

The Impact of Domestic Abuse on Children and Young People

19th January 2022

Dr Sue Candy

Consultant Clinical Psychologist and Director at Psychology Associates



Elisabeth Carney-Haworth, OBE

Co-Founder of Operation Encompass and Silver Stories, Retired Headteacher



Learning Objectives

- Understanding Operation Encompass and how it supports children experiencing Domestic Abuse and Violence
- Understanding how Domestic Violence and Abuse (DVA) impacts upon babies, children and young people
- Understanding some of the neurobiology of the impact of DVA
- Recognising possible indicators of exposure to DVA and how this changes across childhood



What is Operation Encompass and how does it enable schools to support children experiencing DVA?



Developmental stages

- Pre-birth
- Infancy
- The first two years of life: 0-2 years
- Toddler stage: 3-4 years
- Primary school years: 5-11 years
- Older school years: 12 years and above



Adolescence 12-24 years (WHO)

Domestic Violence in Pregnancy

- Pregnancy can trigger DVA – 30% starts in pregnancy
- Existing abuse can worsen during pregnancy or after birth 40-60% of women experiencing DVA are abused during pregnancy
- DVA during pregnancy increases the risk of miscarriage, infection, premature birth, low birth weight and injury or death to the baby.

- DVA during pregnancy in utero is harmful to birth outcomes, the babies' early development and neurological development.
- Mother's emotional state influences foetal development and impacts upon emotional outcomes and attachment.

Attachment refresher

- **Secure Attachment**
Carer is reliable and 'attuned' to child's needs. Child uses 'secure base' to explore the world.
Thoughts and feelings used together to try to make sense of experience
- **Ambivalent Attachment**
Carer is sometimes available, sometimes not.
Attachment behaviour increased
More focus on feelings, less on thoughts
Anxious and controlling
- **Avoidant Attachment**
Carer does not respond well to child showing needs (rejecting / unavailable)
Attachment behaviour decreased
More focus on thoughts, less on feelings
Anxious and controlling
- **Disorganised Attachment**
The potential source of care is also a source of fear, either because the parent is frightening, or themselves frightened – unable to make child feel safe
No organised strategy for getting needs met
Little integration between thoughts and feelings
Extremely anxious and controlling



Indicators an infant might have experienced domestic abuse

- Premature
- Low birth weight
- Difficult to settle and soothe
- Problems with feeding
- Rarely cries
- Physically pulls away/ arches back when held



Indicators a child might be experiencing domestic abuse

- Nightmares/ fears going to sleep
- Physical symptoms e.g. headaches
- Hyper-vigilance to danger
- Fighting with others
- Hurting animals
- Withdrawal from people
- Depression/low energy
- Loneliness and isolation
- Risky behaviour
- Self harm/suicidal ideation
- Pseudo-maturity, caring for adults
- Poor school performance
- Concentration difficulties
- Separation anxiety
- Poor self esteem
- Taking on adult responsibilities
- Excessive worrying
- Regression behaviour e.g bed wetting
- Dissociation
- Mirroring or identifying with the abuser.
- Attachment insecurity

Indicators an adolescent might be experiencing domestic abuse

- Physical signs of injury
- Withdrawal, passivity, being compliant
- Changes in mood and personality
- Self-harm, suicidality
- Infiability
- Lashing out at objects
- Isolation from family and friends
- Use of drugs or alcohol
- Eating disorders or problems sleeping
- Bullying or being bullied
- Treating pets with cruelty
- Using aggression as a means to gain attention
- Education- lateness, truancy, falling grades
- Concentration difficulties
- Frequent fighting or aggression at school or between siblings
- Poor self esteem
- Taking on adult responsibilities
- Excessive worrying
- Dissociation
- Mirroring or identifying with the abuser
- Involved in violent intimate relationship themselves
- Attachment insecurity

Adolescents

- Adolescence synaptic pruning is an opportunity
- Can appear difficult to reach BUT can be reached
- Just ask the **questions** and listen
- More likely to disclose if domestic abuse started once attachment security established.



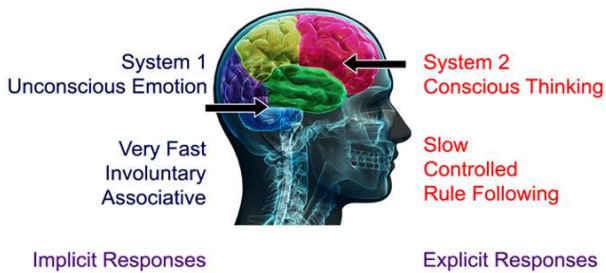
What happens in the brains of children during development?



Brain Development

- **Neuroplasticity** – brain's ability to change its own structure in response to the environment – lessons with age
- **Critical windows** of vulnerability and need – prior to age 4 and adolescence
- **Synaptic connections** structured by 'pruning' redundant connections and reinforcing those most used.

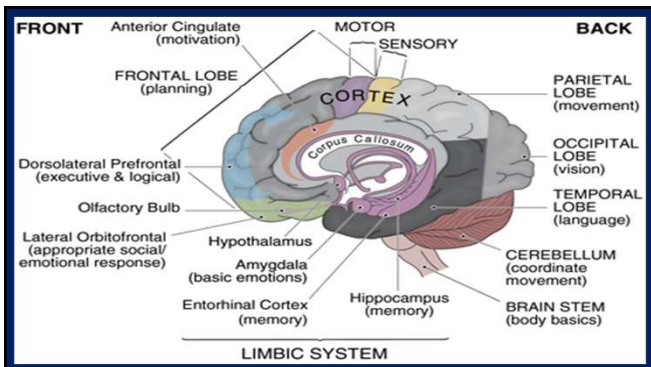
Two Decision Making Routes



Areas of the brain that are most impacted by intra- familial violence within the home are:

- Pre-frontal cortex
- Limbic system (thalamus, hypothalamus, amygdala and hippocampus)
- Corpus Callosum

• This impact commences in-utero



- The limbic system is particularly susceptible to the neurotoxic effects of increased cortisol (stress hormone), including in-utero.
- Cortisol (stress hormone) is triggered during domestic abuse
- Children particularly susceptible to the effects of cortisol on the hippocampus because there is so much neurogenesis in this region of the brain during later stages of pregnancy and childhood.

Limbic system

The **Hippocampus** is also part of the limbic system.

- Processing memory especially episodic memory
- Regulating emotion and stress
- Cognitive and spatial processing
- Quality maternal care increases Glucocoid receptors – protects the hippocampus



Hippocampus

- Decreases in hippocampal volume correlate with deficits in encoding short term into long term memory
- Difficulties with dissociation effects lead to a lack of integration of memories and therefore an incoherent narrative about past events.
- Severe damage to the hippocampus will result in anterograde amnesia (inability to learn new information that is available to conscious awareness)
- Impairment of the hippocampus from early chronic stress can impact on virtually every aspect of development.

Limbic system

The **Amygdala** is part of the limbic system and is a crucial part of how we process

- Emotion and memory
- Our threat system and response to fear
- Survival system



Pre-frontal Cortex

- Acting on long term rather than short term goals
- Complex planning and problem solving
- Moderating social behaviour
- Reflection
- Decision making
- Self control



Pre-frontal Cortex

- Has an extended 'sensitive' period
- Where there is interpersonal trauma there are differences in volume of cortical grey matter, even at birth
- Planning and control over behavioural responses is impacted (poor executive functioning)
- Dysregulation of behaviour and emotion result
- Prone to mental health problems due to negative cognitive appraisal

Corpus Callosum

- Connects hemispheres of the brain.
- Important for effective communication and integration of brain functions
- Trauma reduces size of corpus callosum, increasing difficulties with lateralisation of functioning
- Poor myelination causes dissociation effects



"By preventing integration of sensory stimuli by inhibiting communication between brain regions, lateralisation heightens arousal in emotional reactive areas, leading to increased behavioural problems and dissociative symptoms in traumatised children"
(Disseth, 2005)

What do these changes in brain development mean?

- Over or under responsiveness to emotionally laden situations
 - ↳ Hyper-arousal or Numbing
 - ↳ Avoidance and re-experiencing
- Initial trauma alters stress response system so that processing subsequent emotional stimuli is misperceived as threatening.



E.g misdiagnosis of ADHD and ASC

Structural damage may lead to deficits in:

- Memory
- Spatial processing
- Attention
- Executive function
- Delayed cognitive development
- Language and motor function delays

Developmental Trauma Disorder (Complex Trauma)

Difficulties in:

- Attachment
- Biology (sensori-motor)
- Emotion regulation
- Dissociation (altered awareness)
- Behavioural control
- Cognition (ability to learn new information)
- Self concept (how they see themselves)

Blocked Care

Blocked care describes how stress can suppress a well-meaning parent's capacity to sustain loving feelings and empathy towards his or her child.

- An adult victim of DVA may be struggling emotionally and physically.
- They may not be able to prioritise the child as their needs are too overwhelming.
- If there was no DVA they may be a safe parent



Remember

- Ask the difficult questions
- Find out when the DVA started
- Children will often look and say that they are fine!
- Observe behaviour and emotion rather than what is said
- Notice the home atmosphere, notice your gut reaction, if you feel uncomfortable – think why?
- Children being pseudo-mature and prioritising parents is not normal
- Speak to nursery/school and gather more information



Remember



- Never assume someone else is addressing the DVA issues
- Build the relationships and enquire sensitively; create opportunity, provide a quiet environment where confidentiality can be assured
- Know about local domestic violence agencies
- Focus on safety - Assess the immediate safety of the parent and child
- Record suspicions of DVA and share with supervisor.
- Share information appropriately
- Understand the importance of reporting
- Needs of the unborn child and child remain paramount



Research



- Link between abused pregnant women and emotional and behavioural trauma symptoms of their children before 1 year. Thus a direct relationship between domestic violence and infant trauma symptoms. Predisposes children to psychopathology, including anxiety. (Lannert, et al., 2014).
- Women who report any instance of domestic abuse during pregnancy twice as likely to deliver low-birth-weight baby (Gentry & Jacqueline, 2014).
- Glover, V., O'Connor, T. G., & O'Donnell, K. (2010) Found that women who had experienced abuse were more likely to give birth to a low-birth-weight baby (1:4 ratio). Similar findings from Marabotti et al., 2019.
- Exposure to intimate partner violence in utero was a strong predictor of infant externalizing problems (Martinez-Torteya, 2017)



Contact Details



Enquiry@psychologyassociates.org.uk

0300 303 5233

www.psychologyassociates.org.uk

<https://www.operationencompass.org>



Psychology
Associates
●●●●●●●●

OPERATION
ENCOMPASS

• Thank you



• Feedback Form

<https://www.surveymonkey.co.uk/r/MW2V6K8>