Early childhood maltreatment and trajectories of behavioral problems: Exploring gender and racial differences

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Abstract

The current study aimed to examine the trajectory of child behavior problems over time as a function of early maltreatment. We anticipated that early alleged maltreatment would have a substantial impact on both internalizing and externalizing behaviors. The impact of gender and racial differences in the trajectories were also examined. Using the LONGSCAN archived data, a total of 484 children were selected for the study from varying sites. Two groups were formed: children with early allegations of maltreatment from birth to age 4 and children without any report. Children included did not have further allegations of maltreatment from ages 4 to 12. Additionally, they must have completed a behavioral assessment using the Child Behavior Checklist at the age 4 baseline interview. Multilevel modeling using the SAS PROC MIXED procedure was used to examine the effects of early allegations of maltreatment on the trajectories of both internalizing and externalizing problems. Although race was not significant, gender was found to differ in trajectory of behavioral problems among children with early allegations of maltreatment. For boys, the impact of early maltreatment was strongest at the most proximal assessment of behavioral outcomes and then decreased gradually over the course of subsequent periods. For girls, although no significant impact was observed at each measurement point, the impact of early maltreatment increased and became pronounced over time. Findings support the importance of early intervention/prevention to decrease the likelihood of presenting behavioral problems in later childhood years with consideration to gender.

Introduction

In the past three decades, a wealth of research has established the association between childhood maltreatment and long-term consequences related to educational achievement, physical health, mental health, and behavioral problems (for reviews see Behl, Conyngham, & May, 2003; Gilbert et al., 2009). Early childhood maltreatment, particularly those that occurred in the first years (e.g., 0–5) of life was reported as a strong predictor of later psychiatric disorders in childhood, adolescence, and adulthood (English, Graham, Litrownik, Everson, & Bangdiwala, 2005; Kaplow & Widom, 2007; Keiley, Howe, Dodge, Bates, & Pettit, 2001). Furthermore, research has consistently demonstrated that children who experience early childhood maltreatment are at future risk for developing internalizing behavior problems (e.g., anxiety, depression, social withdrawn; Johnson et al., 2002) and externalizing behavior problems (e.g., aggression, acting out; Bongers, Koot,
Van der Ende, & Verhulst, 2004; Keiley et al., 2001) which continue into adolescents and adulthood (Fergusson, Boden, & Horwood, 2008).

Generally, the most vulnerable to maltreatment are the very young children, ages 0–4. According to a report by the U.S. Department of Health and Human Service (DHHS, 2011), children in the “age group of birth to one year have the highest rate of victimization” (p. ix). Furthermore, children who experience maltreatment before the age of four face a host of poor outcomes that persist into adulthood and impact the developmental trajectory in multiple and complex ways (English, Bangdiwala, & Runyan, 2005; Jaffee & Maikovich-Fong, 2011). Thus attention to early maltreatment of children is imperative. Examining trajectories of behavioral problems during the childhood period will not only provide a better understanding of a child’s behavioral patterns but will also be useful in predicting future outcomes than assessments measured at a single point in time (Singer & Willett, 2003).

Trajectories of problem behaviors in maltreated children

Child maltreatment has been found to influence the trajectories of depressive symptoms (Kim & Cicchetti, 2006), juvenile delinquency (Colman, Kim, Michell-Herzelf, & Shady, 2009), and both internalizing and externalizing problems (Keiley et al., 2001; Thompson & Tabone, 2010). Most of these studies focused on adolescence and early adulthood periods in which behavioral patterns might have been well-established (Granic & Patterson, 2006). Analyses of these studies focused mainly on the intercept rather than on the trajectory slopes of behavioral problems (Colman et al., 2009; Keiley et al., 2001; Kim & Cicchetti, 2006).

Also, findings from these studies were contradictory to the studies that examined the effects of early maltreatment on the trajectories of behavioral problems over the course of the childhood period (Thompson & Tabone, 2010). For example, a study by Thompson and Tabone (2010) that examined the effects of early maltreatment on the slope rather than on the intercept of both anxiety/depression and attention problems found no difference in early childhood (age 4) in the behavioral assessments between children with and without an early history of alleged maltreatment. However, differences in anxiety/depression and attention problems emerged and grew more pronounced over time. The discrepancy highlights the necessity for a closer examination of varying ages within the childhood period that may impact future trajectory. Thus, understanding the path within the childhood period can help identify specific age(s) that may be essential in the course of the trajectory. Such a finding can contribute to information regarding the relevance of age in the childhood period when developing intervention or prevention services.

Among children in the general population, trajectories of internalizing problems varied. Some studies reported stable symptoms from ages 2 to 11 (Keiley, Lofthouse, Bates, Dodge, & Pettit, 2003). Others reported decreasing symptoms in early childhood (Carter et al., 2010; Gazelle & Ladd, 2003), and still others reported a curvilinear increase of internalizing symptoms over the course of childhood (Bongers, Koot, Van der Ende, & Verhulst, 2003). The heterogeneity feature in the course of internalizing problems was also reflected in the findings from a study done by Sterba, Prinstein, and Cox (2007) that reported three distinct latent trajectory classes among a community sample from ages 2 to 11: Two thirds followed a low-stable trajectory, and smaller proportions followed decreasing/increasing, or elevated-stable trajectories. Fanti and Henrich (2010) further confirmed previous studies showing that a “moderate level of internalizing problems are normative” (p. 1165) and that children who experienced high initial levels of internalizing problems got worst over time. Conversely, externalizing problems tended to peak in early childhood but decrease over the course of later childhood (Bongers et al., 2003; Owens & Shaw, 2003).

Gender and ethnicity/racial differences in behavioral problems trajectories

Other than early maltreatment, a variety of factors have been studied that may impact the overall trajectories of children’s development in regard to problem behaviors, mental health, or well-being. Among them, gender and/or race/ethnicity difference in the longitudinal course of behavioral problems have drawn the most attention. Among the general population, behavioral problems, including both internalizing and externalizing were found to differ strongly according to gender. More girls were found in the high internalizing behavior group compared to boys (Fanti & Henrich, 2010; Keiley et al., 2003). However, most studies have found that gender differences of internalizing psychopathology usually do not show up until later childhood or early adolescence (Bongers et al., 2003; Sterba et al., 2007). In contrast, the literature on gender differences in the trajectories of externalizing problems is not consistent. Although some studies reported that boys showed more externalizing problems than girls (Bongers et al., 2003; Sterba et al., 2007), others reported no gender differences (Kelley, Bates, Dodge, & Pettit, 2000; Silver, Measelle, Armstrong, & Essex, 2010). Still, other studies reported differing results depending on the rater (Keiley et al., 2000; Miner & Clarke-Stewart, 2008).

With regard to emotional reactions to stressful life experiences such as child maltreatment, the literature suggests a critical distinction between boys and girls (Eschenbeck, Kohlmann, & Lohau, 2007; Ireland, Smith, & Thornberry, 2002). For example, boys were often found to cope with stress by exhibiting externalizing behaviors while girls tended to show more internalizing behaviors (Aune & Stiles, 2009; Eschenbeck et al., 2007; Hoffman & Su, 1997). A growing literature on criminology and psychology has indicated a gender difference in the pathway between maltreatment and adverse behaviors (Galambos, Leadbeater, & Barker, 2004; Maughan, Rowe, Messer, Goodman, & Meltzer, 2004; Tiet, Wasserman, Loeber, McReynolds, & Miller, 2001). Nonetheless, results from studies on the impact of gender on the
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