

# SAMPLE

# SAMPLE OF LITERATURE REVIEW



# SAMPLE OF LITERATURE REVIEW FOR PSYCHOLOGY CAPSTONE PROJECT

#### **Abstract**

In the past decade, there has been an increased concern about children being exposed to various traumatic events and violence. Most of them end up developing post-traumatic stress disorder and depression. Therefore, health practitioners should identify and treat PTSD reactions among children. Various studies give evidence that trauma and violence cause severe effects on the psychological development of a child. In addition, after a review of many studies, the results indicate that the impact of trauma and violence on the psychological development of the child and most of the results indicate that PTSD and depressive disorder are among the major complications. This paper reviews some of the empirical studies and research findings based on PTSD, major depression disorders, and the effects of trauma and violence on children's psychological development.

# Introduction

Post-traumatic stress disorder and depression are among the identified illnesses that are used by disturbing events witnessed or encountered by an individual (Stensland, 2014). Disorders are clinically and psychologically approved to cause psychological problems to children. Many people experience traumatic events that vary from one to another (Olema et al., 2014). For instance, there are car and airplane accidents, sexual abuse, as well as domestic violence. Study shows that the effects of traumatic events lead to PTSD and other psychiatric related diseases, such as depression, anxiety, panic, lack of socialization, isolated identity disorder, bipolar, personality development disorder and schizophrenia (Debell et al., 2041). Many cases have been reported as children have experienced traumatic events physically, emotionally or sexually. This paper provides a comprehensive literature review on PTSD and major depressive disorders as a result of the trauma and violence on children's psychological development.

According to Stensland (2014), trauma is an experience that one goes through emotionally physically, leading to physical and psychological stress. It comes as a result of a single event, a series of events or situations that are emotionally harmful and threatening. The research reveals that the cases of stress always trigger survival responses in the child (Karam et al., 2014).



According to a study by Debell et al. (2041), childhood trauma affects the child's psychological development in the future, and the results show up later in life. Children who undergo events that threaten their life always develop a personality with low self-esteem. The authors state that traumatic events lead to the following symptoms: mood swings, emotional instability, anxiety, anger, impulsiveness, aggression, depression, as well as dissociation. They emphasize violence leads to PTSD and depression. Jooste (2014) emphasizes that the early forms of trauma usually alter the perception of the child where they lack self-trust and develop low self-esteem. Maritz adds that a child who undergoes severe trauma develops a sense of foreshortening. They always fear to live as they see the future not promising since it is even more dangerous.

Debell et al. (2041) studied adverse experiences that trauma causes in the early years of development of the child. It affects the interpersonal relationship of the child later when they grow up. The violence and trauma that a child experiences also affects their well-being, and that is transferred to adulthood. Most of the stated experiences include neglect and child abuse in any form, such as sexual abuse, physical and emotional abuse. According to an investigation by Debell et al. (2041), interference with the welfare of the child also affects their developmental framework.

In addition, Karam et al. (2014) identified that children who go through traumatic events usually show negative social behavior and have a problem in mental and physical development. According to the empirical studies carried on various people, childhood trauma results in PTSD as compared to the trauma caused when one is an adult. The researchers used a sample from the Middle East where there were many cases of violence, and the results indicate that childhood trauma was associated with more cases of PTSD than those in childhood experience (Karam et al., 2014).

Similar research by Olema et al. (2014) indicates that there are some hidden causes of maltreatment that appear later in adulthood. Most people in war regions had traumatizing events caused by violence, but the symptoms did not show; therefore, the effects reflected later during adulthood. In this article, there were major events that were conducted on the effect of trauma Debell et al. (2041). In this case, the questionnaires were developed and given to various participants. Most women reported the cases of physical violence, and the children also stated both sexual and domestic violence, whereas some men



stated the emotional abuse that they experienced during those times (Karam et al., 2014). The study concluded that the effects of trauma and violence reflect in adulthood. Since most of the parents had lived in the times of the war, they transferred their anger and aggressiveness to the children in marriage. In the same study, those children who had various forms of abuse indicated the symptoms of denial, hopelessness, depression, anxiety, among others (Karam et al., 2014).

Nickerson et al. (2014) reviewed data on psychological abuse as evaluated in the relevant literature; the research findings indicated that at least 10% of the children in the United States experienced psychological abuse a year. According to the study, some had sustained the abuse while others could not; the results indicated that the adults would sustain abuse more than children. In addition, the children could not sustain physical abuse, as most of them had negative effects that reflected later (Karam et al., 2014). The authors argued that even though child abuse through sexual violence was common among women, the results affected both men and women and the children seemed to suffer long-term effects.

A study was performed to investigate how trauma affects psychological development as a result of psychological distress, neglect and family conflicts (Debell et al., 2014). It was done on ten participants to identify the traumatic events that the families face and their effects on their children. According to the research findings, ten out percent of American families undergo various traumatic events, which causes psychological and biological changes resulting from Post-traumatic stress disorder. In many cases, the Americans experience war, which leads to shock, and such people could not be able to adapt to life as most of them came with PTSD syndrome resulting from the impact of trauma (Debell et al., 2041).

Another investigation on the relationship between PTSD and alcohol use as a result of trauma and violence was carried out by Karam et al. (2014). In this research, a systematic review was done, and various traumatic events were investigated that might have led to the PTSD. Many people reported having trouble working and maintaining good relationships, and the parents were not able to parent their children. It indicates that trauma causes PTSD, which interferes with brain development and psychological well-being. Such victims showed symptoms of brain damage, showing some abnormalities due to PTSD exposure. They also indicated changes in their memories, as most of them had



memory lapses (Debell et al., 2041). PTSD is an environmental shock that changes brain functioning. In the United States, a study indicates that at least 60% of men and 50 % of females had gone through such experiences due to frequent wars (Karam et al., 2014). However, 9% of men and 20% of women had been diagnosed with PTSD due to rape, war, and violence. Most women indicated the abnormalities in the children they had, and the pregnant mothers had children who had the psychiatric disorder.

Most of the victims suffered major depression disorders such as anxiety apart from PTSD, and some children indicated social phobia. That was also associated with health-related behavior such as drug and alcohol abuse (Karam et al., 2014). Jooste & Maritz (2014) emphasize that the impact of depression and anxiety are caused by war. The research was done on the Vietnamese people to investigate the effects of PTSD as a result of the war. The study indicates that more than 1.7 million people in Vietnam had experienced trauma as a result of war, leading to PTSD disorder. However, 60% had more serious and complicated diseases, but only 5% of the victims had the problem resulting from injury (Karam et al., 2014). A similar study was conducted on the black Americans who had been exposed to traumatic events as a result of the war. The majority of the victims had developed PTSD syndrome, and the higher percentage was from those who had a direct impact. Most of those affected were children as they indicated the symptoms of abnormalities, brain damage, anxiety and other related diseases that came as a result of trauma from the war (Debell et al., 2041). Olema et al. (2014) add that the impact was because the case was done repetitively, and that becomes a big impact on psychological development. Some of the victims indicated cases of heart attack, cancer, and other serious related problems due to the instant threat that resulted from horror and hopelessness. Most of the refugees in the camps also suffered the same due to violence and threats, especially in the native nations. Study proves that those who went through traumatic events without early treatment had developed PTSD and depression.

In addition, those had difficulty giving birth, and their children had brain damage (Debell et al., 2041).

## Recommendation

From a comprehensive literature review, it is clearly evident that PTSD and major depressive disorders, trauma and violence have an impact on children's psychological development.



Therefore, it is recommended that primary caregivers try to maximize their sense of security to such children (Debell et al., 2041). In addition, they should also help these children to reduce emotions that are overwhelming. The parents who practice domestic violence should also try to address the issues that lead to trauma. In addition, concerned people should coordinate with other agencies to help such children. Finally, people need to look for ways to manage personal stress (Kisiel et al., 2014).

## Conclusion

From the literature review findings above, violence and trauma lead to many complicated diseases such as post-traumatic stress disorder and depression, among others. Other effects include panic depression, lack of socialization, isolated identity disorder, bipolar, personality development disorder, eating difficulties and schizophrenia (Debell et al., 2041). Child traumatic stress is the physical and emotional reactions that a child receives from the caregiver. Such reactions threaten them, and they may come from a very close person like a parent or sibling. Traumatic events include any physical violence that leads the child to feel terrorized, powerless, and cannot control the physiological arousal (Debell et al., 2041). Such problems lead to psychological development problems in children. However, it is indicated that even the hereditary factors led to the development of these problems, as those parents who experienced traumatic events, especially in the European nations as a result of frequent wars, transferred the same to the children they gave birth to (Kisiel et al., 2014).



## References

Debell, F., Fear, N.T., Head, M., Batt-Rawden, S., Greenberg, N., Wessely, S., & Goodwin, L. (September 01, 2014). A systematic review of the comorbidity between PTSD and alcohol misuse. Social Psychiatry and Psychiatric Epidemiology: The International Journal for Research in Social and Genetic Epidemiology and Mental Health Services, 49, 9, 1401-1425.

Jooste, K., & Maritz, J. (October 01, 2014). Youths' experience of trauma: Personal transformation through self-leadership and self-coaching: Health and quality of life. African Journal for Physical Health Education, Recreation and Dance, 20, 91-106.

Karam, E.G., Fayyad, J., Karam, A.N., Melhem, N., Mneimneh, Z., Dimassi, H., & Tabet, C.C. (April 01, 2014). Outcome of depression and anxiety after war: A prospective epidemiologic study of children and adolescents. Journal of Traumatic Stress, 27, 2, 192-199.

Kisiel, C.L., Fehrenbach, T., Torgersen, E., Stolbach, B., McClelland, G., Griffin, G., & Burkman, K. (January 01, 2014). Constellations of interpersonal trauma and symptoms in child welfare: Implications for a developmental trauma framework. Journal of Family Violence, 29, 1, 1-14.

Nickerson, A., Bryant, R.A., Rosebrock, L., & Litz, B.T. (June 01, 2014). The mechanisms of psychosocial injury following human rights violations, mass trauma, and torture. Clinical Psychology: Science and Practice, 21, 2, 172–191.

Olema, D.K., Catani, C., Ertl, V., Saile, R., & Neuner, F. (February 01, 2014). The hidden effects of child maltreatment in a war region: Correlates of psychopathology in two generations living in Northern Uganda. Journal of Traumatic Stress, 27, 1, 35–41.

Stensland, S.Ø., Thoresen, S., Wentzel-Larsen, T., Zwart, J.-A., & Dyb, G. (December 01, 2014). Recurrent headache and interpersonal violence in adolescence: The roles of psychological distress, loneliness and family cohesion: The HUNT study. The Journal of Headache and Pain.