

## Journal Highlights Ronald C. Hughes, Judith S. Rycus, Sally Dine Fitch North American Resource Center for Child Welfare

*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).*

### The Impact of Child Maltreatment on Language Development

This study evaluated whether maternal maltreatment is correlated with language delays in children, particularly in the domain of syntactic development, and whether such delays are related to the quality of maternal utterances. The study used a cross-sectional design. Participants included 33 mother-child dyads. In 19 of these, the children had experienced documented maltreatment. The remaining 14 dyads consisted of a demographically comparable group of low-income families in which the children had not been maltreated. In all abuse cases, the mothers had been identified as the perpetrators, and the children had experienced chronic maltreatment. Mother-child dyads were observed and videotaped through a one-way mirror during play interaction. A series of standardized assessments of children's development and intelligence was used to evaluate the syntactic abilities of the children. The study found that maltreated children exhibited syntactic delays at the early age of 5, producing less complex language with less knowledge of vocabulary. This investigation provides a description of the impact of a maltreating environment on children's syntactic development and supports a policy of speech-language evaluation for children identified as experiencing maltreatment.

Eigsti, Inge-Marie, & Cicchetti, Dante. (2004, February). The impact of child maltreatment on expressive syntax at 60 months. *Developmental Science*, 7(1), 88-102.

### How Well Do We Prepare Pediatric Radiologists Regarding Child Abuse?

This article reports the results of a 24-question survey conducted by the Society for Pediatric Radiology Committee on Child Abuse to evaluate the training of pediatric radiologists, regarding both radiological diagnosis of child abuse, and forensic investigation and legal procedures in cases of child maltreatment. Surveys were mailed to radiologists who completed a one-year training fellowship in pediatric radiology during 1999 and 2000. The questionnaires included 9 items evaluating objective information about training programs,

and 15 statements eliciting subjective Likert scale responses regarding the perceived presence and adequacy of relevant educational and training. Results indicated considerable variability in training and education experiences. Although the average rankings for training in diagnosis of child abuse indicated confidence in the adequacy of training, the wide range of the responses indicated that some respondents perceived their training to have been deficient. A large majority of respondents felt poorly trained to interact with the child protective services system, other investigative teams, and the legal system. The authors recommend the creation of a standardized training program for pediatric radiology fellows on child abuse to promote uniform training in both radiologic diagnosis of child abuse, and collaboration with child abuse investigators and legal advocates.

Pennington, Debra J., Lonergan, Gael J., and Mendelson, Kenneth L. (2004, January). How well do we prepare pediatric radiologists regarding child abuse? Results of a survey of recently trained fellows. *Pediatric Radiology*, 34(1), 59-65.

### Physical Maltreatment Victim to Antisocial Child

The goal of this study was to evaluate whether physical maltreatment of children leads to their later development of antisocial behavior, and if so, is it via an environmental causal process or via genetic transmission. The authors tested these hypotheses in a representative Environmental-Risk cohort of 1,116 twin pairs and their families, who were assessed when the twins were 5 and 7 years old. Mothers reported on their children's experiences of physical maltreatment, and mothers and teachers reported on these children's antisocial behavior. The well-documented association between child maltreatment and the later development of antisocial behaviors was replicated in this study. The authors also found that heritable characteristics of the child did not provoke physical maltreatment. The study supported the hypothesis that physical maltreatment is an environmental risk variable that is causally linked to later antisocial behavior in children, and provides evidence that approximately half of the intergenerational transmissions of antisocial behaviors is environmentally generated. The

authors conclude that preventing physical maltreatment should be a public health priority because doing so is likely to reduce future rates of antisocial behavior in children.

Jaffee, Sara R., Caspi, Avshalom, Moffit, Terrie E., and Taylor, Alan. (2004, February). Physical maltreatment victim to antisocial child: Evidence of an environmentally mediated process. *Journal of Abnormal Psychology*, 113(1), 44-55.



## Vicarious Trauma: A Comparison of Clinicians Who Treat Survivors of Sexual Abuse and Sexual Offenders

This study compared vicarious trauma as experienced by clinicians who treat survivors of sexual abuse (n=95) and clinicians who treat sexual abuse offenders (n=252). The study explored the levels of vicarious trauma experienced by the two populations; the impact of demographics, personal history of abuse and personal coping strategies on vicarious trauma; and how these variables differed between the two groups of respondents. A survey of demographic data and two standardized measures of trauma were administered to members of the American Professional Society on the Abuse of Children (APSAC) and members of the Association for the Treatment of Sexual Abusers. Respondent groups did not differ in age, ethnicity, length of service (56% reported a tenure of ten years or more), or history of childhood maltreatment, even when controlling for gender. Of the respondents, 75.8% reported experiencing at least one form of maltreatment as a child; 53.6% reported experiencing multiple forms of maltreatment. The study determined that the level of vicarious trauma for the majority of the sample fell within the clinical range, which is consistent with previous studies. Clinicians who treated survivors were found to use positive coping strategies more frequently than did clinicians treating offenders. However, clinicians treating offenders were more likely to work in residential or prison settings, and it was not known how job setting might have influenced their use of coping strategies. Further, in the group treating survivors, respondents who had been clinicians for shorter periods of time reported higher levels of vicarious trauma. The authors provided several explanations, including that persons experiencing greater vicarious trauma also engaged in more coping strategies to counter the effects of their work, or that clinicians most affected by vicarious trauma had left the field prematurely and were not represented in this sample. Both findings appear to support specialized training for clinicians on the risks of treating both sexual abuse survivors and offenders, as well as training on effective self-care strategies that can help mitigate the effects of vicarious trauma.

Way, I., VanDeusen, K., Martin, G., Applegate, B., Jandle, D. (2004). Vicarious trauma: A comparison of clinicians who treat survivors of sexual abuse and sexual offenders. *Journal of Interpersonal Violence, 19*(1), 49-71

## Promoting the Educational Competence of Youth in Foster Care

This study explored predictors of academic achievement of youth in foster, kinship, group, and residential care, or living independently. The potential study group included 400 youth randomly selected from 2415 teens in substitute care in Illinois as of December 1, 1998. Caseworkers provided consent for 218 youth to participate in the study; data were ultimately collected for 152 youth. The study questionnaire incorporated several standardized scales,

including the Mental Health Inventory (Veit & Ware, 1983); the Multidimensional Scale of Perceived Social Support (Zimet, Dahlem, Zimet, & Farley, 1988); part of the Child Health and Illness Profile: Adolescent Edition (Starfield et al., 1995); and the Wide Range Achievement Test-Revised (WRAT-R). The dependent variable, educational success, was represented by level of reading skill, as measured by the WRAT-R. Nine variables identified in the literature as important predictors of school success were selected as independent variables. Study methods combined descriptive analyses, bivariate analyses, and backward regression models. Both Pearson and Spearman techniques were used to determine correlations. Factors positively correlated with reading skill levels were high educational aspirations, good problem-solving skills, participation in extracurricular activities, positive school experiences, placement in kinship care, positive affect, emotional ties with others, and life satisfaction. Variables negatively correlated with reading skills included high levels of depression, loss of control, participation in special education, and drug use. Although cautioning that some findings may have been affected by selection bias, and that directionality of some correlations could not be ascertained, the authors suggest that promoting active participation in extracurricular activities, supporting aspirations for higher education, providing mentoring programs, and identifying and treating substance abuse may help promote educational achievement of youth in care.

Shin, Sunny Hyucksun. (2003, September-October). Building evidence to promote educational competence of youth in foster care. *Child Welfare, LXXXII*(5), 615-632.

## Child Welfare Practice in Organizational and Institutional Contexts

This exploratory study consisted primarily of private, qualitative interviews with 15 foster care caseworkers from both public and private child welfare agencies regarding their perceptions and descriptions of their daily work, and the barriers that prevented them from performing activities identified as family-centered, strengths-based, and empowerment-based (i.e., "best") practice. The study used a subset of data collected during a multimethod study of reunification in foster care. Interview transcripts and field notes were subjected to repeated reading, coding, and classification, using both open and selective coding methods. Although the authors suggest that study limitations preclude generalization, their findings illustrate how organizational, environmental, and institutional dynamics appear to undermine child welfare practice. Barriers identified by study participants included high numbers of children in substitute care, resource shortages, waiting lists for services, competing goals, and significant pressures to comply with agency and juvenile court expectations for accountability. Workers reported that direct work with parents warranted a low priority among the factors competing for their time and instead viewed visits with children in care, court appearances, and case record documentation as core activities. Workers often met requirements for parental contact through letters or telephone calls and, rather than conduct outreach, often waited for parents to contact them.



They then interpreted lack of response from parents as lack of interest in services or in reunification. Explicit agency rules to assure accountability promoted a regimented rather than individualized approach to case planning and service delivery. Parents' completion of easily documentable casework activities, rather than client change, was used to anchor service plans, because "documentable activities form a supportable case that vulnerable decision makers can use to defend their actions in a volatile environment." The study suggests that less-than-adequate services on the line, often attributed to caseworker failure to implement "best practice" concepts taught in training, may result from powerful organizational and environmental pressures that interfere with best practices. The study illuminates some of the conceptual complexity of child welfare practice and establishes a foundation for future research.

Smith, Brenda D., & Donovan, Stella E. F. (2003, December). Child welfare practice in organizational and institutional context. *Social Services Review*, 77(4), 541-563.

## Characteristics and Challenges: Adopting Children With Special Needs

This study examined demographic differences in child, parent, and agency characteristics in special needs adoption to determine if these have predictive value in relation to positive adoption outcomes. Eligible participants included all families in Nevada receiving or contracted for adoption subsidies as of January, 2000. Respondents to a mailed survey questionnaire included 249 special needs adoptive families representing 373 children. Ethnic backgrounds of parents and children suggested numerous cross-cultural adoptions. Data were collected on child characteristics (behavior and emotional problems, delinquent or aggressive behaviors, physical handicaps, and disabilities); parental characteristics (attitudes and opinions regarding parenting and expectations for children's behavior); and agency practices (amount of information parents were given about a child's background and characteristics prior to adoption and difficulties obtaining needed services). Positive adoption outcomes were represented by parental satisfaction, the quality of the parent-child relationship, and impact of the adoption on the family and/or marriage. The majority of respondents reported good adoption outcomes in spite of problems. Many families reported significant behavior problems and disabilities in their children, with close to a third indicating the problems were profound or severe. Increasing problems were associated with greater length of time in the home. This reinforces that children's problems often manifest many years after placement. Fifty-eight percent of families reported not receiving enough information on the child prior to adoption; and 37% reported the child's problems to be more serious than originally reported by the adoption agency. Families reported significant barriers in obtaining postadoptive services, often not knowing where to go and perceiving that many providers did not understand their unique issues. A multiple regression equation joining child, parent, and agency characteristics had significant, although limited, predictive value. The more appropriate a parent's expectations for the child, the more positive the impact on all outcomes. The fewer



behavior problems children had, the higher parent's satisfaction with parenting. Contrary to other research, no differences were found between former foster parents and new parents on any of the adoption outcomes. Study limitations include reliance on self-reports and the fact that the sample was drawn from adoptions handled by a single state agency.

Reilly, T., & Platz, L. (2003). Characteristics and challenges of families who adopt children with special needs: An empirical study. *Children and Youth Services Review*, 25(10), 781-803.

## Predicting Infant Maltreatment in Low-Income Families

This study assessed child neonatal status at birth and maternal attributions as predictors of infant maltreatment, including harsh parenting and safety neglect. The study population included 73 families recruited for participation prior to or soon after the birth of a child, based on their risk for child maltreatment as assessed by

Kempe's Family Stress Checklist. Participants were primarily Hispanic families with low incomes and low levels of education, having recently emigrated from Mexico. Half were single mothers. Maternal attributions were assessed using the Parent Attribution Test (PAT, Bugental et al. 1989); harsh parenting was measured by the Conflict Tactics Scale (CTS, Straus, 1979); and maternal depressive symptoms were measured by the Beck Depression Inventory (BDI, Beck, Ward, Mendelson, Mock, & Erbaugh, 1961). Children were identified as "at risk" based on a low APGAR score or a premature birth. Mothers completed the PAT and the BDI immediately prior to or following birth. When their children were 1 year old, they completed the CTS, the BDI, and two neglect measures (Framingham Safety Survey and the Accidental Injury Interview). Mothers with low perceived power in their relationship with their infant, when paired with an at-risk infant, were more likely to physically abuse their infant or use

nonabusive corporal punishment. Depressive symptoms were significantly correlated with mothers' use of physically harsh parenting strategies; and mothers who were physically abusive showed substantially higher levels of depressive symptoms. Power-based cognitions were also found to predict higher levels of safety neglect and higher levels of child injury, and this pattern was stronger in families with high-risk infants. Study limitations included the small sample size, the cultural and socioeconomic similarities of the sample families, and participation by some families in different service programs during the course of the study. However, results do suggest parental cognitions as qualifiers of maternal responses to at-risk children.

Bugental, D. B., & Happaney, K. (2004, March). Predicting infant maltreatment in low-income families: The interactive effects of maternal attributions and child status at birth. *Developmental Psychology*, 40(2), 234-243.

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## Risk Factors Associated With High Potential for Child Abuse and Neglect

This 4-year follow-up study examined the association between the presence of major psychosocial risk factors for child maltreatment and the degree of chronicity of child abuse and neglect. The authors hypothesized that chronic maltreatment was associated with the presence of a greater number of risk factors related to both the parent's own personal history and their current living situation. Subjects were 56 mothers evaluated by social service agencies as being abusive, neglectful, or at high risk for either. The study attempted to differentiate between those mothers who continued to show a high potential for child abuse and neglect in spite of intervention (chronic) and those who were able to overcome their problems (transitory). When initially recruited, families were receiving social services after having been identified as maltreating or at risk for maltreatment. A set of 14 variables was compiled based on research identifying risk factors for child maltreatment. Subjects were administered a battery of tests at the time of their recruitment, at the end of the intervention programs 2 years later, and at follow-up 4 years after their recruitment. Results indicated no significant demographic differences between the chronic and transitory groups. Mothers categorized as having chronic problems showed, on average, more risk factors than mothers displaying transitory problems. Single-parent families were proportionately more numerous in the transitory group. Variables found to be significantly associated with situations of chronic abuse and neglect included initial level of severity of potential for abuse; number of children at the time the case was opened; dual-parent status; the fact that the mother herself had been placed in a foster home; that she had been sexually abused; and that she had run away from home during her adolescence. When considered individually, the only factors for which a statistically significant relationship could be observed were those related to the parent's antecedents during childhood or adolescence. Although several factors were considered, including neglect, physical violence, abandonment, and break-up, the most significant to the chronic maltreatment of their own children were a personal history of foster care and sexual abuse. The authors hypothesize that parents who have unresolved trauma develop psychic mechanisms that are detrimental to their capacity for attachment and especially to their sensitivity as parents. Finally, the study indicated that after 4 years of intervention and services, 62% of the mothers still displayed a high level of abuse and neglect problems.

Ethier, Louise S., Couture, Germain, & Lacharite, Carl. (2004, February). Risk Factors Associated With the Chronicity of High Potential for Child Abuse and Neglect. *Journal of Family Violence*, 19(1), 13-24.



## Predictors of Maternal Support: The Point of View of Adolescent Victims of Sexual Abuse and Their Mothers

Although this study addresses a well-researched topic (i.e., predictors of maternal support in cases involving child sexual abuse), it adds to the literature by 1) examining frequently-researched factors predictive of maternal support from the perspective of both the mother and the victim (i.e., maternal distress characteristics, victim characteristics, abuse characteristics such as severity and duration, and disclosure characteristics), 2) examining less often studied variables, such as maternal occupational status, admission of guilt by perpetrator, the person to whom the teen first disclosed, and the time of the disclosure, and 3) examining whether the variables determined to be significant remained consistent when examined from the perspectives of mothers and adolescents. A total of 120 adolescents (107 females and 13 males) aged 12 to 17 years, and their mothers, were recruited from a child protective services agency to participate in the study. Data were collected using established standardized questionnaires and semi-structured interviews. Multiple regression analyses were performed separately on mother and child data sets, which revealed several predictors of maternal support, four of which were seen as significant predictors of maternal support by both mothers and teens. Three of these variables were found to be predictive of supportive maternal responses. They were initial disclosure of the abuse to the mother rather than to someone else, admission of guilt by the perpetrator, and maternal occupational status (mothers were more supportive if they were economically independent of the offender). The fourth variable, the mother living with the perpetrator, was predictive of maternal nonsupport. Although the relationship between the mother and the offender represents one of the most commonly studied predictors of degree of maternal support, the findings of this study indicate the offender's civil status as father or stepfather was less important than whether he actually lived with the mother. Teens indicated that confirmation of the abuse by outside sources, such as a friend, sibling, or professional, was of predictive value, and mothers indicated the quality of the maternal-child relationship was significant from their perspective.

Mireille, C., Wright, J., Toupin, J., Oxmna-Martinez, J., McDuff, P., Thériault, C. (2003). Predictors of maternal support: The point of view of adolescent victims of sexual abuse and their mothers. *Journal of Child Sexual Abuse*, 12(1), 39-65.

