

Early Childhood Abuse and Neglect

Early Childhood Abuse and Neglect:
Exploring the consequences, effects, and treatment

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Abstract

With the prevalence of child abuse and neglect in our nation and around the world, the theories of why these types of maltreatment occur are a relevant topic for all to explore. Researchers are interested in how child abuse and neglect affect the individuals who were victims as well as the use and efficacy of treatment procedures. In this project, significant research is examined, detailing the various models of abuse and neglect and how the models are perpetuated through development, as a result of exposure to various environments or social relationships. The consequences of experiencing these forms of maltreatment are explored and a variety of treatment options are discussed. The purpose of this project is to increase the awareness and understanding of such a devastatingly common crisis and encourage the advancement of child abuse and neglect prevention.

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CHAPTER ONE

Introduction

The occurrence of childhood abuse and neglect is a widespread problem in our nation. Each year, approximately 800,000 children in the United States are victims of child maltreatment, including various forms of abuse, abandonment, threats of harm, and neglect (U.S. Department of Health and Human Services, 2010, p. xiii). The federal law defines child abuse and neglect as “a recent act or failure to act on the part of the caregiver which results in death, serious physical or emotional harm, sexual abuse or exploitation; or presents an imminent risk of serious harm,” according to the Federal Child Abuse Prevention and Treatment Act (CAPTA) (U.S. Department of Health and Human Services, 2003, p. 44). Child abuse as well as other forms of maltreatment, such as neglect, is a severe issue in the United States, but the scope of the problem is much more broad. Internationally, between 25-50% of children report being physically abused. Statistics such as this illustrate how child maltreatment is a global crisis with the potential for serious life-long implications (World Health Organization [WHO], 2010).

These childhood experiences cause detrimental, long-lasting effects during cognitive, behavioral, and emotional development and often well into adulthood. Recent research has shown that childhood maltreatment is associated with negative health outcomes and adolescent violent behaviors. Many individuals who experience maltreatment such as neglect or abuse are greatly affected beyond childhood and adolescence; there is a significant relationship between child abuse and psychological

disorders in adulthood (Hussey, Chang, & Kotch, 2006). Because of this, it is important to recognize the severity of child maltreatment and its effects on the psychological well being of children and adults in order for progress regarding the decline of maltreatment to be made.

An understanding of the physical, behavioral, and psychological effects on those who experience abuse or neglect in early childhood was particularly important to me for several reasons. Through my family members, I have seen the tremendous negative impact child abuse can have on an individual, emotionally and developmentally. The unfortunate circumstances I can attest to truly affected me and I developed an interest in understanding the repercussions of abuse and neglect experiences, specifically long-term. Because of my personal experiences, I felt that an internship at the San Luis Obispo Child Development Center (SLO CDC), an educational classroom center for children at risk of abuse and neglect, would be most suitable and valuable to me. After spending time with the children at the center, my interests blossomed and I developed a desire to know more about the conditions that result from abuse and neglect. Furthermore, my goal is to attend graduate school to achieve a Masters in Social Work, and it is likely that eventually I will work with individuals who have experienced trauma of this sort or other situations that lead to negative behavioral or psychological effects.

Chapter two of this senior project includes major research conducted on child abuse and child neglect and its significant findings as well as theories pertaining to the topic. Chapter three describes the emotional, behavioral, and psychological consequences experienced by childhood abuse or neglect victims of all developmental stages. Chapter four examines formal discussion of therapies and their successfulness and

examines prevention strategies. Lastly, chapter five concludes the investigation of early childhood abuse and neglect, reflects on the topic, leads to research questions, and shares the implications of the information.

CHAPTER TWO

Statistics gathered by the U.S. Department of Health and Human Services (2010) show that younger children are more victimized by maltreatment than older children and adolescents, in fact, infants ages zero to one years old are the most targeted early childhood age group with 21.7% of all maltreatment cases involving infants (Maestripieri & Carroll, 1998). The two most common types of maltreatment are neglect and physical abuse; 71% and 16.1% of maltreated children suffer from neglect and physical abuse, respectively (U.S. Dept. of Health and Human Services, 2010, p. xiv). Because of these alarming numbers, there is a great deal of research trying to uncover more about the incredible frequency at which child maltreatment occurs as well as the detrimental effects the acts have on their victims. Many theories have been formulated on this topic, and significant findings have been discovered regarding each theory.

The Intergenerational Transmission Theory suggests that various levels of exposure to trauma, specifically pertaining to abuse, can lead to the likelihood of involvement in a violent relationship later in life (Fox, Robson, & Gover, 2005). The Intergenerational Transmission Theory presumes that individuals who are victims of abuse, or witness family members being victims of abuse, develop an abnormal perspective of violence. Many women are subject to the Intergenerational Transmission of violence because they tend to become involved in abusive romantic relationships as a result of an unhealthy, abuse relationship with a mother or father. One study of the Intergenerational Transmission

Theory found that women who reported experiencing abuse as children were two to three times more likely to experience Intimate Partner Violence (IPV) than women who did not report being abused as children (Alexander, 2009). Some children and adolescents receive an unhealthy amount of exposure of aggression and violence depending on the physical environment in which they live and grow. Those who experience abusive situations during cognitive development are more likely to develop a maladaptive perspective of aggression.

The Mimetic Theory suggests that exposure to trauma can generate aggression and increases the likelihood of modeled abuse behavior. The Mimetic Theory describes individuals who view a perpetrator of abuse as powerful or admirable and therefore learn to act violently in order to imitate, or mimic, acts of violence (Craig & Sprang, 2007). This theory is, in some ways, the reversal of the Intergenerational Transmission theory of abuse because individuals who are victims of abuse learn to act violently, whereas with Intergenerational Transmission, other victims learn to accept violence. Many individuals in this situation witnessed family members being victims of abuse or were victims themselves. This theory of mimicked actions incorporates a basic longing for power. The victim sees the perpetrator as powerful, and in order to assert his own power or to recapture power that was taken from them, the witness or victim becomes a perpetrator of aggression or abuse himself (Craig & Sprang, 2007). Environment also has a large impact on those who are encompassed in the Mimetic Theory. Individuals who experience or witness more physical aggression can develop an unhealthy idea of aggression exertion.

Some may think the Mimetic Theory only reveals a mimicking pattern of aggression for boys because of the common general assumption is that males are more aggressive than females, but this assumption overlooks relational aggression. Research

shows that aggression in boys is shown through physical aggression, or violence, whereas the aggression exhibited in girls is relational. Therefore, it is possible that girls may also learn aggressive behavior and aggressive emotions by witnessing physical abuse (Maestriperi & Carroll, 1998).

Family Systems Theory, a general theory of psychology regarding the interrelatedness of family members explains that actions of a family member cannot be understood in isolation, but must be examined within the context of the family. Many situations that take place within families lead to strong emotional stressors. These stressors are risk factors for the occurrence of abuse and should be resolved as soon as possible. Families that experience some of these severe life stressors such as severe or enduring illnesses, unemployment, financial problems, and relational problems within the family unit, usually have a higher rate of child abuse than families without such stressors (Crosson-Towner, 2005).

Abusive parents have been seen to have less enjoyment of their children and of general parenting experiences. They also typically exert a more authoritarian parenting style, characterized as restrictive, demanding, and unresponsive (Mapp, 2006). Some cultures or families may find authoritarian parenting to work best, but many problems have been seen when this style is used. Many families entangled in a pattern of abuse experience substance abuse or other psychological issues or can find little support and are extremely isolated from others (Crosson-Towner, 2005). Social isolation is a significant risk factor, whether it is within the community, extended family, or immediate family. A helpful social support network is a fundamental resource for family members – both for parents dealing with many stressors as well as for the children in the stressful and abuse environment.

Without intervention and treatment, children that experience abuse within the family system can likely develop some of the same social and psychological risk factors of abuse that carry on to adulthood (Crosson-Towner, 2005).

A Social Support Theory of abuse and neglect and the lack of support given to caregivers closely relate to stressors in the Family Systems Theory, as mentioned above, but it also suggests why mothers are statistically shown to be the most common perpetrators of abuse on children. Many researchers assume it is because although general household duties may have become more balanced between couples in recent decades, mothers are still the primary caregivers and are given very little direct childrearing support. Since mothers are likely to spend the most amount of time with their children, it provides them with the most opportunity to exert abusive behavior toward children (Chang, Theodore, Martin, & Runyan, 2008). As well as abuse, mothers also are most likely to neglect their children because they are largely responsible for the daily necessary care and protection children should receive and have the control to deny appropriate guardianship.

Mothers have the ability to promote a positive, constructive environment, but in order to do so they need social support. Women who are in a psychologically or physically abuse relationship with an intimate partner, possibly because of reasons explained through the Intergenerational Transmission Theory, are at least twice as likely to exhibit abuse towards their children than those women who have a healthy, supportive relationship with their partner (Mapp, 2006). Women who are depressed have a diminished ability to parent effectively; these mothers have difficulty communicating with their children and have more naturally negative interactions with them. The family environment of a depressed mother is often hostile, aggressive, and rejecting (Mapp, 2006). These factors are an

example of how unstable family systems can lead to a higher risk of physical abuse on children.

Research has also been conducted on Attachment Theory from a perspective involving abuse as well as neglect. Attachment Theory states that either secure or insecure bonds may form between infant and mother in the first several months of the infant's life for the purposes of safety and security. The bond formed between infant and mother influences the quality of the relationships a child has throughout his or her life. One major assumption of the Attachment Theory is that the parents are a sanctuary of safety throughout all of early childhood. Secure attachments cause children to develop an internal model of self-competence and a model of dependability for others. Insecure attachments, however, promote feelings of threat, rejection, and personal unworthiness (Tarabulsky, Pascuzzo, Moss, St-Laurent, Bernier, & Cyr, 2008). Research shows that maltreatment during infancy can often lead to insecure attachment relationships in the child's developmental future.

Typically, attachment styles are known to be secure, insecure-avoidant, and insecure-ambivalent, but a fourth style has recently been recognized. The newly recognized style of attachment is labeled as "disorganized attachment" (Tarabulsky et al., 2008). In the disorganized attachment style, parents act frightened or frightening in the presence of their child, causing distress for the child. Parents might appear to be frightened at how to properly manage their child if they do not feel capable or supported in their responsibilities. A parent frightening their child might occur if the parent is extremely harsh or authoritarian in their parenting style or if the parent has a strong or unusual reaction to the child. While insecure-avoidant and insecure-ambivalent are associated with

high levels of risk of future problems, the disorganized attachment style is actually associated with a highest probability of future problems of all the different attachment styles (Tarabulsky et al., 2008). Unhealthy attachments not only lead to poor child-caregiver relationships, but can also cause a maladaptive self-development, deficient peer relationships, substance abuse problems, and educational difficulties (Toth & Cicchetti, 2004).

Similar to the Attachment theory, the Parental Investment Theory suggests that parents sometimes decrease or completely cease investment in their young when the opportunity costs outweigh parental benefits (Maestriperi & Carroll, 1998). Children who have abnormal physical features or a physical or mental disability are at risk for experiencing neglect because of the Parental Investment Theory. This could be because the parent may not feel the child is what they expected he or she to be or because the child has failed to fulfill the expectations of the parents, whether realistic or unrealistic (WHO, 2010). A lack of parental investment can also occur because of an unhealthy attachment between parent and child; if a significant amount of bonding did not occur between the parent and the child, parental investment is likely to be lower (WHO, 2010). Another opportunity cost of parenting that could affect parental investment is the financial burden of childrearing. If parents see a greater benefit in a different use of their finances than investment in their children, they are likely to take advantage of the option that appears to have more personal gain.

Abuse occurs across a wide spectrum of situational, individual, and relational differences, yet it is clear that some factors contribute more to the likelihood of abuse than others. Many abusers are parents who do not feel adequately supported or equipped in their

roles as parents. Many other individuals are merely modeling the abusive behavior they either witnessed or experienced and they carry this behavior into new relationships or new generations of parenting. Regardless of the causes, victims of child abuse experience serious consequences because of their devastatingly unfortunate circumstances.

CHAPTER THREE

Whereas there are many different theories of the possible causes of child abuse and neglect, researchers are certain that maltreatment of children and adolescents result in long-lasting negative effects. Patterns of abusive behavior can lead to a number of physical or emotional impairments or even possibly death. Some of the common repercussions of child maltreatment include developmental complications, violent behaviors, such as aggression, and the possibility of developing various adult mental health disorders (Hussey, Chang, & Kotch, 2006).

Although many individuals assume the initial physical impact felt by experiences of neglect and abuse is most painful, research suggests the emotional damage actually causes the most significant detrimental effects (Toth & Cicchetti, 2004). The emotional development of preschoolers who have been neglected or abused is significantly hindered, compared to non-maltreated preschoolers. Neglected children exhibit difficulty with coping skills and emotion regulation and generally are confused by the emotional reactions of others (Pollak, Cicchetti, Hornung, & Reed, 2000).

A study at the University of Rochester in Rochester, New York, examined the disruptions in emotional developmental functioning of maltreated versus non-maltreated preschoolers. Researchers Macfie, Cicchetti, and Toth (2001), performed the Child Dissociative Checklist on a sample of 198 low socioeconomic status maltreated and non-

maltreated preschool-aged children. Maltreated children were assessed to distinguish between victims of sexual abuse, physical abuse, or neglect. Maltreated children of all categories demonstrated more signs of dissociative behavior than the non-maltreated children. Among the abused and neglected preschoolers, researchers found a correlation between severity of maltreatment and the “symptomatology” and “chronicity” of dissociative behavior. In fact, the physically abused children, compared to neglected or sexually abused children, actually showed clinical levels of dissociation (Macfie, Cicchetti, & Toth 2001). According to the American Psychiatric Association, dissociative behavior is defined as “a disruption in the usually integrated functions of consciousness, memory, identity, or perception of the environment,” (DSM-IV-TR, 2000).

Both abused and neglected children often have a negative perception of self. Because of the traumatic, unloving, and insensitive care the children receive, these young children represent themselves as angry and unavailable or rejecting. Neglected children show low levels of positive representation whereas physically abused children tend to show higher levels of negative representation (Hildvard & Wolfe, 2002). Abused children have been found to exhibit low self-confidence and little self-worth, and throughout development these children tend to socialize with others who have similar feelings of low personal value (Crosson-Towner, 2005).

Children, as well as other victims of abuse, sometimes experience feelings of reverence and fear towards their abuser. Preschool children who experience abuse at the hand of their mothers show “compulsive compliance” by inhibiting disagreeable behavior in an attempt to avoid abuse. While the suppression of negative behaviors may appear adaptive in the short-term, a long-term consequence of this behavioral strategy is a

distortion in the perception of reality (Hildvard & Wolfe, 2002). It is common that relationships between perpetrators and victims tend to strengthen as abuse magnifies. Many children demonstrate the compulsive compliance behaviors in order to earn love or acceptance from abuse, in this case, from their mothers.

The consequences of childhood neglect are indeed equally damaging to the victims, as is abuse. In fact, while there are many similarities between the negative effects of abuse and the negative effects of neglect, some consequences are unique to the particular style of maltreatment that is neglect. For example, individuals who suffered from neglect in early childhood more often show academic and cognitive deficits, social withdrawal, and more internalization of problems (Hildvard & Wolfe, 2002). One study by Erickson, Egeland, and Pianta (as cited in Hildvard & Wolfe, 2002) examined the effects of neglect in preschool and kindergarten-aged children and found that physically neglected children performed lower on standardized tests measuring academic and intellectual achievement than abused children. In addition to lower intellectual achievement, these neglected children present in this study also showed signs of less creativity, poor impulse control, and stronger feelings of frustration and aggression during problem-solving tasks (Hildvard & Wolfe, 2002).

Another example of the severe effects of neglect on children comes from a laboratory model examining child maltreatment. In this landmark study, researchers found similarities between neglect in humans and neglect in rhesus monkeys (Maestripieri & Carroll, 1998). This research established a model of development known as “social deprivation.” Researchers found that most of the female rhesus monkeys that were separated from their mothers at birth suffered from abnormalities in almost all aspects of

social interaction. There was a lack of attachment between mother and baby, which is the first and most crucial form of social interaction a developing individual typically experiences. These maltreated monkeys also exhibited negative mothering responses to their first-born monkeys, including neglectful behaviors (Maestripieri & Carroll, 1998).

In early adolescence, negative mental representations of the self and others continue, and some children also develop a negative view of the social world. This overall negative perspective is visible through low or negative social expectations (Hildvard & Wolfe, 2002). With a negative outlook, adolescents also have difficulty with problem solving. They are unlikely to find a high level of motivation to repair or avoid problems if their social perspective is one of despair. School-aged victims of maltreatment continue to demonstrate difficulties in academic achievement, but the most overt consequences of their abuse and neglect are seen in social and behavior problems. Neglected and abused adolescents act more disruptively, showing uncooperativeness and aggressiveness to a greater extent than non-maltreated adolescents. Teachers and parents describe physically abused children as less mature and less trusting and more difficult to manage. Neglected adolescents also exhibit some of these qualities, however, victims of this type of maltreatment style are more likely to demonstrate a general lack of social skills and internalizing behaviors (Hildvard & Wolfe, 2002).

Neglect and abuse often causes stress that is associated with disruptions in early brain development (WHO, 2001). Severe stress can lead to physical consequences such as impairments in the nervous system and immune system. Because of the physically damaging stress victims of maltreatment experience, they are at a greater risk for future problems such as obesity, smoking, and alcohol and drug misuse (WHO, 2001).

Research on the consequences of childhood maltreatment on the adult population is limited, but it is widely recognized in research that adults with a history of childhood maltreatment experience an array of mental health problems including eating, learning, substance abuse, anxiety, and depressive disorders. Young adults maltreated as children are four to five times more likely than non-maltreated individuals to be hospitalized for suicide attempts or serious psychiatric disorders (Vinnerljung, Hjern, & Lindblad, 2006). These victims are also at a higher risk for homelessness, unemployment, and incarceration as adults.

Victimization by a means of physical abuse in childhood is strongly associated with aggression in adulthood. This aggression can be displayed towards non-familial individuals, which most commonly expressed as violent criminal offenses, as well as towards dating partners and spouses (Malinosky-Rummell & Hansen, 1993). Spousal or partner abuse can be exhibited either physically or relationally. Physically abused men show significantly more physical violence towards their spouses than men who were not abused in childhood. There are also very strong patterns of familial violence in adults who have a history of childhood physical abuse. Extensive research, including the Mimetic Theory of abuse mentioned above, shows that individual who were abused as children are at risk for abusing their own children if they become parents (Crosson-Towner, 2005).

Abuse experienced in childhood can impact a person's religious and spiritual faith throughout development, and ultimately into adulthood. Some children who experience maltreatment do increase their religiousness and spirituality as adults, helping them to find meaning and purpose in their lives. However, some others do show a decrease in religiousness and spirituality, believing that God is wrathful, unfair, and unloving (Walker, Reid, O'Neill, & Brown, 2009). One study examining abuse in the context of the

institution of religion, states that victims may choose to disengage from religious and spiritual beliefs or practices because the victim associates their perpetrator with religion or spirituality in some way (Flanagan-Howard, Carr, Shevlin, Dooley, Fitzpatrick, Flanagan, Tierney, White, Daly, Egan, 2009). The decrease in religiousness that was found implied an average religious affiliation prior to disengagement. Religious disengagement was defined as a reduction in faith, either in God or in the church, or a decrease in church attendance (Flanagan-Howard et al., 2009).

Furthermore, neglect and abuse can also affect intellectual capabilities and vocational difficulties as a result of low academic achievement in childhood and adolescence (Malinosky-Rummell & Hansen, 1993). Adults who were maltreated as children might experience the long-term consequence of low economic wellbeing in adulthood. This effect is likely reported because of the high percentages of truancy, suspensions, and expulsions common in adolescents who were abused or neglected (Currie & Spatz Widom, 2010).

The accuracy of memory can be compromised in adulthood because of childhood maltreatment. One study showing the effects of abuse on memory reported that non-abused individuals were better able to answer specific questions recalling trauma-neutral information than abused individuals (Eisen, Goodman, Qin, Davis, & Crayton, 2007). However, maltreated, or otherwise traumatized, individuals tended to interpret the neutral information in a traumatic way. These adults were better at recalling trauma-related information than their non-maltreated counterparts. Severity of the abuse experienced possibly contributes to the individual performance of memory recall (Eisen et al., 2007).

Child physical abuse and neglect are both associated with significant negative outcomes throughout all life stages, with few differences in outcomes noted between the two forms of maltreatment. The majority of research regarding childhood physical abuse and neglect has been on short-term effects, but it is obviously that if childhood consequences are left untreated, the behavioral, social, and emotional issues present in childhood will most often remain and, in many cases, induce additional maladaptive behavior into adulthood.

CHAPTER FOUR

Unfortunately, childhood neglect and abuse can go unnoticed for years. When detection occurs, often by teachers, law enforcement or self-disclosure, the most common type of treatment is therapy. Many different forms of therapy are used to treat children of abuse and neglect including cognitive behavioral therapy, group therapy, play therapy, and art therapy. Only 13% of children who have been victimized by physical abuse receive any therapy treatment (Runyon, Deblinger, Ryan, & Thakkar-Kolar, 2004). Play and art therapy are two commonly used forms of treatment for children and these approaches are sometimes used in conjunction with group therapy sessions.

Most therapeutic intervention styles focus on parents and the opportunity to improve parenting abilities. However, based on the psychological benefits seen in children who participate in treatment, one specific study examined integrated parent-child cognitive behavioral therapy (CBT) perspective (Runyon, Deblinger, Ryan, & Thakkar-Kolar, 2004). The researchers focused on teaching parents adaptive coping strategies, nonviolent disciplining strategies, and developmentally realistic parental expectations. For children, the intervention focused on cognitive coping skills, behavior management techniques,

modeling, and corrective feedback. Results of the research suggest that by including the child in parent intervention treatments, there may be an added benefit for an optimal long-term outcome (Runyon, Deblinger, Ryan, & Thakkar-Kolar, 2004).

A multisystemic therapy approach is very similar to the integrated parent-child CBT approach of maltreatment therapy. Multisystemic therapy assumes behavior problems must be understood within the systemic context under which they occur, but also stresses the importance of considering cognitive and extra-familial variables (Brunk, Henggeler, & Whelan, 1987). Because problems are multi-dimensional and intervention needs differ between groups, the nature of therapy varies between different family systems. Multisystemic therapy seems to be successful through the restructuring of parent-child relations and reducing identified social problems (Brunk, Henggeler, & Whelan, 1987).

When abuse occurs in the home, it is common that many other in-home problems or risk factors are occurring simultaneously. One common risk factor of abuse and neglect is substance abuse. It is estimated that substance abuse appears in 60% of the homes in which maltreatment occurs (Romero, Donohue, & Allen, 2010). Parental drug use increases the risk for childhood neglect and often increases the amount of violence in the home, possibly leading to domestic abuse or child abuse. The co-occurrence of substance abuse and maltreatment is terrible, but if substance use can be controlled, it can assist in the elimination of abuse or neglect towards children.

One case study by Romero, Donohue, and Allen (2010) examined the effects of Family Behavior Therapy on a family experiencing substance dependence, neglect, and domestic violence. It was presumed that effects such as anger, anxiety, or depression appear following drug use and cause parents to be more distracted from their caretaking

duties. Family Behavior Therapy (FBT) aims to manage or alleviate these stimuli that are experienced after substance use. The Family Behavior Therapy used in this case study focused on behavior goal setting, stimulus control, self-control, and communication skills setting for all members of the family. Post-treatment results showed that the individual made substantial improvements in the focus areas subsequent to participating in FBT. There was also evidence in the improvement of the individual's parenting practices and in the attachment between mother and child, however, it is unclear whether problems resurfaced or will resurface with the passage of time (Romero, Donohue, & Allen, 2010).

Emotion-focused therapy is a commonly used short-term therapy that is applied to many different types of client populations. Only two studies have looked at the efficacy of individual therapy in facilitating forgiveness, but a study by Greenberg, Warwar, and Malcolm (2008) at York University in Ontario, Canada, examined the effectiveness of emotion-focused therapy (EFT) to aid in emotional resolution and forgiveness. EFT uses Gestalt therapeutic techniques such as the "empty-chair" dialogue to resolve anger and sadness, and to facilitate grieving. In the research study considering emotion focused therapy and forgiveness, psychologists found an increase in forgiveness and acceptance and a decrease in overall symptom distress (Greenberg, Warwar, & Malcolm, 2008). Emotion focused therapy could be a possibility for maltreated individuals who struggling emotionally with their experience of neglect or abuse.

Victims of abuse and neglect that are not able to reduce or avoid many of the negative consequences develop other severe social and psychological struggles that lead them to seek therapy long after abuse has ceased. Many neglect or abuse victims seeking therapy are usually pursuing therapy for reasons other than the lasting effects they

experience from abuse. Since many victims of abuse often develop psychological difficulties, or even severe psychological disorders, these maltreated individuals seek counseling to deal with their most apparent struggles, and tend to not share about maltreatment they experienced (Romero, Donohue, & Allen, 2010).

Under fortunate circumstances, therapy can prove to be successful in a way where children and their parents are able to coexist in a home environment that is not infused with damaging forms of maltreatment. From therapy and parent education, many parents feel supported and are taught parenting and coping strategies that allow them to better nurture their children. However, sometimes therapy does not lead to a positive, non-maltreated relationships and out-of-home care must be implemented. In other circumstances, out-of-home care occurs immediately following the discovery of a maltreatment situation.

Out-of-home care has been employed for decades in situations regarding abuse and neglect, but recently controversy concerning the benefit of removing children from their home environments has caused differing opinions among experts in the field (Dunn, Culhane, & Tassig, 2010). Many policy makers and child welfare workers have come to believe that children who experience out-of-home care do not receive better care, are unhappy, and feel lonely and helpless. However, early research and other experts disagree and strongly feel that out-of-home care, although not ideal, is the best option in certain situations. One study by Dunn, Culhane, and Tassig (2010) sampled 100 children receiving out-of-home care regarding their experiences and feelings to the system of care they receive: foster care, kinship care, or group care. Results showed that children living in the group care were generally most dissatisfied with their experience, reporting lower levels of

satisfaction with their caregiver. Children from group care situations also felt less loved and less safe than children in foster or kinship care. In another aspect of the same study, researchers found that children's opinions about the benefits of out-of-home care were divided quite evenly. The quantitative data suggest that approximately one-third of children felt being placed out-of-home was "very difficult," one-third reported it was "okay," and one-third reported it was "very good." This, and other research and data, leaves experts in controversy regarding the best solution to abuse and neglect (Dunn, Culhane, & Tassig, 2010).

With nearly 1,000,000 children experiencing maltreatment yearly in the United States (U.S. Department of Health and Human Services, 2010, p. xiii), little exploration is being done in treatment of children and adults who have experienced these unfortunate events. Yet, prevention efforts are even more infrequent. Many organizations and individuals consider treatment efforts to be of more value because the prevention would require the burden of reaching an innumerable range of individuals who are at risk for either committing or experiencing abuse.

Successful child maltreatment prevention is complicated to achieve because of the plethora of risk factors and various theories that induce abuse and neglect. No one strategy will eliminate the circumstances under which abuse occurs; therefore prevention requires a "multi-sectoral approach" (WHO, 2010). Programs offering parental support, knowledge in child development, and positive parenting skills as well as the availability of affordable preschool and child-care facilities are all considered effective in increasing the protective factors for children. However, it cannot be stated with confidence that these the implementation of these programs significantly reduces child maltreatment (WHO, 2010).

CHAPTER FIVE

Child abuse and neglect is a pervasive problem affecting millions of individuals throughout the world. There is no one explanation as to why perpetrators neglect and abuse children, but yet many aspects of environmental, developmental, and psychological factors play into why abuse occurs. It is known, however, that no matter why abuse or neglect occurs, the effects can be detrimental to those who are victims and those effects can be long lasting. Because of the range of causes of maltreatment, treatment of these negative experiences is difficult and its effectiveness is often questioned. In order to lessen the number of victims and the widespread consequences, more needs to be done from the angle of abuse and neglect prevention.

The purpose of this project was an examination in understanding the crisis of maltreatment, especially physical abuse and physical and emotional neglect, in the United States and around the world, how the crisis has developed, and what interventions are currently being used in order to decrease the negative effects of neglect and reduce the number of children who become victims and experience abuse or neglect in their lives and garner the consequences of another's actions.

The main problem I encountered throughout my project was difficulty acquiring information and my discouragement with the lack of research on some critical issues. Little research information was available on the risk factors of maltreatment and the severity of maltreatment and corresponding severity of negative effects. All information on effects was negative, no articles provided any insight into the fact that some victims are resilient and experience no negative consequences from their abusive or neglectful childhoods. There was a lack of information regarding consensus on what are effective treatment

options for victims of child physical abuse or child neglect, other than placement. On the other hand, there is research on the treatment of children who are exposed to sexual abuse. Much less research has been performed on treatment options for physical abuse victims or the success of different therapies for those who experienced physical abuse as children. Also, little information is available regarding prevention strategies for lessening the both occurrence of as well as consequences of childhood maltreatment. I believe this is because very little research is actually done towards prevention; most of the focus is on the effects of the problem, instead of preventing the problem.

This project proved to be successful by educating me in the widespread issues of child abuse and neglect. Prior to this project, I was unfamiliar with the severity of the issue. I have developed a much deeper understanding for the struggle experts experience while researching child abuse and neglect because of the innumerable contributing factors to the problem and the difficulty of clearly distinguishing between effective treatment and prevention strategies to reduce the consequences of child abuse and neglect.

Ultimately, I achieved my goal of developing a deeper understanding for the causes, effects, and treatments of child abuse and neglect than the knowledge I possessed prior to this investigation. I enjoyed my experience of completing this library investigation and have increased my interest in the topic of the effects and treatment child abuse and neglect.

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