In recognition of the cross-disciplinary nature of child protection work, the editorial team of Child Psychology and Psychiatry Review felt that it would be useful to readers to feature the topic of Child Abuse as a separate section of Journal Monitor. This is the first issue in which the section appears, and we are grateful to Viki Simpson for the detailed reviews that she has undertaken.

Sally Beveridge

CHILD ABUSE SELECTION
Compiled by Viki Simpson

Child Abuse and Neglect (1997)

Most research studies indicate that no single factor leads to child abuse and neglect and that a multiplicity of psychological and social factors appear to be involved, but it is known that there is a strong link between parenting stress and child abuse. It is also known that not all parents suffering from high stress levels go on to abuse their children. On this basis, there must be some intervening factor. Anger expression is thought to be a likely candidate and this paper examines the issue. It was hypothesised that individuals experiencing high levels of parenting stress in addition to an increased tendency to express anger were most likely to physically abuse their children.

In Study 1, the sample consisted of 28 females and 11 male subjects who were parents to at least 1 child aged 12 years and younger. Their ages ranged from 24 to 45 years, 80% were white and 20% non-white, 56% lived with a partner, and the number of children in each family varied from 1 to 8. Subjects were asked to complete the Child Abuse Potential Inventory (CAPI) (Milner, 1986), a screening instrument designed to identify individuals at risk of physical abuse, the Parenting Stress Index (PSI) (Abidin, 1990), a self-report measure used to assess sources of stress in the parent/child relationship and identify areas for intervention, and the State-Trait Anger Expression Inventory (STAXI) (Spielberger, 1988), which measures the behavioural manifestation of anger towards children.

It was found that parenting stress and anger expression were significantly positively correlated with the CAPI Abuse Scale scores, and the prediction of CAPI scores was improved by combining the two factors. It was also concluded that, as the sample was obtained from a population of mature students in further education, it was necessary to repeat the research using a more balanced sample.

For Study 2, a total of 65 females and 11 males were recruited after notices describing the study were sent home from their children’s schools. Their ages ranged from 25 to 55 years, 85% were white and 15% non-white, 76% lived with a partner, and the number of children in the family ranged from 1 to 8. Participants were asked to complete the same measures as in the previous study.

The findings confirmed the results of the previous study. It was further found that fathers and parents without partners were likely to have higher Anger Expression scores. Parents without partners also obtained higher CAPI scores. It is concluded that there is a positive correlation between parenting stress and abuse potential, and that the prediction of physical abuse is improved when anger expression is included in the equation.


It is known that witnessing domestic violence is associated with psychological and behavioural problems in childhood. The long-term effects of witnessing such violence, however, have received much less scrutiny. Although it is acknowledged that observing domestic violence in childhood can have lasting effects on psychological functioning, little is known about the way in which inter-parental physical aggression influences children’s adjustment, or the extent to which alcoholism is an issue. This research attempts to examine first, whether parental alcoholism in addition to frequent verbal discord and physical abuse of the child accounts for the association between observing domestic violence during childhood and later psychological adjustment; and second, whether the frequency and severity of the aggression has an influence on long-term adjustment. The researchers also hypothesised that parental caring and warmth during childhood would be lower for adults who had witnessed domestic violence as children, and that this difference would account for much of the variance in adult adjustment.

The sample consisted of 914 women and 538 men recruited from a population of university students. Ninety-five per cent were white and 5% non-white. Subjects completed a range of tests including the Physical Aggression and Verbal Aggression Scales of the Conflict Tactics Scale (Straus, 1979). Parental alcoholism was assessed using the Short-MAST (Selzer et al., 1975) and adult psychological adjustment by the Brief Symptom Inventory (Derogatis & Spencer, 1982) and the Young Adult Self-Report (Achenbach et al., 1994). The Parental Caring subscale of the Parenting Bonding Instrument (Parker et al., 1979) was also used to assess parental caring and warmth received during childhood.

It was found that 14% of the sample had witnessed domestic violence in childhood and that witnessing such violence was associated with greater levels of psychological distress in adulthood, with men and women being equally affected. It was also found that children who witnessed physical aggression between their parents were more likely to have been physically abused and to have a parent with a drinking problem. However, there was little relationship between the frequency and severity of the violence and the degree of adult maladjustment. It is suggested that the child’s developmental stage and methods of coping could be mediating experiences. The results also supported the third hypothesis, that witnessing domestic violence was associated with reduced parental caring and warmth, and that this accounted for much of the variance in adult psychological functioning.

The findings therefore support the view that witnessing domestic violence is a risk factor for later adult maladjustment.
The cumulative effects of neglect and failure to thrive on cognitive functioning. Vol. 21, No. 7, pp. 691–700.

Much is known about the detrimental effects of neglect on children. Similarly, in recent years there has been a great deal of research on children who fail to thrive. However, there appears to be little research on the combined effects of neglect and failure to thrive on development. This paper therefore attempts to rectify the situation and examines the cumulative effect of neglect and failure to thrive on cognitive performance amongst infants and toddlers from low-income families.

Failure to thrive (FTT) is the term used to describe infants and young children whose weight, height, head circumference, and psychosocial development are significantly below the normal range. Neglect occurs where the child’s basic needs in respect of care and nurturing are not met. Both neglect and FTT are associated with deficits in cognitive functioning. In this study it was hypothesised that the cognitive performance of children with FTT who are also neglected will be below that of children who only suffered from neglect or FTT. It was further hypothesised that the cognitive performance of children who were only neglected or only displayed FTT would be lower than that of children who do not suffer from either syndrome.

The sample consisted of 177 children aged between 3 and 30 months who were attending a paediatric clinic serving inner-city, low-income, mostly black families. Children in the adequate group had to be above the 5th percentile, whereas the FTT group had to be below the 5th percentile with a birthweight appropriate for gestational age. Of the children, 94.4% were African-American and 5.6% Caucasian; 74 were female and 103 were male; and 73.4% of the families were receiving state benefits.

Neglect was assessed by using the HOME Inventory (Caldwell & Bradley, 1984), an instrument designed to measure both physical and emotional aspects of child rearing. Children were considered neglected if the HOME score fell below the 33rd centile. The child’s cognitive development was measured by the Bayley Scales of Infant Development (Bayley, 1969). The maternal IQ was assessed by the Similarities subtest of the Weschler Adult Intelligent Scale-Revised (WAIS-R) (Weschler, 1981). Children were allocated to the FTT group if they were at or below the 5th centile on the National Centre of Health Statistics (NCHS) Growth chart. The sample was further divided into four groups, i.e. Neglect Only (23 children), FTT Only (70 children), Neglect and FTT (27 children), and No Neglect or FTT (57 children). The data were analysed using analysis of covariance with the independent variable being Group status.

The results supported the hypothesis that the cognitive performance of children who were both neglected and suffering from FTT was significantly below that of the children in the other three groups. It was further found that the cognitive performance of children in the group with No Neglect or FTT was not significantly higher than the Neglect Only or the FTT Only group. Thus the results confirm those of Sameroff (Sameroff et al., 1987), who concluded that cognitive performance fell as the number of risk factors increased. Thus it can be seen that it is the accumulation of risk that is detrimental to cognitive functioning and that such deficits are evident even in children as young as 3 to 30 months of age. The study also demonstrates the need to regard neglect and FTT as separate risk factors, rather than classifying FTT as a subgroup of neglect, as it is the combination of the two factors that produces such significant deficits in cognitive functioning. Finally, the use of the HOME Inventory was validated as an objective measure of neglect. The authors conclude that future research should investigate the long-term effects of neglect, and of FTT and the combined effects of FTT and neglect on cognitive development.


The crucial nature of early attachment experiences and their influence on later psychological and social functioning is well established. It is also known that child abuse disrupts attachment bonds. What is less well understood is the long-term consequence of childhood abuse and early attachment on adult attachment styles. This study therefore was designed to examine the association of childhood abuse and early attachment style to adult attachment style, depression, and conflict resolutions. The researchers hypothesised that early attachment would be the stronger predictor for adult attachment style and depression, whereas destructive conflict resolution behaviour would be related to a history of abuse.

The sample consisted of 879 students, of whom 60% were female and 40% male. They were asked to complete a number of self-report measures, including a questionnaire designed to assess the frequency and severity of abuse in childhood. Respondents were allocated to the Abuse Group if they had experienced one or more of the three types of childhood abuse, i.e. verbal abuse, physical abuse, and sexual abuse. Childhood attachment relationships were measured by Hazan and Shaver’s Attachment Prototype Scale (1987) and adult attachment style by Bartholomew and Horowitz’s Attachment Prototype Scale (1991). A single measure, General Attachment, was calculated for each type of attachment relationship. The Beck Depression Inventory (Beck et al., 1961) was used to assess current levels of depression, and Conflict Resolution was assessed by the use of a 15-item questionnaire that identified behaviours occurring during a dispute between subjects and their romantic partners.

The data were analysed using a 4.4 ANOVA, with Abuse v. No-abuse and gender acting as independent variables, in order to determine differences in General Attachment across the three attachment relationships, as well as differences in depression and conflict resolution behaviour. It was found that 26.4% (N = 4.4) of the sample had been abused as children: 21.8% (N = 192) reported verbal abuse, 9.8% (N = 86) physical abuse, and 6.5% (N = 57) sexual abuse. Fifty-one per cent of the Abuse group were found to have an insecure attachment to mother by comparison with 19% of the No-abuse group. Similarly, 69.5% of the Abuse group were insecurely attached to father compared to 39.5% of the No-abuse group.

In relation to General Attachment it was found that the Abuse group were more likely to have less secure attachments, and the Abuse group also differed from the No-abuse group in terms of conflict resolution behaviour. Attachment to mother was found to be the best predictor of adult romantic attachment style, with a history of abuse as the strongest predictor of destructive conflict resolution behaviour.

The results support the hypothesis in that subjects who have been abused as children are found to have less secure adult relation-
ships than those in the no-abuse group. They are also more depressed and more likely to use destructive behaviour in a conflict situation. Thus the long-term effects of childhood abuse on adult attachment style and depression may be mediated by early attachment experience, whereas the long-term impact of abuse on resolving conflicts is much more direct. It would seem, therefore, that childhood abuse needs to be considered in terms of its relationship to early attachment and social learning if the long-term effect on psychological and social functioning is to be truly understood.


It is widely accepted that no single factor accounts for child abuse and neglect, and a range of family and social factors have been implicated as risk factors for child maltreatment. The ecological model of childhood abuse and neglect also implicates life events and stress as precipitating maltreatment. It is suggested that social support may mediate the effects of negative life events and stress on the rates of child abuse and neglect. This premise was supported by Kotch et al. (1995) in their study of at-risk infants and mothers through the infants’ first year of life. The present study follows up those infants to their second and third birthdays. It was hypothesised that those factors that predicted maltreatment in the infants’ first year of life would increase the risk of further maltreatment in the second and third years. The present study also examines the extent to which life events, stress, and social support affect the risk of child abuse and neglect.

Out of an initial sample of 1111 mothers, 405 were re-interviewed in the third year of their infant’s life. At this stage respondents were asked to complete a number of measures designed to assess stress and social support. These included the Life Experience Survey (LES), the Everyday Stresses Index (ESI), the Autonomy and Relatedness Inventory (ARI), the Social Well-being Index, and the Social Network Index.

It was found that 13% (N = 52) of the follow-up group had been reported for child maltreatment in the first year of their infant’s life, with 47 being reported between their infant’s first and third birthdays. Participation in Medicaid and previous maltreatment reports were found to be significantly related to substantiated reports of maltreatment in the second or third year of life (p < .01). The risk of substantiated maltreatment was also found to increase where subjects had low social support and stressful life events.

The results therefore indicated that those factors that predicted maltreatment in the infant’s first year of life also predicted later maltreatment. It was also found that support from a personal intimate as measured by the ARI significantly differentiated between substantiated and unsubstantiated child maltreatment reports. This suggests that a supportive partner is a prime mediating factor in relation to child abuse and neglect, in that mothers with hostile and rejecting partners are more likely to abuse and neglect their children.

Overall, however, it would seem that socioeconomic status and living conditions are the most powerful predictors of child maltreatment, with stressful life events and social support making a significant contribution.

Child Maltreatment (1997)


The vulnerability of children with disabilities has become an increasing focus of attention from professionals throughout the last decade. Such children are thought to be at increased risk of abuse, either because of the additional demands they place on their caregivers or because of specific factors relating to the child, i.e. not matching parental expectations and beliefs. Although this has generated some useful research on parenting stress and abuse factors, most studies appear to rely on samples of white-collar, middle-income, intact Caucasian families. This interesting paper aimed to assess whether similar findings could be obtained where the sample was based on low-income, African-American families with developmentally disabled children.

Thirty-three African-American mothers with such children, who were attending a clinic for diagnostic evaluation, were recruited for the study. All the mothers were low-income and received some form of State benefit. Most were single parents, with 81% reporting education up to or below high school level 1. Children’s ages ranged from 2 to 14 years, and most were boys.

Subjects completed the Child Abuse Potential Inventory (CAPI) (Milner, 1986), a self-report measure designed to identify individuals at risk of physical abuse, and the Parenting Stress Index (PSI) (Abidin, 1990), an instrument used to assess sources of stress in the parent–child relationship and identify areas for intervention. The children’s developmental functioning was assessed by the mothers completing the Vineland Adaptive Behaviour Scales (Sparrow et al., 1984), whilst cognitive functioning was assessed by the Bayley Scales of Infant Development (Bayley, 1993), the Stanford-Binet Intelligence Scale (Thorndike et al., 1986), and the Weschler Intelligence Scale for Children (Weschler, 1991), dependent on age and level of functioning.

It was found that the sample mean on the PSI Total Stress scores was at or above the 90th percentile. Such scores usually indicate a level of parenting dysfunction where there is a serious risk of child abuse. The PSI Child Domain mean score for the sample was also on the 95th percentile. As the mean score for the sample on the PSI Parent Domain fell in the normal range, this suggests that characteristics of the child are the main sources of stress. The CAPI Abuse Scale scores were found to be correlated significantly with the PSI Total Stress scores (p < .001) and with the PSI Parent and Child Domains (p < .001). There were no significant correlations between the child’s scores for intellectual level or adaptive behaviour and any of the PSI or CAPI Abuse Scale scores. The results suggest that, for this sample, there was significant parent stress, which appears to be related to characteristics of the child. The findings, therefore, are consistent with those of white-collar, middle-income families. The results also indicate that raising a child alone appears to increase the risk of maltreatment for children with disabilities to a considerable degree.

Children and Youth Services Reviewed (1997)


Family preservation has almost become the sine qua non of the child protection
The study reviews the data obtained from the large-scale evaluation of the Illinois Family First placement prevention programmes, which covered 60 separate agencies who were providing services to 2000 families. The data extracted covered a 15-month period starting in January 1990, with summary data obtained for 93% of the families and data on case history and outcome for 79%. Using simultaneous equations, three separate systems were developed to examine the effects of case and service characteristics at 3 months, 6 months, and 12 months post-termination from FPS.

It was found that families who received extended services from FPS were more likely to have marital problems, live in households without extended family members, and be in the Chicago region. Such cases had more contact with case workers, received more practical assistance, and were more likely to be involved in family counselling. The duration of FPS had no effect on out-of-home placement or subsequent child maltreatment, although at 1 year, service length appeared to be associated with a slight increase in the rate of case closure.

Intensity of contact was found to be related to an increase in substantiated reports of maltreatment and out-of-home placements at 3 and 6 months but not at 1 year. There was no relationship with case closure at 3 or 6 months although, at 1 year, intensity of contact was related to a reduced likelihood of case closure. The number of practical services provided also had no significant effect on the risk of maltreatment. Similarly, families who received the most extensive practical services were also those whose cases were most likely to remain open 1 year after FPS ceased. This suggests that the duration, intensity, and breadth of FPS has little effect on later child maltreatment, out-of-home placement, or case closures.

The results therefore failed to support the view that variations in FPS affect outcome, and the authors conclude that, although FPS may be useful, it is not the answer to the complex social and psychological problems that produce child abuse and neglect. Nor does it reduce the use of foster placements. In the absence of access to adequate income, housing, health care, and child care, FPS can only be expected to have the most minimal effects on child maltreatment.

Clinical Child Psychology and Psychiatry (1997)

This paper must rank as one of the most outstanding contributions to the debate on child welfare in 1997 and should be viewed as essential reading for all those involved in decisions about the placement of children. The authors examine carefully and thoroughly, and with great effect, the research evidence on the outcome of contact between children and their birth parents when children are removed from home. It is to be hoped that their conclusions will influence all those responsible for policy and practice where children are placed away from home.

Much has been made about the need for contact with birth parents for children placed temporarily or permanently away from home. It is often assumed that such contact is essential for the child’s psychological and social development. This view was further supported when provision for contact became part of the Children Act, 1989. It is also assumed that research evidence supports this view. In this paper Quinton et al. review the research evidence behind this premise.

The point at issue is whether contact is beneficial for all children, including those whose experiences within their own families can only be described as negative and damaging. As there are virtually no studies on the effects of contacts with relatives other than parents, the study concentrates on contact between birth parents and their children.

A number of methodological issues are considered. As always, many studies are based on small and unrepresentative samples and methods of recruitment to the sample, for example through newspaper advertisements, may well bias the outcome. There is also confusion about the definition of contact and little attempt to separate direct and indirect contact. Most studies fail to ascertain the prior psychological functioning of the children or parents to use as a baseline against which the effect of contact can be measured. Similarly, many studies make little attempt to control confounding variables, and sampling on the basis of placement can bias outcomes.

The authors continue by examining the evidence on the effects of contact in relation to four specific categories: children who were expected to return home; children who were in long-term placements excluding adoptions; adoptions of infant children; and permanent placements of older children. They conclude that research on contact has been patchy and partial, and that there is a need for more rigorous and sophisticated studies before it can be agreed that contact is beneficial in cases where children’s experience with their families has been less than optimal. Thus contact in respect of permanent placements should be seen as an experiment that needs to be evaluated properly before being applied wholesale. The major priority remains the need for reliable information on maintaining, supporting, and evaluating contact where the welfare of the individual child takes precedence, not the interests of the adults involved.