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Home away from home: factors associated with current functioning in children living in a residential treatment setting

Kristine Lynn Brady, S. Jean Caraway*

*Department of Psychology, University of South Dakota, 414 E. Clark Street,
Vermillion, SD 57069-2390, USA*

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Abstract

Objective: While recent research has focused on the impact of abuse and other interpersonal traumas in childhood, little attention has been given to the experiences of children who have been removed from their homes. In addition to trauma, these children are likely to have had a number of experiences that may impact their current functioning. The purpose of this study was to provide descriptive information pertaining to the unique characteristics of children in residential treatment centers, and to examine preliminary factors believed to be associated with current functioning.

Methods: Participants included 41 children, aged 7–12, recruited from two treatment centers in the rural Midwest. Children were administered the Trauma Symptom Checklist for Children (TSCC) and participated in a brief interview. Each child's primary caregiver at the facility completed the Child Behavior Checklist (CBCL).

Results: Results of the descriptive analyses painted a picture of chaotic childhood marked by significant stress and trauma. Gender, child's satisfaction with current discharge plan, and multiple traumatic experiences were found to be associated with variations in symptomatology.

Conclusions: Findings may assist service providers and caregivers in understanding the unique experiences of this population.

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* Corresponding author.

Introduction

Despite high numbers of children placed outside their homes every year, information on specific characteristics of these children is lacking. In 1992 there were nearly 500 residential treatment centers in the United States serving over 27,000 emotionally disturbed children (Center for Mental Health Services, 1996), yet factors associated with the emotional and behavioral difficulties of these children have been deficient in the literature (Prentice-Dunn & Lyman, 1989). Specific to trauma however, several authors have noted a high prevalence of childhood traumas in samples of children in residential and inpatient settings, with some support for experiences of multiple traumas in these samples (i.e., Johnson & Aoki, 1993; Weine, Becker, Levy, Edell, & McGlashan, 1997). However, our understanding of these experiences in residential populations as well as the impact that these experiences may have on children's current and future functioning is limited due to the lack of research with children in these settings.

There appears to be a gap in the literature provided that both describes children in residential treatment and predicts how certain factors may be related to treatment outcome. For example, while experiences of trauma such as physical and sexual abuse have been documented in residential populations, other types of traumatic events or life stressors (e.g. witnessing domestic violence, loss of a primary caregiver) have received relatively less attention. In addition, whereas there is an abundance of research on samples of abused children that has suggested that stressful life events and available social support play an important role in the child's adjustment to traumatic events, this research is lacking in residential treatment populations. Research describing non-residential children have found that stressors such as prior developmental or psychiatric problems, an aversive home environment, and current maternal stress have been found to be associated with increased distress in traumatized samples (Mannarino, Cohen, & Berman, 1994; Wolfe & Mosk, 1983; Wolfe, Jaffe, Wilson, & Zak, 1985). In addition, this literature suggests that social support appears to play a significant role with support from caregivers, peers, and the school setting found to be associated with decreased symptomatology (e.g. Everson, Hunter, Runyon, Edelson, & Coulter, 1989; Howes & Espinosa, 1985; Reyes, Kokotovic, & Cosden, 1996).

The purpose of this investigation was to fill some of the existing gaps in the literature regarding children in residential treatment. An initial goal was to provide a description of a sample of children in a residential treatment setting, as this information may assist in enhancing our understanding of the unique characteristics of this population of children and serve to highlight areas for future research. A second goal was to examine some preliminary factors which may be associated with the current functioning of children in these settings. Due to the limited empirical base, the variables of interest were chosen based on suggestions from the mental health providers at the selected facilities. These variables included: the number of types of trauma experienced; the number of transitions in terms of placement in various foster homes and treatment facilities; the length of each child's current stay in residential treatment; the degree of certainty each child attributes to their current discharge plan (where they believe they will go subsequent to treatment); and each child's level of satisfaction with their current discharge plan. It was hypothesized that higher levels of psychological distress would be associated with experiencing more types of trauma, a higher number of transitions, a more

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