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Self-reported and case file maltreatment: Relations to psychosocial outcomes for youth in foster care



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ABSTRACT

The aim of the current study was to explore the relation between maltreatment and psychosocial outcomes for youth in foster care, and how this relation differs according to reporter type (self-report or case file). Participants included 285 children and adolescents and their caregivers who completed self-report questionnaires about life-time maltreatment and psychosocial adjustment. Youths' case files containing lifetime maltreatment reports were obtained from Division of Social Services (DSS), and were coded for physical and sexual abuse, emotional maltreatment, and neglect using the Modified Maltreatment Classification System (MMCS; English & LONGSCAN Investigators, 1997). Crosstabs analysis was used to summarize proportions of youth whose caregivers reported clinically significant internalizing and externalizing and average to high adaptive functioning within groups of youth who had a) neither self-reported nor case file maltreatment, b) only case file maltreatment, c) only self-reported maltreatment, and d) both case file and self-reported maltreatment for each maltreatment type (physical and sexual abuse, emotional maltreatment, and neglect). Results showed that externalizing symptoms differ according to reporter type for physical and sexual abuse, and that internalizing symptoms differ according to reporter type for physical and sexual abuse, and that internalizing symptoms differ according to reporter type for sexual abuse. Implications for methodology in maltreatment research are discussed.

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1. Introduction

The prevalence of maltreatment and its relation to mental health outcomes vary depending on the source of information, which may have important implications for maltreatment research methodology. Accumulating research suggests that youth reports of their maltreatment experiences can differ significantly from the information recorded in state case files (Everson et al., 2008; Hambrick, Tunno, Gabrielli, Jackson, & Belz, 2014; White, English, Thompson, & Roberts, 2016). Not only do the rates of maltreatment differ depending on who is asked, but psychosocial outcomes for youth exposed to abuse also tend to vary (Everson et al., 2008; McGee, Wolfe, Yuen, Wilson, & Carnochan, 1995; White et al., 2016). Further, evidence suggests that when multiple reporter sources concur that a child or adolescent has experienced a type of abuse, psychosocial outcomes tend to be more severe (Shaffer, Huston, & Egeland, 2008; Cohen, Brown, & Smaile, 2001). However, further research is needed to examine these patterns among youth in foster care and in relation to adaptive functioning. The current study aimed to contribute to the methodological development of the field of maltreatment research by comparing youth self-reports of abuse versus case file maltreatment reports and their relations to youth psychosocial adjustment.

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1.1. Measurement of maltreatment

The measurement of maltreatment, namely reporter type, plays an important role in our understanding of its prevalence and sequelae. Researchers have solicited adolescent's self-reports about the occurrence and severity of maltreatment (Jackson, Gabrielli, Tunno, & Hambrick, 2012; Nooner et al., 2010; Powers, Eckenrode, & Jaklitsch, 1990; Stiffman, 1989). However, this is still a relatively uncommon approach, possibly due to ethical concerns about upsetting youth and the potential for needing to break confidentiality to report maltreatment to law enforcement and social services (Newman, Walker, & Gefland, 1999; Knight et al., 2000). A further drawback to self-reported maltreatment data is the potential for missing or inaccurate data. Research with adults suggests that retrospective reports of maltreatment are subject to recall errors, the risk of which may vary by to the recency of the maltreatment, emotions associated with the memory of the maltreatment, as well as the developmental level of the child at the time of the event (Hulme, 2004). Although self-reports from adolescents may be more accurate than self-reports from adults because there is less time between the event and the report (Widom, Dutton, Czaja, & Dumont, 2005), the possibility remains that adolescents' recall of events from childhood is not entirely accurate.

Another method of gathering information on child maltreatment is review of case files that contain maltreatment incidences reported to state child protective agencies (e.g. Dubowitz et al., 2005). A strength of this approach is the use of an external observer; that is, case file

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report does not rely on recollections that may be influenced by a variety of factors. Researchers have developed a number of coding protocols with pre-defined criteria (e.g. Barnett, Manly, & Cicchetti, 1993; English & LONGSCAN Investigators, 1997), allowing results to be compared across studies. Finally, use of case files circumvents the problem of common method bias that arises when both maltreatment and its consequences are self-reported (Podsakoff, MacKenzie, Lee, & Podsakoff, 2003; Shaffer et al., 2008).

Although there are benefits to incorporating case file review into studies of child maltreatment, there are drawbacks to using case file review as the sole source of information about abuse (Everson et al., 2008; Shaffer et al., 2008). Reports to child protective services do not represent the entirety of maltreatment experienced by a child (Sedlack & Broadhurst, 1996). Many cases of abuse and neglect are never observed by mandated reporters or other concerned adults, and approximately 40% of mandated reporters fail to report suspected abuse to child protective agencies (Zellman, 1990). Thus, information contained in case files can be an underestimate of the totality of maltreatment occurring over a child's life.

The problem of underreported maltreatment in case files is reflected in results showing that youth generally self-report much higher rates of maltreatment than are found in their case files. Young adolescent participants in the LONGSCAN study, for example, self-reported four to six times as much abuse exposure than was indicated in their case files (Everson et al., 2008). Among a subset of youth who participated in the SPARK project, a higher percentage of youth self-reported maltreatment compared to those that had case file maltreatment (Hambrick et al., 2014). This study found varying degrees of discrepancy between self-report and case file review for different types of maltreatment, with large differences for physical and psychological abuse and small differences for sexual abuse and neglect. A recent study on emotional maltreatment found a lifetime rate of 36% according to case files alone, 54% according to self-report alone, and 68% when self-reports and case file records were combined (White et al., 2016). Most of these discrepancies arose because youth self-reported emotional maltreatment not present in their case files. Results from these studies suggest that children may experience more maltreatment than is documented in their case files, even among youth with sufficient documented maltreatment to warrant out-of-home placement, and that this discrepancy may be larger for certain types of maltreatment (i.e. emotional).

Other studies have found that youth underreport maltreatment compared to what is coded in their case files, especially for neglect (McGee et al., 1995; Pinto & Maia, 2013; Shaffer, Huston, & Egeland, 2008). For instance, although youth in the LONGSCAN study generally reported higher prevalence of maltreatment than was indicated in their case files, nearly half of participants with maltreatment documented in their case files failed to disclose at least one event in their self-reports (Everson et al., 2008). Overall, these findings suggest that it is important to attend to discrepancies in prevalence of maltreatment across reporter types when considering the different types and severity of psychosocial outcomes of maltreatment.

1.2. Maltreatment outcomes

Not only do self-report and case file accounts often disagree, but this discrepancy can also have real implications for findings regarding maltreatment outcomes. Results generally show that youth self-reports of maltreatment relate to psychosocial outcomes more strongly than do case file reports of maltreatment. For instance, in their recent study of emotional maltreatment, White et al. (2016) found that although both self-reported and case file reports of emotional maltreatment predicted self-reported trauma symptoms and risk behaviors, self-reports of emotional maltreatment predicted additional trauma symptoms, including intrusive experiences and defensive avoidance.

Another study compared ratings of maltreatment (physical, sexual, and emotional abuse, family violence, and neglect) obtained from

child protection social workers, adolescents' self- reports, and case file review (McGee et al., 1995). Results showed that adolescents' self-reports of maltreatment significantly improved prediction of self-reported internalizing and externalizing symptoms above and beyond both case file view and social workers' ratings. Self-reported maltreatment also correlated with caregiver-reported internalizing symptoms. Case file reports of sexual abuse correlated with caregiver-reported internalizing symptoms only, and social worker ratings of maltreatment did not relate to psychosocial outcomes. Everson et al. (2008) also found that adolescent self-report exceeded case file review in the prediction of psychological adjustment. Adolescent self-reports of physical, sexual, and psychological abuse each predicted trauma-related symptoms, and adolescent reports of physical and psychological abuse predicted self-reported externalizing problems. However, adolescent self-reports of maltreatment were unrelated to caregiver-reported behavioral problems. Case file maltreatment aggregated across type related to caregiver-reported behavioral problems. However, findings that self-reported maltreatment is more related to self-reported psychosocial outcomes compared to caregiver-reported psychosocial outcomes may be due in part to common method bias, specifically in terms of same reporter source for both the independent and dependent variables.

(Podsakoff, MacKenzie, Lee, & Podsakoff, 2003; Shaffer et al., 2008). In addition, existing research has focused on maladaptive responses to maltreatment, with little attention paid to foster youths' resilience.

Overlap between self-reported and case file reports also appears to have implications for psychosocial adjustment. Cohen et al. (2001) found that individuals with both case file and self-reports of physical maltreatment had the highest rates of psychopathology among study participants. Shaffer et al. (2008) found similar results, such that individuals who were maltreated according to both early adulthood retrospective self-report and prospective case file review had more clinician-reported internalizing disorder diagnoses at age 16 compared to individuals who had only case file maltreatment. The group with both self-reported and case file maltreatment also had higher teacher-reported behavioral problems at age 16 compared to individuals identified only through retrospective self-reports. Not only does research suggest that self-reported maltreatment relates to outcomes more so than case file maltreatment, but also that being identified as maltreated through both indices may be related to more severe psychosocial outcomes.

1.3. Aims and hypotheses

The aim of the present study was to build on prior research investigating how self-report and case file maltreatment relate to psychosocial adjustment. This study aimed to 1) compare rates of self-reported and case file maltreatment and 2) compare rates of clinically significant internalizing and externalizing symptoms and average or high-average adaptive functioning based on the source of the report of maltreatment (i.e., case file only, self-report only, case file and self-report combined). The present study contributes to the literature by using previously constructed and well-validated measures of youth self-reported maltreatment and case file review (Everson et al., 2008; White et al., 2016); using a large sample of children and adolescents at high risk for having experienced maltreatment due to being in out-of-home care; measuring adjustment via parents report rather than self-report, thus avoiding common method variance. Further, in addition to previously used indices of internalizing and externalizing symptoms, this study includes assessment of foster youths' adaptive functioning. This is in line with previous efforts to broaden in our conceptualization of psychosocial adjustment to include positive as well as negative outcomes for youth in foster care (e.g. Yates & Grey, 2012).

Based on prior research showing that youth generally self-report higher rates of maltreatment compared to what is coded in case files, this study hypothesized that a higher proportion children and adolescents in this sample would self-report maltreatment compared to the

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