



ISSN (Impreso): xxxx – xxxx  
ISSN (Digital): xxxx – xxxx

Revista Científica Disciplinares, 1(1), 2022

## ARTÍCULOS DE INVESTIGACIÓN

### Contributions of social neuroscience in the intervention with disintegrated families

Contribuciones de la neurociencia social en la intervención con familias desintegradas

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**Recibido:** 20/08/2022

**Aceptado:** 09/09/2022

**Publicado:** 11/11/2022

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## Resumen

Se estima que por cada año que una niña o niño menor de 3 años vive en un albergue, pierde 4 meses de su desarrollo (Fornara, 2017). Para el 2016 en el Perú, 4 de cada 100 niños no vivían con sus padres biológicos y 2 de cada 100 niños habían perdido a sus padres (INEI, 2016). Los niños, niñas y adolescentes se separan de sus familias por maltrato activo, negligencia, problemas de internalización, conductas antisociales y autodestructivas, inestabilidad emocional y rechazo social. Es relevante incluir el enfoque de las neurociencias sociales en la intervención del trabajador social con niños y familias, integrando el conocimiento sobre el desarrollo cerebral y su relación con las experiencias de los niños separados de sus familias; cuyos efectos aumentan su riesgo de depresión, conductas disruptivas, apegos inseguros, ansiedad y trastornos psicóticos. Objetivo: Valorar los aportes de la neurociencia social para la intervención del Trabajador Social con familias desintegradas. Método: Investigación cualitativa de análisis documental, de tipo descriptivo con diseño sistémico. Participantes: 8 familias con 26 miembros en total y el profesional de Trabajo Social de la institución. Conclusiones: En la intervención del Trabajador Social en Centros de Atención Residencial es significativo realizar un diagnóstico especializado sobre el funcionamiento cerebral en la percepción social, la navegación en el mundo social, las relaciones sociales y el rechazo social que son transversales a los riesgos que originan la desintegración familiar; así como modelar y retroalimentar las decisiones en la autocomprensión, autorregulación, actitudes y prejuicios a partir de un programa de estimulación cognitiva social.

**Palabras clave:** Neurociencia social, familias desintegradas, trabajadores sociales.

## Abstract

It is estimated that for every year that a girl or boy under 3 years old lives in a shelter, they lose 4 months of their development (Fornara, 2017). By 2016 in Peru, 4 out of every 100 children did not live with their biological parents and 2 out of every 100 children had lost their parents (INEI, 2016). Children and adolescents are separated from their families due to active abuse, neglect, internalization problems, antisocial and self-destructive behaviors, emotional instability and social rejection. It is relevant to include the social neuroscience approach in the social worker's intervention with children and families, integrating knowledge about brain development and its relationship with the experiences of children separated from their families; the effects of which increase their risk of

depression, disruptive behaviors, insecure attachments, anxiety and psychotic disorders. Objective: To value the contributions of social neuroscience for the intervention of the Social Worker with disintegrated families. Method: Qualitative research of documentary analysis, descriptive type with systemic design. Participants: 8 families with 26 members in total and the Social Work professional of the institution. Conclusions: In the intervention of the Social Worker in Residential Care Centers it is significant to perform a specialized diagnosis on brain functioning in social perception, navigation in the social world, social relationships and social rejection that are transversal to the risks that originate family disintegration; as well as to model and feedback decisions in self-understanding, self-regulation, attitudes and prejudices based on a program of social cognitive stimulation.

**Key words:** Social neuroscience, disintegrated families, social workers.

## **Introducción**

In Peru, families are being threatened by a series of social risks such as poverty, precarious housing, limited access to basic services, unemployment, low educational level of parents, family size and composition, high fertility rate, unwanted pregnancies and depressed family environments; circumstances that destabilize the human being, children and adolescents are the ones being harmed the most. They're not prepared to assume subsistence responsibilities due to lack of life experience; producing family disintegration, which is the breakup of unity or break in the roles of its members, due to their inability to perform in a conscious and compulsory way. (Mamani et al., 2022).

The problem was identified when the children of disintegrated families in a situation of abandonment or risk are housed in Residential Care Centers, institutions whose purpose is to reintegrate the child into a family, be it the family of origin, extended or adoptive, through different modalities of residential foster care. The family model is an approach to care and pay attention to the child, which considers 4 principles for quality care: Every child needs a parent, and grows in the most natural way with brothers and sisters, in their own home, within the environment of a supportive village. (Cao et al., 2022).

In Arequipa, children and adolescents who have been separated from their families are housed in 34 Residential Care Centers, 88% of which are under the responsibility of the private sector and 12% of which are under the responsibility of the state, and are home to approximately 1,423 children and adolescents deprived of their parents' care. 58% are

male and the other 42% are female. (Mansilla et al., 2022).

The need to achieve family reintegration in Residential Care Centers with a family model is based on the obligation of the Peruvian State to implement support measures and programs aimed at facilitating the return of the child or adolescent to his or her family of origin.

The Angeles Monteagudo Children's Village in Arequipa, Peru, is a village with a family model that has been working on the problem of disintegrated families, through a process of reintegration of children to their origin/extended families. According to the social worker of the Institution, this process presents complications in terms of parental capacity building, re-institutionalization of children in Residential Care Centers, unemployment, labor instability, inadequate parenting styles, addictions, among the most notorious.

Neuroscience research is uncovering the process of brain development and its relationship to the experiences of children separated from their families, the effects of which are increasing their risk of depression, anxiety and psychotic disorders, meaning not only the cost to the individual but also the potential cost to society. Children who go back and forth between their biological and foster family, or who go through multiple foster homes, may develop disruptive behaviors, establish insecure attachments and lack trust, or develop a tendency to become similarly attached to strangers. (Debiec, 2018).

According to Farmer, neuroscientific knowledge enables the understanding of people's behavior, thinking and emotions; therefore the management of the increasing difficulties faced by users due to this increasingly complex and stressful world, providing a broader conceptualization of the challenges faced by the client, recognizing and utilizing all the strengths of the person. (Prabhakar et al., 2022).

Faced with these complications, in the call social brain, the contributions of social neuroscience are considered being the scientific study of the complex functions of the brain, the chemical and electrical interactions of nerve cells, synapses and how all this influences and is influenced by experiences, social relationships, feeding and the situations in which we are. (Arias-González, 2021).

The purpose of the research is to know the contributions of social neuroscience in the Social Worker's professional intervention against the factors that cause family disintegration. In the intervention of the professional that performs in the phases of the family model to achieve the reintegration of the infants to their families.

## **Metodología**

This is a qualitative, descriptive, basic documentary research study with a systemic design to collect (Arias et al., 2021).

Twenty-six members of the 8 origin/extensive families and the Social Worker of the institution participated. The inclusion criteria were: a) Origin/extensive families participating in the reintegration process of their children from 2019-2020, b) Who has permission to visit their children and c) Who participates in integration activities of the Residential Care Centers. The subjects of the study made explicit their verbal and written consent to participate in the research.

Bibliographic and videographic worksheets measure the variable: social neuroscience, socioeconomic and family cards. In-depth interview with the Social Work professional. The observation units are: reports, socio-family records, home visit reports, records of participation.

We began with the mapping of Residential Care Centers with a family model that develops the process of reintegration of infants to their families. Prior request and authorization of the director for the execution of the research, the verbal and written informed consent of the voluntary authorization applied to the participants. With the application of the instruments, the participant population was identified and the purpose and activities of the study were explained to them (Arias et al., 2020).

Then, the review, systematization, classification according to the validated instrument, giving reliability to the data obtained.

## **Resultados**

The family of origin is of the extended type, composed of 3 to 5 members, with a monthly income of S/. 800 to S/. 950.00. The average age of the parents is adult and the children's age ranges from 6-15 years old in the childhood and adolescent stages of development. However, the socio-familial problem that led the minor to enter the Children's Villages was the moral and material abandonment. Thus, demonstrating the situation of family disintegration that triggers the rupture of family ties, breakage of roles and the unsatisfaction of needs.

## **Discusión**

This research points out that the 26 minors sheltered in the Sor Ana de los Ángeles Monteagudo Residential Care Center, were separated from their families due to parental

neglect. Statistics indicate that 6 out of a 1000 children are at risk of family unprotection due to family care neglect or other factors such as violence, which has led them to a situation of abandonment (Gonzales, et al., 2022).

The research revealed that out of 75% of the dysfunctional families studied, negligence is the main reason for family disintegration. Corroborated by De Aza et al. (2005) who argue that dysfunctional families that abandon children in the first years of their life cycle, give to society a group of citizens who are fearful, mistreated, abused and whose rights are violated. Likewise, Puma (2022) indicated that child abandonment is a risk factor that may contribute to poor cognitive and executive performance, rapid cognitive decline, increased negative and depressive cognitions, high sensitivity to social threats and low self-esteem, among other difficulties.

The results of this research considered risk factors for family disintegration were abandonment, lack of protection, addictions, unsatisfied needs, and poverty. In agreement with Carrillo (2020), who indicates that the risk factors that most affect situations of lack of protection of minors are those of social marginalization, poverty, abandonment, drug addiction, mental health problems of the parents, destructured families and aggressions against minors committed within the family environment.

The study of families showed that family disprotection occurred 13% of the time, where parents exposed minors to situations that were against their physical and moral integrity. González, et al (2022), who concluded that feeling socially rejected increases sensitivity to pain, while social support reduces sensitivity to pain.

The child population covered by this research was in a situation of moral and material abandonment and poverty, a problem that reflects a national panorama where 45.4% of the 10 million 572 thousand children and adolescents in Peru are in a situation of poverty. (Gehlot, 2022).

Furthermore, the research showed that 50% of the families studied have incomes of between S/.800.00 to S/.950.00, which characterizes them as a population living in poverty. In response, Resptrepo-Méndez et al. (2015) point out that the probability of children suffering from mental disorders also increases if they live in situations of poverty or economic deprivation during the first years of life, as well as Aldler et al. (2012) argue

that children living in poverty have a higher incidence of behavioral disorders, social adaptation problems and childhood depression.

The present research revealed that unemployment and labor instability are some of the risk factors for family disintegration. Indeed, contributions in social neuroscience show that unemployment in a family triples the incidence of psychosis and phobias and doubles anxiety and depression with respect to the rest of the population (González y Chávez, 2021).

Ramos, et al. (2022) indicates how in families where at least one person has an addiction, it is common to find alterations in family relationships such as: manipulations, overprotection, codependence, etc. Consequently, minors have fewer social adaptation skills showing a breakdown of family roles constituting Rodriguez, Montes de Oca, & Hernandez, (2014) a lack in the socializing function of the family that should guide the active participation of the minor in their social circle;

educational, instilling culture; protection, contributing to emotional, affective and axiological stability, where behaviors and affection are learned.

Quantitative research by Eiden, (2001) and Sydney, (2002) shows that addicted parents have low tolerance for child behavior, use physical punishment and intimidating discipline more frequently, which is accompanied by passivity, indulgence, lack of parental control and supervision. Sydney (2002) indicates that between 43% and 79% of child victims of violence had at least one parent addicted to psychoactive drugs. Corroborated by Leventhal, Forsyth, K, Johnson, & Schroeder, (1997), who found that in families with substance use disorder, separation between parents and children occurs at the 1st/3rd of 2 years of age, a key period for building a stable relationship pattern. In addition, Terplan, Smith, & Kozloski, (2009) and French, (2013) note that approximately 80% of parents with poor custody and supervision of their children suffer from substance-related disorders. Indeed, Toth and Gravener (2012) refer that children of parents addicted to alcohol and substance addicted parents at risk of neglect usually experience domestic and other violence, physical harm, social isolation and stigma.

Separation of minors from their families due to parental addictions such as drug and alcohol addiction constitutes 13% of occurrences. Comparing our results with the situation in Europe: each year, between 6.5 and 11% of addicted women become pregnant

and give birth to a child. Hyperactivity, impulsivity, difficulty concentrating and motor planning were observed in children who were exposed to psychoactive substances during the prenatal period as reported by Gottwald & Thurman, (1994). Faden & Graubard, (2000) point out that children exposed to prenatal alcohol, marijuana and nicotine abuse have a higher level of motor activity. According to Suchman, parental addiction may be related to the risk of violence, but at the same time the child's irritability may aggravate stress and the desire to drink and/or take psychoactive drugs on the part of caregivers, which also increases the risk of further addiction and violence.

Contrasting the results of this research the institutionalization was the family model. The family model proposes phases that allow the execution of a process where the Social Work professional directs his actions according to the family dynamics, through the methodology and method, however Labrenz (2014) concludes that in vulnerable families three different levels of intervention must be incorporated when addressing an attachment disorder: from the individual level, a safe environment must be provided; from the family level, significant figures must be included in the treatment; at the community level, networks must be included, from health, education and social welfare institutions. In this way, the intervention is supported through levels according to the predominant family model process in the institution. (Venkateswarlu et al., 2022).

According to the experience of the Social Worker in Residential Care Centers with a family model, it is significant to consider that in the XXI Century minors are digital natives and are exposed to violent content, pornography, bullying, pro-anorexia, pro-bulimia, drugs and alcohol. Therefore, the child's virtual environment has an important influence on their behavior, which in itself constitutes a potential individual and social psychological problem, since consequently the child will reproduce the content they have received and learned. Professional intervention becomes a key point in the construction of a society of well-being and being willing to develop.

Children and youth who have been abused or neglected need safe, stable and nurturing relationships and environments to recover from the trauma they have experienced. In this sense, the most common practices have as a framework the responsibilities of the family, highlighting as a priority protection, education, stimulation, care, responsibility for providing conditions (economic, emotional, material and environmental), guidance,



socialization and in some cases participation. Likewise, among the most evidenced actions, we can highlight those of discipline and correction, socialization, communication mechanisms, ways of dealing with sexuality, manifestations of affection or non-affection and the daily accompaniment from the dynamics of health, education and recreation.

Rohini et al. (2022) demonstrated that severe negligence in early life can interfere with normal brain development, in their research they noted that institutionally educated children showed elevated symptoms of depression and anxiety at 8 years of age, compared to non-neglected children; furthermore, at 12 years of age there was evidence of remediation in internalizing symptoms for girls, but not for boys, who received early intervention through foster care placement.

States that these children are not only emotionally deprived, but are also at risk of suffering types of consequences of abuse such as emotional and behavioral problems, poor academic performance, antisocial behaviors, risk of psychiatric disorders such as depression, anxiety disorders and physical illnesses, substance use and abuse. Furthermore, according to Faden & Graubard, (2000) and Suchman, DeCoste, Leigh & Borelli, (2010) it has been proven that one third of those who had been abused in childhood will be abusers in the future.

The present research reveals that the social adaptation skills of adolescents can be restored by improving family dynamics in terms of roles, authority, love, strengthening family ties and preparation for adult life. Linked to this, a brain magnetic resonance imaging study highlighted the behavioral differences of the young person in a risky situation compared to the adult individual, which are related to the limitations of the adolescent to anticipate the consequences of their actions. For this reason, it is not appropriate to demand that the adolescent has the same capacity as the adult in the decision-making process, since his brain has not completed its maturation period, and there is a certain correlation between moral behavior and brain development. (Muñoz et al., 2022).

The level of attachment is affected by adverse early experiences so that it is significant that in the intervention in Family Model Care Centers the types of attachment and the impact of these on future relationships where trust and communication emerge in the recognition of emotions and the level of attachment are identified, since the family context intervenes in the development of antisocial behavior in children (Juby &

Farrington, 2001). In a study, Toth and Gravener (2012) demonstrated that children with attachment disorders generally consider themselves as unlovable and others as untrustworthy.

Supported by Quiroga (2018) who notes that people with insecure attachment are less empathic individuals, furthermore research has suggested that high levels of attachment insecurity formed through interactions with significant others are associated with a general vulnerability to mental disorders.

In the face of unmet needs, family strengths must be ensured, support must be provided through strategies for effective family functioning, and the routines of daily life within the family must be effectively and satisfactorily maintained.

Based on the above ideas, it is significant to consider in the phase of adaptation of a child that starts with the strengthening of children's ties with families of origin, to assist mental and physical health needs to ensure education and life skills.

The results show that neuroscientific knowledge contributes significantly to the intervention of the Social Worker, enriching his intellectual background, the basis of professional intervention in order to safeguard the child population who having been separated from their families and placed in Residential Care Centers, find themselves in a situation of vulnerability and social disadvantages, thus understanding the functioning of the social brain of the child, his family and all social subsystems will allow the reintegration of the child with his origin, extended or adopted family.

## **Conclusión**

The research revealed that out of 75% of the dysfunctional families studied, negligence is the main reason for family disintegration.

## **Bibliografía**

Adler, N., Bush, N. R., Pantell, & S., M. (2012). *Rigor, vigor, and the study of health disparities*. Obtenido de Proceedings of the National Academy of Sciences Oct 2012, 109 (Supplement 2). Pages. 17154-17159: <https://doi.org/10.1073/pnas.1121399109>

Arias Gonzáles, J. L., Covinos Gallardo, M. R., & Cáceres Chávez, M. (2020). Formulación de los objetivos específicos desde el alcance correlacional en

- trabajos de investigación. *Ciencia Latina Revista Científica Multidisciplinar*, 4(2), 237-247. [https://doi.org/10.37811/cl\\_rcm.v4i2.73](https://doi.org/10.37811/cl_rcm.v4i2.73)
- Arias, G. J., Holgado, J., Tafur, T., & Vásquez, M. (2021). *Metodología de la Investigación. El método ARIAS para hacer el proyecto de tesis*. Editorial INUDI
- Arias-González, J. (2021). Estilos de liderazgo y engagement laboral en analistas de crédito del sector financiero en Arequipa. *Desafíos*, 12(1), e256-e256.
- Cao, F., Zhang, L., Naik, D. A., González, J. L. A., Verma, N., Jain, A., ... & Sharma, A. (2022). Application of Cloud Computing Technology in Computer Secure Storage. *Scientific Programming*.
- Carrillo Izquierdo, A. J. (2020). *Menores en situaciones de desprotección "Las víctimas invisibles"*. Obtenido de Dialnet: <https://dialnet.unirioja.es/servlet/articulo?codigo=7631174>
- Castillo-Acobo, R., Quispe, H., Arias-González, J. y Amaro, C. (2022). Consideraciones de los docentes sobre las barreras de la educación inclusiva. *Revista De Filosofía*, 39
- Debiec. (2018). Separación familiar causa traumas psicológicos en niños. *La Prensa*, pág. 10.
- Faden, V., & Graubard, B. I. (2000). *Maternal substance use during pregnancy and developmental outcome at age three*. Obtenido de Journal of Substance Abuse. Volume 12, Issue 4. Pages. 329-340.: [https://doi.org/10.1016/S0899-3289\(01\)00052-9](https://doi.org/10.1016/S0899-3289(01)00052-9).
- Fornara. (2017). *Vida en Familia y no en albergues. Panorama Cajamarquino*, p.6. Obtenido de <https://issuu.com/panoramacajamarquino.com/docs/pc-04-02-2017/6>
- French, E. (2013). *Substance abuse in pregnancy: compassionate and competent care for the patient in labor*. Obtenido de Clin. Obstet. Gynecol. Pages. 173-177: 10.1097/GRF.0b013e31828030f4
- De Aza Ordoñez, A. J. (2005). *Proceso de socialización y desarrollo de habilidades sociales en los niños del albergue San Rafael. Universidad Nacional Abierta y a*

la distancia. Bogotá. Obtenido de  
<https://repository.unad.edu.co/handle/10596/19996>

Gehlot, A., Ansari, B. K., Arora, D., Anandaram, H., Singh, B., & Arias-González, J. L. (2022, July). Application of Neural Network in the Prediction Models of Machine Learning Based Design. In *2022 International Conference on Innovative Computing, Intelligent Communication and Smart Electrical Systems (ICSES)* (pp. 1-6). IEEE.

Gonzales, J. L. A., Lanchipa-Ale, A. P., Puma, E. G. M., Mansilla, E. B. R., & Laura, P. A. S. (2022). Positive Dimensions of Mental Health and Personality in a Sample of University. *Journal of Medicinal and Chemical Sciences*, 5(7 (Special Issue)), 1215-1223. doi: 10.26655/JMCHEMSCI.2022.7.10

González, J. L. A., & Chávez, M. D. R. C. (2021). Ansiedad escénica y ejecución musical en estudiantes del conservatorio de música en Arequipa, 2020. *ESCENA. Revista de las artes*, 81(1), 170-182.

González, J. L., Gallardo, C., Roger, M., & Cáceres Chávez, M. D. R. (2022). Tecnologías de Información y Comunicación versus Upskilling y Reskilling de colaboradores públicos. *Revista Venezolana de Gerencia (RVG)*, 27(98), 565-579.

Gottwald, S., & Thurman, S. (1994). *The Effects of Prenatal Cocaine Exposure on Mother—Infant Interaction and Infant Arousal in the Newborn Period*. Obtenido de Topics in Early Childhood Special Education. Pages. 217-231: 10.1177/027112149401400206

INEI. (2016). *Estado de la Niñez en el Perú*. Obtenido de © Fondo de las Naciones Unidas para la Infancia: [https://www.inei.gob.pe/media/MenuRecursivo/publicaciones\\_digitales/Est/Lib0930/Libro.pd](https://www.inei.gob.pe/media/MenuRecursivo/publicaciones_digitales/Est/Lib0930/Libro.pd)

Juby, H., & Farrington, D. P. (2001). *Desencadenar el vínculo entre las familias desruptadas y la delincuencia*. Obtenido de The British Journal of Criminology: <http://www.jstor.org/stable/23638892>

- Labrenz, C. A. (2014). *La búsqueda del paraíso: el apego y la reparación de la infancia perdida en niños vulnerados en sus derechos*. Obtenido de Pontificia Universidad Católica de Chile. *Revista Trabajo Social*: <https://doi.org/10.7764/rts.86.3-12>
- Mamani, W. C., Manrique, G. M. L., Madrid, S. D. P. C., Herrera, E. E., Acosta, D. B., Rivas-Diaz, R. R., ... & Ramos, F. S. S. (2022). The Role of Entrepreneurship and Green Innovation Intention on Sustainable Development: Moderating Impact of Inclusive Leadership. *AgBioForum*, 24(1).
- Mansilla, E. B. R., Castillo-Acobo, R. Y., Puma, E. G. M., Maquera, Y. M., Gonzales, J. L. A., & Vasquez-Pauca, M. M. J. (2022). Stress in University Teachers in the Framework of the Post-Pandemic Face-To-Face Academic Resumption. *Journal of Medicinal and Chemical Sciences*, 5(6), 1040-1047. doi: 10.26655/JMCHEMSCI.2022.6.17
- Muñoz, J. L. R., Ojeda, F. M., Jurado, D. L. A., Peña, P. F. P., Carranza, C. P. M., Berríos, H. Q., ... & Vasquez-Pauca, M. J. (2022). Systematic Review of Adaptive Learning Technology for Learning in Higher Education. *Eurasian Journal of Educational Research*, 98(98), 221-233.
- Prabhakar, P., Arora, S., Khosla, A., Beniwal, R. K., Arthur, M. N., Arias-González, J. L., & Areche, F. O. (2022). Cyber Security of Smart Metering Infrastructure Using Median Absolute Deviation Methodology. *Security and Communication Networks*, 2022.
- Puma, E. G. M. (2022). How universities have responded to E-learning as a result of Covid-19 challenges. *Periodicals of Engineering and Natural Sciences (PEN)*, 10(3), 40-47.
- Quiroga, M. (2018). *Trastornos asociados al apego, últimas aportaciones*. XIX Congreso Virtual Internacional de Psiquiatría. Obtenido de <https://psiquiatria.com/congresos/pdf/1-1-2018-4-pon5%5b1%5d.pdf>
- Ramos, W. R. M., Herrera, E. E., Manrique, G. M. L., Acevedo, J. E. R., Aguagallo, C. F. I., Palacios-Jimenez, A. S., ... & González, J. L. A. (2022). Responsible leadership: a comparative study between Peruvian national and private universities. *Eurasian Journal of Educational Research*, 99(99).

- Restrepo Méndez, M., Barros, A., Requejo, J., Durán, P., Serpa, L., & França, G. (2015). *Progress in reducing inequalities in reproductive, maternal, newborn, and child health in Latin America and the Caribbean: an unfinished agenda*. Obtenido de Pan American Journal of Public Health. Pages. 9-16: <http://www.scopus.com/inward/record.url?scp=84944029542&partnerID=8YFLogxK>
- Rohini, P., Tripathi, S., Preeti, C. M., Renuka, A., Gonzales, J. L. A., & Gangodkar, D. (2022, April). A study on the adoption of Wireless Communication in Big Data Analytics Using Neural Networks and Deep Learning. In *2022 2nd International Conference on Advance Computing and Innovative Technologies in Engineering (ICACITE)* (pp. 1071-1076). IEEE.
- Rodríguez, M., Montes de Oca, R., & Hernandez, O. (2014). *La familia en el cuidado de la salud*. Obtenido de Revista Médica Electrónica: [http://scielo.sld.cu/scielo.php?script=sci\\_arttext&pid=S1684-18242014000400008&lng=es&t](http://scielo.sld.cu/scielo.php?script=sci_arttext&pid=S1684-18242014000400008&lng=es&t)
- Rodríguez, C. M. R., Romani, U. I., Arias-González, J. L., & Barrial, D. (2022). Responsible Leadership as a Strength of Democratic Companies. *Revista De Filosofía*, 39, 433-443. <https://doi.org/10.5281/zenodo.7309417>
- Suchman, N., DeCoste, C., Leigh, D., & Borelli, J. (2010). *Reflective functioning in mothers with drug use disorders: Implications for dyadic interactions with infants and toddlers*. Obtenido de Attach. Hum. Dev. 12(6), Pages. 567-585: <https://doi.org/10.1080/14616734.2010.501988>
- Sydney, L. H. (2002). *Studies of prenatal exposure to drugs: Focusing on parental care of children*. Obtenido de Neurotoxicology and Teratology. Volume 24, Issue 3. Pages 329-337: [https://doi.org/10.1016/S0892-0362\(02\)00195-2](https://doi.org/10.1016/S0892-0362(02)00195-2).
- Toth, S., & Gravener, J. (2012). *Bridging research and practice: relational interventions for maltreated children*. Obtenido de Child Adolesc Ment Health, 1. Pages. 131-138: <https://doi.org/10.1111/j.1475-3588.2011.00638>.
- Venkateswarlu, Y., Baskar, K., Wongchai, A., Gauri Shankar, V., Paolo Martel Carranza, C., González, J. L. A., & Murali Dharan, A. R. (2022). An Efficient Outlier

Detection with Deep Learning-Based Financial Crisis Prediction Model in Big Data Environment. *Computational Intelligence and Neuroscience*, 2022.