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Child Abuse & Neglect



The impact of childhood abuse history and domestic violence on the mental health of women in Japan[☆]

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ABSTRACT

Objective: To understand the independent and interactive effects of childhood abuse history (CAH) and domestic violence (DV) on the mental health status of women in Japan.

Methods: A self-administered questionnaire survey was conducted among a sample of 340 women staying in 83 Mother-Child Homes in Japan to assess the women's CAH and DV experiences, along with their current mental health problems, including dissociated, depressed, and traumatic symptoms.

Results: Independent from DV, CAH, especially psychological abuse, had a significant impact on all of the women's mental health symptoms. DV was found to have an independent effect on traumatic symptoms. Weak interactive effects of CAH and DV were found on dissociated and traumatic symptoms. Among those women without CAH, DV was significantly associated with dissociated and traumatic symptoms; however, DV had no impact on dissociated and traumatic symptoms if CAH was present.

Conclusions: The findings suggest the significant impact of CAH on women's mental health problems, independent from DV. CAH and DV weakly interact on women's mental health.

Practice implications: In psychological therapy for battered women with mental health problems, if the cases were abused during childhood, it is recommended that therapy be focused on childhood abuse, especially if the client was psychologically abused. In addition, mental health care and welfare providers should be aware that the mental health problems of mothers without CAH might be exacerbated by DV; thus, appropriate resource allocation should be considered.

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Introduction

Child abuse is an emerging problem in Japan (Fujiwara, 2007). An estimated 35,000 children are abused annually, which is 1.54 cases per 1,000 children aged 0 through 17 years (Kobayashi, 2002). Previous studies have shown a link between child abuse history (CAH) and mental health consequences when the victim becomes an adult (Beitchman et al., 1992; Dykman et al., 1997; Horwitz, Widom, McLaughlin, & White, 2001; MacMillan et al., 2001; Reinherz, Paradis, Giaconia, Stashwick, & Fitzmaurice, 2003; Widom, 1999; Widom, DuMont, & Czaja, 2007). It is also considered that the impact of child abuse

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on mental health problems varies by the type of abuse (i.e., physical abuse, sexual abuse, neglect, and psychological abuse) (Bensley, Van Eenwyk, & Wynkoop Simmons, 2003).

Domestic violence (DV) is another emerging issue in Japan. The estimated rate of DV is 14.3% among women by the age of 30 years (Yoshihama, Horrocks, & Kamano, 2007). A recent international study on DV showed that during the past 12 months, the prevalence rate of DV in Japan parallels those of Western countries (Garcia-Moreno, Jansen, Ellsberg, Heise, & Watts, 2006). In accordance with the increased recognition of DV in Japan, legislation to protect DV victims was enacted in the year 2000 (Domestic Violence Prevention Act [Law No. 31]) and amended in 2004 to include post-divorce partner violence. Numerous studies have reported that DV has a significant impact on mental health problems, especially depression and post-traumatic stress disorder (PTSD) (Bland & Orn, 1986; Campbell, Kub, Belknap, & Templin, 1997; Campbell, 2002; Cascardi, O'Leary, & Schlee, 1999; Gleason, 1993; Golding, 1999; Jaffe, Wolfe, Wilson, & Zak, 1986; Kaslow et al., 1998; McCauley et al., 1995; Ratner, 1993; Silva, McFarlane, Soeken, Parker, & Reel, 1997; Thompson et al., 2000).

Previous studies have shown the link between CAH and DV; that is, women with CAH are more likely to be victims of DV (Bell & Chance-Hill, 1991; Bensley et al., 2003; Browne, 1993; Coit et al., 2001; Wingood & DiClemente, 1996; Wyatt, Axelrod, Chin, Carmona, & Loeb, 2000), because CAH violates expectations of relationships with loved ones (Wyatt et al., 2000). Thus, the reported association between DV and mental health problems might be confounded by CAH. However, few studies have investigated the independent effects of CAH and DV on women's mental health problems.

In addition, CAH and DV might generate interactive effects on the mental health of women. Previous studies have shown interactive effects between child abuse and DV on a child's mental health. Child abuse was associated with internalizing and externalizing problems and traumatic stress only when mothers reported higher levels of physical DV. This condition is not true for youths whose mothers did not experience DV (Kaslow & Thompson, 2008). However, few studies have investigated the interactive effects of CAH and DV on women's mental health.

Based on this previous research, it is hypothesized the following: (1) CAH and DV have independent associations with women's mental health problems and (2) CAH and DV have interactive effects on women's mental health problems; that is, women with CAH are more vulnerable to DV than women without CAH. The purpose of this study is to investigate the independent and interactive effects of CAH and DV on the mental health status of women in Japan.

Methods

Sample

Questionnaires were sent to a sample of 421 mothers in 83 Mother-Child Home facilities that agreed to participate in the study. Mother-Child Home is a welfare facility in Japan, where mothers and children experiencing family problems (e.g., DV, child abuse by the father, a single mother with financial problems) can stay and get assistance to become self-supporting. In a Mother-Child Home, residents are able to receive professional support, including psychiatric or psychological therapy, guidance on parenting and daily life, and legal advice. As the facility accepts not only the mother-child family which is a victim of DV but also the mother-child family that seeks help for other reasons (such as financial difficulties), it is possible to compare the mental health of DV victims and non-victims in the same setting. Women who were likely to participate in the study were asked to do so by the staffs of the Mother-Child Homes, and 421 mothers agreed. A total of 340 mothers completed the survey (80.1%). To maintain anonymity, respondents were instructed to work on the survey, which required no formal consent, alone; thus, no support was provided in the completion of the survey. The survey was conducted in December 2005.

Measurements

Childhood abuse history (CAH). CAH was assessed using the following 7 questions: (1) I was a victim of violence from my parents (including step-parents); (2) I was ignored or refused attention by my parents; (3) My parents insulted me verbally; (4) I experienced violence from my parents severe enough to require hospital treatment; (5) I have been deprived of food or warm clothes; (6) I have experienced forced sexual contact by a parent (sexual contact includes sexual intercourse, petting, exposure of genitals, and taking naked pictures); and (7) I have experienced forced sexual contact by an adult other than a parent. Each question was answered on a 1–4 Likert scale, ranging from 1, not at all; 2, rarely; 3, sometimes; to 4, frequently. These questions were created based on the Childhood Trauma Questionnaire (Bernstein et al., 1994), but modified to suit the Japanese language and minimized to 7 questions to reduce the burden of the respondents. The total history of childhood abuse was calculated by the summation of the responses to these 7 questions. Cronbach's alpha for this scale is 0.78. Further, to dichotomize whether respondents had CAH or not, those who answered "rarely," "sometimes," or "frequently" for (4), (5), (6), and (7) and "sometimes" or "frequently" for questions (1), (2), and (3) were coded as having CAH.

Furthermore, the CAH was subdivided into physical abuse, neglect, psychological abuse, and sexual abuse. Survey questions (1) and (4) were used for physical abuse, (5) was used for neglect, (2) and (3) were used for psychological abuse, and (6) and (7) were used for sexual abuse. If each subscale had 2 questions, the responses for each item were added. The same cut-off was used for dichotomization of each subtype of CAH, as mentioned above.

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