Dignifying Hidden Lives: The Institutionalization of Any Impact Child Development.

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Abstract

Institutional care of children is a serious form of physical and psychological neglect that causes impact on many dimensions of child development. Among them, in central nervous system structures and behavioral development. The results suggest that the removal of a child from an institution and its transfer to an improved care environment can lead to a reduced risk of psychopathology, as well as promoting a better social, emotional and cognitive development. It is essential, therefore, the pursuit of a special attention to the implementation of high quality care to minimize possible child and adolescents development deficits.

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Among the most vulnerable children in the world are those living outside of family care context, sex trafficking or pornography victims, trafficked for forced labor and those recruited into armed conflicts [1]. For more than 80 years, observational studies have shown severe developmental delays in nearly every domain among institutionalized children compared with non-institutionalized controls [2].

It is estimated, therefore, that millions of young in the planet live under institutional care and in many parts of it, abandoned or orphaned children are raised in institutions where care is deprivation of social care [3,4]. In such contexts, children have an incipient motor, cognitive, linguistic and social development needed to promote a typical progress [3]. The magnitude of this problem is demonstrated by an United Nations International Children's Emergency Fund (UNICEF) research which estimated that 8 million children are living in institutional settings [4].

In this sense, a research by Berens and Nelson, 2015 and published in The Lancet shows plenty of evidence about the impact of institutionalization on biopsychosocial child development, stressing particular periods of early childhood that are more sensitive to care deficits and, furthermore, stating that institutional care has a causal effect on rates of developmental deficits and delays [2]. Several studies agree with Nelson's research, demonstrating problems in several dimensions of child development.

Memory function is one of the domains that are negatively influenced by that early deprivation and this also impacts on specific brain areas such as microstructure of the corpus callosum body, cingulum, fornix, anterior and superior corona radiata, external capsule, retrolenticular internal capsule, and medial lemniscus [3,5].

In addition, children raised in institutionalized settings showed neuropsychological deficits on tests of visual memory and attention, as well as visually mediated learning and inhibitory control and greater willingness to develop psychopathology [6,7].

In this context, the developmental difficulties experienced by many of these children raise questions about the effects of early deprivation including factors such as failure to provide adequate nutrition, medical care, stimulation, and the lack of consistent and supportive caregiving relationships [5]. Therefore, examination of the effects of deprivation and early neglect over social, emotional and cognitive functioning is of practical and theoretical importance [3]. Evidence suggests that placing children directly in institutional care as a first line of action, without supporting options

for identifying appropriate and protective family care, is problematic [1].

These trends raise concerns about how societies will manage the substantial burden of health problems among previously institutionalized children, because even in institutions where basic physical needs were met, lack of individualized care and attention remain prominent [4,5].

Institutionalization seems to have an important impact on the socio-emotional development of children and adolescents, as shown by recent results from Humphreys & colleagues, which showed in a study of 136 children who have a history of institutional creation was associated with higher levels of internalizing and psychopathological manifestation, psychiatric morbidity and disruption of Attention and Hyperactivity Deficit Disorder (ADHD) in children 12 years of age compared with a cohort of children with typical development and who had never been put in an institution [8]. About this domain of socioemotional development, studies have largely focused on documenting unfavourable attachment patterns, which are believed to be associated with later psychopathology and behavioural difficulties ^[2]. This is especially present in girls because it was found that those who had been through institutional environments had significantly higher rates of internalizing (depression and anxiety) than girls who had never lived in institutions [8].

In this way, institutional care represents an outdated model of assistance to orphans or victims of abuse. Public policies should be aimed at promotion of high quality social assistance throughout childhood and early adolescence. It assumes the presence of professionals able to use tools that maximize child development, providing psychosocial and educational support, such as construction and use of cozy spaces. In addition, approaches must be used to integrate the community looking to simulate as closely as possible the normal environment expected for the development of a child. To reach that reality, family care programs should represent important targets of practical research and policy attention.

Studies point out, also, the need to understand the changes present in the cerebral white matter of institutionalized young people and their correlation with the neurocognitive or psychiatric functioning. This is fundamental, since understanding the specific trajectories of changes in white matter may have important contributions to public health, allowing predict the time, duration and format of early interventions for children at risk. It is worth noting that some studies have shown differentiated impacts of institutionalization between boys and girls, particularly as they relate to the partners-emotional aspects. Therefore, gender issues should be taken into account when planning interventions to this vulnerable part of the population.

Ultimately, deprivation of social assistance in any care environment early in life can be as damaging as any other pathology and should be seen by the competent institutions with the same concern for a severely debilitating childhood disease.

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