



Utopía y Praxis Latinoamericana
ISSN: 1315-5216
ISSN: 2477-9555
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Universidad del Zulia
Venezuela

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Utopía y Praxis Latinoamericana, vol. 24, núm. Esp.5, 2019

Universidad del Zulia, Venezuela

Disponible en: <https://www.redalyc.org/articulo.oa?id=27962050025>



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The impact of family violence on the social and psychological development of the child

El impacto de la violencia familiar en el desarrollo social y psicológico del niño.

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Recepción: 01 Octubre 2019

Aprobación: 05 Noviembre 2019

ABSTRACT:

Children may become victims of physical, sexual, emotional abuse. Our research aims to evaluate the effect of family violence on the child's social and psychological adaptation. 456 UAE University students voluntarily participated in the study. Child Abuse and Trauma Scale (CATS) were used to determine the level of domestic violence. A methodology-questionnaire of Rogers-Diamond was used to determine the degree of social and psychological adaptation. As a result of the study, it was determined that students with a high level of domestic violence have a low level of social and psychological adaptation of less than 20%.

KEYWORDS: Methodology-Questionnaire, Rogers- Diamond, Trauma Scale, UAE University.

RESUMEN:

Los niños pueden convertirse en víctimas de abuso físico, sexual y emocional. Nuestra investigación tiene como objetivo evaluar el efecto de la violencia familiar en la adaptación social y psicológica del niño. 456 estudiantes de la Universidad de EAU participaron voluntariamente en el estudio. La Escala de Abuso Infantil y Trauma (CATS) se utilizó para determinar el nivel de violencia doméstica. Se utilizó un cuestionario metodológico de Rogers-Diamond para determinar el grado de adaptación social y psicológica. Como resultado del estudio, se determinó que los estudiantes con un alto nivel de violencia doméstica tienen un bajo nivel de adaptación social y psicológica de menos del 20%.

PALABRAS CLAVE: Metodología-Cuestionario, Rogers- Diamond, Trauma Scale, Universidad EAU.

INTRODUCTION

The family is the most critical institution in our society. Family's internal dynamics can have both positive and negative effects on the further development of the child (Alshareef et al.: 2015). In modern society, there is a perception that violence occurs only in socially disadvantaged families. However, research shows that domestic violence occurs in all sectors of society, regardless of cultural, religious, social, legal, and economic aspects.

Violence causes disorders and affects all levels of a child's personality development, his/her emotional and cognitive spheres, as well as behavior. One of the negative aspects of family life is the impact of domestic violence on children as witnesses or victims of conflict (Van der Kolk: 2017). According to some researchers, domestic violence is the most deadly violence to which children can be exposed (Christian et al.: 2015; Noble-Carr et al.: 2019). Children are not always victims of bullying and violence. They often witness violence towards their mother, younger members of the family. In such circumstances, the psychological trauma can

be much stronger than if a child him/herself became the object of abuse (Widom & Wilson: 2015). It is not clear whether domestic violence is a traumatic event, as there are a wide variety of events that cover child abuse and domestic violence. Domestic violence includes physical or emotional aggression from at least one family member as a victim and another as a criminal (Cook et al.: 2017).

The cognitive abilities of victims are influenced because of experienced violence and abuse. A large-scale study was conducted, which included a survey of both minors and adults with adverse childhood experiences. The study showed that any violence acts as a trigger to changes in physiological and neurobiological processes and leads to permanent disorders in brain structures (Turner et al.: 2012).

It is a generally recognized fact that violence from an intimate partner hurts children. However, it is not clear how a child's psychopathology is affected by violence. Numerous studies have identified a link between the effects of family violence and external behavior, traumatic stress, internalization problems, and social problems in children (Gustafsson et al.: 2015; Greene et al.: 2018). Most of the studies are focused on the effects of domestic violence on children in school age and young adults; but few studies have investigated these processes in younger children (Shipman et al.: 2007). As well as whether young children are equally or more exposed to the effects of family violence than older children (Yates et al.: 2003). The results of the study showed the following. Those children, who experienced domestic violence in the past, reacted to the conflict with higher emotional intensity than children who did not grow up with domestic violence (Overlien: 2010). Studies have shown that exposure to domestic violence also increases the risk of behavioral problems. There was an Italian study of elementary and middle school students and it showed the following. Children who experienced domestic violence were more likely to engage in bullying. They as well became victims of bullying at school. This connection was common for girls (Baldry: 2003). In addition, little is known about the mechanisms by which domestic violence affects the development of young children. It is essential to identify and understand as early as possible the psychopathology in young children before problems arise (Greene et al.: 2018).

Violence and abuse in childhood often serve as risk factors for the occurrence of severe personality disorders and the development of mental disorders in adulthood (Vu et al.: 2016). An "inferiority complex" may develop in a child, if he/she experienced violence in the family. He/she is prone to solitude, fantasies, as well as aggression and antisocial behavior. At the same time, aggression can be directed both against others and against oneself (Margolin & Vickerman: 2011). There might be several significant long-term traumatic consequences because of physical, sexual, and psychological (or emotional) violence experienced in childhood. These traumatic consequences might manifest themselves throughout adult life in the form of affective disorders, post-traumatic stress disorders, addictive behavior, eating disorders, and many others (Schwerdtfeger et al.: 2013). In the United States, each year, Child Protective Services (CPS) investigate more than 2 million reports of alleged child abuse, 18% of which are related to physical abuse issues (Finkelhor & Jones: 2012).

In Arab societies, cultural and social norms tend to support disciplinary behavior. The latter is regarded as child abuse by the Convention on the Rights of the Child (Assembly: 1989). Physical punishment, "light" beating, swearing, or shouting are acceptable as a method of socialization in Arab culture (Al Gharaibeh & Gibson: 2019, pp.87-98). For a long time, penal codes were inadequate in protecting children, and even those articles that prohibited and punished severe forms of physical injuries and sexual abuse were not enforced adequately (Al-Mahroos: 2007).

Federal Law On Child Rights, also known as Wadeema's Law (in memory of an eight-year-old Emirati girl who was starved and tortured to death in Dubai by her father and his girlfriend in 2012) was introduced in 2016 to ensure children's rights and protect children against all forms of negligence, exploitation, physical and psychological abuses (Federal Law No. 3: 2016).

The collection of reliable data on issues related to the protection of children is hampered by secrecy, lack of reliable information, and transparency. The research conducted among dentists working in the UAE showed

that 25% of them encountered a suspicious case of child abuse. Only 32% of dentists reported this case to parents (56%), officials (22%), or official abuse authorities (22%). 68% of abuse suspecting dentists avoided the obligation set out by law to provide the report. Non-reporting dentists and those who reported only to parents totaling 85% did not report appropriately according to the law (Al-Amad et al.: 2016). A later survey among the UAE dentists showed over 39% are suspected child abuse and neglect in their practice (Al et al.: 2018).

In such conditions, it is almost impossible to maintain official state statistics (Bengtsson: 2016). Health and social care professionals also expressed concerns. The mentioned is associated with the inability of legal intervention to protect children-witnesses from extreme cases of domestic violence unless there was also evidence of child abuse (Parkinson & Rogers: 2018). Solving the problem of violence in modern society is one of the most pressing and urgent tasks. The event can be assessed as mentally traumatic only after the identification of its impact on the individual (Duberstein et al.: 2018). Based on this, such an assessment is possible after the completion of the event. A disorder is more likely to appear at a younger age (Rehan et al.: 2019; Scott et al.: 2019). The study of the influence of family violence on the psychological and social development of the child occupies a unique position. The goal of our research is to evaluate the effect of family violence on the child's socio-psychological adaptation. In this study, the following tasks were set:

1. Diagnose the general atmosphere in the house at the time when the respondents were children. According to the results, create groups with high, medium, and low psychological trauma levels, because of domestic violence.
2. Determine the level of socio-psychological adaptation of students in groups with high, medium, and low psychological traumas, because of domestic violence.
3. Determine whether there is a connection between the level of domestic violence and the socio-psychological adaptation of the respondents.

METHODS

Four hundred fifty-six students of UAE University voluntarily took part in the study: 156 women and 300 men aged from 18 to 29 years old, average age - 22.7 years \pm 1.65.

se and Trauma Scale (CATS) (Sanders & Becker-Lausen: 1995) were used to determine the level of domestic violence. The scale contains 38 items that are aimed at studying the home environment and the environment in childhood. Each item is evaluated by the participants using a scale from 0 to 4 (0 - never; 4 - always). The score for each subscale is the average score by the elements that make up this subscale. Three categories measure subjective reportson three aspects of adverse childhood experiences: Harmful home environment/neglect, punishment, and sexual abuse.

A questionnaire-methodology of Rogers-Diamond was used to determine the degree of socio-psychological adaptation. The questionnaire contains 101 statements; 37 of them meet the criteria of personality adaptation, 37 - maladaptation, 26 - are neutral. Among the statements of the latter category is the so-called "scale of lies". Six integral indicators allow analyzing the survey results: 1) adaptation; 2) acceptance of others; 3) internality (level of subjective control); 4) self-perception; 5) emotional comfort; 6) the desire to dominate. The response scale includes 6 points.

- 0- The statement does not match my lifestyle;
- 1 - In most cases, it does not suit me;
- 2 - I doubt that this applies to me;
- 3 - I hesitate to attribute this to my way of life;
- 4 - It may suit me, but I am not sure entirely;
- 5 - It is suitable for me;

6 - This statement is entirely consistent with my lifestyle

Data analysis of our research was carried out in the STATISTICA system. For convenience, part of the data was transferred to histograms developed in Origin 9. The size of the error is 3%, and some of the questionnaires were incorrectly filled out (for example, some respondents did not answer all the questions). The collected data were analyzed using Pearson correlation coefficients. This was carried out in order to see any correlation between the variables of adverse childhood experiences using the CAT methodology and the categories of socio-psychological adaptation.

The main limitation of the study was a limited selection since the survey was conducted based on one university. When processing the received data, such details as gender, race, and personal source data were not taken into account. Therefore, it can be assumed that for a broader study, it will be necessary to take into account gender and mental state.

RESULTS

According to the results of testing on the scale of abuse and psychological trauma in childhood, all respondents were divided into three groups: high, medium, and low levels of psychological traumas in childhood due to family violence on the CATS scale (see Table 1).

Level	Number of respondents (n=456)	Indicator
High	106	>3 scores
Medium	267	2-3 scores
Low	83	< 2 scores

Table 1. The results of the survey, conducted using CATS method

The results of the Child Abuse and Trauma Scale (CATS) questionnaire (Table 1) indicate a high level of psychological and physical abuse of children in families. This suggests that many parents applied physical punishment to their children in the process of their upbringing. Groups of respondents with high, medium, and low levels of childhood psychological traumas were compared. As a result, significant differences between them were recognized in a number of indicators of socio-psychological adaptation. It is worth noting that there is no special statistical significance in the differences between the group with medium and high psychological traumas resulting from domestic violence. Significant differences can be observed between groups with high and low levels. The overall results show that students with a high level of domestic violence have a low level of socio-psychological adaptability (less than 20%). While in a group with a low level, the indicator is more than 41%. This indicator shows the negative impact of family violence on the socio-psychological adaptation. Figure 1 shows the results of the difference between the levels of psychological traumas as a result of domestic violence on the socio-psychological adaptation by six factors.

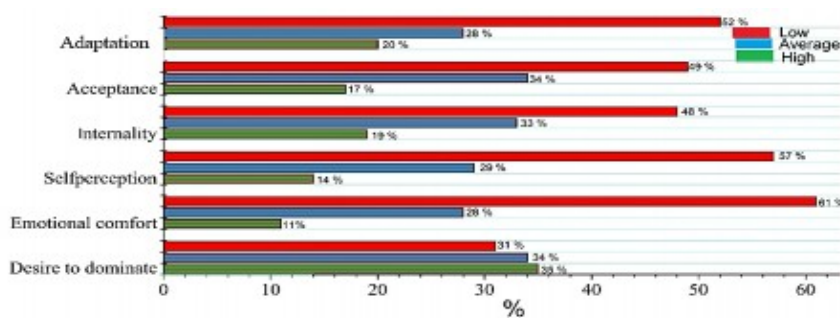


Figure 1. The results of the assessment of socio-psychological adaptation in groups with high, medium and low levels of family violence

According to the "Adaptation" factor, there are low indicators in the group with a high level of domestic violence (20%); they were significantly lower than in the group with a low level (52%). High rates of this factor show that students do not have difficulties in overcoming any life obstacles. They adapt quickly to the conditions of the social environment and form an adequate system of relations with social objects. The low rate indicates the inability to interact effectively with other people, the desire to spend more time alone. As a result, someone starts consuming alcohol or smoking. The lack of social connections and isolation leads to aggression towards one's family, acquaintances, colleagues, or ordinary passersby.

As it is seen from Figure 1, the indicator "Acceptance" also has significant differences between high and low levels of domestic violence. The low-level indicator is higher and states 32%. This indicates that respondents with a high level of domestic violence have little or no positive attitude towards people's weak tolerance for human weaknesses and shortcomings. They find it difficult to feel comfortable when surrounded by people. A person who can accept him/herself as he/she believes in him/herself and considers that he/she is not less important than others. Such a person also sees more clearly the prospects for his/her growth and improvement. Low indicators of these factors are in a group with a high level of family violence, which are 14% and 11%, respectively. This indicates that respondents with a high level of violence are more unstable emotionally, more sensitive to distress, and prone to negative emotions in comparison to those with a low level of violence.

In all groups, the indicator of the dominance factor is about the same $\pm 30\%$. It is worth noting that the high rates of the dominance factor do not always have a positive value. Despotism, denial of the problem, bullying others, low ability to concentrate are negative ones. It should be noted that the group with a high level of domestic violence, this indicator is high, in comparison with previous factors. As the results show, students with a high level of psychological traumas, due to domestic violence, have low levels of subjective control (19%). People with a low rate of this indicator do not see the connection between their actions and occurring events. In order to see any correlation between the variables, the collected data were analyzed by applying the Pearson correlation coefficients (see Table 2).

Variables	M	SD	1	2
CATS Total	3.02	.47	1**	- 0.87
Socio-psychological adaptation	3.51	.13	-0.87	1**
**p<0.0, N=456				

Table 2. Pearson's correlations between the level of domestic violence and socio-psychological adaptation

Pearson's correlation analysis showed that there is a negative correlation between the level of domestic violence and socio-psychological adaptation since the Pearson correlation coefficient is 0.87. This suggests that domestic violence contributes to difficulties in adapting, accepting oneself, establishing relationships in society, causes conflict behavior, isolation in oneself.

CONCLUSION

Previous studies recognized the effect on children of controlling and coercive behavior in the family (Callaghan: 2018). Both retrospective and prospective studies published in recent years have revealed a close connection between cumulative traumatic events in childhood. These included abuse, family dysfunction, and social isolation, as well as illness of an adult's physical and mental health (Lucas-Herald et al.: 2012). Children are also at risk of direct traumas when they intervene in violent acts. Studies show that in 114 cases of battered women, there was 25 percent of children, who called for help during a violent episode. There was 25 percent of children directly involved in this episode. Children intervened more often when the mother was more abused. Scientific evidence states that children have an increased risk of physical health problems in the future if they grow up in families affected by domestic violence and abuse (Bair-Merritt et al.: 2006). Educational issues, as well (Byrne & Taylor: 2007). Also, a risk of involvement in criminal behavior (Gilbert et al.: 2009; T. Gilbert et al.: 2012). The same goes for interpersonal difficulties in their future intimate relationships and friendship (Siegel: 2013). They are also more likely to be harassed and engaged in self-abuse (Callaghan: 2018). As the literature review showed, children who witnessed domestic violence are almost three times more likely to be engaged in physical aggression in school (Rogers & Parkinson: 2018). Meta-synthesis has shown that children describe domestic violence as a complicated, isolating, and long-term experience, which often leads to destruction, loss, and problems in their meaningful relationships. Frequent feelings of fear, anxiety, helplessness, and sadness of children were also revealed, in addition to the strategies they used to try to ensure the safety and emotional well-being of themselves and their families (Noble-Carr et al: 2019)

Based on the results of the study, it can be concluded that domestic violence harms the social and psychological development of the child. The violence, experienced in childhood, has a direct impact. It can also lead to long-term consequences, often affecting the whole life. It can contribute to the formation of specific family relationships, unique life scenarios. As the results show, students with a high level of domestic violence have a low level of socio-psychological adaptability <20%, and in groups with a low level of domestic violence, socio-psychological adaptability is 41%. Depending on the level of childhood trauma due to unfavorable family atmosphere and violence, respondents have some differences. They adapt, accept others differently. They have different subjective control, self-perception, emotional comfort, and a desire to dominate. The results indicate that students with a high level of violence in childhood more often avoid responsibility, create conflict situations. They are self-contained, have understated or heightened self-esteem, and tend to despotism.

Therepresentatives with low socio-psychological adaptability more often avoid problems and have increased anxiety. It worth mentioning that besides a merely medical problem, the issue of domestic violence and child abuse and neglect is a social challenge reflecting the level of development of the society. Despite some improvements in child rights protection legislation in the country, the issue of its enforcement and compliance shall be seriously addressed by society.

BIODATA

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BIBLIOGRAPHY

- AL GHARAIBEH, F, & GIBSON, L (2019). "Care and rehabilitation services to child victims of abuse in the United Arab Emirates: Examples of innovation", in: *Children and Youth Services Review*, 101, pp.87-98.
- AL, HH, AL, MH, KOWASH, M, KHAMIS, AH, WELBURY, R, & HUSSEIN, I (2018). "Assessment of the knowledge of United Arab Emirates dentists of Child Maltreatment, protection and safeguarding", in: *European journal of paediatric dentistry*, 19(2), pp.105-118
- AL-AMAD, SH, AWAD, MA, AL-FARSI, LH, & ELKHALED, RH (2016). "Reporting child abuse cases by dentists working in the United Arab Emirates (UAE)", in: *Journal of forensic and legal medicine*, 40, pp.12-15.
- AL-MAHROOS, FT (2007). "Child abuse and neglect in the Arab Peninsula", in: *Saudi Med. J.*, 28(2), pp.241- 248.
- ALSHAREEF, N, HUSSEIN, H, AL FAISAL, W, EL SAWAF, E, WASFY, A, AL BEHANDY, NS, & ALTHEEB, AAS (2015). "Family and socio-demographic background of violence among adolescent population in Dubai, UAE", in: *Adv Appl Psychol*, 1(2), pp.120-7.
- ASSEMBLY, UG (1989). "Convention on the Rights of the Child: Adopted and opened for signature, ratification and accession by General Assembly Resolution 44/25 of 20 November 1989". Retrieved from Office of the United Nations High Commissioner for Human Rights website: <http://www.ohchr.org/en/professionalinterest/pages/crc.aspx>
- BAIR-MERRITT, MH, BLACKSTONE, M, & FEUDTNER, C (2006). "Physical health outcomes of childhood exposure to intimate partner violence: A systematic review", in: *Pediatrics*, 117, 278-290. doi:10.1542/peds.2005-1473
- BALDRY, AC (2003). "Bullying in Schools and Exposure to Domestic Violence", in: *Child Abuse and Neglect*, 27(7), pp.713-32.
- BENGTSSON, M (2016). "How to plan and perform a qualitative study using content analysis", in: *Nursing Plus Open*, 2, pp.8-14.
- BYRNE, D AND TAYLOR, B (2007). "Children at risk from domestic violence and their educational attainment: Perspectives of education welfare officers, social workers and teachers", in: *Child Care in Practice*, 13(3), pp.185-201.
- CALLAGHAN, JE, ALEXANDER, JH, SIXSMITH, J, & FELLIN, LC (2018). "Beyond "witnessing": Children's experiences of coercive control in domestic violence and abuse", in: *Journal of interpersonal violence*, 33(10), pp.1551-1581
- CHRISTIAN, CW AND COMMITTEE ON CHILD ABUSE AND NEGLECT (2015). "The evaluation of suspected child physical abuse", in: *Pediatrics*, 135(5), pp.e1337-e1354.
- COOK, A, SPINAZZOLA, J, FORD, J, LANKTREE, C, BLAUSTEIN, M, CLOITRE, M & MALLAH, K (2017). "Complex trauma in children and adolescents", in: *Psychiatric annals*, 35(5), pp.390-398.

- DUBERSTEIN, PR, WARD, EA, CHAUDRON, LH, HE, H, TOTH, SL, WANG, W & TALBOT, NL (2018). "Effectiveness of interpersonal psychotherapy-trauma for depressed women with childhood abuse histories", in: *Journal of consulting and clinical psychology*, 86(10), p.868.
- FEDERAL LAW NO. 3 of 2016 Issued on 08/03/2016 Corresponding to 28 Jumada Al-Awwal 1437 H. "On Child Rights (Wadeema's Law)". URL: <https://www.government.ae/en/information-and-services/social-affairs/children>
- FINKELHOR, D, & JONES, LM (2012). "Have Sexual Abuse and Physical Abuse Declined Since the 1990s?", in: Durham, NH: Crimes against Children Research Center.
- GILBERT, R, WIDOM, CS, BROWNE, K, FERGUSON, D, WEBB, E, & JANSON, S (2009). "Burden and consequences of child maltreatment in high-income countries", in: *The Lancet*, 373, pp.68-81.
- GILBERT, T, FARRAND, P, & LANKSHEAR, G (2012). "Troubled lives: Chaos and trauma in the accounts of young people considered "at risk" of diagnosis of personality disorder", in: *Scandinavian Journal of Caring Sciences*, 26, pp.747-754.
- GREENE, CA, CHAN, G, MCCARTHY, KJ, WAKSCHLAG, LS, & BRIGGS-GOWAN, MJ (2018). "Psychological and physical intimate partner violence and young children's mental health: The role of maternal posttraumatic stress symptoms and parenting behaviors", in: *Child Abuse & Neglect*, 77, pp.168-179
- GUSTAFSSON, HC, COFFMAN, JL, & COX, MJ (2015). "Intimate partner violence, maternal sensitive parenting behaviors, and children's executive functioning", in: *Psychology of Violence*, 5(3), pp.266-274.
- LUCAS-HERALD, A, BUTLER, S, MACTIER, H, MCDEVITT, H, YOUNG, D, & AHMED, SF (2012). "Prevalence and characteristics of rib fractures in ex-preterm infants", in: *Pediatrics*, 130(6), pp.1116-1119
- MARGOLIN, G, & VICKERMAN, KA (2011). "Posttraumatic stress in children and adolescents exposed to family violence: I. Overview and issues", in: *Couple and Family Psychology: Research and Practice*, 1(S), pp.63-73
- NOBLE - CARR, D, MOORE, T, & MCARTHUR, M (2019). "Children's experiences and needs in relation to domestic and family violence: Findings from a meta - synthesis", in: *Child & Family*
- ØVERLIEN, C (2010). "Children exposed to domestic violence: Conclusions from the literature and challenges ahead", in: *Journal of Social Work*, 10(1), pp.80-97.
- PARKINSON, KP, & ROGERS, MM (2018). *Addressing domestic abuse through family group conferences*. Policy Press.
- REHAN, W, ANTFOLK, J, JOHANSSON, A, & SANTTILA, P (2019). "Do single experiences of childhood abuse increase psychopathology symptoms in adulthood?", in: *Journal of interpersonal violence*, 34(5), pp.1021-1038
- SANDERS, B, & BECKER-LAUSEN, E (1995). "The measurement of psychological maltreatment: Early data on the child abuse and trauma scale", in: *Child Abuse & Neglect*, 19, pp.315-323
- SCHWERDTFEGER, KL, LARZELERE, RE, WERNER, D, PETERS, C, & OLIVER, M (2013). "Intergenerational transmission of trauma: The mediating role of parenting styles on toddlers' DSM-related symptoms", in: *Journal of Aggression, Maltreatment & Trauma*, 22(2), pp.211-229.
- SCOTT, JG, ROSS, CA, DORAHY, MJ, READ, J, & SCHÄFER, I (2019). *Childhood Trauma in Psychotic and Dissociative Disorders. Psychosis, Trauma and Dissociation: Evolving Perspectives on Severe Psychopathology*, Wiley-Blackwell, p.143
- SHIPMAN, KL, SCHNEIDER, R, FITZGERALD, MM, SIMS, C, SWISHER, L, & EDWARDS, A (2007). "Maternal emotion socialization in maltreating and non-maltreating families: Implications for children's emotion regulation", in: *Social Development*, 16(2), pp.268-285
- SIEGEL, JP (2013). "Breaking the links in intergenerational violence: An emotional regulation perspective", in: *Family Process*, 52, pp.163-178.
- TURNER, HA, FINKELHOR, D, ORMROD, R, HAMBY, S, LEEB, RT, MERCY, JA, & HOLT, M (2012). "Family context, victimization, and child trauma symptoms: variations in safe, stable, and nurturing relationships during early and middle childhood", in: *American journal of orthopsychiatry*, 82(2), p.209.

- VAN DER KOLK, BA (2017). "This issue: child abuse & victimization", in: *Psychiatric Annals*, 35(5), pp.374- 378
- VU, NL, JOURILES, EN, MCDONALD, R, & ROSENFELD, D (2016). "Children's exposure to intimate partner violence: A meta-analysis of longitudinal associations with child adjustment problems", in: *Clinical psychology review*, 46, pp.25-33
- WIDOM, CS, & WILSON, HW (2015). "Intergenerational transmission of violence", in: *Violence and mental health*, pp.27-45.
- YATES, TM, DODDS, MF, SROUFE, A, & EGELAND, B (2003). "Exposure to partner violence and child behavior problems: A prospective study controlling for child physical abuse and neglect, child cognitive ability, socioeconomic status, and life stress", in: *Development & Psychopathology*, 15, pp.199–218.