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Defining child neglect based on child protective services data[☆]

Howard Dubowitz^{a,*}, Steven C. Pitts^b, Alan J. Litrownik^c, Christine E. Cox^d,
Desmond Runyan^d, Maureen M. Black^a

^a *Department of Pediatrics, University of Maryland School of Medicine, 520 W. Lombard Street,
1st Floor, Baltimore, MD 21201, USA*

^b *Department of Psychology, University of Maryland, Baltimore County, Baltimore, MD, USA*

^c *Department of Psychology, San Diego State University and SDSU/UCSD Joint Doctoral Program in Clinical
Psychology, San Diego, CA, USA*

^d *Department of Social Medicine, University of North Carolina School of Medicine,
Chapel Hill, NC, USA*

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Abstract

Objectives: To compare neglect defined by Child Protective Services official codes with neglect defined by a review of CPS narrative data, and to examine the validity of the different neglect measures using children's functioning at age 8 years.

Methods: Data are from 740 children participating in a consortium of longitudinal studies on child abuse and neglect; 481 had at least one CPS report prior to age 8. CPS records were reviewed to ascertain both broad CPS types of neglect as well as specific subtypes of neglect using a modified version of the Maltreatment Classification System (MMCS). Frequencies of, and correlations among, the types and subtypes of neglect were examined. The validity of the neglect measures was evaluated by examining their relationships with children's functioning at age 8.

Results: The CPS neglect types and MMCS subtypes were moderately correlated, as were the MMCS subtypes of neglect. In general, neglect was only modestly associated with children's functioning at age 8 ($r^2 = 1\text{--}4\%$), with few differences between the CPS neglect types and the MMCS subtypes. There were significant associations with children's total and externalizing behavior problems, impaired socialization, and impaired daily living skills. Among the specific subtypes, neglect of children's medical needs was related to externalizing behavior problems,

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* Corresponding author.

impaired socialization, and impaired daily living skills. Neglect of children's hygiene needs was related to impaired socialization.

Conclusion: The moderate correlations among CPS and MMCS types and subtypes of neglect and their similar associations with children's functioning suggest that the considerable effort involved in coding neglect subtypes from CPS narrative data may yield limited incremental knowledge regarding the types of neglect children experience and their sequelae. However, the MMCS does offer useful descriptive information on the nature of neglect children experience, and may guide future research and practice on optimal ways to conceptualize neglect.

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Introduction

Neglect is the most frequently identified form of child maltreatment and has been associated with significant consequences including fatalities (Bonner, Crow, & Logue, 1999; Erickson & Egeland, 2002; Gaudin, 1999; Perez & Widom, 1994). Improving the understanding of neglect requires a clear and consistent definition (National Academy of Sciences, 1993). A long history of imprecise definitions of neglect has hampered researchers' ability to make inferences about the nature and consequences of neglect (Zuravin, 2001). Varying definitions across studies preclude comparison of findings. Despite Besharov's (1981) recommendation that researchers clearly describe how maltreatment was defined in their research, Zuravin (1999) found in her review of the neglect literature that relatively few had done so.

Neglect is difficult to define conceptually and operationally, and, therefore, to measure. A consensus on definition has been elusive with continuing debate over two major issues. The first concerns the scope of what is considered neglect, specifically, whether neglect should include potential harm or only actual harm (Zuravin, 2001). The prevailing concept in the child welfare system has centered on omissions in care by parents or caregivers that result in actual *or* potential harm. This concept was included in the first US federal definition in 1974, and currently all 50 states have such language in their statutes, although approximately one-third of states restrict their definitions of neglect to circumstances involving actual harm (Zuravin, 2001). A second conceptual debate continues on whether neglect should be viewed as occurring when a child's basic needs (e.g., adequate food, shelter, protection/supervision, clothing, health care) are not met (Dubowitz, Black, Starr, & Zuravin, 1993) from a child's perspective—regardless of the contributory factors, such as poverty, or whether neglect should be viewed as occurring based on the conventional focus on parental omissions in care.

Operationalizing the measurement of neglect, in the face of the definitional debates has been challenging. For example, it is difficult to discern at what point is a basic need not adequately met, or, should care be identified as inadequate. The phenomenon generally exists on a continuum, ranging from a child's basic needs being fully met to not being met at all; care ranges from excellent to grossly inadequate. Another difficulty concerns the appropriate attribution of an outcome, actual or potential, to the inadequacy of care. Occasionally it is clear, such as when an unsupervised infant drowns in a bathtub, but more often it is difficult to impossible to establish "cause and effect," such as attributing a child's behavior problem to inadequate parental care.

Neglect is difficult for researchers to measure. Approaches using self-report (parent or child) have the problem of yielding socially desirable responses. Observational measures have some strengths but are

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