Assessment Factors Associated with Child Maltreatment

Family assessment is not a simple process. We must carefully examine the full range of a parent's abilities, strengths, problems and needs to accurately understand the factors that have contributed to maltreatment and to make a judgement about their ability to be modified.

Assessing family dynamics requires an understanding of the following:

1. Research has demonstrated that certain parental personality characteristics, environmental conditions and child conditions are highly correlated with the occurrence of maltreatment.
2. These common contributing factors are not an "all or nothing" phenomenon. They often vary between families in their severity, frequency and intensity.
3. Families often have relevant strengths that mitigate the likelihood of maltreatment, even when contributing factors are also present.

A. Psycho-Social Factors Highly Correlated With Maltreatment

1) Parents Who Have Low Self-Esteem and Feel Unloved, Worthless

Indicators of Problem
- The parent has low-self-esteem in many areas of life, including relationships, parenting, occupation and education; this may lead to limited performance and chronic underlying depression. This may also reflect deep pathology and may not be significantly modifiable through casework.

Indicators of Mid-Range Functioning
- The parent may have good self-esteem in some areas, and less in others.

Indicators of Strength
- A high degree of self-worth and confidence is a strength; the parent approaches problems as challenges and mobilizes resources; the parent has a realistic understanding of his/her abilities; this reduces stress and promotes constructive solutions.
2) Parents Who Have an Inability to Trust

Indicators of Problem

- The parent's lack of trust is pervasive; trustworthy acts by others are viewed with suspicion. The parent is emotionally isolated and avoids intimacy. This contributes to conflict and inconsistency in interpersonal relationships.

Indicators of Mid-Range Functioning

- The parents’ behavior reflects ambivalence about trust (i.e., a desire for intimacy and trust but with a fear of being hurt that prevents him from fully engaging with other people). While reflecting deep-seated ambivalence, the intact desire to trust is a considerable strength.

Indicators of Strength

- The person has a trust in himself/herself and other people, born of previous positive and consistent experiences.
- The parent understands that hurtful experiences are isolated incidents.
- Parents who experienced safe and nurturing parenting are usually able to engage in satisfactory, reciprocal relationships with others, including their children.

3) Parents Who Are Preoccupied with Meeting Their Own Emotional Needs

Indicators of Problem

- Parents may turn to their children to get their own needs met, creating "role reversal" often seen in families in which child abuse occurs. Parents may be impulsive, selfish and not consider long-term consequences of the action on themselves or their children. This reflects feelings of personal deprivation and a preoccupation with meeting their own immediate needs.

Indicators of Mid-Range Functioning

- Parents may want to meet their children's needs, but when feeling particularly stressed or deprived, their own needs become paramount.

Indicators of Strength

- Parents can turn to other adults for personal gratification and can delay gratification of their own needs to ensure their children's needs are met first.
4) Parents Who Expect the Child to Validate Their Self-Esteem

Indicators of Problem

- In the parent's mind, a child's anger and rejection confirm the parent's low worth; conversely, a pleasant, happy, grateful child confirms the parent is a "good parent" and the child loves him/her. This usually indicates seriously deficient self-worth and interpersonal dependency.

Indicators of Mid-Range Functioning

- The parent has some awareness or understanding of the irrationality of his/her responses to children's behavior. He/she can, at times, objectively and accurately describe the children's behaviors and the reasons for it. The individual does not always personalize the child's misbehavior.

Indicators of Strength

- Parents understand all children cry, scream, throw tantrums and reject their parents, and that it is not a reflection on the parent's worth or value as a human being. Parents have other, more valid criteria with which to evaluate their personal abilities and worth.

5) Parents Who Have an Inability to Regulate Their Emotions

Indicators of Problem

- These parents may carry a residue of anger from childhood; they may have low frustration tolerance and feelings of insecurity; and even minor events are experienced as major assaults. Rage may be expressed in violent behavior against the child. This reflects deep-seated emotional problems and is not easily changed. (Note: Intense emotional expression may be cultural and does not always indicate a loss of emotional control.)

- Parent may feel overwhelmed, frustrated, angry or confused.

Indicators of Mid-Range Functioning

- Parent has marginal self-control, but has difficulty managing when feeling particularly stressed or vulnerable. Episodes of explosive behavior are viewed, in retrospect, with shame and guilt, but the parent cannot control it when it occurs.

Indicators of Strength

- Parent exhibits strong emotional controls and frustration tolerance. He/she expresses anger in non-violent ways and uses safe expressions of anger.
6) Parents Who Have Misperceptions, Unrealistic Expectations and Lack of Empathy for Their Children

Indicators of Problem

- Caregiving is mechanical with little warmth, sensitivity or empathy.
- The parent doesn't recognize or misinterprets children's cues, or has distorted and unrealistic expectations for children's behaviors.
- The parent may be apathetic, emotionally void and unaware the child needs nurturance and attention. This may reflect serious underlying emotional disturbance.

Indicators of Mid-Range Functioning

- The parent demonstrates affection and empathy for the child but cannot translate this into caregiving activities. The parent wants to be nurturing but doesn't know how or lacks emotional energy.

Indicators of Strength

- The parent knows the child's moods and needs and can interpret the child's behavior correctly. He/she seeks the cause of children's distress and intervenes early to prevent the child from experiencing serious distress.

7) Parents Who Use Coercive Power to Manage Their Children’s Behavior

Indicators of Problem

- Some abusive parents want their children to meet their needs for power and control. These parents may develop power-coercive methods as a primary method of raising their children; they may be highly demanding of their children’s behavior while using harsh discipline to enforce their demands. They do so without regard to the effect on the child. The discipline is intended to punish the child, to vent the parent’s frustration and to assert power and control—not to teach and guide the child.
- These parents often have hostile personalities and are hostile in many of their relationships.
- These parents may have grown up in an abusive household or witnessed domestic violence.

Indicators of Mid-Range Functioning

- The parent is generally not power-coercive, except when under stress. He/she may then become more power coercive as a means of gaining more control of his/her family at a time when the person feels he/she is losing control of his/her life.
- Parents are not satisfied with the way they interact with or discipline their children.
- The parent may have a history of violence and may be explosive under stress, but makes some attempts to control his/her own behavior or expresses guilt or shame about violent outbursts.
Indicators of Strength

- The parent uses a variety of discipline techniques to guide and teach the child appropriate behavior and to stop misbehavior.
- The parent takes the child’s needs into consideration when disciplining the child.
- The child is given developmentally-appropriate control over some aspects of his/her life.

8) Parents Who Are Developmentally Immature and Have Poorly Developed Parenting Skills

Indicators of Problem

- The parent does not know or understand “normal” age-appropriate behaviors or developmental stages of the child. The parent often expects behaviors of the child or gives responsibilities to the child beyond the child’s ability.
- The child’s failure to meet the parent’s needs and expectations is often seen by the parent as deliberate.
- The parent’s needs come first. He/she does not delay his/her own gratification in order to understand and tend to the child’s needs first.

Indicators of Mid-Range Functioning

- The parent sometimes realizes that his/her expectations for the child may not be realistic and the child is not deliberately trying to upset or challenge him/her.
- The parent does not yet know how to relate to the child, but there is an awareness that he/she has a parental responsibility to understand and nurture the child.

Indicators of Strength

- The parent feels a sense of responsibility to nurture, support and discipline the child based on an accurate understanding of the child’s needs and developmental capacity.

B. Child Characteristics – Related Factors Highly Correlated with Maltreatment

1. Children Who Are Inherently Vulnerable to Maltreatment

Considerations

- Children are inherently vulnerable; their physical, emotional and social immaturity renders them unable to protect themselves from physical abuse or neglect.
- The rate of child maltreatment peaks during preschool and school ages, while the rate of sexual abuse appears to increase after age three (Righthand, 2003).
- Girls are sexually abused three times more frequently than boys (Righthand, 2003).
• Boys are at greater risk of serious injury, as well as emotional and physical abuse neglect (Righthand, 2003).
• Children who are older and stronger may be able to remove themselves from abusive situations or take care of themselves in a neglecting environment.
• However, the age of the child should never be the primary consideration. Older children who have developmental delays or disabilities, physical disabilities, emotional disturbance or fearful temperaments may be just as vulnerable as small children. Older children may have been groomed for sexual abuse for many years.

2. Children Who Are Perceived as Different, Difficult to Care for, Abnormal or Defective

Considerations

• A child's condition may challenge the parent's control, self-worth or competence when his/her behavior or characteristics do not meet the parents' expectations. When a child is temperamentally challenging, difficult to care for, hyperactive, mentally retarded, emotionally disturbed, premature, chronically ill, etc., some parents view the child as somehow “defective.”
• Some parents adequately parent a child with an easy temperament but are not able to adapt their parenting to meet the needs of challenging or frustrating children.
• Conversely, parents who do not personally assume blame for their children's perceived deficiencies or attributes often generally value their children, regardless of their children's problems.

C. Environmental Factors Highly Correlated with Maltreatment

1. Stress and Crisis in the Family

Considerations

• The precipitation of an abusive event is often related to excessive stress or family crisis. Environmental stressors are highly correlated with neglect.
• Stress does not cause abuse or neglect but can "trigger" maltreatment when parents experience other factors associated with maltreatment. The parent may have poor coping skills or may be more vulnerable to stress. The parent’s reaction to stress may be frustration, self-criticism and immobility.
• Some families can manage small problems but experience levels of stress beyond their coping ability during crisis. Parents may not be utilizing all the resources available to them but may be willing to do so with encouragement from a worker.
• Families who have well-developed coping mechanisms are less vulnerable to the effects of stress. However, people with excellent coping skills can be pushed to crisis if the
situational and environmental stresses are excessive. The mere presence of child protective services in the lives of some families creates great stress.

2. Poverty
Considerations
- The combination of poverty and a single-parent household, or poverty and young maternal age are highly correlated with neglect.
- By definition, poverty does not cause neglect, because neglect implies parents’ failure to provide for their children when they have the means to do so.
- There is, however, a high correlation between neglect, abuse and poverty.
- Knowing how to access both formal and informal resources, and feeling comfortable in accepting help may enable a family to resolve economic issues without further intervention of child welfare services.
- Most families who are impoverished neither neglect nor physically abuse their children. Many families are successful in managing on low incomes.

3. Absence of Social Supports and Resources
Considerations
- The unavailability of supports and resources or a family's inability to access or utilize them contributes greatly to maltreatment.
- Some parents have few social supports. Others may have social relationships (friends, family members, etc.), who are not supportive and are even destructive.
- The family may have no inherent mistrust of other people or of public institutions but may not know how or where to access help. Again, cultural issues (embarrassment, fear, belief in self-reliance) may keep the family from using resources.
- There may be environmental barriers, such as lack of transportation or babysitting.
- A family’s ability to access and utilize resources and supports can reduces stress and lessen the likelihood of maltreatment. Having satisfactory, helpful relationships with extended family, friends, neighbors and community members is a strength.

4. Domestic Violence
Considerations
- Domestic violence is a pattern of assaultive behaviors, including physical abuse, sexual and psychological attacks, as well as economic coercion that adults or adolescents use against their intimate partners.
- There is a strong co-occurrence of domestic violence and child physical abuse. Workers must be vigilant to screen for domestic violence as they are screening for child maltreatment.
• Domestic violence is an issue of partner control, not anger or substance abuse. It is a learned behavior that represents thinking errors on the part of the batterer.

• Many children exposed to adult domestic violence also exhibit behavioral, emotional and cognitive problems (Edleson, 1999). The impact of exposure varies by the level of violence in a home, the degree of a child’s exposure and the presence of other risk and protective factors (such as viable safety plans, mother’s ability to protect the children, and restraining orders, etc.) (Edleson, 2001).

• Although it is complicated, many women leave and return to an abusive relationship several times before they are able to make a final move. Most women state the final move was made to protect their children. It is often a dangerous time for a women when they leave or just left, as the batterer may feel the most threatened with loss of control.

• While some women remain with an abusive partner, a safety plan should be implemented to protect the child. While advocates in the domestic violence field believe children can best be protected by protecting their mother, the ultimate responsibility of both children services and domestic violence agencies is child safety.

• While there may be some indications of behaviors that may lead to domestic violence, the issues of control and harm or threats of harm can be subtle and escalate gradually over time. Some women find themselves enmeshed in a violent situation before they realize what has happened. Women who have control of their lives and are able to make decisions based on what is best for themselves and their children, who have emotional support within the home and in the community, and who feel safe from harm or threats of harm may be less likely to experience domestic violence or may have a greater chance of moving to safety.

D. Family Characteristics

Considerations

• Single parenthood is highly correlated with neglect.
• Young maternal age is also associated with neglect.
• Several studies have shown higher numbers of individuals living in the home is associated with neglect. Specifically, more than four children living in the home is associated with neglect.
• Several factors associated with family functioning were also highly correlated with child neglect: they were more chaotic, less well organized, less expressive of positive affect, lacked family leadership and negotiation skills, and were less willing to accept responsibility for their feelings.
• Young mothers or single parents who have positive interactions with friends and family members often receive needed support, which ultimately helps the parent cope with the challenges of parenting.
E. Parental Conditions that Impair Parenting

1. Substance Abuse

Considerations

- There is a strong correlation between substance abuse (especially if it is long-term) and child physical abuse and neglect (Righthand, 2003).
- The most common general indicators of substance abuse are: altered mood states (euphoria, anxiety, irritability, excitability, sluggishness or depression); changes in appetite and sleep patterns; temperamental or erratic behavior; poor memory and judgment; confusion and inability to concentrate; moodiness and restlessness; lack of concern about personal appearance; lack of attention to the environment; and clumsiness and coordination problems.
- Parents who are preoccupied with obtaining drugs or alcohol often fail to care for their children.
- Some drugs leave parents agitated or violent. Likewise, parents who are intoxicated or high may not be able to take care of their children.
- When substance abuse is a primary contributing factor to child maltreatment, little change in the home situation can be expected until the substance abuse problem has been dealt with and resolved.
- Strengths include acknowledgement of the abuse, understanding and distress over its impact on children, willingness to engage in treatment, parents’ making alternative plans for children if they are unable to care for them or are relapsing, willingness to avoid individuals who support their abuse of substances, availability of support, and a history of adequate functioning and successful parenting prior to the substance abuse.
- There are individuals, however, who are able to use substances responsibly without negatively affecting functioning in their lives or with their children.

2. Mental Illness

Considerations

- Mental illness itself is not necessarily high risk for maltreatment. However, specific symptoms increase the likelihood of child abuse and neglect. Thought disorders, hallucinations, delusions and distorted perceptions of reality can contribute to abnormal and dangerous parenting.
- A range of mood problems has also been associated with child maltreatment. Neglect is more commonly associated with depression (Righthand, 2003).
- The percentage of parents who maltreat their children and who have a severe mental illness is small. Severe parental psychopathology is not commonly a factor in child physical abuse and neglect. However, parents with anti-social personality disorder (chronic, pervasive pattern of impulsiveness, irresponsibility, lack of conscience, anxiety or guilt, exploitation of others, or rejection of authority) are 25.7 percent more likely to engage in child neglect (Righthand, 2003).
• Parents with mental disorders may be able to parent if they are properly diagnosed, treated and maintained on an appropriate therapeutic regimen. They will likely require support and education.
• Other potential strengths include seeking and being willing to accept help from family members, medical and psychiatric resources, recognizing limitations and having a history of problem-solving, management and survival skills.

3. Mental Retardation

Considerations

• There are two measures of a person’s cognitive ability: formal measured intelligence, or I.Q., and the level of adaptive or functional behavior. Both should be considered to most accurately determine parenting ability.
• A parent’s level of intelligence and adaptive skill will determine whether the parent has the capacity to retain primary responsibility for care of children.
• Significant mental retardation may indicate little understanding of parental responsibilities, inadequate parenting skills and limited judgment.
• Many parents who function in the low-normal or borderline range and in the upper range of mild mental retardation can live independently in the community. They may be able to parent their children when adequate supportive services are available.

Persons who are of low-normal intelligence or mildly mentally retarded, but have well-developed adaptive behaviors and can appropriately utilize supports and resources to assist them in their parenting, can often safely parent their children.