



family violence:

children get hurt

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Children's development is affected by their experiences. Some experiences will set them up well to reach their potential, and others will cause stumbling blocks along the way.

Sometimes it's obvious that children are being harmed by their experiences; maybe they have bruises or broken bones. But these more obvious physical injuries are not the only ways in which children can be harmed. Children, including babies, can be harmed by growing up with family violence; children do not have to be hit, to be hurt.

Childhood exposure to family violence is associated with poor outcomes in many areas of development,¹ and creates significant costs, both socially and economically.²

This article focuses on the potential impact of childhood exposure to family violence, now recognised as a particular type of child maltreatment.³ It aims to support those working with children and their whānau to increase understanding about the issues many children face, and the possible long term effects of this. Family violence affects

other family members too, but the focus here is on the often underestimated impacts on children.

This is an important discussion because what babies and children experience affects them, their future, and our society. When a child experiences violence, the repercussions affect all of us.

What is family violence?

Definitions of childhood exposure to family violence vary, but usually include seeing, hearing, intervening in, or experiencing the results of physical or sexual assaults between their caregivers,⁴ sometimes called intimate partner violence.

Importantly, children do not have to actually see the violence occurring in order to be harmed by it; awareness of violence, or potential violence, can also contribute to harm.⁵

1. Schechter et al., 2019
2. WHO, 2005, cited by Wilson et al., 2014
3. Kimber et al., 2018
4. Kimber et al., 2018; Evans et al., 2008
5. MacMillan & Wathen, 2014, cited by McTavish et al., 2016



How much of a problem is it in NZ?

NZ family violence figures are available from a variety of sources. Some of these are provided below. These figures should be read and used with caution; different definitions, timeframes and research methods produce different results. However, there is widespread agreement in the literature that the rate of family violence is under-reported.⁶

- NZ has the highest prevalence of partner physical or sexual assault among OECD countries.⁷
- 70% of family violence in NZ occurs in households that include children.⁸
- When those in the Dunedin study were interviewed at the age of 26 years, almost a quarter (24%) reported threats or actual violence from one parent to another while they were growing up.⁹
- In one study 14% of the children reported that they had witnessed adults physically hurting others, and almost half had witnessed yelling or swearing at each other, in the previous year alone.¹⁰
- The Christchurch Health & Development study found that almost 40% reported at least one violent act by at least one of their parents.¹¹
- Responding to family violence consumes 41% of frontline police officers' time.¹²
- 7,262 children were involved in protection order applications in 2016.¹³

Alcohol abuse is a leading risk factor for family violence.

Associated Risk Factors

There are a number of other risk factors which are often associated with children's exposure to family violence, some of these are outlined below.

Families experiencing violence are often experiencing other risks, including child maltreatment, unstable housing arrangements, and living in areas of higher social deprivation.¹⁴ Despite the increased frequency among those facing disadvantage, family violence occurs across all socioeconomic (SES) levels.

Consistent evidence over several decades indicates that drinking alcohol by one or both partners, makes family violence more likely, and likely to be more severe.¹⁵ Heavy and binge drinking have been particularly highlighted.¹⁶ Both local and international research indicate that alcohol abuse is a leading risk factor for family violence.¹⁷

Different forms of violence are strongly connected to each other including suicide, child maltreatment, community violence and family violence. Children experiencing family violence are at increased risk of also being exposed to other forms of violence.¹⁸ People who use violence in one situation are more likely to also use violence in other situations.¹⁹ For example, adults who are violent towards their partner are more likely to also be violent towards their children.²⁰ This means that children exposed to family violence often experience other forms of child maltreatment as well.²¹



Violence during pregnancy

Women are more likely to be subject to family violence when they are pregnant, than at other times.²² In fact, almost a third of family violence starts or becomes more severe during pregnancy.²³

Prenatal exposure to family violence can affect children in a number of ways. Sometimes these effects are direct such as a physical assault to the stomach. Other effects can be indirect, for example, exposure to the increased stress hormones of their mothers.²⁴

Unsurprisingly, mothers report higher stress levels when subject to violence during their pregnancy, and they also have higher levels of cortisol.²⁵ Prenatal exposure to significant maternal stress can affect babies' developing stress system and may alter the expression of genes involved in brain development.²⁶ This can have lasting effects on psychological wellbeing, including behaviour difficulties and mental illness.²⁷

Family violence leads to an increased risk of babies being born preterm, of low-birthweight, and being small for gestational age (SGA),²⁸ increasing the risk of poor health outcomes. Other consequences of violence during pregnancy include the baby needing intensive care, miscarriage, and death of the mother.²⁹

It can also negatively affect how mothers see their baby,³⁰ impacting on their interactions and relationship after birth.

6. Superu, 2017
7. Organisation for Economic Co-operation and Development, 2013
8. Families Commission, 2009, cited by Superu, 2017
9. Martin et al., 2006
10. Murphy et al., 2013, cited by Superu, 2017
11. Fergusson & Horwood, 1998, cited by Martin et al., 2006
12. New Zealand Family Violence Clearinghouse, 2017a
13. New Zealand Family Violence Clearinghouse, 2017b
14. Jouriles et al., 2008 & Turner et al., 2012, cited by Cameron et al., 2012; Vu et al., 2016
15. Wilson et al., 2014
16. Foran & O'Leary, 2008, cited by Wilson et al., 2014
17. Kyriacou et al., 1999, cited by Choi et al., 2012; Martin et al., 2006
18. McDonald et al., 2019; National Centers for Injury Prevention and Control, 2016
19. National Centers for Injury Prevention and Control, 2016
20. Herrenkohl et al., 2008, cited by National Centers for Injury Prevention and Control, 2016
21. Kiesel et al., 2016
22. Jasinski, 2004, cited by Howell et al., 2016
23. Lewis et al., 2001, and, Lewis et al., 2005, cited by Abel et al., 2019
24. Donovan et al., 2016
25. Chambliss, 2008, and Han & Stewart, 2014, cited by Mueller & Tronick, 2019
26. National Scientific Council on the Developing Child, 2005/2014
27. Radtke et al., 2011; Levendosky et al., 2016
28. Donovan et al., 2016
29. Howell et al., 2016
30. Bunston et al., 2017



This is of concern as the quality of relationship a baby has with his or her parents affects many areas of their development.³¹

Family violence in early childhood

Research on the effects of family violence has largely focused on older children, with less attention to the potential impact on younger children.³² However, as more research occurs it's become clear that even very young children can be affected.

The ways in which babies and young children are affected depends partly upon the developmental stage they're at. In infancy, for example, family violence can disrupt babies' sense of safety in the world and interfere with attachment to their parents.³³

During the toddler years, family violence can affect development as a child begins to learn how to manage their emotions and behaviour.³⁴

Babies and toddlers are very dependent upon their caregivers, often their mothers, and are especially vulnerable when their mother is threatened.³⁵ Importantly, they are not only worried by the threat of violence itself but can pick up on their mother or caregiver's fear and become upset by this.³⁶

Babies and young children under 5 years of age are much more likely to be exposed to violence compared with older children.³⁷ This is likely due to spending more time in their home and in the care of their parents or whānau.³⁸ Young children are much less able to leave the violent situation or protect themselves.³⁹

Babies exposed to family violence are more likely to have problems with eating, and sleeping,⁴⁰ as well as increased irritability, screaming, crying, and poorer overall health.⁴¹ They may be more fearful and aggressive, or lose skills they had before, for example going to the toilet, or their use of language.⁴²

Violence towards a mother can affect her children indirectly, by altering how she behaves towards them.⁴³ In situations of family violence, parents are likely to be less sensitive to their children's needs and more hostile towards them.⁴⁴ Both of these indicate that the child's needs may not be well met. Whilst it may be obvious that parent-child interactions are disrupted during incidents of violence, it's important to realise that it also affects their interactions before and after the violence too.⁴⁵

What aspects of development can be affected?

Exposure to family violence can have adverse effects on child development.⁴⁶ Some of these effects are described below.

1. Cognitive ability and school achievement

Family violence can impact children's school attendance and achievement in a number of ways.

Children's IQ and ability to think and learn can be affected.⁴⁷ Several studies found links between domestic violence and lower IQs among affected children during their primary school years.⁴⁸ As with other types of adversity, the greater the exposure, the more likely a child is to be harmed by it. This is known as a dose-response effect.

Even getting to school can be difficult. School attendance can be affected when children stay home to protect their

mothers, for example.⁴⁹ This has important implications because children missing school may start falling behind, and a supportive school environment has the potential to be protective against the risks children are facing elsewhere.

When at school, children's ability to concentrate and learn may be limited because of the stress of what's happening at home, or they may not be getting enough sleep.⁵⁰ If families move often, or children are being cared for by others, they may move from school to school which further disrupts their learning.⁵¹



Achievement levels on reading and maths tests, have been found to be lower among those exposed to family violence.⁵²

Some coping strategies that might be helpful in the home environment, such as tuning out noise, may get in the way of learning at school.⁵³

While the greatest impact is felt by children directly involved, family violence effects can also spill-over and indirectly affect peers and classmates.⁵⁴

2. Effects on the brain

Exposure to family violence can affect many areas of the brain, and is associated with physical changes to it.⁵⁵

During infancy and childhood, the Hypothalamic-Pituitary-Adrenal (HPA) axis, a vital stress response system,⁵⁶ is developing making it vulnerable to adversity. The stress associated with family violence can dysregulate the

31. National Scientific Council on the Developing Child, 2004

32. Mueller & Tronick, 2019

33. Narayan et al., 2017

34. Narayan et al., 2017

35. Fantuzzo et al., 1997, cited by Holmes, 2013

36. Schechter et al., 2019

37. Briggs-Gowan et al., 2019

38. Howell et al., 2016

39. Bunston et al., 2017

40. Layzer et al., 1986, cited by Mueller & Tronick, 2019

41. Alessi & Hearn, 2007, cited by Mueller & Tronick, 2019

42. Mueller & Tronick, 2019

43. Teicher & Vitaliano, 2011

44. Sherrill et al., 2017, cited by Harold & Sellers, 2018

45. Mueller & Tronick, 2019

46. Holden, 2003, cited by Kiesel et al., 2016

47. Mueller & Tronick, 2019

48. Koenen et al., 2003; Abel et al., 2019

49. Cunningham & Baker, 2004, cited by Kiesel et al., 2016

50. Buckley et al., 2007 and Peek-Asa et al., 2007, cited by Artz et al., 2014; Koenen et al., 2003, cited by Kiesel et al., 2016

51. Baker & Cunningham, 2009, cited by Artz et al., 2014

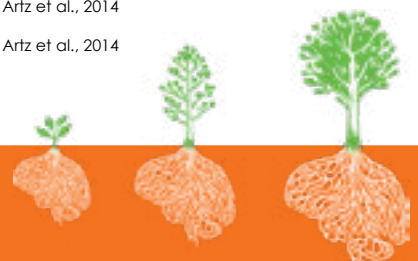
52. Kiesel et al., 2016

53. Baker & Cunningham, 2009, cited by Artz et al., 2014

54. Artz et al., 2014

55. McTavish et al., 2016

56. Mueller & Tronick, 2019



developing HPA axis, resulting in either elevated or lowered levels of cortisol.⁵⁷

Changes during this critical time of development may be lasting, and harder to treat if healthy functioning was never established.⁵⁸ This is one of the ways in which, despite the absence of direct physical harm, family violence nevertheless harms children's development.⁵⁹

This is important to understand because while the effects of family violence on our youngest children have often been underestimated, their rate of development makes them particularly vulnerable to adversity during this time.⁶⁰

Brain changes may be adaptive responses to highly stressed environments, but problematic in other environments.⁶¹

The fact that children are not directly physically hurt does not mean that they are not physically affected.

Different forms of adversity appear to specifically impact the brain regions involved in processing the experience. For example, one study found that seeing family violence was associated with changes in grey matter volume in parts of the visual cortex, as well as the pathway connecting the limbic system (involved in processing emotions) and visual systems.⁶²

Some research suggests that there are sensitive periods where particular brain regions are most susceptible to adverse effects occurring during that time.⁶³ These sensitive periods tend to be related to periods of high brain development.

There can be a delay between exposure to various forms of maltreatment, and noticeable differences in children's brains, known as a silent period.⁶⁴ This has important implications for the support of children, as lack of observable immediate effects may lead adults to mistakenly believe that a child has been unaffected or unharmed.

It's not only physical violence that affects children's brain development; verbal abuse between their caregivers can be harmful too.⁶⁵

3. Social and emotional wellbeing

Adults recall their childhood exposure to family violence as distressing. Almost two thirds report being "a lot" or "extremely" upset. Their levels of distress were not affected by their age at the time, and nor did it differ whether the violence was threatened or actually occurred.⁶⁶ This is worth noting, as it's not just violent events themselves that affect children, but fear of such events happening is in itself harmful.

Children exposed to family violence are more likely to have poor mental health.⁶⁷ Some of the areas in which these challenges can occur are discussed below.

The likelihood of psychosocial problems is increased,

including internalising, externalising and trauma symptoms.⁶⁸ Internalising issues include fearfulness, sadness, anxiety, depression and suicidality.⁶⁹ Externalising difficulties include behaviours such as aggression, hyperactivity, and defiance, that affect the external environment.⁷⁰

Social skills can also be affected, making friendships and other relationships more difficult.⁷¹ These social difficulties can affect many types of relationship, including with siblings, parent-child relationships, peers at school, as well as later romantic relationships.⁷² The risk of bullying is increased.⁷³

If children have not had the opportunity to develop skills for handling a range of feelings, and they've seen that adults deal with difficulties by using violence, they may be poorly equipped to deal with life's inevitable frustrations, and see violence as a useful tool.⁷⁴

Exposure to family violence in childhood contributes to intergenerational cycles of violence. While not all affected children will perpetuate family violence when they are adults, they are more likely to do so.⁷⁵ This risk can be reduced by early and effective supports.



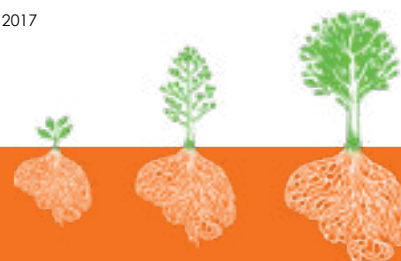
For adults working with children and their families, looking at children's individual reactions is important as there is no one way that children respond, and no one way to support them.⁷⁶

4. Physical health

Most research on the effects of family violence has focused on mental health, but there can also be physical health effects.⁷⁷ The fact that children are not directly physically hurt does not mean that they are not physically affected.

Children who've been exposed to family violence have more eating, sleeping and pain complaints,⁷⁸ as well as

57. Koss & Gunnar, 2018
58. Mueller & Tronick, 2019
59. Abel et al., 2019
60. Tarullo & Gunnar, 2006, cited by Mueller & Tronick, 2019
61. Teicher & Samson, 2016
62. Teicher & Samson, 2016
63. Choi et al., 2012
64. Anderson & Teicher, 2004
65. Mueller & Tronick, 2019
66. Martin et al., 2006, p. 35
67. Rhoades, 2008, cited by Harold & Sellers, 2018
68. Evans et al., 2008
69. Merikangas & Swanson, 2010, cited by Harold & Sellers, 2018, p. 377; Martin et al., 2006
70. Artz et al., 2014
71. Hungerford et al., 2012, cited by Howell et al., 2016
72. Harold & Sellers, 2018
73. Ingram et al., 2020
74. Ingram et al., 2020; Narayan et al., 2017
75. Kimber et al., 2018
76. Meijer et al., 2019
77. Harold & Sellers, 2018
78. Lamers-Winkelmann et al., 2012, cited by Artz et al., 2014



reduced growth, increased tiredness, stomach issues, and headaches.⁷⁹

Other consequences include increased risk-taking behaviour in adolescence and adulthood, such as smoking, substance misuse, and early sexual activity.⁸⁰

The well-known Adverse Childhood Experiences (ACE) studies have found many links between various forms of childhood adversity, which includes family violence, and later poor physical health.⁸¹ It's important to note that those who experience one type of adversity are frequently also exposed to other types as well, and that exposure to many forms of adversity increases the risk of poor health outcomes more than exposure to one type of adversity alone.⁸² Some of the health outcomes include heightened risk of heart disease and auto-immune diseases in adulthood.⁸³

"By far the largest proportion of burden of disease due to ACEs arises from the cumulative effect of chronic exposure to multiple adversities whose lifelong consequences may start to become apparent only many years after exposure."⁸⁴

Understanding something of the research in this area is powerful; without it, it would be too easy to miss the effects of exposure to family violence in childhood, and their sometimes much later health effects.

At its most extreme,
family violence results in
death.

In reality, physical health, mental health, brain development, the ability to get on with others, and to think and learn are all highly interconnected; impact in one of these areas is also likely to affect other areas of development.

Timing of Effects

Children don't always show the effects of family violence immediately. As can occur with other forms of early adversity, adverse effects are not necessarily apparent in the short term but may appear later in development, following a silent period. The time frame may be months or years later.⁸⁵ This makes it easy to miss the association between family violence and later issues, and caution is needed before assuming a child will not be affected because no short-term effects can be seen.⁸⁶

Longitudinal studies help us see how this unfolds. In one such study children who were exposed to family violence before four years of age initially had similar levels of aggressive behaviour to children who were never exposed. However, by the time the children were eight years old, the levels of aggressive behaviour were significantly higher among those exposed to frequent family violence.⁸⁷ This is supported by many other studies which found that as time passed the effects of family violence become stronger.⁸⁸

It has been suggested that there is a need for early intervention to reduce the risk of later aggressive behaviour even if children do not appear to have problems initially.⁸⁹

Family violence can lead to death

At its most extreme, family violence results in death. NZ figures show that in the seven years from January 2009 to December 2015, 92 deaths occurred as a result of violence between current or former partners.⁹⁰ Many of these tragedies involved children.

This can have a devastating impact on children as with a single act they can lose both parents.⁹¹ The trauma of losing one parent through death, and the imprisonment of the other may be further added to if children are involved in court proceedings.⁹²

It can also mean that a child's home becomes a crime scene, limiting access to personal items, including those that could help comfort them at a very difficult time such as favourite toys or items that belonged to their deceased parent.⁹³ Other consequences can include repeated disruptions across all areas of their lives, including where they live and go to school.

Two things that increase a child's risk are seeing their parent killed, and previous violence exposure. Both of these factors are relatively common among exposed children; a large proportion of children (83%) who lost a parent through family violence had previously been exposed to violence or neglect in their home, which was often only discovered after the death of their parent.⁹⁴



It's important to note that "even very young children can 'take in' and remember details of a murder" despite their family thinking that they are too young, or were asleep, at the time.⁹⁵ If it's incorrectly assumed that a child has not been exposed, opportunities to support them to process their experiences may be missed.

Children themselves are also at risk of being seriously physically hurt or killed in family violence incidents.⁹⁶ When a child dies as a result of violence, there has usually been

79. Harold & Sellers, 2018
80. Harold & Sellers, 2018; McTavish et al., 2016
81. Felitti et al., 1998
82. Barboza, 2018
83. Dong et al., 2004; Dube et al., 2009
84. Anda et al., 2010, p. 95
85. Vu et al., 2016
86. Artz et al., 2014; Vu et al., 2016
87. Holmes, 2013
88. Vu et al., 2016
89. Holmes, 2013
90. Family Violence Death Review Committee, 2017, cited by New Zealand Family Violence Clearinghouse, 2017a
91. Jaffe et al., 2012
92. Eth & Pynoos, 1994, cited by Jaffe et al., 2012
93. Armour, 2011, cited by Alisic et al., 2017
94. Alisic et al., 2017
95. Alisic et al., 2015, and, Gaensbauer et al., 1995, cited by Alisic et al., 2017, p. 8
96. Jaffe & Juodis, 2006, cited by Jaffe et al., 2012; McTavish et al., 2016



previous violence between their parents.⁹⁷ It is therefore important for those working with the adult victim to also consider the safety and needs of any children.⁹⁸

What about siblings?

Violence between their parents can affect the relationships between brothers and sisters in a family, leading to more conflict and aggression between them.⁹⁹

Some conflict between siblings is to be expected and provides opportunities to learn about and practice resolving disagreements.¹⁰⁰ However, ongoing sibling conflict increases likely behaviour problems.¹⁰¹

Individual differences between siblings influence their outcomes following exposure to family violence.¹⁰² This means that no assumptions can be made about the effects on a child based on their siblings' responses. One child in a family may seem to be doing quite well, while their sister or brother struggles.

Sibling differences also mean that the support needs of one child may not be the same as those of their sister or brother. How each child experiences and processes their experiences may differ.

One aspect of family violence that has been largely overlooked is the effects of witnessing violence towards a sibling, rather than towards a parent. One of the few studies exploring this found an increased risk for mood, anxiety and dissociative disorders.¹⁰³

Pets can be harmed too

For many children, pets form an important part of their family, and they gain many benefits from these relationships.¹⁰⁴ Close bonds with pets can help children when they are stressed, for example.¹⁰⁵

Family violence often includes harming or killing animals.¹⁰⁶ Children exposed to family violence are at higher risk of also being exposed to maltreatment of pets, which further increases their risk of poor outcomes.¹⁰⁷

In NZ research with clients of Women's Refuge, a third of mothers reported that their children had witnessed threats to harm or kill an animal. A further quarter reported their children had seen an animal hurt or killed.¹⁰⁸ International research suggests this figure may be higher, with more than half the children exposed to family violence also exposed to animal cruelty.¹⁰⁹

Women and their children often remain in a violent relationship because of safety concerns about their pets.¹¹⁰



Family support including stable connections with caring adults, pro-social peers and strong school support and community connections are protective, increasing the likelihood of positive outcomes.¹¹² The presence of these relationship helps enhance resilience.

Children can be protected from serious consequences when their emotional needs are understood early on, they have stable, nurturing relationships and access to skilled professional supports as needed.¹¹³

It's important to note that the dose-response effect applies to protective factors too. So the more experience children have of safe, nurturing, consistent relationships, the greater the chance they will enjoy positive outcomes, despite the risks they face.¹¹⁴

Individual Differences

Children can be affected regardless of the degree of exposure, but those facing high levels of family violence are at greater risk.¹¹⁵ This includes babies, who tend to have more trauma symptoms with increasing exposure.¹¹⁶

The age at which children are first exposed to family violence, as well as the cumulative amount of exposure, increase the risk of externalizing behaviour difficulties.¹¹⁷

A child's own make-up also plays a role, "it is...not only what happened and when it happened to the young child that determines long-term outcome, it matters quite clearly who that child is, constitutionally".¹¹⁸ A child's genes contribute to differences in their stress responses systems. Their genes interact with experiences so that the same genes associated with positive outcomes for children raised in nurturing environments, can contribute to higher

Family violence often includes harming or killing animals.

What can help? Protective factors

It is important to note that, as with other forms of adversity, some children and adolescents function well despite exposure to family violence.¹¹¹

97. Bourget et al., 2007, CAADA, 2014, and, Jaffe et al., 2012, cited by Callaghan et al., 2015
98. Jaffe et al., 2012
99. Ingram et al., 2020; Dunn, 2002, cited by Harold & Sellers, 2018
100. Caspi, 2012, and Dunn, 1983, cited by Ingram et al., 2020
101. Ingram et al., 2020
102. Jenkins et al., 2005, cited by Harold & Sellers, 2018
103. Teicher & Vitaliano, 2011
104. Hawkins et al., 2017
105. Melson et al., 1997, cited by McDonald et al., 2019
106. Roguski, 2012
107. McDonald et al., 2019
108. Roguski, 2012
109. Hawkins et al., 2019
110. Roguski, 2012
111. Artz et al., 2014
112. National Centers for Injury Prevention and Control, 2016; Yule et al., 2019
113. National Scientific Council on the Developing Child, 2008/2012
114. Bethell et al., 2019
115. Artz et al., 2014
116. Bogat et al., 2006, cited by Mueller & Tronick, 2019
117. Graham-Bermann & Perkins, 2010, cited by Mueller & Tronick, 2019
118. Schechter et al., 2019, p. 224



risk of poor health outcomes for those raised in harsh environments.¹¹⁹

Boys and girls have a similar risk of developing adjustment problems following exposure to family violence, however how they react might be different.¹²⁰ For example, boys are more likely to develop externalising behaviour problems, girls are more likely to develop Internalising issues. Both girls and boys can have either, or both, types of issues.

Conclusions

Many children in Aotearoa are exposed to violence between their parents. Despite this violence not being aimed at children, they are still harmed by it. Absence of direct physical harm is not the same as the absence of all harm.

Multiple areas of development can be affected, including brain development, school achievement, mental and physical health. The adverse effects can be long-lasting. Being exposed to additional risks, such as poverty and other forms of violence further harms children's development.

Importantly, it's not only the incidents of violence, but also living with the threat of violence that is harmful to children.

The more children are exposed, the more likely they are to be harmed. So the earlier family violence is identified and appropriate supports put in place for children and their whānau, the more this potential for harm will be reduced.

Family violence is everyone's business, we all have a role to play in our whānau and communities. "Children who are exposed to intimate partner violence are at significant risk for lifelong negative outcomes, and the consequences are felt widely in society."¹²¹



If you found this article useful, here are others that may be of interest

Why Should We Care? The Abuse and Neglect of Children in New Zealand

<https://brainwave.org.nz/article/why-should-we-care-the-abuse-and-neglect-of-children-in-new-zealand/>

Understanding Adolescents Who Have Experienced Early Adversity

<https://brainwave.org.nz/article/understanding-adolescents-who-have-experienced-early-adversity/>

Adult Health: What's childhood got to do with it?

<https://brainwave.org.nz/article/adult-health-whats-childhood-got-to-do-with-it/>



If you are concerned about family violence, these organisations can help:

Police 111

Oranga Tamariki 0508 FAMILY or 0508 326 459

Free from any phone 24 hours a day, every day or see their website for more information

Shine helpline 0508 744 633

Free from any phone 9am to 11pm every day.

Women's Refuge: 0800 REFUGE or 0800 733 843

Free from any phone, 24 hours a day, every day.

Shakti: 0800 SHAKTI or 0800 742 584

Providing specialist cultural services for African, Asian and middle eastern women and their children. 24 hours a day, every day.

It's Not Ok: 0800 456 450

Information line free from any phone, 9am to 11pm every day.

119. Koss & Gunnar, 2018

120. Harold & Sellers, 2018; Vu et al., 2016

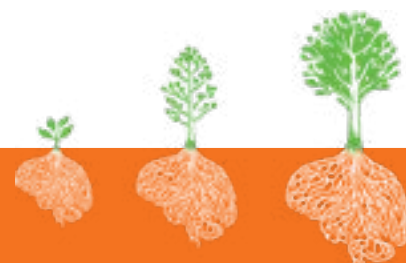
121. Artz et al., 2014, p. 493





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