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Child Abuse and the Negative Role it Plays Throughout a Childs Lifetime

McKenna Ellingson
kenna.ellingson2@icloud.com

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Child Abuse and the Negative Role it Plays Throughout a Childs Lifetime

McKenna Ellingson

Professor Jerrod Brown and Ryan Chukuske

Submitted to Concordia University, St. Paul, Minnesota

College of Education, Humanities, and Social Science
in Partial Fulfillment of the

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Abstract

Child abuse is very common terminology across the entire globe, states, communities, and even rural and urban areas. This writing will cover many topics within child abuse that discusses the impact that child abuse has on children through physical abuse, sexual abuse, emotional abuse, neglect, exposure to domestic violence and how it causes substantial adverse health, educational, and behavioral consequences throughout the child lifespan. The goals will be to explore different types of abuse and how it impacts the child's brain, development, and stages throughout their lifetime. This writing was aimed to review the most comprehensive studies of the prevalence of child maltreatment and appraise the methodologies to review future studies. It shall integrate personal experiences and academic knowledge to provide rationale for the negative effects child abuse holds on billions of children across the globe. In addition, this writer will acknowledge the need for additional research and studies to be conducted surrounding the topic of child abuse to ensure that human service professionals are equipped with enough knowledge to support their daily work with children and families across the globe.

Keywords: *Child Abuse, Neglect, Physical Abuse, Caregivers, Emotional Abuse, Sexual Abuse*

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Chapter 1: Introduction

Child abuse is prominent in every community in the world, whether viewed as “common” or not. There are many reasons and inspirations for exploring the topic of child abuse in both this writer's personal and professional life. Although a generation Z, this writer has great professional experience working with children. Throughout this writer's lifetime, they have worked as a daycare provider, advocate at a non-profit working with victims of crimes, as an assistant probation officer for Ramsey County Juvenile Detention Center, and my most current position, as a Social Worker for Douglas County doing Child Protection Services. The most common denominator in all of the listed professional experiences is children, youth, and families. This writer's passion and calling in the short life that she has lived thus far is working with less fortunate individuals. Working in the Human Service Profession for the last 5+ years has taught this writer a lot about herself, passions, interests, and most importantly why she wants to continue working in this field. This writer grew up in a very traditional, middle-class family. Her father is a current business owner, whose mother stayed home to provide care to the family. Now, she has a large, growing family of 7, with her first niece/nephew on the way. Growing up, this writer always viewed herself as a helper or someone willing to go out of their way for any person, whether they were viewed as significant or not. She enjoyed being around children and often finding herself being friends with the “underprivileged” at a young age in elementary school. Oftentimes, the “underprivileged” were low-income, single-parent households; one parent was often incarcerated, or removed from their biological family. Looking back at her younger years, she never knew that many of her friends, peers, and classmates would be experiencing childhood trauma, specifically child abuse which could look like physical, emotional, mental, or even financial abuse(s). Growing into her teenage and younger adult years,

she developed a great passion for working with children and families of all cultures, races, ethnicities, genders, etc. Today, she is a current Social Worker doing Child Protective Services. Daily, she works with children who are abused stemming from the same common denominators as mentioned before, low-income, single-parent households; one parent often incarcerated, and children who may live with abuse in some form every day they exist.

The topic of child abuse holds great professional importance to the writer, as mentioned, working as a Social Worker doing Child Protective Services. Children who have experienced or suffered child abuse are at a much greater risk than the typical child to experience various emotional, psychological, and physical problems, that often stem into their teenage, adult, and late adult years. Physical and emotional abuse is a global issue and puts many children at risk of physical and psychological health problems. Worldwide, it was found that 300 million children ages 2–4 years old suffer regular and consistent physical or psychological abuse by their caregivers (Leavuan et al. 2023). Leavuan et al. (2023) also found that national surveys show that about 29% of children have been exposed to abuse or neglect by their caregiver. Among these, 13.5% have been physically and 12% emotionally abused by their caregivers. Child abuse can cause health impairments during childhood and as an adult, such as damage to brain development, mental illness, and behavioral problems. Consequences become more severe with increased severity of abuse. As a result, child abuse leads to large costs to society.

Why Child Abuse Makes for a Strong Argument

Child abuse remains a social issue and has since the beginning of time and is a difficult topic to discuss. As child abuse primarily occurs behind closed doors and in a family's home, it continues to be a challenging issue to put to a full stop. One of the most effective ways for an

individual to contribute to the prevention and end of child abuse is to become educated on the topic. Learning the signs of child abuse and ways to prevent it can play a big factor in being able to identify a dangerous situation and also allows you to educate and inform others. If someone is wanting to make a difference or advocate for the children in their community, volunteering at any local advocacy center, non-profit centers, or social services may be an easy way to make a difference in the lives and families who are experiencing abuse. Creating laws may also be an effective national-level solution to child abuse as it regulates the issue stronger than without laws regarding the children in society. Introduced in May of 2019, the The Stronger Child Abuse Prevention and Treatment Act pushed to reauthorize the Child Abuse Prevention and Treatment Act (CAPTA)(The World Medical Association, 2022). CAPTA is a bill that was passed to address the child and neglect related to all families who are impacted by substance use disorders and racial biases of those children and families affected by the child welfare system. Child abuse holds negative consequences and impacts on childrens and families across the globe each and every day, and without more research and knowledge to support the child victims, how do social workers know what ground to stand on?

Trends in Child Abuse

There are many identified trends, controversies, and problems that relate to child abuse, especially in small communities and the world many Americans are living in today. According to recent data from the U.S. government, it seems to indicate that child abuse lessened from 2021 to 2022 (Mathews et al., 2020). In comparison from 2022 to 2024 data, Matthew et al. (2022) described that 3,096,101 million cases of child abuse or neglect were investigated, a decrease from the previous year's 3,016,000 million. Investigations resulted in a finding of abuse that decreased from 588,229 in 2021 to 558,899 in 2022 (Mathews et al., 2020). "In those

investigations, the research found that 74.3% were victims of neglect, 17% were physically abused, 10.6% were sexually abused and 6.8% were psychologically mistreated” (Mathews et al. 2022). These numbers are astonishing and only seemingly increase leading to detrimental outcomes such as trauma, injury, or even death. According to the Child Welfare Archive (2024)

Child Trends is committed to sharing information and lessons learned to improve the lives of all children and families involved in the child welfare system. Our researchers use a variety of means to support these children and families, including rigorous research, program evaluation, and technical assistance in the child welfare field. We work with child welfare jurisdictions in all 50 states, and our findings lead to meaningful opportunities for intervention and system development at the national level. However, our work is also deeply informed by the varied, unique complexities of state and local child welfare jurisdictions. We partner with various stakeholders—including foundations, research organizations, and public and private organizations—and work more directly with families and communities. (p.4)

In addition to the above information, it is important for human service professionals to engage within the multidisciplinary teams to ensure that there is enough foundation to support the child welfare system, continuing education, and well-equipped professionals to work with children and families. Children and families deserve high-quality services to ensure that their basic needs are being met and are supporting the children’s safety, families’ safety, permanency, and overall well-being. According to the article, “Child Welfare Archives” Currently, over 3.6 million children live in families that are referred to child welfare agencies for neglect or abuse each year, and approximately 407,500 are placed in foster care daily. In addition to these numbers, over 2.5 million children reside in kinship care, or the living arrangement of children with relatives or

persons with a strong kin bond (e.g., grandparents raising grandchildren, godparent care arrangements” (Child Welfare Archives, 2024). In recent years, the child welfare field has done its best to focus on prevention rather than addressing the needs of children at the forefront. It is crucial that professionals understand how separating a child from their family may cause more harm than keeping the child placed with their caregivers. For example, despite the noble intentions of most child welfare agencies, many children who are exposed to foster care experience challenges such as mental health problems, academic deficits, and criminal justice involvement; many transition-age youth are not sufficiently prepared when they leave custody. Due to the complexity of the work, social workers are burnt out and troubled with what appropriate steps to take to ensure safety and well-being of the child or children at risk. Children are often left with emotional and mental scars, despite the services and active efforts many workers are conducting.

Statement of the Problem

Definitions of child abuse may vary from culture to culture. Unfortunately, cultural rationalizations for harmful behavior toward children may be accepted all too readily as proof that the treatment of children is neither abusive nor harmful. For instance, the work contribution of children in the everyday lives of families and society should be recognized and encouraged only as long as it also contributes to the child’s development. The World Medical Association (WMA) considers such exploitation of children a serious form of child abuse in all its forms. Child neglect represents a failure of a parent, or other person legally responsible for a child’s welfare, to provide for the child’s basic needs and an adequate level of care. Overall, child abuse may have long-lasting effects on an individual's mental health, behavior, and relationships in adulthood, leading to physical and psychological health issues such as depression, anxiety, and

substance abuse. Child abuse is prevalent amongst every community across the globe and due to the complexity and needs of the children and families, the problem at hand is how to appropriately and effectively address the needs of the children and families from all communities and walks of life to ensure stability, safety, and overall well-being for child victims.

Discussion of Strengths and Weaknesses

The child welfare system as it relates to child abuse has many strengths and weaknesses. Some of which include strengths of children constantly having eyes on them, safety being monitored, and basic needs constantly being addressed. The weaknesses include the child welfare system, uncooperative parents, lack of follow through, not enough services, short staffing amongst the child welfare system, and overall lack of clarity for the social workers putting in the work every single day for the children in their communities. The article titled, “New Directions in Child Abuse and Neglect Research” states,

Rates of substantiation vary dramatically across states and there is little consensus on what accounts for this variation. Overall, every method used to determine the accuracy of child abuse and neglect allegations has weaknesses and cannot be considered definitive. To some extent, this does not matter as long as the victims are safe and receive needed services. For example, most crimes will not be reported or prosecuted or result in the conviction of the perpetrator; however, crime victims will still have access to many services designed to help them recover from the effects of the crime, and most can take at least some steps toward protecting themselves from the perpetrator. Although child abuse victims are dependent on caregivers for future protection, many parents can and do take steps to protect their children from known perpetrators or correct their own neglectful or abusive behavior. In terms of access to needed services, what happens officially in a case

is unrelated to the receipt of services in the child welfare system. (Committee on Child Maltreatment Research, 2014, p. 4)

Many Americans, community members, and even social workers working in the child welfare system have differing opinions regarding the entire child welfare system as a whole. Many support the work social workers and human service professionals do, but there are also individuals, community members, and others deeming the work that professionals in the child welfare system are conducting. More specifically, for taking children from families, not allowing access, and placing negative standards upon the people who are serving the communities out of the goodness of their hearts. There are many impacts that child abuse places on a child, their family, and society, which will be focused on in the following chapters.

Chapter 1: Conclusion

Overall, as a student of education, a professional working in the human services field, and a community member in a small town, there is enough information to justify the need for additional services, resources, and education surrounding child abuse, trauma, child maltreatment, families, and otherwise. Child abuse has and always will be a part of the world, so it is up to community members, especially human service professionals to step up and advocate for the children and families to support changes and identify additional community resources and services that are meeting the needs of the children across the globe. In the next chapter, this writer will go into great detail about specific types of child abuse, effects, and learning more about why caregivers decide to maltreat their children, or even learn about ways caregivers can blindly be effecting their children through traumatic experiences, domestic violence, and poverty.

Chapter 2: Review of Literature

The previous chapter covered trends in child abuse, the statement of the issues, and why research on child abuse is important and holds great value. In the upcoming chapter, the focus shifts to discussion of the key elements of child abuse and maltreatment in the communities that are lived in. There are many ways that one may identify a victim who has experienced child abuse. Child abuse could mean any recent act or failure to act on the part of a parent or caretaker, which results in death, serious physical or emotional harm, sexual abuse, or neglect. Child maltreatment is common across the world and may cause adverse health and behavioral issues amongst children. These issues occur during the abuse, but also well into their adult and later years. Professionals and even community members should work to understand the issues surrounding child maltreatment, as is essential to evaluate interventions to reduce the high rates of maltreatment, especially those seen across the globe and even in small communities across the globe. Child maltreatment as a whole is a huge part of today's society due to the complexity of the issues many victims of child abuse face. Chapter two will focus on maltreatment types and the negative effects that child abuse plays on children and families.

Types of Child Maltreatment

Children are among the most vulnerable people in society, for many reasons such as, age, maturity, and hormones. This is true across continents, cultures, financial situations, ethnicities, and otherwise. There are many ways that a child may be abused at home, in the community, behind closed doors, or even in the public eye. Child maltreatment can look different in every case, especially those viewed daily at county, state, and federal levels. As shown in Figure 1, there are 5 types of abuse that may occur. A few specific examples that will be discussed

throughout this literature review are physical abuse, emotional abuse, sexual abuse, and neglect. While no two cases are ever the same when it comes to child abuse/ maltreatment, it is important to understand the signs, symptoms and effects that many of the children across the country are facing today.

The study completed by Mathews et al. (2022) described that child maltreatment is a major public health issue. Studies have found serious effects of physical abuse, sexual abuse, emotional abuse, neglect, and exposure to domestic violence inside of family homes. Many children who experience abuse, are being mistreated in multiple ways and forms and are associated with severe outcomes such as mental illness, sexual risk taking, interpersonal violence, and substance use. If this is a major public health issue, why is it not being treated as such? The children in the world are the upcoming generations, leaders, business owners, tax payers, and presidents. This matter should be taken more seriously by all members in society to ensure the needs of the children are being met at face value. Mathews et al (2022) presented that studies of childhood maltreatment can identify baseline prevalence by maltreatment type, as well as important features including the child's sex, age, and relationship with the abusive person. Without adequate measures, there isn't enough information to know if child maltreatment rates are increasing or decreasing. One very common, and often overlooked way that children are abused, is through physical abuse acts.

Physical Abuse

Physical abuse can look differently to each victim who is experiencing it. It may be a slap, punch, hit, bite, or an object being used to hurt, or not hurt the child. Moody (2018) presents that rates of physical abuse varied across different continents, such as Africa, South

America, and Australia. This study was mostly focused on North America. The study found that 25%- 75% of physical abuse rates were similar for boys and girls. While rates were similar for both genders, Asia had the second highest number of studies. In the European studies, it was found that physical abuse was much greater for boys, rather than girls. Moody (2018) also recognizes that definitions of physical abuse may vary from culture to culture as different areas may have different perceptions on the idea of physical abuse. For example, “smacking is still legal in the UK but outlawed in some parts of Europe. In spite of this, often too much is made of cultural differences, and there is a general consensus in many cultures about what constitutes maltreatment, cultural differences may therefore only play a small role in differences in reported rates of maltreatment” (Moody, 2018 p.8). One idea that may be controversial across countries is spanking. In contrast to Moody (2018) Avezum et al. (2023) found that spanking has been used by families worldwide to correct children’s unwanted behavior for as long as anyone can remember. Despite previous studies focusing on the negative consequences of these parental practices, open questions remain. Even in the child protective service world in Minnesota, spanking is typically screened in for a family assessment, especially if bruises, marks, or otherwise are left. All types of physical abuse leaves lasting impacts on a children’s lives and because of this, it leaves emotional pain on many child victims.

Emotional Abuse

As indicated in the paragraph regarding physical abuse, Moody (2018) presented that studies of emotional abuse were less commonly found, typically only being done in North America and Asia. With this being less common, there were only about 10 studies done for both boys and girls. The research found that emotional abuse impacts girls at a rate of (28.4%) in North America were almost doubled than the boys (13.7%) even though there were more studies

done on the girls. In Asia, there were more study samples completed, with this information, boys ranked “higher” than girls did from 33.2% to 26.9% (Moody, 2018). It should be recognized that when reviewing the non-clinical samples, the rates of emotional abuse in North American girls was much lower than it was for boys (Moody, 2018). Emotional abuse can be one of the hardest symptoms to read and even diagnosis as a mental health professional. Emotional abuse can also be one of the hardest abuses to prove, especially within the court system. One common way that can be hard to justify in the court system is when a victim is being emotionally abused and they are attempting to get a restraining order, it can be very hard for a person to prove they are being emotionally abused, as this typically consists of verbal exchanges, hurtful comments, controlling behaviors, isolation, manipulation, jealousy, etc. While very complex, emotional abuse can look differently based on the child's experiences or traumas. If the same two children were abused in a single home, same day, same occurrence, both children are going to interpret that abuse differently. Some may carry it with them, others may not. Factors could also include if that child has been abused in the past, how often it occurred, what type of abuse occurred, and who the abuser was. While often overlooked, emotional abuse is one of the most impactful and long-lasting trauma that a child victim may carry with them throughout their lifetime. Besides the fact that emotional abuse is common, sexual abuse occurs far more often than most may think.

Sexual Abuse

Sexual abuse is typically defined as sexual behavior upon another human being, which isn't upon agreement. Sexual abuse typically occurs from an offender upon another person and those acts that are occurring are unwanted behaviors. This could include molestation, rape, or attempted rape. Based on this writer's professional experience, sexual abuse occurring to children

is often from a family member, caregiver, family friend, sibling, or someone who is close to the family. Sexual assault is often characterized by a wide variety of behaviors that include but are not limited to the use of threats, force, or control, often times the person and/or victim may be incapable of consenting to these unwanted behaviors.

Similar to physical abuse, Moody (2018) suggests that the most common form of maltreatment studied is sexual abuse, which most studies were found to be conducted in North American. The second largest study set was found in Asia and in contrast, the least was in South America. In these studies where gender was identified, sexual abuse rates were generally higher for the females than males. This does not appear surprising to this writer as research findings have always favored that women are generally sexually abused more often than men are. Not only is sexual abuse a common form of child maltreatment, neglect of a child raises high concerns amongst nearly every, if not all communities across the globe.

In addition, the question can be asked, why do adults sexually abuse children? Does it represent a sexual interest? Although abuse by women is now being recognised, the fact that most known sexual abusers are men seems to indicate that how boys and men are socialized is somehow connected with why they sexually abuse children. How boys and girls are socialized may play some part in how they respond to a similar abusive experience.

Bentovim (1993) suggests that girls tend to internalize their responses when being abused. Girls tend to believe that abuse is their fault, which is reinforced by adults who are often telling them otherwise. Commonly, negative self attributes develop, together with self mutilation, anorexia nervosa, and the adoption of victim roles. Boys, however, tend to externalize their experiences of abuse. Flashbacks related to traumatic experience and memories of abusive acts

shape boys' sexual activities. Men and women who have had similar experiences in life, may attract one another. In addition the research found that not all adults who are sexually interested in children were sexually abused as children. It is argued that the body shape and size of children, being smaller, and less powerful also played a role in whether or not a caregiver sexually abused their child. It could be argued that men and society are to blame for the high rates of sexual abuse, but as research finds, this is not always the case.

Neglect

Neglect is an act that requires a caregiver to be unwilling to provide care to an individual they are responsible for, but can range from a variety of different variables. Definitions of neglect may vary because neglect is difficult to understand and identify for many reasons. Moody (2018) presents the idea that definitions of neglect have been criticized for decades due to the imposing middle-class values on lower-class families, most of which are not taking cultural experiences into account. Because of this, there has been debate on whether the focus of the definitions should be around either of the caregivers, or of the child victim. In the study completed by Moody (2018) he suggested that there were fewer studies of neglect than any other categories of maltreatment done, likely due to its complexity. North American was reported to provide the largest number for boys and girls and rates were much higher in North American than they were in Asia. Since this study was conducted in North America and Asia, there were very few studies done in the other continents such as Africa, South America and Australia. Many researchers have thought that definitions of child neglect should consider the severity, age, and frequency of the neglect, and how it may affect a child and their development at their current stage and later adulthood.

Meanwhile, Gross- Manos et al. (2019) suggested that neglect occurs due to three items- drugs, alcohol, and emotional problems. The findings were supported and consistent with the fact that addiction and mental health problems can strongly influence child welfare, regardless of social-economic class. The remaining suggestions included stress, poverty, unemployment, divorce, teen parents, lack of family values, abuse, own childhood, and lack of knowledge regarding raising their children. These factors fall consistent with this writer's experience working within the child welfare system and often align greatly with the the three categories initially listed such as, drugs, alcohol, and emotional problems.

Why Caregivers May Abuse Their Children

There are many reasons parents may abuse their children, which could include substance use, mental health issues, age of parent, lack of education, difficulty bonding with the caregivers child, prior abuse, and other trauma. Some protective factors that can help build on the strengths of parents could include networks, employment, access to more appropriate services, cultural awareness, and stress management techniques. Some factors that increase the risk of child neglect and abuse are parents who are young or are single-parenting, have experienced child abuse or neglect themselves, or have personal or family stress . These factors could include finances, mental health, lack of resources, or otherwise.

David Finkelhor and Jill Korbin (1988) present that cross-cultural research also reveals that certain categories of children such as those in poor health, females, and those born under certain circumstances may be at a higher risk of maltreatment. The article argues for an international strategy that urges individual countries to make a priority of the particular types of abuse that are in most urgent need of attention in their society as well as participating at the same

time in a international focus on three widely occurring forms of child abuse: parental child battering, selective neglect, and sexual abuse. There has been research done across decades and no specific answer has been found as to why caregivers or parents abuse their children. But research suggests that there are a variety of factors that may even relate back to the parents or caregivers childhood. Without factual and consistent research, it is hard to define why caregivers act as such to their children, which holds many short and long term effects on the children who are being abused.

Effects of Child Abuse on a Child

There are many effects of child abuse which run both short and long term in a child's life and well into their teen and adult years. Aside from the immediate injuries children may face when they are being abused, there are life-long impacts that they may experience or face. Maltreatment may be linked to many psychological and behavioral consequences in a child's life. According to the article written by Rosen et al. (2018)

Abuse or neglect may stunt physical development of the child's brain and lead to psychological problems, such as low self- esteem, which would later lead to high-risk behaviors, such as substance use. The outcomes for each child may vary widely and are affected by a combination of factors, including the child's age and developmental status when the maltreatment occurred; the type, frequency, duration, and severity of the maltreatment; and the relationship between the child and the perpetrator. Additionally, children who experience maltreatment often are affected by other adverse experiences (e.g., parental substance use, domestic violence, poverty) which can make it difficult to separate the unique effects of maltreatment" (p. 4)

As indicated in the research conducted by Rosen et al. (2018) there are many negative effects that child abuse and maltreatment plays on a child's life, which has life long impacts not only physically, but mentally and emotionally, which puts the child victim at much greater risk for experiencing negative outcomes in their lifetime such as having trouble building relationships, connecting with peers, securing employment, or even including their own children. Child abuse even effects the economy and as a result impacts even the smallest communities.

Effects on the County, State, and Federal Levels

There are many effects on children across the globe when it comes to the topic of child abuse, including effects on county, state, and federal levels. Some astonishing statistics from Jaudes et al. (1995) include, "Nearly 3 in 4 children - or 300 million children - aged 2-4 years regularly suffer physical punishment and/or psychological violence at the hands of parents and caregivers" (p.2). These numbers are extremely high and children are facing many traumatic experiences through abuse. Jaudes et al (1995) also includes "One in 5 women and 1 in 13 men report having been sexually abused as a child aged 0-17 years. 120 million girls and young women under 20 years of age have suffered some form of forced sexual contact" (p.7). These numbers are high and impact so many children in the world today. When it comes to federal legislation, they provide guidance to states by identifying minimum rules or laws as it pertains to child abuse/maltreatment. There is a program called The Federal Child Abuse Prevention and Treatment Act (CAPTA). CAPTA is a federal law that provides funding and guidelines to states to help prevent, assess, and treat child abuse and neglect. In addition, they also help define definitions of child abuse. This is relevant to the topic of child abuse, because in order for change to occur, policy and laws need to be established. While federal laws set minimum standards for states that accept federal funding, each state is responsible for defining child maltreatment in

state law. For example, Minnesota may have different child maltreatment laws than Florida, Alabama, and Texas. It all depends on the state's laws that are guided by Federal rules and regulations. Federal law that guides state laws always applies directly to each county within that state. For example, Douglas County, in Alexandria, Minnesota, follows all of Minnesota's laws and regulations related to child abuse. While there are many rural areas in Minnesota, there have been studies conducted regarding rural versus urban child abuse. Maguire et al. (2020) suggests that the findings of maltreatment rates were mixed when studied in higher vs lower rural areas. It was reported that five studies reported high rates of maltreatment in rural areas and four reported higher rates in the urban areas. It is more common that child maltreatment rates tended to be higher in the areas where the populations were larger, cities were bigger, and there was more diversity amongst the communities. One of the studies conducted by Maguire et al. (2020) found that community economics were not a direct correlation of child maltreatment in rural versus urban areas, which to this writer, is surprising knowledge. Many communities face poverty issues, domestic violence, substance use, and gun violence, and to this writer, it would be assumed these factors play a role in child maltreatment in both rural and urban settings despite the area, population, and community the abuse is taking place in.

Child Abuse and Eating Disorders

Those who are living with eating disorders, especially children, often report that at some point in their lifetime they experienced a traumatic event. Pignatelli et al. (2016) suggests that it is well known that certain types of trauma play a greater role in a child developing an eating disorder, such as sexual abuse, but less is known about certain childhood neglect that impacts those children. While Timothy et al. (2023) suggests that eating disorders do not occur without a cause, rather it is a mix of stress, violence, and trauma that shape the people that we are. It is

known that eating disorder patients may be more sensitive or vulnerable to stress and may be at a greater risk to develop anxiety or PTSD if not already diagnosed. Timothy et al. (2023) states, "Research exploring the interactional effects involving polymorphisms of specific neurotransmitter system genes, such as the serotonin transporter promoter polymorphism (5-HTTLPR) and selected forms of childhood abuse acting upon the severity of binge eating and related psychopathological systems has emerged over the last several years" (p. 10). While this information may be true, Kimber et al. (2017) suggests that eating disorders are associated with distress amongst caregivers, which then puts the caregiver at risk for becoming emotionally abused and/ or neglectful towards the child or children. The article reports that in the last two decades, research has been conducted and it is found that child maltreatment may indirectly influence the onset of an eating disorder for a child at many different stages of their lifetime. Two specific examples of this could include depression symptoms and the child may have a hard time regulating their emotions at school, home, or even in general. Eating disorders are one effect that children may experience in their later years from a childhood of abuse, however; mental health is one of the highest implications that many children and even families face who have abuse traumas.

Child Abuse and Mental Health

Child abuse and mental health go hand in hand not only for the child victims, but also the caregivers who are performing the abuse. Wake & Kandula (2022) authors of the article titled, "A review of Physical and Mental Health Consequences of Child Abuse and Neglect Implications for Practice" presented the idea that child maltreatment is associated with a variety of negative physical and mental health outcomes that do and will impact a child throughout the entire life span. It is well known that mental health is much more prevalent today

than it has ever been previously. It was found that between 0% and 22% of mental health service users were never asked about child abuse or history. The study also found that men who were diagnosed with psychotic disorders are also known to be asked less than other people regarding their previous potential child abuse/ maltreatment (Bateman et al. 2013). These numbers are very shocking, especially with how prominent mental health is in today's society. Some prevention strategies as it relates to mental health services and children or individuals who experienced or have experienced child abuse could be additional education to mental health providers and specific guidelines that service providers must ask during the initial phases with the client and/or family. Despite the mental health impacts a child or family may face, substance use may become more prominent amongst many children and families who are facing mental health concerns.

Child Abuse and Substance Use

There is great discussion on how children born to their mothers who use substances throughout pregnancy are at a greater risk of abuse or neglect than were those children who were not exposed to substances. Jaudes et al. (1995) conducted a study of child abuse that focused on children who were exposed in utero to drugs who were identified using results of toxicology screens birth and material records. The databases contained information for all types of abuses, types, findings, and even the outcomes of the investigations. According to Jaudes et al. (1995) "One hundred and fifty-five (30.2%) of the 513 children exposed in-utero to drugs were reported as abused or neglected and 102 (19.9%) had substantiated reports giving a rate of 84 abuse and neglect cases per 1,000 years of exposure. The yearly substantiated abuse rates varied, the lowest being 30 cases per 1,000 years of exposure in 1986 and the highest 107 cases per 1,000 in 1987" (p.2). This rate was two to three times that of children living in the same geographic area in the south side of Chicago. Exposure to substances in utero can lead to developmental delays, birth

defects, and cognitive impairments. Additionally, children living with parents who have a substance use disorder may experience neglect, abuse, and instability, which can hinder their emotional, social, and cognitive development. Substance use and child abuse have great ties especially when caregivers are using substances such as alcohol, drugs, or otherwise. Because a parent uses substances, it may impact that family financially and economically.

Child Abuse as it Relates to the Economy

Economically insecure families and children are more prone to experiencing child maltreatment than economically secure families. The economically disadvantaged families may experience problems such as debt, income, unemployment, and material hardship. Conrad-Hiebner & Byram (2020) suggests that according to the stress model, economic insecurities place a lot of stress on families which lead to anxiety, depression, stress, which in turn, affects mental health in a parent/caregiver. When a parent/caregiver is feeling these emotions, they may have an increase of harsh parenting, greater expectations, and negative discipline tactics. The findings of the research suggested that overall, there were significant linkages between economic stress and future maltreatment of a child. There were four categories of discrepancies that were focused on such as, loss of income transfers, maternal depression, employment, and hardships within a family. While this information holds true, a study done in China by Fang et al. (2015) suggested that “From 68 studies we estimated that 26.6% of children under 18 years of age have suffered physical abuse, 19.6% emotional abuse, 8.7% sexual abuse and 26.0% neglect. We estimate that emotional abuse in childhood accounts for 26.3% of the DALYs lost because of mental disorders and 18.0% of those lost because of self-harm” (p.4). There are many found consequences of physical abuse in children that cost China an estimated 0.84% of its gross domestic product, which was about 50 billions USD in the year of 2010 (Fang et al. 2015). In the country of China,

child maltreatment is extremely common and is associated with great economic losses because the children who are experiencing the maltreatment have psychological stresses that may later impact their health risks.

As indicated in the research, child abuse is prominent amongst the entire globe. There are many signs, symptoms, and effects that a child may express or show when being abused/maltreated; or unfortunately, even later life mental health concerns that may impact a person for the rest of their life. Differing typical side effects of child maltreatment may overlap, for example, sexual abuse can be categorized as physical abuse, and technically all forms of child maltreatment include at least 2 elements of emotional or psychological abuse, which complicates the true definition of child maltreatment. Child abuse will forever be a part of society and to make reasonable efforts towards change, it starts with the service providers, case managers, and person's willing to create and justify the need for continued services and education across all communities to address the needs of the children. However, if the needs of children are not being adequately addressed, there runs the risk of increased suicide rates.

Child Abuse and Suicide

Child abuse and suicide have been directly linked through decades of research. Liu et al. (2022) conducted a study to assess the estimates of pre adolescent's self injurious thoughts and behaviors (SITBs) identify correlations in the outcomes, and to conduct comparisons of preadolescent and adolescent SITBs in terms of the associated similarities. It is well known that there is not a lot of information regarding SITBs in younger children rather than older children, likely due to the common misconception that younger aged children do not experience suicidal thoughts or experiences. It has been found that preadolescent suicide raters have increased in recent years and has been determined the 5th leading cause of death amongst this age group of

children. The study completed by Liu et al. (2022) found that “the lifetime prevalence of suicide in the general population was 0.79 per 1 million children. Prevalence for lifetime suicidal thoughts, attempts and non suicidal self-injuries were about 15.1%, 2.6%, and 6.2%” (p.4). Data collected suggests that amongst the children who had suicidal behaviors or ideations also experienced attention deficit disorders and depression. It also suggested that child maltreatment and parental support yielded the results of the study conducted (Liu et al. 2022). Although the preadolescent suicides are rare, other SITB types may occur. It may be suggested that further study, specifically on other SITBs (not suicide ideation) may be beneficial for future research.

In contrast, a study done by Angelakis et al. (2022) suggested that there are greater developmental risks for suicide ideation than there is for sexual abuse. The literature found that there were more suicide attempts for those experiencing a form of sexual abuse, than any other forms of child abuse/ maltreatment. The findings may suggest the policy actions would be beneficial to raise community awareness regarding proactive suicide prevention for children who may have or are experiencing some sort of child abuse in their home currently or in the past. While children who experience maltreatment have a risk of developing depressive-like disorders, all children, no matter their experiences with abuse, may suffer from some sort of neuropsychological impact.

Child Abuse and Brain Development

Child abuse not only has physical impacts which causes harm, but most importantly, children are at crucial stages where the child is learning, growing, and adapting to their social environment. Severe stress during childhood and periods of the brain developing, has long lasting effects on the brain both short and long term. It is not only the trauma that leaves impacts on children, but the effect of neurological side effects that influences a child/ adult to cope with

stressors later on in their lifetime. Victims of child abuse are more likely to neglect their own children, especially when a child grows up in a toxic home environment (Panzer, 2008). Stress is a huge impact that children experience when they are faced with child abuse. Stressed is defined as “a stimulus or experience that produces a negative emotional reaction or affect, including fear and a sense of loss of control” (Panzer, 2008). When children are exposed to stress, it puts them at greater risks of developing potential mental health disorders due to the fluctuation and impacts on the child's brain.

Genetics also play a role in child development, and when abuse occurs, a child may be prevented from realizing their genetic potential, which in turn may trigger the development of diseases they are genetically already exposed to. This is caused by the chemical imbalances and effects that trauma plays on the child's body and brain. In the study conducted by Panzer (2008) he suggested for the future that children have the ability to exercise control over their actions, and self-organization should be encouraged in those children who are reached by social service agencies. In contrast, Bremner & Wittbrodt (2020) suggests that the brain is only impacted by events that are categorized as traumatic stress to the child. The reading finds that disorders that correlate with traumatic stress are PTSD, major depression, borderline personality disorders and lastly, dissociative disorders, as these all share one common factor; which is a smaller hippocampal volume, meaning they have deficits in memory perception. Bremner & Wittbrodt (2020) state,

The relationship between environmental events such as stressors, especially in early childhood, and their effects on brain and neurobiology is important to understand in approaching these disorders as well as the development of therapeutic interventions.

Addressing patients with stress-related disorders from multiple developmental (age at

onset of trauma) as well as levels of analysis (cognitive, cultural, neurobiological) approaches will provide the most complete picture and result in the most successful treatment outcomes (p. 6).

Clearly, stress has many negative effects on a child or even adult's brain that lead to symptoms that can cause psychiatric disorders. Similarly to Panzer (2008) research, treatments that target underlying brain development can be helpful when working with children, especially if they are within the child welfare system. For example, serotonin is a neurotransmitter that is often associated with symptoms of PTSD. Treatment with serotonin inhibitors may be extremely beneficial for children who are living with stress-related disorder and child maltreatment. Because of this, children may have greater access to treatment modalities and therefore have better mental and physical health outcomes.

Domestic Violence Impacts on Children

During the COVID-19 pandemic, as society struggled with increasing disease burden, economic hardships, and with disease morbidity and mortality, governments and institutions began implementing stay-at-home or shelter-in-place orders to help stop the spread of the virus. Although well-intentioned, one unintended adverse consequence was an increase in violence, abuse, and neglect of many children. The article written by Whiteman et al. (2023) proposed a study that reviewed the effects of domestic violence on child abuse. Measures meant to help control COVID-19 at its peak had many unintended consequences and placed many vulnerable children and families at risk of experiencing domestic violence and even greater so, child abuse/neglect. During the time of COVID-19, emergency departments were full of victims of the illness, causing less beds for the victims who were experiencing domestic violence, especially

children. This remained a stressful time for survivors of domestic violence. Whiteman et al. (2023) suggested in his findings that

Researchers in New Zealand previously showed that all forms of family violence (DV, child abuse, and elder abuse) increase during and after large-scale crises. Examples of the widespread impact of pandemic lockdowns are abundant. In 2020 the Guardian reported a global surge in reports of DV. Brazil experienced a 40- 50% increase in DV, and Spain had a 20% increase in the number of helpline calls in the first few days of lockdown. In Cyprus, the number of hotline calls rose 30% within one week of its first COVID-19 case. In the United Kingdom (UK) Refuge, one of the leading domestic abuse organizations— reported a 25% increase in helpline calls in the seven days following UK lockdown measures. During the same period, Refuge noted a 150% increase in website visits. In China’ s Hubei province, DV tripled when comparing February 2020 to February 2019. In France reports of DV increased 30% and in Argentina 25% (p. 5).

Similarly to the information from Whiteman et al. (2023) Wake & Kandula (2022) found that domestic violence during COVID- 19 augmented because of the pandemic that occurred. It was discussed that children especially, were at the basis of becoming victims due to the health emergency and also the increase of domestic violence that was occurring in family homes. The study revealed that childhood or adulthood violence has been associated with cardiovascular disease. Wake & Kandula (2022) suggested that COVID-19 has increased the risk of domestic violence with critical complications of mental and cardiovascular health in women. In the same article, another study reported that among female survivors of domestic violence, there was an increased risk of cardiovascular disease and type two diabetes. In addition, it was found that

injuries, psychological distress, unhealthy behaviors, and mental health outcomes were many of the identified consequences of domestic violence. When a mother is experiencing domestic violence when pregnant with a child, it can lead to fatal and nonfatal health outcomes of the unborn child upon birth due to the direct trauma stress has on a womens fetal development. Whereas, postpartum depression can occur and have risk factors for increased violence. In addition to pre and post-natal for mothers, depression and anxiety appeared to be more common in those women who were in relationships where that was domestic violence current or in the past.

Domestic violence has many negative impacts, but were heightened during the Covid-19 pandemic. Wake & Kandula (2022) mentioned “A study finding from Nigeria showed that lockdowns for COVID-19 in their country have accidentally placed women at risk for experiencing more severe partner violence. A study conducted in Taiwan revealed that anxiety, gender, age, perception of COVID-19 risk, and sexual orientation were factors associated with more changes in various aspects of the person’s sex life” (p. 4). Specifically during COVID-19, there were many impacts that families and especially children faced due to the increased rates of domestic violence in the home, which correlates with the high anxiety and depression rates during the global pandemic.

Trauma within Children

There are many traumatic tragedies that occur when a child is experiencing, exposed to, or witnessing traumatic events in the family home. There are many effects that childhood trauma plays on a child throughout their life-time. Establishing the role of childhood events in psychotic disorders in one of the many steps to anticipating and developing into adulthood when experiencing some of the many life-altering disorders. The capability of a caregiver to provide a

healthy and safe environment to a child is in great relation to the child's attachment style. A child's relationship with their parents or caregivers, plays a huge role in attachment forms early on in the relationship. Inyang et al. (2022) reported that children with responsive caregivers develop secure attachments and are more open to seeking support when faced with challenging situations. On the other hand, children with unreliable caregivers that fail to care for their needs tend to develop an avoidant or resistant attachment style, learning to be self reliant at young ages.

How Trauma May Cause Specific Symptoms in Children

Schizophrenia is a very common disability worldwide which is mainly distinguished by psychosis, which can range from delusions to hallucinations. In a study completed by Inyang et al. (2022) authors reviewed evidence of the relationship between childhood trauma, adverse life events, and psychosis, specifically as it relates to schizophrenia. The authors found that neurobiological processes occur in the brain after a trauma event/incident occurs. Because of the trauma that has occurred in the brain, inflammation and dysregulation from stress send signals to the brain, putting children at risk of an unregulated mental state that can and may lead to a progression of schizophrenia. Schizophrenia affects about 20 million people in the world each day. Schizophrenia disability often presents itself with many symptoms such as positive, negative, and cognitive occurrences. It is pretty typical that people who have Schizophrenia experience hallucinations and thought disorders. On the contrary, negative symptoms of this disability can be social withdrawal, lack of interest in peers or activities, and cognitive impairments such as learning disabilities, that often are resistant to the most current treatment modalities available today.

Housing Stress as it Relates to Child Abuse

Poverty is an established risk factor when it comes to child maltreatment rates. The literature review conducted by Chandler et al. (2022) suggests that poverty is a public health issue, rather than an individual family issue. However, the most recent research conducted suggests that material hardships such as meeting the basic needs of children, which include but are not limited to: food, water, clothing, shelter, and access to medical/mental/dental care services serves as a more direct measure of the way that poverty can and will affect children in their everyday lives (Chandler et al. 2022).. One of the many examples of a material hardship could include housing stress. Previous research has summarized the existing literature that focuses on economic insecurities within child maltreatment, but it has been found that little is known about types of housing stress within child neglect and/or child maltreatment. Chandler et al. (2022) conducted research using 21 articles that used 9 different measures of housing stress including homelessness or eviction, homeless or emergency shelter stays, foreclosure filing, housing instability, inadequate housing, physical housing risk, living doubled-up, housing unaffordability, and composite housing stress indicators. Overall, results from this body of literature indicate that housing stress is associated with an increased likelihood of caregiver or child self-reported maltreatment, child protective services (CPS) reports, investigated and substantiated CPS reports, out-of-home placements, and maltreatment death. While it was found in the research that child abuse and neglect stems from a public health issue, other researchers have found a link between child maltreatment and language barriers.

Language Measurement in the Child Maltreatment Population

Many researchers have differing opinions on links between child maltreatment, what causes it and the risk factors that are associated. Indicated in the previous paragraph, some believe that child maltreatment stems from a public health authority, while others suggest

language types are a direct link of child maltreatment from their caregivers. For example, the types of language used could be receptive, expressive, pragmatic and maltreatment type, such as physical abuse, neglect, or even both have shown the links and characteristics that relate directly back to child abuse/ maltreatment. Alvard et al. (2023) suggested that child maltreatment events occur within an ecological context with many factors contributing over time, which then increases the level of potential heterogeneity on a per person basis. The study done by Alvarado et al. (2023) was completed by taking a theory- informed approaches to evaluation of child maltreatment effects on language. The study examined the effects of child maltreatment and its dimensions on language. The results of the study found that maltreated children performed consistently below peers on grammar but not vocabulary assessments, disproportionate use of vocabulary assessments, considerable variability on participant characteristics and limited multidimensional measurement of maltreatment exposure. It was suggested that only nine studies analyzed the relationship between a maltreatment dimension (e.g., type, severity) and language (Alvarado et al, 2023). Based on the research conducted, it should be noted that more research is needed in relation to the link between language and child maltreatment, especially when looking at specific maltreatment types.

Association Between Child Maltreatment and Loneliness

Loneliness may be defined differently to each person that is asked. Loneliness may also look differently for each person who may or may not have experienced it in their lifetime. Emotional loneliness could be referred to a child feeling a lack of friendships, peer's at school or classmates. Social loneliness may refer to a child feeling like they do not fit in with their peers/classmates/ family. Children who have experienced maltreatment at any point in their lifetime experience some sort of betrayal of trust from their caregivers. Because of this, many

children generalize the distrust to all important people in their lives. Research has been conducted to show a link between child maltreatment and loneliness. Heer et al. (2022) mentioned that while there is evidence that child abuse and maltreatment is associated with loneliness, the results are not exactly clear. It was suggested that individuals with maltreatment histories on average, oftentimes feel more lonelier than individuals without maltreatment histories. Heer et al. (2022) also suggested that the analyses were larger for those children who experienced emotional abuse as compared to children who experienced other types of child maltreatment. It was also found that when participants were older, they experienced a less feeling of loneliness. The findings also suggest that individuals with maltreatment histories, especially those who have been emotionally abused, are more vulnerable to experiencing loneliness across their lifespan. The research also found that feelings of loneliness warrant attention in prevention and intervention programs for individuals with maltreatment histories (Heer et al. 2022).

Although there is a lot of research previously conducted on the association between child maltreatment and loneliness, the strength of this correlation is not necessarily direct. It remains unclear whether the positive association between child maltreatment and loneliness is universal, or whether it varies across, for example, type of child maltreatment, gender, and age of the individual. With the information regarding loneliness and child maltreatment, Heer et al. (2022) indicated that these issues may be linked back to attachment theory, which most maltreated children already are experiencing. According to the attachment theory, children build internal models of relationships with other people based upon their relationships with their primary caregiver(s). Because of the maltreatment that occurs within some children, their caregivers yield an insecure attachment relationship with their children. In addition to the attachment issues,

children may also experience lack of validity of their emotional expressions, therefore have emotional regulation disturbances.

Another perspective that could support the association between child maltreatment and loneliness is the theory of latent vulnerability. Heer et al. (2022) described that “Latent vulnerability factors are processes that are adaptive in a child’s maltreatment experience, but may later become problematic in the child’s development” (p. 4). He also suggests that individuals with maltreatment histories are far more prone to hypersensitivity to threats. Because of this, later on in the child’s lifetime, they may become more reactive to aggression which in turn could affect social relationships. When this happens, it could lead to a deficit in the child’s network of social relationships, causing a life-time of loneliness and the cycle of child maltreatment. Risk factors of this could include as suicide, loneliness, housing, and otherwise that are key aspects that play a roll in many children’s lives. Because of the indicated risk factors, many children experience trauma, which stems from a wide variety of life experiences, inadequate caregivers, inappropriate supervision, and lack of children receiving their basic needs which could include: access to food, water, clothing, shelter and medical services.

Adverse Childhood Experiences

During the period of early childhood, children are rapidly developing neurological connections; therefore, development during these years is also associated with success in a child’s later years in life. Adverse Childhood Experiences (ACEs) are traumatic events that occur in a child’s life that can have long lasting effects on a child’s overall development, health, and well-being. ACEs could be identified as physical, sexual or emotional abuse, neglect, living with a family member who struggles with mental health or substance abuse, witnessing domestic violence, racism, violence, poverty, and sudden separation from a caregiver, family member, or

sibling. McBain et al. (2023) suggested that a growing literature has delineated the potential utility of screening for and providing services for those children who have been exposed to ACE's. For example, a study conducted by McBain (2023) found that there were seven types of interventions shown to have differing types of benefits for those who experienced ACEs in their lifetime. Likewise, curricula were developed to educate some health care providers on best practices for ACE training, screening and how to respond to these issues when faced. These could include application of validated, composite ACE screening tools, such as the Kaiser Permanente Questionnaire, and the use of trauma informed care. When screening for ACEs, it is typically completed by a primary care physician at a clinic, but holds many challenges. For example, many primary care providers have reported not having enough time to incorporate ACE screenings and intervention tools into their time with children. It was found that because of this, it raises many questions as to whether ACE's training, screening, and response associated with a child's primary care provider is a positive or negative experience. To the knowledge of authors, McBain et al. (2023) no studies have been conducted to review the effects of implementing ACE's training, screening and response in primary care settings to review the ACE's exposure's that many children are experiencing (McBain et al. 2023). If this information were to become available, children who are experiencing effects of childhood trauma may have greater successes as they grow older due to access to more consistent and effective treatment modalities and interventions.

Furthermore, Webster (2022) found that when individual ACEs were measured, they did not have as significant of an amount of power versus when multiple ACEs were identified within a child. The two ACEs that were statistically significant in the study were financial hardship and living with someone who has a mental illness had a greater impact on a child than any other

ACEs. Financial hardship has been found to be associated with additional risk factors which could also include poor health and poverty. Webster (2022) states, “Prior research on parental depression and mental illness has noted the impact of depression on the social-emotional development of children” (p.6). Furthermore, there are notable differences in the parent-child attachment for children whose parent was living with a mental illness. Additionally, parental mental illness may be associated with increased odds for health needs based on the genetic risk of passing down emotional behaviors or illnesses to the child. Clearly identified in the research is that ACEs are very broad and answers as to what specific ACE holds authority over one another remains unclear. It is noted that future interventions to prevent further risks should be taken to ensure children's needs are being addressed.

Adverse Childhood Experiences within Indigenous People

Indigenous people are often at greater risk of experiencing health concerns than those who are non-Indigenous people. One example of this includes risk of Adverse Childhood Experiences. There is research that was conducted that focused on the indigenous people and may be a variable for such heightened rates of mental and physical health concerns for this specific population. Indigenous people have often experienced a lack of health care due to historical trauma, racism, and cultural sensitivity. To this date, it has been found that little research has been conducted to study ACE's within this specific population. The study completed by Radford et al. (2021) presented that higher ACE scores for Indigenous participants were associated with increased rates of suicidality and psychological distress. Protective factors to reduce the impact of ACEs were identified as follows; cultural identity and connectedness, education, social support, and psychological resilience. Radford et al. (2021) states, “Future research may further explore the relationship between ACE scores and protective factors,

varying prevalence within specific sub-populations, and consistent reporting of outcomes across studies. Ongoing research has the potential to clarify existing dose-response relationships between early traumatic experiences and current health disparities experienced within some Indigenous communities” (p. 4). In order for the indigenous people to gain back their confidence and seek help for possible ACE’s that they experienced in their childhood, more research needs to be conducted. It should also be recognized that because of the many negative and traumatic experiences indigenous people have experienced in their growing up, they may present with more adverse childhood experiences than a “typical” non- indigenous person.

Trafficking and Child Abuse

Minor youth are facing extreme risks of child trafficking in today’s society due to the internet, lack of education, and youth engaging in risky behaviors at younger ages. Given the elevated risks for minors, there has been more research conducted to focus on the issues of sex trafficking of minors. It has been found that in the past decade, Canada and the United States of America have passed legislation, reformed many laws, and have been taking crucial steps towards changes. Legislation has begun focusing on changes to support how victims of sex trafficking are viewed and even treated by law enforcement officers (Baird & Conolly, 2023). For example, “More specifically, American and Canadian federal consent laws declared minors under the age of 18 unable to consent to commercial sex and have shifted the lens of law enforcement from criminalizing youth in the sex trade to viewing them as victims. Language in research on STM has followed suit, shifting from calling underage victims of sex trafficking “teen prostitutes” to “victims of STM” (Baird & Conolly, 2023, p. 2). All youth, whether engaging in risky behaviors, are prone to risk of sex trafficking. Some vulnerabilities could include: desire for belonging, autonomy, desire for romantic relationships, exchange of money,

etc. Based on the growing information and studies done, some youth are at a greater risk of being sex trafficked due to those specific vulnerabilities, and even as mentioned in previous paragraphs, ACEs may create more risks for youth and children. Several risk factors were identified in the readings such as involvement with child protective services, history of childhood sexual abuse, homelessness, physical and emotional abuse, neglect, exposure to intimate partner violence, problematic relationships with caregivers, drug and alcohol abuse, and teen dating violence. (Baird & Conolly, 2023). The correlation between sex trafficking and children holds a significant gap in literature that should focus on youth's vulnerabilities and circumstances. Information derived from the studies draws great attention to the brutal experiences that many children face, making it difficult for youth/children to even identify or have the courage to stand up to their trafficker, let alone attempt to leave their trafficker. The findings of the article highlight the emotional and physical hurdles that youth face, but point in the direction that holistic approaches to prevention services are needed to intervene with the youth/children that are being sex trafficked across the globe. Because of the lack of education, minor youth are at greater risks to becoming victims of trafficking.

Shaken Baby Syndrome

Pediatric Abuse Head Trauma, or also known more commonly as Shaken Baby Syndrome (SBS), is shaking of a young child causing a traumatic brain injury. This form of abuse is known as the most deadly form of child abuse, especially to infants. SBS is used to describe brain injury symptoms that are consistent with shaking a small child. These injuries could include unilateral or bilateral hemorrhage, retinal hemorrhages, and diffuse brain injuries to occur. While children can be injured by shaking alone, there is often evidence of blunt trauma, so a more inclusive term, SBS, can be used. Brain and head injuries are found to be the most

common cause of death in children less than 2 years old and diagnosing SBS is challenging often due to health care professionals not recognizing the signs and symptoms that the child is experiencing.

Currently, there is no definitive answer to the question of how many babies are affected by Shaken Baby Syndrome. The incidence of Shaken Baby Syndrome may be severely underestimated due to missed diagnosis and under-reporting of these children who are being affected. According to the article “Joint statement on Shaken Baby Syndrome”, Shaken Baby Syndrome occurs in all socioeconomic groups and, probably, in all cultures. Canadian research has shown that the babies who are shaken are most often male and under six months of age. The research also identified biological fathers, stepfathers and male partners of biological mothers as more likely to shake an infant. Female babysitters and biological mothers are also known to shake babies (2001). There are many risk factors that are associated with SBS such as social isolation, family violence, domestic violence, emotional disorders, parent-child attachment issues, substance use, and inadequate knowledge of parenting a child. Targeted approaches to prevention should be towards specific audiences such as those who are at high risk. These messages could be delivered through professional organizations, parenting classes, and support networks. The article, “Joint statement on Shaken Baby Syndrome”, states, “Key messages should explain that the most common trigger causing an individual to shake a baby is the child's crying, and that physical discipline has no place in caring for children. The emphasis should be: “Never shake a baby!”, and to seek help if a baby's demands create anger or frustration, making it difficult for a person to maintain control” (p. 7) While true, Joyce et al. (2024) suggests that the solution to avoiding abusive head trauma is educating caregivers to avoid accidental head trauma and/or shaken baby syndrome. There could be potential that all caregivers are required to

complete a certification at the birth of a child to ensure they are aware of shaken baby syndrome, signs and symptoms of a child experiencing these effects, and how to prevent these occurrences from happening in the home. Preventative health care is the most strongest option to reduce the risk of child abuse from occurring. Consequently, SBS has severe outcomes.

Peritraumatic Pain in Child Maltreatment

There has been an extensive amount of research that has been conducted linking trauma, child maltreatment and chronic pain. Tsur et al. (2024) argued that child maltreatment research should focus on pain as one of the main frontiers. Accordingly, previous findings have reported a significant link between child abuse and fibromyalgia, genito-pelvic pain, interstitial cystitis painful bladder syndrome, headaches, irritable bowel syndrome, and other chronic pain conditions. According to Tsur et al. (2024) “Although the risk of suffering from chronic pain among child maltreated survivors has been established, much less is known about the experience of pain during child maltreatment incidents or whether such peritraumatic pain sensations are associated with later chronic pain” (p.1). The review of the literature demonstrates that most studies that were used did not intentionally focus on these types of pain, and most used qualitative methods. The findings highlighted that pain is inherently embedded in a child who experiences child maltreatment, abuse, or trauma. The findings also highlight that there is not enough information or research conducted to hold standards to be true, even if proven, there are significant clinical and legal implications. To ensure this information is true, more research is needed that intentionally focuses on peritraumatic pain, versus chronic pain, which is widely known to be a factor of any sort of trauma that an individual may experience.

Conclusion

In conclusion to wrapping up chapter 2 of the literature review, it is important to understand the many types of child abuse, maltreatment, traumas, effects, ACE's and protective factors that relate to the children in our world. Readers can clearly identify throughout the chapters that child abuse will never fully go away. It is crucial that the needs of the children across the globe are being met and addressed to ensure positive environments for the next future generations. As seen, the negative impacts of child abuse are extremely heavy, leaving life-long implications. Working as a human service professional shall always have its positive and negative attributes, but knowing that each of us who chose to serve our communities day in and day out is quite inspiring and shall leave a lasting impression on the world we someday leave behind. In chapter 3, this writer will focus on implications, recommendations, and conclude the final piece of writing as it relates to the topic of child abuse across the globe.

Chapter 3: Implications, Recommendations, and Conclusions

Child abuse is prevalent amongst all communities across the globe. If not properly addressed through research, education, and policy changes, change will ever be so far from on the horizon. The children across the globe need professionals to step up and face the challenging, yet rewarding system's to ensure that the child welfare system is being adequately addressed. This could look like more advocacy for children and families, stricter laws and guidelines around child abuse, more consequences for offenders of abuse, and even more guidance for human service professionals working in the field to ensure that the needs of children and families are being met on a consistent and regular basis.

Practical Applications

To know and understand the risk factors, adverse childhood experiences, types of abuses, effects of abuse, and trauma(s) that every single child who experiences child abuse, is a privilege, yet a down-fall, due to that unfortunate circumstances many children face. A knowledge that most, if not all, human service professionals are adequately aware of. As a current social worker working at the county level, these are common terminologies that come across my three computer screens on a daily basis, more accurately, it is my job, it is what I do as a social worker. Based on the research conducted and synthesized in this capstone writing, there are many changes in policy needed to address the concerns of child abuse. For example, policy attention is needed in efforts to provide victimized youth with financial stability, housing, childcare, and especially mental health support. Policy attention is needed for additional funding to support the development of trauma-informed aftercare for youth who have experienced abuse, maltreatment, or sex-trafficking. An idea as simple as interagency communication to ensure survivors, children, and families receive coordinated services that best fit that individual's needs.

More education is needed for families and youth on relationships, domestic violence, and the impacts substance use can play on a person, but more so specifically, how that trickles down to affect all family members who are involved.

Recommendations for Further Research

Based on the current research out there regarding child abuse, there are many recommendations for future and/or further implications. For example, in chapter 2, this writer discussed how loneliness impacts a child when they are being abuse. If loneliness is not addressed in intervention programs for children who have experienced maltreatment, they remain at risk to develop mental health disorders, have a higher risk of cardiovascular diseases, and have a higher chance of early mortality (Heer et al. 2022). More research is needed to investigate the mechanisms that explain the increased risk of loneliness. Another recommendation for further research in regards to sex trafficking, is that future studies should further delineate the route of sexual exploitation by familial traffickers and identify the similarities as well as differences in the recruitment of adults and minors as well as those domestic and international victims; this would provide better statistics to understand who are the top traffickers and what is there relationship with the vulnerable child? The LQTBQ+ population as it relates to sex trafficking is severely under-researched. The research remains unclear whether traffickers utilize similar or different methods of recruitment of LGBTQ+ children. Future research should focus on understanding the different pathways that recruiters take when identifying a child who is LGBTQ+. By doing this, there are greater prevention measures that can be taken to ensure better programs and services to assist these youth.

Future research should also explore the recruitment process of children living outside of the USA and the role of familiar trafficking. It may be beneficial that once this research is conducted, to identify prevention strategies that work with youth, families, child welfare, homeless shelters, school, etc. to work as a team in addressing the issues amongst communities. In all areas of research, more is better, especially when it focuses on the children in our lives.

Conclusion

Child abuse is extremely prevalent amongst trillions of children across the globe. Every single day, hour, minute, and second, children are experiencing abuse, exposed to trauma, and placed in vulnerable situations that are out of their control. Working as a Human Service Professional is a privilege to face families at some of the lowest points in their lives, but to also be there at some of the most inspiring moments that truly drive our passion and careers. It is the responsibility and job as professionals to advocate for communities, families, and most importantly, the children. Child abuse is not going away, ever, so to ensure human service professionals are adequately addressing the needs of the most vulnerable population, more research needs to be conducted to address each and every aspect of child abuse, maltreatment, and the lasting trauma's that a child faces when becoming another devastating statistic.

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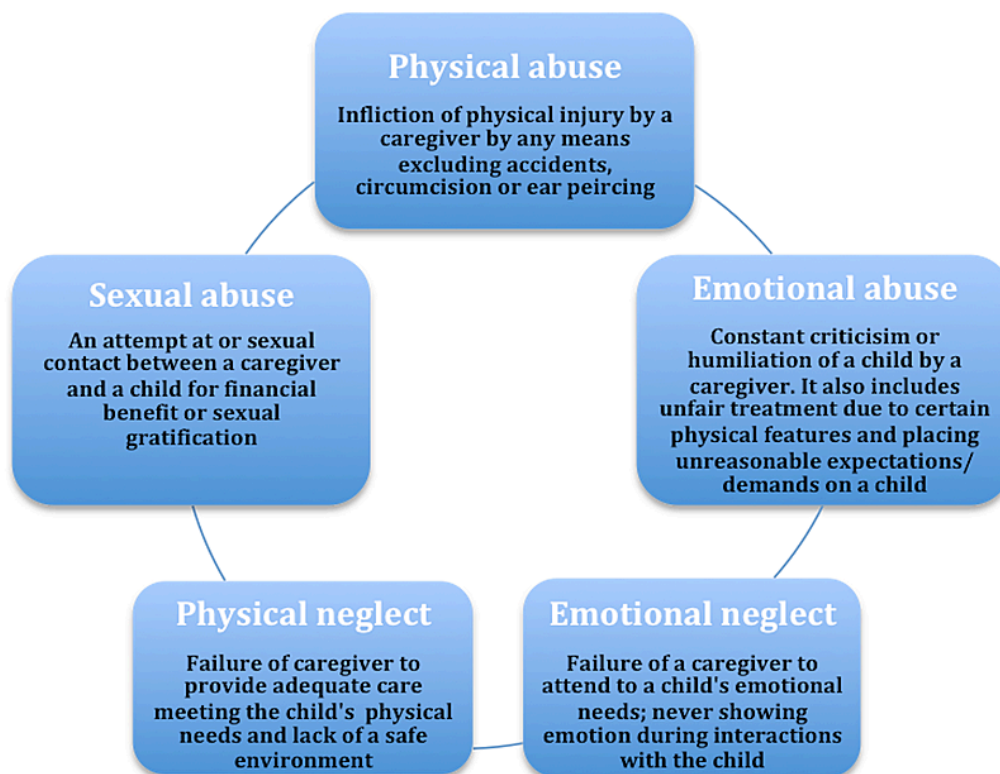
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Figures:

Figure 1

Classification of childhood trauma



Here, a caregiver refers to any responsible adult with a relationship with or in a place of authority over a child.