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GENDER, PAST TRAUMA, AND DISCHARGE PLAN PREDICT CHILDREN'S FUNCTIONING IN RESIDENTIAL TREATMENT CENTERS

Given that many children removed from their homes are placed in residential treatment settings, it is essential for service providers to understand what factors influence these children's functioning. In this study, researchers interviewed and assessed 41 children currently living in residential treatment centers. More than half of these children experienced three or more different types of trauma. Over one-third had at least three prior stays in a residential treatment center, and over half of the children had at least five transitions in caregiving. This demonstrates that the majority of these children had chaotic lives marked by both significant trauma and instability. The researchers investigated what factors may help or hinder the children's current level of functioning and found several useful pieces of information. First, males in this study had higher levels of internalizing symptoms, meaning that males, on average, were more anxious, withdrawn, and depressed than females. Second, children who experienced more trauma reported being less angry than children who experienced less trauma. The researchers suggested that this may be because children who were more traumatized were experiencing symptoms similar to Post Traumatic Stress Disorder (PTSD), which can involve avoidance of stimuli that remind the child of their prior trauma. These children may have learned to associate their anger with trauma experiences, so they avoid being angry altogether. Third, children who reported more dissatisfaction with their current discharge plan tended to be more depressed. Related to this finding, children who reported greater certainty regarding where they would go after treatment reported greater satisfaction. This suggests that children who are involved, or at least informed, about their case plans have better outcomes than those who are uninvolved. Given the positive connection between confidence in discharge plans and current functioning, service providers may want to involve children in the planning process.

Brady, K. L., & Caraway, S. J. (2002). Home away from home: Factors associated with current functioning in children living in a residential treatment setting. *Child Abuse & Neglect*, 26, 1149-1163.

PEER SUPPORT CAN BE A RISK OR PROTECTIVE FACTOR FOR KIDS IN FOSTER CARE

Children placed in foster care are often at higher risk for a range of behavioral problems. In this study, researchers examined factors that may affect vulnerability to behavior problems in children in foster care. They interviewed 214 children in foster care and their caregivers approximately six months after their initial foster care placement. The children were then re-interviewed as adolescents, six years later. Several factors present at the first interview were related to risk behaviors at the second interview. Some of these factors are beyond service providers' control, including race/ethnicity, type of abuse, and level of behavior problems present when the child entered foster care. However, social support variables might also play a role in subsequent development of risk behaviors. Specifically, the researchers assessed two types of peer support – classmate support and social acceptance. The authors found that increased classmate support was associated

with lower risk behaviors in adolescence. Increased social acceptance, on the other hand, predicted higher participation in risky behavior. These findings illustrate the positive and negative effects that the school atmosphere can have on children. Because of this, the authors suggested that youth service providers make an effort to incorporate school components into their programs. Specifically, they suggested that increasing school achievement and classmate support might reduce participation in risk behaviors. They also suggested interventions to encourage youth with high peer acceptance to associate with peers who engage in less risky behaviors.

Taussig, H. N. (2002). Risk behaviors in maltreated youth placed in foster care: A longitudinal study of protective and vulnerability factors. *Child Abuse & Neglect*, 26, 1179-1199.

VARYING RATES OF EMOTIONAL ABUSE ACROSS STATES LIKELY DUE TO VARIABILITY IN STATE STATUTES

Although there are still legal, academic, and practical debates about how physical and sexual abuse of children should be defined, the type of maltreatment with the vaguest definition remains emotional abuse. As this type of abuse almost never leaves physical evidence, it also remains the most difficult to document or substantiate. One set of researchers analyzed states' reports of child maltreatment for 1998 to determine differences among reporting for different types of abuse and to examine the relation between reporting rates and the level of inclusiveness in state laws about emotional abuse. Abuse rates from 43 states were available from the National Center for Child Abuse and Neglect Data System (NCANDS). The average number of child emotional abuse reports in the United States that year was 11.7 per 10,000 children, which was lower than the average number of sexual abuse reports (15.1 per 10,000), physical abuse reports (29.4 per 10,000), or neglect reports (78.5 per 10,000). Reporting rates for emotional abuse and neglect tended to vary widely across states, while physical and sexual abuse rates were more stable across states. And although state rates of emotional abuse correlated significantly with state rates of neglect, emotional abuse rates were not correlated with rates of physical or sexual abuse. Not surprisingly, states with more inclusive civil statutes and caretaker culpability civil statutes for emotional abuse reported higher rates. However, emotional abuse rates were not related to the inclusiveness of state criminal statutes for that type of abuse. Finally, the researchers used other state variables to statistically predict the abuse rates. Neither total welfare spending (at the federal, state, or local level) nor geographic region was associated with rates of reported emotional abuse. The authors concluded that more uniform statutes for emotional abuse are needed to improve protection of children. [Editor's note: Nebraska did not contribute data to NCANDS for 1998 (state participation is technically voluntary). Emotional abuse is included in Nebraska's current statutes on abuse and neglect.]

Hamarman, S., Pope, K. H., & Czaja, S. J. (2002). Emotional abuse in children: Variations in legal definitions and rates across the United States. *Child Maltreatment*, 7, 303-311.

OVERALL, INVOLVEMENT IN SCHOOL ACTIVITIES AND COMMUNITY SERVICE IS NEGATIVELY RELATED TO DELINQUENCY

To examine the relationship between involvement in school activities and community service and delinquency, researchers asked 11,560 12th-graders across 943 diverse schools to report their level of involvement in school activities and community service, and their involvement in delinquent behaviors. "School involvement" did not include athletics in this study. Overall, involvement in school activities and community service were related to lower levels of reported delinquency. However, the relationship between school activity involvement and delinquency became more complicated when different school characteristics were considered. Specifically, the association between higher school activity involvement and lower delinquency was strongest for African American students who attended low-minority schools, but weaker for non-African American students. For African American students in high-minority schools, an increase in school activities was associated with an increase in delinquency. The authors suggested that this may be because African American students who participate in activities in high-minority schools might be more oppositional and engage in more visible delinquent behaviors, whereas African American students who participate in school activities in low-minority schools approach school behavior more conventionally, or are involved in school activities for more conventional reasons. The relation between more involvement and less delinquency was stronger for schools that were rated less safe by students, possibly because community activities provide an alternative to school activities for students who feel unsafe in their schools. The authors cautioned that while the results demonstrated that involvement in community service, and for some, school activity, was associated with lower reports of delinquency, they cannot conclude that involvement was the cause of the decreased delinquency.

Hoffman, J. P., Jiangmin, X. (2002). School activities, community service, and delinquency. *Crime & Delinquency*, 48, 568-591.

TYPE OF PREVIOUS ABUSE AND NUMBER OF CHILDREN ADOPTED AFFECT POST-ADOPTIVE FAMILY FUNCTIONING AND CHILDREN'S BEHAVIORAL FUNCTIONING

52 parents who had adopted "special needs" children evaluated the children's behavior and their family's functioning. "Special needs" children were defined as those who were older than 3, had physical and/or mental disabilities, had psychological or emotional problems, were adopted as part of a sibling group, or were from minority groups. All of the adopted children in this study had a history of abuse or neglect, and on average, the families had adopted their first child 6.68 years before the study. With regards to family functioning, families of individual adoptees were functioning better than families of adopted sibling groups. In contrast, children adopted as sibling groups had fewer behavioral problems than children adopted alone. This suggests that while placement with siblings may have had positive effects on the adopted children's behavior, it likely placed a greater strain on

the adoptive family, resulting in the parents' perceptions of lower family functioning. Type of past abuse was related to family functioning (families of children who had been neglected were better functioning than families of children who had been physically and/or sexually abused), but was not related to child behavior. The authors noted that adoption agencies should consider these findings when making adoption placements, and that the results indicate the need for post-adoption support services for adoptive families.

Erich, S., & Leung, P. (2002). The impact of previous type of abuse and sibling adoption upon adoptive families. *Child Abuse & Neglect*, 26, 1045-1058.

ANEMIA STILL A PROBLEM IN POPULATION OF CHILDREN RECEIVING WIC

The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) provides vouchers redeemable for nutritious food, nutrition counseling, and frequent screening for iron-deficiency anemia – a condition that can negatively impact young children's cognitive development. Previous research suggests that the program helped lower the prevalence of anemia among recipients. A recent study suggests that there is still reason for concern about the incidence of anemia in the population of children benefiting from WIC services. A database containing records of WIC program participant information from 1997 to 1999 was analyzed to determine the extent of anemia in 7053 children receiving services in Chicago. Using national WIC cutoff values, 18% of children under 2 and 12% of children aged 2 to 5 met the criteria for anemia at one or more clinic visits. According to analyses of children who were tested at least twice during those two years (1585 children), 32% of the 342 children who were anemic at their first visit were still anemic at their second visit. An additional 7% of children who were not anemic at their first visit became so by their second visit. The authors suggested several possible recommendations that would require large-scale changes to the functioning of the system, such as requiring proof of treatment for anemia before a family could be recertified to receive WIC or creating mandatory linkages between WIC sites and health clinics. However, a suggestion that could be implemented more immediately would only require that front-line workers and administrators be aware of the problem, and act accordingly with clients.

Kahn, J. L., Binns, H. J., Chen, T., Tanz, R. R., & Listerick, R. (2002). Persistence and emergence of anemia in children during participation in the Special Supplemental Nutrition Program for Women, Infants, and Children. *Archives of Pediatrics and Adolescent Medicine*, 156, 1028-1032.

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