



PATHWAYS TO HEALING:

RESEARCH FOUNDATION OF PROTECTIVE FACTORS FOR SURVIVORS OF DOMESTIC VIOLENCE

CHARLYN HARPER BROWNE, PHD

CENTER FOR THE STUDY OF SOCIAL POLICY

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Pathways to Healing: Protective Factors for Survivors of Domestic Violence¹ is a framework that was created to provide a research and practice-informed, strengths-based strategy that can be used to guide programs, policies, services, and interventions aimed at two key outcomes:

1. **Mitigating the effects of adult and child survivors' experience of or exposure to domestic violence and**
2. **Promoting the healthy development, well-being, and healing of both adult and child survivors.**

In addition, “using a protective factors approach can be a positive way to engage families because it focuses on families’ strengths and what they are doing right.”²

Five protective factors form the basis of this framework, specifically: **safer and more stable conditions; social connections; resilience and a growth mindset; nurturing parent-child interactions; and social and emotional abilities.**

Although these factors may be addressed independently in various interventions for survivors, Pathways to Healing is the first effort to delineate an organized set of protective factors specifically for adult and child survivors of domestic violence. This set of protective factors underscores the importance of strengthening individual and relational attributes and experiences, as well as environmental and social conditions, that help to support adult and child survivors’ personal growth and development and build family and community contexts that are safe, nurturing, and free from the threat of harm and danger.

This report presents an overview of the body of knowledge from which Pathways to Healing: Protective Factors for Survivors of Domestic Violence was derived. The overview is followed by an explanation of each protective factor within the framework.

WHAT ARE PROTECTIVE FACTORS?

Interest in protective factors grew out of early resilience research that sought to explain why children who were exposed to the same risk factors had different results; some were able to thrive while others suffered poor outcomes. Researchers found that there are various characteristics and conditions which are “protective” in that they are associated with positive outcomes in the context of high risk.³ In describing the role of protective factors, it was found that “they make a more profound impact on the life course of children who grow up under adverse conditions than do specific risk factors or stressful life events.”⁴

Protective factors “make a more profound impact on the life course of children who grow up under adverse conditions than do specific risk factors or stressful life events.”

Dr. Emmy E. Werner,
Resilience Researcher

Protective factors have commonly been defined in response to risk factors with respect to mitigating the negative effects of risks or helping to avoid their negative effects altogether.^{5,6,7} For example, the National Research Council and Institute of Medicine described protective factors as “characteristic(s) at the biological, psychological, family, or community level that (are) associated with a lower likelihood of problem outcomes or that reduce the negative impact of a risk factor on problem outcomes.”⁸

The Center for the Study of Social Policy asserted that healthy development and well-being cannot be explained simply as preventing, mitigating, or eliminating risk factors. Thus, protective factors are conceived as interrelated conditions and characteristics of individuals, families, communities, or the larger society that (a) prevent or reduce the effect of exposure to risk factors and stressful life events, (b) maximize potential and build family strengths and a family environment that promotes healthy development and well-being, and (c) help individuals and families negotiate difficult circumstances and fare better in school, work, and life.^{9,10} Consistent with this premise, the U.S. Department of Health and Human Services, Administration for Children and Families, Children’s Bureau indicated “protective factors are conditions or attributes in individuals, families, communities, or the larger society that mitigate or eliminate risk in families and communities, thereby increasing the health and well-being of children and families.” (para. 1)¹¹

It is important to note that, in addition to conceiving protective factors as individual and interpersonal characteristics and conditions, current definitions of protective factors also focus on characteristics and conditions within communities and the larger society that reduce the impact of risk factors and promote the likelihood of positive outcomes.

“Promoting the health and well-being of children... requires extending interventions beyond the family or individual levels. ... In other words, risk and protective factors have to be considered beyond the four walls of parenting to embrace the social, economic, and political forces that affect families and communities.”¹²

For example, community conditions such as the availability of and access to resources and supports, as well as institutional regulations and social policies that relieve some of the stressors of parenting (e.g., family leave policies), are protective factors that can help to reduce family stressors, meet families’ needs, and contribute to a healthy family environment.

WHAT DOES IT MEAN THAT PROTECTIVE FACTORS ARE INTERRELATED AND HAVE A CUMULATIVE EFFECT?

Protective factors are interrelated in that they are mutually reinforcing and can influence each other.¹³ This suggests that experiences that can strengthen one of the protective factors can help to build other protective factors, as well. For example:

- Survivors’ strong social and spiritual connections create opportunities to establish safer and more stable conditions.
- When survivors experience safer and more stable conditions, they have evidence that their circumstances can change. Realizing this can strengthen their belief in their own power to manage things for themselves and their children. This is the basis of resilience.
- Having resilience helps to reduce the stress survivors experience. Less stress can contribute to more nurturing parent-child interactions.
- Nurturing parent-child interactions can strengthen social and emotional abilities in both the parent and child.

Protective factors also can have a cumulative effect. Studies have identified several independent protective factors that can be helpful in buffering the effects of risk factors and promoting healthy outcomes. For example, many studies have demonstrated that the presence of at least one stable and supportive caregiver in a child’s life can lessen the impact of traumatic experiences like domestic violence.¹⁴ Studies also have shown that the “accumulation of protection”—that is, the presence of multiple protective factors—has a more substantial positive cumulative effect within high-risk environments.^{15,16} Findings about the interrelated and cumulative nature of protective factors highlight the importance of implementing interventions and practice strategies that target multiple protective factors, rather than single protective factors.¹⁷

WHY IS IT IMPORTANT TO FOCUS ON PROTECTIVE FACTORS FOR SURVIVORS OF DOMESTIC VIOLENCE?

Adults who experience domestic violence and children who experience maltreatment or are exposed to domestic violence are considered to be in risk because they already experience violence.¹⁸ They may also be exposed to conditions that put them further at risk for other possible negative outcomes.¹⁹ Thus, the trauma of experiencing or witnessing domestic violence can result in adult and child survivors losing personal, interpersonal, social, and economic resources that are important to their sense of well-being, such as: (a) basic needs (e.g., shelter, finances); (b) personal characteristics (e.g., hope, self-esteem); (c) social support (e.g., help from family, friends); (d) services (e.g., schools, healthcare); and (e) conditions (e.g., being employed, marital status).²⁰ For example, adult survivors may experience physical injuries and depression; become cut-off from family and friends; begin to doubt their ability to care for themselves or their children; and have a reduced sense of self and feel hopeless due to the abuse they are experiencing.

Children who are exposed to domestic violence are at risk of a range of harmful outcomes including psychological problems (e.g., depression, anxiety, and attachment disorders), negative emotional reactions (e.g., fear, worry, sadness, powerlessness), behavioral problems (e.g., aggression, non-compliance, delinquency, poor academic performance), and health problems (e.g., negative wiring of a developing brain, diabetes, obesity, cardiac problems).^{21,22,23,24,25,26} “Domestic and family violence, and its resultant impacts, can have a constant and enduring presence in the lives of children. Children are often left to deal with pervasive feelings of fear, powerlessness, and sadness on their own as they are reluctant or unable to break the silence that shrouds this issue.” (p. 189)²⁷

A common aspect of interventions and services for adult and child survivors is managing, reducing, or eliminating risk factors in order to ensure survivors’ safety.²⁸ While it is necessary and important to reduce or eliminate risk, threat, and danger to survivors, alone it is not sufficient to ensure that they are on a trajectory of positive and productive outcomes. Valuing, building, and sustaining

protective factors is essential, as well.²⁹

“Research suggests that effective intervention services for vulnerable families should focus on reducing modifiable risk factors and promoting protective factors. . . . By building on family strengths, families are better placed to cope with stress, which in turn can lead to a reduced incidence of child abuse and neglect. . . . In a strengths-based intervention approach that focuses on building protective factors, parents themselves can identify and build on their own strengths to help enhance their parenting capacity. Promoting protective factors may also help professionals working with families to build more positive relationships with clients.”³⁰

Valuing, building, and sustaining protective factors refers to practitioners intentionally and actively working to address various conditions, characteristics, and circumstances at the individual, relationship, community, and societal/policy levels in ways that help to promote and support the well-being of adult and child survivors. Building protective factors: (a) enhances survivors’ skills, personal characteristics, knowledge, and relationships; (b) fosters opportunities that can contribute to positive outcomes and can offset risk factors; (c) enables survivors to draw upon their family and community strengths and resources to address the challenges they are experiencing; and (d) helps them to recognize and mobilize their own strengths that can lead to a sense of renewed hope and optimism that empowers them to do better in school, work, and life.^{31,32,33}

***“When you start with problems you get programs.
When you start with strengths you get possibilities.”***

**Lupe Serrano,
Former Executive Director
of Casa de Esperanza**

WHAT IS WELL-BEING, HOW IS IT RELATED TO A PROTECTIVE FACTORS APPROACH, AND HOW IS IT IMPACTED BY DOMESTIC VIOLENCE?

Studies show that individuals who are experiencing or witnessing domestic violence, or feel threatened that it will occur, report a lower sense of well-being as compared to individuals who are not.^{34,35} Improving the well-being of adult and child survivors of domestic violence is a primary goal of employing a protective factors approach when working with survivors. Although there is no consensus about a single definition of well-being, there is general agreement that well-being involves an ongoing process of self-evaluation based on one's current perceptions of their unique conditions and circumstances. Many researchers agree that well-being involves physical, social, emotional, economic, and environmental dimensions and includes a combination of life satisfaction, frequent positive emotions, infrequent negative emotions, functioning well, and navigating life's challenges in a healthy and effective way.^{36,37,38} These well-being dimensions can be negatively impacted by the direct experience of or exposure to domestic violence; four examples follow. The examples also point to the importance of building survivors' protective factors—safer and more stable conditions; social connections; resilience and a growth mindset; nurturing parent-child interactions; and social and emotional abilities—in order to reduce the negative impacts of domestic violence on survivors' well-being.

1. Financial stability, housing stability, safety, and access to healthcare and other community supports have been found to contribute to children's and adults' social, emotional, physical, economic, and environmental well-being.^{39,40,41} Domestic violence may include economic abuse in that survivors are prevented from working or going to school, their employment or housing may be sabotaged, or their credit may be ruined. These tactics can lead to loss of employment and benefits (e.g., healthcare), lack of safety and stability, homelessness, financial ruin, a weakened belief in their ability to provide for and nurture their children, and a diminished sense of well-being.^{42 43}
2. Studies have shown that an individual's sense of self-efficacy can affect their physical, social, and emotional well-being.^{44,45,46,47} Self-efficacy is defined as an individual's belief that they are competent, willing, and able to carry out the behaviors necessary to achieve their goals. "Self-efficacy reflects confidence in the ability to exert control over one's own motivation, behavior, and social environment."⁴⁸ Survivors' self-efficacy and ability to be resilient can be damaged as a result of the harm caused by domestic violence. "A DV survivor's self-efficacy is often diminished not only by the abuser's pattern of ridicule, control, and domination, but also by prior community responses that have not only failed to help but that may have been revictimizing or made the situation worse."⁴⁹
3. Personal agency is related to self-efficacy. Personal agency refers to an individual's sense of control over their actions for a given purpose. Both the belief in one's competence and ability to accomplish a goal (i.e., self-efficacy) and the belief in one's power to attain the goal through action (i.e., personal agency) are important for well-being.⁵⁰ Personal agency can be influenced—positively or negatively—by one's social, cultural, and spiritual connections and by whether one has a growth mindset. Studies have demonstrated the influence of social support in affecting survivors' sense of personal agency which can influence their decision to stay in or attempt to leave an abusive relationship. For example, family, friends, community, or cultural attitudes can affect how survivors feel about themselves (e.g., empowered vs. shame for "allowing" themselves to be abused); social attitudes can also communicate a willingness or unwillingness to offer support to survivors.^{51,52,53}
4. Studies have shown that an individual's sense of hope or hopefulness is a predictor of well-being because it is the motivation behind an individual's willingness to do what is necessary to maintain or restore well-being.^{54,55,56,57,58} Hope is defined as the belief that (a) one will have positive experiences, or (b) a potentially threatening situation will not occur, or (c) a negative situation will eventually result in a positive outcome.⁵⁹ Stated another way, hope is the belief in a positive tomorrow based in one's sense that they have the ability to create the

positive tomorrow⁶⁰; thus, hope is reflective of an individual's resilience and growth mindset. "Hope is influenced by the perceived availability of successful pathways related to goals. The pathways component refers to a sense of being able to generate successful plans to meet goals."⁶¹ Hope and self-efficacy are interrelated. Thus, hope may be diminished in DV survivors via the same tactics that damage survivors' sense of self-efficacy.

HOW DO SURVIVORS DEFINE THEIR OWN SUCCESS? HOW DO PRACTITIONERS DEFINE SUCCESS FOR SURVIVORS?

The Full Frame Initiative conducted a multi-year study (2012-2014) of how different stakeholders—survivors, practitioners, policy advocates, and funders—define success for survivors of domestic violence. Overall, results showed that “survivors understand and get to success differently than other stakeholders. . . believe that they do,” with the greatest difference being between survivors and practitioners.⁶² Specifically, analysis of survivors' responses during workshops and interviews revealed the following consistent themes:

- Survivors conceived success as being connected to family, friends, community members, a force greater than oneself, and even the person perpetrating the violence.
- Survivors also conceived success as feeling valuable, useful, and validated by others; coming to a turning point in life; and achieving something new.
- Survivors credited themselves, family members, and their spirituality or faith as the major supports for and contributors to their success.
- Contrary to practitioners' perspectives, survivors rarely reported separating from the abusive relationship as an indicator of success; and receiving services was rarely mentioned as a factor that contributed to success.

A multi-state survey of and conversations with DV advocates about what positive outcomes survivor service programs can hope to achieve—beyond ending domestic violence—revealed the following consensus:

“The role of victim service agencies is to promote

survivors' and their families' well-being. It is not enough that a survivor be physically safe from their abuser if that safety comes at the cost of the survivor's sovereignty and health. Therefore, safety was not viewed as the ultimate outcome of victim service programs. Further, advocates and survivors had stressed that psychological well-being was also an insufficient objective, and put too much emphasis on changing the survivor rather than social conditions. As a result of these numerous conversations, social and emotional well-being was agreed upon by advocates across numerous and geographically diverse states as the ultimate goal of DV victim service programs.”⁶³

A study of children's experiences of domestic violence found that children's needs—which could be regarded as indicators of success—were: (a) experiencing physical safety and emotional well-being for themselves and their families; (b) having opportunities to talk with someone who could help them understand what they were experiencing; (c) being listened to and taken seriously; (d) having adults respond proactively, appropriately, and in non-judgmental ways; (e) being informed about and included in the decision-making process; and (f) having meaningful, trusting, and proactive relationships.

FROM WHAT FRAMEWORK DID THE PROTECTIVE FACTORS FOR SURVIVORS OF DOMESTIC VIOLENCE DERIVE?

The Strengthening Families Approach and Protective Factors Framework (the Strengthening Families Approach), developed by the Center for the Study of Social Policy (CSSP) in 2003, was examined as a possible protective factors framework for adult and child survivors of domestic violence. CSSP's Strengthening Families Approach is a research-informed, strengths-based initiative designed (a) to prevent child abuse and neglect in families of children birth to 5 years old and (b) to help keep families strong and on a pathway of healthy development and well-being.⁶⁴ At the foundation of the Strengthening Families approach are five interrelated protective factors that studies show are related to a decreased likelihood of child abuse and neglect, as well as to the promotion of family strengths and healthy child development. The

five Strengthening Families protective factors are (a) parental resilience, (b) social connections, (c) knowledge of parenting and child development, (d) social and emotional competence of children, and (e) concrete support in times of need.

Supported by both the research literature and practice evidence, it seemed relevant to adapt this body of work to focus on the unique needs and challenges of adult and child survivors of domestic violence. The result was the Protective Factors for Survivors of Domestic Violence framework that includes five interrelated protective factors that studies show promote and support adult and child

survivors' personal growth and development; they are:

- Safer and more stable conditions
- Social connections
- Resilience and a growth mindset
- Nurturing parent-child interactions
- Social and emotional abilities

Table 1 provides a crosswalk between the Protective Factors for Survivors of Domestic Violence and the Strengthening Families Protective Factors. The section that follows summarizes the research foundation of and provides an explanation about each protective factor for survivors of domestic violence.

TABLE 1. CROSSWALK OF PROTECTIVE FACTORS FOR SURVIVORS OF DV AND THE STRENGTHENING FAMILIES PROTECTIVE FACTORS

PROTECTIVE FACTORS FOR SURVIVORS OF DV	STRENGTHENING FAMILIES PROTECTIVE FACTORS
<p>Safer conditions are those in which there is a lower risk of physical, sexual, or emotional fear and harm—such as threats, intimidation, humiliation, stalking, economic oppression, coercion, and isolation—in one's physical and social environments and relationships.</p> <p>More stable conditions refer to more predictable, consistent, and positive experiences in one's physical and social environments and relationships.</p>	<p>Concrete support in times of need refers to identifying and accessing various resources that address a family's needs and help to minimize the stress caused by challenges and adversity. Assisting parents to receive needed support helps to ensure that they and their family receive the basic necessities everyone deserves in order to grow (e.g., healthy food, safe housing), as well as specialized medical, mental health, social, educational, or legal services.</p>
<p>Social connections refer to sustained relationships with people, institutions, the community, or a higher power that promote a sense of connectedness and positive identity which result in a sense of trust, belonging, faith, hope, and a belief that one matters.</p>	<p>Social connections refer to healthy, sustained relationships with people, institutions, the community, or a force greater than oneself that promote a sense of trust, belonging, faith, hope, and a belief that one matters.</p>
<p>Resilience is the process of positive adaptation and personal growth—that is, coping, problem solving, becoming more resourceful, and functioning well—in response to adversity.</p> <p>Growth mindset refers to the optimistic belief that one's abilities, circumstances, and challenges can be improved through a commitment to change and consistent effort.</p>	<p>Parental resilience refers to the process of managing stress and functioning well in response to adversity. Resilience occurs when an individual is able to successfully adapt despite current or past trauma. In addition to coping, problem solving, becoming more resourceful, and functioning well—the outcome of resilience is positive change and growth.</p>

TABLE 1 CONT. CROSSWALK OF PROTECTIVE FACTORS FOR SURVIVORS OF DV AND THE STRENGTHENING FAMILIES PROTECTIVE FACTORS

PROTECTIVE FACTORS FOR SURVIVORS OF DV	STRENGTHENING FAMILIES PROTECTIVE FACTORS
<p>Nurturing parent-child interactions occur when a parent or parent-figure consistently responds to and meets the needs of a child in an attuned, affectionate, patient, and caring manner that creates a mutually close, loving, and sustained emotional bond between a parent and child and that lays the foundation for the child's healthy interactions with others.</p>	<p>Knowledge of parenting and child development refers to parents, and those who work with children, increasing their understanding of infant and child development (e.g., the importance of nurturing relationships and safe, stable environments) in order to apply this knowledge in day-to-day interactions with young children or in developing programs and policies that are designed to help young children flourish in all domains of development.</p>
<p>Social and emotional abilities are the knowledge, attitudes, and abilities necessary for children and adults to understand, express, and manage emotions in socially appropriate and culturally meaningful ways; set and achieve positive goals; feel and show empathy for others; establish and maintain positive adult and peer relationships, and make responsible decisions—all in the context of family, community, and culture.</p>	<p>Social and emotional competence of children refers to the developing capacity of the child from birth through 5 years of age to form close and secure adult and peer relationships; experience, regulate, and express emotions in socially and culturally appropriate ways; and explore the environment and learn—all in the context of family, community, and culture. Parents and other caregivers must have these skills themselves in order to model, use, and support the development of social and emotional competence in children.</p>

HOW ARE THE PROTECTIVE FACTORS FOR SURVIVORS OF DOMESTIC VIOLENCE DEFINED?

The protective factors for survivors of domestic violence are individual and relational attributes, as well as environmental and social conditions, that: (a) help to reduce the impact of domestic violence, (b) build individual strengths, (c) promote healthy development, and (d) establish environments that support the safety, healing, and well-being of adult and child survivors of domestic violence. An environment of ongoing violence and coercive control can make it more difficult to build adult and child survivors' protective factors because the person using violence compromises their safety and often undermines their sources of social support, access to resources, sense of self-worth, parent-

child relationship, and the adult survivor's parenting role. In addition, social conditions, such as poverty, can contribute to and support the domestic violence offender's efforts to undermine survivors.

Yet, there are multiple pathways for reinforcing, building, and sustaining protective factors—even under adverse circumstances—and facilitating a family's journey to safety, healing, and well-being. The five protective factors for survivors of domestic violence are: (a) safer and more stable conditions; (b) social connections; (c) resilience and a growth mindset; (d) nurturing parent-child interactions; and (e) social and emotional abilities.

SAFER AND MORE STABLE CONDITIONS

Experiencing safer and more stable conditions is the most basic protective factor for adult and child survivors of domestic violence.^{65,66} Safer and more stable conditions help to reduce the effects of domestic violence by decreasing survivors' level of exposure to danger, increasing the adult survivor's sense of control over their own life and the lives of their children, and contributing to adult and child survivors' health and well-being.^{67,68,69} In this context, safety refers to being freer from threats, intimidation, humiliation, stalking, economic oppression, coercion, isolation, and physical, sexual, and emotional harm in one's physical and social environments and relationships. It is essential for survivors and practitioners to jointly discuss survivors' rights, safety options, community resources, and ways to remove obstacles that may interfere with safer conditions. The goal is to ensure that adult and child survivors' safer conditions do not provide just a temporary respite but longer-term stability.

Achieving more stable conditions enhances and sustains safety. Unpredictable and unstable conditions can negatively affect adult and child survivors' choices, decision-making, problem-solving, attention, focus, sense of security, self-efficacy, personal agency, social interactions, emotional responses, parenting skills, and access to help. Stability refers to having predictable and consistent positive experiences in one's physical and social environments and relationships including housing, employment, finances, transportation, childcare, education, and interpersonal interactions. Stable conditions—especially housing and economic stability for the family and educational stability for children—can help to buffer the impact of stressful and traumatic experiences on adult and child survivors.⁷⁰

"In an ideal educational setting, students know what to expect, have their educational needs met, and feel connected to the school community. Such a setting gives students the educational stability to learn and make progress toward a high school diploma and beyond. However, for many youth involved in the foster care system, frequent school changes, gaps in enrollment, and delayed transfer of records can create a disjointed educational experience that has the potential to affect them their entire lives."⁷¹

SOCIAL CONNECTIONS

Studies show that social support is a significant factor in reducing the impact of trauma, because it can provide multiple forms of help and assistance.^{72,73} In the context of domestic violence, numerous studies have shown that social support positively impacts survivors' well-being.^{74,75,76}

"For women who are battered, a social support network may operate directly to protect against future violence, or indirectly by enabling women to use resources and strategies more effectively. . . (Research) found that women who are battered who reported higher levels of social support were more likely to cooperate with the criminal prosecution of their abusive partner. . . (Other research) found that battered women with less access to social support over time were at greater risk of abuse two years after an initial contact than women who had stronger support systems."⁷⁷

Adult and child survivors' healthy and constructive relationships positively impact their healing and well-being. In the context of protective factors for survivors of domestic violence, social support includes social, cultural, and spiritual connections. Social, cultural, and spiritual connections refer to sustained relationships with people, institutions, the community, or a higher power that promote a sense of connectedness and positive identity which results in feelings of trust, belonging, faith, hope, and a belief that one matters. Social, cultural, and spiritual connections are valuable resources for survivors because they provide:

1. Concrete support (e.g., physical and mental health services, restraining orders, safe housing, transportation, financial assistance, links to jobs)
2. Affiliative support (e.g., friendship, companionship; connectedness with others who share similar circumstances)
3. Emotional support (e.g., non-judgmental advice; empathy; validation of self-worth)
4. Informational support (e.g., parenting guidance; recommendations for health care services or child care and education)
5. Cultural support (e.g., shared identity, norms, traditions, a sense of community, and ways of understanding the world)

6. Spiritual support (e.g., hope and encouragement; a sense of meaning and purpose to life)
7. traditions, a sense of community, and ways of understanding the world)
8. Spiritual support (e.g., hope and encouragement; a sense of meaning and purpose to life)

Persons who use violence often rely on isolation and limiting survivors' options for help as a form of coercive control.⁷⁸ Healthy social, cultural, and spiritual connections can help reduce the isolation and negative effects of domestic violence. When adult and child survivors experience these types of supports and a sense of connectedness, they tend to feel valued by people who show that they care what happens to them; seek timely assistance, opportunities, and resources from people and institutions they trust; and begin to have an optimistic view of the future.⁷⁹ Studies have demonstrated that parents' positive social connections help relieve some of the demands and stress on the parent,⁸⁰ provide concrete assistance in times of need,⁸¹ support the development of resilience,⁸² and increase a parent's well-being.⁸³ These effects can foster nurturing and consistent parenting behavior that promotes secure attachments in young children.^{84,85}

Research also indicates that the most important resource protecting children from the negative effects of exposure to violence is a consistent, strong relationship with a caring, supportive, attuned, nurturing adult who provides positive guidance, promotes high expectations, and sets developmentally appropriate limits, rules, and monitoring.⁸⁶ Positive connections with children mean being emotionally present, empathizing with them, and paying attention to and being sincerely interested in them. Positive connections enable children to: (a) feel secure and not alone, even when the adults they trust are not physically present; (b) believe that they matter and are loved; and (c) have a positive self-concept, high self-esteem, and self-confidence.⁸⁷

RESILIENCE AND A GROWTH MINDSET

The physical and emotional impact of domestic violence that adult and child survivors experience

should never be minimized. But for many survivors, alongside the harm they are experiencing are personal strengths, social support, spiritual connectedness, and the potential to persevere and meet their challenges; that is, resilience. Resilience is defined as positive adaptation; that is, managing stress and functioning well despite or in response to significant life challenges, adversity, or trauma.⁸⁸ Resilience involves coping, problem solving, becoming more resourceful, and functioning in a competent manner. Resilience can be learned and developed,⁸⁹ leads to positive change and growth, and varies across individuals, families, cultures, social norms, and situations in how it is displayed.^{90,91}

Having opportunities to explore, practice, and demonstrate resilience can help parents and children to see evidence of their ability to face challenges and adversity, make good choices, and feel more in control of what happens to them.⁹² Demonstrating resilience has a positive effect on the parent, the child, and the parent-child relationship. By managing stressors, parents feel better and can provide more nurturing attention to their children, which helps their children to form a strong emotional bond with the parents which, in turn, fosters the development of resilience in children when they experience stressors.

Displaying resilience requires a growth mindset—that is, the optimistic belief that one's abilities, circumstances, and challenges can be improved through a commitment to change and consistent effort.⁹³ A growth mindset enables adult and child survivors to understand that, although domestic violence is a reality in their lives, they do not have to suffer forever. Research has shown that what individuals believe about themselves and their experiences can either enable or stunt their growth; that an individual's self-perception profoundly affects the way they lead their life.⁹⁴ Helping adult and child survivors of domestic violence to cultivate a growth mindset and demonstrate resilience involves creating conditions in which survivors receive affirmative messages about their capabilities; see evidence of their ability to make good choices about addressing challenges and adversity; and internalize a belief in their own power to change and feel more in control of what happens to them (i.e., personal agency).⁹⁵

When adult survivors have a sense of purpose, take positive action, internalize a belief in their own power to change, and feel more in control, they are able to provide more nurturing attention to their children, which in turn fosters children's own resilience and growth mindset in the face of stressors. Being resilient and having a growth mindset strengthens survivors' optimism and belief in their own power to make choices that promote what they want for themselves and their children, and helps them to heal from the effects of domestic violence.

NURTURING PARENT-CHILD INTERACTIONS

The single most important resource for promoting children's healthy development, well-being and healing is having at least one loving, nurturing, and protective adult in their life.⁹⁶ Nurturing parent-child interactions occur when a parent or parent-figure consistently responds to and meets the needs of a child in an attuned, affectionate, patient, and caring manner.⁹⁷ These interactions forge a mutually close, loving, and sustained emotional bond between a parent and child which lays the foundation for the child's healthy interactions with others.⁹⁸ The well-being of adult and child survivors is inextricably linked; thus, by strengthening nurturing parent-child interactions, both will benefit and thrive.

Key parenting behaviors that are essential for establishing, maintaining, and strengthening the parent-child bond, irrespective of the child's age, include providing for basic physical needs; building and maintaining trust; demonstrating love, care, and affection; and negotiating and resolving family conflicts.⁹⁹ The outcome of consistently engaging in these behaviors is a bond of respect, trust, love, and affection between the parent and the child which will enhance the child's interactions with others. Furthermore, consistent and reliable access to a supportive and attuned adult in their lives buffers children from the negative impact of stress and traumatic experiences like domestic violence.

Promoting and understanding nurturing parent-child interactions in the context of domestic violence is a complex matter. Adult survivors' sense of self-efficacy, ability to meet their child's needs and quality of the parent-child bond may be compromised by the offenders' pattern of control, coercion, intimidation or isolation or by systems,

organizations or service providers that fail to provide needed help. Thus, reducing abuse and other stressors in the family, promoting conditions in which parents can protect their children from harm, developing or deepening skills of parents, and providing families access to needed resources and supports all provide a foundation for responsive, nurturing parent-child interactions. In a study of children's experiences and needs related to domestic violence, it was found that "interventions supporting the mother-child relationship were recognized as being critical to children's long-term recovery and were largely seen as helpful by children. Children who received this support appreciated that they were now able to talk to their mothers about their experiences and feelings and envisage a positive future together."¹⁰⁰

SOCIAL AND EMOTIONAL ABILITIES

Social and emotional skills enable adults and children to effectively connect, interact, communicate and collaborate with other people; express negative emotions in ways that don't harm others; advocate for one's own needs; make healthy choices; change their behavior in order to achieve a desired outcome; and consider the consequences of their thoughts, emotions, and behavior before acting.^{101,102} The quality of experiences parents, teachers, coaches, and other caregivers provide for children can either strengthen or undermine the development of social and emotional skills.¹⁰³

There is increasing evidence that promoting social and emotional development in both children and adults should be a priority for practitioners who work with young children and their families.¹⁰⁴ This is an even greater imperative when serving children and their families who are experiencing highly stressed conditions and circumstances. A growing body of research has shown that early adverse environments and experiences place children at risk for poor cognitive, social, and emotional development across the lifespan.^{105,106} Social and emotional development facilitates the development of adult and child survivors' healthy self-concept, self-esteem, relationships with others, and conflict resolution and decision-making skills. Building a strong social and emotional foundation will help survivors be better equipped to handle stress and persevere through significant challenges and adversity in their lives.¹⁰⁷

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