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Child Abuse & Neglect

journal homepage: www.elsevier.com/locate/chiabuneg

A scoping review of evidence-based interventions available to parents of maltreated children ages 0-5 involved with child welfare services

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ARTICLE INFO

Keywords:

child welfare
child maltreatment
intervention
scoping review

ABSTRACT

Parents referred to child welfare services for child maltreatment often struggle against chronic risk factors including violence, substance abuse, mental health concerns, and poverty, which impinge upon their ability to be sensitive caregivers. The first line of intervention within the child welfare context is to modify parenting behavior. This scoping review comprehensively surveyed all available literature to map the extent and range of research activity around the types of interventions available within a child welfare context to parents of infants and toddlers (0-5 years of age), to identify the facilitators and/or barriers to the uptake of interventions, and to check that interventions match the risk factors faced by parents. This scoping review engaged in stringent screening of studies based upon inclusion/exclusion criteria. Sixty-five articles involving 42 interventions met inclusion criteria. Interventions generally aimed to improve parenting practices, the relationship between parent and child, and/or attachment security, along with reducing child abuse and/or neglect. A notable finding of this scoping review is that at present, interventions for parents of children ages 0-5 involved with the child welfare system are most frequently measured via case study and quasi-experimental designs, with randomized control trials making up 26.2% of included study designs.

Child maltreatment is a widely recognized public health problem (Trocmé et al., 2010; U.S. Department of Health and Human Services, 2013; Wekerle, 2016). Child maltreatment poses a significant burden across systems of care in terms of both providing short-term services and later addressing developmental costs for children who experienced maltreatment (Florence et al., 2013; Tang et al., 2006). Infants, toddlers, and young children (ages 0 to 5) comprise a large proportion of the children referred to child welfare for investigation. Children under the age two are particularly vulnerable to neglect, physical abuse and other types of maltreatment (U.S. Department of Health and Human Services, 2013), while children under the age of one are the most likely to be investigated for maltreatment (Trocmé et al., 2010). Not only are children 0-5 years old more likely to be involved with child welfare, they are also

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<http://dx.doi.org/10.1016/j.chiabu.2017.09.012>

Received 9 February 2017; Received in revised form 5 September 2017; Accepted 10 September 2017

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particularly vulnerable to poor developmental outcomes (Stahmer et al., 2009). Young children who are exposed to abuse and neglect are considered at risk for developing disorganized attachments, which can impact their functioning and relationships across the lifespan (Bernard et al., 2012; Byun et al., 2016; Rholes et al., 2016). These young children are sensitive to the effects of their environment through the quality of parenting they receive during a period of rapid and critical brain development (Boivin & Hertzman 2012; Harden et al., 2016).

Child welfare services play an important role in ensuring the safety, permanency, and well-being of children who have experienced child maltreatment (U.S. Department of Health and Human Services, 2013). While some child welfare services aim at preventing the reoccurrence of maltreatment, other services aim at resolving the conditions that warranted child welfare involvement in the first place (U.S. Department of Health and Human Services, 2013). Children who receive services at the time of investigation are less likely to experience maltreatment rereport or reoccurrence (Casanueva et al., 2015), whereas therapy for both the parent and the child also reduces the chances of recidivism (Solomon et al., 2016). A variety of interventions have been used with child welfare populations including skill-based interventions (e.g., Parent-Child Interaction Therapy, Parent Training), relational interventions (e.g., Parent-Child Attunement Therapy, Circles of Security) and mixed model interventions (Parenting in Recovery). While some have argued that parenting skills-based interventions are best suited for families in child welfare, others have argued that relational interventions may be better suited, particularly with children in out-of-home placement where reunification is the permanency goal (Lee & Stacks, 2005).

Parents referred to child welfare services for child maltreatment often struggle against chronic risk factors including violence, substance abuse, mental health concerns, lack of social support, and poverty, which impinge upon their ability to be sensitive caregivers (Negash & Maguire-Jack, 2016; Schury et al., 2017). Without adequate resources, parents of maltreated children may continue to expose their children to adverse conditions (Bernard et al., 2012). Parents who maltreat their children may hold developmentally inappropriate expectations of their children, valuing physical discipline and lacking empathy towards their children's needs (Fitzgerald, 2016; Rodriguez et al., 2012). Therefore, often the first line of intervention in child welfare is to modify parenting behavior (Barth, 2015; Berliner et al., 2015; Huebner, 2002).

Parenting interventions are based on the premise that children's health and development is shaped by parenting (Glascoe & Leew, 2010; Luby et al., 2016). And while positive parenting practices support children's growth and development, negative (e.g., neglectful and/or abusive) parenting practices can contribute to social and emotional difficulties (Goodman & Richards, 2005). Since parents typically help their children self-regulate beginning in infancy (Lougheed, 2012), children who have experienced maltreatment have been found to display fewer adaptive emotion regulation skills than non-maltreated children (Harden et al., 2017; McLaughlin et al., 2015; Shipman et al., 2007). In addition, parents involved in child welfare services may "fail to provide the kinds of interactions critical for the development of children's regulatory capabilities" (Lind et al., 2014, p. 1459).

The dissemination of evidence-based interventions within the field of child welfare is relatively new, and as such, many of the interventions being used with parents in child welfare lack empirical research to support their effectiveness. Yet, effective evidence-based interventions for parents involved in child welfare are needed (Casanueva et al., 2008). "Unlike the fields of mental health and juvenile justice, child welfare has not generally identified or recommended evidence-based approaches for serving its target population to any great degree. The parenting programs with the strongest evidence of effectiveness have most commonly been studied in clinical settings primarily focused on behavior-disordered children" (Hodnett et al., 2009, p. 13). Empirically validated treatments for parents of maltreated children warrant clinical and research attention (Barth, 2015; Berliner et al., 2015; Horwitz et al., 2010).

1. The Present Study

In a comprehensive and systematic design, this scoping review examines the literature pertaining to interventions for parents of children ages 0-5 in the child welfare context by: (1) mapping out the extent, range, and nature of the literature; (2) mapping out population characteristics such as sociodemographic information and maltreatment variables (e.g., abuse type - physical, emotional, sexual); and (3) identifying the study design and setting of the interventions. By examining the range of interventions available within the child welfare system and parental risk factors, this scoping review is the first step in addressing gaps in the fragmented services available to these vulnerable families.

Consistent with Arksey and O'Malley's (2005) framework, we sought to conduct a comprehensive and systematic exploration of the literature pertaining to parenting interventions in a child welfare context in order to map the extent, range, and nature of this body of research, identify any gaps in the literature, as well as summarize and disseminate our findings. The reasons for this review were also consistent with the Mays, Roberts, and Popay (2001) process of systematically retrieving relevant literature and mapping key concepts to best capture the available evidence in a research area, particularly one that is complex and has not been previously reviewed in a comprehensive manner.

2. Method

2.1. Search Process

This scoping review included a search of multiple bibliographic databases, a grey literature search of relevant websites, a hand search of a select number of child welfare specific journals, and scanning the reference lists of included studies for further literature. The search of bibliographic databases was conducted August 20 and 21, 2015 in Applied Social Sciences Index & Abstracts (Proquest) (ASSIA) (1987-August 20, 2015), Campbell Collaboration Library (website) (from inception to August 20, 2015), CINAHL Complete

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