



The distal consequences of physical and emotional neglect in emerging adults: A person-centered, multi-wave, longitudinal study



Joseph R. Cohen^{a,*}, Suvarna V. Menon^a, Ryan C. Shorey^b, Vi Donna Le^c, Jeff R. Temple^c

^a University of Illinois at Urbana Champaign, United States

^b Ohio University, United States

^c University of Texas Medical Branch, United States

ARTICLE INFO

Article history:

Received 23 August 2016

Received in revised form

19 November 2016

Accepted 27 November 2016

Keywords:

Neglect

Maltreatment

Emerging adulthood

Internalizing symptoms

Substance use

ABSTRACT

Despite being the most prevalent form of child maltreatment, the correlates and consequences of neglect are poorly understood, particularly during early adulthood. The present multi-wave, longitudinal study sought to address this gap in this literature by examining physical and emotional neglect in emerging adults in a diverse community sample. 580 adolescents ($Age_{Mean} = 18.25$; $Age_{SD} = 0.59$; 58.3% female; 31% Hispanic, 28.9% Caucasian; 26.2% African-American; 13.9% other) completed self-report measures for child maltreatment at baseline, and measures for depression, posttraumatic stress disorder, generalized anxiety disorder, and substance use every year for three years. For our analyses, we used both variable-centered (mixed-level modeling) and person-centered (latent profile analysis) analyses to best understand a) how physical and emotional neglect relate to other forms of maltreatment and b) to determine physical and emotional neglect's unique impact on prospective mental health functioning. Our person-centered analyses revealed that a three-profile model provided the best solution for our data ("No Trauma," "Abuse", and "Neglect"). In longitudinal analyses, the "the neglect" group had significantly elevated scores compared to the "no trauma" group on all outcomes except alcohol use ($p < 0.01$). Results from our variable-centered analyses showed comparable findings between physical and emotional neglect, with higher scores corresponding to elevated symptoms of depression, PTSD, illicit substance use, and cigarette use over time ($p < 0.01$). In conclusion, our results suggest that early neglect-exposure poses a risk for the subsequent development of internalizing symptoms and substance use behaviors among emerging adults.

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1. Introduction

Physical neglect (i.e., the failure to meet a child's basic physical needs, such as food, clothing, shelter, personal hygiene, and medical care) and emotional neglect (i.e., not meeting the child's developmental or emotional needs, including inadequate nurturance or affection; Proctor & Dubowitz, 2014) are the most prevalent forms of child maltreatment worldwide.

* Corresponding author at: Department of Psychology, University of Illinois, Urbana Champaign, 603 East Daniel Street, Champaign, IL 61820, United States.

E-mail addresses: Joseph.R.Cohen@gmail.com, cohenj@illinois.edu (J.R. Cohen).

Approximately one in five children will experience emotional and/or physical neglect by the age of 17 (Finkelhor, Turner, Shattuck, & Hamby, 2013; Stoltenborgh, Bakermans-Kranenburg, & van IJzendoorn, 2013). In 2014, of the 6.6 million children referred to child protective services (CPS) agencies in the United States, an overwhelming 75% involved allegations of neglect (U.S. Department of Health and Human Services, 2014). Equally troubling, while strategies focused on reducing childhood adversities attenuated the occurrence of most maltreatment subtypes over a five year span (e.g., sexual abuse and emotional abuse), rates for neglect remained stagnant (Finkelhor et al., 2013). In response, research has increasingly focused on neglect to better understand this adverse family environment (see Boyce & Maholmes, 2013). The goal for this collective research is to ultimately reduce the occurrence of neglect within at-risk families (e.g., Dubowitz, Feigelman, Lane, & Kim, 2009) and promote the healthy development of neglect-exposed individuals (e.g., Swenson, Schaffer, Heggeler, Fadowski, & Mayhew, 2010).

The present multi-wave, longitudinal study sought to advance our understanding of the psychological consequences of physical and emotional neglect in three important ways. First, we focused on neglect's potential impact during the transition from late adolescence into early adulthood (i.e., ages 18–25), a critical period with regard to interpersonal and achievement domains (Arnett, 2007, 2014) and a sensitive period to the development of childhood trauma-related distress (Khrapatina & Berman, 2010; Thompson et al., 2015). Second, we examined the prospective impact of physical and emotional neglect in a large, diverse community sample. Past studies have focused on CPS (e.g., Cicchetti & Rogosch, 2002; Widom, 2013) or clinical (e.g., Adams et al., 2016) samples leading to a potential "tip of the iceberg" problem where only the most severe cases of neglect are being studied. Examining our hypotheses within a community sample can illuminate the continuum of neglect (Proctor & Dubowitz, 2014; Stoltenborgh et al., 2013) and identify potential sex and race differences with regard to neglect (Chaffin, Kelleher, & Hollenberg, 1996). Finally, we used a parallel analytic approach where both variable-centered and person-centered analyses were used to examine physical and emotional neglect (Petrenko, Friend, Garrido, Taussig, & Culhane, 2012). This analytic approach, coupled with our longitudinal design, can provide foundational knowledge concerning childhood neglect's impact on psychological distress during the challenging transition into adulthood.

1.1. Neglect and mental health in emerging adulthood

Neglect is a potent risk factor for the development of psychological distress, especially internalizing disorders (Norman et al., 2012). Early exposure to childhood neglect is closely associated with the proximal development of depression and anxiety in youth (Hildyard & Wolfe, 2002), and distal internalizing consequences in adults (Norman et al., 2012; Spinhoven et al., 2010; Widom, DuMont, & Czaja, 2007). Despite being unaffiliated with a Criterion A event by definition, associations between childhood neglect-exposure and posttraumatic stress disorder (PTSD) have also been identified in both youth and adult populations (Milot, St-laurent, Louise, & Provost, 2010; Nikulina, Widom, & Czaja, 2011). While there is little debate concerning neglect's role as a potent risk factor for internalizing distress, it is less clear whether certain subtypes of neglect may be particularly detrimental (Mersky & Topitzes, 2010). Studies typically focus on either physical (e.g., Widom et al., 2007) or emotional neglect (e.g., Spinhoven et al., 2010; Young, Lennie, & Minnis, 2011), making specificity analyses challenging. A collection of research suggests that physical neglect may confer greater risk for internalizing symptoms in childhood (Hildyard & Wolfe, 2002; Kim & Cicchetti, 2006), while findings for both emotional (Spinhoven et al., 2010) and physical (Widom et al., 2007) neglect show deleterious outcomes in adults. Interestingly, emotional neglect may uniquely confer greater risk for internalizing symptoms in clinical (van Vugt, Lanctot, Paquette, Collin-Vezina, & Lemieux, 2014) and community (Campbell-Sills, Cohan, & Stein, 2006) samples of emerging adults. Prospectively examining the relation between physical/emotional neglect and internalizing symptoms in a large community sample can help determine whether emotional, as opposed to physical, neglect exerts a greater influence on internalizing distress in early adulthood.

In contrast to the literature on internalizing distress, the association with neglect and externalizing behavior, particularly substance use, is less clear. Some studies show that neglect contributes to increased drug and alcohol use across ages (e.g., adolescents and adults) and samples (e.g., clinical and community; Alvarez-Alonso et al., 2016; Mills, Alati, Strathearn, & Najman, 2013; Rosenkranz, Muller, & Henderson, 2012; Schilling, Aseltine, & Gore, 2007; White & Widom, 2008). Meanwhile, other studies have failed to replicate these associations, showing that while physical and sexual abuse predicted alcohol and illicit substance use, patterns of physical/emotional neglect do not significantly relate to problematic substance use patterns in adolescents (Cheng and Lo, 2010) or adults (Galaif, Stein, Newcomb, & Bernstein, 2001). Inconsistent findings concerning neglect's association with substance use may be due to a reliance on cross-sectional data, inconsistent inclusion/analytic treatment of other maltreatment subtypes, and potential demographic differences relevant to neglect-exposure.

1.2. Demographic considerations

Early adulthood represents a critical period for identity development and long-term stability in interpersonal and career functioning (Arnett 2007, 2014). Exposure to physical and emotional neglect in childhood can lead to biological, cognitive, and interpersonal deficits in childhood and early adolescence which lay the foundation for psychological distress in early adulthood (Hildyard & Wolfe, 2002; Kazemian, Widom, & Farrington, 2011; Sheridan & McLaughlin, 2014). To date, however, the majority of maltreatment, let alone neglect research, has ignored the developmental period between adolescence and adulthood leaving it unclear what the specific relation between neglect and psychological functioning is during this developmental stage (Schulenberg, Sameroff, & Cicchetti, 2004; Toth & Cicchetti, 2013). Due to the complex relation between

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