gruber, 2002). This issue cannot be rectified until services and organisations are cognisant of the damaging effects linked with early exposure to DV are fully equipped to provide specific supports to young children affected by such traumatising experiences. My placement experience with the MACE project has highlighted the heightened need for such services and organisations specifically for young children in the Sligo and Leitrim area. The number of young children who are either currently experiencing or have previously experienced domestically violent situations in their home environment has rapidly increased over the last year. These children are suffering in silence due to the fear of seeking help and the lack of services and organisations locally available to access.

My project sought to explore the negative lasting impacts of exposure to domestic violence on young children in their formative years and to identify existing services and organisations who offer such specific support to young children across Sligo and Leitrim. It was anticipated, from the beginning of my project, that such services and organisations would not be identified through the questionnaire due to the unfortunate nature that these services do not currently exist. The questionnaire, which I created and distributed to over 100 individuals, proved this unfortunate reality as not one organisation indicated that they offer such services. This evidence-based finding is to be used to inform a single tender action funded by the MACE project, to provide young children with access to interventions to assist and support them in coping with domestic abuse. The universal intervention currently being considered is known as 'Helping Hands'. Helping hands is a programme which has been developed by Women's

Aid in Northern Ireland as a therapeutic intervention to assist young children who are experiencing or have been affected by domestic abuse. Engaging in this mapping exercise project has also enriched my understanding and awareness in relation to the signs, symptoms, and effects associated with young children's exposure to domestic violence. Numerous studies conducted worldwide have conveyed a pattern in findings concerning developmental issues presented in adults who were exposed to domestic violence in their childhood (UNICEF, 2016). These studies highlight the necessity for early intervention and prevention in a child's formative years to avert the lasting impacts of exposure to domestic violence at a young age. Through the implementation of this mapping exercise, the MACE project has been able to provide an evidence-based foundation to their single tender application, which would not have been possible without the accumulated data. Ultimately, this completed project has provided the basis to transform the lives of young children exposed to domestic violence through prevention and early intervention in the Sligo and Leitrim area, it has also enriched the knowledge of other professionals through the evidence-based presentation which I have delivered to several organisations.

I have really enjoyed completing this entire project as it has allowed me to enhance my awareness and understanding of domestic violence as a professional in the early years sector, but it has also contributed to change in the lives of young children. Upon completing this project I was filled with a sense of achievement, worth and value thanks to the sincere words of gratitude which I received from multiple colleagues. These kind words emphasised how grateful the MACE project, CYPSC and DVAS. Since completing and presenting this project I feel fully informed in relation to domestic violence and young children. I find it hard to believe that I had never thought about children being involved in domestically violent situations as I would automatically assume it only occurs between intimate partners. As a result of the extensive research that I carried out, I know that domestic violence will always remain in the

back of my head as a potential explanation for some young children's developmental challenges and behavioural difficulties in the early years.

Based on my experience, if I were to ever give advice to anyone completing a similar project in the future it would be to allow ample time for self-care and self-reflection. The topic of domestic violence is often emotionally challenging, however when children are involved it tends to become even harder to digest due to their age and vulnerability. I would encourage others to protect their own emotional, physical and psychological health through engaging in mindfulness, meditation and self-reflective practices to appropriately care for themselves. Overall, carrying out this placement project has taught me that I am capable, resilient and eager to learn. I personally think that I have grown a lot as a professional and this project has subjected me to invaluable learning experiences which I intend to transfer to my future practices in the early years sector with the aim of transforming the lives of young children.

Link to SurveyMonkey Questionnaire

<https://www.surveymonkey.com/r/LL2WSV2>

References

- Bartlett, J. D., & Smith, S. (2019). The role of early care and education in addressing early childhood trauma. *American Journal of Community Psychology, 64*(3-4), 359-360.
- Children's Rights Alliance. (2010). The United Nations Convention on the Rights of the Child. United Nations. Accessed at <https://www.childrensrights.ie/sites/default/files/UNCRCEnglish.pdf>
- De Bellis, M. D. (2001). Developmental traumatology: The psychobiological development of maltreated children and its implications for research, treatment, and policy. *Development and Psychopathology, 13*, 540-543.
- Fantuzzo, J. W., & Mohr, W. K. (1999). Prevalence and effects of child exposure to domestic violence. *The Future of Children, 9*(3), 22-25.
- Gaensbauer, T. J. (2000). Psychotherapeutic treatment of traumatised infants and toddlers: A case report. *Clinical Child Psychology and Psychiatry, 5*(3), 373-377.
- Hughes, H. M., Graham-Bermann, S. A., & Gruber, G. (2002) Resilience in children exposed to domestic violence. In S.A. Graham-Bermann & J.L. Edleson (Eds.), *Domestic violence in the lives of children: The future of research, intervention, and social policy* (pp. 67-75). Washington, DC: American Psychological Association.
- Hughes, H. M., Graham-Bermann, S. A., & Gruber, G. (2002). Resilience in children exposed to domestic violence. In S.A. Graham-Bermann & J. L. Edleson (Eds.), *Domestic violence in the lives of children: The future of research, intervention, and social policy* (pp. 67-75). Washington, DC: American Psychological Association.

- Lieberman, A. F., Chu, A., Van Horn, P., & Harris, W. W. (2011). Trauma in early childhood: Empirical evidence and clinical implications. *Development and Psychopathology, 23*(2), 399-401.
- Lieberman, A. F., Chu, A., Van Horn, P., & Harris, W. W. (2011). Trauma in early childhood: Empirical evidence and clinical implications. *Development and Psychopathology, 23*(2), 399-401.
- Lieberman, A., & Van Horn, P. (1998). Attachment, trauma and domestic violence: Implications for child custody. *Child Adolescent Psychiatric Clinic of North America, 7*, 424-425.
- McIntosh, J. (2003). Children living with domestic violence: Research foundations for early intervention. *Journal of Family Studies, 9*(2), 219-234.
- McIntosh, J. (2003). Children living with domestic violence: Research foundations for early intervention. *Journal of Family Studies, 9*(2), 219-234.
- Mertin, P., & Mohr, P. (2002). Incidence and correlates of post-trauma symptoms in children from backgrounds of domestic violence. *Violence and Victims, 17*(5), 558-560.
- Rodriguez, M. A., Bauer, H. M., McLoughlin, E., & Grumbach, K. (1999). Screening and intervention for intimate partner abuse: Practices and attitudes of primary care physicians. *Jama, 282*(5), 469.
- UNICEF. (2016). Behind closed doors: The impact of domestic violence on children. New York: UNICEF.
- UNICEF. (2016). Behind closed doors: The impact of domestic violence on children. New York: UNICEF.

Vantage. (1998). Domestic violence: Update for healthcare providers. Accessed at

<http://vantageproed.com/viol/viol.html>