



resource sheet

NATIONAL CHILD PROTECTION CLEARINGHOUSE

Effects of child abuse and neglect for children and adolescents

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Child abuse and neglect is a social and public health problem in Australia, as well as a children's rights issue. Abuse and neglect can lead to a wide range of adverse consequences for children and young people. The purpose of this Resource Sheet is to indicate the possible effects of child abuse and neglect and to explore whether different types of maltreatment are associated with specific adverse consequences in childhood and adolescence.

Types of abuse and neglect

Child abuse and neglect consists of any acts of commission or omission by a parent or other caregiver that results in harm, potential for harm, or the threat of harm to a child (0–18 years of age) even if the harm is unintentional (Gilbert et al., 2009). The five main types of child maltreatment are: physical abuse, sexual abuse, emotional maltreatment, neglect, and witnessing domestic violence.

Evidence suggests that different types of abuse and neglect rarely occur in isolation and children who experience repeated maltreatment often experience multiple forms of abuse (Higgins, 2004).

To find out more about definitions of abuse and neglect, see the National Child Protection Clearinghouse Resource Sheet, *What is Child Abuse and Neglect?* (Price-Robertson & Bromfield, 2009)

Factors affecting the consequences of child abuse and neglect

Children and young people are affected by abuse and neglect in various ways. Outcomes of abuse may range from mild symptoms to debilitating and life-threatening conditions (Runyon & Kenny, 2002). Factors that may affect the way in which abuse and neglect affects children and adolescents include:

- the age and developmental status of the child when abuse occurred;
- the severity of maltreatment;
- the frequency and duration of maltreatment;
- the relationship between the child and the perpetrator; and
- the type(s) of abuse/neglect.

What increases the risks for or protects against adverse outcomes?

Not all children exposed to similar experiences of abuse and neglect are affected in the same way. A range of other life experiences and family circumstances—both positive and negative—impact on a child's vulnerability or resilience. These are referred to as "risk and protective factors". Resilience refers to the ability of a child to cope and even thrive after a negative experience (Child Welfare Information Gateway, 2008). When a child who has experienced abuse or neglect has few protective factors (such as positive relationships with extended family and

friends), the risk of more serious adverse outcomes increases. Risk factors that may contribute to poorer outcomes for children exposed to abuse and neglect include socio-economic disadvantage, social isolation, dangerous neighbourhoods, large families and whether the child has a disability (Dubowitz & Bennett, 2007).

In spite of the risks of negative outcomes, some children exposed to maltreatment may emerge unscathed due to protective factors that strengthen their resilience (Corby, 2006; Haskett, Nears, Ward, & McPherson, 2006). Factors that contribute to a child's resilience include child attributes (such as self-esteem and independence), features of the family environment and community resources (Haskett et al., 2006).

Not all children exposed to similar experiences of abuse and neglect are affected in the same way. Risk and protective factors impact on a child's vulnerability or resilience.

Chronicity and multiple types of abuse and neglect

Any maltreatment of a child may lead to damaging adverse consequences; however, research indicates that chronicity and experiencing multiple types of abuse and neglect are related to greater maladjustment and negative outcomes for children (Arata, Langhinrichsen-Rohling, Bowers, & O'Farrill-Swails, 2005; Ethier, Lemelin, & Lacharite, 2004; Frederico, Jackson, & Black, 2008; Higgins & McCabe, 2001). Research on the relationship between different types of abuse and neglect is limited. However, a review by Higgins and McCabe found that different types of abuse were significantly correlated (i.e., children experienced more than one type of maltreatment). This co-occurrence was particularly common between physical abuse and other types of maltreatment.

Chronic abuse and neglect can be defined as "recurrent incidents of maltreatment over a prolonged period of time" (Bromfield, Gillingham, & Higgins, 2007). Chronic experiences of child abuse and neglect occurring over different developmental periods can have a profound and exponential impact on a child's life (Frederico et al., 2008; Miller, 2007).

In associating child abuse and neglect with negative consequences, it is important to consider a child's abuse history rather than one isolated episode of abuse.

Experiencing chronic and multiple types of abuse and neglect are related to greater maladjustment and negative outcomes for children.

Consequences of child abuse and neglect

Child abuse and neglect can affect all domains of development—physical, psychological, cognitive, behavioural and social—which are often interrelated. The following section discusses the possible consequences of child abuse and neglect identified in the research literature. The research reviewed included high-quality systematic reviews and primary studies with large representative samples in English-speaking countries. Adverse consequences are broadly linked to all abuse types; however, where appropriate, associations are made between specific types of abuse/neglect and negative outcomes.

Child abuse and neglect can have physical, psychological, cognitive, behavioural and social consequences, which are often interrelated.

Attachment problems

Babies and young infants exposed to abuse and neglect are more likely to experience insecure or disorganised attachment problems with their primary caregiver (Hildyard & Wolf, 2002; Jordan & Sketchley, 2009; Schore, 2002; Streeck-Fischer & van der Kolk, 2000). Patterns of child-caregiver attachment are extremely important for a child's early emotional and social development. For children with an insecure attachment, the parent/caregiver (who should be the primary source of safety and protection) becomes a source of danger or harm, leaving the child in irresolvable conflict (Hildyard & Wolf, 2002). Without the security and support from a primary caregiver, babies and infants may find it difficult to trust others when in distress, which may lead to persistent experiences of anxiety or anger

(Streeck-Fischer & van der Kolk, 2000). Insecure attachments alter the normal developmental process for children, which can severely affect a child's ability to communicate and interact with others and form healthy relationships throughout their life (Bacon & Richardson, 2001).

Physical health problems

Research investigating the effect child abuse and neglect has on overall physical health has largely focused on outcomes in adulthood. However, data from the Longitudinal Studies of Child Abuse and Neglect (LONGSCAN) in the United States has indicated strong associations between abuse/neglect and health problems in children/adolescents (Flaherty et al., 2006, 2009). Flaherty et al. (2006) found that exposure to one adverse experience doubled the odds of children having overall poor physical health at the age of 6 years, and tripled them if children had experienced four or more adverse experiences. A further study by Hussey, Chang, and Kotch (2006) found that all types of abuse and neglect were associated with 8 of 10 major adolescent health risks.

A common form of abuse affecting the health of babies is shaken baby syndrome. Health problems resulting from shaken baby syndrome may include brain damage, spinal cord injuries, hearing loss, speech difficulties and even death (Child Welfare Information Gateway, 2008).

Trauma and psychological problems

Trauma caused by experiences of child abuse and neglect can have serious effects on the developing brain, increasing the risk of psychological problems (Streeck-Fischer & van der Kolk, 2000). Extensive research has identified a strong relationship between abuse/neglect and post-traumatic stress disorder (Gilbert et al., 2009; Schore, 2002; Streeck-Fischer & van der Kolk, 2000). Recent research suggests that diagnosing children with post-traumatic stress disorder does not capture the full developmental effects of chronic child abuse and neglect and many researchers now prefer the term "complex trauma" (Cook et al., 2005). Exposure to complex and chronic trauma can result in persistent psychological problems. Complex trauma affects the developing brain and may interfere with a child's capacity to integrate sensory, emotional and cognitive information, which may lead to over-reactive

responses to subsequent stress (Perry, 2001; Streeck-Fischer & van der Kolk, 2000).

Learning and developmental problems

Strong associations have been made between child abuse/neglect and learning difficulties/poor academic achievement (Gilbert et al., 2009; Mills, 2004; Veltman & Browne, 2001)

Abuse and neglect in the early years of life can seriously affect the developmental capacities of infants, especially in the critical areas of speech and language (Wolfe, 1999).

Research has demonstrated that abused and neglected children perform less well on standardised tests and achieve poorer school marks, even when socio-economic status and other background factors are taken into account (Mills, 2004). Prospective research studies have consistently shown that maltreated children have lower educational achievement than other groups of children (Gilbert et al., 2009). In a meta-analysis by Veltman and Browne (2001), 31 of 34 studies (91%) indicated that abuse and neglect was related to poor school achievement and 36 of 42 (86%) indicated delays in language development. However, the authors acknowledged that studies associating child abuse and neglect with learning problems are problematic in that most studies do not know the intellectual status of children before maltreatment.

Behavioural problems

Researchers have found that child abuse and neglect is associated with behaviour problems in childhood and adolescence (Ethier et al., 2004; Mills, 2004; Shaffer, Huston, & Egeland, 2008). The earlier children are maltreated the more likely they are to develop behaviour problems in adolescence (Frederico et al., 2008). Researchers have often associated abuse and neglect with internalising behaviours (being withdrawn, sad, isolated and depressed) and externalising behaviours (being aggressive or hyperactive) throughout childhood (Mills, 2004). Internalising behaviours are commonly associated with child neglect. Children affected by neglect tend to be more isolated at school compared to other groups of children and have difficulty making friends (Hildyard & Wolf, 2002). Neglected children may also display aggressive and disruptive behaviour; however, externalising behaviour problems are more closely associated with physical

and sexual abuse or witnessing domestic violence (Hildyard & Wolf, 2002; Holt, Buckley, & Whelan, 2008). Inappropriate sexualised behaviour is also linked with abuse and neglect, and most commonly with sexual abuse and exposure to highly violent and sexualised environments (Corby, 2006; Merrick, Litrownik, Everson, & Cox, 2008).

Mental health problems

Mental health problems, such as depression and anxiety disorders, have consistently been linked with child abuse and neglect, particularly for adolescents (Brown, Cohen, Johnson, & Smailes, 1999; Gilbert et al., 2009; Harkness & Lumley, 2008; Kaufman, 1991). Prevalence rates of major depression have been shown to be approximately four times higher in adolescence than younger children (Harkness & Lumley, 2008). In a review of seven large-scale studies by Harkness and Lumley, all studies showed a high association between child abuse/neglect and depression in adolescence. For example, in a longitudinal study by Brown, Cohen, Johnson and Smailes, children and adolescents who reported a history of abuse or neglect were three times more likely to exhibit a depressive disorder than non-maltreated children. In a Victorian study of characteristics of children referred to a therapeutic health service for children who had been abused or neglected (the Take Two Program), 62% of children met the criteria for at least one mental health diagnosis (Frederico et al., 2008).

Youth suicide

Research suggests that abuse and neglect doubles the risk of attempted suicide for young people (Brodsky & Stanley, 2008; Brown et al., 1999; Evans, Hawton, & Rodham, 2005). The systematic review by Evans and colleagues found a strong link between physical/sexual abuse and attempted suicide/suicidal thoughts occurring during adolescence. Perkins and Jones (2004) found that 31% of a physically abused group of adolescents had suicidal thoughts compared to 10% of a non-abused group. Brodksy and Stanley (2008) found that risks of repeated suicide attempts were eight times greater for youths with a sexual abuse history. The authors suggested that sexual abuse could be specifically related to suicidal behaviour because it is closely associated with feelings of shame and internal attributions of blame (Brodsky & Stanley, 2008).

Eating disorders

Eating disorders, including anorexia and binge-purge behaviour (bulimia), may also be associated with child abuse and neglect (Brewerton, 2007). Sexual abuse has been widely linked to eating disorders in children and adolescents; however, experiencing other maltreatment types or multiple forms of abuse and neglect have also been shown to increase the risk of developing an eating disorder (Brewerton, 2007).

Drug and alcohol abuse

The psychological effects of child abuse and neglect may lead to alcohol and drug abuse problems in adolescence and adulthood (Fergusson & Lynskey, 1997; Harrison, Fulkerson, & Beebe, 1997; Perkins & Jones, 2004). Evidence suggests that all types of child maltreatment are significantly related to higher levels of substance use (tobacco, alcohol and illicit drugs) (Moran, Vuchinich, & Hall, 2004). In surveying public school students in Grades 6, 9 and 12 in the United States, Harrison and colleagues found that experiences of physical or sexual abuse increased the likelihood of students using alcohol, marijuana and other drugs. A further study in the United States found that 28% of physically abused adolescents used drugs compared to 14% of non-abused adolescents (Perkins & Jones, 2004). Compared to 22% of the non-abused group, 36% of physically abused adolescents also had high levels of alcohol use (Perkins & Jones, 2004).

Aggression, violence and criminal activity

In addition to feeling pain and suffering themselves, children exposed to abuse and neglect are at increased risk of inflicting pain on others and developing aggressive and violent behaviours in adolescence (Gilbert et al., 2009; Haapasalo & Pokela, 1999; Maas, Herrenkohl, & Sousa, 2008). Research suggests that physical abuse and exposure to family violence are the most consistent predictors of youth violence (Gilbert et al., 2009; Maas et al., 2008). In a meta-analysis by Gilbert and colleagues, both prospective and retrospective studies indicated strong associations between child abuse and neglect and criminal behaviour. A National Institute of Justice study in the United States predicted that abused and neglected children were 11 times more likely to be arrested for criminal behaviour in adolescence (English, Widom, & Brandford, 2004). Eighty three

per cent of children in the Take Two program in Victoria demonstrated repeated and severe violence towards others (Frederico et al., 2008).

Teenage pregnancy

Adverse consequences of teenage pregnancy and risky sexual activity may also be associated with experiences of abuse and neglect (Fergusson, Horwood, & Lynskey, 1997; Gilbert et al., 2009; Hillis et al., 2004; Mendes & Moslehuddin, 2006; Noell, Rohde, Seeley, & Ochs, 2001). Research has consistently linked teenage pregnancy with experiences of sexual abuse (Hillis et al., 2004; Paolucci, Genuis, & Violato, 2001). A study by Fergusson and colleagues found that young women (18 years of age) exposed to child sexual abuse had significantly higher rates of teenage pregnancy, increased rates of sexually transmitted diseases, and higher rates of multiple sexual partnerships and appeared to be more vulnerable to further sexual assault and rape.

Homelessness

Research suggests that children and young people may encounter homelessness or housing instability as a result of abuse and neglect and particularly from domestic or family violence disputes. Homelessness is more likely to eventuate in adulthood; however, Australian Bureau of Statistics (ABS) data show that 34,073 children in Australia were homeless in 2005–06 (33% of the homeless population) (Chamberlain & MacKenzie, 2006). The Australian Institute of Health and Welfare (AIHW) indicated that 54,700 children accompanied their parents (86% of whom were mothers) into Supported Accommodation Assistance Program (SAAP) services in 2005–06. The main reason for women with children to seek support was domestic or family violence (54%) (AIHW, 2007).

Young people who are removed from the care of their parents because of abuse or neglect may also face homelessness and unemployment soon after leaving out-of-home care (e.g., when they turn 18). A lack of social support networks and poor academic achievement often contribute to the difficulties young people face in finding adequate housing and employment after care.

For a more detailed discussion on the relationship between child abuse/neglect and adverse consequences of unemployment/homelessness in adulthood, see the National Child Protection

Clearinghouse Resource Sheet, *The Effects of Child Abuse and Neglect for Adult Survivors* (Lamont, 2010).

Fatal abuse

The most tragic and extreme consequence of child abuse and neglect is abuse that results in death. The World Health Organization (WHO) estimates that 155,000 deaths around the world of children aged 15 or younger occur every year due to abuse and neglect (Pinheiro, 2006). A large number of deaths caused by abuse and neglect go unreported due to insufficient investigations and a failure to run post-mortem examinations. This suggests that estimations of worldwide deaths caused by abuse and neglect could be even higher (Gilbert et al., 2009).

Research limitations

Research investigating the effects of child abuse and neglect is extensive; however, in most research studies, due to several limitations, it is difficult to make casual links between abuse/neglect and adverse consequences. Many research studies are unable to control for other environmental and social factors. This makes it difficult to rule out influences such as socio-economic disadvantage, disability and social isolation when associating abuse and neglect with negative consequences for children and young people. Other research limitations include problems with definitions (for example, type or severity of abuse), recruiting a representative sample, and obtaining accurate recollections of past events by participants (Gilbert et al., 2009; Maas et al., 2008). In spite of the various limitations, research in the area consistently identifies strong links between child abuse/neglect and adverse consequences for children/adolescents.

Conclusion

Child abuse and neglect may lead to a wide range of adverse consequences for children and adolescents. Research suggests that specific types of abuse are more closely related to some adverse outcomes than others; for example, the links between physical abuse and violent or aggressive behaviour. However, experiencing chronic and multiple forms of abuse increases the risk of more damaging and severe consequences for children and young people.

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