Understanding the Effects of Domestic Violence

A Handbook for Early Childhood Educators

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Understanding domestic violence helps us to support affected children.

Domestic Violence...

- Occurs in all age, racial, socio-economic, educational, occupational, and religious groups\(^1\);
- Occurs within an intimate relationship\(^2\);
- Typically involves repetitive behaviour encompassing different types of abuse – physical assault and sexual assault, psychological and emotional abuse (see Power and Control Wheel)\(^2,3,4\);
- Is used to intimidate, humiliate or frighten victims as a systematic way of maintaining power and control over them\(^2,3,4\);
- Is learned behaviour\(^2,3\);
- Is caused by the perpetrator, NOT by the victim nor the relationship\(^2,3\);
- Is a criminal offence when physical or sexual force, actual or threatened is used;
- Differentially affects men and women. Women experience more violence, more severe forms of violence and more serious injuries than male victims of domestic violence\(^5\);
- May present increased risk to the victim and children at the time of separation from the abuser\(^5\);
- Evokes victim behaviour that is often about ensuring survival (e.g., minimizing or denying the violence, taking responsibility for the violence, using alcohol or drugs, self defense, seeking help, remaining in the abusive relationship)\(^2,3\).
Power and Control Wheel

Using Coercion and Threats
Making and/or carrying out threats to do something to hurt her, threatening to leave her, to commit suicide, to report her to welfare, making her drop charges, making her do illegal things.

Using Intimidation
Making her afraid by using looks, actions, gestures, smashing things, destroying her property, abusing pets, displaying weapons.

Using Emotional Abuse
Putting her down, making her feel bad about herself, calling her names, making her think she’s crazy, playing mind games, humiliating her, making her feel guilty.

Using Male Privilege
Treating her like a servant, making all the big decisions, acting like the “master of the castle,” being the one to define men’s and women’s roles.

Using Economic Abuse
Preventing her from getting or keeping a job, giving her an allowance, taking her money, not letting her know about or have access to family income.

Understanding the Effects of Domestic Violence

Using Isolation
Controlling what she does, who she sees and talks to, what she reads, where she goes, limiting her outside involvement, using jealousy to justify actions.

Using minimizing, denying, and blaming
Making light of the abuse and not taking her concerns about it seriously, saying the abuse didn’t happen, shifting responsibility for abusive behavior, saying she caused it.

Using Children
Making her feel guilty about the children, using the children to relay messages, using visitation to harass her, threatening to take the children away.

Developed by the Domestic Abuse Intervention Project, 206 West Fourth Street, Duluth, MN 55806
Sadness, fear, guilt, anger, shame and confusion are often experienced.

The risk of being maltreated in childhood significantly increases if you live in a family where domestic violence is occurring. Approximately 30 to 60 percent of battered mothers’ children experience neglect, emotional abuse, sexual abuse or physical abuse.\(^6\,12\).

Children are victimized when the perpetrator uses them as part of the control tactics against their nonoffending parent.\(^3\). Examples include:

- Claiming that the children’s bad behaviour is the reason for the assaults against the non-offending parent,
- Engaging the children in the abuse of the other parent,
- Threatening violence against the children and their pets in front of the non-offending parent,
- Talking to children about the abused parent’s behaviour,
- Prolonged court proceedings about custody and access rights when the abuser has shown little previous interest in the children,
- Holding the children hostage or abducting them in an effort to punish the victim or to gain compliance.

Factors that influence how children adjust following exposure to domestic violence include:

- The nature of the violence (e.g., intensity, proximity, duration),
- The child’s characteristics (e.g., age, gender, temperament, developmental stage),
- The child’s immediate and broader social context (e.g., parent-child relationships, social connections, financial resources).

Factors that help children cope with witnessing domestic violence include:

- A strong, caring relationship with an adult (e.g., parent, relative, caregiver, and teacher),
- The availability of places the child considers to be safe – emotionally as well as physically (e.g., childcare centres, churches, and community centres).
Increased Risk for Problems

Children who witness domestic violence are at an increased risk for experiencing social, emotional and/or behavioural problems\textsuperscript{7,9,10}. These may include:

- Sleep troubles, nightmares, fear of falling asleep, restless/anxious behaviour at naptime,
- Headaches, stomach-aches, somatic symptoms, complaints of being overly tired,
- Severe separation anxiety (beyond what you would normally expect for this age group) or separation anxiety that lasts an extended period of time,
- Increased aggressive behaviour and angry feelings,
- A very high activity level, constant fidgeting,
- Constant worry about possible danger,
- Loss of skills learned earlier (such as toilet training, naming colours etc.),
- Withdrawing from friends and activities,
- Not showing feelings about anything (emotional numbing),
- Worrying a lot about the safety of loved ones (e.g., needing to see siblings during the day, asking constantly about Mommy),
- Difficulty choosing and completing an activity or task,
- Repetitive play about the violent event,
- Bullying or aggressive behaviour toward others.

A Caution: Not all children who display such problems have been exposed to domestic violence. There may be other factors associated with these symptoms. As well, some children exposed to domestic violence do not appear to experience any obvious adjustment problems.

Traumatic Stress Reactions

Among children who experience increased difficulties, there are some children who experience traumatic stress reactions\textsuperscript{10}. These may include:

- Re-experiencing aspects of the violence (e.g., repetitive playing out of violence, nightmares),
- Avoidance of reminders of the violence (e.g., may avoid males who raise their voices, shy away from conflict),
- Numbing (e.g., may not show feelings about anything),
- Increased arousal (e.g., may show strong startle responses to noise or startle easily in general, may be highly active).
## Potential Impacts at Different Ages

<table>
<thead>
<tr>
<th>Key Aspects of Development for Infants and Toddlers</th>
<th>Potential Impact of Domestic Violence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Take in information from the world around them through their senses.</td>
<td>Loud noises, vivid visual images associated with violence can be distressing.</td>
</tr>
<tr>
<td>Form secure attachment. This is the foundation for the child’s ability to regulate feelings and behaviours later on.</td>
<td>Parent may not be able to consistently respond to children’s needs.</td>
</tr>
<tr>
<td>Become more active explorers of their world and learn through play.</td>
<td>Fear and instability may inhibit exploration and play; imitating in play may be related to aggression witnessed.</td>
</tr>
<tr>
<td>Learn about social interaction and relationships from what they hear and observe in their families.</td>
<td>Learn about aggression in interactions observed.</td>
</tr>
</tbody>
</table>

### Key Aspects of Development for Preschoolers

<table>
<thead>
<tr>
<th>Potential Impact of Domestic Violence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Learning how to express aggression and angry feelings, as well as other emotions, in appropriate ways.</td>
</tr>
<tr>
<td>Think in egocentric ways.</td>
</tr>
<tr>
<td>Form ideas about gender roles based on social messages.</td>
</tr>
<tr>
<td>Increased physical independence (dressing self, etc.).</td>
</tr>
</tbody>
</table>

### Key Aspects of Development for School-aged Children

<table>
<thead>
<tr>
<th>Potential Impact of Domestic Violence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increased emotional awareness for self and others.</td>
</tr>
<tr>
<td>Increased complexity in thinking about right and wrong; emphasis on fairness and intent.</td>
</tr>
<tr>
<td>Academic and social success at school has primary impact on self-concept.</td>
</tr>
<tr>
<td>Increased same sex identification.</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>May learn gender roles associated with intimate partner abuse (e.g., males as perpetrators – females as victims).</td>
</tr>
</tbody>
</table>
Interventions for Children

Community responses to domestic violence should:
- Provide safety;
- Foster the emotional well-being of all victims;
- Hold perpetrators accountable through legal sanctions and re-education programs.

The primary need of young children is for stability and security in their day to day lives. This necessitates that their mother be safe and that they experience supportive structures and routines.

Every effort should be made to preserve children’s positive contacts with significant others (e.g., grandparents), as well as their continued participation in activities outside of the home (e.g., childcare programs, faith-related child programs).

Children benefit from opportunities to talk about or play out some of their feelings or distressing memories about violence. Some children will require support to help them regulate their emotions and behaviours. Formal supports such as family therapy or play therapy may be beneficial. These children may be most vulnerable to the harmful impact of media violence and ongoing monitoring of the material that is playing in their presence is essential.

Even if a child is receiving support from specialists, they are still in your program every day. Your supportive, nurturing relationship with the child, can make a great difference in his/her day-to-day adjustment.

You may also provide support to parents (e.g., child management strategies) and information about community resources.

Suggest that a parent seek assistance for a child when the concerning behaviour:
- Is intense enough to interfere with the child’s day to day adjustment in the program,
- Does not respond to basic child guidance strategies.
**Implications for the Childcare Setting**

**Responding to Disclosures**

Early Childhood Educators are in a position of trust. Children or parents may tell you about the violence that is happening in their home. In other situations, you may need to ASK about the violence you suspect may be happening in the home. You need to know how to handle disclosures and what to do with the information you may be told. Specifically you will need to know:

- When to call the Children’s Aid Society (CAS). Remember that if you are unsure, you can always call the local CAS to consult with them;
- The policies and procedures for your centre regarding disclosure and reporting;
- Information about services in your community that can provide support for families.

**Ways to Support Children When They Disclose**

- Allow the child to tell his/her story.
- Reassure the child by validating their feelings.
- Do not criticize or speak negatively about the abusive parent.
- Do not make commitments you cannot keep.
- Follow the child’s lead.

- Practice active listening. Do not pressure the child to talk. Remember that your role is not to gather evidence or to investigate the situation.
- Acknowledge the child’s feelings (e.g., “Sounds like that was scary for you.”). Depending on the situation, it may be helpful to let the child know that you are glad that they told you, that the violence is not their fault and that no one should be hurt. Older children may ask you to keep this secret. It is important that you explain that you may need to let people know who can help them be safe.
- Children often have confused or mixed feelings. They may hate the abuse, but like the stories or games that the abusive parent sometimes plays. If you criticize the abusive parent, a child’s feelings of loyalty and protectiveness toward the parent may cause the child to feel that they can not talk about the abuse to you.
- Statements such as “I’ll always keep you safe” or “I won’t let him hurt your Mom anymore,” may diminish a child’s trust in you and others if his/her subsequent experience indicates the statements were untrue. This may cause the child to believe that no one can help and that it’s not worth telling anyone about the violence.
- Young children have short attention spans and typically do not spend much time on one topic, even when it is about a distressing event. It is important to allow the child to say as much or as little as they need and support them to carry on with activities when they are ready.
The Survey tells us the following about intimate partner abuse:

- Spousal violence was not an isolated incident in majority of cases;
- The frequency of violence directed at women by their partners was significantly greater than the frequency of violence directed at men by their partners;
- About 40% of women in violent unions reported some form of physical injury, whereas, 13% of men said they had been injured;
- 38% of women in violent unions said the abuse or threat of abuse was so severe that they feared for their lives, compared to 7% of men in violent unions.
- The majority of spousal assault victims do not contact the police for assistance.
- Adult survivors are more likely to seek help if children see spousal abuse.
The Survey tells us about the children exposed to this violence:

- It is estimated that 461,000 children saw or heard spousal violence in the 5 years preceding the survey.
- About 70% of children who witnessed spousal violence saw or heard assaults against their mothers.
- In half of all cases where a child heard or saw their mother’s victimization, the woman had been subjected to a threat or an attack so severe that she feared for her life or was physically injured.

Results from the Transition Home Survey* conducted on April 17, 2000, in Canada indicated that:

- About one-half of women who took their children to shelters in Canada were protecting them from witnessing the abuse of their mother, 39% were protecting the child from psychological abuse, 18% from physical abuse, and 5% from sexual abuse;
- Children under age 5 make up the largest proportion of children in shelters in Canada.
**Safety Planning**

**Pick up Arrangements**
- It is essential that you know who can pick up the child and who cannot. You may need to check the child’s file on an ongoing basis to ensure that plans have not changed. (This will depend on how information is shared in your setting.)
- Have a plan in the event a parent who is not allowed attempts to pick up a child (e.g., who will stay with the child, who will call the police, who will explain to the parent that the police have been contacted).
- Copies of court papers need to be on file in order to stop a non-custodial parent from picking up the child. You may need to explain this to the mother and encourage her to seek legal counsel in cases where court documents identifying which parent is the legal guardian and/or issues of access to the child do not exist.

**Safety Education**
- Many early childhood education programs provide general safety education for children. This information is helpful to a child who may be exposed to domestic violence. It is important to stress that children should never be made to feel responsible for their own safety nor that of family members.
- To teach children to phone for help, you should have them practice how to call an emergency number and to give their address and phone number. This can be done with individual children, or can be taught in a more generic way to all children. For example:
  
  Dial 9-1-1.
  
  The person answering the phone will say “Police, Fire, Ambulance”
  
  You say ____________
  
  Then you say: “My name is ________________
  
  “I need help. Send the ____________
  
  Tell the problem (e.g., “Our house is on fire”, “Someone is being hurt”)
  
  Tell where you are: “I live at ________________
  
  “My phone number is ________________

A Caution: There are situations where you may be asked to NOT teach this information to a particular child. For example, sometimes, it is not safe for the child to know his/her address because this information may be relayed to the offending parent and the safety of other family members may be compromised.
**Parent Attended Events**

- Most childcare programs host events where parents are encouraged to attend. For families where domestic violence is occurring, a difficult and delicate balance must be reached in planning these events that recognizes parental rights while taking safety issues and the child’s best interests into account.

- If court documents are on file that indicate one parent does not have access to the child, the question of which parent should attend the event may be easier to answer. A more challenging situation arises when a parent continues to have parental rights and responsibilities for a child, but there is a restraining order preventing this parent from having contact with the child’s other parent. These situations may cause conflict about which parent will attend. Possible solutions may include:
  - Parents taking turns attending events,
  - Conducting two, separate events.

- Be aware that in some cases, abusive partners may try to use such situations to continue to manipulate and control the victim.

- Ultimately, supervisors and directors of programs have the authority to make difficult decisions that protect children in the program as part of their overall mandate to create safe and caring environments.

**When a Mother and Her Children Are Living at a Shelter**

A child in your program may move to a shelter with his/her mother. You may also have children join your program because they have recently moved to the shelter in your neighbourhood. There are ways you can support children and mothers with this transition.

- Provide stability and consistency. Ask the mother, and with her permission, ask the shelter staff about what the child’s particular needs may be at this time. Communicate with the mother on a regular basis – ensuring that you are sharing the positive aspects of the child’s day as well as any concerns.

- Cooperate with the safety plan that may have been developed in conjunction with the non-offending parent. In some cases, children will have been helped to develop a plan for what to do if the abusive partner comes to the centre. It will be important for every person at the centre to be aware of this plan. This may involve protocols established with the shelter and police for crisis situations (e.g., hostile parent without visitation rights demands to see the child).

- Be aware of any centre policies and procedures in case a crisis situation occurs. Policies that include procedures for dealing with these difficult and distressing situations are helpful (e.g., Who will call the police? Who will stay with the child? Where will the child be taken until the police arrive?). The goal is to maximize the safety and minimize the emotional distress of children, parent(s), and centre staff.
## Strategies for Behaviours That May Be Associated with Exposure

<table>
<thead>
<tr>
<th>Time/Routine</th>
<th>Behaviour</th>
<th>What Might Help</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Drop off</strong></td>
<td>Severe separation anxiety</td>
<td>➤ Approach parent to offer help. Do not wait for parent to approach you.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>➤ Plan for future separation by making a pictorial plan of steps for separation with the child (e.g., arrive at the centre, hang up coat, go to classroom, find teacher, give mom 2 hugs and 2 kisses, wave goodbye, mommy will pick you up after playtime/outside/after lunch).</td>
</tr>
<tr>
<td></td>
<td></td>
<td>➤ Keep child with you. Do not rush or push child to find an activity. Child needs to feel secure and build a connection with one caregiver at a time. Over time the child will build relationships with all caregivers.</td>
</tr>
<tr>
<td><strong>Play time</strong></td>
<td>Wandering aimless behaviour</td>
<td>➤ Help child find an activity and master it (e.g., piling and knocking down blocks). This helps give child a sense of control over the environment.</td>
</tr>
<tr>
<td></td>
<td>Need to see siblings</td>
<td>➤ Set times for siblings to be together. Provide a concrete reference point for the child (e.g., after nap time). Make sure you follow through on this as it will build trust. Set limits for length of visit (e.g. until snack time).</td>
</tr>
<tr>
<td></td>
<td>Re-occurring violent play themes</td>
<td>➤ Do not judge or try to shut down child. Listen, watch and comment on how child might feel. In some situations you will have to intervene to ensure safety of child and others.</td>
</tr>
<tr>
<td></td>
<td>Controlling/bullying play</td>
<td>➤ Validate feelings and set clear limits about what behaviours are “okay” and “not okay” (e.g., “I know you are angry, but it is not okay to hit; Let’s...”).</td>
</tr>
<tr>
<td></td>
<td></td>
<td>➤ Model and teach children problem solving and conflict resolution skills at their level.</td>
</tr>
<tr>
<td><strong>Group time</strong></td>
<td>Inattention</td>
<td>➤ Help the child have a positive group experience by: keeping activities short; sitting the child close to an adult; praising all attempts to attend; following the lead of the child; discussing topics of interest to the children.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>➤ Use age-appropriate violence prevention activities in program (e.g., No violence = Good Health).</td>
</tr>
<tr>
<td>Time/Routine</td>
<td>Behaviour</td>
<td>What Might Help</td>
</tr>
<tr>
<td>--------------</td>
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<td>-----------------</td>
</tr>
</tbody>
</table>
| Transitions  | Unfocused, avoidance behaviour (avoid tidying up, running around), poking others, increased movement, fidgeting | ✤ Cue children about upcoming transitions both individually as well as in group.  
✤ Make a chart of pictures outlining the daily schedule and refer to it often.  
✤ Draw on a piece of paper what the clock will look like and have the child who has difficulty with transitions tell you when it is time to cue the group about the upcoming transition. |
| Nap time     | Anxious behaviour (fidgeting, excess movement, defiance about settling on cot or getting on cot) | ✤ If possible, do not have the child nap. Provide “awake-room” for those who do not need to sleep.  
✤ Turn nap time into a positive, nurturing time by having the child cuddle with you on your lap (even while you rub the backs of other children).  
✤ Have the child join naptime after most of the other children are asleep. This will allow you time to support this child.  
✤ Do not demand sleep. Use this time as a chance to nurture and reassure the child that they are loved, valued and safe.  
✤ Keep nap time positive. Do not use threats (e.g., “If you can’t lie still, I’ll take away your stuffed toy until after nap time.”).  
✤ Encourage use of transition objects (e.g., stuffed toys, blankets, bottles, cups, even when children are older). |
| Departure    | Refusal/delay to leave once parent has arrived, anger toward parent, ignoring parent, crying (even if child has been fine all day) | ✤ This does not always mean that the child is afraid to go home. It may have more to do with difficulty the child is having with loss of control or change in activity (e.g., Child may not be done playing or may need to spend some time sharing with the parent what they did during the day.).  
✤ May indicate a close bond with parent rather than a problem. We often let our loved ones see us at our worst. |
When You Need to Report

Report to the Children’s Aid Society (CAS) when:

- Child maltreatment/child abuse is suspected – includes neglect, emotional, physical or sexual abuse (e.g., ask child if she/he is being hurt, or base your decision on information the child or parent has already disclosed);

- Extreme and/or compelling risk to child or another is indicated;
  - Imminent harm to someone (e.g., specific threat to kill and a recent purchase of a weapon),
  - Escalating risk (e.g., existing situation where recent change may signal increased danger, such as the victim attempting to leave),
  - Ongoing domestic violence situation but change in parent’s capacity to protect self and/or child (e.g., change in substance abuse pattern).

- If unsure, consult with the local CAS.

Identify who is responsible for filing the report.

- In Ontario, the person receiving the disclosure is mandated to report the suspicion of abuse to the CAS.

This is not meant to turn you into child protection workers nor law enforcement officers, but it is meant as a guide to help you recognize when to make reports to appropriate authorities, in a professional and helpful fashion.
When You Need to Report

Identify what information should be recorded and how it is documented.

- Know your internal policies and procedures regarding making the report, (e.g., consulting with your supervisor/director of the centre prior to calling the local CAS, how the report is documented, where reports are filed). Keep in mind that “less is better” when it comes to documentation because this information may be accessed by the abusive parent and may increase the risk to the child and non-offending parent.

Talking to the non-offending parent.

- Find a safe time and place to talk. Do not phone the parent at home when her partner is likely to be there nor leave a message to call the centre. It may be easier to set up an appointment when she comes to pick up her child from the centre. Do not do this if her partner is present.

- Share your concerns from the perspective of her child’s adjustment in the childcare program.

- Even if there is not a need to contact the CAS, it may be very difficult for a parent to hear that her son or daughter has let someone know about the abuse. The parent may be worried about increased safety concerns the disclosure may bring and may respond to you with anger or denial. It is important that you remain supportive. If you do need to contact the CAS, explain that you do not have a choice - you are mandated to call.

- Most adult victims want to and have tried to protect their children.

Encourage the adult victim to contact the local shelter for support. Reassure the victim that you will not speak with the alleged abuser about the child’s disclosure.

- Provide the parent with contact phone numbers. Experienced shelter staff are in a position to advise the woman on additional safety measures (e.g., contacting police, restraining orders). Offer the parent the opportunity to use your phone. Remember that this may take time. Remain supportive regardless of the choices this parent makes about leaving the perpetrator.
Community Support

You Are Not Alone

- Early Childhood Educators want to help. Hearing about some of the abuse that mothers and their children have experienced can be traumatic. When we are traumatized by learning of another’s traumatic experience, we call it “vicarious trauma.” We may experience trauma symptoms such as anxiety, a sense of hopelessness or intrusive thoughts that parallel the experiences of the trauma abuse victim.

- It is essential that Early Childhood Educators find ways to deal with the stress that supporting others in crisis situations sometimes brings. Talking to others in a professional and confidential manner will help you to debrief and deal with difficult situations.

- Exercise and self-care practices are also effective ways to prevent or cope with vicarious trauma.

Links Between Childcare Centres and Other Agencies

- Building relationships with shelters, legal advocacy programs, counselling services and violence against women prevention agencies will be beneficial.

- These links help address gaps that can exist in the broader system and enable you to provide accurate referral information to mothers about resources.

- Working relationships and protocols between centres and shelters will make consultation regarding the needs of the children easier. Personnel working at shelters are an excellent source of support, information and advice.

- In many communities there are local coordinating committees that focus on violence against women, that may offer opportunities for more networking. There may be sub-committees focused on the needs of children.

In Ontario, the percentage of female spousal violence victims who contacted a social service for help increased in the past 5 years, although there was a decline in the rate of spousal assault during this period. It would appear that more abused women are seeking help earlier, often for the sake of the children. The resulting decline in violence may be related to violence prevention programs, coordinated interagency referrals, and changes in societal attitudes that recognize wife assault as a crime.
Organizations That Help in Ontario

Fill in Contact Numbers for Your Community

Resources for Adult Victims and Children

<table>
<thead>
<tr>
<th>Organization</th>
<th>Phone # is</th>
</tr>
</thead>
<tbody>
<tr>
<td>Women’s Shelter</td>
<td></td>
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<tr>
<td>Violence Against Women Prevention Agency</td>
<td></td>
</tr>
<tr>
<td>Family Counseling Agency</td>
<td></td>
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<tr>
<td>Children’s Aid Society</td>
<td></td>
</tr>
<tr>
<td>Victim/Witness Program</td>
<td></td>
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<tr>
<td>Hospital</td>
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<tr>
<td>Police</td>
<td></td>
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<tr>
<td>Cultural/Linguistic Interpretation Services</td>
<td></td>
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<tr>
<td>Legal Aid</td>
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</tbody>
</table>

Resources for Perpetrators of Violence

<table>
<thead>
<tr>
<th>Organization</th>
<th>Phone # is</th>
</tr>
</thead>
<tbody>
<tr>
<td>Re-education Programs</td>
<td></td>
</tr>
<tr>
<td>(Offered through corrections, social services or health agencies)</td>
<td></td>
</tr>
</tbody>
</table>

Domestic Violence Organizations

Aboriginal Healing & Wellness Program (AHWS)
Tel. (416)326-6905  website www.gov.on.ca/CSS

Barbara Schlifer Clinic
Suite 503, 489 College Street, Toronto, Ontario M6G 1A5
Tel. (416)323-9149  email general@schliferclinic.com

Centres for Research on Violence Against Women and Children in Canada

Centre for Research on Violence Against Women and Children
254 Pall Mall Street, Suite 101, London, Ontario N6A 5P6
Tel. (519)661-4040  Fax (519)850-2464  email nshanahan@uw.ca

CRI-VIFF, Ecole de Service Social Universite de Montreal
3150 Jean-Brillant, Montreal, Quebec H3T 1N8
Tel. (514)343-7391  Fax (514)343-2185  email rinfretm@ERE.UMontreal.ca

Feminist Research, Education, Development and Action Centre (FREDA)
sfu AT Harbour Centre, 515 Hastings Street, Vancouver, British Columbia V6B 5K3
Tel. (604)291-5197  Fax (604)291-5189  email freda@sfu.ca

Muriel McQueen Fergusson Centre for Family Violence Research
676 Windsor Street, Fredericton, New Brunswick E3B 5A3
Tel. (506)453-3595  Fax (506)453-4788  email frc@unb.ca

RESOLVE (Research & Education for Solutions to Violence & Abuse)
108 Ibister Bldg., University of Manitoba, Winnipeg, Manitoba R3T 2N2
Tel. (204)474-8965  Fax (204)474-7686  email resolve@cc.umanitoba.ca

findhelp Toronto - Guide to Services for Assaulted Women (for all of Ontario)
Tel. (416)397-4636  Community Helpline (416)397-3777  email questions@cominfo.org

Ontario Women’s Directorate
Mowat Block, 6th Floor, 900 Bay Street, Toronto, Ontario M7A 1L2
Tel (416)314-0300  email info@mczcr.gov.on.ca  website www.gov.on.ca/mczcr/owd/

METRAC (Metro Action Committee on Violence Against Women and Children)
158 Spadina Road, Toronto, Ontario M5R 2T8
Tel. (416)392-3135  email metrac@interlog.com  website www.metrac.org

Ontario Association of Interval Houses (OAITH)
2 Carlton Street, Suite 1404, Toronto, Ontario M5B 1J3
Tel. (416)977-6619
Resources


References