

The Lifetime Affects of Childhood Family Violence

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By

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Abstract

Family violence is a massive problem in the United States and it affects many children across all demographics; leading to a wide range of health and behavioral problems that continue to follow them through life. Family violence changes the child's developing brain in a multitude of ways, changing the size and shape of several structures including the amygdala and the hippocampus. Behavioral changes are also seen in children and adolescents who experienced family violence in the home, some of these behaviors stay with them for long periods of time or even their entire life. A multitude of negative health outcomes is also seen in these individuals, including problems such as obesity and chronic heart problems, which could be an indicator of how family violence is also a health epidemic in the United States. This scholarly project brought some recommendations on how to treat the problems caused by family violence, and how to prevent it from happening.

The first goal of this scholarly project was to review and collect different changes in an individual that are linked to family violence. Many previous studies have a very specific focus, such as changes to the amygdala. This project was meant to bring a more holistic approach to bringing together all the aspects of the long-term impact of this on a child. This research project was performed by completing a literature review by accessing many different databases and journals, including the Psychinfo database and journals that focus on preventative health. Family violence is a topic that is on the rise worldwide. It is crucial that awareness is raised of all the complications it may cause, to have an intersectional approach to come to terms with the aftermath, and a main goal of prevention of this form of abuse, maltreatment, or neglect that a child or adolescent experiences.

Introduction

Family violence affects a great multitude of children worldwide every single year, and the effects of this violence can last their entire lives, influencing them in ways that the general public can only imagine. It alters the child's neurobiology, behaviors, and health, even decades after they have left the home. This paper aims to discuss the lifetime effect of childhood family violence, raise awareness of the issue of family violence, and do so in a way that is accessible to the general public.

For the purpose of this paper, family violence is defined as instances, circumstances, or patterns of behavior or lifestyle within the family that causes dysfunction, dysregulation, and potential trauma for those in the household. Some examples of what falls under family violence are maltreatment, domestic violence, substance abuse in the home, criminality in the home, and a family member suffering from mental health issues. Physical and sexual abuse, while falling under family violence, was left out of this literature review due to the fact that they have been studied far more than some of the other topics. Before discussing the effects of family violence it is vital to understand the definitions of the terms that fall under it and why it is so important that the issues be discussed more.

In the year 2017, maltreatment was defined as “a broad category including physical abuse, sexual abuse, psychological abuse, and neglect” (Parritz and Troy, 2017, pp. 134). In the same year, 3.5 million cases of maltreatment were investigated in the United States by child protective services, and 37.4% of children in the U.S. are expected to experience at least one investigation of maltreatment before they reach the age of eighteen (Cabrerera et al, 2020).

Neglect is the absence of nurturance or protection, and, in the United States, is the most common type of maltreatment (McGuigan et al, 2018). There are at least twelve forms of neglect

including physical, mental, educational, supervisory, failure to provide a stable home, personal hygiene, abandonment/desertion, emotional, and nutritional (Stickley et al, 2020). Psychological and emotional abuse are terms often used interchangeably. They include acts that put the child in danger or harm, verbal abuse, manipulation such as gas lighting or eliciting fear or shame, and destroying things of value to the child (Teicher and Samson, 2017).

Brain Basics

The brain is a very advanced machine, made up of white and grey matter, with multiple smaller components that are involved in various activities and functions. None of these sections seem to function wholly alone instead, all sections interact and work together so that the body can function. Three major sections of the brain are referred to as the “old brain” or brain stem, the limbic system, and the cerebellum. Grey matter conducts and processes information in the brain before sending it to the rest of the body. White matter is involved in the development of behavior, and it contains “regions of the brain involved in muscle control, sensory perception, and memory among other neuropsychological domains” such as cognitive, emotional, and behavioral development (Cabrerera et al, 2020).

The brain stem is part of the brain that most animals have and is mostly in charge of automatic involuntary functions, or in a simpler explanation, the things our bodies do that we do not think about. The brain stem itself plays a vital role in relaying information between the body and the higher regions of the brain. The brain stem has three major subsections: medulla, pons, and reticular formation. The medulla controls automatic functions like heart rate and breathing. The pons helps coordinate several automatic functions in the brain and body. The reticular formation is a network inside the brain stem that is essential to arousal, arousal referring to things like sleeping and pain perception.

The limbic system has four subsections: the thalamus, the hypothalamus, the amygdala, and the hippocampus. The thalamus takes in sensory information related to sights, sounds, tastes, and touch. The hypothalamus regulates body temperatures, circadian rhythms, and hunger. The hypothalamus also helps to control the endocrine system. The endocrine system is a system of organs and glands that produce and release hormones in the body. The amygdala is involved in memory consolidation and emotion as well as sexual and social behaviors. The amygdala decides if stimuli are 'good' or 'bad' and then works with the hippocampus to put those stimuli and the reactions to them into memory (Cabrerera et al, 2020). The hippocampus is the reward system and is central to learning and memory, it is also involved in stress responses (Cabrerera et al, 2020).

The cerebrum is the most advanced part of the brain and includes several lobes with different functions, as well as white and grey matter. The cerebrum is split down the middle by the corpus callosum, this connects the left and right sides of the brain and helps them communicate (Cabrerera et al, 2020). There are four lobes on each side of the brain: the frontal, parietal, occipital, and temporal. The frontal lobe is involved with activities such as speaking, planning, judgment, and abstract thinking as well as personality aspects of the individual. Muscle control is also an activity that is in the frontal lobe. Broca's area, an important speech area of the brain, is also housed in this lobe. This area is partially responsible for the ability to produce and process language. Broca's aphasia is a condition in which this area is damaged, often leaving the individual unable to produce clear, sensible language, but with some ability to understand language. The parietal lobe senses touch, pressure, pain, and body positions. The occipital lobe processes information related to sight. The temporal lobe is involved in the processing of information related to sound as well as speech comprehension. Wernicke's area is housed here

and is associated with the production of written and spoken language. Wernicke's aphasia is where this area is damaged and causes the individual to have impaired speech comprehension.

Changes to the Body and the Brain

Family violence changes children physically, changing and harming their brains and biological systems. Long-term exposure to stressful environments can lead to endocrine, immune, and nervous system changes. Studies have found that childhood family violence changes the body and brain in multiple ways. One study found that maltreatment can negatively affect neurobiological stress systems and alter their structural development, these changes can influence other factors in life such as the individual's environments, experiences, and even relationships (Cabrera et al, 2020). These changes are permanent and will affect them for the rest of their lives so it is crucial to understand what family violence does to certain parts of the brain and body and how that will affect them.

The hippocampus, important for learning and memory, is considerably changed by family violence. A study by Teicher and Samson (2017) found that adults who had faced maltreatment in their childhood had a smaller hippocampus than other adults who had not faced childhood maltreatment. This reduction of volume occurs during the brain's development because of maltreatment and has been linked to several psychiatric disorders (Teicher and Samson, 2017). More specific areas of the hippocampus have been found to be affected by childhood verbal abuse. Verbal abuse may affect the development of the subfields on the hippocampus on the left side, these subfields are involved in autobiographical event memory processing (Won Lee et al., 2018).

Another section of the brain that is significantly affected by childhood family violence is the amygdala, which is responsible for encoding implicit emotional memories, these are

emotional memories that one does not think about remembering and detecting salient, or important, stimuli. Maltreatment causes a reduction in the size of the amygdala (Teicher and Samson, 2017). Childhood maltreatment is also associated with enhanced reactivity in the amygdala to emotional faces, which to children who experienced family violence, could be processed as a threat (Teicher and Samson, 2017). Exposure to violence, such as domestic violence, is linked to heightened neural reactivity to threat cues in the salience network, which includes the amygdala, the strength of the amygdala's responses to these threat cues increases with the severity of the exposure to violence (Weissman et al, 2020). Maltreatment causes the amygdala to become hyperactive, which can cause problems in evaluating the significance of stimuli, such as assigning a non-threatening stimulus as a threat and activating the body's stress response to something that is not actually a threat (Cabrera et al, 2020). The stress-response system is already over-used by children who experience family violence, and because of the effects of family violence on the amygdala, it will likely continue to be overused even after the child leaves the family violence. This stress-response system can actually become damaging to the brain if it is over-used with not enough time for it to rest and repair, this is known as toxic stress and can be damaging to the human body (Parritz and Troy, 2017).

A study completed in 2020 found that “trauma disrupts the ability of the prefrontal cortex to regulate messages that travel to different parts of the brain” (Cabrera et al, 2020). Exposure to violence during childhood has also been known to cause “disruptions in the prefrontal cortex regulation of the amygdala” which leads to reduced functional activity between the two hemispheres of the brain (Weissman et al, 2020). The prefrontal cortex is dysregulated by maltreatment in regard to dopamine concentrations leading to psychological, developmental, and cognitive impairments (Cabrera et al, 2020).

The corpus callosum is also affected by maltreatment, as studies have shown that there is a reduction in the area or integrity of the corpus callosum, this part of the brain is involved with interhemispheric communication, and the thickness of the corpus callosum is associated with IQ (Teicher and Samson, 2017). The interference in communication between the two hemispheres of the brain can also affect sensory-based information processing (Cabrera et al, 2020).

These changes in brain structure and function influence the child's overall function. Maltreatment affects socioemotional processing, executive functioning, working memory, subjective memory, retrospective memory, prospective memory, as well as language (Cabrera et al, 2020). All of these changes and reductions of functioning in the brain may not be obvious to people around the child. Still, the effects of all these changes present themselves in behaviors that could be potentially damaging to the child physically or affect how others treat them.

Family Violence and Behaviors

Family Violence also influences children's behaviors, sometimes in ways that become maladaptive, and these behaviors can stay with them for their entire lives. Acknowledging that family violence can alter an individual's behavior is essential for multiple reasons. First, the way someone behaves influences how other people treat them. Second, how other people treat them can affect their mental state and how they behave. Thirdly, sometimes the victims of family violence do not know why they behave in certain ways, and those behaviors can be traced back to the family violence that they endured. Behaviors that are maladaptive to them as adults were possibly behaviors that helped them survive the family violence.

The behaviors affected by family violence can often mimic other problems like psychological disorders or developmental issues, such as Autism Spectrum Disorder (ASD) or Attention Deficit Hyperactive Disorder (ADHD). Problems with decision-making and emotion

regulation can look like symptoms of ADHD and can be linked to the reduction in white and grey matter (Teicher and Samson, 2017). There can also be a reduction in the regulation of impulses, a lower ability to read others, and a lack of mindfulness in social situations, again this can look like ADHD in children and adolescents (Teicher and Samson, 2017). Children traumatized by family violence can also often experience behaviors such as repeating tasks and being overwhelmed by sensory experiences, both of these symptoms are also found in children with Autism (Music, 2022). Due to these behaviors and their closeness to other issues, it would be important to look at the background of the child to ensure they do not get diagnosed with something that they do not actually have. Diagnosing a child with ADHD or Autism when they are actually traumatized by family violence could cause more issues for the child. They could, potentially, be placed on medication that would not help them and they would not be getting the right support for their needs.

Family violence can also alter how someone acts in social situations. Maltreatment can cause people to have a faster recognition of potentially threatening stimuli, this could make them more on edge in public and make it harder for them to go out and do things (Teicher and Samson, 2017). Adolescents who have experienced maltreatment are more likely to have violent and antisocial behaviors which impair their ability to get along with their peers and to make friends (McGuigan et al, 2018). Damage to the amygdala, which is the area involved in social behaviors, and to the hippocampus, which is involved in responses to stress, may be contributing factors to these behaviors, but this needs to be investigated further. Children exposed to intimate partner violence show more emotional, social, and behavioral problems than non-exposed children which can lead to issues with their peers (Fusco, 2017). Family violence can further

inhibit a child's social interactions because it causes issues in processing and regulating emotions, as well as communication abilities (Parrtiz and Troy, 2017).

Experiencing family violence increases a person's likelihood of engaging in potentially harmful behaviors for themselves. They have an increased chance of alcoholism, physical inactivity, a high number of sexual partners, and the chances of getting sexually transmitted diseases (Felitti et al, 2019). Substance abuse is highly connected to family violence, especially in females who are more likely to use internalizing coping behaviors (McGuigan et al, 2018). These children also face a higher likelihood of smoking or use of electronic vapor products in their lifetime, and at an earlier age than their peers, some before they reach eleven years of age (Williams et al, 2020).

Education is also affected by family violence in childhood. Exposure to family violence can lead to difficulties in problem-solving, something essential for school (Fusco, 2017). There are deficits in attention and memory recall for those who have experienced family violence, which contributes to the compromise in their academic achievement (Parrtiz and Troy, 2017). There is a decrease not only in educational attainment but even occupational in these people's adult lives (Roscoe et al, 2018). Note that the behaviors affected by family violence that are important for school, such as the ability to problem-solve, are executive functions. Executive functions are controlled in the frontal lobe, which is an area of the brain that is physically changed by experiencing family violence.

Family violence increases the chance that someone will later in life or will be in a cycle of violence. Childhood neglect has been linked to juvenile delinquency and criminal adult behavior (McGuigan et al, 2018). It is important to note that under American law not all acts of juvenile delinquency is actually a criminal act, it can be something like truancy or being out after

a local curfew, but this does get the juvenile involved in the criminal and juvenile justice system. Being exposed to intimate partner violence as a child has been linked to higher rates of adulthood aggression (King, 2020). Domestic violence experienced during childhood was found to give the individual a higher chance of being involved in both crime and problem-laced relationships (Callaghan et al, 2015). Children who experience childhood family violence are more likely to grow up and be in a relationship that is abusive, either as the abuser or as the abused (Sakakini, 2021). These children, if they do not get the help that they need can grow up to mistreat their own children, continuing the cycle of violence (Rathnayake et al, 2021).

Suicide and suicidal behaviors are yet another behavioral problems that come with experiencing childhood family violence. Neglect, especially supervisory and medical, increases suicidal behaviors in adolescence and adulthood (Stickley et al, 2020). It is essential that these children get help. Suicidal behaviors are something that needs to be urgently dealt with before the rest of the issues that a child is experiencing can be dealt with.

Many of the behaviors that are linked to family violence are also linked to negative health effects later on in life, smoking for example. A child is more likely to smoke, and to do so at a younger age, if they have experienced childhood family violence. Smoking increases the chance of getting and dying of lung cancer. In this way, there is a connection between family violence to lung cancer. Childhood family violence is a domino effect, it causes the brain to change which can affect behaviors, which can affect the health of the individual.

Family Violence and Health

Family violence during childhood affects the health of the child throughout their entire life. As adults, they are more likely to experience a multitude of potentially detrimental health issues. It has been shown to affect every aspect of an individual's health too. Mental and physical

health is especially discussed in research due to the number of negative effects childhood family violence has on them.

Childhood maltreatment survivors face a much higher rate of mental disorders such as anxiety, depression, substance abuse, personality disorders, eating disorders, and suicidality (Teicher and Samson, 2017). Some of these disorders have been linked back to the physical changes in the brain from family violence. For example, substance abuse, something that more impulsive people tend to have, may be linked to the fact that family violence changes the frontal lobe, which is involved in impulse control. Depression and addiction have also been shown to be affected by the change in reward anticipation that comes with maltreatment (Teicher & Samson, 2017). It is important to remember that the brain's reward system is the hippocampus, which is physically changed by family violence during childhood. Not only is family violence directly linked to an increase in mental health issues but also to indirect risk factors like affective temperaments and subjective social status (Higashiyma et al, 2019).

The hippocampus shrinking due to family violence is a specific risk factor for different types of schizophrenia. A Won Lee et al. (2018), study found that a small hippocampus size/volume is associated with major depressive disordered schizophrenia. As discussed previously, childhood family violence is associated with a hippocampal reduction in size and volume. In other words, childhood family violence is a risk factor and is correlated to major depressive disordered schizophrenia, a very serious and difficult-to-manage disorder. Other mental disorders are also common for survivors of childhood family violence. Neglected children, for example, are at a higher chance of being diagnosed with antisocial personality disorder in adulthood (McGuigan et al, 2018).

Family violence during childhood can lead to post-traumatic stress disorder (Sakakini, 2021). Post-traumatic stress disorder (PTSD) is a chronic mental disorder that makes life incredibly difficult for those with it, especially if they do not get the help they need. The symptoms of PTSD include avoiding stimuli (people or places or objects) that remind them of the traumatic event. Those who have PTSD also re-experience their trauma through nightmares or flashbacks. They are also commonly “on edge” because they are hyperaware of and sensitive to things like loud noises or sudden movements. There is much more to PTSD but these few things alone make living a productive, happy, and healthy life difficult.

There is a multitude of mental health issues that are connected to or correlated to childhood family violence. Childhood trauma is linked to an increased risk for practically all forms of psychopathology, this includes anxiety, mood, disruptive behavior, psychotic disorders, and substance abuse (Weissman et al, 2020). Thus it is very important to take into account the possibility that family violence during childhood is a factor in many individuals' mental health issues.

Childhood family affects an individual's physical health just as much as it does their mental health. Those who suffered childhood maltreatment have higher rates of inflammation, metabolic syndrome, heart disease, cancer, arthritis, and reduced life expectancy due to shortened telomeres (Teicher and Samson, 2017). A telomere is a part of one's chromosomes that protect it from becoming shortened or frayed. Each time a cell divides the telomere becomes shorter, eventually becoming so short that the cell can no longer divide and dies.

Other aspects of health are also affected. Those who have gone through childhood family violence have an increased chance of obesity, smoking, and sexually transmitted diseases (Felitti et al, 2019). Obesity is a risk factor for a number of other potential health issues such as diabetes.

The increased chance of sexually transmitted diseases partly comes from the fact that survivors of family violence are also more likely to have a higher chance of a high number of sexual partners (Felitti et al, 2019). The more types of childhood family violence one has experienced significantly increases the chances of physical diseases, including chronic pain, gastrointestinal diseases, musculoskeletal disorders, skin diseases, and respiratory diseases (Riedlet al, 2019). Overall we see a connection between childhood family violence to some of the leading causes of adult death in America. Therefore, preventing childhood family violence is preventative medicine.

Possible Treatment and Prevention

Treatment and prevention of childhood family violence is an area that needs more research to see what would best work and how those affected would respond with positive benefits. Treatment is for after the child or adult has already experienced family violence through childhood and needs help coping with the symptoms of it. Prevention would ideally be to stop the detrimental trauma from happening at all. However, complete prevention is unlikely to happen anytime soon. Instead, the focus would be to prevent the child from living in a family violence situation any longer than they already have and to prevent some of the physical, behavioral, and health effects that have been previously discussed.

Cognitive behavioral therapy (CBT) may help deal with the effects of childhood family violence (McGuigan et al, 2018). Cognitive behavioral therapy is a form of psychological treatment that focuses on changes to one's maladaptive thought processes, providing adaptive coping skills, and a better understanding of others, amongst other things. While there is an inadequate amount of research on treatment specifically for those who survived childhood family violence, there are a few things already known through research. Before treatment can really

begin, the patient must be made to feel safe, they need to be made to feel that they are supported and protected (Music, 2022). There also needs to be less focus on specific guidelines and steps to be followed in therapy. Each patient is different and therefore each of their needs is individualized. What may make one individual feel safe, may trigger another. Breathing strategies, such as 8-4-7 breathing, are often taught as a coping strategy but this can be triggering to some people, some people may prefer literal, physical, safe places to something like breathing (Music, 2022). These needs should be respected and met for each patient, even if that varies widely from patient to patient.

There is more research and suggestions when it comes to preventing childhood family violence, or at least quickly getting the child out of the situation. These strategies involve social and community issues, family issues, and legal issues. These prevention measures should be on primary, secondary, and tertiary levels (Felitti et al, 2019). Having multiple levels of prevention increases the likelihood that childhood family violence will be caught, and that it will be caught early.

On an individual or familial level, there are some strategies that are suggested to prevent family violence, or at least negate some of the negative outcomes that stem from it. Parental verbal affection might be an important component of the overall health and development of a child (Polcori et al, 2014). If parental verbal affection is important for children who do not experience family violence it is likely that it is even more important for those who do. Classes could be developed for new parents to attend on how to communicate with their children and show them verbal affection as this could help mitigate some of the effects of family violence. Another factor that can help mediate some of the family violence is the child's attachment to their mother if the attachment is good and she gives them emotional support (Fusco, 2017). A risk

factor for neglect is a lack of good parenting skills (Rathnayake et al, 2021). This is yet another reason that it is important that parents have access to and take classes on parenting skills, healthy discipline, and how to connect to their children.

Community-based prevention is also possible. There are many risk factors for family violence that are more community level and not the fault of any individual. Some of these factors include poverty, poor/inadequate housing, poor accessibility to childcare, poor accessibility to social services, violent neighborhoods, discrimination, and lack of social support (Rathnayake et al, 2021). These are things that must be fixed on a community or even national level. Things like adequate housing and child care should be accessible and affordable for all people. Access to these things lowers the chance of accidental neglect happening just because the parents do not have access to childcare and they have to work.

There is much that can be done with legal efforts when it comes to victims of childhood family violence. The definition of family violence can be expanded in legal terms to include more than just physical and sexual abuse and neglect. For example, under the British Columbia Family Law Act, psychological abuse is a form of family violence and actions can be taken legally (Sakakini, 2021). The same act includes physical abuse of a family member (including forced confinement or deprivation of survival needs), psychological or emotional abuse (intimidation, coercion, threats, unreasonable restrictions of financial/personal autonomy, stalking, intent to damage property, and exposure of children to family violence). Not only does this expansive definition help child victims, but also the adults who may not have been helped before. Changing the definition of family violence as a crime changes who may qualify for help, and how certain cases are handled.

Courts should also change the terms that they use for children who have experienced family violence. Many courts call them a witness when they should be considered a victim. This would give them better access to services from the court that they would not have as a witness (Callaghan et al, 2015). Not only would these children have access to more resources when they are considered a victim but it possibly would have an influence on how the judge and jury would look at the criminal case, helping the victims get the justice that they deserve. It is important to note that even in situations of only domestic violence, where the child is not physically harmed or neglected; they are still a victim of domestic violence. Exposure to arguments between parents and using the child as part of or in the argument can constitute as emotional abuse against the child (Sakakini, 2021). Using force to make the child accompany an adult and making negative remarks against the other parent in front of the child also fall under emotional abuse (Sakakini, 2021).

Screenings could also be used in court for cases regarding domestic violence or even in custody cases (Sakakini, 2021). Not only would this catch any signs of family violence but decisions could be made in a way that was more fully informed and in the best interest of the child. Screenings could be used in places besides court as well. They could be used in foster care, prisons, or even in schools to help all victims of childhood family violence, not just the ones that make it to court. These can help ensure proper and optimal help and rehabilitation for those who have suffered family violence (McGuigan et al, 2018).

More people need to be trained to recognize the signs of family violence. This would help create a wide net for children and ensure it is a rare occasion for victims to slip through the cracks. A current common problem in the criminal justice system is that lawyers and judges are not always educated on family violence and therefore do not recognize it or they do not know

what to do once it is revealed (Sakakini, 2021). It would be ideal that anyone who commonly comes into contact with children is trained on how to recognize family violence and what to do if those signs present themselves. Nurses, doctors, teachers, daycare workers, police officers, EMTs, lawyers, and others could be trained, increasing the likelihood that a child who is suffering from family violence will be seen and get the help that they need.

Another way to prevent childhood family violence is to increase access to reproductive health care. Abortion access can actually prevent children from experiencing family violence. Children who are unwanted by their parents are more likely to experience abuse and/or neglect by those parents (Bitler and Zavodny, 2002). Restricting abortion will likely lead to an increase in the amount of child maltreatment cases in the near future. The restriction of abortions is positively associated with child maltreatment report rates (Bitler and Zavodny, 2002). This is a cause-and-effect impact, as abortion restrictions increase, as a result, the number of maltreatment cases of children that get reported. Preventing abortion access is likely to cause higher rates of childhood family violence.

There is no current definitive answer on how to treat or prevent childhood family violence. It is clear, however, that there are multitudes of options that seem promising. More research needs to be done in this area to see what works best and what should be avoided. Most important though is that something is done to help prevent more children from suffering childhood family violence and to help adult survivors heal from their past traumas.

Conclusion

Childhood family violence affects millions of children in the United States alone. The victims are of every gender, race, ethnicity, and religion; family violence crosses all demographics. It is important to remember that family violence is more than just sexual and

physical abuse. It includes neglect, psychological/verbal abuse, criminality in the home, substance abuse in the home, and other things. All of which leave a lifelong impact on the child.

Growing up in a family violence situation physically alters the brain. The hippocampus, amygdala, frontal lobe, corpus callosum, white matter, and grey matter are all impacted by family violence. These changes affect the individual's reward anticipation, impulsivity, memory, concentration, and many other things. Many are also hyper-aware of their surrounding and possible threats around them due to their experiences and the changes it makes to their brain. These individuals are physically different and that must be taken into account when they need treatment or if they end up in the criminal justice system.

The changes in their brain can also be linked to some behavioral changes, though more research needs to be done if this is a cause or correlation. Childhood family violence survivors are more likely to engage in potentially harmful behaviors. They are also more likely to be involved with the criminal justice system. They are less likely than their peers to do well in school or occupational attainment. All of which can lead to more negative outcomes further down the road.

Many of the leading causes of adult death can be attributed to childhood family violence. Survivors are more likely to struggle with a wide variety of mental and physical illnesses. These include but are not limited to anxiety, depression, suicidality, post-traumatic stress disorder, cancer, heart disease, lung disease, and diabetes. It is clear that preventing childhood family violence is preventative health care.

Much more research needs to be performed to continue to discover the best ways to treat and prevent childhood family violence. Cognitive behavioral therapy shows some promise in treating the survivors, even as adults. Many preventions are possible on several different levels.

As a society, there needs to be more discussion and awareness of family violence and on the ways to help prevent it. Childhood family violence is an epidemic that for too long has flourished under the radar, it is long past time to start to prevent, combat, and treat it.

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