

Behavioral and Emotional Indicators of Physical Abuse

There are several variables which will affect the child's response to abuse and the effects of abuse on the child's development. They will also determine the behavioral indicators of maltreatment in children:

- ***The age of the child when the abuse begins*** - The younger the child when first abused, the more likely the child will have serious developmental problems from the abuse.
- ***The length of time the child has been abused*** - The greater the period of time the child has been abused, the more severe the developmental outcomes will be.
- ***The frequency of the abuse*** - The more often the child is abused, the more pervasive the effects will be.
- ***The nature of the child's relationship with the abuser*** - The closer the relationship of the abuser to the child, the more likely the child will be negatively affected. Abuse by a parent has the most serious consequences.
- ***The type of abuse*** - The more severe the pain and the greater the injury inflicted on the child, the more negative the psychological and physical outcomes will be.
- ***The availability to the child of support*** - The presence of other, non-abusing adults who can provide proper care and nurturance, either in the home or easily available to the child can partially mediate the negative effects of abuse.
- ***Constitutional factors*** - The child's basic personality and temperament can affect the outcomes of abusive treatment. Some children are more resilient than others and have unusual coping strengths. Other children are more vulnerable.

Indicators by Age Groups

Infants and Toddlers

Infants and toddlers may display pervasive indicators of developmental delay and abnormal development:

- The child may be **remote, withdrawn**, lacking in curiosity, compliant and detached; the child may not relate to other people. Some cultural groups teach their children to be “seen and not heard.” The worker should take this into consideration when observing children.

- The child may whine, whimper or cry, with **no expectation of comfort**. The child may not turn to adults for help. Some infants stop crying because it is futile to do so, and they do not have the stamina to continue crying.
- A state of **frozen watchfulness** has been noted in severely physically abused children. They remain emotionally withdrawn and uninvolved, but they closely observe what is going on around them. Note, however, that some cultures teach their children to respond to non-verbal looks from the parents to control the child's behavior. The child may be looking to the parent and watching for those clues.
- Severely physically abused children may exhibit discomfort with or **fear of physical contact**.
- Severely physically abused children may **appear to be autistic**. Many do not relate in normal ways to the people and objects in their environment. Most seriously physically abused infants show serious delays in all areas of development.
- The child may display a forlorn **clinging dependency**, but may be lacking in healthy attachment to any adult and may appear unable to form healthy attachments.
- The child may appear **depressed** or display flat affect and **lack of emotion**. He may not cry or respond when in pain or when injured and he may show no enjoyment. He may not smile or play.

Preschool-Aged Children

Preschool-aged children who have been physically abused may display the following characteristics:

- They may be **timid and easily frightened**. They may duck, cringe, flinch, withdraw and attempt to get out of the way or otherwise exhibit fear when the parent comes near.
- They may be **eager to please**, may crave affection and may show indiscriminate attachment by becoming affectionate with anyone, including strangers.
- Pre-school children may have difficulty following directions and relating to adults or peers. They may steal and lie. They often have **poor self-regulation skills**, so they may not be able to control their bladder or bowels, their anger or sadness, etc.
- The most frequently-identified problems in maltreated preschoolers include: **mental illness, developmental delay, learning disabilities, and language and speech delay or impairment**.
- The child may show physical signs of stress and high anxiety, including **physical illness** and **regressive behaviors**.
- The child may be **aggressive with other children**, may have temper tantrums and may perceive that others intend to harm him/her when this is not true.

School-Aged Children

School-aged children who have been physically abused might abuse or torture animals. Research has shown a high correlation between children who abuse animals and children who have been abused themselves.

School-aged children show many of the same characteristics as preschool children. Their problems in relationships and their developmental delays will often be more pronounced the longer they have been maltreated.

- The child may **assume the adult role** in his/her relationship with the parent. The child can become a little helper, who cares for the parent, demonstrates excessive concern when the parent is distressed and is excessively compliant.
- Some physically abused children have **high activity levels** (whether or not they have hyperactivity disorder), and have unusually short attention spans, an inability to concentrate, and other symptoms of **chronic anxiety**. They often do not do well in school and may appear to be preoccupied.
- The child may demonstrate a **fear of the parents** or, in some cases, an absence of fear or concern in the face of parental or adult authority. The worker should understand there might be a cultural component to this behavior. Some cultural groups expect children to look to the parent for permission to talk with another adult. Failure to do so is considered disrespectful of the parent.
- Children may have **emotional or behavioral disturbances**, including depression, anxiety and post-traumatic stress disorder.
- The child may also demonstrate a **clingy attachment** and verbalize love for the abusing parent.
- The child may show physical signs of stress and anxiety, including physical illness and regressive behaviors.
- The child may be **aggressive with other children**, have temper tantrums or may be "touchy."
 - The child has **difficulty in relating** to other children and to adults. He/she may be manipulative or withdrawn and distant. The child may have angry, aggressive outbursts and temper tantrums.
 - Some children wear unseasonable or **unnecessary clothing** in an apparent attempt to hide themselves or their injuries.

Adolescents

Many emotional and behavioral problems of adolescents may be indicators the child has been physically abused or neglected. Early experience with maltreatment can result in pervasive emotional and behavioral problems. Additionally, teens may engage in problematic behaviors that are attempts to cope with problems related to maltreatment. Adults are often extremely frustrated with these teens, may not understand the genesis of the behavior problems and may blame the child for their problems. For example, while teens are more likely to disclose abuse

than younger children, adults may not believe an adolescent's allegation because the youth has lied in the past.

The indicators for teens include:

- Social or emotional immaturity
- Low levels of academic achievement—this can also be affected by the trauma of separation and placement and multiple moves between schools
- Lying or stealing to protect themselves from abuse or to increase their independence
- Fighting, angry outbursts, belligerence and behaving aggressively toward other people
- Abuse of alcohol or drugs, which often begins as a method of self-medicating for anxiety or depression
- Truancy, including repeatedly running away and refusing to go home
- Generalized difficulty in entering into and sustaining interpersonal relationships
- Emotional and social withdrawal, depression and lack of interest in activities or other people
- Reported dissociative episodes, such as reporting a feeling of standing by and watching something happen, or feeling far away, outside of the event while being directly involved in the event (Dissociative reactions such as this are not unusual when people are subjected to serious psychological trauma.)
- Anti-social behaviors, including delinquency and sexual acting out
- Post-traumatic stress disorder, depression and anxiety