Adversity in childhood as a risk and vulnerability factor for intimate partner violence. Narrative Review

Adversidad en la infancia como factor de riesgo y vulnerabilidad para la violencia de pareja. Revisión Narrativa

Olinda Dulcemaría Ruiz Fuentesa & Verónica Alexandra Molina Colomab

Abstract:

Adverse childhood experiences (ACE) constitute a complex and devastating phenomenon that has lasting consequences on a person's life. These experiences include, but are not limited to, physical, emotional, or sexual abuse, neglect, abandonment, and exposure to domestic violence. Numerous studies have shown that ACE not only affects the emotional and psychological development of children, but also has profound and lasting implications in adult life, such as the impact on emotional regulation and the formation of healthy relationships, including couple relationships. Research suggests that people who have experienced childhood adversity are at greater risk of finding themselves in violent relationships, either as victims or perpetrators. This connection may be due to a variety of factors, including internalization of abusive behavior patterns, difficulties in emotional regulation, and low self-esteem. Meanwhile, the objective of this study is to carry out a theoretical review of what has been studied in this regard with the aim of understanding how adverse experiences in childhood can predispose people to intimate partner violence. This knowledge is not only vital for the development of effective prevention strategies, but also for the design of therapeutic interventions that help break the cycle of violence.

Keywords:
Adverse childhood experiences, cumulative trauma, intimate partner violence

Resumen:

Las experiencias adversas en la infancia (EAI) constituyen un fenómeno complejo y devastador que tiene secuelas duraderas en la vida de una persona. Estas experiencias incluyen, pero no se limitan a, el abuso físico, emocional o sexual, la negligencia, el abandono, y la exposición a la violencia doméstica. Numerosos estudios han demostrado que las EAI no solo afectan el desarrollo emocional y psicológico de los niños, sino que también tienen implicaciones profundas y duraderas en la vida adulta como el impacto en la regulación emocional y en la formación de relaciones sanas incluidas las relaciones de pareja. La investigación sugiere que las personas que han experimentado adversidades en la infancia tienen un mayor riesgo de encontrarse en relaciones de pareja violentas, ya sea como víctimas o perpetradores. Esta conexión puede deberse a una variedad de factores, incluyendo la internalización de patrones de comportamiento abusivo, dificultades en la regulación emocional, y una baja autoestima. En tanto, el objetivo de este estudio es realizar una revisión teórica de lo que se ha estudiado al respecto con el objetivo de entender cómo las experiencias adversas en la infancia pueden predisponer a las personas a la violencia de pareja. Este conocimiento no solo es vital para el desarrollo de estrategias de prevención efectivas, sino también para el diseño de intervenciones terapéuticas que ayuden a romper el ciclo de violencia.

Palabras Clave:
Experiencias adversas infantiles, trauma acumulativo, violencia de pareja

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INTRODUCTION

Adverse childhood experiences (ACE) encompass various traumatic events that children can face in their first years of life, which can significantly and prolonged affect their emotional, psychological, and physical development (Barboza, 2018; Soriano, 2022). This phenomenon represents a global health problem. Although common, estimates vary due to unreliable statistics and underreporting of these events. It is estimated that approximately a quarter of the world's adult population has experienced physical abuse in childhood. Furthermore, one in five women reports having been a victim of sexual violence during their childhood, while one in thirteen men also reports having suffered sexual abuse in their childhood (World Health Organization [WHO], 2020).

In Mexico, it is estimated that six out of every ten children between one and fourteen years old have been subjected to some form of violent discipline in their homes (Center for Studies for the Achievement of Gender Equality, 2019). According to the 2015 National Survey of Children and Women (ENIM), 66.1% of children and adolescents have suffered some violence, whether physical, psychological, or sexual (INEGI, 2016). Additionally, INEGI's ENVIM survey in 2016 found that 34.2% of women in Mexico have experienced sexual violence before the age of 18 (INEGI, 2016).

Additionally, intimate partner violence is a severe and widespread problem worldwide, affecting millions of people regardless of their age, gender, or socioeconomic level. This type of violence encompasses various abusive behaviors, whether physical, emotional, sexual, or psychological, perpetrated by an intimate partner. The repercussions of intimate partner violence are profound and long-lasting, impacting not only the victims but also their families and communities, which perpetuates the cycle of violence and exposes the youngest members of households to childhood adversity.

The global statistics are worrying. The World Health Organization (WHO) indicates that approximately one in three women has suffered physical or sexual violence from their partner at some point in their lives. This data highlights the severity and ubiquity of this problem. In many parts of the world, the prevalence of intimate partner violence is even higher, reflecting deep gender inequalities and the persistence of cultural norms that enable abuse. In Mexico, 70.1% of women have been affected by at least one incident of violence in their lives, with psychological violence being the most reported (51.6%), followed by sexual violence (49.7%) (INEGI, 2021).

Both phenomena face the problem of the black figure or underreporting due to the taboo and implications of reporting violent acts, especially within the family, which places the people who experience it in total vulnerability.

ADVERSE EXPERIENCES IN CHILDHOOD (ACE)

Adverse childhood experiences are a variety of traumatic events that include physical abuse, psychological/emotional abuse, sexual abuse, physical neglect, emotional neglect, domestic violence, absence of one or both parental figures, substance use within the family, mental illness or suicidal behavior within the family nucleus, bullying, collective violence or the incarceration of a family member. Exposure to one or more of these experiences dramatically impacts the mental and physical health of infants, with essential repercussions in adult life. Various studies have shown that IAS is associated with a greater risk of developing a variety of health problems. Health across the lifespan, including anxiety disorders, depression, heart disease, maladaptive personality traits, risky behaviors, and substance abuse (Felitti et al., 1998; Petrucelli, 2019; Johnson, 2020; Martín-Higarza, 2020; Narayan, 2021 y Kaminer, 2022).

The effect of EAI hurts brain development, especially in regions involved in emotional processing, emotional regulation, and stress management (Teicher, 2016; McCrory, 2011). Furthermore, cumulative stress from adversities generates a more significant impact if the exposure and emotional burden are greater (Hughes, 2018; Schalinski, 2019; Rod, 2020).

Recent research has revealed that cumulative adverse and traumatic experiences are linked to an increased risk of both being a victim (Dugal, 2018; Bridgett, 2014) and perpetrating intimate partner violence in adulthood (Brassard, 2014; Dugal, 2018).

INTIMATE PARTNER VIOLENCE

Intimate partner violence can be defined as physical, psychological, sexual, or any abuse that causes harm to the person by the partner with whom they have or had a romantic relationship (Ancona y Gómez, 2022); this phenomenon is not limited to a single type of relationship or cultural context, but occurs in different forms and degrees throughout the world (Johnson, 2008).

Current studies on the subject have identified two types of violence in the context of couples: bidirectional or symmetrical violence and unidirectional or asymmetrical violence; the first type involves the perpetration of violent acts by both parts of the couple, which suggests a pattern of conflictive and aggressive interaction between both members; the second type is characterized by the predominance of violence exercised by one of the members towards the other, generally associated with imbalances of power and control in the relationship. These two types of violence can manifest themselves in different ways, whether physical, psychological, or emotional (Araujo-Cuauro, 2021; Garzón-Segura et al., 2023; Vargas, 2020).

The prevalence of two-way intimate partner violence seems to be more common among young couples (Rojas-Solís y Romero-Méndez, 2022). An analysis of the bidirectional nature of this violence demonstrated the association with factors such as childhood violence, current violence in the couple, mental disorders, both physical and mental health problems, excessive use of drugs or alcohol, and minor conflicts with the couple. And a pattern of irascible behavior (Echeverri y Giraldo, 2018; Montero-Fernández et al., 2022).
RELATIONSHIP OF EAI AND INTIMATE PARTNER VIOLENCE

Affective dysregulation is a concept that encompasses both cognitive and behavioral aspects. Cognitively, it refers to difficulty managing and tolerating intense and negative emotions without resorting to avoidance strategies. Behaviorally, it implies the inability to contain these emotions, resulting in dysfunctional behaviors such as self-harm, substance abuse, impulsivity, or violence (Dugal, 2018).

Adversity and cumulative trauma can hinder the development of emotional regulation skills, as it exposes children to extreme emotional situations and prevents them from learning to tolerate and control unpleasant emotions. It has been shown that adults who have survived ACE tend to present problems in emotional regulation and have a tendency to use dysfunctional or impulsive strategies to mitigate adverse effects or reduce their impact, such as self-harm, substance abuse, impulsivity, and violence (Dugal, 2018).

Emotional dysregulation often involves violence as an impulsive response to manage emotional conflict, which could partly explain why survivors of childhood trauma are at greater risk of committing intimate partner violence in adulthood, just as they are also at greater risk of experiencing intimate partner violence due to difficulties in recognizing dangerous situations, such as the inability to identify and react assertively or focused on escaping dangerous situations (Berzenki, 2010; Briere, 2010; Gratz, 2009; Ruddle, 2017; Walsh, 2012; Dugal, 2018).

Other factors that influence the relationship between exposure to childhood adversity and intimate partner violence is that as a consequence of exposure to trauma, there may be an alteration of self-concept and the presence of cognitive deficits that, in turn, tend to alter how the individual perceives himself and perceives relationships, also having an impact on the way he interacts and carries out his social relationships (Berzenki, 2010; Erickson et al., 1989; McGee et al., 1997; Vissing et al., 1991; Yates, 2007).

The intergenerational cycle of abuse involves the repetition of patterns of abuse and neglect from one generation to the next. People who were abused in their childhood are more likely to abuse their children due to the internalization of abusive behaviors and the lack of adequate parenting skills (Walker, 1979; Kaufman, 1987; Herrenkohl, 1981). Likewise, people who received abuse or exposure to adversity have a greater risk of receiving abuse in adult life due to some cognitive deficits associated with the normalization of violence, negative self-concept, and lack of effective coping (Dutton, 2010; van der Kolk, 2005; Briere, 2010).

CONCLUSION AND DISCUSSION

ACE is a risk and vulnerability factor for intimate partner violence, both for being a victim and for perpetrating intimate partner violence. Adversity and cumulative trauma impact brain development related to emotional processing, emotional regulation, and stress management, making it challenging to develop some skills, such as coping.

The role of emotional dysregulation and some psychological deficits associated with coping and self-concept are crucial to understanding and explaining the risk of receiving or perpetrating intimate partner violence. Understanding the risk and vulnerability factors for violence allows us to prevent situations in which this phenomenon is generated, which would stop the cycle of violence. Likewise, understanding the factors related to risk and vulnerability provides us with valuable information about the key points of intervention.

Research has revealed a strong relationship between adverse childhood experiences (ACE) and intimate partner violence. Those people who have experienced multiple ACEs have a considerably higher risk of experiencing or perpetrating violence in their relationships. This cycle of violence can perpetuate itself over generations, maintaining a destructive pattern that impacts both families and communities.

It is essential to implement early interventions and prevention programs focused on children and families at risk to stop this cycle. Education about healthy relationships, strengthening coping skills, increasing emotional regulation, restructuring schemas associated with violence, as well as promoting resilience and self-efficacy are vital strategies to mitigate the adverse effects of ACE. Furthermore, it is crucial to offer therapeutic support and resources to those who have lived these experiences so that they can be processed more functionally and with fewer effects, thus reducing the risk of developing any type of associated sequelae, including intimate partner violence.

REFERENCES


