

Contents lists available at [ScienceDirect](https://www.sciencedirect.com)

# Child Abuse & Neglect

journal homepage: [www.elsevier.com/locate/chiabuneg](http://www.elsevier.com/locate/chiabuneg)

## Depressive symptoms and self-harm among youngsters referred to child welfare: The role of trust in caregiver support and communication

Tara Santens<sup>a,\*</sup>, Laurence Claes<sup>b,c</sup>, Guy S. Diamond<sup>d</sup>, Guy Bosmans<sup>a</sup><sup>a</sup> Parenting and Special Education Research Unit, University of Leuven (KU Leuven), Leopold Vanderkelenstraat 32, Box 3765, 3000 Leuven, Belgium<sup>b</sup> Clinical Psychology, University of Leuven (KU Leuven), Faculty of Psychology and Educational Sciences, Tiensestraat 102, Box 3720, 3000 Leuven, Belgium<sup>c</sup> Collaborative Antwerp Psychiatric Research Institute (CAPRI), Faculty of Medicine and Health Sciences, University of Antwerp, Universiteitsplein 1, 2610 Wilrijk, Belgium<sup>d</sup> Center for Family Intervention Science, College of Nursing and Health Professions, Drexel University, 3020 Market Street, Suite 510, Philadelphia, PA, 19104, USA

### ARTICLE INFO

#### Keywords:

Child welfare  
Adolescence  
Depressive symptoms  
Self-harm  
Trust  
Communication

### ABSTRACT

Depressive symptoms and self-harm, i.e. non-suicidal self-injury and suicidal behaviors, are highly prevalent in youngsters involved in Child Welfare System (CWS) services. Little research investigates, however, why these CWS youngsters are at risk. We explored whether trust in caregiver support and communication about experiences with primary caregivers, are associated with CWS youngsters' depressive symptoms and/or self-harm. An anonymous online survey of 271 CWS youngsters (10–21 years of age, 57.2% female) was used to assess trust and communication, and depressive symptoms/self-harm. Results showed significant negative associations between self-reported trust in maternal and paternal support, and depressive symptoms/self-harm. Communication about experiences with one's biological mother mediated the relationship between trust in maternal support and depressive symptoms/self-harm. Furthermore, the presence of an additional trustworthy caregiver buffered the impact of low trust in maternal or paternal support on depressive symptoms/self-harm. Implications for interventions targeting CWS youngsters' depressive symptoms and self-harm are discussed.

### 1. Introduction

Youngsters involved in the Child Welfare System (CWS) are characterized by high rates of mental health problems (Blower, Addo, Hodgson, Lamington, & Towlson, 2004). Especially the high rates of depressive symptoms, non-suicidal self-injurious behavior (NSSI) and suicidal ideation (SI) in CWS youngsters are of great concern to CWS workers and policy makers (Lüdtke et al., 2017). NSSI and SI can be situated on a spectrum of self-harm behaviors (Claes & Muehlenkamp, 2014). At its worst, the presence of depressive symptoms and self-harm can lead to suicide, which stands among the leading causes of death in youngsters worldwide (World Health Organisation, 2014). Given the mortality risk and severe impaired functioning associated with even subclinical levels of depressive symptoms and self-harm (Lewinsohn, Solomon, Seeley, & Zeiss, 2000), more research is needed to understand high depression and self-harm rates in CWS youngsters.

\* Corresponding author.

E-mail addresses: [tara.santens@kuleuven.be](mailto:tara.santens@kuleuven.be) (T. Santens), [Laurence.Claes@uantwerpen.be](mailto:Laurence.Claes@uantwerpen.be), [Laurence.Claes@kuleuven.be](mailto:Laurence.Claes@kuleuven.be) (L. Claes), [Guy.Bosmans@kuleuven.be](mailto:Guy.Bosmans@kuleuven.be) (G.S. Diamond), [gd342@drexel.edu](mailto:gd342@drexel.edu) (G. Bosmans).

<https://doi.org/10.1016/j.chiabu.2018.01.001>

Received 22 August 2017; Received in revised form 28 November 2017; Accepted 1 January 2018

0145-2134/ © 2018 Elsevier Ltd. All rights reserved.

Surprisingly, little research focused on mechanisms and moderators that help understand CWS youngsters' depression and self-harm rates. One area that has been underinvestigated is the role of the quality of relationships with primary caregivers. The consideration of how relationships with biological parents and/or other primary caregivers are linked to depressive symptoms and self-harm is particularly relevant for CWS youngsters that typically experience disruptions in these relationships. A recent study showed that CWS youngsters with a stronger connection to caregivers were less likely to report self-harm (He, Fulginiti, & Finno-velasquez, 2015). The authors suggested the need to further identify which factors explain the link between the quality of connectedness and CWS youngsters' mental health problems. General population research points to youngsters' lack of trust in caregiver support as one way to explain why children struggle with mental health problems. Therefore, the current study aims to investigate whether and how lack of trust in caregiver support may be an important factor to understand depressive symptoms and self-harm in CWS youngsters.

Trust in caregiver support is most intensively studied in the context of attachment research. Although attachment is a multifaceted concept, trust is perceived as a central component (Bosmans & Kerns, 2015). According to attachment theory, when parents are emotionally available, responsive and attuned, children tend to develop trust in the parent's ability to provide protection, comfort and support in times of emotional distress (Bowlby, 1969). These youngsters are referred to as securely attached and, across the lifespan, are shown to be less at risk to develop mental health problems (Sroufe, 2005). On the contrary, when children repeatedly experience that their parent is emotionally unavailable or unresponsive, they tend to lack trust in the parent as a resource to provide support (Bowlby, 1969). These youngsters are referred to as insecurely attached and, across the lifespan, are shown to be more at risk to develop mental health problems (Ainsworth, 1989; Sroufe, 2005). Although attachment research traditionally focuses on biological parents as primary caregivers, attachment theory also assumes that any caregiver with whom the child establishes an enduring emotional bond can become an attachment figure in whom children can learn to trust for support.

There are many reasons why youngsters in CWS are more at risk to have less trust in parental support. Above all, families of children involved in CWS generally struggle with multiple, chronic, and complex problems on various life domains (Bodden & Dekovic, 2015; Ghesquière, 1993). In these chaotic conditions with multiple stressors and substantial emotional turmoil, youngsters are often growing up with parents who are emotionally unavailable and unresponsive, and in more extreme cases, abusive or neglectful. Growing up in these these relational conditions, is linked with reduced trust in caregivers' support (Bosmans, Braet, Van Leeuwen, & Beyers, 2006; Doyle & Markiewicz, 2005). Although research on attachment in general, and trust in specific, in youngsters in the CWS is rare, studies on younger CWS children suggest that these children likely lack trust in parental support, and that rates of insecure attachment are high (Baer & Martinez, 2006).

Lack of trust in parental support in the context of insecure attachment relationships is demonstrated to be a transdiagnostic risk factor for the development of mental health problems (DeKlyen & Greenberg, 2008). Although little research has focused on CWS youngsters, longitudinal studies in general and psychiatric populations consistently indicate that youngsters with lack of trust in parental support are more at risk for depression and self-harm. With regard to depressive symptoms, Madigan and colleagues' meta-analysis (2015) supported that from early childhood through to adolescence, the quality of attachment relationships is consistently linked with the development of depressive symptoms. With regard to indicators of the self-harm spectrum, insecure attachment has consistently been identified as a significant risk factor for NSSI (Bureau et al., 2010; Gandhi et al., 2016) and SI (DiFilippo & Overholser, 2000). Consequently, the current study's first hypothesis is that, in CWS youngsters, depressive symptoms and self-harm are associated with lack of trust in parental support.

To understand this relationship between trust in parental support and depressive symptoms/self-harm, general population research showed that communication about experiences and distress can be an important mediating factor (Dujardin et al., 2016). According to these studies, lack of trust in parental support reduces the likelihood that youngsters seek parental support during distress and communicate about their experiences with their parents as a way to help regulate distress. Instead, children with less trust are more likely to use maladaptive coping strategies, which puts them more at risk to develop depressive symptoms when facing stressful challenges in life (Dujardin et al., 2016; Malik, Wells, & Wittkowski, 2015). Therefore, the current study's second hypothesis is that communication mediates the link between trust and depressive symptoms/self-harm in CWS youngsters.

Finally, recent research demonstrated that maladaptive effects of impaired parental relationships can be buffered by supportive relationships with other trustworthy caregivers (Buyse, Verschueren, & Doumen, 2011; Mota, Costa, & Matos, 2015; Van Ijzendoorn & Juffer, 2006). Often, CWS youngsters receive additional care from significant other caregivers, such as foster parents, residential care workers, adoptive parents, and/or other family members (e.g., grandparents, older siblings, aunts/uncles). Consequently, in cases where reunification with parents or restoring breaches of trust in parents is not possible, establishing supportive relationships with alternative/additional caregivers may help CWS youngsters get back on developmental track, which makes this also a viable permanency goal. Therefore, in the current study, we asked CWS youngsters whether they have (had) a significant additional caregiver, and the extent to which they trust in this caregiver's support during emotional distress. Hence, the current study's third hypothesis is that the presence of a significant additional trustworthy caregiver moderates the association between trust in parental support and depressive symptoms/self-harm in CWS youngsters.

In summary, the current study aims to explore three research questions. First, we hypothesize that CWS youngsters' depressive symptoms and self-harm behaviors are associated with less trust in parental support. Second, we predict that the association between CWS youngsters' reduced trust in parental support and increased depressive symptoms/self-harm can be understood by reduced communication about their experiences and distress with their biological parents. Finally, we hypothesize that the presence of a significant additional trustworthy caregiver buffers the development of depressive symptoms/self-harm for youngsters who have less trust in parental support. All research questions will be tested for youngsters' perception of the relationship with their biological mother and father separately because previous work on parent-child relationships has found differential effects for relationships with each parent (Hilt, Nock, Lloyd-Richardson, & Prinstein, 2008; Shek, 1998). Moreover, to operationalize the spectrum of self-harm, we

متن کامل مقاله

دریافت فوری ←

**ISI**Articles

مرجع مقالات تخصصی ایران

- ✓ امکان دانلود نسخه تمام متن مقالات انگلیسی
- ✓ امکان دانلود نسخه ترجمه شده مقالات
- ✓ پذیرش سفارش ترجمه تخصصی
- ✓ امکان جستجو در آرشیو جامعی از صدها موضوع و هزاران مقاله
- ✓ امکان دانلود رایگان ۲ صفحه اول هر مقاله
- ✓ امکان پرداخت اینترنتی با کلیه کارت های عضو شتاب
- ✓ دانلود فوری مقاله پس از پرداخت آنلاین
- ✓ پشتیبانی کامل خرید با بهره مندی از سیستم هوشمند رهگیری سفارشات