



Research Article

Effect of Infant Health Problem, Mother's Depression and Marital Relationship on Infant Abuse in Korea: Mediating Pathway of Marital Relationship



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SUMMARY

Purpose: The purpose of this study is to test a model linking infant health problem, mother's depression and marital relationship to infant abuse.

Methods: This study employed a cross-sectional survey design. Data were collected from 2009 Data of Index Studies for Korean Children and Adolescents Development. Survey data from 1,060 infants and their mothers (including infant health status and infant physical illness scale, depression scale, marital relationship scale, and child abuse scale) were used to test the model. The model was tested using path analysis techniques within structural equation modeling.

Results: The model fit indices suggested that the original hypothesized model adequately fit the data ($\chi^2 = .33$, $df = 5$, $p = .84$, Tucker-Lewis Index = 1.04, Comparative Fit Index = 1.00, Root Mean Square Error of Approximation = .00). Infant health problem and mother's depression had a negative direct effect on marital relationship, which in turn had a direct negative effect on infant abuse. Infant health problems directly affected infant abuse and also influenced infant abuse indirectly through the marital relationship. Mother's depression had significant direct effects on infant abuse and also influenced infant abuse indirectly through the marital relationship.

Conclusion: The findings from this study demonstrate the fundamental importance of infant health as linked to the mother's mental health, and marital relationship and increasing the quality of marital relationship may be the key to infant abuse prevention.

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Introduction

Recognition of the significance of child abuse as a global public health concern and its devastating impact has increased (World Health Organization, 2002). According to the 2011 National Child Abuse Status Report (Ministry of Health and Welfare, 2012), the number of cases suspicious of child abuse was 8,325 in Korea. Of that number, preschoolers accounted for one fourth and children under 2 years old accounted for 7.8%. Due to their limited ability to express, statistical data acquired from children less than 2 years old must be considered carefully. As for the child abuse type, multiple abuses such as physical and emotional abuse and neglect accounted

for 43.3% while each type of abuse; neglect, emotional abuse, physical abuse and sexual abuse accounted for 29.4%, 15.0%, 7.7% and 3.7% respectively.

The infant period is when the foundation of personality is built and physical, emotional, and cognitive growth take place. Child abuse during this period has a great influence on the life afterwards (Spence, Najman, Bor, O'Callaghan, & Williams, 2002). Children who have experienced child abuse exhibit a number of emotional disorders such as low self-esteem, social cowering, instability, obsession, depression, aggression, and social issues including attachment formation issues in personal relationships (Ahn et al., 2003). In addition, cognitive function issues such as lower academic performance are exhibited (Bae, 2010).

Factors affecting child abuse were personal factors that relate directly to the infant, such as the infant's health and parental factors like parenting stress, depression and marital conflict. Child abuse is the result of the complex interplay of individual, relationship, social,

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cultural, and environmental factors (Belsky, 1993). If children have a physical or mental disability, or poor health, the parents feel excessive responsibility for parenting, which leads to physical or mental pressure (Chung, 2009; Chung & Noh, 2010). Such pressure is displayed as an aggressive tendency in the discipline style of parents (Neil, Lee, Lee, Jane, & Paul, 2009).

Recently, due to social participation of women, the family structure and roles have been changed. As the responsibility of parents for parenting children has increased and the level of demands on the role of the mother has increased as well, mothers experience parenting stress. Parenting stress causes negative emotional responses such as depression or anxiety (Gove & Hughes, 1979). It has been reported that the higher such depression is, the higher the occurrence of physical abuse or verbal abuse becomes (Kim & Park, 2009; Lee, 2004). Causes such as health problems of children or parenting stress have negative influences on marital relationship (Moon, 2011; Neil et al., 2009). It has been pointed out that the conflict in marital relationship leads to emotional tension and displeasure which in turn lead to child abuse indirectly (Lee). More than 80% of child batterer is reported to be a parent, and home is the most vulnerable place for a child to be abused (86.6%). Although home should be the safest and optimal space for children, in reality children are at risk of being abused at home. This must be considered seriously. The incidence of abuse is 44% from a single parent family; this high rate may be due to the negative connotation of economic burden and parenting stress put on a single parent by the society (Ministry of Health & Welfare, 2012). Accordingly, rather than looking at the interaction between parent and child, the wider dynamic family relationships including marital conflict should be studied, which will lead to a better understanding of child abuse in families.

Recently, there were studies on children's health problems and the mothers' parenting stress (Chung, 2009; Chung & Noh, 2010; Lee & Yoo, 2007), studies on parenting, depression of the mother and child abuse (Ahn & Yi, 2002; Hong, Ahn, & Kim, 2004; Kim & Park, 2009), and studies on the relationship of marital conflict on child abuse (Doh, Kim, Kim, Choi, & Kim, 2011; Lee, 2004; Lee & Lee, 2000; Moon, 2011; Yeo, 2010). However, the study subjects are mostly school age children or teenagers (Ahn & Yi; Hong et al.; Lee; Moon), while very few studies focused on infants (Doh et al.). In addition, in previous studies, almost none examined the integrative relationship between variables influencing child abuse.

Based on the findings of previous studies, it can be predicted that child health and mother's depression as independent variables will affect marital relationship and child abuse, while marital relationship will function as mediating variables explaining child abuse (Figure 1).

The hypotheses of this study were to determine the following: (a) an infant's health problems have a negative effect on marital relationship; (b) a mother's depression has a negative effect on the marital relationship; (c) an infant's health problem has a positive effect on infant abuse; (d) a mother's depression has a positive effect on infant abuse; (e) the marital relationship has a negative effect on infant abuse; and (f) the marital relationship functions as a mediating variable explaining child abuse.

Purpose

The aim of this study was to test a model linking infant health problem and their mother's depression to their mother's marital relationship, and ultimately to infant abuse. Based on our theoretical framework and previous research on child abuse, we predicted that infant health problem would have a direct effect on mother's marital relationship and on infant abuse. Previous research addressing mothers' depression and their family relationship found that mother's depression also would have a direct effect on marital relationship and child abuse. Finally, both infant health problem and mother's depression were expected to have an indirect effect on infant abuse through the marital relationship.

Methods

Study design

This study utilized a cross-sectional research design that investigated a model linking infant health problem and their mother's depression to their mother's marital relationship, and ultimately to infant abuse.

Settings and sample

Data was collected from the 2009 Data of Index Studies for Korean Children and Adolescent's Development (Ministry for Health Welfare and Family Affairs & Seoul National University R &

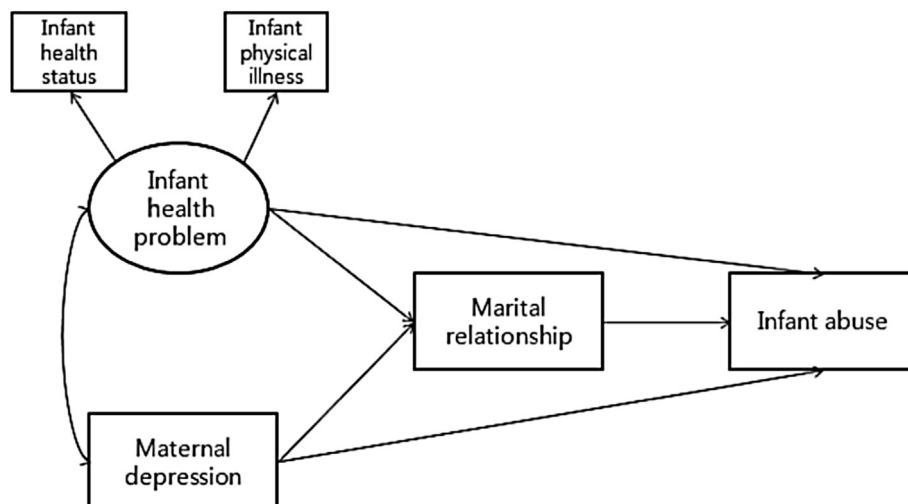


Figure 1. Hypothesized path model.

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