

# Emotional Abuse of Children Leading to Somatoform Disorder: A Form of Child Abuse

Gunathilake KMTB<sup>1\*</sup>, Vidanapathirana M<sup>2</sup>, Gadmbanathan T<sup>3</sup>


<sup>1</sup>Office of the Judicial Medical Officer, <sup>3</sup>Department of Psychiatry, Teaching Hospital, Batticaloa, Sri Lanka

<sup>2</sup>Department of Forensic Medicine, Faculty of Medical Sciences, University of Sri Jayewardenepura, Sri Lanka

## Abstract

Somatoform disorders are characterized by persistent physical symptoms without a demonstrable organic pathology or physiological explanation along with clinical indications that symptoms are linked to psychological factors or conflicts. In Sri Lanka, the grade five scholarship examination is a competition for parents in which they pressurize their children. This inserts psychological pressure on children causing traumatic experiences in their minds. This is a form of child abuse due to Munchausen syndrome by proxy (MSBP) and uses children to fulfill their gratifications, causing a severe degree of emotional abuse to the children and may result in somatoform disorders and children become victims of violence due to misbehaviour. When children are brought by parents alleging being assaulted by teachers for misbehaviour, the somatoform disorder should be considered. These behaviours may not be explained by physical examinations, do not respond to treatments, and cannot be diagnosed by investigations but by psychological examination. Since it is a form of child abuse, the forensic medical officer has to use a multidisciplinary approach including organizing a case conference. Case conferences would help in the diagnosis of the condition, counselling of the parents, and educating the teachers to realize the impact of the problem and advise them to handle the problem empathetically.

**Keywords:** Somatoform disorder, child abuse, prevention, and management

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## Introduction

Somatoform disorders are characterized by persistent physical symptoms without a demonstrable organic pathology or physiological explanation along with clinical indications that symptoms are linked to psychological factors or conflicts.[1] Furthermore, a somatoform disorder due to emotional child abuse has medico-legal implications.

There are several forms of somatoform disorders. It includes somatization disorder (involving multisystem physical symptoms), undifferentiated somatoform disorder (fewer symptoms than somatization disorder), and conversion disorder (voluntary motor or sensory function symptoms).[1]

Conversion somatoform disorders appear in children following emotional abuse. The challenge in working with somatoform disorders in the primary care settings is to simultaneously exclude medical causes for physical symptoms while considering a psychological diagnosis.[1]

Three required clinical criteria common to each of the somatoform disorders are the physical symptoms (a) cannot be fully explained by a general medical condition, another mental disorder, or the effects of a substance, and (b) are not the result of factitious disorder or malingering, and (c) cause significant impairment in social, occupational, or other functioning.[1] Further, little is known about the causes of the somatoform disorders and epidemiological data suggest familial aggregation as a cause of some of the disorders.[2]

## Objectives

Suspect and diagnose medico-legal implications and initiate appropriate medico-legal interventions for somatoform disorders of children caused by emotional abuse.

## Discussion

In Sri Lanka, children especially school children are produced before forensic medical practitioners by their parents for medico-legal examination and reporting following assaults or physical

punishments by the people or schoolteachers due to their misbehaviours.

Grade five scholarship examinations in Sri Lanka have become a competition among parents to obtain a good school for their children, for which they pressurize their children. This inserts psychological pressure on children causing traumatic experiences in their minds. This is a form of child abuse due to Munchausen syndrome by proxy (MSBP) and the use of children to fulfill their gratifications, causing a severe degree of emotional abuse to children and resulting in somatoform disorders, and then the children may become victims of punishments or assaults due to their misbehaviours.

Somatoform disorders among children and adolescents may cause impairment in educational and social functioning and generate a great deal of psychosocial distress.[3]

Due to somatoform disorder, children tend to misbehave especially at school, and teachers or people will get irritated and the child will be punished or assaulted. When such children are produced before forensic medical practitioners, a somatoform disorder due to emotional abuse should be considered.

These behaviours may not be explained by physical examinations, do not respond to treatments, and cannot be diagnosed by investigations but can be diagnosed by psychological examination. Diagnostic criteria for somatoform disorders were established for adults,[4] and the same criteria, in general, are applied to children. Diagnosing somatoform disorders in children and adolescents is often more difficult because the expression of emotional distress in the form of physical complaints is developmentally appropriate in younger children. However, when physical symptoms are persistent and a child's functioning deteriorates, consideration of a somatoform disorder is indicated.[5]

The following putative familial risk factors for the development of somatoform disorders among children and adolescents were identified: somatization of parents, psychopathology of close family members, dysfunctional family climate, traumatic experience in childhood, and insecure attachment.[6]

There are many theories explaining the formation of this disorder. According to Kozłowska, both "Freeze" and "Appeasement defense" are seen typically in young infants and toddlers, in the face of threat. Hypothetically, in the context of a significant threat, behavioural and somatosensory components of emotional responses are activated automatically,

manifesting as medically unexplained symptoms (pain, motor, or sensory). "Appeasement defensive" behaviours are disarming strategies of rapid alternation of signals and contradictory signals that can normally be seen in children as young as toddlers in the presence of a perceived threat within the social or family system.[7]

The diagnosis of somatoform disorders is complex due to the fact that they may appear as medical conditions. Hence, most somatoform patients do not seek psychiatric assistance.[3] Although somatoform disorders are among the most common mental disorders presented in the general medical setting, the specific treatments have not been well synthesized.[8] Cognitive behaviour therapy has been found to be an effective treatment for somatoform disorders.[9] Mental health professionals can be helpful in making the initial diagnosis of a somatoform disorder and treatment.[10]

Since it is a form of child abuse, the forensic practitioner must use a multidisciplinary approach including organizing a case conference. This would help in the diagnosis of the condition, counselling of the parents who may be suffering from Munchausen syndrome by proxy (MSBP), and educating the perpetrators such as teachers to realize the impact of the problem and advise them to handle the problem empathetically. The delivery of this diagnosis to parents may be the most important step.[1]

For the prevention of further emotional abuse of children, police or health care workers can request 'Protection Orders' under the 'Prevention of domestic violence act of Sri Lanka.[11] According to the Act, "domestic violence" includes physical abuse as well as emotional abuse, committed by a perpetrator with some relationship to the victim within home or outside. Further, "emotional abuse" means a pattern of cruel, inhuman, degrading, or humiliating conduct directed towards the victim.

### Conclusion

Somatoform disorder due to emotional child abuse has several medico-legal implications. Forensic medical practitioners should be aware of somatoform disorders of children caused by emotional abuse and they should suspect, diagnose and initiate appropriate medico-legal interventions for the best interest of the child.

### Disclosure statement

**Conflicts of Interest:** The authors declare that they have no conflicts of interest.

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