



## Adult adjustment of survivors of institutional child abuse in Ireland<sup>☆</sup>

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### ABSTRACT

**Objective:** To document the adult adjustment of survivors of childhood institutional abuse.

**Method:** Two hundred and forty-seven adult survivors of institutional abuse with a mean age of 60 were interviewed with a protocol that included the Childhood Trauma Questionnaire, modules from the Structured Clinical Interview for Axis I Disorders of DSM IV and the Structured Clinical Interview for DSM IV Personality Disorders, the Trauma Symptom Inventory, and the Experiences in Close Relationships Inventory.

**Results:** The prevalence of psychological disorders among adult survivors of institutional abuse was over 80% and far higher than in the normal population, with anxiety, mood and substance use disorders being the most prevalent diagnoses. Survivors also had high rates of trauma symptoms and insecure adult attachment styles, and these were higher for those who had experienced both institutional and intrafamilial abuse.

**Conclusions:** There was an association between the experience of institutional abuse in childhood and the prevalence of adult mental health problems, particularly anxiety, mood and substance use disorders.

**Practice implications:** Policies, practices and procedures should be regularly reviewed and revised to maximize protection of young people in institutional care. Evidence-based psychological treatment should be made available to adult survivors of institutional abuse.

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### Introduction

Institutional child abuse differs from intrafamilial abuse insofar as it is perpetrated, not by family members, but by adults working in institutions serving children in the community, and also by peers within these institutions (Stein, 2006). Such institutions include residential care centres, schools, reformatories, churches, and recreational facilities which may be managed by either secular or religious organizations (Gallagher, 1999). At an individual level institutional abuse is typically an ongoing process rather than an isolated incident, within which an abuse of power and a breach of trust occurs, and which may involve physical, sexual, or emotional maltreatment (Wolfe, Jaffe, Jette, & Poisson, 2003). At a broader systemic level, institutional abuse may involve sanctioned use of particular ways of disciplining and managing children, as well as the failure of managerial and inspection systems to protect children (Stein, 2006). In Ireland in recent years there have been many allegations of institutional abuse within the context of religiously-affiliated residential institutions. In response, the Irish Government set up the Commission to Inquire into Child Abuse (CICA) and the present research was commissioned by CICA.

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The Report of the Commission to Inquire into Child Abuse (also known as the Ryan Report), which has attracted international attention, concluded that physical and sexual abuse and neglect within religiously-affiliated institutions was widespread (Ryan, 2009). In the study described in this paper, the focus is on the adjustment of adults who suffered institutional abuse in childhood within the context of Irish religiously-affiliated residential reformatories and industrial schools. The present study was informed by the literature on the effects of child abuse, institutional rearing, and institutional abuse, some of which is briefly reviewed below.

Child maltreatment has significant adverse long-term effects (Arnow, 2004; Springer, Sheridan, Kuo, & Carnes, 2003). In systematic narrative reviews of empirical studies Springer et al. (2003) and Arnow (2004) concluded that there is strong evidence that child abuse and neglect have a negative impact on adult physical and mental health, and psychosocial adjustment, with more severe child abuse leading to more adverse outcomes in adulthood. Child maltreatment may lead to a wide range of physical health problems, frequent illness, health service usage and risky health behavior (Kendall-Tackett, 2002). It may also lead to mental health difficulties notably anxiety disorders (including PTSD), depression, and alcohol and substance abuse (MacMillan, Fleming, & Streiner, 2001; Weich, Patterson, Shaw, & Stewart-Brown, 2009), personality disorders (Battle et al., 2004; Bierer et al., 2003), and self-harm (Brodsky et al., 2001; Soloff, Lynch, & Kelly, 2002). In addition, child maltreatment may give rise to problematic adult romantic attachments and intimate relationships in adulthood (Colman & Widom, 2004; Davis & Petretic-Jackson, 2000), and educational and occupational difficulties (Perez & Widom, 1994).

Institutional upbringing, like child maltreatment, is also associated with a range of developmental problems (Gilligan, 2000; O'Doherty, 1970; Rutter, Kreppner, & O'Connor, 2001; Rutter, Quinton, & Hill, 1990; Vorria, Sarafidou, & Papaligoura, 2004). In the only study of children and adolescents living in Irish child care institutions, O'Doherty (1970) concluded, from a correlational investigation of over 300 participants aged 6–15 years, that rates of learning difficulties and intellectual disability were higher in residential reformatories and industrial schools than in the normal population. Rutter et al. (2001) found that children reared in Romanian institutions who suffered severe deprivation from birth until 2 years and then were adopted, at 4 and 6 years showed impaired cognitive development, attachment problems, inattention, overactivity, and quasi-autistic features. In a series of studies of children reared in Greek institutions, Vorria et al. (2004) found that institutionalized children showed disorganized attachment styles and poorest outcomes in adulthood occurred among those who entered institutions before 2.5 years with an intergenerational continuity in the cycles of deprivation and disadvantage. Institutionalized children with the poorest outcome came from disadvantaged backgrounds, and grew up to be adults at risk of creating a disadvantaged environment for their own children. Among those who entered later in childhood, poorer outcomes occurred among those who had experienced parental separation or divorce before institutionalization. Rutter et al. (1990) found that adults reared in institutions showed high rates of personality disorder, marital and romantic relationship problems, criminality (in men), teenage pregnancy and having children taken in to care (in women).

In the only published study of psychological disorders among adult survivors of institutional clerical abuse, Wolfe, Francis, and Straatman (2006) found that 88% of a group of 76 Canadian adult survivors of institutional abuse, at some point in their lives, suffered from a DSM IV (American Psychiatric Association, 1994) disorder and 59% presented with a current disorder. Post-traumatic stress, alcohol, and mood disorders were the most common conditions, and participants in the study also showed significant trauma symptomatology on the Trauma Symptom Inventory (TSI, Briere, 1996). The TSI scales most notably affected were those which assessed trauma, dysphoria, depression, intrusive experiences, defensive avoidance, and dissociation. Over half of the sample had a history of criminality, and more than two thirds had experienced significant sexual problems in adulthood.

The aim of the present study, which builds on the work of Wolfe et al. (2006), was to document the rates of psychological disorders and psychological difficulties in adult survivors of institutional abuse in Ireland. In light of the review of the literature above on the long-term effects of child abuse, institutional rearing and institutional abuse, our main hypothesis was that there would be elevated rates of psychological disorders, trauma symptoms, and insecure adult attachment styles in our sample of adult survivors of institutional abuse compared with normative groups or community samples. A second hypothesis was that there would be an association between indices of institutional child abuse and adult adjustment. A third hypotheses was that participants who reported both intrafamilial and institutional child abuse would show poorer adjustment in adulthood than those who reported institutional abuse only. Finally we wanted to see if gender was associated with adult adjustment to institutional abuse.

## Method

### Context

The study was commissioned by CICA, a statutory body established by the Irish Government in 2000 to investigate and report on institutional abuse. CICA set up a Confidential Committee which provided a forum for victims of abuse to recount their experiences on an entirely confidential basis. CICA also established an Investigation Committee which facilitated victims who wished to both recount their experiences and have their allegations of abuse fully investigated. The Investigation Committee, which included legal professionals, had the right to compel persons accused of abuse, or persons involved in the management of institutions in which abuse was alleged to have occurred to attend hearings and to produce any documents it needed to see. Both alleged victims and perpetrators of abuse were allowed legal representation at Investigation Committee hearings. The findings from the Confidential and Investigation Committee hearings were presented in CICA's final report to

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