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Childhood maltreatment: A predictor of mental health problems among adolescents and young adults



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ABSTRACT

Child maltreatment is a risk factor for detrimental effects on mental health that may extend to adulthood. This study aimed to examine the association between exposure to childhood maltreatment, socio-demographic factors, and students' mental health status and self-esteem. A cross-sectional study enrolled a representative sample of 1270 students from Kuwait University. An anonymous self-administered questionnaire included students' socio-demographic characteristics, history of exposure to childhood physical and/or emotional maltreatment, DASS-21 to assess mental health status, and Rosenberg self-esteem scale was used. Chi-square test and binary logistic regression models were applied. The study found that among participants, 49.6%(95% CI: 64.8%–52.4%), 63.0%(95% CI: 60.3%–65.7%), and 43.8%(95% CI: 41.1%–46.6%) reported having depression, anxiety, and stress respectively. Moreover, 22.5%(95% CI: 20.1%–24.8%) and 18.6%(95% CI: 16.5%–20.9%) reported childhood physical and emotional maltreatment, respectively; while 12.7% reported both. Multivariate analysis revealed that experiencing childhood physical and emotional maltreatment were independent contributors to reporting depression and anxiety; while exposure to only emotional maltreatment contributed to reporting stress. Gender, GPA, childhood enrollment in private/public schools, number of close friends, were other contributors to mental health problems. Participants' median score of self-esteem was 17/30, and only childhood emotional maltreatment was a significant predictor to low self-esteem after adjustment for other confounders. Mental health problems, and experiencing childhood physical and emotional maltreatment were prevalent relatively high among university students. Childhood corporal and emotional maltreatment were independent predictors to adolescents and young adults' mental health problems. Experiencing childhood emotional maltreatment predicted low self-esteem. Further research to assess culture factors associated with childhood maltreatment is recommended.

1. Introduction

Child maltreatment, child abuse or child neglect, have been increasingly reported as an important risk factor for child psychopathology. The World Health Organization ([World Health Organization, 2016](https://www.who.int)) identified five types that can be distinguished: physical, sexual, and emotional maltreatment, in addition to neglect and negligent treatment, and exploitation. Only physical and emotional maltreatment will be the focus of this study.

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World Health Organization (2001) reported that worldwide, there is approximately 40 million children below the age of 15 subjected to child abuse each year. Recently, World Health Organization (2017) added that 25–50% of all children globally report being physically abused. The U.S.A. reported about 149,000 cases of child physical maltreatment in 2007; though the actual rates of child physical maltreatment are probably higher, since not every case is reported (National Child Traumatic Stress Network, 2009). In England, 148,300 children (aged 0–17 years) were investigated for one form of maltreatment in 2009 (World Health Organization, 2013). In the Arab world, a study conducted among undergraduate students in Jordanian universities revealed that 6.1% were exposed to a high level of abuse during childhood (Al-Zboon, Ahmad, & Al-Dababneh, 2015). In addition, Al-Mahroos (2007) detailed that in Yemen, population based surveys revealed a wide spread use of corporal punishments and cruelty to children at homes, schools, and juvenile centers, which ranged from 51 to 81%. Moreover, eleven case reports from Saudi Arabia identified 40 abused children with different types of child maltreatment and fatal outcomes were documented in five children. In Oman, five cases of child abuse were reported and about 150 hospital-based cases of child abuse were stated in Bahrain. Concerning Kuwait, very scarce information is published about child maltreatment and the literature is restricted to three hospital-based studies that identified 27 children with child maltreatment, where three children of them passed away (Al-Mahroos, 2007).

The detrimental consequences of child maltreatment are well established. For instance, child maltreatment is associated with serious internalizing and externalizing problems, including depression, self-destructive behavior, antisocial behavior, aggression, educational underachievement, and inappropriate sexual behaviors (Dhingra, Boduszek, & Sharratt, 2015; Jaffee, Caspi, Moffitt, & Taylor, 2004; Jones, Trudinger, & Crawford, 2004; Lahey, Moffitt, & Caspi, 2003; Margolin & Gordis, 2000; Vachon, Krueger, Rogosch, & Cicchetti, 2015). Furthermore, difficulties in job performance are reported as lifelong consequences of childhood maltreatment, which might interfere with a country's socioeconomic advancement (World Health Organization, 2017).

The long-standing negative effect of child maltreatment on individual's self-esteem is well documented. Researchers report that youngsters who have experienced child abuse have fewer friends and lower self-esteem than their non-abused counterparts (Al-Fayez, Ohaeri, & Gado, 2012; Kendall-Tackett, Williams, & Finkelhor, 1993; Turner, Shattuck, Finkelhor, & Hamby, 2015).

Depression is another long lasting consequence of child maltreatment. Experiences of abuse and neglect in childhood have been consistently associated with higher rates of adulthood psychopathology, particularly depression and mood disorders (Martins, Von Werne Baes, de Carvalho Tofoli, & Jurueña, 2014; World Health Organization, 2016). Furthermore, the association between child maltreatment and the adulthood onset of anxiety and stress is equally acknowledged. For example, among all forms of early life incidents including all forms of child maltreatment; emotional maltreatment dominated the association with depression, hopelessness, suicidal ideation, anxiety, and impulsivity (Kendler et al., 1995; Martins et al., 2014). Child abuse is reported to affect the fear circuit in the brain in later adulthood which leads to anxiety (Herringa et al., 2013). The stress developed as a ramification to childhood maltreatment is associated with disruption in early brain development, and severe forms of stress can impair the development of the nervous and immune system (World Health Organization, 2016). In addition, stress as an outcome of chronic abuse may result in anxiety with different severity that may render victims more vulnerable to develop post-traumatic stress disorder (PTSD), conduct disorder, and learning, attention, and memory difficulties (Centers for Disease Control & Prevention, 2017).

Kuwait is oil producing Gulf country, with 4.5 million population. About 30% of them are Kuwaiti nationals, while the rest are expatriates who are residing in the country for work purposes (Public Authority for Civil Information, 2017). There is a dearth of knowledge about child maltreatment in Kuwait. This study will contribute in filling the gap of knowledge in this area. Previous studies conducted in Kuwait about child maltreatment were hospital-based (Al-Mahroos, 2007). This is the first population-based study interested in lasting impact of child maltreatment on young adults in Kuwait. Although the oil discovery helped the country to speed up the infrastructure with a westernized living style approach, the culture roots and children exposure to child maltreatment even unintentionally for discipline did not follow the same speed. This study hypothesized that students with history of child maltreatment would report higher levels of mental health problems compared to their classmates who did not. Therefore; the main objectives of this study were to measure the prevalence of physical and emotional childhood maltreatment among university students in Kuwait; to assess their mental health status (depression, anxiety, and stress) and self-esteem; and to examine the association between child maltreatment and students' mental health status and self-esteem, in addition to exploring socio-demographic factors associated with mental health status among these students. The findings of this study will provide necessary information about the magnitude of the problem and its impact on the mental health status of young adults in Kuwait. This information will aid health planners to take a comprehensive approach to both preventing and dealing with the remote sequelae of childhood maltreatment through establishing of a trauma-informed campus-based mental health program. The study findings, in addition, might be a starting point for policy makers in Kuwait to establish a child welfare system that aspires protection of child rights and pursues childhood free trauma.

2. Methods

2.1. Study design and study population

This cross-sectional sectional study included randomly selected eleven out of 17 colleges of the Kuwait's only public University and three out of eight private universities in Kuwait. For having a representative sample of students, a probability proportional to the size sampling strategy was applied through estimating the number of students needed from each college relative to the total population of students in the corresponding one. A convenience sample of 1324 students aged 18–25 years who were registered at the different colleges of Kuwait universities at the time of the study, were approached in classrooms or college lobbies, and 1270 completed the self-administered questionnaires with a response rate of almost 96.0%. University students represented the reasonable

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