Identifiable Risk Factors of Child Maltreatment

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Identifiable Risk Factors of Child Maltreatment

by

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Dedication

These papers are dedicated to my late grandfather, Marvin Paskey. Thank you for teaching me the value of education as well as always encouraging and supporting me to follow my dreams and to never give up.

I would like to thank my advisor, Jane, and committee members, Karin and Mary, for providing me the support and encouragement needed to complete this culminating project.
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Chapter 1: Introduction

Child maltreatment is, unfortunately, a prevalent public health problem in the United States. In considering child maltreatment that occurs within a family system, these actions encompass physical, sexual, and psychological abuse and neglect of children and adolescents (Fang, Brown, Florence, & Mercy, 2012). According to the United States Department of Health and Human Services in 2014, 702,000 children were victims of substantiated child maltreatment reports (DHHS, 2016). In 2014, there was an estimated 2.1 million reports that were assessed involving approximately 3.9 million children (Child Welfare Information Gateway, 2016). These numbers are astounding and leave many wondering what more can be done to prevent these incidences of child maltreatment.

The immediate and long-term consequences of child maltreatment cause detrimental lifelong effects for children who are victims of child maltreatment (Berlin, Appleyard, & Dodge, 2011). There are many factors that influence the impact that child maltreatment has on a child including how old the child is, the type and frequency of the abuse and/or neglect, as well as the relationship between the child and the perpetrator (Child Welfare Information Gateway, 2016).

Every child has a different level of resilience and therefore will cope with maltreatment differently, yet the research has identified outcomes commonly associated with child maltreatment. These outcomes often overlap others and create more complex effects for many children. For instance, children who are victims of physical abuse and/or neglect often suffer from physical injuries and generally have poor physical health in comparison to their peers (Berlin et al., 2011). It is common for children who have experienced significant physical abuse and/or neglect to have developmental and cognitive delays (Font & Berger, 2015). Children who
have been victims of child maltreatment often have poor emotional regulation skills, which in turn impacts their mental and emotional health (Child Welfare Information Gateway, 2013). Children who have been maltreated in early childhood often develop an insecure attachment that may lead to poor social skill development (Font & Berger, 2015). In adolescence, victims of child maltreatment are at higher risks of grade repetition, delinquency, truancy, pregnancy, and alcohol and other substances abuse (Child Welfare Information Gateway, 2013). The research shows that throughout adolescence and adulthood victims of child maltreatment are more likely to engage in high risk sexual behavior (Child Welfare Information Gateway, 2013). Thus, it can be stated that the outcomes for victims of child maltreatment have varying levels of impact on each individual.

In the U.S. this problem has significant financial ramifications. Since professional responses tend to be primarily reactive, child maltreatment costs are estimated to be as high as 124 billion dollars annually (Molnar, Beatriz, & Beardslee, 2016). Though there is not a fixed financial rate per incident of child maltreatment, the expenses are estimated based on a cost of illness analyses conducted in association with child maltreatment. The research has indicated that these funds are dispersed among various components associated with short- and long-term child maltreatment responses. This spending includes medical care, mental health services, foster care services, child welfare services, special education costs, and criminal justice expenses (Corso & Fertig, 2010).

Statement of the Problem

It is apparent that child maltreatment is having a significant impact on children, families, and our communities. To create effective changes in this area, we need to better understand the
reasons behind the occurrences of child maltreatment. The information gathered in this literature review will provide critical information about risk factors affecting families. This information will provide parent educators and social workers information about the risk factors of child maltreatment, in hopes that they will be able to better support families at risk for child maltreatment.

**Importance and Purpose of Study**

The overarching importance of this literature review is to better understand the reasons behind why child maltreatment is occurring. The pertinent literature available will support parent educators and social workers in better understanding the needs of the families who experience risk factors associated with child maltreatment. To that end, this paper examines the research focused on the risk factors associated with child maltreatment. Given the prevalence of child maltreatment incidences, it is critical that we seek to understand more about why maltreatment is occurring in order to evaluate how change can occur. By understanding the context of child maltreatment, this information will aid parent educators and social workers in adapting their services in efforts to focus on reducing the occurrences of child maltreatment. Thus, the central purpose of this research project is to identify risk factors that increase the likelihood of child maltreatment.

**Research Question**

Specifically, this review of the literature addresses the following research question: What family system risk factors increase the likelihood of child maltreatment occurrences?
Literature Search Description

The following literature review focuses on research conducted in the past 15 years concerning risk factors associated with child maltreatment. The studies were accessed through the St. Cloud State University Library’s online database system by searching in Academic Search Premier, EBSCO, and ERIC. Utilizing this system allowed me to search for published, journal articles that are peer reviewed prior to publication. While searching for material, I used the following search terms: child maltreatment, child abuse, neglect, risk factors, adolescent parents, teenage mothers, parent training, intergenerational child maltreatment, intergenerational continuity, poverty, parenting, parenting style, parental mental health, parent education.

Definition of Terms

Child Maltreatment: “Any act or series of acts of commission or omission by a parent or other caregiver that results in harm, potential for harm, or threat of harm to a child” (Child Welfare Information Gateway, 2013. p. 4).

Physical Abuse: “When a caregiver causes any physical injury, or threatens harm or substantial injury, on a child other than by accident. Physical abuse can range from minor bruises to severe internal injuries and death” (Minnesota Department of Human Services, 2016, p. 50).

Emotional Maltreatment: “Harm to a child’s psychological capacity or emotional stability evidenced by an observable and substantial impairment on the child’s functioning” (Minnesota Department of Human Services, 2016, p. 52).
Neglect: “A failure of a child’s caregiver to; provide needed food, clothing, shelter, medical or mental health care, education, or appropriate supervision… Protect a child from conditions or actions that endanger a child, take steps to ensure that a child is educated as required by law” (Minnesota Department of Human Services, 2016, p. 43).

Closing

Professionals in the field of parent education recognize the severity of child maltreatment for the immediate and long-term detrimental effects. Before identifying best professional parent education practices that prevent child maltreatment, it is important to first learn how to protect children from maltreatment. To respond proactively, it is imperative that we understand the risk factors associated with child maltreatment. There is no singular cause behind the occurrence of child maltreatment, though research conducted in this area has identified several factors that indicate risk of child maltreatment. The following chapter is a literature review that focuses on what the research shows as the common risk factors associated with child maltreatment.
Chapter 2: Literature Review

There are several identifiable factors that increase the risk of child maltreatment. The purpose of this literature review was to examine the risk factors presented in current research that are associated with the risk of child maltreatment. Throughout this chapter, a select group of prevalent risk factors and their association with child maltreatment are reviewed. The risk factors addressed in this literature review include poverty, family history, and adolescent parents. Analyzing these risk factors and their impact on the risk of child maltreatment, provides context for further assessment of how to utilize this information for further prevention efforts. This literature review analyzes the specified risk factors and components of these risk factors individually and conclude with a summary of commonalities among risk factors. Additionally, the research articles referenced are included in a literature review grid which provides an overview of information gathered (Appendix A).

Poverty Factor

The first factor that I address is how living in poverty puts a child at risk for maltreatment. As such, poverty has been identified as a significant environmental risk factor for child maltreatment (Li, Godinet, & Arnsberger, 2011). The 2011 United States Census showed that one in four American children grows up in poverty (Evans & Kim, 2012). The association between being raised in poverty and child neglect is alarming as it is consistently recognized throughout the research as one of the strongest predictors of child abuse, and most often associated with neglect (Johnson-Reid, Drake, & Zhou, 2012). Poverty “has been linked to every form of child maltreatment and past studies of incidence rates have found that families with incomes under $15,000 were 22 times more likely to have a child who is maltreated than
families with higher incomes” (Asawa, Hansen, & Flood, 2008, p. 79). Although there are strong correlations between poverty and child maltreatment, there are many components of poverty that attribute to the increased risk of child abuse and neglect.

**Community Poverty Factor**

The literature highlights that a child’s neighborhood environment is often associated with why children living in poverty are more likely to be victims of child abuse and neglect. Specifically, areas of concentrated poverty are identified in the literature as areas where 40% or more of the population live below the United States Federal poverty threshold (Asawa et al., 2008). Children living in concentrated areas of poverty are more likely to face greater barriers and life stressors that increase the risk of them becoming victims of maltreatment (Asawa et al., 2008). Alongside these barriers, high-risk neighborhoods are often identified as having a lack of positive neighboring, high population turnover, as well as more stressful daily interactions between family members who have low social cohesion or integration (Asawa et al., 2008).

Johnson-Reid et al. (2012) completed a meta-analysis of a longitudinal study that considered the context of community poverty among children and families. This study assessed research that was gathered through community census information as well through child welfare data. The research evaluated community context of low-income children who had been reported to be victims of child maltreatment. One of the questions addressed in the research was: “Do family and community poverty contexts differ among children by race and type of maltreatment?” (Johnson-Reid et al., 2012, p. 18). There was a total of 6,818 children who were included in this study. Due to demographic restrictions, this study only assessed differences
between children who were either identified as White or Black; 36.9% of the children in the study were White and 63.1% were Black.

In Johnson-Reid et al. (2012), out of all the children reported, 42% lived in neighborhoods where over 40% of the children in the neighborhood lived below the federal poverty level. The data showed that the neighborhood child poverty rates among White families was roughly half of the rate among Black families, 21.9%, as compared to 43.3%. Additionally, the results of the study found that while only 13.7% of impoverished White children lived in areas of same-race concentrated poverty, the rates of Black children living in areas of same race concentrated poverty is 61.9%. These statistics clearly demonstrate that there is significant difference between White and Black families living in areas of concentrated poverty. Thus, it is evident in this research that there are racial differences regarding the number of children and families living in concentrated poverty.

Johnson-Reid et al. (2012) also sought to identify the most frequently reported type of child maltreatment for families living in poverty. In this specific study, the most commonly reported type of maltreatment was neglect with over 60% of reports, followed by physical abuse at 27.5% reports. Among children reported for neglect, the majority of Black children, 90.9%, came from households with poverty history compared to slightly over half, 54.6% of White children (Johnson-Reid et al., 2012). The evidence from this study indicated that the rates of child neglect are substantially higher among Black families living in concentrated areas of poverty in comparison to White families living in areas of concentrated poverty (Johnson-Reid et al., 2012).
Barnhart and Maguire (2016) conducted research assessing potential reasons why concentrated areas of poverty are associated with child maltreatment. Through their research, they concluded that neighborhood poverty is likely associated with child maltreatment, specifically neglect, because of a lack of resources available to parents within their community as well as increased stress among parents due to being surrounded by poverty. They also highlighted that social disorganization theory suggests that disorganized neighborhoods generally lack support for positive parenting practices, have lower levels of social support and social control as well as have a greater acceptance of harsher parenting practices such as corporal punishment (Barnhart & Maguire, 2016).

Parenting Style Factor

Parenting styles is an area of research often associated with poverty and risk for child maltreatment. Baumrinds, a developmental psychologist in the 1960s, conceptualized three parenting styles that are often identified throughout the literature in the realm of parenting (Rodriguez, 2010). These three parenting styles are permissive, authoritarian and authoritative. Permissive parenting is when a parent exerts minimal control over the child. An authoritarian parentings style is when a parent ensures and demands that the child adheres to the rules and standards. With authoritative parenting the parent sets the standards though these rules are more adaptable to meet the child’s needs (Rodriguez, 2010). Generally, authoritative parenting is typically considered the optimal parenting style as compared to permissive and authoritative, which are often identified as dysfunctional and frequently associated with increased risk of child maltreatment (Rodriguez, 2010).
In Rodriguez (2010), the researcher evaluated the connections between child abuse potential and parenting styles. The research included three separate studies that utilized the Child Abuse Potential Inventory (CAPI) and the Parent-Child Conflict Tactics Scale (CTSPC). The CAPI is designed to assess child abuse potential and consists of 160 questions to which the respondents are given the option to agree or disagree. The CTSPC is a survey assessing family violence and contains 22 items, in which the parents report the frequency of exhibited behaviors.

In the first of the three studies, 327 parents who had children younger than 12 years of age participated in an online parenting study. The study was posted on parenting websites including www.parenting.com, www.parentsoup.com, and a few other smaller scale websites. Participants answered questions from the CAPI and CTSPC surveys and were given a $5 gift card for participating. The second Rodriguez study involved 115 parents of children between the ages of 7 and 12 years old. These parents were recruited through a flyer sent home with their child from school; parents then could elect to participate in the study. This study was part of a larger study conducted in home that utilized only the results of the CAPI and CTSPC assessments for data analysis. Rodriguez’s third and final study included a clinical sample of parents who had a child between the ages of 5 to 12 years old with an externalizing behavior diagnosis. This study was part of a larger study, which included a 2-hour in home interview in addition to the CAPI and CTSPC assessments.

The findings of this series of research studies showed significant patterns in the data between parent physical aggression as assessed in the CTSPC, and higher than average CAPI scores. The research indicated that parent-child physical aggression is associated with an authoritarian parenting style and greater child physical abuse potential. Parents who reported
Physically aggressive behavior in the CTSPC generally scored higher on the CAPI. Higher CAPI scores resulting from having aggressive parent child relationships and utilizing physical punishment indicated increased risk for child abuse. There was also evidence that parents of children who have a child with a diagnosed externalizing behavior issue may be more likely to have a permissive parenting style. Rodriguez (2010) found that there was a marginal correlation of permissive parenting style only in this sample of parents. Also, Rodriguez identified permissive parenting characteristics as consistent with characteristics of neglectful parenting. Thus, Rodriguez’s research indicated that there is a direct correlation between authoritarian and permissive parenting styles and an increased risk of child abuse (Rodriguez, 2010).

Although parents who have authoritarian parenting styles are often at higher risk of maltreating their children, there are variations across cultures. According to Valentino, Nuttall, Comas, Borkowski, and Akai’s (2012) research, African American parents, specifically, are more likely to practice authoritarian parenting styles than Caucasian American parents. Conversely, among African American families, authoritarian parenting practices are a protective factor against child maltreatment versus a risk factor. This is evidenced by Valentino et al.’s research, which indicated that authoritarian parenting among African American families led to more proactive parenting that in turn results in “less aggressive behavior and more positive developmental outcomes among African American children” (p. 174).

Family History Factor

Parental history of child maltreatment has consistently been identified throughout the literature as a significant risk factor for maltreating their own children (Bartlett, Kotake, Fauth, & Easterbrooks, 2016). When focusing on this risk factor, researchers often hypothesized that
parents who are maltreated as children are more likely to maltreat their own children. This hypothesis was supported in the Thornberry, Knight, and Lovegrove’s (2012) meta-analysis. Berlin et al. (2011) conducted a longitudinal community-based study that assessed if a history of being a child victim of maltreatment increased the likelihood that they would maltreat their child. The participants in this study were 499 expectant mothers and their children from a rural area. Their research methods included recruiting mothers in prenatal care clinics and offices. The first phase of the research included an in-person interview during the second half of the mother’s pregnancy in which the mother was asked about her family demographics, history of child maltreatment, mental health diagnoses and social isolation. At that time, the mothers signed a consent for the researchers to access any child maltreatment reports received by the county in which their child was a reported victim, until their child was 7 years of age. The findings indicated that 9.6% of the mothers had experienced child abuse and 10.6% had been victims of neglect. An additional 3.4% of mothers had been victims of both neglect and physical abuse.

The final results indicated that of the mothers who had experienced childhood physical abuse, 16.7% of their children had reports of physical abuse during the time of this study in comparison to 7.1% of mothers who did not report being victims of childhood physical abuse. Of the mothers who had experienced childhood neglect, 9.4% of their children had been victims of an allegation of child neglect during this time frame, which was relatively similar to the 7.7% of mothers who did not experience child neglect yet had children who had been reported as victims of child neglect. In total, there were 79 allegations of child maltreatment during the time span of this study (Berlin et al., 2011).
Berlin et al. (2011) observed that mothers who were lacking a strong social network were less likely to be able to support and protect their own children. These findings indicated that mothers who were maltreated are not only repeating intergenerational maltreatment, but also the behavioral tendencies that they observed from their caregivers. The association between mothers’ and their children’s experiences of maltreatment may stem from the mothers’ inabilitys to form healthy adult relationships that offer both general support and support for parenting and child protection (Berlin et al., 2011).

Their research concluded that being a victim of child abuse specifically, increased the risk of perpetuating child maltreatment (Berlin et al., 2011). They found that mothers who experienced physical abuse as children were 20% more likely to have children who were victims of child abuse. In contrast to their hypothesis, experiencing child neglect did not have a significant impact on the risk of their children being neglected in the future.

**Adolescent Parents Factor**

Adolescent parents, specifically adolescent mothers, are frequently identified throughout the literature as being high-risk parents (Bartlett et al., 2016). These researchers found that adolescent mothers have an increased likelihood to perpetuate the cycle of maltreatment than adult mothers with recent studies “reporting rates of transmission as high as 54% by the time the children were 21 years of age” (p. 85). The rates of adolescent pregnancy have been slowly decreasing across the country. Even so, in the United States, pregnancy and birth rates among adolescent mothers are the highest among industrialized countries (Mayer & Thursby, 2012). Adolescent parents and their children are more likely to experience many challenges that increase their risk of child maltreatment (Whitson, Martinez, Ayala, & Kaufman, 2011). This
parent group is identified to be vulnerable to higher levels of toxic stress and chronic poverty. They are also at high risk for depression, parental stress and social isolation (Whitson et al., 2011).

Whitson et al. (2011) examined the risk and protective factors facing a sample of adolescent mothers. The participants in this study included 172 pregnant or parenting adolescent females ranging in age from 13-19 years old; the average age of the participants was 16.72. Information was collected through interviews in the participants' homes or schools. The interview assessed depression, social support, parenting stress, risk for child abuse, and knowledge of infant development. Research results found that depression among adolescent mothers is a significant risk factor impacting parenting abilities. The findings also showed that the pregnant and parenting adolescents in the study displayed twice the rate of prenatal and postpartum rates of depression than childless adolescent peers and adult mothers. They also found that maternal depression is linked to increased levels of child maltreatment as well as many negative child outcomes including developmental delays, underdeveloped coping and self-regulation skills, poor social skills, poor physical health, and disorganized mother-child attachment. A key component that was associated with increased rates of depression was lack of social support and social isolation. Whitson et al. (2011) also indicated that lower social support is related to higher levels of child abuse potential. The researchers emphasized the need to increase social involvement and emotional support among adolescent parents.

Summary

There are many factors that increase the risk of child maltreatment occurring in a family setting. This chapter did not encompass all identifiable risk factors, rather highlighted a few of
the most prevalent issues facing parents today. The following chapter focuses on the results of these findings and the implications that they have for professionals working with families. Chapter 3 additionally discusses recommendations for future research.
Chapter 3: Summary and Conclusions

Summary

It is evident that child maltreatment is a prevalent issue in our society and has driven many conversations focusing on prevention of these occurrences in the field of social work as well as parent education. In this paper, I reviewed the pertinent literature that examined identifiable risk factors associated with child maltreatment. Specifically, this paper addressed the risk factors of poverty which included poverty, community poverty, parenting styles, family history of maltreatment, and adolescent parents. This chapter reviews the research findings discussed in this paper and addresses commonalities discovered in the research. I conclude this chapter with personal reflections on this research review.

Discussion

Poverty is frequently identified throughout the literature as a significant risk factor associated with child maltreatment. The rates of poverty among children raised in the United States is startling with one in four children growing up in poverty (Evans & Kim, 2012). There were two prominent aspects of poverty that appear to have a direct impact for an increased risk of child maltreatment; namely community poverty and parenting styles of parents living in poverty.

This paper reviewed Johnson-Reid et al.’s (2012) meta-analysis that assessed how living in concentrated areas of poverty impacts risk and type of maltreatment. Through the research, they discovered that children living in poverty were nearly twice as likely to have a child maltreatment report. The research also showed that neglect was the most prevalent form of
maltreatment among families in poverty. Additionally, they discovered that Black children were 48.2% more likely than White children to live in areas of concentrated poverty.

Barnhart and Maguire’s (2016) research assessing the reasons behind why living in concentrated poverty is associated with maltreatment was also highlighted in this paper. The results indicated that living in concentrated areas of poverty leads to a general lack of essential resources and higher stress levels among the community. Furthermore, they found that communities of poverty lack social support, support of positive parenting practices, and were more likely to accept corporal punishment as a form of discipline.

Parenting styles are also identified in the research as a factor of why parents living in poverty are at a greater risk of child maltreatment. In this paper, Rodriguez’s (2010) article was reviewed. The results of this study indicated that parents living in poverty are more likely to have authoritative or permissive parenting styles, which are associated with higher risk of child maltreatment.

Intergenerational continuity of child maltreatment was another topic discussed in the literature as a significant risk factor for child maltreatment. Statistics have generally shown that parents who are maltreated as children are more likely to maltreat their own children, thus, creating a cyclical effect of maltreatment (Thornberry et al., 2012).

Additionally, this paper reviewed Berlin, Appleyard, and Dodge’s 2011 study. The findings of their research showed that mothers who had been physically abused as children, were 20% more likely to physically abuse their own children. Their assessment indicated that mothers who were neglected as children only had a slightly higher risk of 2.1% of having a report of child neglect for their own child. Their research also indicated that mothers who maltreated their
children were less likely to have positive social support systems; therefore, indicating that social support may be a strong protective factor against the intergenerational continuity of child maltreatment.

In this paper, adolescent parents and their increased risk of child maltreatment was also addressed. Although the rates of teenage pregnancy have been decreasing over the past decade, the United States continues to have the highest birth rates to teenage mothers in industrialized countries (Mayer & Thursby, 2012). Whitson, et al. (2011) identified risk and protective factors of adolescent mothers. Their research demonstrated that untreated maternal depression, low levels of social support, and insufficient education in child development and parenting skills were the most significant risk factors associated with the risk of child maltreatment among this group of mothers (Whitson et al., 2011).

**Commonalities of Findings**

Many identifiable risk factors associated with child maltreatment are complex issues. Though the identifiable risk factors reviewed in this study were individual factors, there were many components of them that were complex and often overlapping. Families frequently have multiple risk factors that are piling up and therefore increasing their risk of child maltreatment even further. In order to better support these groups of parents and meet their unique needs, it is important to understand the overlapping risk factors that have occurred in these families’ histories.

Social isolation and lack of positive support among families was the most prominent commonality identified among the research. Berlin et al. (2011) demonstrated that mothers who were abused during childhood are at risk for developing inadequately supportive friendships and
social networks, which directly hinders their ability to support and protect their children (Berlin et al., 2011). Barnhart and Maguire (2016) additionally discussed the impact of insufficient support systems among families in poverty. Social isolation and lack of support was identified as having a significant impact on adolescent parents and was emphasized throughout Whitson et al.’s (2011) research. Barnhart and Maguire found in their assessment that higher levels of social cohesion served as a protective factor against maltreatment.

Another common similarity among these identified groups of parents was the higher rates of mental health diagnoses. Depression, specifically was identified throughout the research consistently as having a significant impact on risk of maltreatment. Barnhart and Maguire (2016) focused extensively on the significance of untreated maternal depression, parenting stress, and the importance of future programming directed to address these risks. Whitson et al. (2011) identified the importance of early identification of maternal depressive systems and intervention services as a prevention method.

**Personal Reflection on the Research**

This literature review provided me valuable insight into the realm of identifiable risk factors of child maltreatment and the complexity of challenges families are facing. Through reviewing the literature, I learned about families living in poverty, families who have a history of child maltreatment, and adolescent parents who are identified as being at high risk for maltreating their children. Even so, the results of the research clearly indicated that there is a need for more research in how to best support these families.

Initially, I had planned to discuss parental mental health and stress as a risk factor associated with child maltreatment. I was surprised to discover that there was not a significant
amount of research addressing mental health or stress as individual risk factors. Rather, the research surrounding mental health and stress was tied into many risk factors and not evaluated separately. This signifies the prevalence of mental health challenges that families are facing and the critical need for professionals to be prepared to support families with significant mental health needs. Untreated mental illnesses directly impact a parent’s ability to care for their child; therefore, it is critical for parent educators and social workers to be well versed in how to support parents who have a mental illness.

**Recommendations for Future Research**

Given the results of this literature review, there are many recommendations for areas of future research. There is a significant need for further evaluation of how to support families with identifiable risk factors for child maltreatment. The research emphasizes the lack of support that families with these identifiable risk factors often have as well as the benefits associated with having a stronger social support system, it is imperative that this is a focus of future research and practice. Though there are a variety of options available in communities, many of the families identified throughout this literature review were not participating in these programs. There is a need for further research to be conducted assessing what specific parent education programs that are most inviting to families’ participation to mitigate child maltreatment risk factors.

An additional area that needs further research is the impact of untreated mental health on parents’ risk of child maltreatment. Mental health was identified in a plethora of the articles that were reviewed for this paper; though, it was not identified as an individual risk factor of maltreatment. There needs to be further research isolating untreated mental health as an
identifiable risk factor for child maltreatment or if its prevalence in the literature is due to frequent association with other life stressors.

**Summary**

Throughout this chapter, a review of the research findings and commonalities among findings were addressed. The following chapter will include my personal position statement about the research included in this study. Additionally, Chapter 4 addresses professional implications for the field of social work and parent education.
Chapter 4: Position Statement

Through my professional experiences as a social worker in the field of child protection services, I have recognized the need for more preventative services to take place to prevent child maltreatment from occurring. A critical component of being able to prevent occurrences of child maltreatment is the understanding of risk factors associated with child maltreatment. It is imperative that professionals working with families such as social workers and parent educators, can identify these risk factors so that they may provide additional supportive services to these families.

In my review of the prevalent research on identifiable risk factors of child maltreatment there are implications for my future practice. As a social worker with a parent education license, I will be providing case management services to families with many of the identified risk factors of child maltreatment that have been mentioned throughout this literature review. I will be able to utilize my knowledgebase of the child maltreatment complexities that families face to provide services that better meet their needs. It is my hope to inform parent educators and social workers in the community about these risk factors while continuing to research methods of parent education practices to best support at risk families.

The results of these articles reviewed in the previous chapters highlight the significance of creating systems of support for families with identifiable risk factors for child maltreatment. Therefore, it is critical that I focus on creating strong, supportive relationships with the parents that I serve. Additionally, the research consistently identified untreated mental health as a secondary risk factor linked with the primary identified risk factor. In my practice, I will need to
ensure that I am mindful of parental mental health statuses and the impact their mental health may have on their ability to parent their child.

The impact of poverty, including living in concentrated poverty and parenting styles of families in poverty, were also discussed extensively in the literature review. Given the prevalence of poverty in the United States, as a social worker and parent educator, I will likely be working with many families impacted by poverty. As a professional I plan to focus on connecting families in poverty to resources in the community that can support their needs. It was also evident throughout the literature review that there is a growing need for additional resources in communities to support at risk families. It is imperative that parent educators and social workers collaborate with other family support systems in the community to provide services to families in need. In addition, to continue building resources in the community, it is imperative for continued research emphasizing the importance of child maltreatment prevention services.

In summary, there are several identifiable risk factors of child maltreatment. This paper highlighted a select few of these risk factors and their association with child maltreatment. It is critical that research continues to focus on how professionals, specifically parent educators and social workers, can best support the needs of families with identifiable risk factors for child maltreatment.
References


## Appendix

### Literature Review Grid

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<td>Community-Level Approaches to Child Maltreatment Prevention Authors: Molnar, Beatrize, Beardslee Year: 2016</td>
<td>Literature Review of current research and evaluation of existing Community level prevention programs</td>
<td>NA</td>
<td>Is there a multi-level holistic approach that has been implemented as an effective approach to prevention of child maltreatment?</td>
<td>-Rates &amp; costs of CM&lt;br&gt;-Impact of CM on child development&lt;br&gt;-Review of community level prevention programs</td>
<td>-Multifaceted approaches that incorporate collaboration of community resources and organizations has been most effective at preventing child maltreatment.</td>
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<td>Protective factors among families with children at risk of maltreatment: Follow up to early school years Authors: Fenfang, Meripa, Arnberger Year: 2010</td>
<td>Review of longitudinal studies of child abuse and neglect.</td>
<td>NA</td>
<td>What are protective factors against children maltreatment?</td>
<td>-Parent resilience, social connections, knowledge of parenting, child development, support in times of need and social emotional competence are protective factors correlated with reduced risk of child maltreatment.</td>
<td>-High risk parents benefit from extra social support and education in their parenting.&lt;br&gt;-Communities should focus on community wide strategies for preventative efforts</td>
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<td>Identifying Children at high risk for a child maltreatment report Authors: Dubowitz, Jeonguen, Black, Weisbart, Semiatin, Magder Year: 2011</td>
<td>Longitudinal study over 10 year span.</td>
<td>332 low income families from urban areas.</td>
<td>What are risk factors for child maltreatment?</td>
<td>-Risk factors associated with child maltreatment reports -Neglect was most commonly reported form of maltreatment in study (43%) -Mothers with CM reports were likely to be less educated and single mothers</td>
<td>-Risk factors include but are not limited to; maternal mental health (depression), lack of education (parents), poverty, substance use. Children with developmental disabilities are more commonly victims of child maltreatment.</td>
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<td>Intergenerational Continuity and Child Maltreatment: Mediating Mechanisms and Implications for Prevention. Authors: Berlin, Appleyard, Dodge Year: 2011</td>
<td>Longitudinal community based study</td>
<td>499 mothers and their infant children</td>
<td>Is there a direct association between mother’s experiences of child maltreatment and their child’s maltreatment?</td>
<td>-CM impacts lifespan development -CM physical and psychological impacts -Maternal mental health is a significant risk factor of CM. -Impact of social isolation on stress and rates of CM.</td>
<td>-Childhood abuse, excluding neglect, directly predicted offspring victimization. -Social isolation strongest risk factor of perpetuating the cycle of CM.</td>
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<td>Neglect Subtypes, Race and Poverty: Individual, Family and Service Characteristics</td>
<td>Meta-analysis of longitudinal study for low income children</td>
<td>NA</td>
<td>Is there a direct correlation between race and CM? Is there a direct correlation between poverty and CM?</td>
<td>-Reports of CM by race -Poverty in relation to CM</td>
<td>-Rates of substantiated CM reports are higher among Black families vs. White. -There is a need for a macro level focus on poverty among racially divided residential areas in order to prevent CM.</td>
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<td>Pregnant and Parenting Adolescents: A study of Ethnic Identity, Emotional and Behavioral Functioning, Child Characteristics and Social Support</td>
<td>Longitudinal community based study</td>
<td>166 adolescent females, 74 pregnant, 92 parenting. Ranging in ages from 13-19.</td>
<td>What are the needs of pregnant and parenting adolescents? How does being pregnant and parenting impact their emotional and mental health and behavior?</td>
<td>-Prevalence of Teenage Pregnancy -Teenage parents often lack social support -Teenage parents often internalize emotions/thoughts and need more support -Need more parenting education and support -Ethnic differences played a role in amount of social support, Latinas’ had highest amount of support</td>
<td>-Adolescent parents are at an increased risk of perpetuating child maltreatment due to higher stress levels and lack of knowledge of child development/parenting and lack of social support.</td>
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<td>The Economic Burden of Child Maltreatment in the United States and Implications for Prevention</td>
<td>Meta-Analysis of existing data regarding costs of CM.</td>
<td>NA</td>
<td>What are the costs associated with CM?</td>
<td>-Adverse effects of CM on development. -Economic implications of CM responses</td>
<td>-Child Maltreatment is a significant public health problem with severe economic burden.</td>
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| Intergenerational Transmission of child abuse and neglect: Do maltreatment type, perpetrator and substantiation status matter? Authors: Bartlett, Kotake, Fauth, Easterbrooks Year: 2016 | Longitudinal community based study, Massachusetts Healthy Families Evaluation | 837 mothers and their children, median age of the children was 5 years old | Is maternal history of child maltreatment a risk factor for child abuse and neglect? | -Current rates of CM  
- Intergenerational continuity of CM  
-Higher rates of intergenerational CM for younger parents | -CM seems to be associated with intergenerational transmission with 53.5% of mothers who had been maltreated maltreating their own children within the timeframe of this study.  
-Neglect was the most common form of CM repeated in the family system |
| Does Maltreatment Beget Maltreatment? A systematic Review of the Intergenerational literature Authors: Thornberry, Knight & Lovegrove Year: 2012 | Meta-Analysis | NA | Is a history pf maltreatment victimization a significant risk factor for later perpetration of maltreatment? | -Commonalities in research indicates that there is a correlation, however more research is needed to be definitive. | -CM victimization is associated with cyclical maltreatment, however there needs to be more research in this area. |
| The Prevention of Child Abuse and Neglect, Pipe Dreams or Possibilities Authors: Leventhal Year: 2012 | Literature Review of existing research | NA | Are preventative measures successful in the prevention of child maltreatment? What are evidence based techniques for CM prevention? | -Importance of CM prevention  
-Important aspects of successful home based services | -Prevention methods for CM are essential and increase protective factors among families. |
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<td>The Economic Burden of Child Maltreatment in the United States and Implications for Prevention Authors: Fang, Brown, Florence, Mercy Year: 2012</td>
<td>Meta-Analysis of existing data regarding costs of CM.</td>
<td>NA</td>
<td>What are the costs associated with CM?</td>
<td>-Adverse effects of CM on development. -Economic implications of CM responses</td>
<td>-Child Maltreatment is a significant public health problem with severe economic burden.</td>
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<td>Predictors of Parenting and Infant Outcomes for Impoverished Adolescent Parents Authors: Whitson, Martinez, Ayala, Kaufman Year: 2011</td>
<td>Meta-analysis of longitudinal study aiming to evaluate the effectiveness of a parent aid program designed to help young moms.</td>
<td>NA</td>
<td>Are parent aid programs effective in helping young mothers?</td>
<td>-High rates of depression and social isolation among adolescent mothers.</td>
<td>-Need to assess young mothers for depression and low level of social support in order to provide more adequate services. -There is a need to develop interventions that focus on the emotional well-being and social support for adolescent mothers. -There is a significant need for parent education and parenting support among adolescent mothers.</td>
</tr>
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<td>Multilevel Investigation into the Community Context of Child Maltreatment Authors: Maguire-Jack Year: 2013</td>
<td>Meta-analysis of 5 previous studies focusing on maltreatment risk using multilevel models</td>
<td>NA</td>
<td>Are neighborhood and individual poverty stats related to child maltreatment?</td>
<td>-Higher levels of stress among parents in areas of poverty -Higher levels of social isolation/less social support</td>
<td>-Neighborhood impoverishment is multi-faceted; however, the research does indicate the associated risk with child maltreatment.</td>
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<td>Intergenerational Continuity of Child Abuse Among Adolescent Mothers: Authoritarian Parenting, Community Violence and Race</td>
<td>Longitudinal study, based on Notre Dame Adolescent Parenting Project</td>
<td>First time adolescent mothers and their children from last trimester through adolescents</td>
<td>Does parenting style, community violence and race influence intergenerational continuity of maltreatment among adolescent parents?</td>
<td>-Authoritarian parenting style is a risk factor for Caucasian parents however a protective factor among African American parents -Intergenerational continuity is very prevalent among this group</td>
<td>-Authoritarian parenting styles often lead to “harsher parenting” which is associated with CM. -Authoritarian parenting style is a risk factor for Caucasian parents however a protective factor among African American parents</td>
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<td>Parent-Child Aggression: Association with Child Abuse and Parenting Styles</td>
<td>Meta-analysis</td>
<td>Parents of children birth-12 involved in 3 different studies</td>
<td>Is there an association with child abuse potential and parenting styles?</td>
<td>-Parenting styles analyzed -Authoritarian= increased risk of physical abuse -Permissive= increased risk of neglect</td>
<td>-Permissive and Authoritarian parenting styles are associated with a higher risk of child maltreatment</td>
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<tr>
<td>Single Mothers in Their Communities: The Mediating Role of Parenting Stress and Depression Between Social Cohesion, Social Control and Child Maltreatment</td>
<td>Meta-analysis of longitudinal study</td>
<td>1,158 single mothers</td>
<td>Is there a direct correlation between neighborhood environments for low income single mothers and rates of child physical abuse and neglect?</td>
<td>-Mothers without a self-identified strong support system were more likely to report feelings of high stress and depression.</td>
<td>-Higher levels of parenting stress and depression were associated with higher levels of abuse and neglect -Strong social cohesion was associated with lower levels of parenting stress and depression</td>
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<tr>
<td>Parent Child Aggression: Association with Child Abuse Potential and Parenting Styles</td>
<td>Meta-analysis of 3 studies</td>
<td>NA</td>
<td>- Are specific parenting styles associated with higher rates of physical abuse and or neglect?</td>
<td>- Pattern in the data between physical aggression and authoritarian parenting style -Permissive parenting characteristics closely resemble neglect.</td>
<td>- There appears to be a direct correlation between authoritarian and permissive parenting styles and an increased risk of child abuse and neglect.</td>
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Child Maltreatment Prevention

by

Megan E. Stutsman

A Starred Paper
Submitted to the Graduate Faculty of
St. Cloud State University
in Partial Fulfillment of the Requirements
for the Degree
Master of Science in
Child and Family Studies

May, 2017

Starred Paper Committee:
Jane Minnema, Chairperson
Karin Ihnen
Mary Pfohl
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Chapter 1: Introduction

Child maltreatment is a widespread problem in our society. The United States Department of Health and Human Services (DHHS) (2016) indicated that there are approximately 3.6 million reports of child maltreatment annually, involving 6.6 million children. In 2014, state agencies reported that there were 702,000 children who were confirmed victims of child maltreatment (DHHS, 2016). These statistics do not accurately portray the staggering reality of this problem as many incidents of child maltreatment go unreported (Li, Godinet, & Arnsberger, 2011). Although there have been significant efforts focusing on best practices for child maltreatment responses, there has been an insufficient focus on how to prevent child maltreatment altogether (Asawa, Hansen, & Flood, 2008). A preventative response to child maltreatment is needed to protect children from being victimized. There is a critical need for further research focused prevention of child abuse and neglect (Ingram, Cash, Oats, Simpson, & Thomas, 2013). Then, policy-makers and professionals working with children and policy-makers can use evidenced based information to guide their child maltreatment preventative practices.

Research has shown that responding to child maltreatment reactively has been proven to not be an effective or cost efficient response to child maltreatment (Asawa et al., 2008). Accompanying these financial ramifications associated with child maltreatment is the lack of funding for many social and community service agencies to provide evidence-based parent training programs (Barth & Liggett-Creel, 2014). The accumulated value of prevention efforts
and programming would be more cost effective than having a reactive response to child maltreatment (Asawa et al., 2008).

There are three levels of prevention efforts that are utilized in child maltreatment prevention efforts. The first level is primary prevention services that focus on prevention efforts aimed to reach the general population to address commonly identified causes of child maltreatment such as violence, corporal punishment, and poverty (Geeraert, Noortgate, Grietens, & Onghena, 2004). Primary prevention services may include public service announcements that promote positive parenting such as the prominent ‘back to sleep’ campaign that provided information from medical providers and parent involvement activities sponsored by school systems. The secondary level of prevention focuses on specific groups who are identified as being at risk for child maltreatment (Daro, 2011). Prevention efforts at the secondary level focus on decreasing the influence of risk factors that these families are facing (Leventhal, 1997). Interventions at this level include parent education, parent support groups, home visiting, family resource centers, and respite care for families who have children with special needs. The third, or tertiary level of prevention in child maltreatment, is targeted to families in which child maltreatment has already occurred and aims to stop further maltreatment from occurring. These methods strive to reduce maltreatment and the negative consequences for children, family, and community (Geeraert et al., 2004). The methods of tertiary prevention often include public social services case management services, intensive parenting programs, and mental health services.
Thus, there are many levels of child maltreatment prevention as well as a variety of methods of services provision. This paper explores the literature focusing on secondary child maltreatment prevention and evidence-based programming for families identified as being at high risk for child maltreatment. Specifically, this paper evaluates parent education programs including group parent education programs, home visiting programs, and the nurse family partnership program.

**Statement of the Problem**

With identified risk factors for child maltreatment, it is critical that we learn how professionals and communities can work collaboratively to better support parents in efforts to diminish the occurrences of maltreatment. Responding reactively to incidents of child maltreatment does not prevent maltreatment from occurring, and consequently continues to allow children to be victims of child abuse and neglect. To better protect children and support an improved quality of life, it is imperative that professionals shift to a more preventative approach to child maltreatment.

Therefore, in efforts to develop an effective approach to respond proactively to child maltreatment, it is helpful to understand the commonalities among identified risk factors associated with occurrences of child maltreatment. Although there is no one factor behind these occurrences, specific research studies have identified several factors that are associated with child maltreatment. These factors include but are not limited to maternal mental health, poverty, parental substance use, parental lack of knowledge in parenting and child development, social isolation, and children of adolescent parents (Sedlak et al., 2010). The literature further
suggested that there are challenges in creating preventative interventions associated with these risk factors. Yet, it is vital to conduct further research in this area to provide evidenced-based support for children and families (Dubowitz et al., 2011).

**Importance and Purpose of Study**

Understanding the literature recommended best practices for preventing child maltreatment can guide professionals in replicating successful programs through more effective service provision for children and families. Knowledge of evidence-based practices in programs and methods that successfully prevent child maltreatment can help improve current programming. The purpose of this research paper was to identify secondary child maltreatment prevention programs and strategies that are effectively supporting families at risk for child maltreatment. This paper reviews research on current practices for secondary child maltreatment prevention and their effectiveness by analyzing parent education methods and programs focused on preventing child maltreatment.

**Research Question**

To address the purpose of this Starred Paper, I addressed the following research question:

What does the literature recommend for secondary prevention practices in child maltreatment prevention?

**Literature Search Description**

For this literature review, I focused primarily on studies completed in the past 20 years pertaining to child maltreatment prevention efforts. These articles were located by searching on the St. Cloud State University’s online database system through the following databases
Academic Search Premier, EBSCO and ERIC. I searched for peer-reviewed journal articles using the following search terms: child maltreatment prevention, child abuse prevention, parent education, group parent education, home visiting, Early Childhood Family Education, Head Start, Nurse home visiting, preventing child abuse, preventing child maltreatment among adolescent parents, parental mental health and child maltreatment, child abuse and community response.

**Closing**

Preventing and protecting children from maltreatment should be a focus of professionals and policy-makers in communities nationwide. When providing families with the supportive services that they need to be successful, it is imperative that professionals in the field of parent education and social work be aware of effective programs and initiatives that are based on peer reviewed, published literature. In the next chapter, I review scientifically-based published literature to determine what this literature recommends as the best practices for child maltreatment prevention.
Chapter 2: Literature Review

The purpose of this literature review was to examine what the literature recommends for secondary prevention practices in child maltreatment, specifically, secondary parent education practices. This chapter discusses structured parent education methods that are utilized throughout the United States. Specifically, this literature review focuses on group parent education, home visiting, and nurse family partnerships. Analyzing these methods and their effectiveness at preventing child maltreatment will assist social work and parent education professionals in understanding which prevention methods are available and the methods’ effectiveness. The research articles referenced throughout this literature review are attached in a literature review grid which includes a brief overview of information gathered from these articles (Appendix B).

Parent Education

Parent education is one of the most used prevention techniques focused on preventing or reducing the risk of child maltreatment (Barth & Liggett-Creel, 2014). Parent education, also often called parent training, provided support and education to families with children as early as pregnancy and throughout their child’s development (Gorman & Balter, 1997). Parent education embodies a vast array of programs that are delivered in various methods and formats with content varying based on the needs of the individual or group (Gorman & Balter, 1997).

The Child Welfare Information Gateway (2013) defined parent education as “any training, program, or other intervention that helps parents acquire skills to improve their parenting and communication with their children to reduce the risk of child maltreatment and/or
reduce children’s disruptive behaviors” (p. 2). There are universal parenting programs designed for all parents, as well as targeted programs that are designated for specific family populations who are identified as being high risk for child maltreatment (Samuelson, 2010).

Parent education is offered in various formats in the community including home-based and group-based programs (Samuelson, 2010). There are many communities that offer resources through community education services or through publically distributed written information as in newsletters (Samuelson, 2010). A variety of methods are utilized in parent education programs such as face to face interactions, discussions, modeling, video series, and online (Barth & Liggett-Creel, 2014). Parent education programs aim to assist parents in improving their parenting skills and knowledge while providing the support needed to raise their children safely (Child Welfare Information Gateway, 2013).

When considering the association between parent education and child maltreatment prevention, the literature highlighted the importance of creating protective factors, especially among families at risk for maltreatment. “Research shows that effective parent training and family interventions can change parents’ attitudes and behaviors, promote protective factors, and lead to positive outcomes for both parents and children” (Child Welfare Information Gateway, 2013, p. 2). These protective factors included nurturing and attachment, child and youth development, parenting competencies, parental resilience, social connections, concrete parental supports, child and youth social and emotional competence, positive involvement in activities, and other individual skills such as self-regulation, problem-solving, and relational skills. It is critical when focusing on prevention of child maltreatment to utilize parent education methods
that have been proven to be effective in promoting protective factors among families. This chapter will continue by highlighting parent education programs that have been shown to promote protective factors within at risk families.

**Group Parent Education**

Group Parent Education classes are offered in communities across the United States and the world (Campbell & Palm, 2004). According to Daro (2011), there are over 100,000 parent education groups every year in the United States. Group parent education is a specific method of parent education led by a trained Parent Educator. Campbell and Palm found in their research that parents attend these educational groups for many different reasons. A few of these reasons are to learn about child development, how to keep their children safe, new strategies for discipline, and how to enhance their children’s learning (Campbell & Palm, 2004). Parent education groups have a variety of purposes and goals as well as families who receive services. “Parent education groups represent a variety of different purposes that range from teaching parent’s specific behavioral techniques to sharing stories and support about the trials of being new parents to challenging traditional attitudes about discipline” (Campbell & Palm, 2004, p. 27). Most programs contain the following components: parent discussion groups, play and learning activities for children, parent-child activities, community resource information for families and young children, and libraries of books, toys, and other learning materials (Samuelson, 2010). There are parent education programs targeted for at risk families as well as universal programs available for anyone in the community (Campbell & Palm, 2004). In the
following section, I review two prevalent group parent education programs, Early Childhood Family Education, and Circle of Parents.

**Early Childhood Family Education**

Early Childhood Family Education (ECFE) is a universal group parent education program offered throughout the state of Minnesota. ECFE is a program that is offered to families through their local school district and strives to provide families with an educational environment where they can learn, feel supported, and engage with other families and young children (Walker, Sysn, Hennen-Clements, & Brown, 2012). ECFE “recognizes that the home is a child’s first learning environment and parents are their children’s primary and most influential teachers” (Walker et al., 2012, p. 4). Additionally, Walker et al. indicated that, the mission of ECFE is to strengthen families and enhance the ability of all parents to provide the best possible environment for healthy growth and development of their children. Unlike many other programs, ECFE is available for all families with children from birth through kindergarten enrollment. ECFE group classes provide parents with opportunities to interact with their children through parent-child activities. The groups include parent discussion groups with a licensed Parent Educator. ECFE has been recognized nationally as a significant and well implemented state program by the United States Department of Education and many other organizations (Walker et al., 2012). Walker et al. further stated that many states throughout the country refer to Minnesota’s ECFE program as a model for program and policy development.

In 2012, the St. Paul School District, in collaboration with the University of Minnesota, completed an evaluation of the ECFE program in St. Paul Minnesota (Walker et al., 2012). All
the families who were participating in ECFE in the district were invited to complete a survey that assessed their experience with the program. Of those families, 1,128 parents from 98 different classes completed the survey (Walker et al., 2012). More specifically, the evaluation assessed the perception of how ECFE affected their parenting and their child’s development. The results of this study showed that 81.9% of the parents strongly believed that ECFE had helped them improve their parenting skills. In addition, the results showed that parents felt they experienced the most improvement in their knowledge of parenting skills, understanding their child’s development, and how to tailor their parenting to meet their children’s needs. Parents also noted the significance of peer support provided through the ECFE classes. Overall, Walker et al. (2012) showed that ECFE had a positive impact on improving parent’s knowledge, parenting skills, and support, which are essential components of child maltreatment prevention.

**Circle of Parents**

Circle of Parents is a universal, free group parent education program that is currently available in 19 states in the United States. Circle of Parents is offered in a variety of formats including community agencies and organizations, religious organizations, clinics, schools, and prisons (Prevent Child Abuse Florida, 2007). The purpose of the program is met through a self-help support group model to strengthen families and communities by building protective factors in an effort to minimize the risk factors associated with child abuse and neglect. The group meetings are guided by a trained facilitator who uses parental input to guide the content and methods of the group discussions. This format allows the parents to design the group to meet their individual needs. The groups typically meet on a weekly or bi-weekly basis and focus on
providing parents opportunities to give and receive parenting support, develop and practice new parenting skills as well as learn about resources in their community.

Falconer, Haskett, McDaniels, Dirkes, and Siegel (2008) completed an evaluation of Circle of Parents from 2004 to 2006 in four different states: Florida, Washington, North Carolina, and Minnesota. Data were collected through a self-reported survey that the parents (n = 942) completed individually. Parents completed the assessment at the beginning of the group and then completed the second assessment a minimum of six sessions later. The domains assessed in the questionnaire included parenting skills, self-management skills, quality of the parent and child interactions, support system awareness, and use of community resources (Falconer et al., 2008). The responses were rated on a 5-point Likert scale with 0 represented as no knowledge or skills, 3 represented adequate knowledge and skills, and 5 represented proficiency. The findings showed that parents felt that they improved in their understanding of appropriate expectations for their children with an average score of 4.48 at the end of the group compared to a 3.31 at the beginning. There were also statistically significant improvements in the areas of knowledge of community resources and self-management skills related to controlling stress levels. The research also suggested that parents benefited from improving the quality of the parent-child relationship, their parenting skills and awareness of their support system as well as community resources. Falconer et al. (2008) concluded that their results showed that the Circle of Parents Program is effective in promoting protective factors for families who participate.
In 2011, there was a national evaluation completed assessing the Circle of Parents program (Barth & Liggett-Creel, 2014). This evaluation measured change in protective factors associated with preventing child abuse and neglect among families new to Circle of Parents in 10 states. The assessment was conducted utilizing a 7-point Likert scale that included variations in frequency of an activity or event with 1 being never and 7 indicating always and levels of agreement or disagreement with 1 as strongly disagree and 7 being strongly agree. Examples of the questions used in this evaluation are “In my family we talk about problems” and “I am able to soothe my child when I am upset” (CEBC, 2014, p. 4). The 311 participants in this study were all new members of the Circle of Parents program and completed the survey at their second group meeting and the following survey after the ninth week of the class. There were five categories of protective factors, which included Family Functioning/Resiliency, Social Support, Concrete Support, Nurturing and Attachment, and Child Development/Knowledge of Parenting. The results of this evaluation indicated that Circle of Parents participants had positive significant changes in self-reported protective factors in four out of five areas. The survey results highlighted that parents reported growth in family functioning, which included talking about problems and listening to both sides when conflict arises. Parents reported improvements in social and concrete support with parents feeling as though they have others they can talk to when they need support. Additionally, parents reported growth in their nurturing behavior and attachment with their child. In summary, this evaluation indicated that the Circle of Parents program is supporting parents in enhancing protective factors that ultimately fulfills the Circle of Parents program goal of minimizing risks for child maltreatment.
Home Visiting

Home visiting is a specific method of parent education that is used widely throughout the United States. Prevent Child Abuse America reported that home visitation is the “most innovative and holistic prevention program used in approaching the difficulties of educating and support the at-risk family” (Asawa et al., 2008, p. 82). Home visitation programs focus on providing in home services to parents and their children with the goal of providing support, education and resources to families (Daro, 2011). Services are provided by a trained professional staff, often an educator, nurse, or social worker, who have received special training in the program’s curriculum. Home visitors focus their work on parenting behaviors and the families concrete needs in the family’s home environment (Leventhal, 1997). Home visiting programs vary in the age of the children they serve, the risk factors the families are facing, the services received, the content of the curriculum and the frequency of the home visits (Howard & Brooks-Gunn, 2009). There are a variety of issues addressed in home visiting programs such as parenting skills, education about child development, parent-child relationship, mental health support, environmental concerns, family functioning, and access to services (Asawa et al., 2008; Daro, 2011). An essential element of home visitation is the ability of the home visitor to provide individualized information about community resources and services that enhances a parent’s capacity to provide a safe environment for their child (Asawa et al., 2008). Home based services diminish common barriers families face when participating in parent education such as transportation, lack of childcare and motivation to attend (Asawa et al., 2008). The following
section discusses a specific home visiting program, Head Start, and research surrounding the effectiveness of the Head Start home visiting program.

**Head Start Home Visiting Program**

The Head Start Home Visiting Program is the largest publically supported program serving low-income families with young children in the United States (Zhai, Waldfogel, & Brooks-Gunn, 2013). Approximately 110,000 children participated in Head Start programming in 2013 (Green et al., 2014). Head Start is a program that combines weekly home visiting services as well as center-based child development services. Many families opt to participate in both components of the program when available in their community. Head Start goals are to “promote positive development in children directly, by providing services to children from birth to 3 years of age, and indirectly, by providing supports to parents in their role as primary caregivers, as well as by promoting parent self-sufficiency and healthy family functioning” (Green et al., 2014, p. 128). Head Start strives to reduce parental stress and improve parenting skills in hopes of reducing the occurrences of child maltreatment (Zhai et al., 2013).

There have been several studies focused on the success of the Head Start Home Visiting program in relation to child maltreatment. Raikes et al. (2014) found that the Head Start home-based program was shown to have a positive impact on parenting outcomes. Their research found that the program showed positive impacts on nine out of nine parenting outcomes some of which included parental supportiveness, emotional responsiveness, and family conflict. Parents in the Head Start home visiting program showed more emotional responsiveness, greater knowledge of child development, and reported less frequent parenting distress, physical
punishment, and family conflict in comparison to families who did not participate in the program in their community (Raikes et al., 2014).

Green et al. (2014) assessed whether the Head Start Home Visiting program had an impact on rates of child maltreatment outcomes. There was a total of 1,247 children and their families who participated in the study from 17 Head Start sites (Green et al., 2014). Documented reports of abuse and neglect involving participants in the study were gathered from state child welfare agencies. Participants were separated into two groups: the control group participated in only the center-based services and the experimental group participated in center and home visiting services. In total across both groups, 18% of the families participating had at least one report of child maltreatment (Green et al., 2014). Families who participated in the home visiting component of the program were 38% less likely to have a report of physical abuse than families in the control group (Green et al., 2014). Families in the control group were 2.71 times more likely to have a report of physical or sexual abuse compared to families participating in the home visiting program (Green et al., 2014). It was noted in the research that families who participated in the home visiting program did have approximately 10% higher rates of neglect in comparison to families in the control group (Green et al., 2014). The researchers suggested that this may be due to increased professional contact with the families with staff who are mandated to report concerns of maltreatment (Green et al., 2014). In summary, their research findings indicated that participation in Head Start Home Visitation services typically reduce the number of physical and sexual maltreatment reports (Green et al., 2014).
Nurse Family Partnership

The Nurse-Family Partnership (NFP) is a home visiting program that occurs in 26 states throughout the United States (Howard & Brooks-Gunn, 2009). In their research, Howard and Brooks-Gunn identified the Nurse-Family Partnership as the most well developed home visiting program in the United States. Through this program, registered nurses who have received special training provide home visitation services to low-income, first-time mothers (Howard & Brooks-Gunn, 2009). Home visiting services typically begin prenatally and continue until the child is 2 years old (Howard & Brooks-Gunn, 2009). The frequency of home visiting services is adaptable to the needs of the family; in general home visiting occurs weekly after the child is born and then tapers to bi-weekly and eventually monthly visits (Howard & Brooks-Gunn, 2009). The focus of the curriculum is providing education and encouraging healthy behaviors during pregnancy and teaching developmentally appropriate parenting skills (Howard & Brooks-Gunn, 2009).

Throughout the literature surrounding the Nurse-Family-Partnership the most frequent evaluation referenced regarding the impact of the NFP was a longitudinal study conducted in Elmira, New York, from 1978 to 1980 with a continuous study over the following 15 years (Olds et al., 1997). The participants in the study included 400 first time mothers and their children who met one of their risk factors that included maternal age of 19 or younger, single mother and low socioeconomic status. The participants were separated into three groups. One group received typical NFP services, which included perinatal care, home visiting during pregnancy and through the child’s second birthday. Another group of participants received pre-natal care and home
visiting throughout the pregnancy. A final group received routine pre-natal care only. The original study assessed the short-term effectiveness of home visitation services for at risk mothers. Later, the follow-up study examined the long-term effectiveness of home visiting services received during the first 2 years of the child’s life. The follow-up survey included assessment of sociodemographic information and face-to-face interviews. Additionally, information was gathered from local child protection services and law enforcement records of any reports received including the mother and or child in the study from the time of the child’s birth through their 15th birthday (Olds et al., 1997).

Information collected after the follow-up study showed that the NFP had a significant impact on the families who received home visiting services. Families who participated in the home visiting component of the program were 48% less likely to have substantiated cases of child maltreatment prior to the child’s 15th birthday than families who did not participate in NFP home visiting. Participants also received financial welfare services for an average of 13 months less; 55 months compared to 66 months of participants in the control group. Finally, there was a significant impact that NFP home visiting had on the health and development of newborns where birth weights were healthier and lengths of gestation longer. This study, although conducted over 4 decades ago, is currently the most prominent research identified that supports the NFP Home Visitation Program.

**Summary**

There are many formats of secondary level child maltreatment prevention programs that incorporate parent education approaches. This chapter focused on commonly used methods of
preventative service delivery used within the United States. The following chapter discusses the results of the research and similarities across the various programs. Specifically, Chapter 3 discusses common components of successful evidence-based programs and how social workers and parent educators can utilize this information. Finally, Chapter 3 concludes with recommendations for future research.
Chapter 3: Summary and Conclusions

Summary

There are many methods of delivering parent education to families who are identified as high risk for child maltreatment. In this paper, I reviewed pertinent literature evaluating structured secondary methods of parent education that seeks to reduce the risks for child maltreatment. This paper evaluated specific programs within group parent education, home visiting, and nurse family partnerships. This chapter discusses a summary of the research findings identified throughout Chapter 2, as well as addressing commonalities identified in the research. This chapter concludes with recommendations for future research.

Discussion

Parent education provides education and support to families throughout their experiences in raising their children. There are a variety of methods and formats through which parent education services are delivered. In this paper, group parent education, home visiting, and the nurse family partnership were reviewed. The first of these that we will discuss is Group Parent Education. Two formats of group parent education were reviewed: Early Childhood Family Education (ECFE) and Circle of Parents.

ECFE is a group parent education program offered throughout the state of Minnesota. ECFE groups are run by licensed parent educators and focused on providing families with education, support, and opportunities to connect with other parents. A 2012 study conducted by the St. Paul School District, in partnership with the University of Minnesota, evaluated participants experiences in the St. Paul school district ECFE program. Walker et al. (2012)
found through their research that most parents, 81.9%, strongly believed that ECFE helped them in their parenting skills. Additionally, this study highlighted that parents who participated in the program felt their ECFE group provided them peer social support. Overall, the ECFE program was shown throughout the evaluation study to improve protective factors for families participating in the program.

The second format of Group Parent Education discussed in this paper was Circle of Parents. Circle of Parents is currently used in 19 states and is offered through a variety of organizations. Circle of Parents utilizes a self-help support group model with a group leader facilitating the class. The purpose behind Circle of Parents is to assist parents in building protective factors to prevent against child maltreatment. Falconer et al. (2008) showed that parents felt that they learned and saw improvement in their parenting skills after participating in the class. Parents noted that they felt the group provided them a stronger social support system and knowledge of community based resources. Additionally, the California Evidence-Based Clearinghouse for Child Welfare (CEBC) was a national evaluation presented in this literature review (Barth & Liggett-Creel, 2014). The CEBC study indicated that parent self-reported improvements in four out of five areas assessed in their parenting. In summary, these studies indicated that parents reported that Circle of Parents assisted them in improving their parenting skills and strengthening their protective factors.

Home Visiting was the second method of parent education addressed in this paper. Home visiting is used widely throughout the United States. Home visiting programs focused on providing individual at home services to families aiming to provide education, support and
resources to families. Typically, home visitors are parent educators, social workers or nurses often utilizing a specific curriculum when working with families.

Two studies regarding the Head Start Home Visiting program were reviewed in this paper. Raikes et al. (2014), evaluating the Head Start Home Visiting Program, showed that parents who participated improved their parenting skills and enhanced protective factors. The second study reviewed focused specifically on whether the Head Start Home Visiting Program had an impact on rates of child maltreatment (Green et al., 2014). The research found that families who participated in the Head Start Home Visiting Program were 38% less likely to have a report of physical abuse than those who did not participate. Altogether, the findings indicated that families who participated in the home visiting component of the program were less likely to have a child maltreatment report. Given the results from these studies, the program participants had a lower risk of child maltreatment and increased protective parenting factors.

The Nurse Family Partnership program (NFP) is also a home visiting program that occurs throughout the United States. In this program, registered nurses provide home visiting services to low income first-time mothers beginning in pregnancy through the child’s second birthday. The most frequently referenced study regarding the NFP is the 1980 Elmira, New York, studies; one original study with a 15-year follow-up study (Olds et al., 1997). The results of the follow-up study showed that families who participated in home visiting were 48% less likely to have a substantiated case of child maltreatment before their child’s 15th birthday. These results indicated that the NFP home visiting program has a statistically significant impact on lowering
rates of child maltreatment. Thus, it can be suggested that the NFP program enhanced protective factors among its participants, and thereby reduced the risk of child maltreatment.

**Similarities of Findings**

After reviewing the pertinent literature discussed in this paper, there were several similarities among the research findings. The first commonality that I identified pertained to group parent education were parents consistently acknowledged the significant role that building relationships with other participants in the groups had on their parenting skills. It also became apparent that either through a trained educator providing the services, or a group self-led model, the risk of child maltreatment; specifically, physical abuse and neglect was lowered substantially. It appeared that the experience of meeting with other parents to discuss the challenges of parenting, providing and receiving support from other parents and gaining new parenting skills are effective strategies to build protective factors in mitigating child maltreatment.

The research findings for the home visiting programs, Head Start and Nurse Family Partnership, indicated the programs were successful in lowering rates of child physical abuse and neglect. Through individual one-on-one in home support with a trained professional, parents significantly reduced their risk of child maltreatment. The results of the research demonstrated that individualized services adapted to the unique needs of families are successful in reducing the risk of child maltreatment.

A focus in all the methods of parent education programs reviewed in this paper emphasized the importance of creating protective factors that support families in raising their children. The evidence in this literature showed that the protective factors of family functioning,
resiliency, social support, nurturing behavior, knowledge of child development and parenting skills decreased a family’s risk of child maltreatment. The research indicated that these protective factors were built by expanding parents’ knowledge base on parenting, improving and learning new parenting skills and creating a social support system.

**Recommendations for Future Research**

Throughout this paper, pertinent and related research were reviewed. Although this literature review provided beneficial insight in preventing child maltreatment, it is critical that research in this area of child maltreatment prevention continue to expand. Furthering this research agenda will provide the best possible methods of child maltreatment prevention. Additionally, the research findings found that these programs were conducive in preventing specifically physical abuse and neglect, it would be beneficial for further research on if these programs reduce the risk of other forms of child maltreatment.

The research discussed in this paper highlighted the benefits and successes of the programs reviewed though there is room for future research exploring additional programs. Alongside evaluating additional programs, a core component missing from the research is how to engage parents who have these risk factors in parent education programs. Knowledge of the best methods of recruiting parents with identifiable risk factors of child maltreatment is essential for successful implementation of new parent education programs.

Another area of research to be explored is the use of social media and technology in parent education. In recent years, many parent chat groups, blogs and parenting websites have supported caregivers in their parenting. Though the popularity of these groups and services are
increasing, there is an insufficient amount of research assessing the effectiveness of these methods at preventing child maltreatment.

Additional research evaluating the cost saving benefits of child maltreatment prevention is also necessary to support law and policy-makers in making the most helpful decisions. Alongside further research focused on the cost saving benefits of preventative programming, studying effective ways that communities can collaborate in providing more preventative support to families is needed. Additionally, such research findings can better support professionals as they serve children and families with the overall goal of preventing child maltreatment.

Summary

In this chapter, research findings regarding secondary level preventative programs, specifically parent education programs, were reviewed. This chapter also contained a description of the commonalities across the literature review findings as well as recommendations for future research. The following chapter includes my personal position statement regarding these research findings and concludes with implications for the fields of social work and parent education.
Chapter 4: Position Statement

In my experience as a social worker in the field of child protection, parent education is often overlooked as a method to support families in the community. The research presented throughout this paper indicated the significant potential that parent education has in preventing child abuse and neglect. Parent education provides parents with parenting support and education throughout their child’s development. The literature reviewed throughout this paper showcases the critical role that parent education plays in preventing child maltreatment. As a social worker, I will ensure that I am referring families to parent education programs in the community to provide them additional support.

The importance of enhancing families support systems was a key finding presented in this research. As a social worker and parent educator, I plan to implement a stronger focus on assisting parents in improving their social support systems. Another core component of the literature was the importance of building protective factors when working with families. As a social worker and parent educator, it is your role to support caregivers in developing parenting skills. The findings of this literature review also indicated that supporting the development of protective factors such as knowledge of parenting and child development, nurturing and attachment behaviors, and social support is key to reducing the risks of child maltreatment.

In summary, child maltreatment is a substantial social problem throughout the world. Specifically, in the United States, much of the focus in researching child abuse and neglect has been focused on utilizing and improving a reactive approach through child protective services. More currently, prevalent research indicates that there are far more benefits of providing families
with services and support prior to maltreatment occurrences. Preventative services such as parent education are consistently identified in the literature as effective methods of preventing child maltreatment. The costs of preventing child maltreatment, both financially and socially, greatly outweigh the costs associated with providing preventative services. Altogether, providing preventative child maltreatment services such as parent education, improves the quality of life of children, families, and our communities.
References


# Appendix

## Literature Review Grid

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<th>Title, Authors, Year</th>
<th>Research Design</th>
<th>Participants</th>
<th>Research Questions</th>
<th>Themes</th>
<th>Key Findings</th>
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| **Effects of Parent Education on Knowledge and Attitude** Authors: Mary Beth Mann, Peggy Pearl, Pamela Behle Year: 2004 | Quantitative Content analysis | 42 pregnant or parenting adolescent females. Ages 13-20 years old. | Is this 4-month parent education program making an impact on the parents’ perceptions and knowledge? | -Increase on knowledge of child development  
-Positive impact on adolescent’s perception of parenting. | After completion of program there was a self-reported increase on knowledge of child development and a positive impact on adolescents’ perception of parenting. |
| **The Effects of Early Prevention Programs for Families with Young Children at Risk for Physical Child Abuse and Neglect: A Meta-Analysis** Authors: Liesl Geeraert, Wim Van Den Noortgate, Hans Grietens, Patrick Onghena Year: 2004 | Multi-level Meta-analysis | Review of 40 early intervention programs | What early intervention programs are effective in preventing child abuse and neglect? | -Child maltreatment is expensive for community  
-Child maltreatment has detrimental effects on child and adult development | -All the studied prevention programs had a positive influence on underlying factors of child abuse. Positive effects for parent child interaction, child and family functioning. |
-Statistics & history of Parent Education  
-Culturally directed/ sensitive parent education | -Programs targeted to meet the cultural needs of African American and Hispanic families are effective.  
-Little research on the impact for Asian American families. |
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| Community-Level Approaches to Child Maltreatment Prevention Authors: Molnar, Beatriz, Beardslee | Literature Review of current research and evaluation of existing Community level prevention programs | NA | Is there a multi-level holistic approach that has been implemented as an effective approach to prevention of child maltreatment? | -Rates & costs of CM  
-Impact of CM on child development  
-Review of community level prevention programs | Multifaceted approaches that incorporate collaboration of community resources and organizations has been most effective at preventing child maltreatment. |
| Preventing Child Abuse and Neglect with Parent Training: Evidence and Opportunities Author: Barth | Literature review of current research and evaluation of existing prevention programs | NA | How can parent training be used to prevent child maltreatment? | -Parental risk factors for child maltreatment  
-Factors that increase engagement in parent training for high risk parents | Child welfare agencies should be focusing on Parent training is effective when focusing on specific risks, i.e. physical abuse. Parent training is most effective when parents are taught specific skills that they are able to implement and practice with guidance. |
| Identifying Children at high risk for a child maltreatment report Authors: Dubowitz, Jeonguen, Black, Weisbart, Semiatin, Magder Year: 2011 | Longitudinal study over 10-year span. | 332 low income families from urban areas. | What are risk factors for child maltreatment? | -Risk factors associated with child maltreatment reports  
-Neglect was most commonly reported form of maltreatment in study (43%)  
-Mothers with CM reports were likely to be less educated and single mothers | Risk factors include but are not limited to; maternal mental health (depression), lack of education (parents), poverty, substance use. Children with developmental disabilities are more commonly victims of child maltreatment. |
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<tr>
<td>Common components of parenting programs for children birth to eight years of age involved in child welfare services Authors: Barth, Liggett-Creel Year: 2014</td>
<td>Multi-level meta-analysis</td>
<td>Evaluation of 7 models of parent training programs identified using the California Evidence Based Clearing House for Child Welfare.</td>
<td>What are effective components of parent training in children birth to age 8 in preventing child maltreatment?</td>
<td>-Child welfare budget constraints -Need for more research on parent training practices -Rates of CM from 2011</td>
<td>Parent training is one of the most used prevention and intervention techniques to prevent or reduce CM. Positive Parenting and the Incredible Years. 1-2-3 Magic, Oregon model, Parent Management training were all found to be utilizing evidence based practice to prevent CM.</td>
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<td>Early Childhood Intervention Programs: Opportunities and Challenges for Preventing Child Maltreatment Authors: Asawa, Hansen, Flood</td>
<td>Multi-level meta-analysis</td>
<td>Evaluation of Home, school, clinic, community based ECIPS</td>
<td>What are common risk factors for child maltreatment and what are Early Childhood Intervention Programs that address these risk factors?</td>
<td>-Home, school, clinic, community based ECIPS</td>
<td>“Programs that address multiple risk factors across various levels of intervention achieve the most dramatic and enduring results.”</td>
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<td>Predictors of Parenting and Infant Outcomes for Impoverished Adolescent Parents</td>
<td>Meta-analysis of longitudinal study aiming to evaluate the effectiveness of a parent aid program designed to help young moms.</td>
<td>NA</td>
<td>Are parent aid programs effective in helping young mothers?</td>
<td>-High rates of depression and social isolation among adolescent mothers.</td>
<td>-Need to assess young mothers for depression and low level of social support to provide more adequate services. -There is a need to develop interventions that focus on the emotional well-being and social support for adolescent mothers. -There is a significant need for parent education and parenting support among adolescent mothers.</td>
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<td>Development of an Evidence-Informed In-Home Family Services Model for Families and Children at Risk of Abuse and Neglect</td>
<td>Meta-analysis</td>
<td>Review of Boys Town Program and Outcomes</td>
<td>Is the Boys Town program effective? What strategies could be replicated in other programs?</td>
<td>-Lack of federal funding for research in Child Welfare evidence based intervention -Programs must engage families as partners and focus on skill development -Boys town program and procedures</td>
<td>-Boys Town program is effective and focuses on identifying families’ strengths and setting goals that the family wants to work towards. -The case manger’s perception and attitude/willingness to help plays a significant role in the success of the family.</td>
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<td>An Evaluation of Benefits to Parenting and Children’s Learning and Development from Program Participation Authors: Walker, Sysyn, Hennen-Clements, Brown</td>
<td>Quantitative Content analysis</td>
<td>1,128 parents from 98 different ECFE classes</td>
<td>Is ECFE beneficial to parents and children?</td>
<td>-ECFE parents report that they have a stronger social support system  -Reported higher confidence in their parenting</td>
<td>-ECFE helps parents build protective factors such as social support systems and increased knowledge of parenting and child development.  -Parents felt that the class improved their parenting.</td>
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<td>Evaluation of Support Groups for Child Abuse Prevention: Outcomes of Four State Evaluations Authors: Falconer, Haskett, McDaniels, Dirkes &amp; Siegel Year: 2008</td>
<td>Quantitative Content analysis</td>
<td>Parent Participants of COP in FL, MN, WA, NC</td>
<td>Is the Circle of Parents Program a successful parent support and education group?</td>
<td>-Parents felt they learned and showed improvements in their parenting after completing the classes.</td>
<td>-Circle of Parents is effective in building protective factors to prevent against CM.  -Circle of Parents is a successful parent support and education group</td>
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<td>Long-term Effects of Home Visitation on Maternal Life Course and Child Abuse and Neglect</td>
<td>Longitudinal Study</td>
<td>400 1st time mothers in NY</td>
<td>Does the Nurse Family Partnership Program have an impact on the mothers and children involved?</td>
<td>-Participants had lower rates of CM -Participants had lower and shorter lengths of receiving welfare services</td>
<td>Families who participated in the home visiting component of the program were 48% less likely to have substantiated cases of child maltreatment prior to the child’s 15th birthday</td>
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<td>The Role of Home-Visiting Programs in Preventing Child Abuse and Neglect Authors: Howard &amp; Brooks-Gunn Year: 2009</td>
<td>Meta-analysis of 9 existing home visiting programs</td>
<td>NA</td>
<td>-Are home visiting programs effective at preventing child abuse and neglect?</td>
<td>-Nurse family partnership program identified as the strongest home visiting program.</td>
<td>-Home visiting has a positive impact on parents’ confidence and increases protective factors against child maltreatment.</td>
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