

RAP Sheet

RESEARCH ADVANCING PRACTICE
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■ **VERY YOUNG CHILDREN ENTERING CARE AT HIGH RISK**

Children who enter the state's care are obviously at risk from the circumstances which brought them to the authorities' attention. Very young children seem to be at additional risk due to their developmental stage. Multidimensional assessments of 144 children (aged 0-3) entering state custody in and around Portland, OR revealed deficits in a number of domains. Over one-half of these infants and toddlers were classified as experiencing the following risk factors: poverty, witnessing domestic violence, parental criminal arrest, and parental substance abuse. A significant number of these children were substantially developmentally delayed in the following areas: cognitive (23% of the children); adaptive (17%); expressive language (15%); and personal-social (14%). Up to one-third of the children were found to exhibit one of several clinically significant behavior problems, and 61% received an official diagnosis on the Zero to Three Diagnostic Classification system (adjustment and regulatory disorders were the most common). The authors contend that this sample of infants and toddlers is similar to most others entering state custody. Special care should be taken with the assessment and referral of children under 4.

Reams, R. (1999). Children birth to three entering the state's custody. *Infant Mental Health Journal*, 20, 166-174.

■ **SURVIVORS OF BROTHER-SISTER INCEST SIMILAR TO SURVIVORS OF FATHER-DAUGHTER INCEST**

Although it has been assumed by some that father-daughter incest is more damaging than brother-sister incest, recent research suggests that this may not be the case. Two groups of women from an incest survivor therapy group were interviewed: 14 were sexually abused by their older brother, 15 were sexually abused by their fathers. The two groups reported similar levels of threats and actual use of force during the abuse, as well as similar consequences of the abuse (depression, drug/alcohol problems, eating disorders, suicidality, etc.). The most notable difference was the length of time during which the abuse had occurred. Survivors of father-daughter incest reported an average of 14.7 years of abuse, while survivors of brother-sister incest reported an average of 7.9 years of abuse. Follow-up questions revealed this difference was mainly due to the brother-abusers growing up and leaving home, while abused daughters had to take control of stopping the abuse themselves. Brother-sister incest was more likely to happen in families without a father, and with an unsupportive or abusive mother. The women's histories show that the level of chaos in brother-sister incest families was equally severe as that in father-daughter incest families. Social work professionals should be aware of these similar outcomes of survivors of each type of abuse. The authors further concluded that since secrecy and deceit are such strong components of both types of incest, group therapy may be a better alternative than individual therapy.

Rudd, J.M., & Herzberger, S.D. (1999). Brother-sister incest -- father-daughter incest: A comparison of characteristics and consequences. *Child Abuse and Neglect*, 23 915-928.

■ **DIFFERENT TYPES OF QUESTIONS ELICIT DIFFERENT TYPES OF ANSWERS FROM PRESCHOOLERS**

Interviewing preschoolers is a difficult task. On one hand, they do not tend to provide much information to open-ended questions such as, "What happened?" On the other hand, research tells us that more specific questions may be suggestive or leading to preschoolers, especially if the question is about an event that did not happen. This study investigated the accuracy of preschoolers' responses to questions about a staged accident (spilling cereal) during an experimental session. A week after the accident, preschoolers were asked about the people involved, the surroundings at the time of the accident, and the actions of those involved. Three types of questions were asked: yes/no questions where "yes" was the correct response, yes/no questions where "no" was the correct response, and "wh-questions" (who, where, what). Overall, preschoolers were most accurate when answering questions about actions (rather than about people or the environment). They made more errors when responding to "no" questions, than to "yes" or "wh-" questions. Finally, wh-questions elicited "I don't know" responses more often than other questions. The authors conclude that preschoolers' answers to yes/no questions are suspect, since they have a bias towards "yes" responses, and are unlikely to respond to these questions with "I don't know." Although wh-questions are somewhat less likely to elicit a response, a true "I don't know" response is more desirable in an interview than a false "yes" or "no".

Peterson, C., Dowden, C., & Tobin, J. (1999). Interviewing preschoolers: Comparisons of yes/no and wh-questions. *Law and Human Behavior*, 23, 529-555.

■ **HIGH-FUNCTIONING INCARCERATED JUVENILES ALSO LIKELY TO BE DEPRESSED AND UNDIAGNOSED**

While much research has shown that the incidence of depression and high ability in incarcerated juvenile delinquents is rare, many anecdotal observations by those who work with the incarcerated offenders suggest otherwise. These researchers tested youth in Virginia detention centers in an attempt to measure the high ability and depression rates. Specifically, 207

incarcerated juveniles ranging in age from 10 to 17 were given two psychological measures that assessed their ability and their depression levels. A large majority was male (87%), and 72% were minority (68% African American). It was found that the juveniles, overall, were slightly below average on ability. However, 18.2% of the sample did score above the 90th percentile, a percentage similar to that found in a regular population. In addition, 37.1% of the sample was found to be clinically depressed. Extremely interesting was the relationship between depression and high ability in these youth: a larger than expected proportion of the high-ability juveniles (55.6%) were also clinically depressed. Although many of the juveniles were found to be depressed, none of them had been previously identified by the facility staff as such. The authors suggest that incarcerated juveniles be screened for depression upon admission, particularly given the strong association between depression and suicide. They also suggest that because high ability delinquents may be more vulnerable to depression, staff should take this into account when assessing the risk of a particular individual.

Messler, L.P., & Ward, T.J. (1998). The coincidence of depression and high ability in delinquent youth. *Journal of Child and Family Studies*, 7, 97-105.

■ **ASSESSMENT PRIOR TO INTAKE HELP IDENTIFY NEEDED RESOURCES FOR JUVENILE OFFENDERS**

There are several stages at which a juvenile offender can have contact with the judicial system: pre-arrest, arrest, intake, detention, adjudication, and disposition. However, a large majority of juvenile cases are informally processed and never reach the detainment, adjudication and disposition phases. Because many juveniles may not reach these later phases, early intake that assesses their risks and needs is extremely important. This way, juveniles who may have committed minor offenses and thus may not spend a lengthy amount of time in the system will still be given the opportunity to be assessed and referred to services if needed. In this study, the authors interviewed several juvenile justice practitioners in Texas about their intake assessments of juveniles, and found that the timing and content of intakes varied greatly. Respondents also identified several obstacles or disadvantages to early assessment, such as increased costs and too much time. However, the authors argue that if intake results in preventative steps, such as referrals to mental health or substance abuse counselors, problems can be identified before they worsen and lead to other criminal behavior. Then, fewer juveniles would pass through the juvenile justice system, and fewer resources would be used in the court system. An additional criticism, especially mentioned by rural practitioners, was that too few resources exist to treat all juveniles who are assessed and found to need resources. The authors acknowledge this, but claim that assessment can still be a useful tool for identifying resources that are needed by the community, and to help

prioritize the scarce resources that exist.

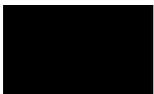
Mears, D.P., & Kelly, W.R. (1999). Assessments and intake processes in juvenile justice processing: Emerging policy considerations. *Crime & Delinquency*, 45, 508-529.

■ **LOCAL RESEARCHERS LOOK AT RECIDIVISM AMONG FEMALE JUVENILE OFFENDERS**

University of Nebraska-Kearney researchers identified factors related to the reoffending of female juveniles committed to a Midwestern state correctional facility. Records of 238 females, aged 12-to-18-years-old, were examined. Recidivism was defined as being recommitted to the facility sometime during the three years after discharge (96 juveniles were recidivists and 142 were nonrecidivists). Recidivists, as compared to nonrecidivists, were involved in more crimes associated with assault and auto theft for their first commitment. They also had a longer stay in the institution — most likely because they tended to have a greater number of risk factors than the nondelinquents. Recidivists also tended to have poorer arithmetic scores, which stresses the need for appropriate academic instruction for juvenile offenders. Recidivists had more involvement in gangs and histories of abuse, which has important implications for early intervention. The strongest predictor of recidivism, however, was age at first offense; juveniles who were younger at their first offense were more likely to recidivate. The second most important predictor was the location of their prior residence, as urban females were more likely to recidivate than rural females. The authors stated that this could be due to their increased assess to gangs; hence, they suggested that options other than urban placements should be given to these youth, and that urban delinquents may need more intense support following release.

Archwamety, T., & Katslyannis, A. (1998). Factors related to recidivism among delinquent females at a state correctional facility. *Journal of Child and Family Studies*, 7, 59-67.

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