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Research article

The intergenerational transmission of child maltreatment: A three-level meta-analysis

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ABSTRACT

A parental history of experiencing child maltreatment is an important risk factor in several etiological theories of child maltreatment. In the past, two reviews have been conducted on the available evidence for intergenerational continuity in child maltreatment, but were only qualitative in nature. Therefore, the present review aimed to provide a quantitative summary of the current knowledge on intergenerational transmission of child maltreatment. In our 3-level random-effects meta-analysis, we included 84 studies reporting on 285 effect sizes and found a medium summary effect of $r = 0.289$; 95% CI [0.257, 0.337], with significant variation in effect sizes within (level 2) and between (level 3) studies. This implies that in families of parents who experienced maltreatment in their own childhood, the odds of child maltreatment are almost three times the odds of child maltreatment in families of parents without a history of experiencing child maltreatment (OR = 2.990). However, as indications for bias were found, caution is warranted in interpreting this effect. Moderator analyses revealed that the effect of intergenerational transmission was the smallest in children who experienced physical abuse. Further, study quality was negatively associated with effect size magnitude. We highlight the need for an improvement in quality of primary research, and discuss implications of our findings for clinical practice.

1. Introduction

Child maltreatment is a worldwide problem that severely impacts both victims and society. [Stoltenborgh, Bakermans-Kranenburg, Alink, and Van IJzendoorn \(2015\)](#) demonstrated in their meta-analytic review that estimated prevalence rates based on self-report studies were 12.7% for sexual abuse, 22.6% for physical abuse, 36.3% for emotional abuse, 16.3% for physical neglect, and 18.4% for emotional neglect. Other researchers have provided evidence for the association between child maltreatment victimization and problems in multiple domains of functioning, such as academic achievement, social and emotional development, psychopathology, and neurobiological deficits (see [Widom, 2014](#) for a review of child maltreatment consequences). Therefore, it is important to understand the risks associated with child maltreatment, so that effective preventive strategies can be developed targeting these risks.

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In several etiological theories of child maltreatment (e.g., Bandura & Ribes-Inesta, 1976; Belsky, 1980, 1993), a parental history of experiencing child maltreatment is considered to be an important risk factor for child maltreatment. In this meta-analytic review, we focus on the effect of this specific parent-related risk factor.

Differences between studies in prevalence and consequences of (forms of) child maltreatment can be partly explained by differences in definitions of child maltreatment used by scholars and practitioners. The World Health Organization states that “child abuse or maltreatment constitutes all forms of physical and/or emotional ill-treatment, sexual abuse, neglect or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to the child’s health, survival, development or dignity in the context of a relationship of responsibility, trust or power” (Krug, Dahlberg, Mercy, Zwi, & Lozano, 2002). In The United States, child abuse and neglect is defined by the Federal Child Abuse and Prevention and Treatment Act as (1) any recent act or failure to act on the part of a parent or caretaker resulting in death, serious physical or emotional harm, sexual abuse, or exploitation; or (2) an act, or failure to act, that presents an imminent risk of serious harm (CAPTA Reauthorization Act of, 2010). In this review, we focused on four forms of child maltreatment: physical, sexual, and emotional abuse, and neglect.

Child maltreatment is generally regarded as a multifactorial determined phenomenon, meaning that many different risk factors contribute to the occurrence of child maltreatment. Belsky (1980, 1993) noted that risk factors can be found at four different “levels of analysis” varying in proximity to the child. The first level represents parental- and child-related factors, the second level represents family-related factors, the third level represents risk factors present in the community of the family as well as risk factors in the social system surrounding the family, and the fourth level represents risk factors regarding a society’s attitude towards children and abuse. Brown, Cohen, Johnson, and Salzinger (1998) demonstrated that in particular an accumulation of risk factors at different levels contributes to child maltreatment. As parents (or caretakers) are most proximal to children, it can be theorized that particularly parent-related factors are most determinative in the occurrence of child maltreatment. Mulder, Kuiper, Van der Put, Stams, and Assink (2018) and Stith et al. (2009) confirmed in their meta-analytic reviews on risk factors for child maltreatment that the largest effects were found for a variety of parent-related risk factors. Examples of these factors with relatively large effects are mental health problems, experiencing stress, (ab)using alcohol and/or drugs, a low self-esteem, and poor parenting skills (Mulder et al., 2018; Stith et al., 2009).

Parenting behavior is greatly influenced by parents reacting to experiences in their childhood. In raising children, parents tend to apply parenting behavior that is based on child-rearing practices of their own parents, meaning that parents raise their children in a way that resembles their own upbringing (see, for instance, the reviews of Puttallaz, Constanzo, Grimes, & Sherman, 1998 and Van IJzendoorn, 1992). In scientific literature, this intergenerational continuity in parenting behavior is often referred to as intergenerational transmission. Not only positive parenting behavior can be passed on by intergenerational transmission, also abusive parenting practices can be passed on from generation to generation. For instance, Finzi-Dottan and Harel (2014) found that the risk for maltreating children was six times greater when parents had experienced child maltreatment themselves. This is in line with evidence from Sroufe, Egeland, Carlson, and Collins (2005) who found that 70% of maltreated parents abuse or neglect their children. Based on these studies, a parental history of experiencing child maltreatment may be one of the parent-related risk factors that, in general, are important in predicting child maltreatment. However, there is also evidence contrary to these findings. Kaufman and Zigler (1987) found that most of the parents who experienced child maltreatment did not maltreat their own offspring, which is in accordance with Browne and Herbert (1997), who found that ‘only’ 7.6% of the parents who experienced maltreatment abused their offspring.

Several pathways may explain the intergenerational cycle of child abuse. First, behaviorists assume that by experiencing maltreatment, children learn that hurting and harming others is ‘normal’ (Bandura, 1973, 1977). The maltreating behavior is modeled and internalized and consequently, children are more likely to repeat such behaviors as adults (Bandura & Ribes-Inesta, 1976). Second, Kerig and Becker (2010, Chapter 2) suggest that maltreated children have impaired emotion regulation capacities due to the chronic and pervasive maltreatment. As a result, these children experience increased irritability and impulsivity, resulting in aggressive behaviors later on in life (Kerig & Becker, 2010, Chapter 2). In addition, Kerig and Becker note that cognitive processes, such as hostile attribution, could account for the intergenerational transmission of child abuse. Third, child abuse has been consistently linked to disorganized (or unresolved) attachment (Cyr, Euser, Bakermans-Kranenburg, & Van IJzendoorn, 2010). In parents with unresolved (or disorganized) attachment representations, interactions with their child could trigger their traumatic childhood experiences, leading to atypical, abusive parenting behavior (Goldberg, Benoit, Blokland, & Madigan, 2003; Main & Hesse, 1990). This atypical, frightening behavior of parents can cause disorganized attachment in children, resulting in a cycle of disorganized attachment across generations (Benoit & Parker, 1994; Madigan et al., 2006).

A fourth pathway is the intergenerational transmission of psychopathology. Research has shown that children of parents with mental illnesses are more likely to suffer from psychopathology than children from healthy parents (Deault, 2010; Frick et al., 1992; Goodman et al., 2011), which is, among other things, explained by the genetic vulnerability of psychopathology (Goodman & Gotlib, 1999). Because mental illness in parents has shown to be related to elevated risks of abusive behavior (e.g., Stith et al., 2009), the intergenerational transmission of psychopathology offers an explanation for the intergenerational cycle of child abuse. Finally, the intergenerational transmission of attachment can be explained by the transfer of a general risk environment from parents to children, including a low socio-economic status, and a low quality of the supportive system around the family (Stith et al., 2009). These risks emphasize that a parental history of child maltreatment is only a single (parent-related) risk factor that may be present next to other risk factors. Further, those other risk factors may be equally or even more important than a parental history of child maltreatment, and can be unique predictors independent of a parental history of child maltreatment.

Given the contrary findings of previous studies on intergenerational transmission of child maltreatment (Browne & Herbert, 1997; Kaufman & Zigler, 1987; Sroufe et al., 2005), it is important to synthesize all primary study findings in a systematic manner, so that

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