

Autumn Journal Highlights Ernestine Briggs, PhD

Journal Highlights informs readers of current research on various aspects of child maltreatment. APSAC members are invited to contribute by sending a copy of current articles (preferably published within the past 6 months) along with a two- or three-sentence review to: Ronald C. Hughes, PhD, Institute for Human Services, 1706 East Broad Street, Columbus, Ohio 43203 (fax: 614-251-6005 or phone: 614-251-6000).

From the Editor's Desk

This issue contains both the autumn and winter "Journal Highlights" columns. Ernestine Briggs, PhD, wrote the autumn column. I gratefully welcome Columbus, Ohio, psychologists Judith S. Rycus, PhD, and Ronald C. Hughes, PhD, who wrote the winter "Journal Highlights" and have agreed to continue as regular "Journal Highlights" columnists while Dr. Briggs is on maternity leave to care for her new son. Congratulations to Ernestine and thank you to Ron and Judy.

Erna Olafson, PhD, PsyD, Editor in Chief

Differential Impact of Support on Adjustment After Sexual Abuse

This study investigated age and gender differences in perceived emotional support in children and adolescents who experienced sexual abuse from the time of discovery to 1 year later. Also examined were the relations among sources of support and adjustment and whether support explained resilience. One hundred forty-seven sexually abused youth were interviewed at the time of discovery and 1 year later. Information gathered included severity of the sexual abuse, satisfaction with support from caregivers, same-sex and other-sex friends, feelings of shame about the abuse, and attributional style. Satisfaction with support was differentially related to adjustment. Youth who reported more satisfaction with caregiver support at discovery reported less depression, better self-esteem but more sexual anxiety 1 year later. More satisfaction with support from friends predicted lower self-esteem but less sexual anxiety. More satisfaction with initial caregiver support at discovery predicted better parent- and teacher-rated adjustment 1 year later.

Rosenthal, S., Feiring, C., & Taska, L. (2003). Emotional support and adjustment over a year's time following sexual abuse discovery. *Child Abuse & Neglect, 27*(6), 641-661.

Acoustic Startle in Maltreated Children

This study investigated the eyeblink component of acoustic startle reactions in maltreated children. Previous research indicated that acoustic startle is enhanced in adult males with posttraumatic stress disorders (PTSD), whereas findings on women with PTSD have been inconsistent. Results suggested that maltreated boys with PTSD, particularly those who had been physically abused, responded to increases in startle probe loudness with smaller increments in amplitude of startle eyeblink and smaller reductions in blink latency than did comparison boys. Results for girls were inconsistent: younger maltreated girls had smaller startle amplitude and slower onset latency than controls, whereas older maltreated girls exhibited the opposite pattern.

Klorman, R., Cicchetti, D., Thatcher, J. E., & Ison, J. R. (2003). Acoustic startle in maltreated children. *Journal of Abnormal Child Psychology, 31*(4), 359-370.

Maltreatment Among Children of Early Childbearers

This study explored outcomes among three groups of childbearers: mothers who began childbearing as younger adolescents (age 17 yrs or younger), older adolescents (age 18 to 19 yrs), or adults (age 20 to 24 yrs). Results suggested that sociodemographic risk factors persisted into later life for adolescent childbearers. Among younger adolescent childbearers (age 17 yrs or younger), mothers of maltreated and nonmaltreated children did not differ on self-perceptions of social support, competence, or depressive symptoms. Sociodemographic differences between these two groups suggested that younger adolescent childbearers who do not overcome sociodemographic deficits common to early childbearing are at greatest risk for child maltreatment.

Kinard, E. M. (2003). Adolescent childbearers in later life: Maltreatment of their school-age children. *Journal of Family Issues, 24*(5), 687-710.

Intervention for Sexual Abuse Evaluations Using Video Coloscopy

Examined adolescents' responses to a medical examination, which included the use of video colposcopy, were conducted during an investigation of possible child sexual abuse. The study provided an educational intervention regarding genital anatomy and a discussion about abuse issues and sexually transmitted infections. An exit interview assessed perceptions of the medical examination and video colposcopy and reassessed anxiety, using the state portion of the State Trait Anxiety Inventory. Follow-up interviews occurred 3 months later, during which knowledge of reproduction and genital anatomy was reassessed. Seventy-nine percent of the participants chose to watch the examination on the video monitor. The participants' postexamination perceptions were significantly more positive than their preexamination anticipations.

Mears, C. J., Heflin, A. H., Finkel, M. A., Deblinger, E., & Steer, R. A. (2003). Adolescents' responses to sexual abuse evaluation including the use of video colposcopy. *Journal of Adolescent Health, 33*(1), 18-24.

Effectiveness of Group Therapy for IPV

This small pilot study evaluated the effectiveness of group therapy for incarcerated women with histories of childhood sexual and/or physical abuse. The intervention was based on a two-stage model of trauma treatment and included Dialectical Behavior Therapy skills and writing assignments. Twenty-four participants were randomly assigned to group treatment (13 completed) and 25 to a no-contact comparison condition (18 completed). The Beck Depression Inventory, Inventory of Interpersonal Problems, and Trauma Symptom Inventory were used to explore treatment effects. Results suggested reductions in PTSD, mood, and interpersonal symptoms in the treatment group.

Bradley, R. G., & Follingstad, D. R. (2003). Group therapy for incarcerated women who experienced interpersonal violence: A pilot study. *Journal of Traumatic Stress, 16*(4), 337-340.

Process and Adherence Factors in a CBT Treatment Program for Men

This study used multilevel modeling to examine process and treatment adherence factors as predictors of collateral partner reports of

abuse following participation in a cognitive-behavioral group treatment program for partner violent men (N = 107). Therapist working-alliance ratings predicted lower levels of physical and psychological abuse at the 6-month follow-up and were the strongest predictors of outcome. Greater group cohesion during treatment, assessed by client report, also predicted lower physical and psychological abuse at follow-up. The findings support the use of a collaborative therapeutic environment to induce change among partner violent men.

Taft, C. T., Murphy, C. M., King, D. W., Musser, P. H., & DeDeyn, J. M. (2003). Process and treatment adherence factors in group cognitive-behavioral therapy for partner violent men. *Journal of Consulting & Clinical Psychology, 71*(4), 812-820.

Intergenerational Transmission of Partner Violence

Five hundred forty-three children were followed over 20 years to test the independent effects of parenting—exposure to domestic violence between parents (ETDV), maltreatment, adolescent disruptive behavior disorders, and emerging adult substance abuse disorders—on the risk of violence to and from an adult partner. Conduct disorder (CD) was the strongest risk for perpetrating partner violence for both sexes, followed by ETDV and power assertive punishment. The effect of child abuse was attributable to these three risks. ETDV conferred the greatest risk of receiving partner violence; CD increased the odds of receiving partner violence but did not mediate this effect. Child physical abuse and CD in adolescence were strong independent risks for injury to a partner. Implications for prevention are highlighted.

Ehrensaft, M. K., Cohen, P., Brown, J., Smailes, E., Chen, H., & Johnson, J. G. (2003). Intergenerational transmission of partner violence: A 20-year prospective study. *Journal of Consulting & Clinical Psychology, 71*(4), 741-753.

Cortisol Responsivity for Abuse-Related PTSD

This study assessed cortisol responsivity to a stressful cognitive challenge in patients with PTSD related to childhood abuse. Salivary cortisol levels, as well as heart rate and blood pressure, were measured before and after a stressful cognitive challenge in patients with abuse-related PTSD (N=23) and healthy comparison participants (N=18). PTSD patients had 61% higher group mean cortisol levels in the time period leading up to the cognitive challenge, and 46% higher cortisol levels during the time period of the cognitive challenge, compared to controls. Both PTSD patients and controls had a similar 66% to 68% increase in cortisol levels from their own baseline with the cognitive challenge. Following the cognitive challenge, cortisol levels fell in both groups and were similar in PTSD and control groups. PTSD patients appeared to have an increased cortisol response in anticipation of a cognitive challenge relative to controls.

Bremner, J. D., Vythilingam, M., Vermetten, E., Adil, J., Khan, S., Nazeer, A., Afzal, N., McGlashan, T., Elzinga, B., Anderson, G. M., Heninger, G., Southwick, S. M., & Charney, D. S. (2003). Cortisol response to a cognitive stress challenge in posttraumatic stress disorder (PTSD) related to childhood abuse. *Psychoneuroendocrinology, 28*(6), 733-750.

Exposure to Domestic Violence: Terminology and Taxonomy

Three definitional issues regarding children exposed to domestic violence were examined in this study. First, the multiple ways in which a child can be exposed to violence were discussed and a taxonomy of 10 types of exposure was proposed. Nine key characteristics of domestic violence, as they relate to children and children's exposure, were outlined. The third issue addressed concerns why children who are exposed to domestic violence can be considered victims of child maltreatment. These children, by nature of their experience in the home, are psychologically maltreated and are also at high risk for physical abuse and some risk for sexual abuse. The author concluded with a discussion of empirical questions concerning these definitions and taxonomies and their interrelations.

Holden, G. W. (2003). Children exposed to domestic violence and child abuse: Terminology and taxonomy. *Clinical Child & Family Psychology Review, 6*(3), 151-160.

Psychological Abuse Associated with IPV

This study described the prevalence and correlates of psychological abuse in a sample of 3,370 adult women assaulted by male intimate partners. History of physical and psychological abuse and other incident characteristics were collected. Prior psychological abuse was reported by most (80%) of the women, and rarely did physical aggression occur in the absence of psychological abuse. Men with a history of extra familial criminality and substance abuse were more likely to engage in psychological abuse, but demographic characteristics of the offenders showed little relationship to the use of these emotionally abusive tactics. Results also suggested that psychological abuse, independent of physical aggression, was related to victims' perceived threat and plans to leave the relationship. The authors discuss the need for evaluation of psychological abuse, independent of physical abuse, to understand its impact on victims.

Henning, K., & Klesges, L. M. (2003). Prevalence and characteristics of psychological abuse reported by court-involved battered women. *Journal of Interpersonal Violence, 18*(8), 857-871.



Winter Journal Highlights Judith S. Rycus, PhD, MSW Ronald C. Hughes, PhD, MScSA

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Erna Olafson, PhD, PsyD, Editor in Chief

How Drug Use and Treatment Relate to Family Reunification

This study used Cox regression to assess the relationship among parental drug use, drug treatment compliance, and reunification of children in substitute care with their families. Data were collected from in-person surveys of 277 respondents from a 508-person probability sample of parents having an open DCFS case in Cook County, Illinois, as of June 1995. The study found that case duration, infant placement, and kinship placement decreased the rate of reunification. The study also suggested the possibility that ongoing parental drug abuse, independent of its effects on parenting, decreased the likelihood of caseworkers' willingness to recommend reunification. The strongest finding was the effect of drug treatment compliance on reunification. Completing drug treatment, in itself, substantially increased the rate of reunification, even in the presence of indicators of ongoing drug use. The authors discuss the difficulties experienced by caseworkers in determining the most appropriate case outcomes to affect their decisions to pursue reunification.

Smith, Brenda D. (2003). How parental drug use and drug treatment compliance relate to family reunification. *Child Welfare, LXXXII, 3*, 335-365

Child Maltreatment Associated With Adolescent Behavior Problems and Depressive Symptomatology

This study focused on the self-reported experience of depressive symptomatology and child abuse in a sample of adolescents with severe behavior problems. Data were collected from 81 adolescents, ages 11 to 18, including 46 boys and 35 girls, receiving public children's services in the Netherlands. Thirty-two percent of the adolescents reported depressive symptomatology. Of these children, 62.8% had been physically abused and 20+% had been sexually abused. A majority of the adolescents who met the criteria for Major Depressive Episode reported a combination of neglect, physical abuse, or sexual abuse. The study concluded that for adolescents with behavior problems, there is a distinct group who has depres-

sive symptomatology, and this group has a significantly higher reported incidence of abuse, including combinations of neglect, sexual abuse, and physical abuse.

Westenberg, E. & Garnefski, N. (2003). Depressive symptomatology and child abuse in adolescents with behavior problems. *Child and Adolescent Social Work Journal, 20*(3), 197-210.

Correlates of Child Neglect

This study reported the findings of an extensive review of the empirical literature on the correlates of child neglect. An initial group of 68 articles, published between 1990 and 2002, were reviewed to identify those that focused exclusively on the correlates of physical neglect, neglectful supervision, or neglect as an aggregate criterion variable. A total of 24 articles met the final criteria for inclusion in the review. All but one study used nonexperimental designs, including secondary data analysis, ex post facto, and survey methods. Two studies were longitudinal; the remainder were cross-sectional. The study samples were generally large, but the majority used nonprobability sampling. The author determined that the limited number of studies specific to neglect, and the diversity in definitions and study criteria found in these studies, made it challenging to draw conclusions and generalize them beyond this review. However, the composite data from these studies do offer a comprehensive picture of many of the correlates of child neglect. These characteristics are fully reported in this study, divided into categories of child characteristics, home environment, parental characteristics, and social environment. The author concluded that neglect has been insufficiently studied, and that multilevel comparison research is needed to adequately describe the correlates of neglect. Several topics are recommended for further research, including the need for exploration of age-specific indicators of neglect.

Connell-Carrick, K. (2003). A critical review of the empirical literature: Identifying correlates of child neglect. *Child and Adolescent Social Work Journal, 20*(5), 389-425.

Prevalence and Psychological Sequelae of Self-Reported Childhood Physical and Sexual Abuse

This study examined the prevalence and psychological sequelae of childhood sexual and physical abuse in adults from the general population. A written survey questionnaire was distributed to a geographically stratified, random sample of 1,442 adult subjects from the United States. A total of 64.8% (N=935) returned substantially completed surveys. The questionnaires incorporated the Traumatic Events Survey (TES), which evaluates a wide range of childhood and adult traumas, and the Trauma Symptom Inventory (TSI), a 100-item test of posttraumatic stress and other psychological sequelae of traumatic events. A total of 66 men (14.2%) and 152 women (32.3%) reported childhood experiences that satisfied the criteria for sexual abuse. One hundred three males (22.2%) and 92 females (19.5%) reported childhood experiences satisfying criteria for physical abuse. A total of 337 subjects (36%) reported at least one instance of sexual or physical interpersonal victimization at age 18 or later. Many of this study's findings were reported to be consistent with those of previous studies. Childhood sexual abuse was found to be a significant risk factor for a range of psychological symptoms in the general population, including elevations on all 10 scales of the TSI, even after controlling for other variables. Physical

abuse was also associated with TSI scores, although to a lesser extent than sexual abuse. The authors contend that this and other studies reinforce the proposition that childhood sexual and physical abuse is endemic in our culture, and that sexual abuse is likely to have significant long-term effects.

Briere, J., & Elliott, D.M. (2003). Prevalence and psychological sequelae of self-reported childhood physical and sexual abuse in a general population sample of men and women. *Child Abuse & Neglect*, 27, 1205-1222.

Mainstream Service Programs Work for Minority Youth

This study reported findings from a meta-analysis of research results regarding the effectiveness of mainstream service programs for minority juvenile delinquents. Three hundred and five studies were selected from a large meta-analytic database, which included empirical research on the effects of juvenile delinquency programs conducted between 1950 and 1996. The study addressed the question of whether mainstream interventions that are not culturally tailored for minority youth have positive outcomes regarding subsequent social behavior, academic performance, and sociomoral development of minority youth. The results showed positive overall intervention effects with ethnic minority respondents on their delinquent behavior, school participation, peer relationships, academic achievement, behavior problems, psychological adjustment, and attitudes. The authors concluded that the best interpretation of the study's data is that mainstream treatments for juvenile delinquents are generally effective, and no less effective for ethnic minority youth than white youth.

Wilson, S.J., Lipsey, M.W., Soydan, H., (2003) Are mainstream programs for juvenile delinquents less effective with minority youth than majority youth? A meta-analysis of outcome research. *Research on Social Work Practice*, 13(1), 3-26.

Cross-type Recidivism Among Child Maltreatment Victims and Perpetrators

This study investigated the extent to which child maltreatment victims and perpetrators were reported for different types of maltreatment over time (cross-type recidivism.) The study also examined whether individual, community, or child welfare service variables were associated with a tendency for the first recidivism event to be the same as the initial report, in situations of sexual abuse, physical abuse, and neglect. Cross-type recidivism was examined prospectively for 4.5 years by linking statewide administrative data on child abuse reporting, at both the child and perpetrator levels, with data on child welfare services and census information. Data analyses included descriptive and logistic regression techniques. The study found substantial cross-type recidivism over time, and the majority of recidivism events involved cross-type recidivism. Further, nonneglect cases that were re-reported to child welfare agencies were likely to return for neglect, and chronically reported cases were highly likely to involve multiple types of maltreatment. The authors present implications of the findings for practice, policy, research, and theory development.

Jonson-Reid, M., Drake, B., Chung, S., & Way, I. (2003). Cross-type recidivism among child maltreatment victims and perpetrators. *Child Abuse & Neglect*, 27, 899-917.

Child Witnesses of Sexual Abuse Provide Relevant Details of Incident

This study was undertaken to determine the relative authenticity of child witnesses to sexual abuse. Reports made by children who witnessed sexual abuse incidents were compared to the reports of alleged child sexual abuse victims. Matched groups of 26 alleged victims of sexual abuse and 26 children who witnessed but did not experience similar events were interviewed about the alleged abuse. All children were interviewed using the NICHD investigative interview protocol. Using open-ended prompts, interviewers were able to elicit more information from witnesses than from victims. However, witnesses and victims provided similar amounts of information about the abuse incidents. The authors conclude that young witnesses, when given open-ended prompts, can provide substantial amounts of forensically relevant details regarding witnessed sexual abuse.

Lamb, M.E., Sternberg, K.J., Orbach, Y., Harshkowitz, I., & Horowitz, D. (2003). Differences between accounts provided by witnesses and alleged victims of child sexual abuse. *Child Abuse & Neglect*, 27(9), 1019-1031.

Co-occurring Forms of Child Maltreatment and Adult Adjustment

This study examined the nature and co-occurrence of various forms of child maltreatment (sexual, physical, emotional, and witnessing violence) reported by Latina college students; and, it explored co-existing maltreatment types and acculturation status as possible contributors to long-term adjustment difficulties. One hundred twelve Latina undergraduate students completed three measures: 1) the Child Maltreatment Interview Schedule-Short Form (CMIS-SF), which utilizes a self-report format to assess the presence, frequency, duration, and severity of childhood experiences of sexual abuse, physical abuse, emotional abuse, and witnessing domestic violence; 2) the Trauma Symptom Checklist-40 (TSC-40), which assesses adult symptoms associated with traumatic childhood or adult experiences; and 3) the Acculturation Rating Scale for Mexican Americans-2nd Edition (ARSMA-11), which assesses the degree of affiliation with each culture in terms of language use, ethnic identity, cultural heritage, ethnic behaviors, and ethnic interaction. The study found that 29% of participants reported being subjected to two or more forms of maltreatment as children. This subgroup reported more trauma symptoms than did those who experienced a single form of maltreatment or none at all. They also reported more severe maltreatment characteristics within each type. The findings did not support a direct association between acculturation and long-term adjustment. The authors suggest that future research focus both on the presence and impact of concomitant forms of maltreatment, as well as the severity of maltreatment of any form when studying possible long-term effects of childhood maltreatment experiences.

Clemmons, J., DiLillo, D., Martinez, I., DeGue, S., & Jeffcott, M. (2003). Co-occurring forms of child maltreatment and adult adjustment reported by Latina college students. *Child Abuse & Neglect*, 27, 751-767.