

## Inmates' empathy: relationship with childhood victimisation

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## ABSTRACT

**Introduction:** Violence against the elderly constitutes an undeniable and serious violation of human rights and affects the physical and psychological integrity of the victim. Is not a new phenomenon, is a worldwide problem that has become more pronounce in contemporary societies because of the ageing of the population. World Health Organization [1] defines elder violence as a single or repeated action, or the absence of an appropriate action, arising in the context of a relationship where there is an expectation of trust that causes suffering or harm to an elderly person. Occurs through several behaviours involving psychological, physical, sexual, financial violence, neglect and self-neglect [2]. The purpose of this paper is to demonstrate the work developed by the Victims Information and Assistance Office (GIAV) and by Forensic Psychology Office (GPF) at Egas Moniz Higher Education School about elder abuse.

**Materials and methods:** The sample ( $n = 14$ ) is derived from the domestic violence risk assessments of GIAV and GPF. We assessed 6 victims: 2 women and 4 man, aged between 64 and 95 years old ( $M = 76.67$ ,  $sd = 10.71$ ); and 8 defendants: 6 women and 2 man, aged between 24 and 77 years old ( $M = 46.13$ ,  $sd = 15.52$ ). The relationship between victims and defendants are 13 sons/daughters and 1 tenant. Data were collected from lawsuits, semi-structured interviews of the victims and defendants, collateral information and criminal record. All ethical issues have been taken due to the sensitive nature of the involved data involved and the respective informed consentient which contained the purpose of the assesses, the confidentiality limits, and information about the ethics and technician's impartiality was sign by all participants.

**Results:** The results demonstrated physical and psychological abuse (in all cases), followed by economical abuse ( $n = 13$ , 92.9%) and social abuse ( $n = 3$ , 21.4%). It is possible to identify several victims' risk factors, namely gender (female victims –  $n = 11$ , 78.6%), physical problems/limitations ( $n = 11$ , 78.6%), age above 75 years old ( $n = 8$ , 57.1%) and previous abuse ( $n = 6$ , 42.9%). The most relevant offender's risk factors are financial problems ( $n = 12$ , 85.7%), deficit in the coping skills ( $n = 12$ , 85.7%), others blame ( $n = 10$ , 71.4%), history of violence against others ( $n = 8$ , 57.1%), aggressiveness ( $n = 8$ , 57.1%), criminal history ( $n = 6$ , 42.9%), victim of domestic violence in the past ( $n = 8$ , 35.7%) and perpetrator of domestic violence in the past ( $n = 5$ , 35.7%). Finally external/relational factors are: offender's dependence ( $n = 11$ , 78.6%), cohabitation ( $n = 11$ , 78.6%), history of conflicts between victim and offender ( $n = 10$ , 71.4%), poor emotional attachment or low family cohesion ( $n = 10$ , 71.4%), social isolation or lack of social support ( $n = 8$ , 57.1%), intergenerational transmission of violence ( $n = 7$ , 50%), inability in the performance of caregiver tasks ( $n = 5$ , 35.7%) and inexperience as caregiver ( $n = 5$ , 35.7%).

**Discussion and conclusions:** Portugal it's one of the top five European Countries with higher percentage (39%) of elderly mistreated [3], however, elder abuse is still the hidden face of domestic violence. The data show several risk factors for elder abuse. These results demonstrated the urgency about elder abuse risk assessment in criminal justice system and the need of a good articulation between Forensic Psychology and Law in order to demystify the hidden face of elder abuse.

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## Inmates' empathy: relationship with childhood victimisation

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## ABSTRACT

**Introduction:** Psychological trauma can occur at any time in life [1], and when it happens during childhood or adolescence, it may have negative repercussions on mental health that prevail in adult life [2]. The main objective of this study was to evaluate the relationship between childhood victimisation trauma experiences and empathy among incarcerated males.

**Materials and methods:** The sample was composed of 99 incarcerated males with ages between 18 and 73 years old ( $M = 37.96$ ;  $SD = 11.6$ ). Some of the participants were arrested for drug trafficking ( $n = 24$ , 24.2%), domestic violence

( $n=10$ , 10.1%), homicide ( $n=9$ , 9.1%), robbery ( $n=7$ , 7.1%), theft ( $n=5$ , 5.1%), and other types of crimes (e.g. kidnapping, attempted murder). Participants answered face-to-face to a sociodemographic questionnaire, to the Childhood Trauma Questionnaire (CTQ) [3] and the Interpersonal Reactivity Index (IRI) [4].

**Results:** All the participants experienced all types of victimisation in their childhood: emotional abuse, physical abuse, emotional neglect, physical neglect, and sexual abuse. The experience of emotional neglect ( $M=9.56$ ;  $SD=5.19$ ) showed the highest incidence of child victimisation, and the other types of victimisation showed moderate rates. The analysis of the IRI confirmed high values of perspective taking ( $M=16.70$ ;  $SD=4.00$ ), empathic concern ( $M=17.83$ ;  $SD=3.69$ ), personal distress ( $M=9.84$ ;  $SD=4.88$ ), and fantasy ( $M=13.09$ ;  $SD=4.39$ ) among the participants. We found a positive and significant correlation between childhood trauma and interpersonal reactivity, specifically concerning the physical abuse ( $r=0.22$ ;  $p=.03$ ) and the physical neglect ( $r=0.24$ ;  $p=.02$ ) on childhood with the presence of personal distress on adulthood.

**Discussion and conclusions:** This study pointed out the emotional neglect as the most frequent victimisation in childhood, and this result is similar to previous studies [4,5]. Contrarily to some researches [6], our sample showed high general rates of empathy on inmates. It was also possible to verify that physical abuse and physical neglect during childhood, can influence the experience of distress in those incarcerated adults. Therefore, we conclude that the traumatic events of victimisation bring negative repercussions to adult life [2].

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## Interpersonal reactivity: the impact of infant-juvenile positive experiences

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### ABSTRACT

**Introduction:** Children's exposure to negative and positive experiences has consequences throughout their lifetime [1]. Positive experiences are associated with how the child sees and interacts with their world [2], and it helps to develop mitigating factors for the adverse effects of adverse experiences and promoters of resilience [3]. The objectives of this research are to study the relationship between interpersonal reactivity (empathy) and positive experiences in childhood and to compare victims and non-victims of traumatic events.

**Materials and methods:** The study design is descriptive, observational, and cross-sectional. The study was conducted in accordance with the ethical principles outlined in the Declaration of Helsinki [4]. Participants responded to the protocol in the google form, having consented to their participation in order to advance in the protocol. This study comprised 147 Portuguese adults aged between 18 and 67 ( $M=30.8$ ,  $SD=11.6$ ). The link to the study was disclosed by e-mail and in social networks. Samples were divided into two groups: G1 – non-victims of traumatic events ( $n=84$ ) and G2 – victims of trauma in the last three years ( $n=63$ ). Participants responded online to a sociodemographic questionnaire, the Interpersonal Reactivity Index (IRI) [5], and the Benevolent Childhood Experiences (BCEs) scale [6].

**Results:** Data showed statistically significant correlations between: Interpersonal Support and the Perspective Taking ( $V=0.402$ ,  $p=.035$ ); Interpersonal Support and Empathic Concern ( $V=0.371$ ,  $p=.038$ ); the Perceived Relational and Internal Safety and Security, and Fantasy ( $V=0.438$ ,  $p=.035$ ); the total score of the BCEs and the subscale Fantasy in the IRI ( $V=0.421$ ,  $p=.036$ ). Concerning the experience of traumatic events in adulthood, the results revealed statistically significant differences. Compared to G2, the G1, highlighted higher levels of total score of the BCEs [ $F(1,145)=5.07$ ,  $p=.026$ ], Positive Experiences of Support [ $F(1,145)=6.02$ ,  $p=.015$ ], and Positive Experiences of Security [ $F(1,145)=4.30$ ,  $p=.040$ ] in infant-juvenile stage.