



EMPATHIC PARENTING

Journal of the Canadian Society for the Prevention of Cruelty to Children

Volume 22

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Autumn 1999

How is repressed anger very often vented?

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Alice Miller
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Normative Violence and Normative Abuse

For most of us the omnipresence of evermore violent books, films, TV, video games and "sports" has become a "normal" part of everyday life. "Good fun, relaxing entertainment."

We seldom remind ourselves that the driving force behind the production and distribution of all these things is that someone wants to make a buck.

More importantly we deny that the source of our attraction to all these sick symptoms lies (usually beyond our awareness) in the deep inner recesses of minds and hearts that have been subjected to unempathic child rearing practices.

Alice Miller says it in plain English. (page 2)

Karen Walant has named the source quite appropriately: Normative Abuse. (page 4)

ETB

WHAT IS EMPATHIC PARENTING?

Being willing and able to put yourself in your child's shoes in order to correctly identify his/her feelings, and

Being willing and able to behave toward your child in ways which take those feelings into account.

Empathic Parenting takes an enormous amount of time and energy and fully involves both parents in a co-operative, sharing way.

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**EMPATHIC PARENTING**

Journal of the Canadian Society for the Prevention of Cruelty to Children

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Many articles from past issues of Empathic Parenting are now available on the Internet and may be freely downloaded by anyone. Our four sites are now accessible from one address:

<http://www.empathicparenting.org>

Empathic Parenting: http://cnet.unb.ca/orgs/prevention_cruelty/

Crime Prevention: http://www.bconnex.net/~cspcc/crime_prevention/

Daycare is for Parents Not Infants and Toddlers: <http://www.bconnex.net/~cspcc/daycare/>

Psychopathy and Consumerism: Two Illnesses that Need and Feed Each Other: <http://www.bconnex.net/~cspcc/psychopathy/>

Why Spankings Are Dangerous

Alice Miller

Why spankings, slaps, and even apparently harmless blows like pats on the hand are dangerous for a baby

1. They teach it violence
2. They destroy the infallible certainty of being loved that the baby needs
3. They cause anxiety: the expectancy of the next break
4. They convey a lie: they pretend to be educational, but parents actually use them to vent their anger; when they strike, it's because, as children, they were struck themselves
5. They provoke anger and a desire for revenge, which remain repressed only to be expressed much later
6. They program the child to accept illogical arguments (I'm hurting you for your own good) and stamp them in their neurons
7. They destroy sensitivity and compassion for others and for oneself, and hence limit the capacity to gain insight

What long term lessons does the baby retain from spankings and other blows?

The baby learns:

1. That a child does not deserve respect
2. That good can be learned through punishment (which is actually wrong, since punishment merely teaches the children to want to punish on their own turn.)
3. That suffering mustn't be felt, it must be ignored (which is dangerous for the immune system)
4. That violence is a manifestation of love (fostering perversion)
5. That denial of feeling is healthy (but the body pays the price of this error, often much later)
6. That there is no defense before adulthood

The body memorizes all these harmful traces of the supposedly "good spankings"

After having obtained her Ph.D. in Philosophy at the University of Basel, Alice Miller went through Freudian psychoanalytic training in Zurich and worked for 20 years as analyst and supervisor. Since 1980 she has devoted herself to research on childhood and has written 9 books focussing on the causes and effects of child abuse. In her most recent book, *Paths of Life*, Pantheon, 1998, Alice Miller explains among other things how hatred develops.

You can see the Alice Miller Library at <http://www.naturalchild.com>

How is repressed anger very often vented?

In childhood and adolescence:

1. By making fun of the weak
2. By hitting classmates
3. By humiliating girls, who symbolize mother
4. By annoying the teacher
5. By watching TV and playing video games to experience forbidden and stored up feelings of rage and anger, and by identifying with violent heroes. (Children who have been loved and never beaten are uninterested in cruel films, and, as adults, will not produce horror shows).

In adulthood:

1. By perpetuating spanking, as an apparently educational and effective means, often heartily recommended to others, whereas in actual fact, one's own suffering is being avenged on the next generation
2. By refusing to understand the connections between previously experienced violence and the violence actively repeated today. The ignorance of society is thereby perpetuated
3. By entering professions which demand violence: police, army, boxing, etc.
4. By being gullible to politicians who designate scapegoats for the violence that has been stored up and which can finally be vented with impunity: "impure" races, ethnic "cleansing", ostracized social minorities.
5. (Because of obedience to violence as a child), by readiness to obey any authority which recalls the authority of the parents, as the Germans obeyed Hitler, the Russians Stalin, the Serbs Milosevic.

Conversely, some become aware of the repression and universal denial of childhood pain, realizing how violence is transmitted from parents to children, and stop hitting children regardless of age. This can be done (many have succeeded) as soon as one has understood that the causes and effects of child maltreatment are the same: the repressed history of the parents. ●

Normative Abuse

Karen Walant

I am suggesting we examine the damage to children whose childhoods might not even be called strict.

THE TWENTIETH CENTURY emphasis on self-reliance and individuality has greatly affected the psychological conditions most frequently requiring psychotherapeutic treatment in later life, including personality disorders and addiction. Autonomy and separateness have been emphasized in early childhood, in part because of the psychoanalytic view that the infant begins life in a state of non-differentiation with mother and gradually, through the first two to three years of life, becomes an individuated separated, and cohesive being. Merger has been seen as a fusion state normal only to the early mother-infant dyad. The neonate cannot separate himself from his mother and therefore remains in a state of symbiotic bliss, comforted by her self-state, which protects his own. From this viewpoint, merger is seen as a dangerous threat to the burgeoning self of the infant; it encourages the child to remain fused and to seek only more moments of oneness. The child has no wish for self-actualization or self-mobilization because the symbiotic state is seen as heavenly.

I have another view of this infant, albeit an infant seen from my particular bias: an infant struggling to maintain both connectedness and separateness. This in-

fant senses, even in utero, his separateness from others while feeling connected to a larger and, it is hoped, protective mother. Our society's long-standing denial and devaluation of merger phenomenon throughout the life cycle have actually increased the likelihood of personality disorders and addiction, precisely because autonomy and independence have been encouraged *at the expense of* attachment needs. These disorders, which are so pervasive in our current world, illustrate that beneath the veneer of self-reliance lies the core of powerlessness, alienation, and detachment. The push for individuation and self-determination in young children has greatly affected the acting out and repressed behavior of adults we later see in our psychotherapy practices, patients who suffer from what has been termed the *basic fault* (Balint), the *false self* (Winnicott), or the *empty core* (Seinfeld)...

My perspective is not that the baby requires twenty-four hours a day of merger and not that separation is inhumane, but rather that we must examine the results of the amount of separation, the amount of aloneness, that we insist upon in our twentieth century child-rearing practices and our current psychotherapy orientations...

Excerpted from the book *Creating the Capacity for Attachment: Treating Addictions and the Alienated Self* by Karen B. Walant published in hardcover by Jason Aronson in 1995 and now out of print. Fortunately the book has just been released in paperback.

*The 2-year-old is sleepy, but doesn't want Mommy to leave. Not just yet, he thinks. Please not now, just one more story. I don't want to be alone. It's dark, it's lonely. The stuffed toys aren't you, they don't really talk to me. I want you! But Mommy wants him in bed, she's had a long day, and this is (quite frankly) her time for rejuvenation. Besides, she thinks, he's supposed to sleep through the night by now; he's old enough to have a regular bedtime. She places him gently back in his crib and firmly tells him, "Good night, my sweet child. You have your toys, you have the light on, and Mommy knows you can go to sleep **all by yourself.** Nighty-night!" She leaves the room, and he screams out for her. She doesn't return. He's stuck in this prison-crib, and he needs to get out! Where is she? He panics. He screams again. She's not coming for me, she won't help me. He cries, he cries again, and he sobs heavily while shaking furiously at the crib. I can't get out of here! I need to get her! I can't get out and find her. I'm stuck here. Help me Mommy! When he can cry no more, he closes his eyes, exhausted with fear and sadness at the tiny-ness of his being. (And his mother thinks, Well, it didn't take him too long tonight to settle down. He's getting used to this.)*

I agree with Miller and Bowlby that there are much greater and deeper wounds in childhood than have been readily acknowledged by psychoanalysts, child-rearing experts, and parents. Miller (1990) has spent most of her career building a case for increased attention to the dangers of "normal" parenting. She has detailed in her many books incidents which, like some of the moments described above, are traumatic to the child's development. "Some people accuse me of exaggeration when I speak of child abuse in cases of a strict but nevertheless 'normal' upbringing that has 'nothing unusual' about it. Yet it is precisely the widespread nature of this type of child-rearing that makes a warning imperative" (Miller 1990, p. 20). Not only do I agree with Miller, but I am suggesting we examine the damage to children whose childhoods might not even be called strict.

Our culture allows for a certain thresh-

old of parenting practices that I term *normative abuse*. Normative, because these are included in some of the basic tenets of child raising that are endorsed by the culture in which we live. Normative, because, like the generations before that believed "a child should be seen and not heard," these are parts of current parenting philosophy. Normative, because these are often tiny moments in a child's life, moments that may be followed by a loving interaction or a sweet caress. Normative abuse occurs when the attachment needs of the child are sacrificed for the cultural norms of separation and individuation. Normative abuse occurs when parental instinct and empathy are replaced by cultural norms. Although these incidents are not as severely traumatizing as incidents of verbal, physical, or sexual abuse, they nevertheless affect the overall development of the child's personality... ☺

A Proper Sense of our Dependence on Other People

Donald Nicholl

Community demands a high degree of maturity, especially on the part of someone living in Westernized society, which actually fosters egotism and therefore immaturity.

This point is worth dwelling upon because it has been strikingly illustrated recently by a Japanese psychiatrist. After working for a number of years in the United States this man began to ask himself what it was in the behaviour of American psychiatrists that made him feel uneasy. Eventually it dawned on him that it was their attitude towards their patients: there was a total lack of tenderness between the psychiatrist and his patient. Indeed it seemed part of the psychiatrist's very image of himself to be hard-boiled, rather like a hard-boiled egg. In the Americans' attitudes there was a total lack of what Japanese call *amaeru*. This is a word which any Japanese child can understand but which seems beyond the grasp of even highly intelligent Americans. Roughly, it means a proper sense of our dependence on other people.

The more he thought about it the more clearly the Japanese psychiatrist saw that this impasse for the Americans arose because the Americans and the Japanese envisage the growth of human beings in almost opposite terms. In the American

view, a human child is born in a state of utter dependence on his or her parents, relatives and society and grows by becoming less and less dependent on others until, in the end, the child is completely autonomous. As the Japanese psychiatrist observed it, this meant the absence of tenderness, of *amaeru*, which in turn explains the terrifying loneliness that afflicts Americans. The paradigm of this life trajectory, from dependence to total independence, is the clinical and lonely death-bed, in hospital, that is the fate of almost all Americans. For the Japanese, by contrast, the human child is born in a state of loneliness, incapable of communication with the rest of humanity. The way out of this loneliness leads by way of tenderness into a proper sense of dependence on others. A foothold for tenderness is already given in the child's physical dependence upon others; and the climax of human growth comes at the very end of life. By that time one should have become more and more integrated into the human family until one dies in the midst of one's community, gladly acknowledging that one is depending upon others to care for one at the end—to carry one's body to the proper place for the funeral rites. Certainly no human being, however autonomous, is able properly to dispose of his own body. ☉

From the book *Holiness* by Donald Nicholl published by Dartman, Longman & Todd Ltd. Reprinted with kind permission of the publisher.

Special thanks to Paul Moore for drawing this piece to the attention of the editor.

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How Trauma Affects The Brain

Frederic Schiffer

We should not forget that we are often injured (and therefore traumatized) by neglect, rejection, or humiliation, assaults that are often difficult to detect, especially when we are children.

Perhaps the first step in trying to identify how trauma affects the brain is to clarify what we mean by trauma. Some psychologists describe two kinds of trauma: life-threatening, such as extreme physical abuse, violence, or disasters; and critical incidents, which cover such common events as the death of a grandparent, school-related anxiety, or a playground incident. The most common trauma that I see in my practice is from the psychological effects of being a child in a dysfunctional family. I prefer to keep the definition of trauma related to ordinary life experience, and I think we generally mean by trauma any event that hurts or harms us—an offhand comment we possibly took the wrong way (or possibly the right way); a shove, a punch, a stabbing, a shooting; a look, a statement, a series of looks and statements. If we cope well with the trauma, we may grow from it and may not be harmed by it. But traumas that are more than we can deal with (and what we can deal with will depend on our age, health, allies, and other factors) will harm us. Some traumas, like rape, incest, or a bludgeoning, are always

severe and harmful, although the degree of harm depends on the relation between our coping abilities and the severity of the trauma. We should not forget that we are often injured (and therefore traumatized) by neglect, rejection, or humiliation, assaults that are often difficult to detect, especially when we are children. The effects of profound trauma (war or incest) are qualitatively and quantitatively different from those less dramatic, such as neglect and rejection, but I believe that they all share enough common characteristics to discuss them together here.

When we are traumatized, our brain registers the pain. In response to the pain, we develop two types of responses: cognitive and emotional. Cognitively, we decide to try to avoid hot stoves or pointed people—whatever has hurt us. Emotionally we may be showered with a variety of affects, from anger to sadness to despair. With cognition, we have a sense of being active. With emotions, they seem to happen to us, and as Goleman points out, they may erupt with great speed.¹

One of the most common emotions

Excerpted from the book *OF TWO MINDS: The Revolutionary Science of Dual-Brain Psychology*, Copyright © 1998 Frederic Schiffer. Reprinted with kind permission of the author. Dr. Schiffer is a psychiatrist on the faculty at the Harvard Medical School. *OF TWO MINDS* is published by THE FREE PRESS, a division of Simon & Schuster Inc. New York.

to follow trauma and pain is fear or anxiety. Generally we refer to this emotion as fear when we believe we understand its source and as anxiety when we don't. Fortunately, fear (or anxiety) is one of the best-studied emotions from the neurophysiological perspective. In his book, *The Emotional Brain*², Joseph LeDoux of New York University gives an excellent review of this well-developed field, in which he has led much of the research. LeDoux has shown that fear responses involve largely three brain structures: the orbital frontal cortex, the hippocampus, and the amygdala. When trauma occurs, essentially two types of memories are laid down—one in the amygdala and one in the hippocampus. The memories in the amygdala are called *implicit memories*, because they are beyond our consciousness. When after a trauma we return to the scene, we are likely to feel nausea or other physical feelings of emotional distress, and we will feel these even though we know we are now safe. This is an example of an implicit memory of the trauma, and such memories are stored in the amygdala. Interestingly, the amygdala not only retains a covert memory of the trauma but is connected to the autonomic nervous system and is capable of evoking the adrenaline-mediated "flight or fight" response. A part of that response is the release of adrenaline, which comes back to the amygdala and acts to reinforce the traumatic memory. The amy-

gdala also stimulates the release of the stress hormone cortisol. LeDoux believes that memories set down in the amygdala may be indelible, an assertion we will return to.

The hippocampus, a structure physically near to the amygdala, helps to form long-term memories and is associated with conscious or explicit memories. Both the orbital frontal cortex and the hippocampus tend to try to calm the amygdala. The hippocampus tries to reduce the release of cortisol. When the amygdala cannot be calmed but rather overpowers the other centers, then the person is likely to enter a state of panic. In this state, cortisol release continues; over time, it can cause damage and even physical shrinkage to the hippocampus.

The orbital frontal cortex is more related to cognition and to the interaction of emotion and cognition, and will attempt to inhibit the excited amygdala. LeDoux points out that cognition allows us to turn from reaction (emotion) to action (decision). When the cortex learns that safety has been achieved, it tries to override what the amygdala has learned through suppression of the lower center. ☺

1. Goleman D: *Emotional Intelligence*, Bantam, New York, 1995

2. LeDoux J: *The Emotional Brain: The Mysterious Underpinnings of Emotional Life*. New York, Simon & Schuster, 1996

Memories set down in the amygdala may be indelible.

Incubated in Terror: Neurodevelopmental Factors in the 'Cycle of Violence'

Bruce D. Perry

In order to solve the problems of violence,
we need to transform our culture.

Approximately 250,000 years ago, a few thousand *Homo sapiens* (our first genetically-equivalent ancestors) migrated out of Africa, beginning the long transgenerational process of inhabiting and, ultimately, dominating the rest of the natural world. This fragile process was aided by a great deal of luck and the remarkable potential of the human brain to allow non-genetic, transgenerational transmission of information (sociocultural evolution). For thousands of generations, life was characterized by danger — omnipresent threat and pervasive intra- and interspecies violence. Humankind and our current sociocultural practices evolved in — and, therefore, reflect — a brutal, violent and unpredictable world. The evolution of complex cultures and 'civilization' have not protected millions from the brutality which characterized the 'ascent' of humankind. While 'civilization' has decreased our vulnerability to non-human predators, it has done little to decrease intraspecies violence.

Indeed, modern history is characterized by increasingly efficient, systematic and institutionalized violence (e.g., the Inquisition, slavery, the Holocaust, the Trail of Tears). Men were, and men remain, the major predators of vulnerable humans (typically women and children). The profound impact of domestic violence, community violence, physical and sexual abuse and other forms of predatory or impulsive assault can not be overestimated. Violence impacts the victims, the witnesses — and, ultimately, us all. Understanding and modifying our violent nature will determine, in large part, the degree to which we will successfully 'adapt' to the challenges of the future — the degree to which future generations of human beings can actually experience humanity.

In order to understand the origins and impact of interpersonal violence, it is essential to appreciate how violence alters the developing child. The child and the adult reflect the world they are raised in.

Excerpts from a much longer article (with 79 references) by Bruce D. Perry, M.D., Ph.D. which can be found on the CIVITAS website at <http://www.bcm.tmc.edu/civitas/incubated.htm> This is an Academy version of a chapter originally published in *Children, Youth and Violence: The Search for Solutions*. Official citation: **Perry, BD Incubated in Terror: Neurodevelopmental Factors in the 'Cycle of Violence' In: Children, Youth and Violence: The Search for Solutions (J Osofsky, Ed.). Guilford Press, New York, pp 124-148, 1997.** The CIVITAS Academy is a partnership between CIVITAS Initiative, Baylor College of Medicine and Texas Children's Hospital.

And, sadly, in today's world, millions of children are raised in unstable and violent settings. Literally, incubated in terror.

In the United States alone, at least 5 million children are victims of and/or witnesses to physical abuse, domestic violence or community violence — all while they are bathed in the powerful images of television which over-represent violent acts and over-value the viability of violence as a solution to conflict. What is the impact of these pervasive experiences with violence on the developing child? How does violence change the child? What is the impact of being repeatedly assaulted by a parent — how is that different from being targeted in a drive-by shooting, or watching a loved one being assaulted or watching a 'pretend', but graphic, murder on television? How do these childhood experiences contribute to the much-discussed but little-understood 'cycle of violence'?

This article will examine these questions in context of neurodevelopment — how these experiences influence brain development and subsequent emotional, behavioral, cognitive and social functioning of children. The amazing capacity of the human brain to develop in a 'use-dependent' fashion — growing, organizing and functioning in response to developmental experience — means that the major modifier of all human behavior is experience. Experience, not genetics, results in the critical neurobiological factors associated with violence.

It is the primary caretaking relationships of infancy and childhood which determine the core neurobiological organization of the human individual.

A common error in examining the 'neurobiology' of violence is to presume a neurobiological trait, a biochemical marker (e.g., whole blood serotonin, or CSF 5-HIAA), which may be altered in 'violent' populations suggests a genetic difference. Nothing could be further from the truth.

There is no more specific 'biological' determinant than a relationship. Human beings evolved as social animals and the majority of biology of the brain is dedicated to mediating the complex interactions required to keep small, naked, weak, individual humans alive by being part of a larger biological whole — the family, the clan. Indeed, it is the primary caretaking relationships of infancy and childhood which determine the core neurobiological organization of the human individual, thereby allowing this incredible social specialization. Early life experience determines core neurobiology. The experiences which will be the focus of this article include those which predispose to violent behavior and those which result from exposure to violent behavior. The two are inextricably intertwined.

Violence and the Developing Brain

Violence is heterogeneous — in etiology, quality, quantity and impact on its victims. Physical violence can be the result of impulsive, reactive behavior or predatory, remorseless aggression. Physical violence can be related to intoxication from alcohol or from psychosis or from

Understanding the roots of community and predatory violence is impossible unless the effects of intrafamilial violence, abuse and neglect on the development of the child are examined.

other neuropsychiatric conditions (e.g., dementia, traumatic head injury). Physical violence may be the result of a personal (Oklahoma City bombing) or a cultural (political terrorism) belief system. Physical violence can be sexualized (rape) or directed at a specific victim (domestic violence) or at a specific group (e.g., African-Americans, homosexuals, Jews). Violence may be physical or emotional. Indeed, some of the most destructive violence does not break bones, it breaks minds. Emotional violence does not result in the death of the body, it results in death of the soul.

The major setting for violence in America is the home. Intrafamilial abuse, neglect and domestic battery account for the majority of physical and emotional violence suffered by children in this country. Despite this, a majority of our entertainment, media and public policy efforts focus on community or predatory violence. Understanding the roots of community and predatory violence is impossible unless the effects of intrafamilial violence, abuse and neglect on the development of the child are examined. Indeed, the adolescents and

adults responsible for community and predatory violence likely developed the emotional, behavioral, cognitive and physiological characteristics which mediate these violent behaviors as a result of intrafamilial violence during childhood.

What are the pathways from terrorized infant to terrorizing adolescent? How can someone develop the capacity to stalk, torture, murder and mutilate another human being and feel no remorse — even feel pleasure? How can a 14 year old kill someone over a jacket? How can someone load a truck with explosives and blow up a building full of anonymous and innocent people? How can someone beat senseless the woman they 'love' and, if she leaves, taking the children, track them down and kill them all? Why are men so much more violent than women? What happens to people to make them act like "animals"?

All violent behavior impacts the children in its wake, but there is heterogeneity of impact. Important factors in the differential impact on the developing child include the type of violence, the pattern of violence, the presence (or absence) of sup-

Indeed, the adolescents and adults responsible for community and predatory violence likely developed the emotional, behavioral, cognitive and physiological characteristics which mediate these violent behaviors as a result of intrafamilial violence during childhood.

portive adult caretakers and other support systems, and, of key importance, the age of the child. Under all circumstances, however, the organ which allows the child victim to adapt to any violent trauma is the brain — just as the brain is the organ that is the origin for the violent behaviors of the victimizer. How is it that the very neurobiological adaptations which allow the child to survive violence may, as the child grows older, result in an increased tendency to be violent? It is not the finger pulling the trigger that kills; it is not the penis that rapes — it is the brain. In order to understand violence we need to understand the organization and functioning of its birthplace — the brain...

Emotional Neglect

A fifteen year old boy sees some fancy sneakers he wants. Another child is wearing them — so he pulls out a gun and demands them. The younger child, at gunpoint, takes off his shoes and surrenders them. The fifteen year old puts the gun to the child's head, smiles and pulls the trigger. When he arrested, the officers are chilled by his apparent lack of remorse. Asked later whether, if he could turn back the clock, would he do anything differently, he thinks and replies, "I would have cleaned my shoes." 'His' bloody shoes led to his arrest. He exhibits regret for being caught, an intellectual, cognitive response.

The part of his brain which would have allowed him to feel connected to other human beings — empathy — simply did not develop.

But remorse — an affect — is absent. He feels no connection to the pain of his victim. Neglected and humiliated by his primary caretakers when he was young, this fifteen year old murderer is, literally, emotionally retarded. The part of his brain which would have allowed him to feel connected to other human beings — empathy — simply did not develop. He has affective blindness. Just as the retarded child

lacks the capacity to understand abstract cognitive concepts, this young murderer lacks the capacity to be connected to other human beings in a healthy way. Experience, or rather lack of critical experiences, resulted in this affective blindness — this emotional retardation.

Very narrow windows — critical periods — exist during which specific sensory experience is required for optimal

organization and development of any brain area. Absent such experience and development, dysfunction is inevitable. When critical periods have been examined in great detail in non-human animals for the primary sensory modalities, similar use-dependent differentiation in development of the brain occurs for the rest of the central nervous system. Abnormal micro-environmental cues and atypical patterns of neural activity during critical and sensitive periods can result in malorganization and compromised function in other brain-mediated functions such as empathy, attachment and affect regulation. Some of the

most powerful clinical examples of this are related to lack of 'attachment' experiences early in life. The child who has been emotionally neglected or abandoned early in life will exhibit attachment problems which are persistently resistant to any 'replacement' experiences including therapy. Examples of this include feral children, Spitz's orphans, the Romanian orphans and, sadly, the remorseless, violent child.

Lack of appropriate affective experience early in life and the resulting malorganization of attachment capabilities plays a major role in the current epidemic of senseless violence in the United States today. So often, these acts are inhuman — throwing a six year old boy out of a window because he refused to steal candy for you — planning, stalking, kidnapping and torturing someone who 'disrespected' you — hunting any homeless man to set on fire. *Senseless* — or are they senseless acts? The ability to feel remorse, to be empathetic, to be sympathetic — are all experience-based capabilities. If a child feels no emotional attachment to any human being, then one cannot expect any more remorse from him after killing a human than one would expect from someone who ran over a squirrel. These behaviors are not senseless, they are not beyond our understanding. They arise from children reflecting the world in which they have been raised.

The child who has been emotionally neglected or abandoned early in life will exhibit attachment problems which are persistently resistant to any 'replacement' experiences including therapy.

It is important to emphasize that the majority of individuals who are emotionally neglected in childhood do not grow into violent individuals. These victims carry their scars in other ways, usually in a profound emptiness, or in emotionally destructive relationships, moving through life disconnected from others and robbed of some of their humanity. The effects of emotional neglect in childhood predispose to

violence by decreasing the strength of the sub-cortical and cortical impulse-modulating capacity and by decreasing the value of other humans due to an incapacity to empathize or sympathize with them. This decreased value of humans means that there is a much lower threshold for the unattached person to act in an anti-social fashion to gratify their impulses...

Ideology of Aggression

There are multiple pathways to engaging in violent behavior. Some are defensive, some are predatory, some are impulsive. All of these pathways, however, are facilitated by the individual practitioner's belief system. The majority of neglected children never become violent. The majority of traumatized children never become violent. Even the majority of traumatized and neglected children do not become remorselessly violent. Belief systems,

in the final analysis, are the major contributors to violence. Racism, sexism, misogyny, children as property, idealization of violent "heroes", cultural tolerance of child maltreatment, tribalism, jingoism, nationalism — all unleash, facilitate, encourage, and nurture violent individuals. Without these facilitating belief systems and modeling, neglected and abused children would carry their pain forward in less violent ways — as silent, scarred, adult members of the vast army one commentator has termed the "Children of the Secret".

Extreme violence of the most heinous sort (organized, systematic and remorseless) is conducted by individuals, groups of individuals, and by governments with the blessing of various belief systems (for God and Country). Indeed, the current

"Violence Prevention" initiatives are really not interested in preventing all violence. These programs are focused on random, unpredictable physical violence against 'us'. The pervasive community violence of the inner cities was of little concern to the public policy makers in government until it metastasized to other parts of our society. Widespread ignorance of the intimate relationships between cultural belief systems, childrearing practices and the development of violent behaviors will doom any attempts to truly understand, and prevent, violence.

Malignant Combination of Experiences

The most dangerous among us have come to be this way because of a malignant combination of experiences — lack of critical early life nurturing, chaotic and cognitively impoverished environments, pervasive physical threat, persisting fear

and, finally, watching the strongest, most violent in the home get what he wants, and seeing the same aggressive violent use of power idealized on television and at the movies. These violent offenders have been incubated in terror, waiting to be old enough to get "one of those guns", waiting to be the one who controls, the one who takes, the one who hits, the one who can "make the fear, not take the

Our society is creating violent children and youth at a rate far faster than we could ever treat, rehabilitate or even lock away.

fear." Nowhere is this predatory food chain more evident than in juvenile justice settings where, too often, the youth is either victim or predator — with no third option. Due to clear socio-cultural devolution in some segments of our communities, there are more and more undersocialized, traumatized children. These children get little cognitive stimulation — the public schools are falling apart; their lives are devoid of emotional contact — mom is a child herself and pregnant again; no predictability, structure or nurturing can be found out of the home — the community has dis-

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solved...

Public Policy Implications

Ultimate solution to the problems of violence — whether from the remorseless predator or the reactive, impulsive youth — is primary prevention. Our society is creating violent children and youth at a rate far faster than we could ever treat, rehabilitate or even lock away. No single intervention strategy will solve these heterogeneous problems. No set of intervention strategies will solve these transgenerational problems. In order to solve the problems of violence, *we need to transform our culture.*

We need to change our childrearing practices, we need to change the malignant and destructive view that children are the property of their biological parents. Human beings evolved not as individuals, but as communities. Despite Western conceptualizations, the smallest functional biological unit of humankind is not the individual — it is the clan. No individual, no single parent-child dyad, no nuclear family could survive alone. We survived and

evolved as clans — interdependent — socially, emotionally and biologically. Children belong to the community, they are entrusted to parents. American society, and its communities, have failed parents and children alike. We have not provided parents with the information and resources to optimize their children's potential and, when parents fail, we act too late and with impotence to protect and care for maltreated children.

The true potential of the human brain is rarely, if ever, realized. The major expressor of that potential is experience. The most critical and formative experiences are those provided to the developing child in the incubator of the family and, optimally, by a vital, invested community. Past and present, our society dramatically undervalues its young, despite the claims that 'we love children'.

It is in the nature of humankind to be violent, but it may not be the nature of humankind. Without major transformation of our culture, without putting action behind our 'love' of children, we may never learn the truth. ☉

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The Canadian Society for the Prevention of Cruelty to Children

The CSPCC is working to change those things in Canadian society that are making it difficult for parents to give their children the care they need to grow into healthy, confident, non-violent, loving adults.

In general we are working for:

- ◆ a shift from arbitrary male dominance to no-one's arbitrary dominance
- ◆ a shift from the essential beliefs of our society's consumer religion -- envy, selfishness and greed -- to trust, empathy and affection in a community-centred, sustainable society
- ◆ a shift from violence and sexism as the warp and woof of entertainment
- ◆ a shift from treating children as sinful or stupid to empathizing with them and fulfilling their expanding and particular needs

In particular we are working to:

- ◆ raise the status of parenting
- ◆ implement universal parenting education from kindergarten to grade eight
- ◆ encourage parents to make their children's emotional needs their highest priority during the critical first three years
- ◆ facilitate a positive birthing experience for every father, mother and baby
- ◆ promote extended breastfeeding with child-led weaning
- ◆ make it easier for parents to meet the emotional needs of each child by encouraging a minimum three year spacing between siblings
- ◆ increase awareness of the potential long term hazards of separations between children under three and their mothers.



Recognizing that the capacity to give and receive trust, affection and empathy is fundamental to being human.

Knowing that all of us suffer the consequences when children are raised in a way that makes them affectionless and violent, and;

Realizing that for the first time in History we have definite knowledge that these qualities are determined by the way a child is cared for in the very early years.

CREDO



WE BELIEVE THAT:

- The necessity that every new human being develop the capacity for trust, affection and empathy dictates that potential parents re-order their priorities with this in mind.
- Most parents are willing and able to provide their children with the necessary loving empathic care, given support from others, appropriate understanding of the task and the conviction of its absolute importance.
- It is unutterably cruel to permanently maim a human being by failing to provide this quality of care during the first three years of life.

THERE IS AN URGENCY THEREFORE TO:

- Re-evaluate all our institutions, traditions and beliefs from this perspective.
- Oppose and weaken all forces which undermine the desire or ability of parents to successfully carry out a task which ultimately affects us all.
- Support and strengthen all aspects of family and community life which assist parents to meet their obligation to each new member of the human race.