

Caregivers Intend to Seriously Hurt the Child

Introduction

This is going to hurt me more than it hurts you. Have you ever heard that statement? That's an archaic phrase. Supposedly, that's what parents said to children before spanking them. The idea apparently was that the parent was acknowledging that the physical punishment was going to hurt the child, yet was necessary for the child to learn and behave, and...the whole business of physically punishing the child hurt the parent (emotionally). The message lying beneath this old-fashioned sentiment was a deep-seated intent to teach and guide a child. The purpose associated with the physical pain was to help the child develop his own internal moral and social controls. Whether you agree with physical punishment or not, you probably agree with the importance of the parental intent apparent in all parent-child interaction.

This is going to hurt you more than it does me. This states the intent associated with the safety threat addressed this month. The intention of the caregiver's behavior toward the child is to cause pain and suffering. There is no intent to teach, guide or discipline the child. Punishment is used in an uncaring manner, the purpose of which is about the caregiver's distorted needs only.

Intention

The essential issue in this safety threat that distinguishes it from other threats (for instance, being out of control) is intent. The caregiver does something specific that is expected to cause a child pain and suffering. There is no other reason for the nature and degree associated with the behavior than to hurt the child. The caregiver behavior is not impulsive or a reaction necessarily to something a child has done (as in "flying off the handle"). The caregiver's behavior is by design aimed to cause pain. Some caregivers exhibit pervasive aggressive, violent behavior

toward a child always with the intent of causing pain and suffering in virtually every parent-child exchange (e.g., constant slapping, punching, etc.).

Intention to hurt takes on another dimension when it is well planned: premeditation. Premeditation exists when caregivers employ specific methods, instruments or situations to bring about the desired results. Premeditated plans may but do not even have to be all that sophisticated. For instance, the use of a cigarette to burn a child is an example of premeditated behavior.

Displacement

If you are familiar with the concept of psychological defense mechanisms, you may recognize *displacement*. This refers to people who displace or shift their angry feelings on those less threatening. For instance, a person who has been treated particularly badly by his boss may come home and “displace” his unresolved anger on his wife. The idea is that the person displacing anger and aggression on another does so because he or she feels powerless to address his or her anger in a productive manner or with others who are perceived to be more powerful or intimidating. Typically, these more powerful entities are also seen as the source of the person’s problems.

Intentionally hurting a child can be associated with displacement. A caregiver may be filled with anger, bitterness and powerlessness. These deep, unresolved feelings may build up day in and day out so that the person becomes a walking time bomb. The result is lashing out at his child, displacing all the outrage on the child. The caregiver’s pain and hurt is so profound that he displaces it on his child. The operating attitude or intent toward the child is: *If I’m in pain, you’re going to be in pain.*

A slightly different expression of this dynamic is associated with a caregiver believing that a child is responsible for his or her pain. The caregiver can feel

justified in causing a child pain because he or she believes the child is the instrument of his or her own pain.

Remorse

A brief statement is warranted concerning remorse. This reminds of us of the spirit of the opening statement about a child's punishment hurting the parent as well. People who intentionally hurt a child experience no remorse over their actions or the results. While it may be true that most caregivers do not necessarily experience vicarious pleasure as a result of a child's pain, it is likely that some sort of distorted unfulfilled need is met. Therefore, remorse will not likely be apparent or exist as a sustained emotional dynamic. These kinds of caregivers do not regret their plans or intentions. The lack of sorrow over having caused the child pain is evidence about the seriousness of this kind of caregiver behavior and the probability of its continuance.

Dangerous People

We wrote about dangerous people in the June 2003 article. With respect to the intent to hurt others, consider the following description:

Dangerous people are those who are likely to cause injury and pain with intent. The dangerous person doesn't abuse a child by mistake but on purpose. Such individuals have a kind of predatory nature. They are extremely self-centered which supports their behavior and results in a disregard for others or their suffering. Dangerous people are usually men with histories of violence. Their lives lack stability related to such things as relationships and employment. Dangerous people are seriously maladjusted (which may not be obvious). Dangerous people may experience a range of personality disorders or psychopathology.

Intended Effects

Family conditions become threats to a child's safety when they meet the safety threshold. The safety threshold criteria include *severe effects*. Severe effects are defined as serious physical injuries, significant pain and suffering, abduction, disability, terror or extreme fear, impairment or death.

People who intend to hurt a child do so with the expectation that the pain will be significant. We are not talking about discomfort here. We are talking about serious and even sustained pain—pain that the child will continue to feel and dread.

The intended effects of this kind of caregiver behavior might be physical or emotional. So, it is crucial that you recognize that *terror* is also included as intentional pain a child is made to suffer.

Guarded Safety Management

We prefer to avoid qualifying safety threats by degree of seriousness. Our position is that if any safety threat is established through the application of the safety threshold, then it is extreme and serious. However, without question, we view this safety threat as among the most heinous.

Maltreatment toward children is often qualified by being “non-accidental.” The harm a child experienced did not occur as a result of an accident. Being “non-accidental” incorporates an abundance of parent behavior related to parent reactions, impulsiveness, lack of control, violent outbursts, etc. Premeditation with intent to cause a child pain goes well beyond “non-accidental” to very much on purpose. These kinds of caregivers are very scary and should be considered with the most conservative judgments and responses related to assuring safety management.

You should be quite guarded about in-home safety responses with these caregivers. Be careful with any kind of parent-child contact. Be certain that visitation is always supervised.

Definition and Elaboration

This safety threat refers to caregivers who anticipate acting in a way that will result in pain and suffering. “Intended” suggests that before or during the time the child was mistreated, the caregiver’s conscious purpose was to hurt the child. This threat must be distinguished from an incident in which the caregiver meant to discipline or punish the child, and the child was inadvertently hurt. “Seriously” refers to an intention to cause the child to suffer physically or emotionally. This is more about a child’s pain than any expectation to teach a child.

Application of the Safety Threshold Criteria

This safety threat seems to contradict the criterion “out of control.” People who “plan” to hurt someone apparently are very much under control. However, it is important to remember that “out of control” also includes the question of whether there is anything or anyone in the household or family that can control the safety threat. In order to meet this criterion, a judgment must be made that 1) the acts were intentional, 2) the objective was to cause pain and suffering, and 3) nothing or no one in the household could stop the behavior.

Caregivers who intend to hurt their children can be considered to behave and have attitudes that are extreme or severe. Furthermore, the whole point of this safety threat is pain and suffering which is consistent with the definition of severe effects.

While it is likely that often this safety threat is associated with punishment and that a judgment about imminence could be tied to that context, it seems reasonable

to conclude that caregivers who hold such heinous feelings toward a child could act on those at any time—soon.

Examples of the Threat

This threat is illustrated in the following examples.

- The incident was planned or had an element of premeditation, and there is no remorse.
- The nature of the incident or use of an instrument can be reasonably assumed to heighten the level of pain or injury (e.g., cigarette burns), and there is no remorse.
- The caregiver's motivation to teach or discipline seems secondary to inflicting pain and/or injury, and there is no remorse.
- The caregiver can reasonably be assumed to have had some awareness of what the result would be prior to the incident, and there is no remorse.
- The caregiver's actions were not impulsive, there was sufficient time and deliberation to assure that the actions hurt the child, and there is no remorse.
- The caregiver does not acknowledge any guilt or wrong-doing, and there was intent to hurt the child.
- The caregiver intended to hurt the child and shows no empathy for the pain or trauma the child has experienced.
- The caregiver may feel justified, may express that the child deserved it, and they intended to hurt the child.
- The caregiver behaved in ways to bring about even serious illness or medical conditions in order to gain attention for herself (i.e., Munchausen's Syndrome).

- The caregiver burned the child with cigarettes.
- The caregiver immersed the child in extremely hot bath water.
- The caregiver locked a child in the basement, in a dark room, in a box, or somehow contained the child in a way that terrorized the child.
- The caregiver exposed the child to acclimate conditions with inadequate clothing.
- The caregiver forced the child to perform laborious acts far beyond the child's physical capacity.
- The caregiver kept the child tied up or in some other way restricted in a torturous manner.
- The caregiver planned and carried out any kind of torturous experiments or situations.
- The caregiver employed situations, communication, interaction and/or threatening behavior to terrorize the child.
- The caregiver force-fed the child or starved the child.