Empathizing with Daddy: Child Maltreatment and Generational Alcoholism: Are They One In the Same?

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Empathizing with Daddy:

Child Maltreatment and Generational Alcoholism:

Are They One in The Same?

By

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Project submitted in partial fulfillment of the requirements for the

Bachelor of Integrated Studies Degree
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Abstract

Everyone has “issues”. However, those “issues” can range from a numerous of things: self, family, work, mental, physical, or emotional (i.e “daddy issues” or “mommy issues”). According to the National Institute on Alcohol Abuse and Alcoholism, childhood exposure to trauma has been linked with alcohol dependence, suggesting that adverse childhood experiences contribute to this environmental risk.

For this paper, I plan to discuss child maltreatment and the effect it could or could not have on one throughout childhood, adolescence years, and adulthood. Also I’m addressing alcoholism, in which child maltreatment could possibly contribute a connection along with factors, such as domestic violence and development delay in offspring.

I’ve decided to include a personal experience, with having a recovering alcoholic as a parent, so that my reader(s) can see a connection between myself and this review; not one full of numbers or “according to’s”, as if “I” am just the messenger and could not relate. I want other students and readers to understand that everyone has history, and that everyone has “issues,” but to understand that at the end of the day, you are the author of your life’s story and master of your fate.
Acknowledgements

Daddy, This is not to embarrass you or to force you to confront anything. I chose this topic, so that I could receive a better understanding on the possible reason(s) why you’ve behaved the way you did- as a son, man and parent. I remember you telling me about the time you overheard your father and step mother discussing you. You overheard him venting to her, telling her how he was tired of taking you to school, which made you feel like a burden as a young man who was just wanting to receive a college education. A conversation in which caused you to give up on it, and in a sense, on yourself.

Well, I am your daughter, and I too for some reason feel like a burden on others, which caused me to inherit my mother’s “go-getter” mentality. Anyhow, I did not give up and have finished receiving my college education. What an amazing time to be black and female, right? Thank you for always making sure that I take care of myself, and that I fight for my education; never letting life or others win.
Background

As a little girl I was mesmerized by brown juice, I thought it had magical powers. I also was mesmerized by my father, and honestly thought he and the juice were in cahoots. Giving it the nickname the “BJ”, It seemed to always be around and available, wanting my daddy’s attention. I didn't understand their relationship, because when he’d have some he was so goofy, loud, affectionate, outgoing and full of laughter one moment. Other moments, he was the opposite of everything that made those around him enjoy his presence. Still loud, but there was thunder in his voice, thunder which scared my sisters and I, causing us to cling and huddle under the oldest sometimes. It was always quick like lightning, but so was his hand when he put it on the lady he was just hugging and kissing on. It was confusing for me, but me being the curious and kinesthetic learner that I am, I one day sought after what had my daddy wrapped around it’s finger.

I remember walking towards to the kitchen, first peeping my head around the corner making sure the coast was “mama free.” I proceeded to the kitchen counter, hopped onto it and opened the cabinet my father thought no one knew BJ was residing. I opened it and there was BJ, lemon juice and his other friend, who was silver in color, skinny and cold like metal. I shook the flask to see if anything was in it, and there was. I use to always see my dad, who seemed to think no one was watching, sip the lemon juice after drinking the flask. I assumed in order to make these powers consume me, that I had to follow suit. So I did. It was the worst tasting juice I’d ever had in my life. I was puzzled and not sure why this brown liquid didn't taste like apple juice. After all, it looked like apple juice. I took a few sips, just like my dad would and put it back exactly how I found it so that he wouldn't be suspicious of anyone drinking juice that didn't
belong to them. On the counter still taken aback with no feeling of powers but an upset stomach
and burning throat, I thought that if my confidant left a bad taste in my mouth, I wouldn’t want
to be around. Nonetheless, older and still just as curious, I’m still wanting to learn about and
fully understand factors and contributors that lead to alcoholism.

My three sisters and I grew up with a father who dealt with maltreatment as a child; grow
into adulthood as an alcoholic, hence my desire to get a better understanding of if child
maltreatment is a cause that leads to alcohol abuse. The questionable situation is this: Do
predisposed behaviors, maltreatment /abuse in childhood, lead to heavy alcohol use in some
adults? Is it generational? Both questions are debatable with data and personal analysis to
possibly make the question agreeable.
Child Abuse/ Maltreatment

According to the Center for Disease Control (CDC)(2008), child abuse is defined as “any act or series of acts of commission or omission by a parent or other caregiver (e.g., clergy, coach, teacher) that results in harm, potential for harm, or threat of harm to a child”. Differentiated terms of child abuse or “child neglect”, which is where a parental player fails to meet the basic needs of food, shelter, clothing and nutrition.

Lack of providing stable emotional, social, educational, and safety are acts of neglect as well. Child maltreatment/abuse refers simply to harm caused to children. Physical neglect or exploitation of children can range from mild to severe depending on the situation the child is facing. Mild experiences of child maltreatment carries examples such as teasing or verbally abusing a child. Where severe experiences of child maltreatment includes physical or sexual assault of a child. Child neglect can affect people throughout each stage of life: Childhood, adolescence, and adulthood. Indicators of maltreatment/neglect are mentioned in appendix 1.

Effects of Bodily Abuse/ Maltreatment In Each Stage of Life

Childhood

The development of a child’s brain; its cognitive, language, emotional decision making process are vital to child development. When a child experiences maltreatment, it can be harmful in all aspects of the body to brain development and other aspects such as the senses which are necessary for development. According to Gardner (1989), “Low-stimulation environments and inconsistent parenting (lack of rules, failure to monitor child, inconsistent punishment and reward), common in both physical neglect environments and orphanage setting, can lead to lower
A child’s regular and normal development could possibly be disturbed due to the deprivation the brain is enduring from maltreatment. During development, a child’s neurocognitive deficiencies can be affected due to early life events thus increasing those susceptible. Gardner’s (1989), a psychologist and journalist conducted a study over child psychology finding:

A cross-sectional study of 420 children indicated that those with a history of maltreatment performed more poorly in school than their non-maltreated counterparts. When controlling for age, maltreated children had lower grades and more suspensions, disciplinary referrals, and grade repetitions in elementary, junior high, and senior high school. Slow language development plays a role in behavioral difficulties across the lifespan, with approximately 70% of children with language impairments exhibiting comorbid behavior problems.

“Delays in expressive or receptive language are examples of consequences of neglect, specifically an expressive language delay is often associated with neglect.” (Sices et al., 2003) Kids who possess the inability to communicate effectively show the lack of necessary skills to work out or overcome conflicts. Psychiatric disorders such as attention-deficit/hyperactivity disorder, anxiety, depression, conduct disorder, and oppositional defiant disorder are highly associated with language impairment, and a combination of these problems may lead to poor
social functioning as individuals enter adulthood (Ruiz et al., 2003), (Weinstock & Whisman, 2006).

Impaired language can develop in children with a history of neglect without social interaction. If children are incapable of interacting with their peers due to the lack of interaction they are receiving at home, and then come to school only to receive an education that could be viewed as less than acceptable (particularly towards most inner city), they will not develop at the same rate as children who are not neglected and are receiving more opportunities to learn language and the correct ways to use language. Those interactions are important for normal language skill and cognitive development. (Ruiz et al., 2003)

Adolescent Years

It could be difficult to pinpoint where adolescent’s unacceptable behavior comes from the most. One could present that inner city teenagers have, technically speaking, the most setbacks and financial struggles which could resort in behavioral issues. One could also share that financially stable or wealthy teenagers could also struggle in terms of emotional instability which too could resort in acting out. According to (Stouthamer-Loeber, Loeber, Homish, & Wei, 2001, 941-955) “...Abused and neglected boys were more likely to report juvenile delinquency and violence than those without a history of child abuse and neglect”. Regardless of financial status or environment, adolescence if abused could show behavioral issues in some way. “Further, maltreated boys were five times and girls almost four times more likely to be arrested for a juvenile crime than their counterparts in the matched control group” (English, Widom, & Brandford, 2001).
Maltreatment occurring in childhood can lead teenagers to act out unconsciously. However, is different for each sex. While neglected females have been seen to have a lower rate of being involved in crimes than males, both were high. Research gave examples of mental health issues found in adolescent criminals that steamed from neglect to be problems such as posttraumatic stress, depression, anxiety, substance abuse, and behavior issues like misconduct.

There is evidence to suggest that childhood trauma and mental health problems are differentially linked to different types of aggression, that is, reactive and proactive aggression. Reactive aggression has been designated as a hostile response to a perceived threat, which is defensive, emotional, “warm-blooded,” and impulsive, whereas proactive aggression has been characterized as an aggressive act motivated by an external reward, which is instrumental, premeditated, and “cold-blooded,” with little evidence of autonomic arousal. (Raine et al., 2006; Steiner et al., 2011, 159-171)

As far as child maltreatment is concerned, terms such as proactive aggression is the association between an adolescent criminal and their behavior. It's believed that with a better understanding and a deeper study of mental health and the problems that make up mental health, different types of aggression could improve childhood/adolescence interventions. Those who study and understand can aid in violence and aggression prevention toward the maltreated later in their lives. Information found in appendix 2 is an example mention of Kentucky’s definition of abuse and neglect, along with citation rates.

Adulthood
Psychological studies regarding abuse rarely focus on adults. Most studies aim to start and keep focus on the childhood of the abused, but lack research and treatment options for older adults. However, it is understood that experiences that occur early on shape the development and behavioral outcome of the abused. Take for example, an adult with a mental illness, behavioral disorder, or substance abuse problem. Adults with these illnesses, or disorders, are more susceptible to depression or anxiety disorders that may lead to a life of alcoholism or drug abuse. While abuse or maltreatment may have occurred during childhood the effects of those actions have a life long effect (Talbot et al., 2009).

Talbot et al. (2009) found that childhood sexual abuse victims were at a higher risk for medical illness burden, worse physical function, and greater bodily pain as compared to people who’ve never been abused in a study in people aged 50+. Traumatic childhood events may carry greater and longer lasting consequences of one’s self esteem seeing how events that take place during childhood aid in shaping development in one’s life.

Along with child abuse leading a path to illnesses or substance abuse, abused victims often internalize disorders without even realizing that they have done so. They unconsciously carry these weights of low self esteem, self hatred, and guilt over something they had no control over. “In addition to negative self concept, there are other factors, specifically interpersonal dependence and Emotional reliance” (Beck, 1983; Blatt, 1974). “Dependent characteristics reflect extreme distress in relation to the loss or abandonment of a significant other, or a strong need for approval” (Zuroff, Blatt, Sanislow, Bondi, & Pilkonis, 1999). “Research has found an association between negative self concept, attributional style, childhood abuse, and psychopathology. Shame also was an important predictor of symptom level and mediated the
relationship between abuse-specific internal attributions and mental illness symptoms” (McCauley, et al., 1997).

Talbot, et al. (2009) also mentions the difference between high self esteem, low self esteem and the differences with older age. With high self esteem and signs of aging well, positive outcomes are of the obvious. Adults showing indicators of high self esteem have a healthier physical shape, cognition and functioning. With unsuccessful aging (i.e. low self-esteem) indicators are the opposite, the mental and physical signs are low and simply aren't as susceptible to successful aging.

**Dependence on Alcohol**

With information given from child abuse in every stage of life (early childhood, adolescence, and adulthood), it is possible to see a connection of contributing factors in the effects between child maltreatment and alcoholism. Alcohol is known to be “A legal, readily available and commonly used substance that contributes substantially to preventable morbidity and mortality worldwide.” (Elliott J.C., et al., 2014)

Alcoholism is a “common disorder associated with elevated health risks. Individuals identifying with this type of abuse are at risk for persistent alcohol dependence among those who’ve experienced this disorder among public health importance.” (Hasin., et al., 2002. 375) Those who come from a house of alcoholism can be effected by the disorder which can possibly cause them to take on a habit inherited from those before them, thus not only causing them to become alcoholics, but have a greater risk of developing health conditions their parent(s) possibly faced.
(Rehm et al., 2010a, 817) listed and discussed in further detail conditions in which alcohol can contribute certain diseases and injuries such as infectious diseases, cancers, neuropsychiatric disease, liver and pancreas disease, cardiovascular disease, social harm, and unintentional and intentional injuries. Infectious diseases are caused by microorganisms, such as viruses or bacteria, that can be spread indirectly or directly from one person to the next. Alcohol causes there to be a heightened risk for infectious diseases due to, “the pathways through which alcohol increases risk for these diseases is via the immune system, which is adversely affected by alcohol consumption, especially heavy drinking.” (Rehm et al., 2009b).

Social factors are seen to have an effect on alcohol consumption. With people who are alcohol dependent, more of stigmatization or found place of destitute is brought upon, such as it is with a virus like HIV. Usually when a substance dependence, such as alcohol is brought up, it and HIV are not intertwined. However, It is common knowledge that exchanging bodily fluids is how the HIV virus is spread. So what else could establish a connection between heavy/risky drinking and unsafe sex? Cognition and behavior are negatively impacted by the consumption of alcohol which causes impaired decision making, such as unsafe sex and spreading infectious diseases. One may find it interesting to see a correlation between the two, and how heavy drinking can lead transmission of such infections.

With cancer, “the molecular and biochemical mechanisms by which chronic alcohol consumption leads to the development of cancers.” (Boffetta and Hashibe, 2006, 149) Acetaldehyde (a colorless chemical liquid) damages the DNA and proteins, while generating
reactive species that also damage DNA proteins, and lipids through oxidation. This damage impairs the ability to break down nutrients that has a connection to cancers.

Neuropsychiatric Disorders “carry the greatest impact for alcohol dependence”, though alcohol has been associated with many mental disorders.”(Kessler et al., 1997, 313) It was difficult to read and find a connection between which specific disorders are directly related to alcohol consumption. The fact remain is that if someone with epilepsy meets the criteria for an alcoholic, there is some sort of relationship between the two.

Cardiovascular disease is a broad scope disease comprised of several different conditions all of which are negatively impacted by alcohol consumption. The amount of alcohol consumption can differ based on the different levels of impact on the body. When an excessive amount of alcohol is consumed, it causes an elevation of fats in the blood to occur. Examples include lead to high blood pressure, heart failure, and weight gain (due to consuming too many calories. Heavy drinking places individuals at a greater risk for strokes, cardiac arrest, and cardiomyopathy because. “...the effects of alcohol consumption on cardiovascular disease are detrimental in all societies with large proportions of heavy drinking occasions…” (Rehm et al., 2003a).

In addition to studies conducted for medical research, research has also been conducted to examine the plethora of other factors of life that can be singley impacted by alcohol use/abuse. Results as to why alcoholism can not be the most beneficial for those consuming, more emotional/mental stressors seen between families can too result in events that could be harmful
to one’s well being. According to Current Reviews (2012), life factors have the capability to act as reasons as to why consumption of alcohol becomes the end result from many life occurrences:

- **General Life Stressors**
  - Divorce/break up
  - Job loss
  - Changing jobs or moving
  - Problems at work or school
  - Trouble with neighbors
  - Family member in poor health

- **Fateful/Catastrophic**
  - September 11, 2001 attacks
  - Other terrorist attacks
  - Fires, floods, earthquakes, hurricanes, and other natural disasters
  - Nuclear disasters

- **Child Maltreatment**
  - Emotional abuse
  - Emotional neglect
  - Physical abuse
  - Physical neglect
  - Sexual Abuse

- **Minority Stress**
  - Racial/ethnic minority
○ Sexual minority

○ Being female (workplace, school, etc.)

Aside from stressors/ situations that contribute to the act of child maltreatment, alcohol abuse and alcohol addiction can play a role in the act as well. Alcohol abuse and alcohol addiction are not the same. Over time alcoholics can over abuse alcohol, however, the difference in abuse and addiction is the degree in which the addiction is abused.

Alcoholics build up a tolerance overtime and as that tolerance is built higher and higher, the necessity, in their minds to drink, becomes bigger because the space (tolerance) to do so has increased. That doesn’t exclude drinking to conceal or forget about issues going on at home, or personally as, “Alcohol abusers are not necessarily addicted to alcohol. Abusers are typically heavy drinkers who continue drinking regardless of the results.

Abusers of alcohol may not drink on a consistent basis” (Patterson, 2015) It’s important to know the differences so that both titles and with what comes with them can be handled effectively if ever in a situation that needed intervening. “Alcohol dependence is a common and debilitating disorder that can be both genetic and environmental influences. Alcoholism has a 50% chance of being inherited, so environmental factors both shared or not can contribute to being a risk for individuals who deal with the disorder in some shape or form.” (Elliott, J. C. et al., 2014. 842-850) Not only does alcoholism play a detrimental role in the consumer's/addict’s life and overall well being, it has the potential of being passed onto offspring to inherit.
Factors of Alcohol

Family Violence

Generational alcoholism is a form of abuse that is passed down from generation to generation. Alcoholism is more likely to be generational in a home where heavy alcohol abuse is witnessed than in a home where alcohol it is not. Alcohol often is a capability to act as a contributing factor to domestic/family violence. Some believe that to be true whereas some believe it to be consumer’s inability to control their temper.

With less studying and research, behavioral problems are equally problematic. Those issues can reveal incidences and emotional difficulties among adolescents apart of alcohol abusing families (McGaha & Leoni, 1995). Children of alcoholics have difficulties processing, communicating and evaluating their own emotions and behavior, whereas non alcoholics don’t struggle as much. “Genetic studies have found an increased incidence of familial alcoholism among first degree relatives of alcoholics” (Pollock, Schneider, Gabrielli, & Goodwin, 1987.668-673).

Family violence can hold the capability of re-occurring with alcoholism. Children of alcoholics can possibly pick up the some of the same behaviors as a drinking parent posses. Siblings, in particular, already mock certain behavior they see in one another, especially with younger siblings mimicking the older. Abusive behavior children see parents show casing carries the same outcome between violent parents.

The previously mentioned does not exclude other forms of “brother-sister, brother-brother, and sister-sister” type of sibling relationships, for biological makeup isn't the
only type of relationship that exist/ or are acknowledged. Half siblings, step-siblings, adoptive siblings, foster siblings, and “fictive” siblings (who are connected by an emotional bond i.e people who have a deep rooted and sentimental friendship, or people who have grown up together due to parents being in a long relationship) can also act a part of mimicking behavior from parents/parental figures. DNA makeup does not act as the only connection people have to consider them family. Again, regardless of kinship (or lack thereof) children pick up behavior (i.e violent and substance abuse) from how they see their parents behave.

Psychological neglect is defined as, according to (Whipple & Finton, 1995) as “affecting, or arising in the mind; related to the mental and emotional state of a person.” Violent mistreatment of the mental or emotional state of a person in high doses can be diagnosed as maltreatment in not only romantic relationships, but sibling relationships as well.” Mistreatment between siblings can show examples of “... abusive interactions involving words and actions that convey contempt and degradation which strip the victim of a sense of self worth” (Whipple & Finton, 1995, 21-36). Harm occurs when one sibling gains control of the relationship through the utilization of fear and by reducing the other’s self-esteem. This type of maltreatment usually happens with older siblings who feel a sense of overpowerment during altercations between a young sibling and themselves. Individuals who experience maltreatment by siblings endure both immediate and long-term consequences, and those consequences could conclude along with bad habits, behavior disorders, and domestic violent relationships (Whipple & Finton, 1995).

In this particular area frequently denotes the connection between parent-child conflict and sibling clashings. The behavior patterns children display during altercations with parents are often made widespread with siblings (Noller, 2005). In parent-child relationships that tend to be
hostile or over dominating are likely to share moments of aggression and antagonizing between siblings (Brody, 1998).

Stemming from a learning theory perspective, scholars contend that children who observe negative exchanges in the family begin to mimic such behaviors in their own relationship. Experiencing child maltreatment and witnessing abuse are associated with a host of negative consequences, including emotional and mood disorders, conflicted relationships, and aggression (Akers 1973; Hoffman and Edwards 2004; Hoffman et al. 2005; Carlson 2000; Edleson 1999a; Hosser et al. 2007).

Between siblings, two theories hold useful suggestions in the interaction, where for better understanding are typically referred. Help into understanding violence amongst siblings came to light when (Hoffman, 2005) suggested the use of feminist theory and social learning theory to help explain the occurrence of sibling violence. Hoffman’s feminist perspective acted as a way of better understanding discussing the level of authority set in place in many households. Where those who displays masculinity are usually seen as the one in control. A cultural acceptance of using force as a way to maintain order and control during conflicts, as seen fit in a forceful manner, is what acts environment for family violence. The theory of feminist is strengthen when the comparison of younger vs. older sibling physical strength, responsibility, and knowledge is mentioned. With the the younger or female sibling at a comparison with the older or male, the likelihood of sibling victimization is possess a greater chance (Hoffman and Edwards. 2004; Hoffman et al., 2005).
The learning theory applied to sibling violence in the sense that “children who observe or experience such negative exchanges learn behavior to imitate in similar situations, as well as rationales and motivations for using violence” (Hoffman et al., 2005). Siblings who perpetrate may have learned the methods and rewards of aggressive behavior from witnessing or being subject to violence in the home. This theory highlights the importance of hearing or seeing inter-parental violence and experiencing maltreatment by parents in explaining sibling aggression. As such, learning theory proposes that children who experience other forms of family violence are more likely to report sibling victimization (Hoffman & Edwards, 2004; Hoffman et al., 2005).

Researchers find dependency among the quality of the relationship between parental figures and the quality of sibling relationships, as well as that witnessing arguments between parents increased levels of sibling violence (Hoffman et al., 2005). These findings support an earlier study by Jenkins (1992) in which hostile and aggressive sibling relationships were, in part, the result of distressed marriages. People who are on the end of child maltreatment where they experience abuse from a parent, parental figure or role model risk, or experience, emotional disorders, negative relationships, and aggressiveness. Effects such as parent-child abuse could be comparable to the one of sibling abuse. “Children who are victims of one form of family abuse are also likely to be victims of another form of abuse.” (Edleson, 1999b. 134; Mullen et al., 1996, 7). Therefore, it could truly be genetics that has a cause of an alcoholics offspring to pick up the behaviors and/or patterns of their parents.
Domestic Violence

Most often, Domestic violence has multiple negative impacts on children which include, a toll taken on a child, can manipulate and confuse a mind not fully developed with what is normal and appropriate behavior when dealing with a romantic partner, along with having possible long lasting emotional effects. Two popular terms used in relationship violence are domestic violence and intimate partner violence, which are interchangeably in the literature.

This paper will use domestic violence in place of intimate partner violence. Domestic violence is the original term used for Intimate partner violence. Domestic violence or “IPV” is any physical, sexual and/or psychological harm towards a intimate partner or spouse. Both males and females can act as an abusive partner; however, males are primarily thought of as the abuser. Domestic violence should not be recognized to only come out of heterosexual relationships, but from homosexual relationships as well.

In today’s society, the roles as head of household, masculinity, and the assumption of when power and control are needed to be assigned, it would be men who are appointed to the position have influence on domestic violence cases. With domestic violence or assault on a female, regardless of romantic status, the aggressor may feel that violence is legitimate way or “last resort” to revert the moment(s) of powerless over their partner.

Domestic violence examples can also be found in the media. For example, in the movie “Enough” Singer/Dancer/Actress Jennifer “J.Lo” Lopez portrayed the role of a woman who was thought to find her prince charming in an handsome and wealthy man, but whom quickly found herself in a violent filled marriage. It is claimed that the status of income creates larger rifts in
households if it is one that is low. “Some researchers suggest that sociodemographic factors influence violence through the greater stress or social isolation experienced by individuals of lower socioeconomic status or non-White ethnicity.” (Gelles, 1993. 31; Lockhart, 1987. 603). This movie portrayed an example of how the financial status nor race doesn’t always act as the main role or reason as to why relationships turn violent, but more because of the batterer.

Alcohol’s involvement and the impact gender roles can have variations of importance in the types of domestic violence. What would be distinguished are two types of male violence in their research. Severe violence is characterized by frequent, high-severity male-to-female violence, and is associated with injury, psychological domination and intimidation of the partner. Less severe violence is characterized by less frequent actions of pushing, slapping and shoving and often involves both male-to-female and female-to- male violence. But as previously mentioned, lack of intimation from the abused partner in domestic violence acts as a green light for abuser to have an increased necessity for the need of power and control. (Halford, et al. 2010)

A study dialogue between Halford, Farrugia, Lizzio, and Wilson (2012) with discussants from South America, Europe, and Africa discussed couple violence. They commented that money and unresolved issues acted as factors for this specific type of violence. (Graham et al., 2011). For the most part, discussion was about provoking, and how both parties should take some type of responsibility for the male to lash out on the female. Participants felt it was both parties responsibility to maintain peace in the relationship, and what led to Intimate Partner Relationship once the tolerance level was no longer respected should be put on both persons in the relationship.
Alcohol was not determined be the primary cause for IPV, but did contribute, how bad the moments of occurrence was. “Alcohol affects one’s mind and body reducing inhibition, increasing boisterous behavior, and reducing cognitive skills and control of body movements, thus increasing the risk of violence being life-threatening” (Holmila M, et al., 2009, 127). From (Murphy, 2002), Appendix 3 features a chart breaking down in depth the idea of the use of masculinity to obtain emotional/mental power control.

What could constitute as factors of alcohol’s contribution to negative behavior from an alcoholic, or towards others? Environmental factors could act as such. With the mentioning of traumatizing characteristics of violence and trauma among battered women, those characteristics would be examined and emphasized. The detrimental effects of children witnessing domestic violence in households were too with multiple findings. (Herman, 1992, a,b). According to (Jaffe and Wilson, 1990, 130), “One-third of the children who observes domestic violence exhibit significant social and/or emotional problems, including psychosomatic disorders, stuttering, anxiety and fears, sleep disruption, excessive crying and school problems.” Furthermore, (Gelles & Straus, 1990, 29) stated “Boys who witness abuse of their mother by their father are more likely to inflict severe violence as adults. Data suggest that girls who witness maternal abuse may tolerate abuse as adults more than girls who do not.”

Another study conducted by (Bueso-Izquierdo et al. 2016) concluded that domestic violence committers have a different brain activity than other people who commit crimes. The study by the University of the Granada in Spain, as well as an excerpt from a journalist who viewed and posted the study, compared the brain activity of individuals who committed domestic violence. The University of Granada conducted a study by (Izquierdo, N. B., et al, 2016) where a
viewing and comparison of the brain activity of people who committed domestic violence with brain activity from criminals:

Researchers compared the brain activity of 21 perpetrators of IPV — specifically, men who had been convicted for a crime of violence against women — with that of 20 other criminals. They ran functional MRI on the participants' brains while showing them three types of images: some that depicted IPV, some that depicted general violence and some that depicted neutral imagery. Participants were instructed to sustain the emotion elicited by the pictures displayed during IPV, GV and N images. After the functional imaging session, participant involvement was confirmed by asking the participants to rate images on three emotional components using the Self-Assessment Manikins (SAM) scales, with valence: from happy (9) to unhappy (1), arousal: from excited (9) to calm (1), and dominance: from controlled (1) to in control (9)... Criminals showed activation in the superior frontal gyrus. Batterers, on the other hand, showed additional activation in the orbitofrontal cortex and the posterior cingulate cortex, and significant deactivation in the anterior cingulate cortex and the insula. Between-group differences: Batterers, relative to criminals, demonstrated significantly higher activation of the middle prefrontal cortex, and the anterior and posterior cingulate cortex. In sum, our results have shown that batterers have different brain functioning, as compared to other criminals, when they observe both intimate partner violence and general violence images as compared to neutral images. Future studies should replicate our results in batterers who have committed more severe offenses.
With social factors being large reasons in many cultures to domestic violence happening in the first place, children in cases where violence is apart of their household, grow up seeing violence in the household. Those specific environment leave children growing into adults who possess higher chances of committing violent related crimes, or becoming victims of violent acts.

**Possible Alcohol Contributors**

**Culture**

Some cultures and different countries may not view alcoholism as a detrimental factor in the demise of the current generation and the generation to follow. Many countries and cultures see it as a way of passage, or manhood.

In China, a rites of passage was viewing drinking as a social obligation. The “bottoms-up” culture of persuading and sometimes forcing people (esp. men) to drink. When the Chinese make a toast to someone, it’s often hoped the person would drink it so that his hospitality is delivered. If that person declines to drink, the host may feel disrespected in a sense. There’s simply an association between alcohol (i.e strong alcohol) and masculinity; the stronger the liquor you consume AND handle the more of a man you are.

However in the United States, Alcohol is apart of the college, sport, and celebration culture. At many universities across the US, alcohol has become a social norm and sort of the “introducer” or “college 101” for a freshman college experience. The prevalence of drinking behavior among college populations has remained stable across two decades. (Wechsler & Nelson, 2008; Wechsler & Wuethrich, 2002) There are multiple motives behind students’
indulging in alcohol. Ranging from comfortability to conformity in social settings. Individuals who drink in order to conform to the environment and peers around them are typically not frequent or heavy drinkers (Cooper, 1995). Below are two motive examples from Cooper:

1. The third motive is enhancement, which is related to positive reinforcement and occurs when individuals use alcohol to enhance their positive mood or well-being. Students who drink in order to enhance a good time report higher quantities of alcohol consumption than students who endorse coping or conforming motives, and are also more likely to report binge drinking (Cooper et al, 1995, 990; Williams and Clark, 1998, 371).

2. The final motive is drinking for social reasons, which is also related to positive reinforcement… Social drinkers are more comparable to enhancement drinkers than to copers or conformers and thus are likely to be heavy drinkers (Cooper et al, 1995, 990).

Participating in social drinking seems to have became a ritual for students, as it could be seen as a normal part of higher learning. As far as “initiation” goes, some students have heard rumors and stereotypes about the college experience prior to stepping on campus. Furthermore, Movies have the ability to promote the college experience as one with an abundant amount of house parties, fests, concerts, fraternity/sorority parties, and “kickbacks” (a more relaxed version of a house party where there’s usually a smaller amount of people present drinking, smoking, and hanging out with one another). Similar activities are done as foreign countries use alcohol as a way of interacting, showing appreciation, and to test one’s bodily strength.
Movies such as “Neighbors”, “Pitch Perfect”, and “Easy A” can act as a glorification to the “wild side” of attending a university. Some movies fail to mention that repeated behavior of binge drinking usually leaves unfocused students with an uncompleted college education but also the possibility leave a student as an alcoholic, addict, parent, or drop out.

Likewise sports could be viewed to glorify alcohol because of promotion and advertising. Football, in particular tend to view it the most. From universities football teams to the National Football League, alcohol in some manner could promote products through the league. BudWeiser uses NFL games to capitalize on viewers. Alcohol companies such as Bud Light use visuals that appeal to young people. With colorful drinks, themes catering to a specific demographic, and with the use of popular/catchy songs that could be used to draw in customers of all ages and backgrounds. However, all alcohol-related media coverage does not necessarily leave a desiring effect on all young people, and people with minds of their own determine rather they want to purchase products or not. Americans have traditions known to surround sports that carries alcohol as the main stereotypical image of “super fan.”

Tailgating is known as a social event that's held on or around a vehicle. These social events are usually held in stadium parking lots for multiple sporting events involving barbecuing, betting/gambling, pep rallying, dressing up, and alcohol. Some activities aren’t done in public or at all depending on the location (i.e a college university’s campus vs. a sports stadium). This sporting event acts as a social experience that brings many people together to celebrate two teams playing against each other. Alcoholic beverages are usually the center point for the rowdy behavior from fans. Behavior isn’t always necessarily bad, it simply depends on the person
consuming the alcoholic beverage. Alcohol is not always present, seeing how places like churches throw tailgating parties.

Studies have found that alcohol advertising exposure is related to more positive attitudes toward drinking, and numerous studies have shown that exposure to alcohol advertising is linked to greater consumption (Ellickson, Collins, Hambarsoomians, & McCaffrey, 2005; Snyder, Milici, Slater, Sun, & Strizhakova, 2006). A study conducted by Collins and colleagues (2007), found that higher levels of exposure to alcohol advertising among young adolescents was associated with higher levels of drinking intentions and beer consumption. Several other studies have found that alcohol advertising is linked to both early initiation of drinking and increased alcohol consumption among youth.

Weddings are another traditional moment that believes in using alcohol to celebrate a personal moments in one’s life. Champagne is often known as liquor that marks celebrations, such as engagements. During large scale sporting events such as Championships, basketball, football, and soccer players for example pour champagne on teammates after winning games. Even race car drivers do the same. Champagne in these cases are usually consumed, but wasted as more of an symbolic action.

Most alcohol has a meaning or is stapled to a group of friends for different reasons. Most alcohol is used as an example, however it is left up to the consumer to measure their tolerance level, and not use the meaning or desire to overindulge create issues.
Age

Technically, young people are considered naive drinkers. From the intolerance for alcohol to experience to an overly high motivation to experiment. A risk is set upon young people who have put themselves at such including drink driving crashes, assault, property damage, recreational events, unwanted pregnancies, and sexually transmitted diseases. (e.g., U.S. Department of Health and Human Services, 1997). (Velleman, 2009) claims that develop attitudes and behaviors towards alcohol and drinking for multiple sources. These sources cannot be limited to one person or environment. Those who develop habits, or simply start engaging in drinking at an early age seem to have a higher chance of developing issues, or addictions with alcohol later in life.

Regardless of class standing, those around us are found to play the most robust role in alcohol decision making, while in college. (Borsari & Carey, 2001; Husson et. al, 2001; Wood et. al, 2001). While in an environment where time is spent a span of four or more years, people make the transition from adolescence to adulthood.

Time spent around alcohol and heavy drinking friends and peers leaves an association with personal alcohol consumption. (Schulenberg et al., 1996). Alcohol association often develops from events and gatherings in which a person could be provoked. This could become a trend within a community, especially one with young people that constantly, that will grow for many individuals surrounded by close friends, and peers who all engage in a particular activity. (Martin & Hoffman, 1993; Werner, Walker, & Greene, 1996).
Early initiation drinking by youth has serious consequences. Studies show that individuals who begin drinking before the age of 15 are four times more likely than those who abstain until they are 21 years old to become dependent (Grant & Dawson, 1997; Hingson, Heeren, & Winter, 2006). Less affluent minority youth may be especially at increased risk for alcohol-related problems, such as homicide.

**Attitudes/values** (as related to gender specific attitudes)

Some would believe that the place a person comes from could shape the attitude they have towards the attitude and consumption regarding alcohol. Bandura’s social learning theory predicts that individuals conform to behaviors that they believe will earn them high levels of peer status (Bandura, 1973). The theory of social identity maintains the idea that individuals adopt those behaviors that are central to the social identity of the group they feel the most part of (Kobus, 2003). While young females reflect higher popularity by drinking in small quantities, males optimize their relative social status by conforming to peer group norms in both drinking frequency and times getting drunk (Johnston et al., 2009).

Studies with designs shown over a long length of time discovered that similarities in alcohol use were because of individuals choosing to befriend others who resemble, in some cases, themselves in looks and personality. Also what determined that were because of processes in person to person dyads. (Aloise-Young et al, 1996; Urberg et al, 1997).

Apart from gender differences in alcohol metabolism, alcohol does not appear to play as a central role in facilitating interpersonal relationships for women as it does for men (Marshall et al., 1983). Among men, drinking together is often a shared activity used to cultivate friendships,
foster intimacy, and engender closeness and support. By contrast, because women’s everyday interactions with friends tend to be more supportive and intimate than men’s, women may rely less on alcohol consumption for these purposes (Borsari & Carey, 2006; Rabow & Duncan-Schill, 1995).

Biological gender makeup show differences that have shown the existence of alcohol effects, based on sex, that take differently on the body. Because of a female's lower amount of water content per body, where both male and female consume the same amount, females are still lead to have a higher blood alcohol level (Mumenthaler et al. 1999; Ramchandani, Bosron & Li 2001). Mentioning of metabolism, gender-differences in pharmacokinetics of alcoholism, and gender-related effect of alcoholism on brain volumes were suggested as biological reasons for females being more vulnerable towards the effects of alcohol. The differences of effects were also related to age. (Lieber 2000; Baraona et al. 2001; Hommer et al. 2001; Parlesak et al. 2002).

Psychological studies looking at women’s and men’s needs, reasons and motivations in relation to drinking have brought forward some elements of the mechanisms. Social studies have also pointed out the gender difference in drinking control. It has been suggested that men’s drinking control is more derived from sources other than what it seems to be. Women are suggested to act as the opposite; less likely to go on moments of bingeing, making males prone to binge in situations where external control is invalid and outside of normal control (Burrows & Nettleton 1995).
Race

Social and cultural factors could explain disparities in alcohol. Research has shifted the focus of accurluration influences, disadvantages of economic and social, as well as the prediction of alcohol problems. Particularly, people of hispanic race have been identified as a risk factor for alcohol dependence. Whereas, being compared to Mexican Americans, there isn’t as much of a risk (Alegria et al. 2008; Caetano et al. 2009). Social disadvantages, and racial stigmas could also contribute to differences in alcohol issues and/or addictions for Hispanics and African Americans. Chae et al. (2008), reported that there was a higher risk for alcohol related issues for individuals who reported unfair treatment as well as people who identified as people of color whom experienced racial/ethnic discrimination.

Issues with a lack of treatment could also result in higher reported cases of alcoholism in certain ethnicities. Jacobson et al., (2007a, b) showed that when it came to disadvantages at the individual and neighborhood economic levels, a lower alcohol treatment completion was predicted for African Americans. Also mentioning that factors such as disparities could too act as such at a neighborhood level. Alcohol companies, just as much as tobacco, could try to focus in on communities as targeted consumers, and low income urban areas in the United States experience the high density of alcohol outlets compared to white upper class communities.

Along with higher density of alcohol outlets have been predicted, but alcohol related violence and morbidity, assault, STI’s, and liver issues (Gruenewald et al. 2006; McKinney et al. 2009; Theall et al. 2009). With recent advances in alcohol research, our understanding of issues of consumption and addiction are coming to a better understanding among United States ethnic
groups. However, African Americans, Native Americans, and Hispanics could be viewed to have an unbalanced impact with drinking as compared to other ethnic groups (Chartier et al. 2009). The development of alcohol-related problems could be viewed as complex events with more causes than one.

**Emotional Aspect of dealing with Alcoholism**

**Children’s well-being**

There is suggestive research that shows that some children indeed suffer consequences that host negative barriers due to parental alcoholism. What also holds an heavy portion are the children who do the opposite, who function well, nor develop issues regarding alcohol. Resilient children shared characteristics that contributed to success in life and wellness. Resilient children hosted the ability to receiving positive attention from others, effective communication skills, average or above average intelligence, and a positive mental, emotional, and physical well being (National Institute on Alcohol Abuse and Alcoholism, 1990).

Studies that have compared children of alcoholics to kids who aren’t children of alcoholics found differences in psychosocial areas and cognitive performance. Cognitive functioning has been examined in cases of dealing and treating alcoholics due to the association with symptoms of alcohol. Ervin (1984) found that “Full IQ, performance (a measure of abstract and conceptual reasoning), and verbal scores were lower among a sample of children raised by alcoholic fathers than among children raised by nonalcoholic fathers” (362-365). Similar results for verbal and full IQ test were found as well in a study that compared children of educated
and/or stay at home alcoholics. Lower IQ, reading, verbal and arithmetic scores were found (Gabrielli, W.F., JR., 1983).

However, despite the scores, children who were dependents of alcoholics looked to give results of performing within normal IQ test ranges. Investigators noted in their study underestimation from both parties. The children who were the products of alcoholic parents underestimated their competence. Mothers who dealt with alcohol addictions underrated their children's abilities. Gabrielli (1983) mentioned that the parent-child perception of each other's abilities could have affected the children’s level of motivation, self esteem and future performance.

According to Millet, et al, and Knope, et al (1978, 1979), school-aged children who had parents dealing with alcohol related issues often dealt with issues themselves. School records indicated that children with alcoholic parents experienced academic problems. Those problems ranged from repeating grades to referrals to counselors or psychologist to the inability to finish high school. Cognitive deficits may have played a part in poor academic performance, lack of motivation and stress at home. Not only where the comparison of children of alcoholics and children who don't have alcoholic parents linked to disorders, but a host of other negative effects found in those who come from an alcoholic home.

The psychological effects of divorce, parental anxiety, affective disorders, weariness of new parental figures/parents partners, changes in family that aren't desirable, and situations were possible negative attributions that could’ve add to the negative effect of parental alcoholism/child's functioning (Schuckit & Moos, 1978, 1982).
However, it's possible for children who grow up in households with parents who are heavy drinkers to not only be more likely to become a heavy drinker themselves, but to abstain for any alcohol beverage all together (Harburg et al. 1982). A study from (Segrin, C., & Menees, M. M., 1996) found the opposite from offspring of alcoholics. Different coping styles of dealing with the mental effects of coming from an alcoholic where shared.

The findings on differences between those adults who are impaired and those who lead well-adjusted lives can be divided into four categories: (1) characteristics of the alcoholism, (2) characteristics of the individual child, (3) characteristics of the home environment, and (4) the importance of other nurturers. These four categories include both risk factors, such as severe parental alcoholism and neglect, and protective factors, such as individual talents and the availability of nurturers other than the alcoholic parent, as described below. Characteristics of parental alcoholism that have been related to impairment in adult offspring include severity (5), number of alcoholic parents, and psychopathology among adults (e.g., 6). Characteristics unique to individual children of alcoholic parents that have been investigated include birth order and special childhood talents or abilities (e.g., 7). Investigation of the home environment covers a wide range of characteristics, such as marital conflict and family disharmony (e.g., 8-9); family cohesion, organization, and intellectual/cultural orientation (10); and family violence, including severe neglect, physical and sexual abuse of children, and violence between other family members (e.g., 11-12). Studies on the importance of nurturers other than the alcoholic parent have suggested that an emotionally available mother, for example, might compensate for some of the adverse influences of an alcoholic father (e.g., 13-14).
Emotional Aspect

EI (Emotional Intelligence), according to Emotional Intelligence (2017), is defined as the ability to identify and manage your own emotions and the emotions of others. EI has been seen to be significant in alcohol issues with adolescents and adults. It has been noted, firstly, that lacking Emotional Intelligence has been documented as a potential indicator of alcohol abuse. The University of New England in Australia conducted a study aiming at the predictions of one with low EI scores. What was predicted was that a the score of a person’s EI test predicted their possible issues with alcohol (among other possible drug intake) (Riley and Schutte, 2003). The reasons for those low scores correlated with poor coping strategies, and poor coping strategies possibly predicted the ability to turn into one with an addiction. Other main attributes of Emotional Intelligence like motivations or social skills acted as major mediators for the outcome of those with alcohol issues.

Forgiveness

The act of forgiveness is a situational coping mechanism that, if done honestly, reduces negative reactions that surround an offense through processes such as cognitive, emotional, and behavioral (Toussaint & Webb, 2005). “It is multidimensional construct that can extend to others, one’s self, God, society or culture, one’s family, and situations… It does not require retribution, restitution, reconciliation, or continued victim vulnerability, and preserves the right for offender accountability. Forgiveness is an internal process, and a personal choice that can occur regardless of interaction with the offender.” (Enright, Freedman, & Rique, 1998), (Hall &
Fincham, 2005), (Exline, Yali, & Lobel, 1999), (Sandage, Hill, & Vang, 2003), (DiBlasio & Proctor, 1993), (Thompson et al., 2005), (Rosenak & Harnden, 1992), (Wahking, 1992), (Enright et al., 1998). (Worthington, Sandage, & Berry, 2000) (Enright, 2001)

A study from (Griffin and Amodeo, 1998) featured psychosocial outcomes from sisters from families with (an) alcoholic parent(s). The study featured siblings whom were healthy as well as siblings who were impaired in some sort of fashion. All of which in the end found common ground with being aware of their parents drinking at a young age. As well as that their parents were drinking before the siblings became fully aware of it because all of the participants recalled early events in their lives that were related to drinking. The mentioning of this is to bring together research conclusions that withholding truth of alcoholism and forgiveness from affected close ones affect not only the abuser, but those around him or her.

Is Alcoholism Generational?

My studies have concluded, that when it comes to alcoholism, it is not generational in every case. Many children who are products of an alcoholic parent don’t develop dependence on the substance. Reasonings would have a bit to do with children not experiencing having a parent(s) who practiced poor parents, regardless of whatever substances they may have indulged in. Since children weren't subjected to these risky exposures their outcome, in some instances, could come out good (i.e avoid issues with alcohol). Having their relationship with an alcoholic parent(s) and their choice to not indulge act as a protective barrier. (Psychosocial Factors In Alcohol Use And Alcoholism. (n.d). Retrieved from https://pubs.niaaa.nih.gov/)
According to (Wolin, S.J, et al, 1980), it was estimated that certain emotional factors act as protection for children from taking substance abuse risk, parent-family connectedness and school connectedness. Apart of the mentioned risk, Appendix 4 acts a guide to better put together parent-child relationships requirements of self aid from both parties in order to receive healing and treatment for negative generational outcomes.

Firstly, regarding protective factors, “Children who experienced parent-family connectedness said they felt close to their mother or father or both, they perceived that either or both of their parents cared about them, they expressed satisfaction with their relationship with either or both of their parents, and they felt loved and wanted by family members. Secondly, School connectedness was experienced as a feeling that teachers treated students fairly and a feeling of being close to people at school and being part of one’s school. Other studies have found parental support to be protective, particularly in terms of children’s mental health” (Barrera et al., 1995).

In a study of more than 1,700 adolescents, those who received more emotional support from their parents were found to drink less; the parental support seemed to work by enabling these adolescents to cope better with life stresses, which prevented them from turning to heavy drinking (Wills and Cleary, 1996).
## Appendix 1

Physical and Behavioral Indicators of Child Abuse and Neglect, [PDF file]

<table>
<thead>
<tr>
<th>Physical and Behavioral Indicators of Child Abuse and Neglect</th>
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<tbody>
<tr>
<td><strong>Physical Indicators</strong></td>
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<tr>
<td>Unexplained bruises and welts:</td>
</tr>
<tr>
<td>• On face, lips, mouth</td>
</tr>
<tr>
<td>• On torso, back, buttocks, thighs</td>
</tr>
<tr>
<td>• In various stages of healing</td>
</tr>
<tr>
<td>• Cluster, forming regular patterns</td>
</tr>
<tr>
<td>• Reflecting shape of article used to inflict (electric cord, belt buckle)</td>
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<tr>
<td>• On several different surface areas</td>
</tr>
<tr>
<td>• Regularly upper or after absence, weekend or vacation</td>
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<tr>
<td>Unexplained burns:</td>
</tr>
<tr>
<td>• Cigar, cigarette burns, especially on soles, palms, back or buttocks</td>
</tr>
<tr>
<td>• Immersion burns (sock-like, glove-like doughnut shaped on buttocks or genitalia)</td>
</tr>
<tr>
<td>• Patterned like electric burns, iron, etc.</td>
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<tr>
<td>• Rope burns on arms, legs, neck or torso</td>
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<tr>
<td>Unexplained fractures:</td>
</tr>
<tr>
<td>• To skull, nose, facial structure</td>
</tr>
<tr>
<td>• In various stages of healing</td>
</tr>
<tr>
<td>• Multiple or spiral fractures</td>
</tr>
<tr>
<td>Unexplained laceration or abrasions:</td>
</tr>
<tr>
<td>• To mouth, lips, gums, eyes</td>
</tr>
<tr>
<td>• To external genitalia</td>
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<tr>
<td><strong>Physical Abuse</strong></td>
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<tr>
<td><strong>Physical Neglect</strong></td>
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<td><strong>Sexual Abuse</strong></td>
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<tr>
<td><strong>Emotional Maltreatment</strong></td>
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<td><strong>Behavioral Effects</strong></td>
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<td><strong>Emotionally Abusive Behavior</strong></td>
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Appendix 2

Definition of Child Abuse and Neglect, [PDF file]

Definitions of Child Abuse and Neglect
https://www.childwelfare.gov

Exceptions
Citation: Ann. Stat. § 38-2202
A parent legitimately practicing religious beliefs who does not provide specified medical treatment for a child because of religious beliefs shall not for that reason be considered a negligent parent. This exception shall not preclude a court from ordering medical treatment for the child.

Kentucky

Physical Abuse
Citation: Rev. Stat. § 600.020
'Abused or neglected child' means a child whose health or welfare is harmed or threatened with harm when his or her parent, guardian, or other person exercising custodial control or supervision:
- Infects or allows to be inflicted upon the child physical or emotional injury by other than accidental means
- Creates or allows to be created a risk of physical or emotional injury to the child by other than accidental means

'Physical injury' means substantial physical pain or any impairment of physical condition.

'Serious physical injury' means physical injury that creates a substantial risk of death or causes serious and prolonged disfigurement, prolonged impairment of health, or prolonged loss or impairment of the function of any bodily member or organ.

Neglect
Citation: Rev. Stat. § 600.020
The term 'abused or neglected child' includes a child whose health or welfare is harmed or threatened with harm when his or her parent, guardian, or other person exercising custodial control or supervision:
- Engages in a pattern of conduct that renders the parent incapable of caring for the immediate and ongoing needs of the child, including, but not limited to, parental incapacity due to alcohol and other drug abuse
- Continuously or repeatedly fails or refuses to provide essential parental care and protection for the child, considering the age of the child
- Does not provide the child with adequate care, supervision, food, clothing, shelter, education, or medical care necessary for the child's well-being
- Fails to make sufficient progress toward identified goals as set forth in the court-approved case plan to allow for the safe return of the child to the parent that results in the child remaining committed to the cabinet and remaining in foster care for 15 of the most recent 22 months

Sexual Abuse/Exploitation
Citation: Rev. Stat. § 600.020
The term 'abused or neglected child' includes a child whose health or welfare is harmed or threatened with harm when:
- His or her parent, guardian, or other person exercising custodial control or supervision:
  - Commits or allows to be committed an act of sexual abuse, sexual exploitation, or prostitution upon the child
  - Creates or allows to be created a risk that an act of sexual abuse, sexual exploitation, or prostitution will be committed upon the child
- A person age 21 or older commits or allows to be committed an act of sexual abuse, sexual exploitation, or prostitution upon a child younger than age 16.

'Sexual abuse' includes, but is not necessarily limited to, any contact or interactions in which the parent, guardian, person in a position of authority or special trust, or other person having custodial control or supervision of the child or responsibility for his or her welfare, uses or allows, permits, or encourages the use of the child for the purposes of sexual stimulation of the perpetrator or another person.

'Sexual exploitation' includes, but is not limited to, allowing, permitting, or encouraging the child to engage in prostitution or an act of obscene or pornographic photographing, filming, or depicting of a child.

Emotional Abuse
Citation: Rev. Stat. § 600.020
'Emotional injury' means an injury to the mental or psychological capacity or emotional stability of a child as evidenced by a substantial and observable impairment in the child's ability to function within a normal range of performance and behavior with due regard to his or her age, development, culture, and environment, as testified to by a qualified mental health professional.

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Appendix 3

"A New Power And Control Wheel”, 2002
Appendix 4

“Breaking the Intergenerational Cycle of Disadvantage”
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