

Abuse, maltreatment and bullying in childhood

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Resilience in survivors of child sexual abuse (1)

This review article summarized the empirical findings on resilience in survivors of child sexual abuse (CSA) and discussed the protective factors associated with adaptive functioning. The authors conducted a literature search of several electronic databases, namely PsycINFO, MEDLINE/PubMed, Web of Science, and PSYINDEX plus. Publications upto November 2013 were considered, and further studies were retrieved by use of the snowball technique. A total of thirty-seven articles met inclusion criteria and were included in the review.

Between 10-53% of CSA survivors were found to have a normal level of functioning. Education, interpersonal and emotional competence, control beliefs, active coping, optimism, social attachment, external attribution of blame, and most importantly, support from the family and the wider social environment emerged as protective factors, based on empirical data.

The authors concluded that preventive and clinical interventions for survivors of CSA should utilize psycho-education and cognitive strategies adapted to the developmental level of the victim. These strategies should enhance social support from the significant other. The authors recommend that the future research should focus on longitudinal designs considering resilience as a dynamic process with multiple dimensions in a social and developmental context.

The burden of child maltreatment in China (2)

The aim of this study was to estimate the health and economic burdens of child maltreatment in China. The authors conducted a systematic review of studies on child maltreatment in China using PubMed, Embase, PsycINFO, CINAHL-EBSCO, ERIC and the Chinese National Knowledge Infrastructure databases. They conducted a meta-analysis of studies that met inclusion criteria, to estimate the prevalence of child neglect and child physical, emotional and sexual abuse.

The authors used data from the 2010 global burden of disease estimates to calculate disability-adjusted life-years (DALYs) lost as a result of child maltreatment. From the 68 studies included in the review, the authors 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. They also

estimated 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. Physical abuse in childhood accounts for 12.2% of DALYs lost because of depression, 17.0% of those lost to anxiety, 20.7% of those lost to problem drinking, 18.8% of those lost due to illicit drug use and 18.3% of those lost to self-harm. It was estimated that the consequences of physical abuse of children cost China 0.84% of its gross domestic product in 2010 – i.e., 50 billion US dollars. The corresponding losses attributable to emotional and sexual abuse in childhood were 0.47% and 0.39% of the gross domestic product, respectively.

Based on these estimates the authors argue that child maltreatment is associated with large economic losses, since maltreated children often suffer substantial psychological distress and are likely to adopt behaviours that increase their risk of longer term mental health related morbidity.

Emotional, behavioural and cognitive features exhibited by school-aged children experiencing neglect or emotional abuse (3)

Interventions to minimise the long-term consequences of neglect or emotional abuse rely on prompt identification of such abused children. This systematic review of world literature (1947-2012) described features seen in children aged 5-14 years, who have experienced neglect or emotional abuse, as opposed to physical or sexual abuse.

The authors searched 18 databases, utilising over 100 keywords, and this was supplemented by hand searching of the grey literature. A total of 13,210 articles were identified, two independently trained reviewers critically appraised 111 full articles, and 30 articles were included in the final review. A majority of the studies (15 studies) described behavioural problems in these children, of which externalizing features were more prominent compared to internalising features. Four studies described features associated with attention deficit hyperactivity disorder (ADHD): impulsivity, inattention or hyperactivity. Child difficulties in initiating or developing friendships were noted in seven studies. Of the 13 studies addressing emotional well-being, three highlighted low self-esteem as a key feature, with perception of external control, or depression including suicidality. A negative internal working model of the mother increased the likelihood of depression. With

regard to cognition and academic performance, lower general intelligence and reduced literacy and numeracy were reported, but there was no reported observable effect on memory.

The study reiterates that school-aged children presenting with poor academic performance, ADHD symptomatology or other unusual behaviours warrant assessment for neglect or emotional abuse as a potential underlying cause.

Adult mental health consequences of peer bullying and maltreatment in childhood (4)

The study examined the relationship between bullying and maltreatment in childhood and mental health consequences in adulthood. The authors attempted to determine whether the effects were due to exposure to both maltreatment and bullying, or bullying alone.

The authors used data from the Avon Longitudinal Study of Parents and Children in the UK (ALSPAC) and the Great Smoky Mountains Study in the USA (GSMS). In ALSPAC, maltreatment was assessed in terms of physical, emotional, or sexual abuse, or severe maladaptive parenting (or both) between the ages of 8 weeks and 8.6 years, as reported by the mother via questionnaires; being bullied was assessed with child reports at 8, 10, and 13 years, using the previously validated Bullying and Friendship Interview Schedule. In GSMS, both maltreatment and bullying were repeatedly assessed with annual parent and child interviews between the ages 9 and 16 years. The association between maltreatment, being bullied, and mental health problems were explored via binary logistic regression analyses. The primary outcome variable was overall mental health problems (any anxiety, depression, or self-harm or suicidality).

The findings were based on data from 4026 children in the ALSPAC cohort and 1420 children in the GSMS cohort. They provided information about bullying, victimisation, maltreatment, and overall mental health problems. The ALSPAC study was started in 1991 and the GSMS cohort enrolled participants from 1993.

Results from the GSMS cohort indicated that compared with children who were not maltreated or bullied, children who were only maltreated were at increased risk of depression in young adulthood, according to models adjusted for sex and family hardships (odds ratio [OR] 4.1, 95% CI 1.5-11.7). According to results from the ALSPAC cohort, those who were only being maltreated were not at increased risk for any mental health problem compared with children who were not maltreated or bullied.

By contrast, those who were both maltreated and bullied were at increased risk for overall mental health problems, anxiety, and depression according to both cohorts; as

well as for self-harm according to the ALSPAC cohort. Children who were bullied by peers only were more likely than children who were maltreated only to have mental health problems in both cohorts (ALSPAC OR 1.6, 95% CI 1.1-2.2; $p=0.005$; GSMS 3.8, 1.8-7.9, $p<0.0001$), with differences in reported levels of anxiety (GSMS OR 4.9; 95% CI 2.0-12.0), depression (ALSPAC 1.7, 1.1-2.7), and self-harm (ALSPAC 1.7, 1.1-2.6) between the two cohorts.

This is an interesting study, which suggests that being bullied by peers in childhood may have greater long-term adverse effects on young adults' mental health, compared to being maltreated in childhood. The findings have important implications for public health planning and service development for dealing with peer bullying. However, it should also be noted that the findings do not confirm a causal link and it is debatable whether mental health issues in childhood was determined solely by the greater degree of peer maltreatment (bullying) experienced by these children.

Associations between violence at home and bullying in childhood (5)

The aim of this study was to examine experiences of bullying among Swedish adolescents and whether victims and perpetrators were also exposed to violence in the home, with particular focus on how abuse severity affected the risk of exposure to bullying.

A nationally representative sample of pupils aged 14-15 years responded to a questionnaire exploring exposure to corporal punishment and other types of violence. Results were analysed using Pearson's chi-square and multiple logistic regression, adjusting for factors regarding the child, the parents and the families' socioeconomic status.

Among the 3197 respondents, a significant proportion reported at least one incident of either bullying victimisation (girls 36%, boys 26%) or bullying perpetration (girls 24%, boys 36%). Physical and emotional violence in the home, including witnessed intimate partner violence, were significantly associated with both bullying victimisation and bullying perpetration. Odds ratios for exposure to bullying rose with increasing frequency and severity of abuse. Adjusted odds ratios ranged from 1.6 for any event of abuse vs. single episodes of bullying to 20.3 for multiple types of abuse vs. many episodes of bullying. The child's gender and the presence of a chronic health condition were consistently associated with nearly all levels of abuse and bullying.

The study concludes that bullying experiences are common among youth and are clearly associated with abuse. Frequent bullying, whether as victim or perpetrator, appears to be an indicator of violence in the home. This study adds an important perspective to bullying that has implications for prevention of bullying and treatment of victims and perpetrators of bullying.

Associations between depression and specific childhood experiences of abuse and neglect (6)

This study examined the specific effects of various types of childhood abuse and neglect on depression. This meta-analysis estimated the associations between depression and different types of childhood maltreatment (antipathy, neglect, physical abuse, sexual abuse, and psychological abuse) assessed with the same measure, the Childhood Experience of Care and Abuse (CECA) interview.

The systematic search in scientific databases included use of the CECA interview and strict clinical assessment for major depression as criteria for inclusion of studies. The meta-analysis utilised Cohen's *d* and relied on a random-effects model.

The literature search yielded 12 primary studies, with a total of 4372 participants and 34 coefficients. Separate meta-analyses for each type of maltreatment revealed that psychological abuse and neglect were most strongly associated with the outcome of depression. Sexual abuse, although significant, was less strongly related. Furthermore, the effects of specific types of childhood maltreatment differed across adult and adolescent samples.

The authors acknowledge that their strict criteria for selecting the primary studies resulted in a small number of available studies. It restricted the analyses for various potential moderators.

However the findings highlight the potential association between the more "silent" types of childhood maltreatment (i.e., forms of abuse other than than physical and sexual abuse) and the development of depression.

Declaration of interest

None declared

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