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## Research article

# Externalizing behaviors among adopted children: A longitudinal comparison of preadoptive childhood sexual abuse and other forms of maltreatment



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## ABSTRACTS

Previous research has established that child sexual abuse (CSA) and other forms of child maltreatment can have lasting and profound implications for survivors in terms of externalizing symptomatology. Few studies, however, have examined long-term consequences of CSA and maltreatment among adopted children. Guided by a polyvictimization framework, the present study investigated: (a) rates of co-occurrence of pre-adoptive CSA and maltreatment among adopted children, and (b) the relative impact of pre-adoptive CSA and maltreatment on externalizing behaviors at 14 years post-adoption. Analyses were based on four waves of data from the California Long-Range Adoption Study (CLAS) ( $n = 522$ ); outcomes were measured using an adapted version of the Behavioral Problems Index (BPI). The diverse sample (36% non-White) was evenly divided by gender (50% female/male) and included a large number of children adopted from foster care (42.1%). Results indicated that 24.3% ( $n = 127$ ) of children experienced at least one form of maltreatment; of those children, nearly half (46.5%;  $n = 59$ ) experienced multiple abuse types (e.g., neglect, sexual, physical). Among cases of CSA (7.7%;  $n = 40$ ), the vast majority (92.5%;  $n = 37$ ) occurred with other forms of maltreatment. Hierarchical linear mixed models indicated that pre-adoptive CSA was associated with nearly a full unit increase in BPI scores (.92;  $p < .01$ ). Neglect was associated with nearly a half unit increase in BPI (.48;  $p < .05$ ). Gender was also significant; girls had lower BPI scores than boys (-0.57;  $p < .001$ ). Implications for future research and practice are discussed.

Child sexual abuse (CSA) is a significant and common threat to psychological well-being and behavioral health across the life course (Easton & Kong, 2017; Molnar, Buka, & Kessler, 2001). Recent national data show that over 57,000 children were reported to have experienced sexual abuse in the United States in FY2015 (US Department of Health and Human Services [DHHS], 2015). Actual prevalence rates are difficult to determine as CSA is thought to be vastly underreported (Finkelhor, Shattuck, Turner, & Hamby, 2013), but research suggests that approximately 28% of US youth between the ages of 14–17 experience CSA, with children between 7–13 years of age at greatest risk (Finkelhor, Turner, Hamby, & Ormrod, 2011). Gender disparities exist, with reports suggesting that one in five girls and one in 20 boys are victims of CSA (Finkelhor et al., 2011).

CSA often co-occurs with other more common forms of maltreatment such as neglect or physical abuse (Finkelhor et al., 2013). Different types of maltreatment can have lasting and profound effects on children's behavior including both internalizing and externalizing symptomatology (Ford, Gagnon, Connor, & Pearson, 2011; Hickman et al., 2013; Kendall-Tackett, Williams, & Finkelhor,

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1993; Thornberry, Henry, Ireland, & Smith, 2010). Less is known, however, about the extent to which CSA is associated with greater impairment over the life course compared to neglect, physical abuse, or other forms of maltreatment. Hickman et al. (2013) found that the combination of these forms of maltreatment proved to be most toxic, rather than any single category. Conversely, other studies have demonstrated that the experience of CSA in particular predicts a high risk of future externalizing behaviors (Currie & Tekin, 2006; Wall & Barth, 2005). Given the complexity of these dynamics, more research is needed to disentangle the singular and additive effects of different types of maltreatment over the life course.

Among preadoptive children, existing studies suggest that rates of maltreatment tend to be higher compared to youth in the general population. A synthesis of the literature, for example, suggested that approximately 36% of adopted children experienced preadoptive sexual abuse (Nalavany & Ryan, 2008). These statistics suggest that rates of CSA are much higher for pre-adoptive children compared to children in the general population (Finkelhor et al., 2011), although data are not available to establish base rates of CSA for very young pre-adoptive children. Yet, few studies have examined the long-term consequences of CSA and other forms of maltreatment over time among adopted children. Much of the empirical literature explored a specific type of abuse using cross-sectional analyses (Bergen, Martin, Richardson, Allison, & Roeger, 2004; Nalavany, Ryan, & Hinterlong, 2009; Wall & Barth, 2005). The purposes of the current longitudinal study are to examine: (a) the extent to which preadoptive experiences of CSA co-occur with other forms of maltreatment and (b) the relative impact of CSA on externalizing behaviors compared with other forms of maltreatment.

## 1. Literature review

### 1.1. Repercussions of CSA

The vast and complex symptomatology associated with CSA presents differently across stages of development (Kendall-Tackett et al., 1993) and can include both internalizing and externalizing behaviors that extend into adulthood (Trask, Walsh, & DiLillo, 2011). Externalizing behaviors commonly observed in adolescence include aggressiveness, rule breaking, delinquency, substance use, hyperactivity, and sexualized behaviors (Gauthier-Duchesne, Hebert, & Daspe, 2016; McGrath, Nilsen, & Kerley, 2011). Research also suggests gender differences in externalizing outcomes for sexually abused children, as boys experience higher levels of delinquency, substance use, and exhibition of antisocial behaviors compared to girls (Gauthier-Duchesne et al., 2016). One of the many interpretations of this phenomenon is that boys express negative emotion through behavior, reflecting a dominant heteronormative expression of masculinity (Spiegel, 2003). Other studies, however, have found little to no difference between sexually abused boys and girls in regards to externalizing behaviors, specifically in the context of oppositional defiance, substance use, and attention deficit disorder (Hubbard & Pratt, 2002; Simmel, Brooks, Barth, & Hinshaw, 2001; Thornberry et al., 2010).

Although the body of research is less thorough for adopted children who were sexually abused, similar patterns of symptomatology have been observed. Hussey, Falletta, and Eng, (2012) found that a history of sexual abuse was a significant predictor of any mental health diagnosis for children placed for adoption in a special needs program in Ohio. More specifically, research has found that pre-adoptive history of CSA is associated with greater externalizing behaviors, such as physical aggression, lying, defiance, school problems, and self-injurious behavior, when compared to adopted children with no history of abuse (Nalavany & Ryan, 2008; Smith & Howard, 1994). A pre-adoptive history of CSA has also been identified as a risk factor for externalizing psychiatric disorders, specifically oppositional defiant disorder and attention deficit disorder (Nalavany & Ryan, 2008; Simmel et al., 2001). These difficulties have profound implications on the adoptive experience; parents who adopted children with histories of CSA report lower levels of parental satisfaction (Nalavany & Ryan, 2008).

### 1.2. Polyvictimization and CSA

Children who are victimized with CSA are also commonly subjected to other forms of maltreatment, such as physical abuse, bullying, or family violence; this experience of multiple forms of abuse is termed polyvictimization (Finkelhor et al., 2011). The National Survey of Children's Exposure of Violence reported that 49% of children who experienced violence in a one-year time span were victims of two or more types of victimization; the median was three types of victimization (University of New Hampshire, 2014). Results from a longitudinal study also suggest that children who experience polyvictimization are subject to more severe forms of victimization, including higher levels of CSA and physical abuse (Finkelhor, Ormrod, & Turner, 2007).

The experience of polyvictimization has implications on trauma symptomatology and duration. Polyvictimized children experience a greater level of post-traumatic symptomatology than those exposed to a single type of maltreatment (Finkelhor, Ormrod, & Turner, 2009). The lifetime number of victimizations experienced by a child correlates closely with the level of psychological distress (Finkelhor et al., 2009). In studies on early lifespan trauma, researchers did not find associations between a particular category of traumatic exposure and increased symptom severity; instead, multiple exposure to trauma through polyvictimization was related to worse outcomes over time (Alvarez-Lister & Pereda, 2016; Hickman et al., 2013). The most common externalizing symptoms associated with polyvictimization include aggression, disobedience, and rule breaking (Ford et al., 2011). Many children, youth, and young adults with histories of polyvictimization later become involved in the criminal justice system (Ford, Chapman, Hawke, & Albert, 2007).

Yet, even in the context of polyvictimization, CSA exposure can be particularly toxic. For example, Currie and Tekin (2006) found that childhood neglect doubled the likelihood of youths' later becoming involved in criminal activity, whereas an experience of physical or sexual abuse raised their likelihood of criminal behavior to 14 times that of non-victimized children (Currie & Tekin,

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