

Child Abuse: Prevention and Infliction by the Removal of the Child From the Home

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This paper incorporates three separate levels of information acquired slowly from clinical experience:

- a) From clinical research into maltreated children and their parents.
- b) From the assessment and treatment of maltreated children removed from parental care and adopted as Special Needs Children with unforeseen results.
- c) From the assessment for legal purposes of the emotional status of parents who have seriously injured or killed their children and who had not received treatment in their own childhood, despite their severe distress levels.

There are five separate types of childhood experience which may interfere seriously with that individual's capacity to be a parent when this time arrives. They are:

1. Physical maltreatment;
2. Maternal deprivation;
3. Institutionalisation in early childhood;
4. Constant destructive criticism from a parent;
5. Premature demands for parenting behaviour.

PHYSICAL MALTREATMENT

Children subjected to ongoing repeated physical maltreatment and abuse learn quickly to monitor the environment in their efforts to predict events so as to enable them to avoid the hurt and distress. They will be noted to be both auditorially and visually constantly alert. They tend to cease an activity as soon as visual or auditory stimulus is perceived. When this occurs they attempt to locate, identify and then signify the cause of the stimulus. Later they will become extremely controlling of adults as if their safety lies in being in charge of the adults, i.e. they are constantly alert to all that happens in the environment and they seem to display affects of anxiety, sadness, hurt and later anger.

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MATERNAL DEPRIVATION

These children suffer intense hurt and anger, the more so when the deprivation is selective, e.g. if two children are left in an institution while mother reconstructs her life, but takes only one child out after a period of time and leaves the other, or even more commonly where one child is selectively deprived because of the memories and feelings evoked in the mother when she looks at the child. This can result in the child being deprived of affection, of care and even of nutrition. These children are always extremely angry under their compliant and passive exterior, and they stay that way throughout their lives without assistance. As parents they often expect their children to mother and care for them and to meet their needs, however, their needs tend to be so great that the children can never give enough and they always fail and they feel they are failures.

From the child's point of view the greater the number of caretakers he has had to meet, relate to, live with and then leave behind, the more rejections he has experienced. No further proof is needed of his inherent badness and incapacity to change. This constant rejection by adults leads him to expect that no adult caregiver cares about him or if they do, they will desert him sooner or later so that he cannot afford to become emotionally dependent on any adult.

INSTITUTIONALISATION IN EARLY CHILDHOOD

Here, elements of hurt, distress, anger and feelings of badness prevail and the child will feel bad and deserving of punishment as will be amplified later. They manifest many of the characteristics of the child who suffers maternal deprivation.

CONSTANT DESTRUCTIVE CRITICISM FROM A PARENT

These children feel totally unable to please, have very low self-esteem, constantly search for approval with increasing anxiety, hurt and sadness when the efforts fail. As adults they are extremely likely to attack their child if they find they are unable to comfort, soothe, feed him or settle him, i.e. the child appears to be exposing their incompetence.

PREMATURE DEMANDS FOR PARENTING BEHAVIOUR

Often effects children whose mothers die, desert or are chronically, physically or mentally ill. These children may take over the role of mothering the younger siblings and become the parent of the younger siblings thus surrendering the remainder of their childhood or adolescence as the case may be. Typically these girls either marry or may become pregnant at a young age and this appears to be at one level an attempt to escape from an unpleasant situation. However, once their own children arrive they soon perceive these children as preventing them fulfilling their own needs and they become increasingly angry. Given a chance they often do the things their adolescent peer group used to do when they were unable to join them. Some are still adolescents at the age of 40.

Having encountered these aspects of the child's external world we must now seek to understand his internal world, i.e. his emotional experience and the influence of this on his responses to these situations and the relevance to his perceptual experiences as a result of these encounters. i.e. we are attempting to understand the perceptual response to the external reality and the results of these perceptual responses on the internal reality.

Characteristically children who are raised in the circumstances previously defined have five separate levels of difficulty in understanding the world around them.

1. They exhibit high levels of intrapsychic distress.
2. They experience emotional isolation and

therefore lack trust in the goodness of other human beings.

3. They have very low self-esteem.
4. They may undergo massive regression with only minor stresses and this will include a massive regression in perceptual capacity.
5. They may move further to having their capacity to test reality gravely undermined. i.e. there may be a gross interference with reality testing and sometimes an inability to separate reality from fantasy.

Some or all of these consequences of maltreatment will already be present if and when the child is removed from his parents care. Currently they are only rarely redressed by appropriate treatment so that by removal we now add to these problems another set of even more far reaching consequences since we may inadvertently produce a "displacement" of the anger from those who inflict the physical pain to those who now inflict the emotional pain, i.e. the caregiver after the removal and later authority figures and later society and its recognised authority figures, especially the teachers, the police and the law.

These children, even those of mature age, appear to be totally encapsulated in a protective shield which prevents any enquiry.

There are some developmental issues which are extremely important in understanding the results of this experience.

Firstly the younger the child at the time of removal from the home the less capacity the child will have to make appropriate judgements about adult behaviour. i.e. if the child is repeatedly punished by the parent or care-giver then the child has no alternative but to believe that he is bad. His parents couldn't possibly be wrong. This is confirmed when he is removed from the parents care, i.e. "sent away" by them or even more disastrously, removed from their care by the police. Children are very much aware that Police are intimately involved in the apprehension of bad people therefore the child must be wrong, he must be bad and like all bad people he deserves to be punished. It is important to note that this feeling of badness is not initially indicated in words but is seen in behaviour. Hence the paradox: if punishment ceases he will seek punishment. The relief of the bad feelings that attends the punishment is short-lived and before long the search for further punishment will begin again.

Secondly the problem here is understanding and dealing with angry feelings which are not consciously experienced but are registered at a feeling level held onto and may be incorrectly perceived as existing in others. The child who has so registered these

feelings will deny in words that they exist. His behaviour will prove that they do. In effect then, there is no conscious awareness of the intrusion of these feelings or of their expression in behaviour and thus no sense of being responsible for the actions which are a direct result of these retained but unrecognised feelings of anger. Rather the pattern of behaviour seen by the observer suggests that the "carrier" of the anger is saying "It is not I who is angry, it's you." Thus they seek to find these angry feelings they are acutely aware of, in others.

When the present target figure responds with anger this response appears to support what is an inappropriate and incorrect reality judgement. Clearly a logical path to emotional disturbance and delinquent behaviour. Our problem now becomes one of self perpetuating error. If they are able to find constantly the angry feelings in others then any punishment inflicted on them by those they provoke is seen to be unwarranted and totally unjust. Their level of anger will then increase producing more provocative behaviour, angry responses and punishment from those provoked fuels the anger and provides increasing severity of the emotional disturbance and of the conduct disorder.

Small wonder these people are so puzzled and defiant when they are told we find them provocative, oppositional and defiant. It is all too easy to label such behaviour as attention seeking and so avoid the need to understand it.

The child's perception of his badness which stems from the above is resolutely barred from his conscious awareness and it can never be overcome by simply telling him that we do not believe that he is bad. We have to prove to him hundreds of times that he is not bad. We do this by teaching him over time, by example and by our behaviour that we respect him.

Their constant endeavours to avoid failure in any nurturing role leaves them liable to produce explosive, uncontrollable anger when these protective shields are pierced.

Finally, in this context we must never explain to him early in our contact that his parents are sick, that they were disturbed, or couldn't help it. This approach both justifies their behaviour and prevents his anger surfacing to the point where it can be dealt with. If they, that is the parents, couldn't help it, he has no right to be angry with them. Currently separation from parental care is a process marked by fairly rigid standard measures which have to be met by those who remove, receive, assess, report and place. They are bound by strict regulations and almost certainly have no

flexibility in what they can and cannot do otherwise they are liable to be subjected to the most intense and stringent criticism. In fact this decision making is a long convoluted process relative to the child's perception of time. For an infant two weeks is an eternity. The removal is frequently associated with the provision of multiple caretakers. In the infant this experience may leave him at a point where developmentally he continues to make judgements based on "part-object perceptions". Even the older child's experience of multiple dislocations with events occurring beyond his understanding and with no apparent connections, may result in the same inability to connect the two. How can this child develop any understanding of cause and effect or of behaviour and consequences. We will become angry with him when we are aware from observation of his behaviour that he is intelligent but thwarts us by showing clearly that he has a severe learning disability. The existence of this disability predicates decreasing interest in the learning process; boredom, and then destructive classroom behaviour. Their often good intelligence and need to be tuned into the environment means that their attempts to disrupt will be extremely efficient. This again generates further anger which will be directed at the unfortunate child.

Then they may attack the infant with uncontrollable fury producing severe injury or death. Only then does society take notice of them, but as you would expect, it notes only their anger but not their distress

Thirdly, there are disturbances of attachment behaviour, and here two interrelated problems present themselves.

a) From the child's point of view the greater the number of caretakers he has had to meet, relate to, live with and then leave behind, the more rejections he has experienced. No further proof is needed of his inherent badness and incapacity to change. This constant rejection by adults leads him to expect that no adult caregiver cares about him or if they do, they will desert him sooner or later so that he cannot afford to become emotionally dependent on any adult. He behaves as if no adult is important to him. It seems then that he can leave a caring adult without a backward glance, i.e. there seems to be no distress on separation; the more often he separates the easier the separation appears to be to manage. Even in these cases one will sometimes get a second or even a millisecond view of emotional distress. Its appearance will be resolutely denied by him as a protective measure. It is his learned

means of avoiding being overwhelmed by the distress he would feel if he acknowledged its existence or its intensity or its cause.

b) A protective shield. These children, even those of mature age, appear to be totally encapsulated in a protective shield which prevents any enquiry. No matter how empathic the observer, any question he directs which is related to their feeling states, gets an instant response "good", often even before the interviewer completes the sentence. In effect any distress is thereby totally avoided since no question related to feelings is taken in, processed, reacted to emotionally and then answered. It is as if the question itself bounces back from a protective shield. The direct message to the care-giver is "don't waste my time asking me questions, I need to be on the move. I am too busy to talk." It should not be surprising that care-givers soon stop asking questions related to emotions. This turning off period may be anywhere between two to three days or two to three months.

Without appropriate help these children grow to adulthood with these emotional and social consequences unchanged. They remain vulnerable to feelings of hurt, anger,

rejection, loneliness and incompetence. Frequently, because of their intense sensitivity, they try constantly to avoid the hurt. Their constant endeavours to avoid failure in any nurturing role leaves them liable to produce explosive, uncontrollable anger when these protective shields are pierced. Usually this results not from words but from their perception of the meaning of behaviour of others towards them. In each of them there still exists a desperately hurt child waiting to be understood, consoled and nurtured. They will frequently see themselves in the distressed infant and child. If they attempt to minister to that child or infant and their attentions are rejected suggesting that they are incompetent, produces distressed crying when they are under threat of being overwhelmed by their own feelings, produce angry responses from the infant, stimulating the expression of their own barely repressed hidden anger which erupts at an uncontrollable level. Then they may attack the infant with uncontrollable fury producing severe injury or death.

Only then does society take notice of them, but as you would expect, it notes only their anger but not their distress, i.e. it notes their behaviour and in order to avoid being

identified with them, members of society insist that they be punished with the full vigour of the law. It is as if these members of society are saying it would not be possible for me to do that; only he could do that, he deserves to be punished. If they are male and the child that they attack is not theirs but belongs to a defacto, then the results are especially severe.

In summary, and returning to their childhood and later development, we have removed them from the care of those who love them and whom they love, no matter how ambivalent this love may be; we place them in a situation where they learn to avoid giving vent to emotional expressions, forcing them to repress every socially unacceptable response. Then, when we allow them to be driven to distress beyond endurance, so that they injure or kill, we continue their persecution with a passionate and self-righteous hatred. I make no apology for saying that we are still colluding with their destructive behaviour to themselves and society. Some of these unfortunate people will commit suicide; some will commit murder. Punishment is then extreme and their emotional destruction is complete: society, which is the cause of the problem, has its own anger temporarily sated.

