

THE EFFECTS OF CHILDHOOD ABUSE ON ADULT RELATIONSHIPS

A rectangular box containing a handwritten signature in cursive script that reads "Patricia Bonny".

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THE EFFECTS OF CHILDHOOD ABUSE ON ADULT RELATIONSHIPS

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Abstract

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This paper examines the many effects that childhood abuse has during the time of the abuse in childhood, as well as later in adulthood. Abuse has many definitions and many forms. Its effects sometimes last throughout a person's lifetime. Abuse survivors often encounter problems in adulthood. These include low self-esteem, depression, anxiety, hypervigilance, lack of attachment or trust in others, drug and alcohol abuse and re-enacting the abuse toward others.

Healing from past trauma is possible by working on the trauma related issues with a licensed therapist. Finding a trauma specialist is important when recovering from childhood abuse and trauma, and with the correct treatment individuals are able to continue their lives in a healthy positive way by building and maintaining healthy relationships with others that do not involve abuse and/or maltreatment.

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Chapter One: Introduction

This research paper is about the effects of childhood abuse and the many ways in which an individual might struggle with having healthy relationships later in life due to past experience with abuse. Childhood abuse can cause many residual effects for individuals, and if not addressed and worked through on a psychological level, can stay with the individual for a lifetime. It can affect how a person relates to others in the workplace, in social settings, and most definitely, within intimate relationships and family. Many will continue the abusive behavior with their spouse and/or children which perpetuates the cycle of abuse. In order to break the cycle of abuse, abuse survivors must be willing to work through the many thoughts and emotions surrounding their past experiences in order to learn healthier ways to relate to others that promotes stable and positive relationships (Kendall-Tacket, 2007).

To find closure surrounding the effects of childhood abuse, it is vital to process the experience. A qualified therapist who specializes in past trauma will be the best option for facilitating recovery. Participating in therapy in order to heal is one of the factors that prevent the abuse from continuing toward one's partner and/or children. Having a support system that consists of others who understand the trauma can be very healing as well. While everyone's experience is unique, as well as the effects each person has endured from the abuse, healing can occur even from extremely abusive situations (Kendall-Tacket, 2007).

Statement of the Problem

What causes people to abuse others? And what can be done to break the cycle of abuse and create and promote healthy relationships? It is important to acknowledge the effects that

abuse has on children and how that impacts how they will proceed in connecting, or not connecting, in a healthy way with other people in their lives. A history of abuse also affects the aspects and quality of their relationships in general. In order to heal from the abuse, it is important for the survivor to work through their personal experiences and do the work required to choose a different path for themselves and their relationships. The purpose of the study is to review the current literature on the lasting effects of childhood abuse and what can be done to break the cycle of abuse and promote healthy relationships.

Definition of Terms

Interpersonal: being, relating to, or involving relations between persons

Transference: an act, process, or instance of transferring. The redirection of feelings and desires and especially of those unconsciously retained from childhood toward a new object (as a psychoanalyst conducting therapy)

Abuse: a corrupt practice or custom; improper or excessive use or treatment; language that condemns or vilifies usually unjustly, intemperately, and angrily; physical maltreatment.

Method of Approach

The search for the review of literature was conducted over a 180-day period of time. The primary search engines were Psych Info and Psych Journal. The key search terms used were interpersonal, transference and abuse.

Chapter Two: Review of Related Literature

Defining Child Abuse

Federal legislation identifies guidelines and provides a minimum set of acts to States in order to determine and define child abuse and neglect. It is stated that, “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 exploitation”, or “An act or failure to act which presents an imminent risk of serious harm.” (“Definitions of child abuse and neglect in federal law," 2014, para. 1)

Children who are experiencing child abuse are either being directly abused or are being exposed to intimate partner violence (IPV), with many situations being a combination of both. According to the U.S. Department of Health & Human Services, Administration on Children, Youth and Families, approximately 16% of children in the United States are victims of child physical abuse (CPA), and 29% of minors are exposed to IPV in the home.

Childhood physical abuse and being exposed to IPV may share some common risk factors such as physiological reactivity and developing perpetrator characteristics. Physiological reactivity happens when an outside stimulus such as a loud noise or sudden movement which has signaled danger for them in the past, causes an individual to feel threatened. The physical body may react with a rapid heartbeat and feeling hyper-alert in order to protect oneself. It is also common for a child abuse victim to develop characteristics similar to the abuser. Reenacting abusive behaviors toward others as it has been done toward them is how the cycle of abuse continues. The forms of violence that were observed as children can then be reenacted in their subsequent family relationships, chiefly with their intimate partners and children. A recent national survey of youth found that nearly one-third of this population reported they had been physically abused as well as exposed to IPV during their lifetime. Being abused as a child as well

as being exposed to IPV has been associated with experiencing psychological problems in adulthood (Evans, Steel, Watkins, & DiLillo, 2014).

Forms of Abuse

The most common type of child maltreatment is neglect. Contrary to physical or sexual abuse, where an act is done, neglect is the failure to do something. Neglect is commonly defined as the failure of the parent or caretaker who is responsible for the child to provide food, clothing, shelter, medical care or supervision to the extent that their well-being and/or safety is threatened. (Kendall-Tacket, 2007)

Different forms of abuse that are recognized by the state are listed and defined within the state statutes. The many forms that abuse presents itself fall within the following categories: Physical abuse, sexual abuse/exploitation, emotional abuse, parental substance abuse, abandonment and neglect. The definition of physical abuse is any nonaccidental physical injury to the child which can include kicking, burning, biting, striking, or any physical action toward the child that resulted in an impairment. Sexual abuse/exploitation is listed differently depending on specific guidelines in different states. All states include sexual abuse, but some use general terms where others are very specific in describing the sexual act. In most jurisdictions, sexual exploitation includes the production of child pornography and/or allowing the child to be engaged in prostitution. Also included in seven states is human trafficking and trafficking of children for sexual purposes. Emotional abuse is defined as “injury to the psychological capacity or emotional stability of the child as evidenced by an observable or substantial change in behavior, emotional response, or cognition” and injury as evidenced by “anxiety, depression, withdrawal, or aggressive behavior.” Parental substance abuse is described in a multitude of

ways such as: exposure of a child to harm due to the mother's use, manufacturing of a controlled substance in the presence of a child and/or where they reside, having chemicals or equipment that are used to manufacture on the premises where the child resides; or selling, distributing or providing alcohol or drugs to a child. Parental substance abuse is also the inability of the care provider to care for the child due to use of a controlled substance. Abandonment is when the parent or caregiver's whereabouts are unknown, the child was left in a situation that failed to protect the child and he/she suffered serious harm, or the parent did not maintain contact in order to provide support for a specified amount of time. ("Definitions of child abuse and neglect in federal law," 2014)

Effects of Abuse

There has been increased attention on researching the effects of abuse on the brain development that occurs during infancy and early childhood. Scientific evidence shows that there may be altered brain functioning due to early abuse and neglect of children. It is important to note that genetics do play a part in how we relate to others, but the experiences individuals encounter greatly affect future functioning in many ways. ("Understanding the Effects of Maltreatment on Brain Development," 2014)

It is critical to understand the milestones that occur while the brain is developing in order to understand the impact that abuse and neglect has on a child. The first areas of the brain to develop are the brainstem and the midbrain, which regulate autonomic functions. The higher regions of the brain, which consist of the limbic system and the cerebral cortex, are still primitive in children and develop over time. The higher regions of the brain grow rapidly in the first three years of life. These regions control emotion regulation, language and abstract thinking. The frontal lobe is developing during early childhood. This region of the brain governs reasoning,

planning, and impulse control. At age three, the brain is almost 90 percent of the adult size brain. During the adolescent years, there is a physical growth spurt that occurs immediately before puberty. However, the physical body during puberty is much more advanced than the maturation of the brain, which takes much more time to fully develop. This explains the impulsivity and risk taking that many teenagers are involved in during this stage of life. ("Understanding the Effects of Maltreatment on Brain Development," 2014)

Plasticity is also a major factor in the developing brain. ("Understanding the Effects of Maltreatment on Brain Development," 2014) Plasticity is the ability of the brain to change its response due to stimuli that are repeated over time. The lower part of the brain that controls the basic functions are less flexible or plastic, but the higher functioning part of the brain is what controls our feelings and thoughts, which are more plastic. Adaptation is ongoing through our lives, and results from both our genetics as well as our experiences. All children require nurturance and stimulation for healthy development, and if that is not present, the child's brain may be impaired as a result. Research indicates that there are sensitive times when a child develops certain capabilities, that are described as windows of time. During those windows, children are most susceptible to certain experiences. For instance, infants are predisposed to forming strong attachments toward their primary caretakers, but if the caretakers are abusive and/or neglectful, trust is not established, and a strong bond is not attainable. It is shown that adults might possibly be able to make up these windows of time by bonding in adulthood, but it is certainly more difficult to do in adulthood. ("Understanding the Effects of Maltreatment on Brain Development," 2014)

Memories that are acquired during childhood due to the lack of bonding with a caregiver can adversely affect how we see the world and the people in it. This can last throughout the entire life span, which can affect our ability to trust others. Children who experience maltreatment can also develop hypersensitivity to stressful situations. This happens when a child lives in a chaotic environment which feels threatening, and the response of the caregiver is neglectful and/or abusive. As a result, the brain becomes hyper-alert for potential danger, or does not fully develop since the neuronal pathways were strengthened under negative conditions. Since the neuronal pathways are forced to cope in these negative situations, their ability to respond to kindness and nurturing may be impaired. Factors that may affect the severity of the impact are the age of the child, the identity of the abuser/caretaker, and whether it was a one-time incident or a pattern of incidents over time. For example, if a young child is repeatedly mistreated, over time the child will expect to mistreatment to happen. However, if it is a one-time incident, the child can repair this damage more easily since this behavior is not the norm. The effects of maltreatment on social, behavioral and emotional functioning can show up in several different areas such as a persistent fear response, hyperarousal, diminished executive functioning, increased internalizing symptoms, delayed developmental milestones, weakened response to positive feedback and complicated social interactions. ("Understanding the Effects of Maltreatment on Brain Development," 2014).

There can also be a variety of psychological consequences due to the isolation, fear and inability to trust that has been established. In 2010, 16% of the foster children in care were under a year old ("Long term consequences of Child Abuse and Neglect," 2013). Infants who enter foster care experience the loss of the primary caregiver which affects their attachments and ability to attach to a different caregiver. Childhood trauma is a risk factor for several mental

health diagnoses such as borderline personality, anxiety and depression. A study that used ACE data found that approximately 54% of cases of depression and 58% of suicide attempts in women were correlated to negative childhood experiences. Past childhood trauma can also impact social and behavioral areas of an individual's life, which show up in several ways. Children who were neglected are more apt to display antisocial traits later in life which affect their ability to connect throughout their lifetime. Behaviors that are more likely to surface during adolescence are grade repetition, substance abuse, delinquency, truancy and pregnancy. Studies suggest that abuse and/or neglected children more often engage in risky sexual behaviors which increase their risk of sexually transmitted diseases and pregnancy. Studies have also found a correlation between childhood abuse and neglect and becoming involved in criminal activity. ("Long term consequences of Child Abuse and Neglect," 2013)

Problems in Adulthood

Survivors from complex trauma often have feeling of shame, self-blame and powerlessness which often results in challenges relating to others and reduced ability to implement self-care. (Tumala-Narra & Kallivayalil, Singer & Andreini, 2011) A study conducted by Paradis and Boucher (2010) examined the relationship between interpersonal problems in adulthood and maltreatment in childhood. This study was implemented with an online questionnaire completed by 1,728 university students. Those who reported maltreatment in childhood reported having interpersonal problems at higher levels than those who were not victims of maltreatment. Female victims who reported emotional neglect were more likely to have experienced interpersonal relationship problems in adulthood. These problems consisted of being nonassertive, distant and self-sacrificing. The male sample who reported physical abuse in childhood were more likely to be dominant and distant with their adult partners than were

participants who had not been abused. Regarding sexual abuse, it was found that both males and females who reported sexual abuse, also reported having many difficulties in not only establishing, but maintaining intimate relationships. The research shows that sexual abuse history is correlated with lower levels of trust for their partner, and poorer communication in relationships. In addition, sexual abuse victims are more likely to experience and /or perpetrate domestic violence as well as experience divorce. A history of sexual abuse as a child often leads to having dysfunction in the sexual realm (though people who have been sexually abused also frequently have self-esteem issues), whereas being physically abused relates primarily to having a low self-esteem rather than to sexual dysfunction. Within the relationship, the abused individual tends to difficulty showing love and showing affection due to the lack of trust they feel for others. It is not uncommon for the victim to develop a coldness toward the partner as well as displaying dominant qualities, which often leads to separation and divorce.

The connection between emotional abuse and the attachment process has been studied by Riggs, Cusimano, and Benson (2011) at the University of North Texas. The participants in this study were 155 heterosexual college students and their partners. The average age of the participants was 22 and the racial/ethnic composition was 71.9% European American, 9.7% African American, 9.0% Hispanic, 5.2% Asian/Pacific Islander and 4.1% multi-racial. The results showed that emotional abuse can cause psychological disorganization which often leads to emotional and cognitive problems later in life. The research indicated that there is a definite link between emotional abuse in childhood and the ability to attach in an intimate way as an adult. Emotional abuse as a child by an attachment figure can cause insecure attachment. The insecurity that the victim develops along with anxiety and fear causes great psychological damage. The young child views the world and people in it to be cruel, therefore it is difficult to

regulate emotions and impulse control. As a result, insecure adults are more apt to have a controlling nature and are less likely to be a supportive person to their partner. Avoidance tactics are a defense mechanism a victim will often utilize in order to keep themselves distanced from their partner. They may even deny they have a need to be close and withdraw.

Having experienced childhood abuse can cause depressed moods and lower self-esteem which also contributes to negative interactions in an intimate relationship. For example, studies of childhood trauma suggest that adult survivors have more negative perceptions of their partners than those who were never traumatized. Often, an individual who was abused in childhood tends to subconsciously select a partner who also experienced trauma in their childhood, which is called the selection effect. The selection effect explains that adult survivors of abuse will often select partners who behave and interact in a way they understand and are familiar with, hence the relation to previous abusive behaviors (Busby, Walker and Holman, 2011).

According to Bessel A. van der Kolk, MD, there is a compulsion to repeat the trauma for many adult survivors of abuse and neglect. Many traumatized individuals will expose themselves as adults to situations that are similar to the original trauma. In these situations, they will re-enact the trauma as either the victim or the abuser, which is a major cause of the violence. Over 50 years of literature on attachment theory has concluded that early childhood experiences have a major impact and influence on how a person will parent his or her own children (Steele et al., 2016). A finding that is consistent is that women who were physically or sexually abused during their childhood have a higher likelihood of being abused in their adult life as well. Victims of sexual abuse as children are also at a higher risk of becoming prostitutes. It appears that people that are exposed to violence early in life may expect it to continue throughout their lifetime as the norm. Since they have little exposure or experience with healthy non-violent solutions, they

tend to re-enact the trauma even when it causes pain for themselves and others. The goal of treatment is to gain control over one's life instead of repeating the trauma through negative emotions and behaviors. Gaining awareness of the past experiences is crucial in order to protect one's self and therefore make conscience decisions not to be hurtful or engage in relationships that are harmful (Van der Kolk, 2005).

Healing

Research indicates that approximately 80% of both men and women report having at least one traumatic experience in their lifetime. Recommendations for abuse survivors include receiving education regarding abuse as well as vicarious trauma, finding and implementing self-care strategies, and having a support network (Shannon, Simmelink, Im, Becher, & Crook-Lyon, 2013).

As noted above, experiencing childhood abuse and trauma can have severe lifelong effects for individuals in several ways. Since abuse survivors have learned to view the world as a dangerous place full of frightening circumstances, a feeling of helplessness often ensues. If this feeling of helplessness is not resolved, it will be carried into adulthood which often creates more trauma, especially within intimate relationships (Hopton, 2013).

Finding a trauma specialist to work through the trauma is very important in learning how to heal from the abuse and be able to establish and maintain healthy relationships. Alliance repair is a technique used by a therapist to help the survivor alter the ingrained negative relationship patterns that were formed during the abuse. If the therapist is able to provide a safe, caring and consistent relationship, over time the survivor is able to discern the difference between abuse and what a healthy relationship consists of (Lawson, Davis, & Brandon, 2013).

Trauma treatment involves four key components. Processing trauma related memories and feelings; discharging pent-up “fight-or flight” responses; regulating strong emotions; and learning the ability to trust other people. Processing the experienced past abuse can consist of talking with a supportive person in one’s life or preferably a therapist who can guide the process toward healing. Processing the specific experiences as well as learning coping skills to help alleviate the symptoms can help a person heal from the trauma. Emotional trauma has traditionally been treated with talk therapy and Cognitive-Behavioral Therapy (CBT). Cognitive-behavioral therapy is a technique used by a licensed therapist, that works toward changing the way in which an individual thinks, therefore changing the behaviors as a result. Most recently, treatment involving emotional trauma are psychotherapy and somatic therapies. Neurologically, the brain is changed as a result of abuse and trauma, and psychotherapy focuses on talking through the trauma as well as focusing on the physical body. Finding a therapist with whom a bond can be formed and a level of trust be established is important in order to be successful doing the work involved in healing (Robinson, Smith, & Segal, 2014).

Recovering from abuse trauma is a process that needs to take place in phases. Treatment consists of stabilization from immediate threats and moves on to address issues of safety. From that point the treatment focuses on working with the traumatic memories of the abuse, mourning those experiences, and finally learning how to establish healthy positive connections with others (Tummala-Narra, Kallivayalil, Singer, & Andreini, 2011). Since many abuse survivors have experienced danger and a lack of support and/or protections, it is very important that the clinician works diligently to provide a safe environment in which the client is feeling supported and nurtured during the healing process (Briere, 2002).

A study conducted by Kimbrough, Magyari, Langberg, Chesney, and Berman (2010), showed that mindfulness meditation relaxation was also helpful for abuse survivors. Their participant group consisted of 27 individuals in Baltimore who participated in an 8-week mindfulness meditation-based program. The results showed that depressive symptoms were reduced by 65% after the mindfulness intervention. Mindfulness practice involves bringing attention to the present moment, which can increase clarity, calmness and emotional well-being. This technique can then be implemented at will, following the treatment, as an effective coping technique. The participants in this study were required to also actively work with a licensed therapist during those eight weeks in order to process the thoughts and emotions that surfaced from the meditations. Mindfulness training was also helpful in the therapy sessions, so clients were able to fully process their experiences openly with the therapist. It is believed that the client-therapist relationship is the core of psychotherapy with all clients. However, with abuse survivors the therapeutic relationship is even more critical in their progress toward healing (Paivio & Patterson, 2006).

Summary

Child abuse consists of direct abuse or neglect of a child, but it can also be caused or inadvertently, when a child witnesses intimate partner violence in the home. In that case the child experiences what is called secondary trauma. Due to these experiences, individuals run the risk of becoming abusers themselves and repeating the cycle of violence. It is also common for an individual to subconsciously seek the same types of relationships later in life and continue being victimized. Even if an individual is able to refrain from repeating such behaviors, research

has shown that the continued psychological problems victims encounter prevents healthy relationships with others in general.

The effects of childhood abuse are numerous, and can alter functioning on an individual level as well as inhibiting the ability to socially engage in a healthy manner. Experiencing childhood abuse often causes an individual to see the world as a dangerous place, and the people in it as a threat. Based on those feelings of fear and uncertainty, many times the victim will go through life feeling afraid and uncertain as to what may happen at any time without warning.

Survivors of childhood abuse may suffer from persistent hyper-vigilance, anxiety and depression from the trauma, which decreases the quality of life on a daily basis. These harmful effects from the trauma of childhood can also impede having healthy intimate relationships in adulthood if not addressed and worked through on a psychological level. Seeking professional treatment and establishing a solid support system will help immensely in the journey toward healing from the past as well as learning to establish and maintain the relationships that consist of healthy boundaries and respect. Cognitive-behavioral and mindfulness based meditation therapies may be useful, but the therapeutic relationship, and the trust within it, is of prime importance.

Chapter Three: Conclusions and Recommendations

This paper summarizes the long term effects of exposure to childhood abuse. Growing up in an environment which at any moment could pose a threat can create a sense of unpredictability and fear that is prone to cause depression and anxiety. Viewing the world and the people in it as a possible danger is not conducive to developing any type of healthy relationship, since trust is a core factor in being able to bond with another person. Many abuse survivors do develop relationships, get married and have children. However, they often have difficulty creating the kind of healthy interaction patterns that need to be present in order to have and maintain a healthy relationship with their spouse and/or children. This is the case with many child abuse survivors, as they subconsciously repeat the familial patterns they learned throughout their childhood. Therefore, many marriages among abuse survivors fail. This in turn severely effects the children, not only during their experiences as a child, later on, because they have internalized the negative patterns displayed by their parents. Thus, families pass abuse and neglect on from generation to generation.

Abuse can take many forms, but regardless of the form of the abuse, it is not only damaging at the time of the offenses, it can also result in long term effects that can even last for a lifetime. It can affect relationships at work, within one's family, with friends and most definitely within an intimate relationship. It is important to seek a therapist or helper that is experienced in the area of trauma when seeking assistance in processing and healing from the abuse. It is also just as important to feel comfortable with the counselor or choose another until the client feels that progress can be made in a therapeutic setting. The therapist must take care to ensure that the

client feels valued and supported. Further, the therapist must create an environment where the client does not feel neglected or discounted. Finally, any issues that occur within the therapeutic relationship should be fully processed and related to feelings and behaviors relating to the abuse history.

Cognitive-behavioral therapy is not a new method, but it has in recent years been found to be particularly effective with survivors of abuse and neglect. It can provide a good framework for carefully examining the connections among emotions, thoughts, and behaviors. Thus, the survivor of abuse can develop clarity regarding typical responses, rational and irrational, and develop a strategy for countermanding irrational self-statements and reactions. Incorporation of mindfulness-based techniques teaches the individual to stay in the moment, rather than dwelling on the past or worrying about the future. Further, it shows the individual how to pay attention to the wisdom of the body, and how to calm the body in times of stress.

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