

# EFFECTS OF PARENTAL ABUSE AND NEGLECT ON CHILDREN

## THE PSYCHOLOGICAL IMPACT OF ABUSE ON CHILDREN

Harold P. Martin, M. D.  
and  
Martha A. Rodeheffer, Ph. D.

*Harold P. Martin, Associate Professor of Pediatrics at the University of Colorado Medical School, is affiliated with the National Center for the Prevention and Treatment of Child Abuse and Neglect in Denver, where he studied for a year's sabbatical in 1975-76. He is also Associate Director of the JFK Child Development Center at the Medical School and is a Candidate-in-Training at the Denver Institute for Psychoanalysis. Martha A. Rodeheffer, Assistant Professor of Clinical Psychology at the University of Colorado Medical School, is a Clinical Child Psychologist at the National Center for Prevention and Treatment of Child Abuse and Neglect. Both authors have served as Consultants to the treatment programs for abused children which operate out of the National Center.*

The consequences of being assaulted by one's parents are pervasive and long term. The physical attack and injury are of significance, in and of themselves, but it is the particular environment in which the attack occurred that will determine the psychological scars that result. The impact of inflicted injury upon the development of the child must be evaluated in light of the nature of the parent-child bond. It is important to clarify that the psychic damage is not due just to the dramatic physical attack that bursts into public view at the time of a reported abuse incident. Rather, physical abuse emerges from pervasive dysfunction in the family. Physical abuse is part of a persistent pattern of parent-child interaction rather than being an isolated incident. This is corroborated by research data suggesting that at least 60% of children reported have histories of being

previously abused; that over 25% of these children have siblings who were also previously abused; and that over 30% of the mothers and 40% of the fathers reported for physically attacking a child have been perpetrators of abuse in the past(1). While physical attack upon children is perhaps the most dramatic, it is still only one of many signs of the pathological interactions taking place in the family. Both the physical abuse and the home environment in which it is embedded take their toll on children. As will be pointed out below, the current methods of treatment of child abuse take their own toll on the child's psychic development as well.

### EFFECTS OF TRADITIONAL TREATMENT

The distinction between the physical attack per se and the abusive child-rearing environment that spawns the attack, has become important inasmuch as many professional teams attempting to intervene in child abuse continue to focus exclusively upon the physical effects of trauma inflicted upon children. Insufficient attention is focused on the psychological consequences of such attack, on the psychological consequences of being reared in an abusive environment, and on the additional psychic trauma introduced for the child as a result of the reporting of the abuse.

The traditional and most common approach to intervening in serious cases of child abuse is to take the child into protective custody in order to protect him or her from further physical trauma. The only treatment offered to the child is medical care of injuries and provision of a place of

physical safety. Some form of treatment is offered to the parent as a preventative measure geared to minimize the chance that physical trauma to the child will recur. Reunion of parent and child is made contingent upon the parents convincing authorities of their willingness to change their parenting behavior and to utilize therapeutic services; e.g., casework, lay therapy, public health nursing, or homemaker services, or possibly even psychotherapy. Such a treatment paradigm must be based on an assumption that the child's problems are entirely physical, caused by the physical attack which needs to be eliminated from the parenting repertory. A second assumption appears to be that if social and psychological intervention is provided for the parents, the parent-child relationship will be positively affected and that the benefits of these interventions will "spill over" to the child. In our experience, the first assumption is invalid and the second is doubtful at best.

The abused child has psychological and developmental wounds which need attention. Prescribed separation from the parent adds to the emotional problems already present in the abused child and introduces yet another complicating factor into an already tenuous parent-child relationship. For the child, the usual course of events set in motion by the reporting of abuse may be quite devastating. Consider for the moment the effect upon the young child of first being attacked and of then being suddenly separated from the parent at the very point of having incurred such extreme parental wrath toward oneself. The police may come and whisk the child away from angry, distressed parents. He may be placed in a hospital, a most emotionally unhealthy environment for any child. Or he may be placed in a receiving home with a new and frighteningly strange family, only to be removed a short time later and placed with a foster family. With the many delays and cumbersome legal machinery of our system, the child may remain in foster care for months or years before a final determination is reached as to parental rights. It is not unusual for the child to experience several changes in foster care homes before that final disposition is reached. Loss after loss of parental figures is suffered while the child is in the midst of legal and social storms. While in foster care, which is an inadequate environment at best,(2) social agencies may severely restrict contact with the biological parents, the child's primary love objects.

The treatment procedures with the parents may result in conflict resolution and reduction of familial stress and still have little impact on the parent's feelings, perceptions, and/or behaviors toward the child. When the child is returned home, which is usually the case, the abnormal parenting behaviors may remain basically unchanged and pose psychological and possibly physical danger for the child. This is obvious from the high recidivism rate reflected in the re-abuse of young children.

As alarming data regarding developmental delays and emotional-social disturbance becomes increasingly available on abused children who have continued to be raised in abusive environments,(3) it becomes imperative that our approaches to treating abusive families be reassessed in terms of how to best meet the problems and needs of the

abused child. The following exploration of the psychological and developmental sequelae of abuse and of living in an abusive environment seems timely.

### EFFECTS OF INFLICTED PHYSICAL TRAUMA

Before turning to the abusive environment, a few comments concerning the impact of physical assault per se are in order. Physical abuse may result in a number of biological consequences, including death, brain damage, mental retardation, cerebral palsy, learning disorders and sensory deficits. The neurological handicaps of physical abuse are of particular interest because of their chronicity and significance to the long range functioning of the individual. It is estimated that between 25 and 30% of abused children who survive the attack have brain damage or neurological dysfunction resulting directly from physical trauma about the head(4).

All too often the psychological effects of the physical assault and the psychological overlay of the resultant brain damage are overlooked. A physical assault from the very person to whom the child looks for love, nurturance, and protection is in and of itself a psychic trauma of major proportions. Parental attack results in interpersonal ambivalence and a hypervigilant preoccupation with the behavior of others. The child's constant mobilization of his defenses in anticipation of impending danger is reinforced by intermittent sudden attacks by the parent.

There are psychological consequences to brain damage which occur even when the damage to the central nervous system is attributable to causes other than parental infliction of injury(5). The inability to adequately perceive and act on the environment in pursuit of mastery, the inability to keep up with peers, and the inability to meet expectations of those around him creates much frustration. Given the lack of opportunity for even normal childhood dependency in the home, the abused child with brain damage may be poorly defended against psychological stress. The brain-damaged child may be in particularly grave risk of re-abuse due to the inability to meet parental expectations so crucially related to abuse.

### EFFECTS OF THE ABUSIVE ENVIRONMENT

Apart from the mortality and medical consequences of abuse and the abusive-neglectful environment, there are serious psychological consequences of being reared in an abusive environment. It has been noted that the abuse of a child is only one of many signs of an inadequate and distorted parent-child relationship. In the majority of instances, the environment of the abusive home also contains some elements of deprivation, neglect, psychological disturbance in parents, sexual abuse, undernutrition, or other forms of unstable family function. Any one of these is known to have a deleterious effect on the child's development. A review of the literature on each of these malevolent factors as it applies to abused children is available to the reader(6).

There is a remarkable paucity of research into the psy-

chological effects of the abusive environment. The authors and their colleagues have recently documented a number of specific behaviors and personality characteristics of abused children(7). In the present discussion we have chosen to highlight three important aspects of the abusive environment which impact upon the child and give rise to many of his psychological problems.

### **Abused Children Must Adapt to a Dangerous and Hostile Environment**

The child is in a family where verbal and physical aggression, hostility, and disparagement are frequently but unpredictably directed toward him. Rarely is physical abuse to the child an isolated incident in which an otherwise normal parent experiences sudden loss of impulse control. Rather, the attacks are reflections of a pattern of child rearing that makes extensive use of physical threat and force toward children for management and disciplinary purposes. The child must somehow adapt to this dangerous and often unpredictable world. There are a number of ways in which he may enhance his survival by accommodating his behavior to the needs of the aggressors in his environment. The abused child constantly checks out the safety of his moment-by-moment existence. He may develop extremely precocious skills in initiating social contact with adults. There is, however, a quality of defensiveness about his social contacts that precludes real empathy and enjoyment of social intercourse. The abused child is basically an asocial, lonely, joyless being.

A common form of this survival adaptation is hypervigilance. In an attempt to stay out of harm's way the child becomes a "watcher", an observer acutely sensitive to adults and to any sudden change in the environment that is inexplicable to him. This behavior is particularly noticeable in situations such as during developmental testing. The child appears stressed by the close observation of the examiner and frequently announces what he is going to do before acting so as to "test the waters" of the unknown adult. Noises outside the room or sudden movements of the examiner (such as picking up a pencil to score a test item) draw the child's attention and interfere with play or test performance. This hypersensitivity extends to remarkable acuity for perceiving the mood of adults in his surroundings. Slight changes in facial composure are noted and often commented on by the child.

The abused child develops a rather "chameleon nature", learning to change and shift his own behavior in accordance to nuances of the erratic and inconsistent interpersonal environment in which he lives. This reactive life stance has many ramifications for the developing personality.

Another form of this adaptation to the abusive nature of the environment is a restriction of various autonomous ego functions, a defense mechanism first described in the classic work of Anna Freud(8). To try a task and fail may be more dangerous than not to try at all. To be silent may be safer than talking and exposing oneself to ridicule or punishment for saying the wrong thing. To inhibit one's activity may avoid the adult antagonism that is elicited by moving freely

about and exploring the environment. Inhibition, denial of one's own drives and impulses, and withdrawal and avoidance are defensive maneuvers that have an adaptive function when living in a physically abusive family.

The abused child attempts to maintain some self-integrity without openly challenging the authority of adult caretakers. Seldom does the young abused child make a direct verbal refusal to perform as requested by the parent. The normal phase of two-year-old oppositional independence and practicing of saying, "No" are ominously absent in children who have been physically abused. This is not to say that the child does what is requested, but only that he does not blatantly elicit abuse by being openly oppositional. The abused child becomes an expert at passive resistance, of appearing to do without doing. He makes cooperative gestures and noises, even saying "Yes" and stating that he is doing what is requested while he is doing quite the opposite. Here we see the beginnings of denial and distortion of his own behaviors. He often feigns incompetence or lack of understanding.

### **The Abused Child Lives in an Environment Where Love and Nurturance are not Readily Available**

The abused child is valued or appreciated only when he is meeting the expectations of the parent. This may be when the child is obeying; when the child is staying out of the way; when the child is taking care of the adult, etc. The child is not seen or valued as a person with rights, feelings, drives, and interests of his own. He is an extension of the parents. He is truly a need-satisfying object for the parent. The child must learn to exist in this atmosphere. The implications of this dynamic between parent and child are apparent in the abused child's problems with development of object relations, a sense of self, autonomy, initiative and superego structures.

One of the most frequent adaptations to this aspect of the abusive environment is seen in the child with precocious islands of ego development as first described by Malone(9). The abused child is often seen to be taking care of his parents, physically and emotionally. The preschool child may do the family wash, fix breakfast, baby-sit an infant sibling. More striking is the emotional support of the parent a behavior described by Morris and Gould (10) as a role-reversal which occurs between the abused child and the parent. These behaviors not only keep the child safe from verbal or physical attack, but are also ways by which the child has learned to obtain attention and approval from his parents.

This dynamic is frequently more complex and convoluted. The abusive parent who needs a scapegoat for expression of his or her own unacceptable impulses will encourage and reinforce behavior in the child which is then alternately and erratically punished and denigrated. This is a very schizophrenogenic world for the child to negotiate. The child may play out the "misbehavior" and alternately receive punishment and/or approval. The abused child may cope with the chaos of such a situation by withdrawal or oppositional provocativeness or rage.



Clearly the child in such a family has little sense of self as he only exists to meet the needs and expectations of the parent. He can have little self-respect. Even if adequately cared for, he is truly a deprived child. He grows up without experiencing his parents' joy and delight in his own autonomous behavior.

#### Developmental Delays, Distortions, and Arrests are the Sine Qua Non of the Abused Child

We have spoken of the restrictions of autonomous ego functions as an adaptation to a dangerous punitive environment. This inhibition of autonomous functioning also results in the development of the delays seen in abused children at play, in school, and in the developmental testing situation. The abused child often appears less competent than he truly is. In a study of abused preschoolers at the National Center for Prevention of Child Abuse and Neglect in Denver, deficits in gross motor development, speech, and language were noted with striking frequency(11). Lack of experience and stimulation account for many of these delays. Restriction of the child, physically and emotionally, does not allow the abused child to explore and investigate his world even as an infant. Age-appropriate modeling and stimulation are not available to help the child master his world. The abusive parent has little patience with the child. Approximations to mastery of a task are not appreciated and reinforced but are criticized as imperfect failures.

An energy model of psychic functioning is also helpful in understanding many of the delays of the abused child. Consider the hypervigilant environmentally-cued child described earlier. He has little energy left over to spend on exploring or enjoying his world as his psychic antennae are constantly attuned to the adults about him. He is slow to get into dramatic play and easily distracted from active manipulation of play materials even when they are available to him. The child's anxieties, fears, and fantasy life preempt his attention.

A number of psychological developmental stages are also delayed or distorted. The sense of trust described by Erickson,(12) can hardly be negotiated when the parent is not providing a predictable, safe, secure world for the infant. Object permanence and object constancy can hardly be accomplished satisfactorily when the parents themselves have such distortions of normal object relationships. Mahler's(13) concept of the establishment of object constancy(14) stipulates that the child learns to appreciate important people (primarily the mothering figure) in other than need-satisfying ways. The parent is valued and loved even when she is not meeting the child's needs, even when the parent is absent. The love object is no longer split into "bad mother" and "good mother" but an integration is achieved wherein the young child is able to value and love the mother whether she is being loving or disapproving. This stage requires a successful negotiation of separation-individuation, a developmental sequence which the abusive parent neither supports nor tolerates.

The process by which the gradual internalization of controls normally takes place is also disrupted for the abused

child. The child is identifying with an inconsistent, disturbed adult who models aggressive behavior but restricts expression of aggression in the child. The fragility of the abused child's developing self-control is obvious in the breakdown of the extreme inhibition and sudden volatile aggressive assaults upon siblings and other children when the supervision of an adult is not readily available. It is also seen in his tendency to snatch and hoard food and possessions. These children are identifying with parents who have not learned to have friends, or to use people and activities for fun and sustenance. It is no wonder that so many abused children grow up to be abusing parents.

#### SUMMARY

The abused child has psychological wounds as incapacitating and chronic as his physical wounds. We have pointed out that some of the unusual behaviors of the abused child are important adaptations with survival value within the abusive environment. On the other hand, those very adaptations play an active role in the etiology of developmental delays so frequently observed in abused children. There are a number of other psychological manifestations of the abusive environment which space does not allow us to detail here. Neither have we spoken to our experiences encountered in the variety of treatment regimes for these children. We have highlighted the chameleon nature of the abused child in order to explain why his behavior in any particular setting is less validly predictive of his behavior in other settings than is the case with other children. We have alluded to the fact that his overt behavior is less accurately a reflection of his inner psychic state than with less guarded and less fearful children. This knowledge requires of the professional attempting to assess the development of the abused child, a larger sampling of behavior. It also requires a more concerted effort to elicit unconscious material from the child, for his play and fantasy life will be more guarded and less available for our clinical understanding.

The primary purpose of this paper is to promote interest in the psychological status of abused children. It is hoped that from such understanding it will be possible to consider and provide the necessary treatment for the psychological wounds of abused children.

University of Colorado Medical Center  
4200 East Ninth Avenue  
Denver, Colorado 80220

#### REFERENCES

1. Gil, D. G., *Violence Against Children: Physical Child Abuse in the United States*, Cambridge, Mass: Harvard University Press, 1970; and, Glazier, A. E., *Child Abuse: A Community Challenge*, New York: Henry Stewart, Inc., 1971.
2. Wolins, M., *Selecting Foster Parents: The Ideal and the Reality*, New York: Columbia University Press, 1963; and, Goldstein, J., Freud, A. and Solnit, A. J., *Beyond the Best Interests of the Child*, New York: Free Press, 1973.
3. Martin, H. P., "The Child and His Development", in Kempe, C.

- H. and Helfer, R. E. (eds), *Helping the Battered Child and His Family*, Philadelphia: J. B. Lippincott Co., 1972, 93-114; and, Martin, H. P., Beezley, P., Conway, E. F. and Kempe, C. H., "The Development of Abused Children", *Advances in Pediatrics*, 1974, 21:25-73.
4. Elmer, E. and Gregg, G. S., "Developmental Characteristics of Abused Children", *Pediatrics*, 1967, 40:596-602; Gregg, C. S., and Elmer, E., "Infant Injuries: Accident or Abuse", *Pediatrics*, 1969, 44:434-439; Martin, H. P., "The Child and His Development", In Kempe, C. H. and Helfer, R. E. (eds), *Helping the Battered Child and His Family*, Philadelphia: J. B. Lippincott Co., 1972, 93-114; and, Martin, H. P., Beezley, P., Conway, E. F., and Kempe, C. H., "The Development of Abused Children", *Advances in Pediatrics*, 1974, 21:25-73.
  5. Rutter, M., et al, *A Neuropsychiatric Study in Childhood*, Philadelphia: J. B. Lippincott Co., 1970.
  6. Martin, H. P., Beezley, P., Conway, E. F. and Kempe, C. H., "The Development of Abused Children", *Advances in Pediatrics*, 1974, 21:25-73.
  7. Martin, H. P., (ed), *The Abused Child: A Multidisciplinary Approach to Developmental Issues and Treatment*, Boston: Ballinger Publications, 1976.
  8. Freud, A., *The Ego and the Mechanisms of Defense*, New York: International Universities Press, 1966.
  9. Malone, C. A., "Safety First: Comments on the Influence of External Danger in the Lives of Children of Disorganized Families", *American Journal of Orthopsychiatry*, January, 1966, 36: 6-12.
  10. Morris, M. G. and Gould, R. W., "Role Reversal: A Necessary Concept in Dealing with the 'Battered Child Syndrome'", *American Journal of Orthopsychiatry*, 1963, 33:298-299.
  11. Martin, H. P., (ed), *The Abused Child: A Multidisciplinary Approach to Developmental Issues and Treatment*, Boston: Ballinger Publications, Chapter VI, 1976.
  12. Erikson, E. H., *Childhood and Society*, New York: Norton, 1963.
  13. Mahler, M. S., Pine, F. and Bergman, A., *The Psychological Birth of the Infant: Symbiosis and Individuation*, New York: Basic Books, 1975.
  14. Fraiberg, S., "Libinal Object Constancy and Mental Representation", *Psychoanalysis St. Child*, 1969, 24:9-47; and, Burgner, M. and Edgcombe, P., "Some Problems in the Conceptualization of Early Object Relationships, Part II: The Concept of Object Constancy", *Psychoanal. St. Child*, 1972, 27:315-333.

# PSYCHOLOGICAL AND BEHAVIORIAL CHARACTERISTICS OF ABUSED CHILDREN

Martha F. Muir

*The author is a Staff Psychologist at the Child Study Center of the Oklahoma Children's Memorial Hospital and is currently completing doctoral dissertation research on the effects of divorce on children.*

There has been increasing attention in recent years to the problem of child abuse, whether it consists of actual physical injury inflicted by an adult or more subtle forms of physical, nutritional, or emotional neglect. Most research efforts have dealt with the characteristics and treatment of the person who has abused the child, most frequently the parent. Findings suggest that abuse families have higher proportions of social stress factors such as unemployment, broken homes, social isolation, and alcohol and drug abuse(1). Abusing parents tend to be misinformed concerning basic child development and child-rearing techniques, to have unrealistic expectations of the child, to lack adequate impulse control, and to display ambivalent, often detached, feelings toward the child(2).

Few studies deal directly with the victims of such abuse, the children themselves. Those reports which do attempt to focus on the abused child tend to be either demographic or descriptive in nature. Thus, Merrill(3) reports that one child is generally selected for abuse in a family and Kempe(4), Elmer(5), and others note that the abused child is generally younger than three years of age. Milowe and Lourie(6) propose that factors in the personality development of the child sometimes may lead to his inviting others to hurt him, an interaction which may continue even after removal to foster or adoptive placement. Young(7) characterizes the

children of abuse as "searchers for strength, concern, consistency, affection, order, and security." Various theorists have proposed a "violence breeds violence" syndrome by which abused children repeat observed aggressive behavior in their adulthood, resulting in conflicts with the law and abuse of their own children(8).

What is lacking in the field of child abuse is a concentrated research effort to delineate the actual psychological and behavioral characteristics of these children, both immediately following the abuse incident and at later developmental stages. Leavitt(9) has stated, "Little is known about the long-term effects of abuse on the child. Even less is known about the short- and long-term effects on the learning of the abused child and his ability to function in society." Mental health professionals, particularly those in the field of pediatric psychology, are increasingly faced with the task of evaluating the psychological effects of abuse with a view toward appropriate recommendations for placement and follow-up treatment. To adequately approach this task we need to examine more closely the findings concerning the emotional and behavioral characteristics of these children and begin formulating effective modes of treatment for dealing with the emotional consequences of child abuse.

An inherent problem in child abuse research is the difficulty in differentiating those characteristics which are present in the child prior to the abuse and those which are a consequence of the abuse itself. It is not enough to determine what percentage of abused children are overly active, mentally retarded, or emotionally disturbed, as these characteristics may have been present prior to the abuse.