

Journal Highlights

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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).

TREATMENT SUGGESTIONS FOR YOUNG MOTHERS WITH COEXISTING DRUG ABUSE AND CHILD NEGLECT

The purpose of this study was to analyze research examining the relationship of drug abuse and child neglect, to review clinical treatments that appear to be effective with both perpetrators of child abuse and drug abusing adolescents, and to propose integrated interventions for use with adolescent mothers who use drugs and also neglect their children. Following a thorough review of relevant controlled outcome studies, and in the absence of studies regarding treatment outcomes with substance-abusing adolescent mothers who neglect their children, the author proposes a series of family-based therapy and individual cognitive problem-solving interventions, based on their demonstrated effectiveness in related subpopulations of adolescent substance abusers and child-neglecting mothers.

Donahue, B. (2004). Co-existing child neglect and drug abuse in young mothers. *Behavior Modification, 28*(2), 206-233.

BATTERED WOMEN OFTEN MALTREAT THEIR CHILDREN

The purpose of this study was to determine the prevalence and correlates of intimate partner violence among female caregivers of children reported to child protective services agencies. The study sample included 3,612 female caregivers selected from the National Survey of Child and Adolescent Well-Being study, who were interviewed about physical violence by a partner, substance abuse, mental health, and demographics. The study found the lifetime prevalence of intimate partner abuse of female caregivers of maltreated children was 45%, with a past-year prevalence of 29%. The study also reported that intimate partner abuse was strongly associated with both major depression and repeated abuse of children. The high prevalence of co-occurrence of intimate partner abuse and child abuse by female caregivers highlights the need for effective screening and identification of intimate partner violence in families referred to child protective services agencies.

Hazen, A. L., Connelly, C. D., Kelleher, K., Landsverk, J., & Barth, R. (2004). Intimate partner violence among female caregivers of children reported for child maltreatment. *Child Abuse & Neglect, 28*(3), 301-319.

WHY DO BATTERED WOMEN OFTEN MALTREAT THEIR CHILDREN?

This researcher states the purpose of the study was to understand why some battered mothers physically abuse their children. Her conclusions indicate factors other than battering have a strong effect. The study sample included 184 mothers—53 who were battered and abusive to their children, 57 who were not battered and not abusive, 33 who were battered but not abusive to their children, and 41 who were not battered but who did abuse their children. Each mother's history of childhood physical abuse and the availability of a support network were evaluated, comparing several variables. Findings included that mothers who were severely assaulted by their own mothers tended to physically abuse their children regardless of whether they were battered, even though their history of abuse was less proximate in time than other significant variables, such as stressors and quality of relationships. The author suggests that practice interventions include efforts to minimize transmission of violence across generations.

Coohey, C. (2004). Battered mothers who physically abuse their children. *Journal of Interpersonal Violence, 19*(8), 943-952.

USING HUMAN FIGURE DRAWINGS TO ELICIT INFORMATION FROM ALLEGED VICTIMS OF CHILD SEXUAL ABUSE

This study attempted to assess the utility of using a human figure drawing to elicit information from alleged victims of child sexual abuse, following open-ended prompts in an investigative interview. Ninety alleged victims of child sexual abuse, ranging in age from 4 to 13 years, were interviewed by police officers using the National Institute of Child Health and Human Development investigative interview protocol, plus a human figure drawing with a series of questions about the drawing. The drawing with questions elicited an average of 86 new relevant details for the sample group. In a subgroup of 4- to 7-year-olds, an average of 95 additional details was elicited, comprising 27% of the total details elicited from the entire interview. The authors conclude that the use of a human figure drawing helped investigators elicit important information from child interviews, even after the investigators believed they had "exhausted" the children's memories. However, the authors caution that while most of the information obtained with the human figure and recognition memory prompts would be accurate and of value to investigators, the information elicited after the drawing had been introduced was more likely to be inaccurate than information obtained earlier in the investigative interview using open-ended prompts.

Aldridge, J., Lamb, M. E., Sternberg, K. J., Orbach, Y., Esplin, P. W., & Bowler, A. (2004). Using a human figure drawing to elicit information from alleged victims of child sexual abuse. *Journal of Counseling and Clinical Psychology, 72*(2), 304-316.



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DO GOOD NEIGHBORHOODS MEDIATE BAD PARENTING?

This study attempted to test the ecological hypothesis that healthy, socially cohesive neighborhoods can modulate the negative developmental effects on children of hostile and coercive parenting. Specifically, the study evaluated the “buffering effect” of neighborhood social cohesion and control on children’s mental health and behavior. Forty-two first and second graders and their mothers participated in the study. The children were administered a child-friendly, interactive interview to elicit their opinions regarding parent-child relationships and their perceptions of their neighborhoods. The children’s teachers completed a behavior assessment of the children. Mothers completed surveys of their perceptions of their neighborhood, and they completed a self-report hostility measure. The authors concluded that the positive social features of a neighborhood could serve a protective role for children, moderating the influence of hostility within the family environment. The authors acknowledge the study’s limitations and the conflicting findings of other studies. They conclude that the study supports the proposition that positive features of children’s neighborhoods, particularly those that engender social cohesion and involvement, may benefit children by attenuating the adverse effects of hostile parenting, and, there is a need to focus additional resources on the positive aspects of neighborhoods in developing resiliency in children.

Silk, J., Sessa, F., Morris, A., Steinberg, L., & Avenevoli, S. (2004). Neighborhood Cohesion Against Hostile Maternal Parenting. *Journal of Family Psychology, 18*(1), 135-146.

PET SCAN SUGGESTS PHYSICAL AND SEXUAL ABUSE ARE IMPORTANT FACTORS IN DEVELOPMENT OF BORDERLINE PERSONALITY DISORDER

This study measured the neural correlates of recall of traumatic memories in women with and without borderline personality disorder (BPD). Twenty women with a history of childhood physical or sexual abuse underwent measurement of brain blood flow with positron emission tomography (PET) imaging while they listened to descriptions of both neutral personal history events and traumatic abuse events. Brain blood flow during exposure to trauma and neutral personal history events was compared between women with and without BPD. There were notable differences in brain blood flow between the two groups. Women with BPD showed differences in blood flow to areas of the brain that could represent an inability to recognize or to correctly interpret social cues, and the generation of pathological emotion. The researchers conclude that traumatic stress, such as physical or sexual abuse, can be an important factor in the development of BPD.

Schmahl, C. G., Vermetten, E., Elzinga, B. M., & Bremner, J. D. (2004). A positron emission tomography study of memories of childhood abuse in borderline personality disorder. *Biological Psychiatry, 55*(7), 759-765.



LEVEL OF PSYCHOLOGICAL FUNCTIONING IN FOSTER CARE APPLICANTS

This study examined the psychological functioning of 161 family foster care applicants in terms of parenting, family functioning, marital quality, psychological problems, and social support. The study examined the characteristics of foster family applicants thought to influence the behavioral and emotional adjustment of foster children. The majority of men and women included in the foster care applicants had one or more problems in psychological functioning. Seventeen percent of women, 24% of men, and nearly half of married couples had three or more problems with psychological functioning. Just under 25% lacked adequate empathy. Given the frequency and variety of problems, the authors cite the need for targeted training, mentoring, and developmental monitoring of foster care applicants, as well as additional research examining the predictive validity of problems in psychological functioning.

Orme, J. G., Buehler, C., McSurdy, M., Rhodes, K. W., Cox, M. E., & Patterson, D. A. (2004). Parental and family characteristics of family foster care applicants. *Children and Youth Services Review, 26*, 307-329.

EMPIRICAL EVALUATION OF HOME VISITING PROGRAMS TO PREVENT CHILD ABUSE AND NEGLECT

Two articles and an invited commentary together review and critically assess the findings of a randomized, controlled trial to determine the impact of Hawaii’s Healthy Start Program (HSP) in preventing child abuse and in reducing malleable parental risk factors for child abuse. Study subjects were families identified to be “at risk” of child maltreatment and were randomly assigned to intervention and control groups. Data were collected through annual maternal interviews, observation of home environments, and review of HSP, child protective services, and pediatric medical records. Child abuse and neglect were measured by observed and self-reported parenting behaviors, child hospitalizations for trauma, preventable child hospitalizations resulting from inadequate preventive care, substantiated child protective services reports, and maternal relinquishment of the primary care-giving role. Results indicated that HSP did not prevent child abuse; did not increase the use of nonviolent discipline; did not have a significant impact on reducing risk factors; and did not increase mothers’ desire for or use of community resources to reduce risk factors.

The authors contend a primary contributor was staff’s lack of knowledge and skill in recognizing and assessing well-documented risk factors, such as parental drug use, family violence, and maternal depression, as well as lack of skill in designing and implementing service strategies to address these risks. The authors also suggest that reliance on a parent-driven, strengths-based intervention model, in which parents retained responsibility to identify their own needs and choose their own service interventions, often precluded sufficient focus on high-risk conditions and behaviors. The authors note that these findings are not consistent with prior research that reports good results from home visiting programs. They contend that the rigorous experimental methodology used by this study greatly increases the reliability and validity of its findings, and that widespread methodological problems in previous research, including a preponderance of simple single-group or quasi-experimental designs, increase the likelihood of error in their results. The authors propose

a recommitment to rigorous, randomized, well-controlled study methodologies when evaluating the impact of service programs such as HSP. They also recommend retooling home visiting programs to focus on identifying and responding to risk factors for maltreatment, and suggest that the field refrain from large-scale program expansion and implementation when there is no empirically derived evidence that clearly documents successful program outcomes.

Duggan, A., Fuddy, L., Burrell, L., Higman, S. M., McFarlane, E., Windham, A., & Sia, C. (2004). Randomized trial of a statewide home visiting program to prevent child abuse: Impact in reducing parental risk factors. *Child Abuse & Neglect*, 28(6), 622-643.

Duggan, A., McFarlane, E., Fuddy, L., Burrell, L., Higman, S. M., Windham, A., & Sia, C. (2004). Randomized trial of a statewide home visiting program: Impact in preventing child abuse and neglect. *Child Abuse & Neglect*, 28(6), 597-622.

Chaffin, M. (2004). Is it time to rethink Healthy Start/Healthy Families? Invited commentary. *Child Abuse & Neglect*, 28(6), 589-595.

EVALUATING EFFECTS OF CHILD ABUSE TRAINING FOR POLICE RECRUITS

This study was designed to assess the effects of mandatory child abuse training of police recruits on their knowledge, skills, and attitudes toward abused children and abusive parents. Eighty-one new police recruits were randomly assigned to an experimental group that received mandatory child abuse training, and 101 were assigned to a comparison group that did not receive the training during the study period. No significant differences were found in demographic characteristics of the study groups. Instructional goals of the 8-hour training program were to provide recruits with skills in procedures for reporting cases of child maltreatment and providing an early intervention response. Part of the training was conducted by a child welfare social work professional. Content of the training included behavioral and physical indicators of maltreatment; conducting an emergency removal of a child from a home; interviewing child victims; and procedures for reporting to child welfare authorities. A pre-posttest method was used to evaluate outcomes. Pre- and posttest measures were the same and were administered concurrently to both groups. The posttest was administered 2 weeks after the pre-test. Results suggest that recruits in the experimental group acquired more knowledge, developed more skills, and felt more caring and sympathetic toward abusive parents than recruits in the comparison group. Study limitations included the absence of a follow-up study determining whether the impact of training persisted over time, and the use of participant self-report rather than objective observation of recruits. Despite the limitations, the author suggests the findings are consistent with previous research that supports a skill-based, recruit training curriculum, combined with a focus on moderating extreme negative emotional reactions toward abusive parents.

Patterson, George T. (2004). Evaluating the effects of child abuse training on the attitudes, knowledge, and skills of police recruits. *Research on Social Work Practice*, 14(4), 273-280.

EFFECTS OF ABUSE AND NEGLECT ON DEVELOPMENT OF THE CORPUS CALLOSUM

This study sought to determine whether there were abnormalities in the regional anatomy of the corpus callosum in children with a history of abuse or neglect. The corpus callosum is the major myelinated fiber tract connecting the left and right hemispheres of the brain and is responsible for the majority of interhemisphere transmission of information. The study examined the relative contributions of neglect, physical abuse, sexual abuse, posttraumatic stress disorder, psychiatric illness, and gender to the development of corpus callosum size. Corpus callosum size was measured through magnetic resonance imaging (MRI) scans in 26 boys and 25 girls admitted for psychiatric evaluation, 28 of whom were diagnosed as abused or neglected. These scans were then compared with scans of 115 healthy control subjects. The corpus callosums of the abused or neglected patients were 17% smaller than in control subjects, and 11% smaller than in psychiatric patients who had not been abused or neglected. Neglect was associated with substantially greater effect sizes than was sexual abuse in boys. In contrast, sexual abuse tended to be associated with larger effect sizes than neglect in girls.

Teicher, M. H., Dumont, N. L., Ito, Y., Vaituzis, C., Giedd, J. N., & Andersen, S. L. (2004). Child neglect is associated with reduced corpus callosum area. *Biological Psychiatry*, 56, 80-85.

ADVERSE CHILDHOOD EXPERIENCES PREDICT POOR PARENTING

The authors tested how adverse childhood experiences and adult poly-drug use predicted poor parenting in both mothers and fathers. A community sample of 237 mothers and 81 fathers was used. The authors found that both childhood maltreatment and parental drug problems had an adverse impact on parenting practices among mothers. Experiencing child abuse and/or neglect had a negative effect on later parenting. Parental alcohol or drug related problems also predicted poor parenting. Gender differences between mothers and fathers were found on several variables and constraints. For example, poly-drug problems and poor parenting were not related for fathers.

Locke, T. F., & Newcomb, M. D. (2004). Child maltreatment, parental alcohol and drug-related problems, poly-drug problems, and parenting practices: A test of gender differences and four theoretical perspectives. *Journal of Family Psychology*, 18(1), 120-134.

