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Comparison of hope of maltreating parents whose children were removed from home with those whose children were kept at home



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ABSTRACT

Most of the scholarship on parents who abuse or neglect their children focuses on the parents' life difficulties and personal deficits. The present study focuses on their hope, a coping resource which has been found to contribute to better parenting. Relying on their own reports, it compares the levels and predictors of basic and family hope among two groups of maltreating parents: those whose children had been removed to alternative care and those whose children were being treated at community facilities. The examined correlates were two personality features, self-esteem and covert narcissism, and two interpersonal features, perceived social support and their closeness to and the influence of their own parents. A convenience sample of 279 maltreating parents in Israel, fairly evenly divided between the two groups, completed six self-report questionnaires. The findings show similarities in the features of the two groups of parents, and both similarities and differences in the correlates of their hope. Following descriptive analyses using t-tests, multi-group structural equation modeling (SEM) was performed to develop models of the predictors of hope in each of the groups and to examine the differences in the models. No significant group difference was found in any of the study variables. The mean levels of basic and family hope in both groups were soundly above the midpoint of the scale, and the mean levels of the other variables hovered around the middle of their respective scales. Social support and self-esteem were major correlates of the hope of both groups. However, covert narcissism and closeness to and influence of the mother correlated with hope only among parents whose children were removed from home.

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1. Introduction

Most of the scholarship on parents who abused or neglected their children focuses on the parents' life difficulties and personal deficits (Li, Godinet, & Arnsberger, 2011; Wen-Jui Cheng, 2006). Both research and theory draw these parents as a population struggling on their own with poverty, single parenthood, substance abuse, physical and mental illness, and many other problems (e.g., Berger, 2004; De Bellis et al., 2001; Evenson & Simon, 2005; Gillham et al., 1998; Hecht & Hansen, 2001; Schaeffer, Alexander, Bethke, & Kretz, 2005). Findings show that many mothers and fathers of abused or neglected children were themselves abused or neglected in childhood (e.g., Medley & Sachs-Ericsson, 2009; Pears & Capaldi, 2001). As adults they have been found to suffer from high levels of depression and anxiety (e.g., Casanueva, Foshee, & Barth, 2005; Dopke, Lundahl, Dunsterville, & Lovejoy, 2003; Spinetta, 1978; Windham et al., 2004), low self-esteem, and a reduced capacity for empathy with their children (e.g., Francis & Wolfe, 2008; Perez-Albeniz & De Paul, 2004; Stith et al., 2009).

Much fewer studies consider the personal resources these parents may possess to help them cope with their difficulties or to function better as parents. The few studies of this issue point to both environmental and personal factors that may protect against child maltreatment. Environmental factors include the parents' social connections and the emotional and instrumental support available to them from within and outside the family (e.g., Counts, Buffington, Chang-Rios, Rasmussen, & Preacher, 2010; Hashima & Amato, 1994; Li et al., 2011). Personal factors include resources such as parents' resilience, knowledge of parenting and child development, and social and emotional competence (Counts et al., 2010; Li et al., 2011). The present study focuses on the hope among maltreating parents, a coping resource which has been found to contribute to better parenting.

1.1. Hope

Hope is generally defined as the expectation of positive outcomes (Beck, Weissman, Lester, & Trexler, 1974; Gottschalk, 1974; Snyder, 2000a). It has been shown to promote resilience (Singh, Hays, Chung, & Watson, 2010), buffer stress in the face of problems and crises (Folkman & Moskowitz, 2000; Kowalski, 2007; Peterson, 2006; Seligman, 2002), and foster adaptive behavior (Hagen, Myers, & Mackintosh, 2005; Magaletta & Oliver, 1999). Higher hope has been related to superior coping and adjustment in a variety of stressful situations (e.g., Barnum, Snyder, Rapoff, Mani, & Thompson, 1998; Elliott, Witty, Herrick, &

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Hoffman, 1991; Irving, Telfer, & Blake, 1997; for reviews see Irving et al., 2004; Snyder, 1998, 2000a, 2000b, 2002; Snyder, Lehman, Kluck, & Monsson, 2006).

Studies of hope also testify to its benefits among parents. Findings among parents of children with chronic illnesses or with a mental or physical illness show that those parents with high levels of hope suffer less depression, stress, and physical and mental exhaustion than their less hopeful peers, and are better able to devise ways of solving problems (e.g., Horton & Wallander, 2001; Kashdan et al., 2002; Levanon-Simyoni, 2009; Venning, Eliott, Whitford, & Honnor, 2007). A study of adoptive parents found that those with more hope coped better with the difficulties inherent in adoption (Levanon-Simyoni, 2009). Hope among maltreating parents has received almost no study. The single published study of such parents known to the authors provides direct evidence of the protective role hope may play among them. Namely, the study found that the greater the mother's hope, the less likely she was to maltreat her children (Wen-Jui Cheng, 2006).

Further study of hope among parents who maltreat their children is important for two reasons. One is that hope may serve as an important resource in helping them to cope with the many stressors they face and to function better as parents. The other has to do with the intervention of the child protective services. This is often a highly intrusive and stressful intervention, in which many parents fear the power of the child protection workers and perceive them as unsympathetic (Ainsworth & Hansen, 2011; Dumbrill, 2006; Howe, 2010). Moreover, in the course of the intervention, the maltreating parents have to undergo a process of change so that their children can remain at home or be reunified with them if they have been placed in alternative care. Hope can help them both to cope with the stress and to attain the necessary change (e.g., greater understanding, more competent parenting). According to Snyder and colleagues, the core of hope is the belief that one can set and achieve goals. The primary source of change in therapy, in their view, is the expectation that therapy will have a positive difference on one's life (Irving et al., 2004; Snyder, Ilardi, Michael, & Cheavens, 2000; Snyder, McDermott, Cook, & Rapoff, 1997; Snyder, Michael, & Cheavens, 1999; Snyder, Parenteau, Shorey, Kahle, & Berg, 2002; Snyder & Taylor, 2000).

This study compares the hope of maltreating parents whose children were removed from home with that of parents whose children were kept at home. More specifically, it compares the levels and correlates of hope in the two groups of parents. Hope was assessed separately in the two groups for two reasons. One is that, given the role of hope as a parenting resource (e.g., Horton & Wallander, 2001; Kashdan et al., 2002; Levanon-Simyoni, 2009; Venning et al., 2007; Wen-Jui Cheng, 2006), the possibility that those parents whose children were permitted to stay at home, implying that they were regarded as better able to cope with the challenges of parenting, had more hope than those whose children were removed could not be ruled out. The other is the possibility that the experience of having a child removed from home is so powerfully upsetting that it can undermine the hope of parents whose children are removed. In addition to the augmented guilt and shame suffered by all parents who come under the care of child protection services, parents whose children were removed from home also suffer loss and grief at their separation from their children and deprivation of their parental rights. They may also feel a greater sense of helplessness, more impaired self-esteem and more criticism from family members and professionals (Buchbinder & Bareqet-Moshe, 2011; Mosek, 2004; Moss & Moss, 1984; Schofield et al., 2011). We were concerned that information would be lost or blurred if the two groups of parents were examined as one.

1.2. Tested variables

The literature on hope identifies numerous correlates or predictors of hope in various populations. These include, among others, personal features such as self-esteem (Kashdan et al., 2002), self-concept (Smith, 1998), time perspective (Lavella, 2004), sense of coherence (Cockrell, 2004; Hershey, 1997), and religious beliefs and practices (Cockrell,

2004; Jankowski & Sandage, 2011); features of health and illness (Hsu, Lu, Tsou, & Lin, 2003); and interpersonal features, such as perceived social support (Gibson, 1999; Snyder, Cheavens, & Sympson, 1997), social desirability (Hershey, 1997), and quality of relations with parents (Shorey, Snyder, Yang, & Lewin, 2003; Westburg, 2001). With the single exception of a study which found that mothers' avoidant attachment style was associated with low hope (Wen-Jui Cheng, 2006), none of the studies was carried out among maltreating parents.

In selecting variables to examine here, we decided to focus on two personality features, namely self-esteem and narcissism, and two interpersonal features, perceived social support and relations with parents. In each category, one of the variables has been extensively studied among maltreating parents and its associations with maltreatment are fairly clear (self-esteem, social support), while the other variable has been little studied in this population, leaving the connection with maltreatment uncertain (narcissism, relations with parents).

1.2.1. Self-esteem

Self esteem encompasses persons' feelings and beliefs regarding their abilities, personal qualities, and social acceptability (Rosenberg, 1979). Low self-esteem has been repeatedly cited as a prevalent feature among maltreating parents, stemming from the abuse and neglect that many of them suffered as children and from their experience of failure in many areas of their lives as adolescents and adults (e.g., Anderson & Lauderdale, 1982; Vernon, 2003). Self-esteem can be expected to contribute to hope, in that it entails the belief in one's abilities and capacities, while hope entails the belief that one has the ability to attain one's goals (Kashdan et al., 2002).

1.2.2. Narcissism

Narcissism is a broad and complex phenomenon, at the core of which is a fundamental lack of self-valuation that issues in selfabsorption to the exclusion of the ability to attend to the feelings and concerns of others. It is manifested, on the one hand, by grandiosity, arrogance, boastfulness, and need for attention and admiration and, on the other, by hypersensitivity to real or imagined slights, social inhibition, and heightened self-consciousness and dependence on others (Kohut, 1971, 1977). Beginning in the early 1990s, the two sets of manifestations have been distinguished from one another, with the first set being termed "overt narcissism" and the second "covert narcissism". Covert narcissists do not display the grandiosity, arrogance, or exhibitionism of the overt narcissist, but rather show a sense of inferiority, a strong need for approval, and hyper-sensitivity to the opinions of others. They tend to be anxious, hesitant, and unsure, as well as passive and not take responsibility for their actions (Given-Wilson, McIlwain, & Warburton, 2011; Rose, 2002; Wink, 1991; Zeigler-Hill, Clark, & Pickard, 2008).

It is widely held that narcissistic parents (with no distinction between the overt and covert types) are unempathic, unable to meet their children's emotional needs and expect them to meet their own. Several quantitative studies support this view (Bavolek, 1984; Glickauf-Hughes, 1997; Miller, 1981). Vernon (2003) found that both covert narcissism and certain features of overt narcissism were associated with parents' abuse of their children, and urged further study of this issue. In the present study, we focus on covert narcissism because, in the authors' clinical experience, this type is more characteristic of maltreating parents than overt narcissism. Precisely how covert narcissism would affect the parents' hope is uncertain. On the one hand, the features of covert narcissism create difficulties that impair persons' functioning and adjustment (Vernon, 2003), which may undermine their hope. On the other hand, covert narcissists tend to engage in unrealistic fantasies about success and entitlement from others (Hendin & Cheek, 1997), which may enhance their hope.

1.2.3. Perceived social support

Perceived social support in this study refers to the sense that there are people in one's social environment on whom one can count for

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