



# Disentangling the mental health impact of childhood abuse and neglect



Charlotte A.M. Cecil<sup>a,\*</sup>, Essi Viding<sup>b</sup>, Pasco Fearon<sup>b</sup>,  
Danya Glaser<sup>c</sup>, Eamon J. McCrory<sup>b</sup>

<sup>a</sup> Department of Psychology, Institute of Psychiatry, Psychology & Neuroscience, King's College London, De Crespigny Park, SE5 8AF, UK

<sup>b</sup> Division of Psychology and Language Sciences, University College London, UK

<sup>c</sup> Institute of Child Health, University College London, UK

## ARTICLE INFO

### Article history:

Received 13 April 2016

Received in revised form

21 November 2016

Accepted 22 November 2016

Available online 30 November 2016

### Keywords:

Childhood maltreatment

Emotional abuse

Adolescence

Mental health

Psychiatric symptoms

## ABSTRACT

It is unclear whether maltreatment types exert common or specific effects on mental health. In the current study, we aimed to systematically characterize the unique, shared and cumulative effects of maltreatment types on psychiatric symptoms, using data drawn from a community sample of high-risk youth ( $n = 204$ ,  $M = 18.85$ ). Analyses controlled for a range of potentially confounding variables, including socio-demographic variables, neighbourhood deprivation and levels of community violence exposure. Outcome measures included multi-informant reports of internalizing difficulties, as well as data on externalizing problems and trauma-related symptoms. We found that (i) consistent with previous studies, maltreatment types were highly interrelated and frequently co-occurred; (ii) symptom severity linearly increased with the number of maltreatment types experienced (more so for self-report vs informant ratings); and (iii) while most forms of maltreatment were significantly associated with mental health outcomes when examined individually, few unique effects were observed when modelling maltreatment types simultaneously, pointing to an important role of shared variance in driving maltreatment effects on mental health. Emotional abuse emerged as the main independent predictor of psychiatric symptomatology – over and above other maltreatment types – and this effect was comparable for males and females (i.e. no significant interaction with sex). Findings contribute to a better understanding of heterogeneity in individual responses to maltreatment.

© 2016 Elsevier Ltd. All rights reserved.

## 1. Introduction

In recent decades, the deleterious effects of maltreatment on child development and wellbeing have been well documented (Cicchetti & Toth, 2005; McCrory, De Brito, & Viding, 2012). Nevertheless, understanding the causes of heterogeneity in individuals' responses to maltreatment continues to represent an important challenge for researchers and practitioners alike (Afifi & Macmillan, 2011). One factor that may contribute to such individual heterogeneity is the type of maltreatment experienced; that is, whether distinct forms of abuse and neglect are associated with increased risk for specific mental health problems. To date, however, the empirical literature has been largely inconsistent. While a number of studies have reported

Abbreviations: CVE, community violence exposure.

\* Corresponding author.

E-mail addresses: charlotte.cecil@kcl.ac.uk, charlotte.cecil@hotmail.com (C.A.M. Cecil).

<http://dx.doi.org/10.1016/j.chiabu.2016.11.024>

0145-2134/© 2016 Elsevier Ltd. All rights reserved.

generic, non-specific associations between types of maltreatment and individual outcomes, including anxiety, depression, suicide risk, rule-breaking and substance use (e.g. Green et al., 2010; Norman et al., 2012; Torchalla, Strehlau, Li, Schuetz, & Krausz, 2012; Vachon, Krueger, Rogosch, & Cicchetti, 2015), others have provided evidence for differential effects, with the most consistent evidence relating to the impact of physical abuse on externalizing difficulties. Specifically, a number of studies based on child and adult populations have reported a unique association between history of physical abuse and multiple outcomes related to externalizing difficulties, including conduct problems, impulsivity, anger, aggression, disruptive and delinquent behaviours as well as number of violent offences committed (Cohen, Brown, & Smailes, 2001; Litrownik et al., 2005; Petrenko, Friend, Garrido, Taussig, & Culhane, 2012; van der Put, Lanctot, de Ruiter, & van Vugt, 2015). Still another set of studies has suggested that the *number* of maltreatment types experienced – rather than the *specific type* itself – may be a more informative predictor of mental health outcomes, whereby exposure to a higher number of maltreatment types linearly predicts greater symptom severity (i.e. cumulative effects; Arata, Langhinrichsen-Rohling, Bowers, & O'Brien, 2007; Finkelhor, Ormrod, & Turner, 2007; Finkelhor, Ormrod, & Turner, 2009; Lauterbach & Armour, 2016). As such, it remains unclear whether maltreatment effects are driven by what is common to all maltreatment types (i.e. shared variance) versus what is specific to a particular maltreatment type (i.e. unique variance). Further research is needed to disambiguate these influences, as the presence of differential effects may carry important implications for risk assessment, treatment formulation and the development of more targeted prevention strategies.

Much of what is known regarding maltreatment effects has come from studies that have focused on specific forms of abuse or neglect in isolation. However, it is increasingly evident that maltreatment types are significantly correlated, so that experience of one form of maltreatment increases the likelihood of another one also being experienced (Arata et al., 2007; Herrenkohl & Herrenkohl, 2009; Higgins & McCabe, 2003). Furthermore, available data on prevalence estimates suggests that children often experience multiple forms of maltreatment while growing up (Dong et al., 2004; Finkelhor et al., 2007; Turner, Finkelhor, & Ormrod, 2010). Consequently, a failure to consider all maltreatment types is likely to be problematic and result in an overestimation of effects attributed to individual forms of maltreatment, as it assumes that these forms occur independently from one another (Fallon et al., 2010; Herrenkohl & Herrenkohl, 2009; Higgins & McCabe, 2001). To this end, a growing number of studies have begun to examine multiple forms of maltreatment concurrently (e.g. Lau et al., 2005; Petrenko et al., 2012; Torchalla et al., 2012; Lewis, McElroy, Harlaar, & Runyan, 2016; Lauterbach & Armour, 2016; Villodas et al., 2012). While some consistent findings have emerged, particularly with regards to the unique effect of physical abuse on externalizing difficulties (Cohen et al., 2001; Litrownik et al., 2005; Petrenko et al., 2012; van der Put et al., 2015), evidence of other unique effects has been more equivocal. For example, an independent effect of sexual abuse on internalizing and externalizing problems has been observed in some studies (e.g. Lewis et al., 2016), but not others (e.g. Vachon et al., 2015). In addition to sampling and measurement differences, mixed findings in the literature may stem from considerable variations across studies in factors such as (i) the number of maltreatment types assessed, (ii) the analytical strategy employed, and (iii) the type of covariates included (Arata et al., 2007; Higgins & McCabe, 2001; Petrenko et al., 2012).

Firstly, studies examining multiple forms of maltreatment concurrently have often varied in the number of maltreatment types assessed. While physical and sexual abuse have featured predominantly within these studies, the inclusion of other maltreatment types has been more inconsistent, particularly with regards to emotional abuse. In some cases, emotional abuse has been excluded on the basis that it may be inherent to all other forms of maltreatment and may not represent a unitary construct (e.g. Petrenko et al., 2012). In other cases, emotional abuse has been examined separately and has been found to be a significant independent contributor to mental health difficulties (e.g. Arata et al., 2007). It is important to clarify the nature and scope of effects associated with emotional abuse, particularly as it has been shown to be as a highly prevalent yet often overlooked form of maltreatment (Rees, 2010).

Second, studies have tended to adopt a categorical approach when assessing the relationship between maltreatment types and mental health outcomes. Often individuals are assigned to discrete categories that index different combinations of maltreatment types and groups are then compared in order to test for differential effects. However, the disadvantage of this approach is that it relies extensively on subjective decisions about what methodology to use in order to derive groups (e.g. person-centred latent class analysis, Witt et al., 2016; hierarchical classification, Lau et al., 2005; severity-based classification; Arata et al., 2007), and how many combinations of maltreatment types to include, both issues that may contribute to differences in findings across studies. Furthermore, the use of discrete categories precludes the possibility of establishing whether maltreatment effects are driven by unique or shared variance between maltreatment types. In contrast, regression approaches can be used to isolate the effects of individual maltreatment types, over and above all other forms of maltreatment. To date, however, few studies have made use of this approach to identify differential effects while including all maltreatment types concurrently (e.g. Arata et al., 2007; Torchalla et al., 2012).

Third, existing studies have varied in the number and type of covariates included. While many studies have not examined potential confounds in the association between maltreatment and mental health outcomes (see Higgins & McCabe, 2001; for a review), some have controlled for differences in demographic characteristics, such as participant age and sex (e.g. Taussig, 2002; Sullivan, Fehon, Andres-Hyman, Lipschitz, & Grilo, 2006). Very few studies have adjusted for socio-economic disadvantage, even though maltreatment is known to cluster in geographical areas characterized by increased poverty, also a predictor of poorer mental health outcomes (Evans & Cassells, 2014). In addition, no study to our knowledge has examined the effects of maltreatment types while controlling for other forms of adversity, such as community violence exposure (CVE; Petrenko et al., 2012). CVE may be a particularly important confound as it has been shown to co-occur with maltreatment

Download English Version:

<https://daneshyari.com/en/article/4936112>

Download Persian Version:

<https://daneshyari.com/article/4936112>

[Daneshyari.com](https://daneshyari.com)