CHILD POVERTY AS A POTENTIAL DEVELOPMENTAL TRAUMA: SHAME, SELF-ESTEEM, AND REDIGINIFATION OF CHILDHOOD

Abstract:

This article aims to enrich the traditional approaches concerning child poverty exploring the relation between poverty, trauma, and shame. In order to do so, it will try to answer two main questions: first, given the already proven relation between poverty and child, whether child poverty fulfills the criteria to be considered an experience with a high risk of becoming a traumatic one. Second, this article aims to explore the link between trauma and shame, as a possible mechanism that may account for the phenomenon of poverty-related shame. Accepting the first hypothesis, it will try to shed light on how this connection could benefit the measures against child poverty and the design of policies. If child poverty is associated to feelings of shame, and these feelings have their roots in trauma, then the policies to bring social justice for children into reality should surpass the economic area and implement also the damage concerning self-esteem and self-concept. As a result, we will advocate for re-dignifying the child through the improvement of mental health services as a necessary measure to bring to reality children's rights.

I. CHILD POVERTY AS A POTENTIAL TRAUMATIC EVENT

Child poverty has traditionally been approached from an economic or social perspective, taking into consideration development and welfare markers of a given state (Schweiger and Graf 2015). However, it is a complex phenomenon that affects and modulates different interconnected aspects of a child's life. In this sense, although a compartmentalization of this experience might be useful for analytic purposes, it might also entail some risks with regard to the child, such as missing out the whole impact on child's well-being and well-becoming.

Although child poverty exists in a wide variety of shapes, we will discuss here neither some open questions concerning poverty thresholds such as the items that should be fulfilled to affirm that a child lives in poverty, nor the conceptual debates on the fuzzy boundaries between relative and absolute poverty, nor the philosophical debate regarding the social construction of childhood. For this reason, we will take as a starting point Townsend's approach to poverty:

"Individuals, families and groups in the population can be said to be in poverty when they lack the resources to obtain the type of diet, participate in the activities and have the living conditions and amenities which are customary, or are at least widely encouraged or approved, in the societies to which they belong. Their resources are so seriously below those commanded by the average individual or family that they are, in effect, excluded from ordinary living patterns, customs and activities" (Townsend 1979, 31).

Nevertheless, poverty is not only connected to a lack of resources. Rather, poverty is a form of social discrimination, and as such, the psychological impact on the child should not be

underrated. Child poverty, concretely in Western affluent societies¹, is a case of social exclusion and, as such, a form of human aggression, for exclusion is indeed a kind of social aggression. Human aggression can be defined, following the Baron and Richardson's definition, as "any behavior directed toward another individual that is carried out with the proximate (immediate) intent to cause harm" (Baron and Richardson 1994, 7).

Social exclusion —due to gender, physical appearance, intellectual competences, race or economical position, just to name a few cases— is not an accident, nor an unintended consequence of a given social structure. "Social exclusion is related not only to a lack of material wealth but also to symbolic exclusion, social deprivation and incomplete participation in the main social institutions" (Bhalla and Lapeyre 2004, 1). It implies the denial of social rights, participation, and basic opportunities for one's life development, and as such, it is a passive direct way of aggression. It implies processes of segregation as stigmatizations, marginalization, etc. (Sedmak et al. 2015). To some extent, the lack of the necessary food, care, education, etc., condemns children to lose some vital chances to fully develop and become human.

One could also say that in child poverty there is no behavior in order to harm the child, that poverty is just a circumstance. However, poverty is in fact a consequence of human actions, and decisions in a given system, becoming a problem of actions and omissions, of doing, enabling, and letting happen (Lippert-Rasmussen 2015). In this sense, child poverty, and social exclusion as a result of it, is not only a "circumstance" but a kind of harm.

In this article, we will not directly address the question of collective responsibilities, but we will mainly focus on the child's perspective. In this sense, we advocate for the benefits of approaching poverty as a traumatic experience. In fact, poverty is commonly seen as a risk factor for children's (psychological) well-being, as it deteriorates and diminishes the chances of reaching a minimum healthy threshold to flourish in life to the point that poverty is considered to be an ACE², that is, an Adverse Child Experience³ (Ratnani et al. 2015, S90). Poverty during childhood may pave the way to depression, anxiety, and post-traumatic stress disorder, just to name some of the effects, showing so the strong link between poverty-related stress and psychological problems (Wadsworth & Santiago, 2008). By way of example, children in poor and low-income households are more likely to adopt self-harm and overdose (Ayton, Rasool, and Cottrell 2003), delinquency, isolation and negative social relationships as well as drug consumption (Najman et al. 2010, 543).

Likewise, poverty makes children more vulnerable in terms of mental health and well-being as it undermines their ability to use primary and secondary control coping strategies such as problem solving and thinking about the future, and emotional regulation and social interactions, respectively (J. R. Smith, Brooks-Gunn, and Klebanov 1997; Wadsworth 2011). These strategies become shock-absorbers if one has developed a positive coping style and

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¹ With this, we do not mean that poverty in other countries is not a form of aggression, but that we will focus on child poverty in affluent countries in this article.

² The ACE Study is one of the largest retrospective and prospective investigations in the United States evaluating the relationships between childhood experiences of abuse, neglect, and family dysfunction and their outcomes in terms of wellbeing and wellbecoming.

³ For further studies on ACE see http://www.cdc.gov/violenceprevention/acestudy/

knows how to regulate emotions, solve problems, and manage stress, or, on the contrary, they can worsen the above situation, increasing the negative thoughts, ruminative feelings, etc. (Duncan, Ziol-Guest, and Kalil 2010). Likewise, "children growing up in low-income environments are more likely to be insecurely attached, and are also more likely to experience maternal depression, they may face significant hurdles in gaining understanding about emotions" (Raikes and Thompson 2006, 102). Here children's self-esteem becomes key, as we will develop later on.

In our view, if poverty is understood not only as a negative experience, an instance of social exclusion, injustice, an adverse experience or a corrosive disadvantage, but as a potentially traumatic experience, some insidious outcomes for children's mental well-being and well-becoming could be approached in a more inclusive way as well as measures design could be improved.

One of the main reasons why poverty can be said to jeopardize children's well-being and development may be its close relation to trauma. Poverty significantly increases the probability of a child being exposed to a set of important stressors that can become traumatic, such as:

- o violence,
- o parental neglect (due to parents' own experiences of stress and overwhelming), and abandonment (Ayton, Rasool, and Cottrell 2003)
- o child abuse, as poverty increases the child's vulnerability in this respect, being poverty the variable with the greatest impact in child maltreatment rates (Hillson 1994; Conger et al. 1992; Richard J. Gelles 1989; R. J. Gelles 1992; Coulton et al. 1995),
- o humiliation within and outside the family
- o police prosecution, when poverty is associated to illegal activities
- o disease and other forms of physical damage (e.g. accidents)
- o the witnessing of harm being inflicted upon loved ones

Additionally, as a result, children in poor and low-income households are four times more likely to suffer physical abuse, twice as likely to be abandoned, and more likely to adopt self-harm and overdose (Ayton, Rasool, and Cottrell 2003), delinquency, isolation and negative social relationships as well as drug consumption (Najman et al. 2010, 543).

These and other events may easily become traumatic, when they overwhelm the child's capabilities of processing and responding to them.

Also, poverty may entail the accumulation of a diversity of stressors, therefore bringing with it what has been labeled as *complex* or *developmental trauma* (van der Kolk, Roth, Pelcovitz, Sunday & Spinazzola, 2005). Beyond a single stressful event (e.g. an accident or a disaster), some traumas may be of a chronic nature (e.g. sexual abuse by a family member, domestic violence) and have a tendency to appear in clusters (domestic violence, for example, includes harm to oneself, the witnessing of harm being inflicted to others –siblings, mother-, and/or humiliation, among others). These traumatic phenomena may impinge upon early developmental processes (self-regulation, identity formation, moral development, etc.).

Finally, poverty may act as a modulator (Pynoos, Steinberg & Wraith, 1995) of the relation between negative experiences and their psychological/traumatic impact on the child. This is clearly seen when the weakness of protective resources in the child's environment compound the impact of stressful events that are neutral (e.g. non-personal) in their nature (such as natural disasters) (Scheeringa & Zeanah, 2008).

As a result, poverty can be seen as a potentially traumatic experience, in the same way that child abuse, just to name an example, is already categorized. In fact, child poverty has already been considered a corrosive disadvantage, which would connect with the aspects previously pointed out. Child poverty, due not only to the lack of material resources, but to its connection to relevant stressors, could entail a negative impact on both the short-term and long-term: "a disadvantage in one functioning leads to disadvantages in others" (Wolff and de-Shalit 2007, 133). In other words, poverty may have an impact upon the child's well-being and well-becoming. Alongside this, one should bear in mind that *complex* or *developmental traumas* may affect these two dimensions, as child poverty does. Whilst well-being would refer to the resources and means that a child needs to live a decent life, well-becoming would refer to what a child would need during childhood to guarantee that she can live a decent life as an adult. In this sense, well-becoming highlights the evolving nature of children, making visible how experiences during that period of life may modulate adulthood (Najman et al. 2010).

II. TRAUMA AND SHAME

Among many other negative outcomes for children, one common effect of poverty in children's mental well-being and well-becoming is the feeling of shame (R. Walker et al. 2013; R. Walker 2014).

As Adam Smith already noted in his *Theory of moral sentiments*:

"The poor man (...) is ashamed of his poverty. He feels that either it places him out of everyone's sight or if people do take any notice of him it's with almost no fellow-feeling for the misery and distress that he suffers. He is humiliated on both accounts. Being disapproved of is entirely different from being overlooked, but being overlooked is essentially tied to not being approved of: the obscurity of the overlooked poor man also shuts out the daylight of honour and approval" (A. Smith 1761, I.III.2).

Though socially and culturally shaped, shame is indeed found "to be associated with poverty in each location, variably leading to pretence, withdrawal, self-loathing, 'othering', despair, depression, thoughts of suicide and generally to reductions in personal efficacy" (R. Walker et al. 2013, 216).

Unsurprisingly, this association between poverty and shame appears also in child poverty and not only when it comes to adults, something that is easily visible once the link between child poverty and trauma is fleshed out. In Ridge's words:

"Fears about being left out or marginalized pervaded children's accounts. Poverty in childhood extracts a high emotional toll on children trying to 'fit in' and 'join in' with

their peers. Children's inner fears and their experiences of feeling humiliated, sad and shamed are often hidden and they are rarely asked about their thoughts and feelings. However, sensitively conducted studies have revealed the deep emotional costs that hardship can bring to children's lives" (Ridge 2011, 76).

Early experiences become a representational template of the world, influencing how the child sees her environment, herself and others. In this sense, experiences lived within poverty could acquire a normative value to the child, so that a situation of poverty and exclusion may have a deep impact on whether a child thinks that the world is a fair or a horrible place, whether she thinks that people (and human nature) are cruel, trustworthy or generous, and whether she thinks that she is valuable, talented or useless. Being vulnerable is therefore related to the self, to identity and to the susceptibility to suffering harm⁴ and threats to one's interests (Mackenzie, Rogers, and Dodds 2014, 6).

Studies also show how social exclusion and knowing that you are excluded (and are going to be excluded and isolated) implies a negative effect in cognitive performance (Baumeister, Twenge & Nuss 2002, and Baumeister & Leary, 1995), just to name an example. These researches show how individuals who suffer any kind of social exclusion have more difficulties in performing logical tasks, have problems of attention, a distorted perception of time, and a strong tendency to self-destructive behaviors, as well as avoidance to self-reflection and projections of themselves in the future. In this sense, experiences during childhood may jeopardize the devolvement of the child's identity.

Beyond some distinctions between self-esteem, self- respect and self-confidence (Honneth 2012), self-esteem can be defined as a personality trait based on the perception a person has about her own value, something that includes self-respect and self-confidence in contrast with self-concept, namely, the objective evaluation of the traits one possesses. Evidently, the perception about one's praiseworthiness is built during childhood, and is filtered and shaped through interpersonal and social interactions. Thus, a low or broken self-esteem is the root of many problems in the inter/personal arena that could be seen as an instance of child social injustice.

On its part, shame, as self-assessment emotion, is irremediably connected to self-concept and self-esteem. As a social emotion and an emotion of self-assessment (Williams 2008; Taylor 1985), the object of shame is the individual, insofar as she is a social being, whose identity is partially constituted by the perceptions and opinions of others. Shame highlights that who we are is not always fully under our own control (Montes 2015). A person feels shame when she "judges" (consciously or unconsciously) that she does not meet the desired social standards she should (Tracy, Robins, and Tangney 2007). In the case of child poverty, this social evaluation is even more corrosive, for children are more vulnerable to the messages they receive as they are forming their own self-concept and self-esteem (Farrell 2011; Friedman 2015).

⁴ Although many questions on what constitutes moral damage are still open in metaethics, a more extended debate on these questions will exceed the scope of this paper.

Shame in the context of child poverty not only results from an assessment of the distance between one's life conditions and a set of social standards, but also to pervasive exposure to traumatic experiences. As research suggests, shame is strongly related to trauma. As a result, trauma would turn out to be a "hinge concept" between poverty and shame. That being said, the question now is why, or in what sense, trauma is associated to shame.

The concept of trauma has historically been linked to emotions such as fear and anxiety. Several authors agree in stating that trauma produces a sense of persistent threat (Ehlers & Clark, 2001) as well as the disruption of safety-related assumptions about oneself and the world (Horowitz, 1986; Janoff-Bulman, 1992). Nevertheless, shame can also be a central aspect of trauma, especially when it takes place during sensitive periods of the development of the self, such as childhood and adolescence. In this sense, research suggests that developmental trauma leads to persistently altered attributions about oneself, among others (van der Kolk et al., 2005). To the extent that developmental trauma involves a failure in the caregiving functions of both parents and the community, the child develops a basic sense of not being worthy of such care (Schimmenti 2012).

In the context of complex or developmental trauma, shame may be an effect of different processes, such as the following:

- Trauma entails a failure in the development of *agency*. Feelings of helplessness in the face of danger may become chronic, making the child develop a sense of himself as a passive recipient of threat. For this reason, if a negative situation is persistent, children are more likely to experience learnt helplessness (Seligman 1972) and give up on their own personal goals (Najman et al. 2010, 543).
- Trauma entails a failure in the development of *autonomy*⁵. As Erikson (1950) noted, one of the central lines of development during childhood includes the development of a sense of *being able* to do things by one's own, and feelings of pride derived from being efficient in relational contexts. When trauma takes place repeatedly, the child may become stuck in states of dependency towards caregivers and a sense of doubt about her capabilities.
- In the context of early interpersonal trauma (such as maltreatment or abuse), the child may be exposed to verbal and non-verbal expressions of disgust, hate, disappointment, and reject from parents. These states are rapidly detected by children and may induce feelings of self-worthlessness. In this sense, we may state that interpersonal trauma often involves situations of negative or destructive *mirroring* (Schore, 2002).
- Feelings of *self-worthlessness* and *guilt* may also be derived from the need to make sense of traumatic experiences that feel random and meaningless (Terr, 1990). The world is seen as random and incomprehensible when one is hurt by the very figures who are supposed to be protective and nurturing. Feeling unworthy and deserving of harm may reinstate some sense of order in the face of such uncontrollable randomness.
- Trauma is often linked to *stigmatization* and *social isolation*. The secrecy and lack of recognition (Stolorow, 2011) that surrounds some forms of trauma may induce a sense of being different, "stained", or broken. As a result, the child may renounce social support and isolate herself, something that reinforces such stigmatization and the sense

⁵ Agency and autonomy can be seen as intertwined dimensions. Agency enables the child's potential to become more autonomous by making choices for oneself, acting on them and protecting oneself's integrity and goals both in the short and long term.

- of difference (Herman, 1992).
- Feelings of self-disgust may emerge in the context of trauma and become chronic, as has been observed by some studies (see Badour & Adams, 2015). Victims of interpersonal trauma may appraise various dimensions of the traumatic experience in terms of self-disgust. For example, the child may feel she has been contaminated or ruined by the event, or believe that her responses during the trauma (experiencing arousal during abuse; feeling relief when others are hurt instead of oneself; etc.) are worthy of disgust.

Although feeling shame may manifest a healthy sensitivity to the opinions of others, and is crucial to learn shared standards, it can also become problematic as source of suffering when those standards entails injustice, stigmatizations, etc., In a sense, shame may give others a great deal of power over our self-concept. This could eventually make us even more vulnerable, which could lead to a double victimization, namely, poverty and shame, and a vicious circle hard to break: "While internally felt, poverty-related shame was equally imposed by the attitudes and behavior of those not in poverty, framed by public discourse and influenced by the objectives and implementation of anti-poverty policy" (R. Walker et al. 2013, 216).

Two approaches on shame can be found, namely a cognitivist and a pre-cognitivist one. The first one would define shame as the result of a cognitive comparison between some social standards and one's self-concept. On its part, a pre-cognitivist approach would see shame as the result of more basic processes, which could be previous to the development of the child's capability to register and understand social standards. To name an example, shame in young children can be the result of the loss of agency due to maltreatment, or the result of being exposed to parents' expressions of contempt, hate or disgust in the midst of that very act of maltreatment. That being said, shame, as well as other emotions, might be very useful for the spectator especially in the case of young children as an alarm in order to detect instances of injustice in the cases where the child is neither yet equipped with the tools to conceptualize what he or she is experiencing nor with a developed moral consciousness.

In this sense, from an analytic point of view, it might be useful to highlight the unconscious evaluative judgment underneath this emotion. In a nutshell, if a child is feeling shame, it might be a sign that she is receiving negative messages on herself and her own worthiness.

The problem, therefore, from an analytic point of view, is not shame itself, but what this emotion unconsciously reflects about the emotionally relevant event that this person is experiencing. If I feel shame in a given situation instead of indifference, for instance, it is a clear sign that *a*) to some extent I assume or respect the social norm involved that I am not able to accomplish, and *b*) I would like to be able to, which may put me in a risky situation in terms of self-esteem.

Thus, trauma might lead to shame and, in turn, to some group of reactions that would work as a way of defending oneself from the traumatic situation and as a way of reversing the feeling of shame. In this sense, making the connection between trauma and shame explicit may shed some light to apparently unconnected reactions and effects of a traumatic event. Some of

these possible reactions or defenses in cases of poverty, that can be better understood in relation to shame and trauma are: 1) isolation; 2) denial of searching and or accepting help, which explains the difficulties in the use of available social services; 3) narcissistic rage and its associated attitudes such as aggression, superiority, or interpersonal exploitation; 4) exhibitionism as a way of reversing the shame experienced as a consequence of the traumatic experience; and 5) the wastage in impoverished households in non-basic goods with a social value (e.g. mobile phones or television sets), as a defense against shame and as a way of providing oneself with a feeling of personal re-dignification through these objects.

A repeated exposure to a problem or a threat, even if the person is highly resilient, will not increase the child's strengths or resilience. On the contrary, cumulative adverse experiences during early childhood predispose children to develop a sense of learned helplessness, which is just an open door to other behavioral problems (Raphael 2011, 25), cognitive development, academic performance and physical health (Evans et al. 2007; Kim et al. 2013). Certainly, damage to the child's self-esteem will have consequences on the decisions she will make in her future life, what she thinks she can achieve, and what she thinks she deserves. In a nutshell, the decisions one makes if one has a low perception of her own skills and has no hope for a better future are normally not the best ones in terms of personal well-being and well-becoming.

Also, as mentioned above, in relation to shame and violence, it is common in cases of peers' aggressions that a child's victimization at home might derive into a reinforcement of aggressive attitudes as the only way she knows to interact, obtain social rewards and inverting her previous condition as a victim as mentioned above. In fact, "children of primary and post-primary age who bully have in common with victims of similar age lower global self-esteem than their peers who are not involved in bullying" (O' Moore and Kirkham 2001, 281). At the same time, low self-esteem is a risk factor to become a victim of bullying (Egan and Perry 1998).

Hence, the crucial points as a matter of justice are the followings: 1) self-esteem is a key concept in terms of personal identity and will shape whether or not a child and a future adult thinks that he/she is valuable; 2) self-esteem is built during childhood and depends on social and personal interactions; 3) poverty is associated with a set of situations that may entail early developmental trauma; 4) among other consequences, developmental trauma involves strong feelings of shame and unworthiness, posing a threat to identity formation and self-esteem and 5) having a broken self-esteem will put that person in an unfair, asymmetric and vulnerable situation both as a child and as an adult, insofar as it may limit her life chances.

For this reason, if children have the right to be provided with the means that would allow them to develop a good life —at least to a minimal safe threshold-, it is crucial they receive the proper psychological attention to (re)build a healthy self-esteem, and/or work through their traumatic experiences, which in many instances may be the early antecedents of poverty-related shame. As we have argued throughout this section, this connection would go unnoticed if child poverty were not approached as a potentially traumatic experience, which in turn, enables seeing the interconnection of the group of effects and reactions against those effects.

III. NO DIGNITY WITHOUT SELF-ESTEEM

As shame connects with self-concept and self-esteem, it seems sensible to search for redignifying measures to reverse the effects of child poverty not only on the economic aspect. One of the most common attempts, as the Convention on Children's Rights (UN 1989) does, is through the idea of human dignity (Chase and Walker 2012, Walker 2014). However, this may be hard to do successfully only through a theoretical defense of human dignity.

Far from being unequivocal and well-grounded, dignity is a highly abstract and vague concept (Griffin-Heslin 2005). When we recognize that someone possesses dignity we are saying nothing but that she deserves respect, we recognize praiseworthiness in her. When human dignity is recognized through conventions and declarations we are defending that what one does to human beings matters and that a person should not be treated in a humiliating, cruel or abusive manner. In this sense, dignity has very often been used as a key concept to highlight the intrinsic value of human beings. In fact, the claim of human dignity is currently understood as defense of an absolute value in every human being for the sake of being human following Kant's influence. Lately, also M. Nussbaum has developed a more complex idea of dignity, integrating Kantian and Aristotelian traits, namely, the status dignity and the achievement dignity (Nussbaum 2006).

In Nussbaum's terms, *status dignity* would be what has also been defined as anthropological dignity: any human being possesses dignity for the fact of being a human being. It is a property of a person that does not vary depending on the persons' behavior. *Achievement dignity* is connected to the person's behavior and the situation she experiences. If a person behaves in an unacceptable and embarrassing way, one may say that she lost her dignity. Likewise, if a person goes through a very humiliating experience, one may say that she was undignified. In her second idea of dignity, Nussbaum takes elements from to the prekantian meaning linking dignity to the moral worthiness of someone: your dignity is connected to your behavior. At the same time, she combines this with feelings of indignation. The focus here is therefore on how we evaluate the experience, rather than on the person: embarrassing, humiliating, undeserved, etc.

Nussbaum's approach to dignity can shed some light on poverty related shame during childhood as it is focused not only on the notion of human intrinsic value, but on how dignity is linked to how other people treat us. In this sense, Nussbaum leaves an open door to explore the connections between dignity, the material context, well-being, and interdependency.

That being said, and despite the interesting move that Nussbaum elaborates here taking elements from several tendencies, the combination of the spectator's point of view (*you possess dignity*) and the patient's one (*this is outrageous*) may not be so clarifying in practical terms. In fact, the idea of dignity seems to be limited in normative and practical terms. Dignity works as a thick moral concept (Goldie 2009), namely, at the same time descriptive and normative. In the same way when describing someone's behavior as cruel or contemptible, when we label a person's situation as undignified or when we claim that someone has dignity, we are both describing and judging how things should be. If I describe

something as cruel, I am implicitly saying that I think that behavior was wrong. Something similar happens with dignity. If I say someone has dignity, I am affirming that she deserves to be well treated. If something makes us feel indignation, we are just saying that some agents should have acted differently and that the victim deserves something better.

By way of example of the practical challenges related to this concept, it is still an open debate whether dignity –status and/or achievement one- could be considered a prerequisite to well-being in childhood, or whether dignity requires some minimum material conditions of well-being. In other words, can a child's dignity be respected and/or recognized without some minimum conditions of wellbeing? It seems that just recognizing an absolute value to children is – although necessary- insufficient as it is too vague and unconcrete (Ausín and Aramayo 2008).

As a result, human (and children's) rights conventions face the risk of not being able to translate what it is defended on paper into real measures. The claim that humans are intrinsically valuable and deserve respect is therefore at risk of not being sufficient to reverse the waterfall of effects in relation to child poverty and personal identity. In this sense, appealing to one person's dignity and describing a situation as undignifying, may lead again to vicious circles, as we would be just saying by describing a context as such that we believe that the person deserves to be well treated as a matter of basic reciprocity and justice. The question is how to make this claim applicable and concrete in order to reverse the fact that child poverty place children in an undignifying situation.

If the question is how to reverse it, how to re-dignify that child, and if a child living in poverty is undignified due to the reasons given in the two previous sections, then a potential path to reverse those effects may not be just appealing to the child's dignity. Rather, it would warrant the implementation of measures aimed to reduce the impact of the potentially traumatic experience and the multiple effects of shame, namely, trauma and shame-centered interventions as a way of realistically implementing their well-being and granting their dignity (Gubrium, Pellisery and Lødemel, 2014).

Shifting the focus from abstract dignity to concrete measures to re-dignify children in poverty, through mental health programs with a focus on self-esteem- and not only economic measures, might provide better results in changing child poverty dynamics, re-victimizations and persistence of the given situation.

Likewise, putting the focus on the relation between trauma and poverty, and not only on dignity as previously defined, could also serve as an explicit response to criticisms in relation to the relevance of relative poverty in comparison to absolute poverty. That is, one might think that, as the welfare system does not normally lead to child mortality in rich countries, relative child poverty does not really imply a violation of children's rights. In fact, one would say, some minimum standards are granted as these children have theoretically access to education and basic health care (Axford 2012). Nevertheless, emphasizing here the relation between poverty, trauma and shame can be especially useful. It would be a way of justifying how both forms of poverty imply damage to the child, and it entails an instance of injustice and a lack of respect to the child's identity, even if some basic material needs are met - in the

same way in which we would accept it so if child sexual abuse or emotional neglect were the case.

For these reasons, we advocate for an implementation of mental health measures and an increase in the awareness of their key role to rebuild broken identities. As R. Walker recognized himself, "while dignity might not be the perfect antonym of shame or a complete antidote to shame induced by poverty, policies that dignify should help build self-esteem" (R. Walker et al. 2013, 231). As a result, the key concept should be self-esteem and no intangible dignity, especially if poverty is seen through the lens of trauma.

To put it differently, in order to increase the efficacy or pragmatism of claims that point to dignity as a key concept to reverse the negative effects of poverty-related shame and trauma on children, we suggest to articulate a discourse based of the reconstruction of children's self-esteem as a way of re-dignification, by means of psychological prevention and intervention, as well as accessible mental health services basic in the measures against child poverty.

In the same way in which, when it comes to other potentially traumatic events, the agents of justice try to implement measures to avoid the child's exposure to that potentially dangerous situation, a preventive perspective is key in fighting child poverty too. Focusing exclusively on income-measures, on the one hand, may obscure this as well as it may be at risk of being blind to differences among individuals and their personal skills to transform those resources. On the other hand, an exclusive focus on subjective levels of wellbeing may perpetuate the unfair situation due to helplessness, conformism, adaptation, etc. In other words, apparent indicators of wellbeing may actually be a sign of the effects caused by the traumatic situation. Thus, poverty-related trauma should be fought before the damage is already done and through a variety of social, political and economic preventive measures. This, in turn, would require the effective commitment of the mentioned agents of justice and their coordination.

That being said, in terms of psychological intervention, two complementary ways of preventing the effects of poverty related trauma would the following.

- 1. Trauma-related interventions. These interventions are aimed towards reducing the sense of threat and helplessness endured by traumatized children, by means of the working through of traumatic experiences as well as interventions that strengthen secure attachment within the family or the community. By treating trauma, feelings of agency and autonomy may flourish, while self-disgust, guilt and other shame-related feelings may be reduced.
- 2. Identity-related interventions. These include psychosocial interventions that help children revise their self-concept and their social position within their family or larger groups (peers, community). Also, these interventions may use healthy identifications (with secure attachment figures, therapists, peers, etc.) in order to build a strong, healthy sense of oneself and one's worthiness.

Both would connect directly to the idea of self-esteem and would eventually re-dignify the child. In doing so, the circle of poverty could eventually be also broken and surpassed.

IV. CONCLUSION

We have defended mental health interventions as a way to re-dignify children in especially vulnerable situations such as child poverty. In doing so, we have pointed out the crucial role of mental health measures as a way to bring children's rights to reality, also when the trigger may be an economic or material one.

In order to support this claim we have delved into the connections between trauma and shame in relation to child poverty, as a fruitful way to avoid the frequent scenario in which many instances of injustice go unnoticed until the consequences are too severe and the problems have already crystalized. This, in turn, could help establish an inclusive vision on the problem in terms of policy design, to both prevent and alleviate the impact of poverty on children. When poverty is approached not only as a side-effect of a given economic system, or as a problem related to the lack of material and social capital, but as a potentially traumatic experience with a tremendous impact on the child personal development, then the justification and the understanding of the need for mental health preventive and palliative measures may become clearer.

In this sense, the claims we have defended throughout this article could contribute to see child poverty also as a problem of public mental health, which demands specific measures on this field, beyond the economic ones, for the sake of protecting children's basic rights.

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