Child witnesses of intimate partner violence: Identifying the roles they have and understanding the situations in which they are present.

A thesis

submitted in fulfilment

of the requirements for the degree

of

Master of Social Sciences in Psychology

at

The University of Waikato

by

Rebecca Thompson

2022

THE UNIVERSITY OF
WAIKATO
Te Whare Wānanga o Waikato

Abstract

Witnessing intimate partner violence (IPV) can have serious psychological, behavioural, cognitive, and somatic impacts on children, and yet they continue to be present in over half of all New Zealand Police call outs for IPV. This exploratory research consisted of two studies using archival data. Study 1 was a qualitative exploration of the roles that children have when they witness IPV. Using thematic analysis, 100 police reports were examined to identify the key themes in the data, and then typologies of roles were developed from the identified themes. Results showed that there were three key roles of children during IPV: protector, pawn, or collateral damage. Study 2 was a quantitative analysis of 356 episodes of IPV again involving police calls for service—178 where children were present and 178 episodes with no children present. Descriptive analysis of the child-present group showed that in nearly half of all episodes, the role of the child was not known due to lack of information in the police report. Binary logistic regression comparing the child-present and non-child-present samples across a series of relevant variables showed that aggressor gender, the presence of physical harm and episode location were significantly predictive of the presence of children. Given the limited information regarding the presence of children, further qualitative research is needed in order to understand the experiences of children, as well as gain the perspectives of aggressors, victims and also frontline police workers attending IPV events.

Keywords:

Intimate partner violence, children, family harm

Acknowledgements

First and foremost, I want to thank my incredible supervisor, Professor Devon Polaschek. I am so grateful to have had such a supportive, experienced, knowledgeable, and genuinely caring supervisor. You've had such a profound impact on me, both academically and personally and I will never forget the encouragement, guidance and care you have given me.

A massive thank you to Apriel Jolliffe Simpson, my research hero! I appreciate how generous you were with your time – always willing to help me make sense of things (particularly statistics!) and offer advice or reassurance.

Thanks also to the other students in the NZISCS lab who were willing to bounce ideas around, share experiences and occasionally distract one another with idle chatter. To NZ Police and the ISR pilot for access to data, without which this thesis would not have been possible.

To my long-suffering partner Jared – your ongoing support in maintaining the life admin while I was focussed on my study has been monumental. The long nights and mental hurdles were only endurable because you were at my side, and I am beyond grateful that you are in my life.

Finally, Mum, Dad and Carly – Thank you for always believing in me even when I don't necessarily believe in myself. I am where I am because of your encouragement, and I am so proud of all we have achieved together despite our adversity. I love you.

This thesis is dedicated to my sister, Sasha. Thank you for reminding me the importance of chasing my dreams. I miss you.

“The voice in your head that says you can’t do this…. is a liar”

Table of contents

List of Tables and Figures

Table

Figures

Introduction

Imagine growing up in a home where one of your parents was physically, emotionally or psychologically abusive towards the other. That is the reality for many New Zealand children who live in homes where Intimate Partner Violence (IPV) is occuring. Unfortunately, very little is known about the presence or involvement of children when IPV is happening This thesis will take a preliminary look at the circumstances surrounding IPV events where children are present, and the involvement of children in those events.

IPV is defined as any form of physical, psychological or sexual harm perpetrated by one member of a current or previous intimate relationship against another (Wood & Sommers, 2011). IPV occurs at disturbingly high rates worldwide (Howell, 2011). In the USA, 1 in 3 women and 1 in 10 of men will experience IPV in their lifetime (Black et al., 2011). Australian rates show that 1 in 6 women and 1 in 16 men experienced physical or sexual violence from an intimate partner, and 1 in 4 women and 1 in 6 men experienced emotional abuse (Australian Institute of Health and Welfare, 2019). Initial studies in New Zealand gave estimated rates similar to those overseas, with 1 in 4 women and 1 in 6 men experiencing physical, sexual, or emotional abuse (Morris et al., 2003). However, more recent research suggests that the rates for women are significantly higher than this, two studies showing that *half* of all New Zealand women will experience some form of IPV in their lifetime, and nearly 1 in 3 will have experienced it in the past year (Fanslow et al., 2021; Fanslow & Robinson, 2011). This disparity is likely due to the fact that 69% of IPV in New Zealand goes unreported to Police (Ministry of Justice, 2021).

Despite significant underreporting of IPV, it still takes up a substantial amount of police time and resources. Family harm episodes make up 20% of total police calls and account for 40% of total police time (Lambie, 2018). Of the aforementioned family harm episodes, the majority (two thirds) are IPV (Jolliffe Simpson et al., 2021). These statistics

demonstrate not only how widespread and prevalent IPV is, but also the amount of time and resources it consumes.

Of particular concern is the presence of children in homes where IPV is occuring. In New Zealand, children are present for approximately 50% of IPV callouts for police (Murphy et al., 2013). In a survey of over 9000 NZ high school aged children, almost half indicated that they had witnessed verbal violence between adults in their home, and 10% indicated that they had witnessed physical violence between adults in their home (Clark et al., 2009). The same survey, conducted in 2001 found similar statistics regarding verbal violence, but only 5.6% of students had reported witnessing physical violence between adults (Fleming et al., 2007). The difference between these two surveys means that the number of children witnessing physical violence in their home almost doubled in the space of 6 years. This rising number of children who have been exposed to violence is alarming, particularly when taking into consideration the numerous negative impacts it can have.

Impacts of IPV on Children

Although early research focussed primarily on the impacts on children when they were the *victims* of family violence (Briere & Runtz, 1988; Malinosky-Rummell & Hansen, 1993), a growing body of research has identified that exposure to violence either as a witness or through seeing the aftermath can have significant detrimental impacts on children. In fact, some research suggests that the detrimental impacts of exposure to IPV can be just as significant for children as if they were the victims of the violence themselves (Copeland et al., 2018; Jaffe et al., 2000; Saltzman et al., 2005).

Behavioural Impacts

Many studies have utilised standardised measures such as the Child Behaviour Check List (CBCL, Achenbach & Edelbrock, 1983) to identify the behaviours most likely to be demonstrated by children who have witnessed IPV. In New Zealand, children exposed to

IPV were 2.36 times more likely to demonstrate overall behavioural problems than those not exposed to IPV (Paterson et al., 2008). The most commonly discussed behavioural problems in research were those directed *outwards* towards others and are referred to in the CBCL as externalised behaviours. For example, children who witnessed both physical and verbal violence were more likely to demonstrate attention seeking, rule breaking and aggressive behaviour than children who came from non-violent homes (Fantuzzo et al., 1991; McFarlane et al., 2003; Sturge-Apple et al., 2012). For some children, these aggressive and defiant behaviours can become more pervasive, with research showing an association between exposure to IPV and the development of behavioural disorders such as conduct disorder and oppositional defiant disorder (Boden et al., 2010).

Given the aggression demonstrated by children who have witnessed IPV, and the potential for it to become a pattern of behaviour, it is a logical step for researchers to then ask whether children exposed to IPV can go on to be perpetrators of IPV themselves. Some studies have shown that men who had witnessed IPV as a child committed the most frequent IPV against their partners (Murrell et al., 2007), which does seem to imply that there is a link between exposure to and future perpetration of IPV. However, it is more likely that there are also other contributing factors to this, such as psycho-social conflicts that often go hand-in-hand with IPV (Fergusson et al., 2006).

The second type of behaviours identified as problematic following exposure to IPV are those directed *inward*, resulting in changes in how children feel about themselves and the world. These are referred to in the CBCL as internalised behaviours. For example, children who had come from homes where violence was present were more likely to be rated highly on the CBCL for anxiety and depression than children who came from non-violent homes (Fantuzzo et al., 1991; Graham-Bermann & Levendosky, 1997; McFarlane et al., 2003). Children are also more likely to be socially withdrawn if they have been exposed to IPV (Knapp, 1998).

Whilst the CBCL allows parents to report behaviours that appear to be internalised, it does not necessarily reflect children's true emotional states because it relies on third hand information. To investigate children's emotional states, researchers interviewed children directly and used self-report measures (such as the Coopersmith Self-Esteem Inventory) to gain children's first-hand perspectives. Findings showed that children who had been exposed to IPV reported being lonelier and having lower self-esteem than children from non-violent homes (Grych et al., 2000a; McCloskey & Stuewig, 2001).

Physical and Somatic Impacts

Being exposed to IPV doesn't just have behavioural impacts on children, there are also several somatic impacts. Studies have shown that children exposed to IPV were considerably more likely to experience eating/digestive problems such as over or under eating, nausea, or constipation (Knapp, 1998), sleep problems such as over or under sleeping, nightmares or bed wetting (Knapp, 1998; Lamers-Winkelman et al., 2012), pain complaints such as headaches, stomach pain or dizziness (Fantuzzo et al., 1991; McFarlane et al., 2003), or chronic illness (Olofsson et al., 2011).

Research also investigated the physical impacts of IPV exposure on a deeper level and found that children from violent homes showed physiological hyper arousal. Specifically, children exposed to IPV had, on average, more elevated heart rates and higher salivary cortisol levels than those children with no exposure (Saltzman et al., 2005). These symptoms are often found in children who have experienced trauma and is consistent with other research suggesting that witnessing IPV is traumatic and can lead to lasting physiological changes for children (Levendosky et al., 2002; Spilsbury et al., 2007).

Cognitive Impacts

There are two main ways that children are cognitively impacted by IPV. The first is the impact that exposure to IPV has on children's cognitive *functioning.* Findings suggest that

children exposed to IPV had IQs that were, on average, 8 points lower than children who had not been exposed (Koenen et al., 2003; Ybarra et al., 2007).

The second cognitive impact on children is on how they think about, interpret, and understand the world around them. Children from homes where IPV was present had significantly different internal representations of adult conflict (Lawson et al., 2020), less positive mental representations of the parent who was the victim (Cater & Forssell, 2014; Stover et al., 2006), and showed less understanding of what was taking place during emotional or conflict situations (Grych et al., 2000b). Children who had been exposed to violence were also more likely to have more "proviolent attitudes" and higher appraisals of the acceptability of violence (Jaffe et al., 1988). Carlson (2000) gave the example of a three-year-old boy who hit his mother when he could not get her attention, and when asked why he hit her, he replied "Daddy does it". This example demonstrates that children may sometimes process and understand violence as something that is not only acceptable in society but normal, because of their exposure to it (Delsol & Margolin, 2004; Peled, 1998; Stith et al., 2000; Wareham et al., 2009).

It is clear that the detrimental impacts of witnessing IPV on children are extensive, and therefore understanding how and why they find themselves in these situations is vital so that we can come closer to helping prevent it. In order to further explore the ways that children become involved, we need to first look at IPV from a different angle.

IPV as a Crime Event

Traditional theories on crime have generally focussed on people who commit crimes, attempting to more deeply understand "what makes a person become a criminal?". However, this approach doesn't sufficiently consider the wider contexts in which crime occurs. An alternative is crime-event theory, which is an umbrella term for several theories and approaches that view the person committing the crime as only one piece in a far more complex puzzle. They take into consideration the aspects of the environment in

which the crime occurred, the characteristics of the victim that may have contributed to why they were targeted and how these all came together to provide opportunity and incentive for the crime to be committed (Wilcox & Gialopsos, 2014). Examining IPV as a crime event may be a useful way to understand more about the circumstances in which IPV occurs, in turn potentially revealing insight into the presence of children.

One study used a subset of crime-theory, script analysis, to understand patterns of behaviour and develop a 'proto-script' for male-on-female IPV incidents. Boxall et al. (2018) proposed that when a male-female couple have certain historical preconditions such as a history of violence or a relationship breakdown, this creates a vulnerability for IPV to occur. The interaction always begins with the aggressor and victim coming into contact with one another (i.e., being in the same space). When a conflict arises, there are several situational pre-conditions that can impact how the conflict progresses. Particularly if the couple are intoxicated, or if there are heightened emotions, this can increase the likelihood that the interaction will reach a "tipping point" at which point the interaction becomes violent. The authors note that in a large majority of the episodes, the "tipping point" was the real or perceived reaction of the victim to the words and actions of the aggressor. If the aggressor felt as though the victim had challenged them in some way (e.g., by ignoring them, talking back to them, or yelling back), this was the point at which the interaction became violent.

IPV events should also be examined beyond the crime script at the time of the event, to identify the wider environmental and historical circumstances that were the foundations for the event occuring. Stairmand et al. (2019) created an event-process model of IPV, which consisted of four sections – background factors, event build-up, the IPV event and post-event. The background factors identified by the authors related to the background of the aggressors and included adverse childhood experiences, the development of schemas about violence, and maladaptive ways of relating to others. The event build-up section

related to the history of the relationship between the aggressor and victim and included incompatible communication or conflict resolution strategies within the dyad, insufficient emotional regulation or coping strategies of either party in the dyad, and environmental stressors such as moving house or financial difficulties. The IPV event section related to the process of the event itself and included an intial evaluation by one party regarding inappropriate behaviour on the part of the other, conflict escalation resulting from poor conflict resolution strategies and then activation of a crime script. Finally, the post-event section related to the aftermath of the IPV event and included each parties evaluation of the IPV event and possible consequences such as separation or police and service involvement.

The above event models of IPV start to build a picture of the environment and circumstances that can lead to IPV events taking place. However, we know that it is not always just aggressor and victim who are present during these episodes. But there is very little relevant research on IPV events whether there are people present other than the couple themselves. To find relevant research on this issue we first turned to the bystander literature, and then to research specifically on the presence of children.

Bystanders in IPV

The presence of others is a whole other dimension of the IPV event. Despite IPV often being thought of as something that happens “behind closed doors”, research estimates that 1/3 of IPV episodes are witnessed or overheard by other people (Planty, 2002; Taylor et al., 2019; Yoshihama et al., 2021). Studies show that the presence of other people has the potential to change the course of events through the intervention of those bystanders who may contact authorities, remove the victim from the scene or even physically come between the aggressor and the victim. They may also change the course of events in more passive ways; the aggressor may behave differently if they know they are being observed, for example.

The vast majority of the research regarding the presence and involvement of bystanders focusses primarily on adult bystanders and the factors that influence their choice to intervene (Frye, 2007; Pagliaro et al., 2020; Palmer et al., 2016). Factors such as the age and level of education of the bystander can influence them, with older and less educated people more likely to intervene (Wijaya et al., 2021). The relationship between the victim and the bystander was also a contributing factor. People were more likely to intervene if the victim or aggressor was someone they knew, than if it was a stranger (Lazarus & Signal, 2013), and the likelihood of intervention increased with the closeness of the relationship (Palmer et al., 2016). The perceived level of danger, fear for their own safety and levels of self-efficacy also contributed to whether bystanders intervened (Lazarus & Signal, 2013). The set of social norms or beliefs by which bystanders make sense of and judge the aggressor, victim, their relationship, and the circumstances surrounding the episode itself are also a driving force behind bystanders' reactions (Frye, 2007; Pagliaro et al., 2020). One example of the social interpretations of IPV episodes is blame allocation. Bystanders who believed that the victim was 'responsible' for the incident (for example, if the altercation was in relation to the victim's infidelity) were less likely to intervene. Similarly, bystanders who believed that the aggressor was 'responsible', were more likely to intervene (Penone & Spaccatini, 2019; Wijaya et al., 2021)

The above research is relevant to this thesis in that it explores why adults *actively choose* to intervene in IPV and therefore provides a platform from which to start thinking about how children's thoughts and choices may be similar or different. However, asking *why* children become involved in IPV is somewhat premature given the limited research available on *how* they are involved, particularly when we consider that not all children choose to intervene (i.e., have active involvement); some children might be involved involuntarily (i.e., have passive involvement). It is therefore beneficial to further explore some of the factors related to the presence of children in IPV and how those children may become involved, both actively and passively.

Children's Involvement in IPV

The most prominent feature of research regarding children's involvement in IPV is the *limited* research on aspects outside of the impacts on children. Only a handful of studies have investigated the ways in which children are involved in IPV; for example, if they are passive bystanders or take more of an active role. Within those studies, researchers identified several types of involvement. Firstly, some children were described as being "caught in the cross-fire" of IPV events (Stanley et al., 2010). Being caught in the crossfire can take multiple different forms, including infants being grabbed out of an adult's arms (Peled, 1998), mothers being attacked whilst holding an infant in their arms (Stanley et al., 2010), or an aggressor hitting a child accidentally when attempting to punch a victim (Mittal & Carrington, 2012). Studies also made note of children's emotional reactions to IPV events, describing children as frightened, crying and visibly upset (Stanley et al., 2010). Even when children are not actively involved, they are still often emotionally invested in the events taking place around them.

Secondly, children can have more active involvement in IPV events. These roles include shouting at the adults to stop (Peled, 1998), physically intervening (Edleson et al., 2008), running away or hiding (Edleson et al., 2008; Hamby et al., 2011), gathering and comforting siblings (Mittal & Carrington, 2012), or calling police for help (Fantuzzo et al., 1997). Children may also actively avoid and ignore the incident altogether. In Peled's (1998) study, children described listening to headphones or watching TV to try and distance themselves from what was happening in their environment.

Finally, in multiple studies, children were identified as one of the factors contributing to the IPV event occuring. For example, in some cases the event began as a disagreement regarding a child's illness, whether or not to give the child lunch money or attention being given to the child (Fantuzzo et al., 1997). Other examples included a couple arguing over a child, sometimes even physically holding one of the child's arms each and refusing to let

go (Peled, 1998). Although being the subject of an altercation is not a direct form of involvement, it does demonstrate the ways in which the presence of a child can impact the crime event.

Identifying some of the roles and reactions of children during IPV events is a significant part of developing a deeper understanding of children's involvement in IPV, but it is stilll only one aspect of the crime event. It is also important to explore the wider characteristics of the events themselves where children are present.

Characteristics of Children's Presence in IPV

Much like the research regarding the roles of children in IPV, there is minimal existing research into the characteristics of IPV events where children are present. The research that does exist can be separated into three main categories – demographic, child, and event characteristics.

Demographic characteristics

Fantuzzo et al. (2007) used data collected by law enforcement officers during call outs for domestic violence events to investigate the nature of both the violence and the children's presence. They found that episodes where the victim was non-white, where the couple were married or co-habiting or episodes that occurred in neighbourhoods experiencing poverty were all associated with a greater likelihood of children being present.

Child characteristics

Fantuzzo & Fusco (2007) found that 92% of children involved in domestic violence episodes were the children of the victim. They also found that 58% of the children involved in domestic violence episodes were younger than 6, which they noted as significant given that census data showed that children were younger than 5 in less than 30% of homes in the general public. Later research by Stanley et al (2010) found similar

statistics, with 57% of children involved in IPV events being under the age of 6 and 92% of children being the child of the victim.

Event characteristics

There have also been studies that have identified characteristics about the IPV events themselves, which are associated with a greater likelihood that children were involved. IPV episodes where there had been drug or alcohol use by the involved parties (Fantuzzo & Fusco, 2007; Sharman et al., 2019; Stanley et al., 2010), where the aggressor was arrested after the offense (Fantuzzo et al., 2007), where there was a mutual assault (Fantuzzo & Fusco, 2007), where physical injury to the victim occurred (Fusco & Fantuzzo, 2009), or where a weapon was used (Fantuzzo & Fusco, 2007; Stanley et al., 2010) were more likely to have a child present.

The minimal amount of research in both the roles of children and the characteristics of IPV events where children are involved demonstrates the need for further research in this area. The research conducted in this thesis aimed to begin filling in some of the gaps in our knowledge surrounding children's invovlement and also lay the foundation for ongoing research in this much needed area of study.

Current Research

This thesis was part of a larger study at the University of Waikato, (Jolliffe Simpson et al., 2021) that utilised archival data from the Integrated Safety Response (ISR). ISR is a multiagency family harm intervention spearheaded by the New Zealand Police, which has its own specialised database (the Family Safety System, or FSS). It consisted of two separate studies, the details of which are outlined below.

Study 1

Previous studies have identified a handful of patterns in the way children become involved in IPV events, but have not yet identified identifiable categories. Therefore,

Study 1 posed the research question: "*What roles do children have when they are involved in IPV events in New Zealand?",* and aimed to gain more understanding of the involvement of children in IPV events in New Zealand by identifying a typology of roles. This first study was comprised of a qualitative investigation of police narratives for IPV events.

Study 2

Whilst some variables related to the presence of children have been explored in research, there is still much to be learned about the event and wider family characteristics associated with the presence of children in IPV. Therefore, the second study posed the research question: *"How are IPV events where children are involved different to those where children are not involved?",* and was a quantitative examination of characteristics of IPV events where children are involved. This second study comprised of coding several variables related to the IPV events – including variables related to the aggressor, victim, environment, and children – then, both describing the sample and using regression analyses to predict the presence of children using those coded variables.

Data Sources

The raw data were collected from the ISR database, FSS, by Apriel Joliffe-Simpson (Jolliffe Simpson et al., 2021), as part of her PhD research. The raw data were made up of all family harm events (referred to in NZ Police records as "episodes") attended by police between 1 November and 31 December 2018, in Waikato and Christchurch (these are the areas where the ISR intervention is currently in place). The data were comprised of two main sources: Police reports and ISR case notes recorded after ISR triages the call, assesses the risk and plans the response that will be offered.

Police Reports

These were the reports completed by the attending officers directly after attending the episode. The reports consisted of the following sections:

Person Characteristics

Basic identifying information about the people involved included the name, age, ethnicity and gender of the victim and aggressor. The relationship between the victim and aggressor, whether there were children involved and information about other people present (such as witnesses) were also included.

Episode Characteristics

Basic information about the episode was recorded, including the date it occurred, when it was reported to police, who reported it, the address at which it occurred (and whether it was in a public place or a private dwelling), the types of harm present (physical, sexual, verbal, or threats), whether property damage had occurred, and police codes (classification codes used by police to identify the type of callout or offence). Information about the circumstances surrounding the episode was also recorded, including whether drugs or alcohol had been consumed by people present prior to the call or if firearms were present.

Episode Narrative

The attending officers then gave a description of the events of the episode in a free text field. This information varied but generally included the context in which the episode occurred such as the nature of the perpetrator and victim's relationship, what triggered the event according to the parties involved, accounts from the victim, aggressor and witnesses about the events that took place, evidence sighted by police at the scene, how

the parties involved responded to police presence, police responses to the episode (e.g. making an arrest, escorting a victim to a safe location) and any police recommendations.

Static Assessment of Family Violence Recidivism (SAFVR)

The SAFVR is an actuarial risk assessment measure that predicts how likely a person is to commit family violence related offence within the two years following the date of calculation (New Zealand Police, n.d). It is calculated accounting for information such as gender, age (at the time of current offence and also index family violence offence), previous family violence offences (how many they have had and if they have had one in the past year) and other offences (how many prior offences of any type, whether they have a prior conviction or a prison sentence of 30 days or more) and the number of prior breaches. The SAFVR score is updated daily on the computer system using a computer algorithm, and then people are given a categorical risk level (low, moderate, high or no score) depending on the range in which their score fell (Joliffe-Simpson et al., 2021). When attending an episode, the police can only see the resulting categorical risk level (via an application on their phone) for the aggressor, and this information is included in the report.

Dynamic Risk Assessment (DYRA)

The DYRA is another risk assessment tool that examines the risky and abusive behaviours of the aggressor and also the psychosocial stressors that may make these behaviours more likely. It consists of 12-16 yes/no questions, where four of the questions are only asked when there are children living with either the victim or aggressor. The number of "yes" responses are totalled and a categorical risk score is assigned where 0-1 is low, 2-3 is moderate and 4 or more is high risk (Jolliffe Simpson et al., 2021). The police administered this assessment at the scene of the episode using an application on their

smartphone, and the individual responses as well as the overall categorical risk level was provided in the report.

ISR Case Notes

Every FH episode in the Waikato and Christchurch regions (the regions where the ISR is being utilised) is discussed at a multi-agency meeting where information about the victim and aggressor, and other family members such as children is shared in order create and put in place a robust safety plan for that family. Agencies involved in the ISR include NZ Police, Corrections, ACC, Oranga Tamariki, Health Services, Non-Governmental Organisations such as Women's Refuge, Mental Health Services, and Iwi representation[1]. After discussing the episode and sharing information, the case is assigned a risk level of either low, medium, or high. The case notes from these meetings and the risk level were included in the raw data collected from FSS.

The raw data was collated into an excel spreadsheet, with each of the variables recorded by police and ISR separated into individual columns. A full list of variables in the spreadsheet taken directly from police is included in Appendix A. It was from this resultant spreadsheet of raw data that the samples for Study 1 and Study 2 were randomly selected.

[1] Whilst there was a section for Iwi representation in the ISR notes template, it is interesting to note that no information was included in it, in any of the cases examined for this thesis.

Study 1 – Method

The aim of Study 1 was to investigate the ways children can be involved in IPV events through an exploratory, qualitative investigation of police reports for calls for service. We aimed to identify and categorise the roles that children have during IPV events.

Design

In order to gain an understanding of the types of roles that children have during IPV episodes, it was important to do a thorough analysis of the behaviour, movements, and actions of the children (and their whānau) in a sample of cases. We decided that an inductive thematic analysis would be the best approach because it retains strong connections to the characteristics of the raw data, which is essential for the bottom-up approach that we intended to use (Attride-Stirling, 2001; Braun & Clarke, 2012).

Sample

Of the 619 cases in the excel spreadsheet of raw data where police had indicated that children were "involved", a random sample of 100 police reports was taken. Only the episode characteristics and episode narrative sections of the police reports were used for Study 1. Reports where a child lived in the home (or was the child of an involved party) but was either not present, did not witness the episode, or where insufficient information was given regarding the child's presence were excluded from this study, but retained for use in quantitative analysis for Study 2. A total of 30 cases were excluded, which means that the final number of cases included in the thematic analysis was 70.

Analysis

We used the thematic analysis "phases" proposed by Braun and Clarke (2006) to ensure that the study, whilst retaining the flexibility and richness that is a strength of qualitative research, also maintains a methodical approach.

Phase 1

In phase one of our thematic analysis, we familiarised ourselves with the data. Each police report was read and all the information relating to the children involved was summarised into a document, which was exported into NVivo 12 software package. Once in NVivo, the summaries were read and re-read several times in order to build a sense of familiarity with and immersion in the data.

Phase 2

The second phase of analysis consisted of identifying and generating initial "codes" (patterns of behaviour for the children or other parties involved in the episodes). Due to the exploratory nature of the research, codes were initially kept broad and all actions of children or related to children were considered relevant at this level of analysis. An example of a police report extract, and the codes that were drawn from it is shown below in Figure 1.

Figure 1.

Police Report Extract and Child-Related Codes Identified

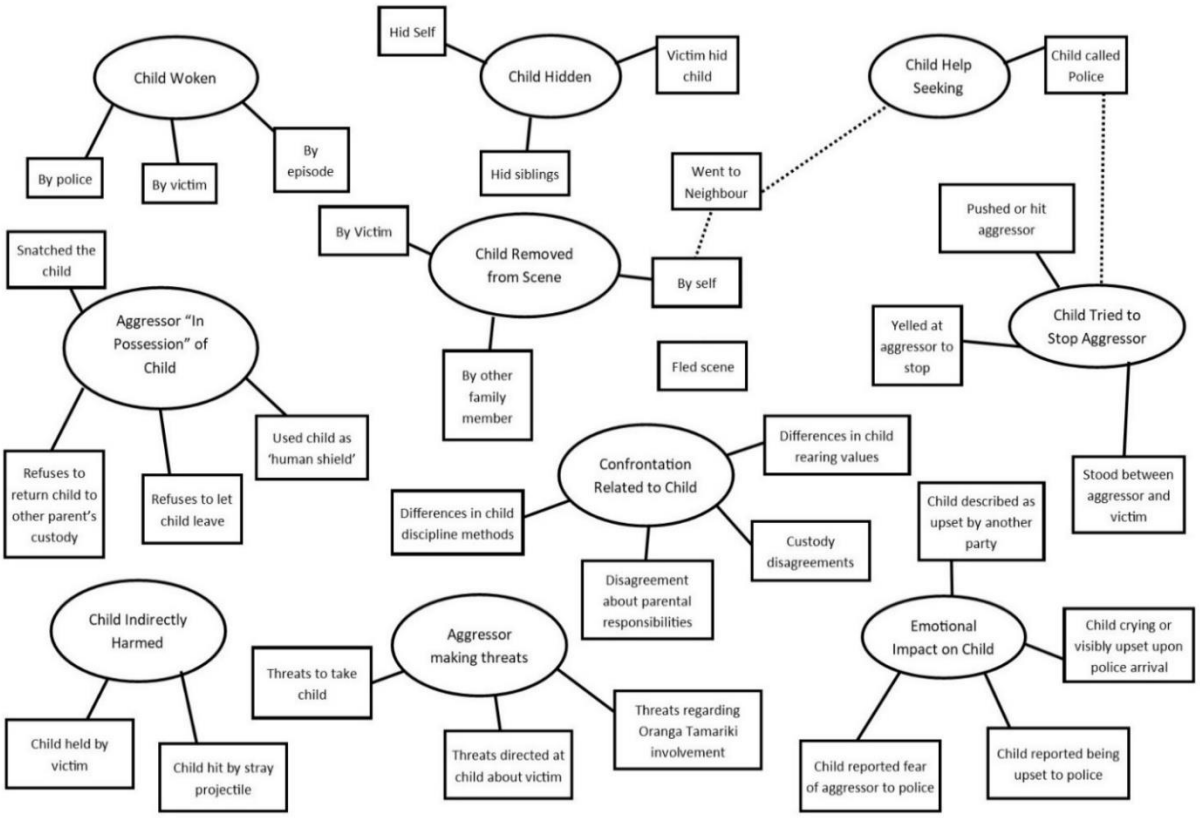
Police Report Extract	Codes Identified
"Child was asleep in her room when she heard Victim scream. She came running down and Aggressor looked like he was going to strangle victim, so Child stood in between them. Aggressor swore at her, grabbed Victim's keys and wallet and took off in her car. Child seemed very upset and scared about the whole event and was crying when giving a witness statement to Police. She stated she is scared of Aggressor as she never knows when he is going to turn up. "	· Child woken by episode · Child stood between aggressor and victim · Child crying or visibly upset upon police arrival · Child reported fear of aggressor to police

Phase 3

Once coding was completed, codes were analysed to establish similarities and some potential themes were identified. An initial thematic map (Figure 2) was created to give a visual representation of the relationships between different codes. During phase 3, no codes were excluded, collapsed, or discarded as this would be done in later phases.

Figure 2.

Initial Thematic Map of Relationships between Identified Codes



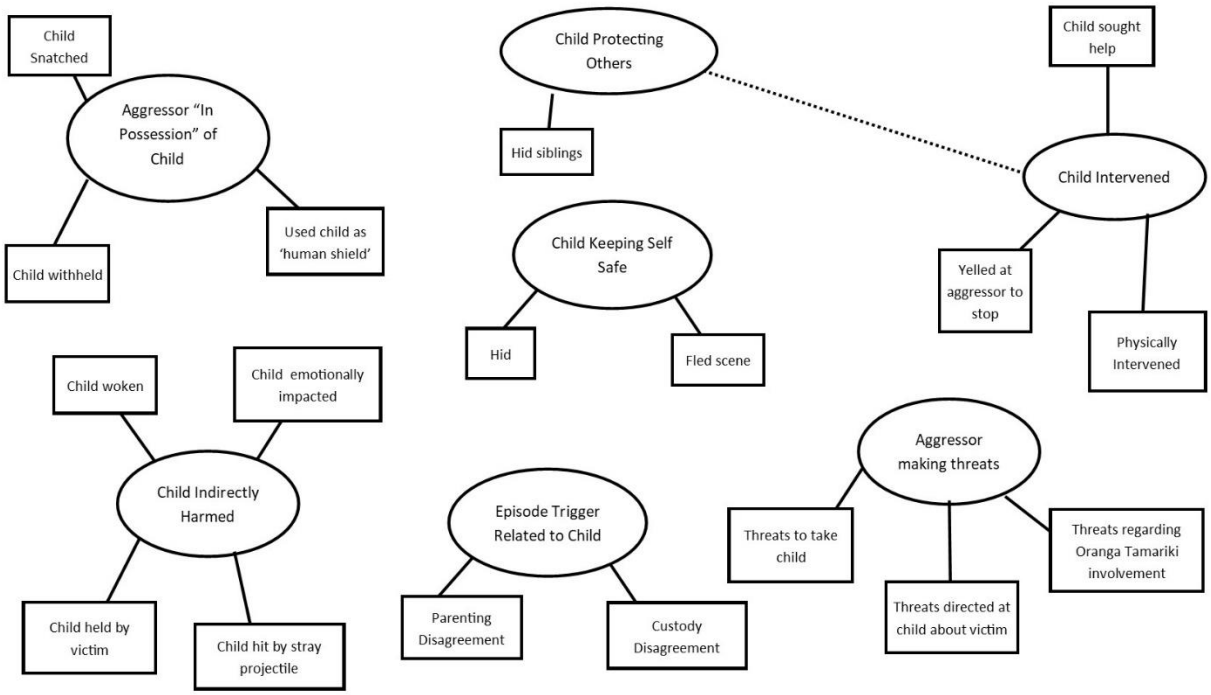
Note: Dotted lines in the thematic maps indicate connections between two identified codes

Phase 4

Phase 4 consisted of a reviewing the candidate themes to ensure that they formed coherent, distinct groups. Themes were checked against Patton (1990)'s criteria for categories - *internal homogeneity* and *external heterogeneity*. Themes were reviewed and reworked until the data within each theme showed clear and relevant relationships, whilst each theme was distinct and identifiably different from other themes. The review process was then repeated several times, utilising "developing" thematic maps, until we were satisfied with the final themes. An example of one of the developing thematic maps is given in Figure 3.

Figure 3.

Third Iteration of Developing Thematic Maps



Phase 5

The final phase of analysis involved "defining and refining" (Braun & Clarke, 2006) the themes identified in our final thematic map during phase 4. Defining and refining refers to getting to the core of what each theme is really about, what aspects of the data each theme encapsulates and the overall narrative that the themes give both individually and when taken together. Finally, the names for each theme and sub-theme were carefully selected to ensure that they reflected the overall narrative identified.

Study 1 -Results

The thematic analysis identified four key themes in the data. One of these themes identified IPV events that had a 'trigger' related to the children present. The remaining three themes were distinct roles that the children had during the IPV events. The four identified themes are discussed in depth below.

Child-related Trigger

The first theme identified was the "child related trigger" and was defined by conflict between the parties being triggered by something regarding the child. It is important to note that the trigger was not necessarily something the child did, but rather, a disagreement between the adult parties about the child. Whilst this theme is not a direct "role" of the child, it is included because it gives insight into the impact that the presence of children can have on the IPV script. The child-related trigger was split further into two main types– parenting style conflicts and custody disagreements.

Parenting style conflicts were those that originated as a disagreement between the parents about how best to parent the child(ren). Some examples of these conflicts were: whether to give the child a pacifier, one parent immunising the child despite the other parent disagreeing, or who was going to cook a meal for the child.

Custody disagreements were those that originated as a disagreement between separated parents about custody arrangements. These predominantly consisted of either one parent going against a pre-arranged custody agreement, or a disagreement due to the lack of a custody agreement.

Roles of children

The remaining three themes identified in the analysis were distinct 'roles' that children had during IPV events. Each of the three roles could be split into sub-roles that

demonstrated the varied ways in which children could hold each of these roles. The final roles are outlined in table 1 below.

Table 1.

Identified Roles and Sub-Roles of Children during IPV Events

Role	Sub-Role	Definition
Collateral Damage	Held Child	Child held by victim during episode
	Emotionally Impacted	Child showed signs of emotional distress upon police arrival
	Disturbed from Sleep	Child awoken by episode, or by an adult to be moved to safety
	Unintentionally Injured	Child injured accidentally
Pawn	Snatched Child	Child was snatched or grabbed
	Withheld Child	Aggressor refused to hand over or hid behind child.
	Intimidation Tool	Child used as a tool for intimidating or manipulating victim
Protector	Protecting Others	Child took steps to protect the victim or siblings
	Protecting Self	Child took steps to protect themselves.

Child as "collateral damage"

The first role identified was that of the child as "collateral damage". This role was defined by the child experiencing physical or emotional harm resulting from their proximity to the IPV event. It is important to note that the physical and emotional harm experienced by children in this role was unintentional, accidental, or indirect. Cases where the child was the intended victim or was intentionally injured were not included in this thesis as they are not recorded as child assaults, not IPV, in police reports and therefore were not part of the data set. There were four main sub-roles that children could have within the "collateral damage" role. These were: *held child, emotionally impacted, disturbed from sleep,* and *unintentionally injured*.

Held children were those who were being held by the victim during the course of the episode. These instances were exclusively those in which the child was an infant, so there was generally no information from the children themselves in this category.

Emotionally impacted children were those who police specifically mentioned in their reports as being emotionally affected by the episode. Some of the ways police described the emotional impact included more general descriptions of children being "visibly upset"

or “distressed” upon police arrival, more specific descriptions of children’s behaviours such as crying and screaming, or information directly from their interviews with children, where the child reported being fearful/frightened/terrified.

Children in the third sub-role were *disturbed from sleep* either by the IPV event itself, or the aftermath. In some cases, children were awoken by the commotion of the argument or fight; in others they were awoken by the sound of police arriving. There were also a couple of cases where children were intentionally woken by the victim, other family members, or Police in order to move them to safety.

The final “collateral damage” sub-role of children was being *unintentionally injured*. The children in this sub-role were accidentally physically injured due to their proximity to the IPV event. For example, in one case the aggressor threw a portable speaker at the victim, but they missed and hit the child in the leg.

Child as “pawn”

The second role identified is that in which the child was used as a “pawn”. This role is characterised by the intentional, malicious involvement of the child by the adult aggressor as a means of manipulating the victim. Whilst we cannot know intent for certain from this dataset, these are cases a where the behaviour, when examined within the context of the IPV, *appears* to be designed to manipulate the victim. As was the case with the collateral damage role, cases where children were the victims of intentional physical harm were not included. There were three main sub-roles within the “pawn” role, which *were snatched child*, *withheld child* and *intimidation tool*.

The first sub-role was *snatched children*, which was defined as children who were forcibly taken out of the victim’s arms or grabbed suddenly and without warning. Because the “child as pawn” role is characterised by apparent malicious intent, we did not consider instances where there was a clear protective intention (such as the child being removed from the arms of a dangerous person by authorities or removed from the scene for their

own safety) to be indicative of the snatched children sub-role. Some examples of snatched children from the data include an aggressor pretending to hug the child but then picking her up and running down the road with her under his arm so that the victim was forced to go after him, or another who was described as having "ripped" an infant out of the victim's arms to force the victim to pay attention to what he was saying rather than attending to the child.

The second sub-role was *withheld children*, which was characterised by situations where the aggressor refused to hand over or put down the child. The withheld children sub-role only included those children who were withheld *despite* a legal obligation or request from authorities for the aggressor to put the child down. Some examples of withheld children from the data include an aggressor refusing to return the child to the victim despite court agreed custody arrangements, and an aggressor using the child as a 'shield' against authorities.

The final sub-role was children who were used as an *intimidation tool*. This sub-role was characterised by instances where the aggressor used the child as a way of intimidating or threatening the victim, either by making threatening or frightening comments to the child (in order to manipulate the victim) or making threats to the victim regarding the child. Some examples from the data of children being used as an intimidation tool included an aggressor asking a preschool age child; "what are you going to do when (victim) is gone?" as a means of frightening the victim. A second example involved an aggressor threatening that he would take the child away if the victim called the police.

Child as "protector"

The third role identified was "protector", which is characterised by proactive actions on the part of the child to protect either themselves or others. There were two sub-roles within the protector role*: protecting others* and *protecting self*.

The first sub-role within the protector role was that of *protecting others* and included all situations where the child took steps to protect either the victim or other children present in the house. There were several different strategies that children within this sub-role used to protect others, the most prominent of which was to seek help by calling police or going to a neighbour. Other examples included hiding their siblings, asking the aggressor to stop, attempting to physically move or restrain the aggressor, or even placing themselves directly between the aggressor and victim.

The second sub-role was *protecting self*, and as the name suggests was defined as the child taking steps to protect themselves. Every child in this sub-role except one protected themselves by hiding. There was one case where the child ran away from the aggressor but did not leave the immediate scene or seek the help of other adults, so we coded the case as protecting self rather than protecting others. All other cases where children ran away were coded as protecting others because they all resulted in children seeking help for the victim from neighbours or police.

Study 1 - Discussion

The research question for Study 1 was: "*What roles do children have when they are involved in IPV events in New Zealand?".* This was an exploratory study that aimed to investigate the ways children can be involved when they are present during IPV events and create a typology of the roles that they may have.

Using Braun and Clarke (2006)'s phases of analysis, we conducted a thematic analysis of police reports following IPV call outs. Based on our thematic analysis, we will elaborate on the four key themes that emerged, discuss how our findings can be compared to previous research, outline the implications of our findings, and hypothesise about the future directions our findings may lead.

Study 1 identified four key themes. The first was a child related trigger, which related to IPV events in which the conflict was triggered by disagreements related to the child. The remaining three themes were types of roles that children may have during IPV events – collateral damage, pawn, and protector.

The findings in this study were consistent with previous research because we identified very similar patterns of involvement for children during IPV events. The "collateral damage" role holds a lot of similarities to the children described earlier as being 'caught in the crossfire' (Mittal & Carrington, 2012; Peled, 1998; Stanley et al., 2010). We also found some similar descriptions of children's emotional reactions as Stanley et al. (2010) similar active roles (such as calling police or physical intervention) to those identified by Peled (1998) and Edleson et al. (2008), and very similar protective roles to Fantuzzo et al. (1997) and Mittal and Carrington (2012). The substantial similarities in the types identified in this research and those identified in previous research suggests that the types of roles children have during IPV events are relatively consistent. Having said that, there was one

subset of behaviour from previous research that we did not identify in our current study. As mentioned earlier, previous research identified that some children purposefully ignore the event or find ways to distract themselves. According to Peled (1998) this can often be a form of dissociation so that they are emotionally protected from the events taking place around them. In those cases, it could be argued that this is another form of "protecting self". However, information regarding the whereabouts and movements of children who did not witness the IPV event is not considered relevant to police attending, and therefore is not included in the police report. Given the archival nature of our research, this is likely to be the reason why we did not identify any children using dissociation as a coping strategy.

Study 2 – Method

Having identified the roles of children in Study 1, we then moved our focus to the IPV events themselves. The research question for Study 2 was: *"How are IPV events where children are involved different to those where children are not involved?".* Our first aim with Study 2 was to give a description of some of the demographic, family and child-specific variables related to children's presence in IPV, including how often children took the roles identified in Study 1. The second aim was to take a preliminary look at whether the presence of children might be associated with other differences in the IPV event besides "children were present", through statistical comparison of child-present and non-child-present samples.

Samples

Child-Present Sample

The sample consisted of the 100 cases from Study 1, plus another 100 cases randomly selected from the 619 eligible IPV episodes involving children that were in the data archive. Of these 200 episodes, 10 were excluded due to the police report not containing enough information about the episode, two were excluded because the report was a disclosure of a historical incident and three were excluded because of conflicting information from involved parties that made it too difficult to ascertain what had taken place during the episode. Therefore, a total of 178 cases were included in this study.

Non-Child-Present Sample

A random sample of 178 cases was taken from the spreadsheet from the 1070 episodes in the archive where police had indicated that a child was not present. Two were excluded due to the episodes relating to historical claims rather than recent events, so a further

two were randomly selected in order to ensure that the non-child-present sample and the child present sample had the same sample size.

Coding

The variables for the child-present sample were manually coded from the spreadsheet. The nature of the coding for these variables is outlined below.

Child-Present Sample

We added columns to the existing datafile in three different sections – variables related to the episode, variables related to the family history and variables related to the child. Specific codes and the definitions used in the coding can be seen in the data dictionary, which is included in Appendix B. It is important to note that if more than one child was involved in the episode, then coding in the episode-related variables and family-related variables related to child 1: the child with the most information included in the police report and ISR notes or in the most significant 'role'.

Episode-Related Variables. The variables that related specifically to the individual episode were coded entirely from the police reports. The first episode-related variables were "aggressor relationship to the child", and "victim relationship to the child".

The next variable coded was whether the episode had a "child related trigger" (as this was identified as a key theme in Study 1). We wanted to gauge not only how often the episodes had child related triggers, but also the nature of the trigger (i.e., whether it was a parenting dispute or a custody dispute).

The last three episode-related variables pertained to how others responded to the episode, in particular to the child's involvement in the episode. All three of these variables were dichotomous. The first of the three was "child removed to safety by adult" and was included to measure how often either the victim or witnesses removed the children from the scene of the episode to a safe location. The second was "police concerns for the

child", which could be found either in the write up of the police report or in the frontline safety report if police answered yes to: "do you believe that the children/young persons present are suffering from neglect and have immediate safety concerns for the child/young person?" The final variable was "was OT [Oranga Tamariki[2]] contacted?" and was coded directly from the frontline safety plan, if police answered "Yes" to "have you called Oranga Tamariki – Ministry for Children?".

Family- Related Variables. The next set of variables was coded from the information in the ISR meeting notes. The first family-related variable was "primary caregiver of child". In cases where both the child's parents were caregivers, a distinction was made between whether they were still together, or whether they were separated and shared care. If they were separated and only one parent had care, then either "Mum" or "Dad" was coded as the caregiver.

The second family-related variable was "whānau history with O.T." and was included to give insight into whether there had been previous involvement by Oranga Tamariki for that whānau. Specifically, we included cases where Oranga Tamariki had previous involvement for the children who were present in that episode. We did not include cases where Oranga Tamariki were involved for adult siblings or for the parents when they were children.

The next group of family-related variables pertained to whether family members have a history of mental health (MH) problems. The first column was "History of MH for Caregivers" the second column was "History of MH for children".

The final of the family-related variables pertained to the history of FH episodes for that family. The two columns in this section were "aggressor FH history" and "victim FH

[2] Oranga Tamariki is the New Zealand Ministry for Children, a government department who are responsible for child welfare.

history". The number of previous FH episodes (that resulted in a police call) were identified in the ISR report and recorded in these columns.

Children Specific Variables. Finally, we coded variables specific to the children involved in the episode. All the child-specific variables were coded for every child involved in an episode, meaning that information on up to four different children could be attached to a single episode. The first group of child-specific variables was demographic information and included "child age", "child gender" and "child ethnicity".

The next group of child-specific variables were pertaining to the child's role in the episode. The role variables were those roles identified from the thematic analysis in Study 1. Each role was coded in a separate column with codes for each of the sub-roles to ensure that if children held multiple roles simultaneously then this was recorded. The first was "child as protector", and different codes were given for the child protecting themselves or protecting others. The second was "child as pawn". Different codes were given to reflect whether the aggressor snatched or grabbed the child, whether the aggressor refused to hand over the child or whether the aggressor made threats regarding the child as a form of intimidation towards the victim. The final column was "child as collateral damage". Different codes were given to reflect whether the child was being held by the victim during the episode, whether police reported that the episode had a clear emotional impact on the child, the child was awoken from sleep by the episode, or whether the child was unintentionally injured during the episode.

Non-Child-Present Sample

These samples did not require any further coding as the variables for comparison across the child present and non-child-present samples were those which had been recorded by police, as outlined in the data sources section above and demonstrated in Appendix A.

Externally Coded Variables

Two other variables were included from a study sample coded by Samantha Taaka (Taaka et al., 2020) as part of research into controlling behaviour in IPV. Because the Taaka sample also was randomly selected from the same archive, there were only 143 cases that were the same in the Taaka sample and the present study. For these 143 cases, Taaka's "relationship length" and "coercive control present" variables were used here, but only used for univariate analysis and were excluded for regression analyses.

Analysis

Data were exported to IBM SPSS Statistics Version 27, and all statistical analyses were conducted using this software. Preliminary analyses calculated descriptive statistics for the child present sample. Due to the exploratory nature of the research, these descriptive statistics were an integral part of understanding the circumstances surrounding the presence of children in IPV events. Also because of the study's exploratory nature, we did not correct the alpha level as is suggested for multiple tests in these preliminary analyses.

To examine the relationship differences between the child-present and non-child-present sample, we ran a series of comparative analyses. For our continuous variables, which included aggressor and victim ages, types of harm, and relationship length, we ran independent samples t-tests to see if there were significant differences between the child-present and non-child-present groups. Effect sizes for our t tests were established using Cohen's *d* values, with $d = 0.2$ considered to be a small effect size, $d = 0.5$ considered to be a medium effect size and $d = 0.8$ considered to be a large effect size (Lakens, 2013). For our variables that were categorical or dichotomous, we ran a series of chi square tests to ascertain whether the child-present or non-child-present samples had a higher proportion of any of those variables. Effect sizes for our chi-square tests were established using Phi Coefficient for 2x2 tables, with $\phi = 0.1$ considered to be a small effect size, $\phi = 0.3$ considered to be a medium effect size, and $\phi = 0.5$ considered to be a

large effect size (Allen, 2017). For tables larger than 2x2, Cramer's V was used with $V = 0.1$ considered to be a small effect size, $V = 0.4$ considered to be a medium effect size, and anything greater than $V = 0.5$ considered to be a large effect size (Döring, 2018).

Finally, to examine whether any of the variables were predictive of the presence of children, we used a stepwise series of binary logistic regressions. Two models were tested: one with all the predictor variables and one with only those that were statistically significant in the first model. A likelihood ratio test was then conducted to ascertain whether there was any significant difference in the pseudo R^2 for those two models, indicating that one was a better model than the other.

Study 2 -Results

Sample Description – Child-Present Sample

The following sections give descriptions of the sample based on the variables coded that were unique to the child-present sample (i.e., variables related to the child). Descriptive information about the variables extracted directly from the police data (i.e., variables present in both the child-present and non-child-present samples) is included in the comparative statistics section of these results.

Episode-related Variables

Table 2 shows the frequencies of the episode-related variables for the child-present sample. In the majority of episodes, the aggressor was the child's father, and the victim was the child's mother. Whilst most episodes involved one or both of the child's parents, there were a handful of cases where neither the aggressor nor victim was the child's parent: although at least one party was always a family member of the child, such as a grandparent.

The most common child-related trigger was parenting disputes; however, most episodes did not have a child-related trigger. In the majority of episodes, children were either not removed to safety, or removed themselves. In over 90% of episodes there was no recorded concern for the child by police and there was only one case where police indicated that they had contacted Oranga Tamariki regarding concerns for the child.

Table 2.

Frequencies of episode-related variables

Variable	*n*	%
Relationship between aggressor and child 1		
Father	119	66.9
Mother	25	14.0
Mother's partner	20	11.2
Mother's ex-partner	8	4.5
Other family member	6	3.4
Relationship between victim and child 1		
Mother	141	79.2
Father	23	13.0
Father's partner	6	3.4
Grandmother	4	2.2
Other family member	4	2.2
Episodes with child-related triggers		
Trigger not child related	125	70.3
Parenting Dispute	29	16.3
Custody Dispute	12	6.7
Trigger Not Reported	12	6.7
Child removed to safety by an adult		
Yes	28	15.7
No/Not Reported	150	84.3
Police recorded concerns for a child		
Yes	6	3.4
No	172	96.6
Police indicated they were contacting OT		
Yes	1	0.6
No	177	99.4

Note. Overall sample *n*= 178.
Note. Child 1 = Child with the most information included in the police report and ISR notes or in the most significant 'role'

Family-related Variables

Table 3 shows the frequencies of the family-related variables for the child-present sample. In almost half of the episodes, the child's primary caregivers were parents who were still together and about one fifth were parents who were separated but had shared care. Another fifth of children were in the sole care of their mother, however only one *twenty-fifth* were in the sole care of their father. The remaining children were in the care of a grandparent or aunt. There were no children who were in the care of non-family members.

Table 3.

Frequencies of family-related variables

Variable	*n*	%
Primary caregiver of the child		
Parents (Together)	87	48.9
Parents (Separated)	38	21.3
Mother	40	22.5
Father	8	4.5
Grandparent(s)	3	1.7
Aunt	2	1.1
Family history with Oranga Tamariki		
Yes	91	51.1
Not clear/Not Reported	87	48.9
Caregiver MH history		
Yes	84	47.2
Not clear/ No Mention	94	52.8
Child MH history		
Yes	12	6.7
Not clear/No mention	166	93.3

The number of previous family harm episodes that aggressors had been involved in ranged from 0 to 63; the mean was approximately 14. For victims, the number of previous family harm episodes ranged from 0 to 58, with the average being 13 (rounded to nearest full number).

Child-specific Variables

There was a total of 319 children present across 178 episodes; 89 episodes involved only one child and the number of children involved ranged from one to four. The children ranged in age from <1 year to 17 years old, with a mean age of 6.3 years.

Table 4 shows the frequencies of the child-specific variables for the child present sample. There were very similar numbers of male and female children, with an almost even split between the two groups. Māori children accounted for nearly half of the sample, with NZ European children making up approx. 30%. The “other” ethnicity group consisted of 70 children who were listed in police data or in FSS as “other”, 6 Asian children and 4 Pasefika children. The latter two groups were collapsed into the other group due to low numbers.

Table 4.

Frequencies of child-specific variables in child-present sample

Variable	Entire Sample		Coded Children Only	
	n	%	*n*	%
Gender of children				
Male	164	51.4	48	47.5
Female	155	48.6	53	52.5
Ethnicity of children				
Māori	146	45.8	52	51.5
NZ European	93	29.2	28	27.7
Other	80	25.0	21	20.8
Children in "protector" role				
Yes	**37**	**11.6**	**37**	**38.9**
Protecting Self	11	3.4	11	11.6
Protecting Others	26	8.2	26	27.4
No	**282**	**88.4**	**58**	**61.0**
Did not have this role	58	18.2	58	61.0
Role Unknown	132	41.4	-	-
Not Applicable	92	28.8	-	-
Children in "pawn" role				
Yes	**20**	**6.2**	**20**	**20.4**
Aggressor refusal to hand over child	11	3.4	4	4.1
Child Snatched	4	1.2	11	11.2
Aggressor threatened child	5	1.6	5	5.1
No	**299**	**93.8**	**78**	**79.6**
Did not have this role	78	24.5	78	79.6
Role Unknown	132	41.4	-	-
Not Applicable	89	27.9	-	-
Children in "collateral damage" role				
Yes	**57**	**17.9**	**57**	**55.3**
Emotional impact on child	30	9.4	30	29.7
Child held by victim	12	3.8	12	11.9
Child awoken by episode	14	4.4	14	13.9
Child unintentionally injured	1	0.3	1	1.0
No	**262**	**81.9**	**44**	**43.6**
Did not have this role	44	13.8	44	43.6
Role Unknown	132	41.4	-	-
Not Applicable	86	27.0	-	-

Note. Entire sample data is for all 319 children involved, not just child 1.
Note. Coded children sample refers to children we had role information for *and* who were able to take that role. *N* = 103 except in the "protector" role where *n*= 95 and the "pawn" role where *n*= 98

Approximately 11% of children in the overall sample were coded as being in the 'protector' role, 6% of children in the "pawn" role and 18% of children in the "collateral damage" role during the episode. However, for each of the three roles, the role code was not applicable (due to the child not being present or sleeping through it) in almost a third of the cases. Also, in just over 40% of all the cases, the roles of the children were either

unclear or not reported at all, so the percentages of children within the roles cannot be reported accurately. When we looked at only those children that we *did* have role information for and who were physically able to hold the role, we found that nearly 40% of children were in "protector" role, 20% were in a "pawn" role and over 50% were "collateral damage" (percentages exceed 100 because some were coded as being in more than one role.)

Between-Sample Analyses

Independent-samples t-tests were run to determine if there were differences in aggressor age, victim age, total harm, and relationship length between the child present and no child groups. Aggressor age was similar in the child-present group (*M* = 34.89, SD = 10.02) and non-child-present group (*M* = 34.65, SD = 12.70), with no significant difference, t(354) = -0.20, p = .839. Victim age was higher in the non-child-present group (*M* = 32.98, SD = 12.48) than the child-present group (*M* = 32.71, SD = 9.81); however, this difference was not statistically significant, t(354) = -0.23, p = .817.

At the time of the incident, the aggressor and victim had been in a relationship for longer in the child-present group (*M* = 57.59, SD = 79.62) than in the non-child-present group (*M* = 35.09, SD = 71.89): a statistically significant difference, t(278) = -2.48, p = .014, with a small effect size d= .296 (95% CI [.060, .532].

The number of different types of harm coded as present in each episode were totalled (physical, property damage, threats, verbal or sexual). There were more types of harm in the child-present group (*M* = 1.69, SD = 0.72) than the non-child-present group (*M* = 1.48, SD = 0.61), a statistically significant difference, t(354) = -2.93, p = .004 with a small effect size d= .310 (95% CI [.101, .519].

We compared the child-present and non-child-present samples across several coded variables using chi squares, the results of which can be seen in table 5. We found that episodes with children present had a significantly higher proportion of occurrence inside a

dwelling (compared to a public place), male aggressors, and higher DYRA and ISR risk levels. They also had a significantly higher proportion of physical harm and detected offenses.

Table 5.

Chi square comparisons between non-child-present and child-present samples

	No Child		Child				
Variable	n	%	n	%	χ^2	p	Phi/Cramers V
Aggressor gender					4.66	.031*	.114
Male	136	76.4	152	85.4			
Female	42	23.6	26	14.6			
Aggressor ethnicity					5.26	.072	.122
Māori	74	41.6	93	52.2			
European	83	46.6	73	41.0			
Other	21	11.8	12	6.8			
Victim gender					3.56	.059	-.100
Male	137	77.0	151	84.8			
Female	41	23.0	27	15.2			
Victim ethnicity					4.21	.122	.109
Māori	66	37.1	85	47.8			
European	90	50.5	76	42.7			
Other	22	12.4	17	9.5			
Substances Consumed							
Drugs	19	10.7	15	8.4	0.52	.471	-.038
Alcohol	62	34.8	54	30.3	0.82	.366	-.048
Types of Harm							
Physical Harm	41	23.0	74	41.6	13.99	<.001**	.198
Property Damaged	32	18.0	26	14.6	0.74	.389	-.046
Threats of Harm	23	12.9	29	16.3	0.81	.368	.048
Verbal Abuse	167	93.8	170	95.5	0.50	.479	.037
Sexual Abuse	0	0	1	0.6	1.00	.317	.053
Firearms Present	3	1.7	1	0.6	1.01	.315	-.053
Episode Location					12.97	<.001**	-.191
Dwelling	140	78.7	164	92.1			
Public Place	38	21.3	14	7.9			
Offence Detected	19	10.7	36	20.2	6.22	.013*	.132
Coercive Control Present					3.41	.559	.032
No	80	45.5	57	32.0			
Yes	79	44.4	64	36.0			
Risk Level							
SAFVR					7.39	.061	.144
No Score	29	16.3	19	10.7			
Low	30	16.9	22	12.4			
Moderate	25	14.0	18	10.1			
High	94	52.8	119	66.8			
ISR					12.12	.002**	.185
Low	71	39.9	43	24.2			
Medium	95	53.4	111	62.3			
High	12	6.7	24	13.5			
DYRA					11.35	.010**	.179
No Score	27	15.2	22	12.4			
Low	49	27.5	30	16.9			
Moderate	39	21.9	33	18.5			
High	63	35.4	93	52.2			

Note. OR = odds ratio.

Note. Coercive control analyses exclude the 19 cases in non-child-present group and 57 cases in child-present group where data was unavailable

Next, we used a binary logistic regression to predict the presence of children using the coded independent variables; see Table 6. Coercive control variables were not included in the regression because of the uncoded cases noted earlier; we sought to maximise sample size. Sexual harm (a category in Types of Harm) was also not included in the regression as there was only one case in the child-present sample and no cases in the non-child-present sample. Model 1 included all the remaining coded variables after coercive control and sexual harm were removed and showed that *physical harm and episode location* were associated with increased likelihood of the presence of children. We then removed any variables that were not significant predictors of the presence of children in a stepwise fashion until we had a model which only included significant predictors of child presence. This optimised model, Model 2, showed the same two significant predictors but also included a third: *aggressor gender.* Finally, a likelihood ratio test was run to investigate whether there was any significant difference between the pseudo R^2 for model 1 compared to model 2. Results show no significant difference, χ^2 (22) = 20.48, p = 0.553.

Table 6.

Binary logistic regressions predicting presence of children

	Model 1				Model 2			
	B	SE	*p*	OR [95% CI]	B	SE	*p*	OR [95% CI]
Aggressor Age	<0.01	0.02	.917	1.00 [0.97 – 1.04]				
Aggressor gender[a]	0.88	0.84	.299	2.40 [0.46 – 12.53]	0.73	0.29	.012	2.07 [1.17 – 3.65]
Aggressor ethnicity[b]			.503					
Māori	0.53	0.52	.311	1.69 [0.61 – 4.67]				
NZ European	0.58	0.50	.242	1.79 [0.67 – 4.77]				
Victim Age	<0.010.01	0.02	.803	1.00 [0.96 – 1.03]				
Victim gender[a]	0.47	0.83	.567	1.61 [0.32 – 8.12]				
Victim ethnicity[b]			.434					
Māori	-0.13	0.45	.780	0.88 [0.37 – 2.13]				
NZ European	-0.44	0.43	.308	0.65 [0.28 – 1.50]				
Substances Consumed								
Drugs	-0.71	0.41	.084	0.49 [0.22 -1.10]				
Alcohol	-0.26	0.25	.306	0.77 [0.47 – 1.26]				
Types of Harm								
Physical Harm	0.68	0.29	.018	1.98 [1.13 – 3.47]	0.87	0.24	<.001	2.38 [1.48 – 3.83]
Property Damage	-0.15	0.33	.653	0.86 [0.45 - 1.65]				
Threats of Harm	0.28	0.35	.424	1.33 [0.66 – 2.65]				
Verbal Abuse	0.56	0.52	.281	1.75 [0.63 – 4.83]				
Firearms Present	-0.57	1.24	.647	0.57 [0.05 – 6.45]				
Episode Location	-1.24	0.37	.001	0.29 [0.14 – 0.60]	-1.12	0.35	.001	0.33 [0.17 – 0.64]
Offence Detected	0.29	0.37	.434	1.33 [0.65 – 2.75]				
SAFVR [c]			.454					
No Score	0.10	0.51	.841	1.11 [0.41 – 3.00]				
Moderate	-0.18	0.47	.705	0.84 [0.34 – 2.09]				
High	0.40	0.40	.311	1.49 [0.69 – 3.24]				
DYRA[c]			.186					
No Score	0.08	0.41	.839	1.09 [0.49 – 2.43]				
Moderate	0.37	0.36	.293	1.45 [0.72 -2.92]				
High	0.67	0.34	.047	1.96 [1.01 – 3.82]				
ISR[c]			.886					
Medium	0.13	0.29	.657	1.14 [0.64 – 2.01]				
High	0.03	0.51	.955	1.03 [0.38 – 2.82]				
Model	R^2= .183; $\chi^2(25)$= 52.43, p = .001				R^2= .114; $\chi^2(3)$= 31.95, p = <.001			

Note CI = confidence interval
Both R^2 are Nagelkerke pseudo-R^2
[a] Reference category = Female
[b] Reference category = Other
[c] Reference category = Low

Study 2 - Discussion

Study 2 was an exploratory study with three main aims. Firstly, it sought to build on the findings of Study 1 by examining how often events had child related triggers and how often children took on each of the role types. Secondly, it sought to identify how often other variables (as identified in previous research) were present in IPV events where children were also present. Finally, overall, it sought to answer the research question: *"How are IPV events where children are involved different to those where children are not involved?"*.

Key Findings

Descriptive results showed that almost a *quarter* of all IPV events where a child was present, the event began because of conflict relating to the child. This suggests that even when a child is not directly involved, their presence can influence the IPV event. When looking at the overall sample, the three role types might seem relatively rare. However, there are two important considerations to be made. Firstly, over a quarter of children in the sample were physically unable to hold any of these roles due to either not being present at the time of the event, being too young to carry out the role (e.g., an infant is physically incapable of intervening) or being asleep. These children were coded as "not applicable". Secondly, in nearly *half* of all the episodes, there was no information in the police report about the role of the children or if they were even present at all. Therefore, it is beneficial to consider the proportions of children holding each of the roles when only those children who could be coded were included in the sample. Of the three role types, we found that the "pawn" role was the least common, with only one fifth of children in our sample having this role. The next was the "protector" role; around two fifths of

children in our sample had this role. The most common role was that of "collateral damage", over half of the children in our sample had this role.

We identified that in 92% of cases, the child present was the child of the victim. This is exactly the same percentage reported by Stanley (2010) and Fantuzzo et al. (2007). Our t-test results showed that the relationships between aggressors and victims were, on average, significantly longer in the child-present group than the non-child-present group. This is of interest because the trend in the western population is the opposite – couples without children tend to report more relationship satisfaction and therefore stay together longer than those who have children (Doss et al., 2009). We also found that there were significantly more types of harm experienced by the adult victim in the child-present group than the non-child-present group.

A series of Chi square comparisons showed that IPV events with children present had a higher proportion of physical harm and detected offences against the adult victim, which are findings consistent with previous research (Fantuzzo et al., 2007; Fusco & Fantuzzo, 2009). Unlike previous research, we did not find a significantly higher proportion of weapon use (Fantuzzo et al., 2007; Stanley et al., 2010) or drug and alcohol use (Fantuzzo & Fusco, 2007; Sharman et al., 2019; Stanley et al., 2010) in the child-present IPV events than the non-child-present IPV events. Findings from our study not seen in previous research included that IPV events with children present had a higher proportion of occurrence in a private dwelling, had a higher proportion of male aggressors, and higher DYRA and ISR risk levels. The higher ISR risk level is what we would expect to see because it is a rating of risk for the entire whānau unit. The vulnerability of children and the impacts of witnessing IPV on them mean that children are at risk of harm merely by being present in homes with IPV and therefore risk levels *should* be higher.

We then turned our attention to the predictive ability of our coded variables. Whilst Model 1 of our regression analysis did identify several variables that were predictive of

child presence, after a stepwise removal of the least significant predictors, far fewer were shown to be significantly predictive in model 2. The three variables identified in model 2 were: aggressor gender, physical harm, and episode location. The pseudo R^2 for model 1 and model 2 of our regression were not found to be significantly different, meaning that the variables identified in model 2 were most likely doing the majority of the 'heavy lifting' in model 1 as well. Overall, these results suggest that in our dataset, IPV events involving male perpetrators, physical harm and that occur in private dwellings (rather than public locations) are more likely to have children present.

General Discussion

The objectives of this thesis were to investigate the roles of children who are involved in IPV events in New Zealand, and how episodes involving children are different from those where children are not present. We used a combination of qualitative and quantitative research methods across two different studies in order to answer our research questions. Based on the findings outlined in the earlier discussions, we will give a brief summary of the most important empirical findings and outline the implications of these findings. Finally, we will also explore some of the key limitations of the current study and suggest directions for future research.

Summary of overall findings

The first study showed that four main themes emerged. The first was that of a "child related trigger" and the last three were roles that the children may have. Each of the three roles had rub roles within them. The role of "protector" had two sub roles, which were: *protecting self* and *protecting others*. The role of "pawn" had three sub roles: *snatched child, withheld child* and *child as intimidation tool*. Finally, the role of "collateral damage" had four sub roles: *held child*, *emotionally impacted*, *disturbed from sleep* and *unintentionally injured*.

The second study showed that in a quarter of IPV events where a child is present, the event begins because of conflict relating to the child. They also showed that the "pawn" role was the least common, followed by that of "protector", and then the most common role was that of "collateral damage". However, in almost half of the episodes, there was no information included in the police report about the experiences or movements of the children at all. A binary logistic regression showed that aggressor gender, physical harm and episode location were significant predictors of child presence. Our study was able to replicate the majority of findings of the limited amount of previous research into the area.

When taken together, the results of Study 1 and 2 suggest that children can influence the IPV event in three different ways: through active involvement by taking on a protector role, through passive involvement by being a pawn or collateral damage, or through passive influence where the other parties' awareness of the sheer presence of a child influences their actions.

Implications

These results suggest that when children are present during IPV events, they are not just invisible passive observers. They are visible, present and can become involved in or influence the event in a number of different ways. The most obvious of ways that children influence the IPV event is through choosing to take on an active role. For example, a child who seeks help from police could potentially lessen the duration of the IPV event due to interruption by authorities, a child who intervenes may be successful in dissuading the aggressor from continuing the abuse, or a child who hides their siblings may protect them from being thrust into a collateral damage role.

Children can also become passively involved in the IPV event if other parties include them. This could include involvement by the aggressor through trying to use the child either to manipulate the victim or to deter the police responders from making an arrest (by using the child as a human shield). The victim may also involve the child, however in all of our sample, involvement of the child by the victim was either accidental (i.e., they were already holding the child when the event started) or was an attempt at protecting the child (i.e., waking them to take them to safety).

Thirdly, children may be a passive *influence* on the IPV event, meaning that the mere presence of a child can influence the behaviour of the other parties. For example, having a child may be a stressor for some couples, leading to conflict regarding how to handle discipline, differences in parenting styles or beliefs and values regarding how to interact with children. It is important to keep in mind though, not all couples who have children

end up involved in IPV, so what the above results suggest is that the stressors related to parenting choices, sharing custody or children's behaviour can - in some circumstances - be the trigger that begins an IPV event for those couples who are *already at risk* for IPV.

The passive influence of children is of particular interest as there are several implications that are raised both for the adult parties involved as well as the children. There are certain variables that are more associated with the presence of children, such as physical harm. Does this mean that the presence of children is also influencing the aggressor to do more harm? And if so, why and how? When we consider the variables combined, there are many questions that are raised. Victims were predominantly women across both groups, but the situational circumstances were different. So why are women with children in longer term relationships that are fraught with more types of harm and more physical harm than those women without children? When we consider that the pattern in the general public is for couples without children to last longer (Doss et al., 2009), what is it that keeps them together especially when she is getting hurt more? Does that mean that they are in more of a pattern of abuse? Are they staying out of a desire to keep their children safe? Or perhaps a fear of having their children taken away? And if there are different patterns of abuse in homes with and without children, there may be implications for police when children are present. They may be able to help by giving more education about the impacts of IPV on children and why staying won't keep them safe, as one example.

Regarding police, earlier discussions mentioned that a large number of police reports did not give information about the actions of children during the IPV event. This could have some implications for how police document the presence and involvement of children during callouts for IPV. It would be easy to say that police simply "need to pay more attention to children" during call outs, but such a statement ignores the complexity of the responsibilities of attending officers. Recently, research has begun investigating some of

the barriers for police interacting with children when attending IPV calls for service. Interviews with police showed that the most commonly cited reason that officers gave as to why they didn't interview the children was because they didn't feel comfortable doing so, citing it as a specialist skill that they didn't have training for (Richardson-Foster et al., 2012; Saxton et al., 2020; Stanley et al., 2010). Other officers felt that their priority when attending an IPV callout should be the adults involved in the altercations, rather than the children because there is little information that the children could add to the investigation that the adults hadn't contributed (Stanley et al., 2010). Another perspective offered during interviews was that many officers avoided interviewing children out of fear that they would upset the child, either by invoking a conflict of loyalties between parents (Richardson-Foster et al., 2012), or by further traumatising them due to having to discuss what they saw (Saxton et al., 2020). Interestingly, when children were interviewed regarding police attendance, a majority of children stated that they wished police had spoken to them because some of what the adults had said was incorrect, or crucial aspects of the episode had been left out and the children were frustrated that the police "only listen to the adults" (Richardson-Foster et al., 2012).

Thus far, the research regarding police interaction with children during IPV calls for service has been conducted in the United Kingdom and Canada, rather than here in New Zealand. Every country has its own set of procedures related to IPV, and therefore the experiences of police overseas are likely to be different. New Zealand has a robust set of family harm policies and procedures, and intensive training for police around family harm (New Zealand Police, n.d), so it is unknown whether NZ police experience the same barriers as overseas.

Limitations

A major limitation of this thesis is the limited information we had in relation to the presence, experiences and actions of children in IPV events. There are a few reasons why

we had limited information, the first of which was because the majority of police reports did not include information about the children at all. Only 59% of police reports where children were present gave information about the actions or movements of the children, with the majority of the rest of the reports limited to stating simply that children were present and if police had sighted them (and some not even mentioning the children except to tick that there were children involved). The regression analyses in Study 2 predicting the presence of children, may therefore, not be a completely accurate picture of what is happening. In order to run analyses, role codes were collapsed to binary variables with 1 meaning that child was described as having this role in the police report, and 0 meaning *either* the child did not have this role *or* there was not sufficient information in the police report to determine the role the child had. It is therefore possible that many children who were coded as 0 actually did have a role but this wasn't made apparent in the police report. Those police reports that did include information about the children still had limitations because children's experiences were inferred primarily from victim, aggressor, and adult witness statements (rather than interviewing children).

A second reason we did not have much information about children was because we solely used archival data and did not interview any of the parties involved in IPV events, including children. Having limited information about the experiences of children means that we may not have the full picture about certain sub-roles. For example, only those children who were mentioned in the police report as being visibly upset or crying were included in the "emotionally impacted" subgroup. However, just because a child isn't crying doesn't mean they weren't emotionally impacted – they could still be in shock or have become desensitized to violence due to the common nature. Without the voices of the children themselves, it really is difficult to deduce what their emotional states are.

Relying on police data means that we were also limited to information regarding IPV events in which a call for police service was made and are therefore unable to investigate whether the ways children are involved are different in events where a police call for service does not occur. For example, it might be possible that in some situations, remembering that the child is present could cause the aggressor to de-escalate their behaviour to the point where a police call out is no longer required. It is also possible that there are some situations in which coercive control is present such that victims and children do not feel safe to call the police. Due to the lack of police call out for these events, the families would not be reflected in our data.

A final limitation of this study was that due to COVID-19 related time constraints, no inter-relater reliability was done for the coding. This means that there is the potential for undetected coding bias or inconsistency in the data. With this in mind, we tried to ensure that the coding process was as clearly defined and as consistent as possible. Also, to ensure transparency, a thorough coding dictionary has been included in Appendix B.

Future areas for research

There are a number of potential areas of research that could follow on from the findings of this thesis. Given the very preliminary, exploratory nature of this research, we have only just skimmed the surface of understanding the roles that children have during IPV events. Future research could potentially expand on our findings by using statistical analyses to predict which roles children are likely to take. For example, it could be that older children are more likely to take on a protector role, certain genders are more likely to be used as a pawn, or perhaps if the victim is the child's mother, they are more likely to intervene. Further research investigating which variables predict children's roles could shed a lot more light on the involvement of children and continue to build the picture that Study 2 started.

Often in research, the experiences of children are inferred through police reports or interviewing parents; only two studies out of the 105 articles read during the literature review for this thesis had interviewed children directly. However, there is a growing body of research that suggests that having agency and being heard can not only help children process difficult events, but that they should be considered "knowledgeable agents whose insights can improve their and their families' experiences" (Stafford et al., 2021). Taking the above into consideration, future research should include the voices of children - what influences them to adopt certain roles, what happened afterwards (for example, if they were successful in stopping the aggressor if they intervened) and what the experience felt like from their perspective.

Similar to the need for interviewing children, is the need for research that seeks the perspectives of the adult parties involved in IPV. As was mentioned in the implications section of this thesis, the fact that women with children tended to be in longer term relationships with more types of harm and more physical harm than women without children, was concerning. Qualitative research that focusses on the experiences of victims, and also the aggressors, in IPV episodes could aid in starting to build a picture of the dynamics behind events where children are present. In a similar vein, future research could potentially involve speaking with New Zealand police officers who have attended IPV call outs where children were involved. These interviews would help gain police perspectives on whether it is practical to include information regarding children in their reports and what their experiences have been of interacting with children at IPV call outs. Future research could also investigate the barriers New Zealand police face in gathering information directly from children and their perspectives on whether they think there are benefits or risks to doing so (e.g., What do they perceive are the risks to children of telling police details that their parents had left out?).

A final direction for future research is the impacts on children. Whilst it is true that the impacts on children of being exposed to IPV are well established, the current study may help direct further research by shedding some light on some of the reasons why different children experience different outcomes. With an established potential typology for the roles of children, it is possible that researchers can investigate the path from IPV exposure to some of the different detrimental outcomes discussed in the introduction of this thesis. It might be possible that the roles children play may affect both the long- and short-term outcomes for children. For example, being used as a pawn could lead to different types of impacts than a child who attempts to intervene. It is also important to think of the other influences on children's roles and how they interplay with the outcomes for them. Research needs to consider what is possible for different ages and stages of development (i.e., infants are unable to take a lot of actions, whereas teenagers are more sophisticated so they may be able to draw a parent away) and whether the outcomes are related more to their developmental stage, the role they take or an interplay between the two variables.

Conclusion

To gain further understanding of the ways children are involved in IPV events in New Zealand, the two studies outlined in this thesis examined archival police data following police call outs for IPV where children were present. Utilising both qualitative and quantitative methods, we sought to identify a typology of the roles that children have during IPV events, identify how often they have those roles, what other characteristics are common where children are present during IPV events and compare IPV events where children were present to those where children were not present.

We identified three main types of roles, which were consistent with characteristics of children's involvement identified in the limited previous research. We also identified episode location, aggressor gender and physical harm as predictors of the presence of

children, which were also consistent with previous research. We concluded from the combined results of both studies that children can influence an IPV event through active involvement, passive involvement and also passive influence. Finally, of note was the limited information included in the police reports about the children.

Within this thesis we have identified important recommendations for similar research, such as the need for including the voices of children, exploring victim and aggressor behaviour and addressing police barriers to including the voices of children. Whilst this thesis sheds some light on the issue of children's involvement in IPV, its preliminary and exploratory nature means that continued research is necessary if we want to fully develop an understanding of the roles of children, the impacts they have on the crime script, and hopefully one day, how to keep them safe.

References

Achenbach, T. M., & Edelbrock, C. S. (1983). *Manual for the child behavior checklist and revised child behavior profile*. Burlington: University of Vermont, Department of Psychiatry.

Allen, M. (2017). *The sage encyclopedia of communication research methods*. Thousand Oaks, CA: SAGE Publications, Inc. https://doi.org/10.4135/9781483381411

Attride-Stirling, J. (2001). Thematic networks: an analytic tool for qualitative research. *Qualitative Research*, *1*(3), 385-405. https://doi.org/10.1177/146879410100100307

Australian Institute of Health and Welfare. (2019). *Family, domestic and sexual violence in Australia: continuing the national story 2019*. https://www.aihw.gov.au/reports/domestic-violence/family-domestic-sexual-violence-australia-2019

Black, M.C., Basile, K.C., Breiding, M.J., Smith, S.G., Walters, M.L., Merrick, M.T., Chen, J., & Stevens, M.R. (2011). *The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 Summary Report*. Atlanta, GA: National Center for Injury Prevention and Control

Boden, J., Fergusson, D., & Horwood, L. (2010). Risk Factors for Conduct Disorder and Oppositional/Defiant Disorder: Evidence from a New Zealand Birth Cohort. *Journal of the American Academy of Child and Adolescent Psychiatry*, *49*, 1125-1133. https://doi.org/10.1016/j.jaac.2010.08.005

Boxall, H. (2018). Understanding domestic violence incidents using crime script analysis. *Trends and Issues in Crime and Criminal Justice*, (558), 1-21.

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, *3*(2), 77-101. https://doi.org/10.1191/1478088706qp063oa

Braun, V., & Clarke, V. (2012). Thematic analysis. In H. Cooper, P. M. Camic, D. L. Long, A. T. Panter, D. Rindskopf, & K. J. Sher (Eds.), *APA handbook of research methods in psychology, Vol. 2: Research designs: Quantitative, qualitative, neuropsychological, and biological* (pp. 57-71). American Psychological Association.

Briere, J., & Runtz, M. (1988). Multivariate correlates of childhood psychological and physical maltreatment among university women. *Child Abuse & Neglect*, *12*(3), 331-341. https://doi.org/https://doi.org/10.1016/0145-2134(88)90046-4

Carlson, B. E. (2000). Children exposed to intimate partner violence. *Trauma, Violence, & Abuse*, *1*(4), 321-342. https://doi.org/10.1177/1524838000001004002

Cater, Å., & Forssell, A. M. (2014). Descriptions of fathers' care by children exposed to intimate partner violence (IPV) – relative neglect and children's needs. *Child & Family Social Work*, *19*(2), 185-193. https://doi.org/https://doi.org/10.1111/j.1365-2206.2012.00892.x

Clark, T. C., Robinson, E., Crengle, S., Grant, S., Galbreath, R., & Sykora, J. (2009). *Youth'07: The health and wellbeing of secondary school students in New Zealand. Findings on young people and violence.* Auckland, New Zealand: University of Auckland

Copeland, W. E., Shanahan, L., Hinesley, J., Chan, R. F., Aberg, K. A., Fairbank, J. A., ... & Costello, E. J. (2018). Association of childhood trauma exposure with adult psychiatric disorders and functional outcomes. *JAMA network open*, *1*(7), e184493-e184493.. https://doi.org/10.1001/jamanetworkopen.2018.4493

Delsol, C., & Margolin, G. (2004). The role of family-of-origin violence in men's marital violence perpetration. *Clinical Psychology Review*, *24*(1), 99-122. https://doi.org/https://doi.org/10.1016/j.cpr.2003.12.001

Döring, M. (2018, October 20). *Effect Sizes: Why Significance Alone is Not Enough.* Data Science. https://www.datascienceblog.net/post/statistical_test/effect_size/

Doss, B. D., Rhoades, G. K., Stanley, S. M., & Markman, H. J. (2009). The effect of the transition to parenthood on relationship quality: An 8-year prospective study. *Journal of Personality and Social Psychology, 96*(3), 601–619. https://doi.org/10.1037/a0013969

Edleson, J. L., Shin, N., & Johnson Armendariz, K. K. (2008). Measuring children's exposure to domestic violence: The development and testing of the Child Exposure to Domestic Violence (CEDV) Scale. *Children and Youth Services Review*, *30*(5), 502-521. https://doi.org/10.1016/j.childyouth.2007.11.006 (Children and Youth Services Review)

Fanslow, J., Hashemi, L., Malihi, Z., Gulliver, P., & McIntosh, T. (2021). Change in prevalence rates of physical and sexual intimate partner violence against women: data from two cross-sectional studies in New Zealand, 2003 and 2019. *BMJ Open*, *11*(3), e044907. https://doi.org/10.1136/bmjopen-2020-044907

Fanslow, J. L., & Robinson, E. M. (2010). Help-seeking behaviors and reasons for help seeking reported by a representative sample of women victims of intimate partner violence in New Zealand. *Journal of Interpersonal Violence*, *25*(5), 929-951. https://doi.org/10.1177/0886260509336963

Fanslow, J. L., & Robinson, E. M. (2011). Sticks, Stones, or Words? Counting the prevalence of different types of intimate partner violence reported by new zealand women. *Journal of Aggression, Maltreatment & Trauma*, *20*(7), 741-759. https://doi.org/10.1080/10926771.2011.608221

Fantuzzo, J., Boruch, R., Beriama, A., & Atkins, M. (1997). Domestic violence and children: Prevalence and risk in five major U.S. cities. *Journal of the American Academy of Child & Adolescent Psychiatry*, *36*(1), 116-122. https://doi.org/10.1097/00004583-199701000-00025

Fantuzzo, J., & Fusco, R. (2007). Children's direct exposure to types of domestic violence crime: A population-based investigation. *Journal of Family Violence*, *22*, 543-552. https://doi.org/10.1007/s10896-007-9105-z

Fantuzzo, J. W., DePaola, L. M., Lambert, L., Martino, T., Anderson, G., & Sutton, S. (1991). Effects of interparental violence on the psychological adjustment and competencies of young children. *Journal of Consulting and Clinical Psychology*, *59*(2), 258-265. https://doi.org/10.1037/0022-006X.59.2.258

Fantuzzo, J. W., Fusco, R. A., Mohr, W. K., & Perry, M. A. (2007). Domestic violence and children's presence: A population-based study of law enforcement surveillance of domestic violence. *Journal of Family Violence*, *22*(6), 331-340. https://doi.org/10.1007/s10896-007-9080-4

Fergusson, D. M., Boden, J. M., & Horwood, L. J. (2006). Examining the intergenerational transmission of violence in a New Zealand birth cohort. *Child Abuse & Neglect*, *30*(2), 89-108. https://doi.org/10.1016/j.chiabu.2005.10.006

Fleming, T. M., Watson, P. D., Robinson, E., Ameratunga, S., Dixon, R., Clark, T. C., & Crengle, S. (2007). *Violence and New Zealand Young People: Findings of Youth2000 - A National Secondary School Youth Health and Wellbeing Survey*. Auckland, New Zealand: The University of Auckland

Frye, V. (2007). The informal social control of intimate partner violence against women: Exploring personal attitudes and perceived neighborhood social cohesion [https://doi.org/10.1002/jcop.20209]. *Journal of Community Psychology*, *35*(8), 1001-1018. https://doi.org/https://doi.org/10.1002/jcop.20209

Fusco, R. A., & Fantuzzo, J. W. (2009). Domestic violence crimes and children: A population-based investigation of direct sensory exposure and the nature of involvement. *Children and Youth Services Review*, *31*(2), 249-256. https://doi.org/10.1016/j.childyouth.2008.07.017

Graham-Bermann, S. A., & Levendosky, A. A. (1997). The Social Functioning of Preschool-Age Children Whose Mothers Are Emotionally and Physically Abused. *Journal of Emotional Abuse*, *1*(1), 59-84. https://doi.org/10.1300/j135v01n01_04

Grych, J. H., Fincham, F. D., Jouriles, E. N., & McDonald, R. (2000a). Interparental conflict and child adjustment: testing the mediational role of appraisals in the cognitive-contextual framework. *Child Development*, *71*(6), 1648-1661. https://doi.org/10.1111/1467-8624.00255

Grych, J. H., Jouriles, E. N., Swank, P. R., McDonald, R., & Norwood, W. D. (2000b). Patterns of adjustment among children of battered women. *Journal of Consulting and Clinical Psychology*, *68*(1), 84-94. https://doi.org/10.1037/0022-006X.68.1.84

Hamby, S. L., Finkelhor, D., Turner, H., & Ormrod, R. (2011). Children's exposure to intimate partner violence and other family violence. *National survey of children's exposure to violence*.

Howell, K. H. (2011). Resilience and psychopathology in children exposed to family violence. *Aggression and Violent Behavior*, *16*(6), 562-569. https://doi.org/10.1016/j.avb.2011.09.001

Jaffe, P., Sudermann, M., & Geffner, R. (2000). Emerging Issues for Children Exposed to Domestic Violence. *Journal of Aggression, Maltreatment & Trauma*, *3*, 1-7. https://doi.org/10.1300/J146v03n01_01

Jaffe, P., Wilson, S., & Wolfe, D. (1988). Specific assessment and intervention strategies for children exposed to wife battering: Preliminary empirical investigations. *Canadian Journal of Community Mental Health*, *7*, 157-163.

Jolliffe Simpson, A. D., Joshi, C., & Polaschek, D. L. L. (2021). Predictive validity of the dyra and safvr: New Zealand police's family violence risk assessment instruments. *Criminal Justice and Behavior*, *48*(10), 1487-1508. https://doi.org/10.1177/0093854821997525

Knapp, J. F. (1998). The impact of children witnessing violence. *Pediatric Clinics of North America*, *45*(2), 355-364.

Koenen, K. C., Moffitt, T. E., Caspi, A., Taylor, A., & Purcell, S. (2003). Domestic violence is associated with environmental suppression of IQ in young children. *Development and Psychopathology*, *15*(2), 297-311. https://doi.org/10.1017/s0954579403000166

Lambie, I. (2018). *Every 4 minutes: A discussion paper on preventing family violence in New Zealand*. Auckland, New Zealand: Office of the Prime Minister's Chief Science Advisor

Lamers-Winkelman, F., Schipper, J. C. D., & Oosterman, M. (2012). Children's physical health complaints after exposure to intimate partner violence. *British Journal of Health Psychology*, *17*(4), 771-784. https://doi.org/10.1111/j.2044-8287.2012.02072.x

Lakens, D. (2013). Calculating and reporting effect sizes to facilitate cumulative science: a practical primer for t-tests and ANOVAs. *Frontiers in psychology*, *4*, 863.

Lawson, M., Speidel, R., Fondren, K., Cummings, E. M., & Valentino, K. (2020). Intimate partner violence and maltreated preschoolers' internal representations of conflict. *Journal of Family Psychology*, *34*(4), 425-435. https://doi.org/10.1037/fam0000627

Lazarus, K., & Signal, T. (2013). Who will help in situations of intimate partner violence: exploring personal attitudes and bystander behaviours. *International Journal of Criminology and Sociology*. https://doi.org/10.6000/1929-4409.2013.02.20

Levendosky, A., Huth-Bocks, A., Semel, M., & Shapiro, D. (2002). Trauma symptoms in preschool-age children exposed to domestic violence. *Journal of Interpersonal Violence*, *17*, 150-164. https://doi.org/10.1177/0886260502017002003

Malinosky-Rummell, R., & Hansen, D. J. (1993). Long-term consequences of childhood physical abuse. *Psychological Bulletin*, *114*(1), 68-79. https://doi.org/10.1037/0033-2909.114.1.68

McCloskey, L. A., & Stuewig, J. (2001). The quality of peer relationships among children exposed to family violence. *Development and Psychopathology*, *13*(1), 83-96. https://doi.org/10.1017/s0954579401001067

McFarlane, J. M., Groff, J. Y., O'Brien, J. A., & Watson, K. (2003). Behaviors of children who are exposed and not exposed to intimate partner violence: An analysis of 330 black, white, and hispanic children. *Pediatrics*, *112*(3), e202-e207. https://doi.org/10.1542/peds.112.3.e202

Ministry of Justice. 2021. *New Zealand Crime and Victims Survey: Key findings and descriptive statistics.* Wellington: Ministry of Justice

Mittal, P., & Carrington, H. (2012). *They didn't see it. They were sleeping: The voices of children who live with family violence as heard by KIDshine.* 2Shine. https://www.2shine.org.nz/wp-content/uploads/KIDshine-they-were-sleeping-2012.pdf

Morris, A, J Reilly, S Berry and R Ransom (2003) *The New Zealand National Survey of Crime Victims, 2001*. Wellington: Ministry of Justice.

Murphy, C., Paton, N., Gulliver, P., & Fanslow, J. (2013). *Understanding connections and relationships: Child maltreatment, intimate partner violence and parenting*. Auckland, New Zealand: New Zealand Family Violence Clearinghouse, University of Auckland

Murrell, A. R., Christoff, K. A., & Henning, K. R. (2007). Characteristics of domestic violence offenders: Associations with childhood exposure to violence. *Journal of Family Violence*, *22*(7), 523-532.

New Zealand Police. (n.d). *Police approach to family harm.* https://www.police.govt.nz/advice-services/family-violence/family-harm-approach-resources

Olofsson, N., Lindqvist, K., Gådin, K. G., Bråbäck, L., & Danielsson, I. (2011). Physical and psychological symptoms and learning difficulties in children of women exposed and non-exposed to violence: a population-based study. *International Journal of Public Health*, *56*(1), 89-96. https://doi.org/10.1007/s00038-010-0165-0

Pagliaro, S., Pacilli, M. G., & Baldry, A. C. (2020). Bystanders' reactions to intimate partner violence: An experimental approach. *European Review of Social Psychology*, *31*(1), 149-182.

Palmer, J. E., Nicksa, S. C., & McMahon, S. (2016). Does who you know affect how you act? The impact of relationships on bystander intervention in interpersonal violence situations. *Journal of Interpersonal Violence*, *33*(17), 2623-2642. https://doi.org/10.1177/0886260516628292

Paterson, J., Carter, S., Gao, W., Cowley-Malcolm, E., & Iusitini, L. (2008). Maternal intimate partner violence and behavioural problems among Pacific children living in New Zealand. *Journal of Child Psychology and Psychiatry*, *49*(4), 395-404. https://doi.org/10.1111/j.1469-7610.2007.01841.x

Patton, M. Q. (1990). *Qualitative evaluation and research methods*. SAGE Publications inc.

Peled, E. (1998). The experience of living with violence for preadolescent children of battered women. *Youth & Society*, *29*(4), 395-430. https://doi.org/10.1177/0044118x98029004001

Penone, G., & Spaccatini, F. (2019). Attribution of blame to gender violence victims: A literature review of antecedents, consequences and measures of victim blame. *Psicologia Sociale*, *14*(2), 133-164.

Planty, M. (2002). *Third-party involvement in violent crime, 1993-99*. US Department of Justice, Office of Justice Programs, Bureau of Justice.

Richardson-Foster, H., Stanley, N., Miller, P., & Thomson, G. (2012). Police intervention in domestic violence incidents where children are present: Police and children's perspectives. *Policing & Society*, *22*(2), 220-234. https://doi.org/10.1080/10439463.2011.636815

Saltzman, K. M., Holden, G. W., & Holahan, C. J. (2005). The psychobiology of children exposed to marital violence. *Journal of Clinical Child and Adolescent Psychology*, *34*(1), 129-139. https://doi.org/10.1207/s15374424jccp3401_12

Saxton, M. D., Jaffe, P. G., Dawson, M., Olszowy, L., & Straatman, A. L. (2020). Barriers to police addressing risk to children exposed to domestic violence. *Child Abuse & Neglect*, *106*, 104554. https://doi.org/10.1016/j.chiabu.2020.104554

Sharman, S. J., Coomber, K., Mayshak, R., Curtis, A., Hyder, S., Walker, A., Liknaitzky, P., & Miller, P. (2019). Situational characteristics uniquely associated with children's exposure to intimate partner violence. *Journal of Interpersonal Violence*, 088626051988100. https://doi.org/10.1177/0886260519881006

Spilsbury, J. C., Belliston, L., Drotar, D., Drinkard, A., Kretschmar, J., Creeden, R., Flannery, D. J., & Friedman, S. (2007). Clinically Significant Trauma Symptoms and Behavioral Problems in a Community-based Sample of Children Exposed to Domestic Violence. *Journal of Family Violence*, *22*(6), 487-499. https://doi.org/10.1007/s10896-007-9113-z

Stafford, L., Harkin, J.-a., Rolfe, A., Burton, J., & Morley, C. (2021). Why having a voice is important to children who are involved in family support services. *Child Abuse & Neglect*, *115*, 104987.

Stairmand, M., Polaschek, D. L. L., & Dixon, L. (2019). Perpetrators' Perspectives on Family Violence: An Event Process Model. *Journal of Interpersonal Violence*, 088626051987344. https://doi.org/10.1177/0886260519873440

Stanley, N., Miller, P., Richardson-Foster, H., & Thomson, G. (2010). *Children and families experiencing domestic violence: Police and children's social services' responses*. Preston, England: NSPCC, University of Central Lancashire

Stith, S. M., Rosen, K. H., Middleton, K. A., Busch, A. L., Lundeberg, K., & Carlton, R. P. (2000). The Intergenerational Transmission of Spouse Abuse: A Meta-Analysis. *Journal of Marriage and Family*, *62*(3), 640-654. https://doi.org/https://doi.org/10.1111/j.1741-3737.2000.00640.x

Stover, C. S., Van Horn, P., & Lieberman, A. F. (2006). Parental Representations in the Play of Preschool Aged Witnesses of Marital Violence. *Journal of Family Violence*, *21*(6), 417-424. https://doi.org/10.1007/s10896-006-9038-y

Sturge-Apple, M. L., Skibo, M. A., & Davies, P. T. (2012). #8 Impact of parental conflict and emotional abuse on children and families. *Partner Abuse*, *3*(3), 1-11. https://doi.org/10.1891/1946-6560.3.3.e8

Taaka, S. S., Jolliffe Simpson, A. D., & Polaschek, D. L. L. (2020). Can coercive controlling behaviours be used to predict the recurrence of intimate partner violence? Police Science, 5(2), 19-20. https://www.anzsebp.com/wp-content/uploads/2021/04/ANZSEBP-Summer20-21-LowRes-Final2-min.pdf

Taylor, E., Banyard, V., Grych, J., & Hamby, S. (2019). Not all behind closed doors: examining bystander involvement in intimate partner violence. *Journal of Interpersonal Violence*, *34*(18), 3915-3935. https://doi.org/10.1177/0886260516673629

Wareham, J., Boots, D. P., & Chavez, J. M. (2009). A test of social learning and intergenerational transmission among batterers. *Journal of Criminal Justice*, *37*(2), 163-173. https://doi.org/https://doi.org/10.1016/j.jcrimjus.2009.02.011

Wijaya, C. N., Roberts, L. D., & Kane, R. T. (2021). Attribution theory, bystander effect and willingness to intervene in intimate partner violence. *Journal of Interpersonal Violence*, *0*(0), 0886260521997945. https://doi.org/10.1177/0886260521997945

Wilcox, P., & Gialopsos, B. M. (2014). Crime-Event Criminology: An Overview. *Journal of Contemporary Criminal Justice*, *31*(1), 4-11. https://doi.org/10.1177/1043986214552601

Wood, S., & Sommers, M. (2011). Consequences of intimate partner violence on child witnesses: A systematic review of the literature. *Journal of child and adolescent Psychiatric Nursing*, *24*, 223-236. https://doi.org/10.1111/j.1744-6171.2011.00302.x

Ybarra, G. J., Wilkens, S. L., & Lieberman, A. F. (2007). The influence of domestic violence on preschooler behavior and functioning. *Journal of Family Violence*, *22*(1), 33-42. https://doi.org/10.1007/s10896-006-9054-y

Yoshihama, M., Hammock, A. C., & Baidoun, F. (2021). Analysis of bystander behavior towards intimate partner violence via peerformance. *Journal of Interpersonal Violence*, 886260520985482. https://doi.org/10.1177/0886260520985482

Appendix A

Police Recorded Variables

There were 14 variables that were recorded by Police, and therefore did not need to be manually coded. The recorded variables that were used for statistical analyses are outlined below.

Variable	Description
Victim age	Age of victim at time of episode
Victim ethnicity	Ethnic identity of the victim
Aggressor age	Age of aggressor at time of episode
Aggressor ethnicity	Ethnic identity of the aggressor
Location type	The type of physical location where the episode took place, recorded by police as either a private dwelling, a public place or occasionally unknown.
Property damage	A binary variable (using a yes/no tick box system) based on attending officers' appraisals of whether property damage had occurred.
Sexual harm	A binary variable (using a yes/no tick box system) based on attending officers' appraisals of whether sexual harm had occurred.
Threats of harm	A binary variable (using a yes/no tick box system) based on attending officers' appraisals of whether threats of harm had occurred.
Physical harm	A binary variable (using a yes/no tick box system) based on attending officers' appraisals of whether physical harm had occurred.
Verbal harm	A binary variable (using a yes/no tick box system) based on attending officers' appraisals of whether verbal harm had occurred.
Child Involvement	A binary variable (using a yes/no tick box system) based on attending officers' appraisals of whether a child was involved
Alcohol consumed prior	A binary variable (using a yes/no tick box system) based on attending officers' appraisals of whether it was evident that alcohol had been consumed prior to the episode taking place
Drugs consumed prior	A binary variable (using a yes/no tick box system) based on attending officers' appraisals of whether it was evident that drugs had been consumed prior to the episode taking place
Firearms present	A binary variable (using a yes/no tick box system) indicating whether attending officers detected the presence of any firearms at the episode location

Appendix B

Coding Dictionary

Narrative Summary Data:

Aggressor R/Ship to child	The relationship of the aggressor to the child. In cases where there is more than one child involved, refer to the child most directly impacted or most commonly mentioned in the report. 0 – Father 1 – Mother 2 – Mother's Partner 3 – Mother's Ex Partner 4 – Other (Specify)	
Victim R/Ship to child	The relationship of the victim to the child. In cases where there is more than one child involved, refer to the child most directly impacted or most commonly mentioned in the report. 0 – Father 1 – Mother 2 -Father's Partner 3 - Grandmother 4 – Other (Specify)	
Child-related trigger	Is the incident related to the child(ren)? 0 – No 1 – Parenting Dispute 2 – Custody Dispute	 e.g., how and when to administer medicine, whether or not to give a pacifier, or who's turn it is it change a nappy e.g., argument regarding violation of agreed custody arrangements
Police Concerns for child	Do the police have any concerns regarding the safety of the child (from all forms of harm including neglect)?	0 – No 1 – Yes

	Check the police safety plan for the following questions: Question: Has there been a direct offence (physical/sexual) against a child/young person present? Question: Do you believe the children/young persons present are suffering from neglect and have immediate safety concerns for the child/young person? If the answer to any of these is yes, code 1. If the answer to any of these, is no, but it is specifically stated elsewhere that the police are concerned for the wellbeing of the child, also code this as 1. If the answer is no and there is no mention of police concerns for the child, code as 0	
Was OT contacted	Check the police safety plan for the answer to this question: Question: Where there are immediate safety concerns for the child/young person as a result of a direct offence or neglect, call Ministry for Children, Oranga Tamariki and your local Child Protection team if available. Have you called Oranga Tamariki - Ministry for Children? 0 – No 1 – Yes If the answer to this question is No, but elsewhere in the report they state that they did contact OT, then code as 1 – Yes.	‘

ISR Data

Primary Caregiver of child	The legal custodian of the child: 0 - Parents (Together) 1 - Parents (Separated) 2 – Mother 3 - Father 4 – Grandparent(s) 5 - Aunt	E.g., “M's grandson, L, lives with the pair. M has full custody of L.”

History of OT for Whānau	Is there a history of involvement from OT for the whānau? 0 – Not Clear/ Not Reported 1 – Yes Only code as "Yes" if there has been previous involvement by OT in relation to the children in this particular episode, not involvement related to children no longer in parent care or parent involvement when they were children.	E.g., "."
History of MH for Caregiver	0 – Not Clear/ Not Reported 1 – Yes	E.g., "Historical substance dependence" "Historical MH for Mum, A&D issues, previous trauma and anxiety concern"
History of MH for Children	0 – Not Clear/ Not Reported 1 – Yes Any behavioural concerns regarding the children can be considered MH concerns. This includes concerns from teachers regarding school/kindergarten behaviour (acting out, theft, aggression, inappropriate sexual behaviour)	"Diagnoses of Anorexia Nervosa, Mood disorder and parent-child relational problem"

Pulled from both narrative and ISR data

IF there are multiple children, Child 1 should be the child referred to in the above coding. Other children are then inserted as Child 2, Child 3 etc.

Child age	This information should be available from the ISR database. If not on ISR database: this can sometimes be deduced from the information given. In the example of the child being picked up from day-care, we know that this child is aged 5 or under (because otherwise they would be attending school)	E.g., "The couple have a 7-year-old son who lives with them" "She was on her way to pick up her grandson from day-care"

Child ethnicity	This information can be collecting using the ISR database online. If not available on the ISR database: If the victim and aggressor are the biological parents of the child and they have the same ethnicity, the child ethnicity can be deduced from this.	E.g., "
Child gender	This information should also be available via the ISR database. If not available on the ISR database: Code as Male if the child is described as: Male, Boy, Son, Brother, Grandson, Nephew or referred to as "he" Code as Female if the child is described as: Female, Girl, Daughter, Sister, Granddaughter, Niece, or referred to as "she".	E.g., "They have a 5-year-old daughter" 'When we spoke to the child, she was shy but appeared well looked after"
Child as protector	1- Protecting Self 2- Protecting Others Where information about the role of the child is given in the police report, but this child did not hold the role of protector, code this as a 0. If child role information is not available or unclear, code this as UK (Unknown) If the child is recorded as being unable to have this role – such as if they were not present or asleep, then this is coded as N/a (Not applicable)	E.g., Hiding during episode E.g., Trying to get between aggressor and victim, phoning the police
Child as pawn	1- Child snatched/grabbed This does not include episodes where a child was removed from the arms of a dangerous person or removed from the scene for their own safety. 2- Aggressor refusal to hand over child	E.g., Aggressor refused to give the child back to the victim

		despite court agreed custody arrangements, or the aggressor used the child as a 'shield' against authorities and would not put the child down.
	3- Aggressor made threats to / regarding child in order to manipulate victim Where information about the role of the child is given in the police report, but the child did not hold the role of pawn, code this as a 0. If child role information is not available or unclear, code this as UK (Unknown) If the child is recorded as being unable to have this role – such as if they were not present or asleep, then this is coded as N/a (Not applicable)	E.g., the aggressor asked a preschool age child; "what are you going to do when *victim* is gone?" as a means of frightening the victim
Child as collateral damage	1- Child being held by victim during episode 2- Emotional impact on child is clearly stated in the police report. 3- Child was awoken from sleep by the incident/police arrival/in order to move them for their safety 4- Child was unintentionally injured during the episode Where information about the role of the child is given in the police report, but the child did not hold the collateral damage role, code this as a 0. If child role information is not available or unclear, code this as UK (Unknown)	E.g., The child was crying or reported being extremely frightened E.g., The aggressor threw a speaker at the victim, and it hit the child in the leg

	f the child is recorded as being unable o have this role – such as if they were ot present or asleep, then this is oded as N/a (Not applicable)	