



Prevalence of recalled childhood emotional abuse among child welfare staff and related well-being factors

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ARTICLE INFO

Article history:

Received 20 August 2009

Received in revised form 7 November 2009

Accepted 12 November 2009

Available online 2 December 2009

Keywords:

Emotional abuse

Emotional maltreatment

Adult recall

Well-being

ABSTRACT

This study examined 1) the prevalence of childhood emotional abuse retrospectively recalled by child welfare personnel, and 2) the relationship between emotional abuse and three measures of current well-being. Child welfare agency staff ($n = 253$) completed the emotional abuse subscale of the Childhood Trauma Questionnaire, as well as published scales measuring self-esteem, satisfaction with life, and sense of social support. Findings included a roughly 30% rate of recalled emotional abuse. Among associated factors that were examined, emotional abuse level was most strongly related to lower self-esteem, lower satisfaction with life, and lower sense of social support. Implications for agency practice are discussed.

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1. Introduction

It is generally recognized within social work that the child welfare work place fosters a climate that is stressful. It is an environment where personnel are daily faced with abused and neglected children and their caretakers, as well as with complex dispositional decisions in an area where definitive knowledge about solutions may all too often be lacking. Because of such stressful surroundings, many studies of child welfare workers have focused attention on emotional exhaustion and on compassion fatigue (Anderson, 2000; Conrad & Kellar-Guenther, 2006; Dill, 2007; Regehr, Hemsworth, Leslie, Howe, & Chau, 2004).

Although some authors have examined mitigating factors such as compassion satisfaction, or positive benefits, from working with traumatized persons (Conrad & Kellar-Guenther, 2006), most writings in child welfare have focused on the stressful results of working with children and families who have been traumatized. Furthermore, some authors consider compassion fatigue, or secondary traumatic stress, a serious issue that can contribute to burnout and a decision to leave a job among child welfare personnel (Anderson, 2000).

Much of this literature has focused on the stressful effects of the environment on child welfare personnel. Much less attention in the literature has been paid to historical background factors within child welfare personnel that may be associated with the general well-being of members of the child welfare workforce. The study reported here is an attempt to begin to fill this gap by examining one aspect of

workers' inner environment, namely their recollections of their own emotional abuse as they were growing up, and by examining the association of such memories with various current well-being factors.

Many reports have been published on the relationship of childhood sexual or physical abuse, or multi-type maltreatment, and later adult functioning (Heim & Nemeroff, 2001; Jackson & Nuttall, 1997; National Research Council, 1993; Royse, Rompf, & Dhooper, 1993; Vranceanu, Hobfoll, & Johnson 2007). Much less attention has been paid to the association between emotional or psychological maltreatment in childhood and various aspects of adult functioning (Egeland, 2009) although emotional maltreatment has been described as a core issue or component of all forms of child abuse and neglect (Binggeli, Hart, & Brassard, 2001; Brassard, Germain, & Hart, 1987; Wright, 2007), and is considered to have "significant and enduring consequences" (Egeland, p. 23; Yates, 2007). Even less has been reported about the long-term effects of childhood emotional abuse among social workers and others employed in the fields of child welfare or allied occupations.

The present study, which originally focused on the measurement of emotional abuse and neglect (Baker & Festinger, in preparation), provided an opportunity to examine the amount of emotional abuse retrospectively recalled by child welfare personnel (both clinical and non-clinical staff), as well as to ask whether there is a relationship between childhood emotional abuse and current levels of self-esteem, satisfaction with life, and sense of social support among employees of a large child welfare agency.

In what follows, brief theoretical perspectives are provided, followed by a summary highlighting the dearth of studies on emotional abuse among child welfare personnel, a review of

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prevalence figures, and a summary of findings on the sequelae of emotional abuse in adulthood. Emotional neglect will be separately discussed where relevant.

1.1. Theoretical perspectives

A variety of theories have been proposed to help “clarify the nature of psychological maltreatment and factors that influence or mediate its occurrence, impact, and effects” (Binggeli et al., 2001, p. 17) and can help explain the association between childhood emotional maltreatment and adverse consequences in adulthood. These theories tend to lean in the direction of a causal model that moves from the childhood experience of maltreatment toward negative sequelae later in life. Although multiple theoretical models are probably needed to understand the effects of early emotional abuse, we focus here on four theories of “recognized and strong relevance to psychological maltreatment” (Hart, Brassard, Binggeli, & Davidson, 2002, p. 90): human needs theory, psychosocial stage theory, attachment theory and acceptance–rejection theory. Maslow (1970), an early proponent and acknowledged leader in human needs theory proposed that the human organism has certain needs to be met in order to develop properly, such as physiological needs (the need for food, clothing, and shelter), and the need for safety, love and belongingness, and esteem that if thwarted by psychological maltreatment will distort development. Psychosocial stage theory (Erikson, 1959) proposes that human development proceeds in a series of stages each with its own set of tasks that need to be mastered in order not to adversely affect the quality and likelihood of success or failure at the next stage. Psychological abuse or neglect can undermine mastery of tasks at a particular stage of development and can, depending on the stage, affect the organism's sense of self and sense of self-worth.

Attachment theory (Ainsworth, 1978; Bowlby, 1969) proposes that the quality of attachment attained between children and their caregivers early on affects subsequent attachment behavior and a child's understanding of the self as worthy of love and the world as a safe and predictable place. The quality of attachment can have a profound effect on later emotional health and interpersonal functioning, and can influence persons' expectations about their and others' roles in social interactions through their interactions with attachment figures. Thus emotional abuse by a caretaker can profoundly disturb a child's sense of self and of the world. The parental acceptance–rejection theoretical orientation (Rohner & Rohner, 1980), perhaps most directly relevant for the subject of this study, predicts that emotional abuse by parents has consistent effects on the personality development of children and has “consistent effects on the personality functioning of adults who were rejected as children” (p. 192). The theory focuses on the impact of such elements as parental acceptance embodied in warmth and affection, as opposed to parental emotional abuse, namely hostility, aggression and indifference, on the sense of self-esteem, sense of self-adequacy, emotional stability, and negative world view of the developing human being.

1.2. Trauma history and emotional abuse: general community

Although there are a variety of reports on mental health professionals' recalled history of childhood trauma in general, usually referring to physical or sexual abuse (see for instance Elliott & Guy, 1993; Hansen et al., 1997; Nuttall & Jackson, 1994; Pope & Feldman-Summers, 1992; Shapiro, Dorman, Burkey, & Welker, 1999; Yoshizawa & Mills, 2003), studies that mention past emotional abuse are relatively rare, and some that do focus on it, or psychological maltreatment, deal with general population or student samples rather than child welfare or mental health professionals (see for instance: Black, Jeffreys, & Hartley, 1993; Briere & Runtz, 1990; Brodhagen & Wise, 2008; Chapman et al., 2004; Crawford & Wright, 2007; Edwards,

Holden, Felitti, & Anda, 2003; Finzi-Dottan & Karu, 2006; Gibb, Benas, Crossett, & Uhrlass, 2007; Gross & Keller, 1992; Messman-Moore & Coates, 2007; Perry, DiLillo, & Peugh, 2007; Reyome & Ward, 2007; Spertus, Yehuda, Wong, Halligan, & Seremetis, 2003). Many of these studies, although not using child welfare or mental health samples, do demonstrate, to varying degrees, relationships between a history of emotional abuse and such adult sequelae as diminished self-esteem, decrements in mental health scores, higher levels of distress, depression, suicidal ideation, relationship aggression, interpersonal conflict, negative cognitive style, codependency, anxiety symptoms, somatic complaints, global psychological distress, and post-traumatic stress symptoms.

1.3. Prevalence of emotional abuse

The prevalence of emotional abuse in general community samples has been reported as roughly more than one third (Binggeli et al., 2001; Hart, et al., 2002) or to range “from 12.1% to 45.9%” (Perry et al., 2007, p. 119). Reports on the proportion of mental health and allied professionals who recall emotional abuse have been somewhat higher, most often hovering between 30% and 50%. For instance, a recent report (Pooler, Siebert, Faul, & Huber, 2008) notes 32.3% among social workers, whereas a 2003 report on child welfare workers (Nelson-Gardell & Harris) using the scale constructors' published guidelines for classifying Child Trauma Questionnaire scores (Bernstein & Fink, 1998), showed 39.4% recalled low to very severe emotional trauma (personal communication, June 3, 2009), and a 2004 survey of clinicians treating sexual abuse survivors or offenders self-reported a 51.9% rate of emotional abuse histories (Way, VanDeusen, Martin, Applegate & Jandle, 2004). Higher proportions of recalled emotional abuse have also been reported among females than males. For instance, a study by Follette, Polusny, and Milbeck (1994) reporting on 225 mental health professionals mentions 39.4% of males and 51.3% females reporting a history of emotional abuse.

1.4. Sequelae of emotional abuse: social work and mental health personnel

Although few, some studies of social work and mental health personnel have addressed the psychosocial and/or behavioral sequelae in adults associated with childhood psychological maltreatment. Two studies were found using samples of health care workers. A report of a sample of chemically dependent registered nurses (Mynatt, 1996) notes that of 115 who provided health and drug histories roughly half answered a question about childhood victimization. Of these, emotional abuse was “the predominant type” (p. 17) occurring along with other forms of abuse. Ferguson and Dacey (1997) compared 55 female health care professionals who reported a history of childhood psychological maltreatment with 55 without any self-reported maltreatment history. All completed The Childhood Experiences Questionnaire, a measure specifically constructed for the study to assess maltreatment history, along with three well-known measures of current anxiety, depression and dissociation. Statistically significant associations were found between a history of emotional abuse and all three measures. Those who had self-reported psychological maltreatment reported “greater trait anxiety and depression, and more frequent dissociative episodes” (p. 948) than the non-abused group of women.

Only one study was found that addressed child welfare workers and two used samples of social workers. A relationship between emotional abuse and secondary traumatic stress (STS) was reported in 2003 (Nelson-Gardell & Harris). These investigators reported on a sample of 166 child welfare workers who attended training sessions on STS. All completed questionnaires containing, among other things, a scale measuring compassion fatigue and the Childhood Trauma Questionnaire (Bernstein & Fink, 1998), which includes sub-scales for

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