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Examination of the Relationship Between Parental Satisfaction and Child Maltreatment Potential While Considering Social Desirability

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Abstract

Parental dissatisfaction with children appears to be associated with child maltreatment. However, little is known regarding the specific domains of parental dissatisfaction that may increase child maltreatment potential, particularly in perpetrators of child maltreatment where substance abuse is present. In this study, responses to the Child Abuse Potential Inventory (CAPI) and a scale measuring parental satisfaction in 11 domains were examined in a sample of 82 mothers who were referred for treatment of substance abuse and child neglect by the local child protective service agency. Results indicated that mothers were relatively most satisfied with their children overall, and least satisfied in domains that were relevant to discipline (i.e., following house rules, compliance, reaction to redirection and punishment, completion of chores). Five of the 11 areas of parental satisfaction that were assessed evidenced negative correlations with child abuse potential, indicating that as satisfaction increased, abuse potential decreased. However, when correlation analyses excluded participants with elevated CAPI Lie scale scores (a measure of social desirability), only overall happiness demonstrated a significant negative correlation with child abuse potential. These results suggest that while associations are present among measures of parental satisfaction and child abuse potential, these associations are moderated to some extent by social desirability, which may help explain some of the inconsistencies reported in prior studies of parental satisfaction and child maltreatment potential.

Keywords

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Neglect is the most common form of child maltreatment, yet relatively little is known regarding it long-term effects and the factors that contribute to it, particularly when compared to the literature on physical and sexual abuse. Along these lines, understanding the extent to which parents are satisfied with their children is relevant to mental health professionals who serve perpetrators of child neglect. Indeed, parental satisfaction may act as a buffer against child abuse and neglect (Brown et al. 1998; Kolko et al. 1993; Mammen et al. 2003; Trickett and Susman 1988), particularly when the parent—child relationship is strong and other risk factors, such as substance abuse, are mitigated (Wolock and Magura 1996; Wolock et al. 2001). Moreover, parental satisfaction may be emphasized in the development of consumer-driven treatment goals (DeCato et al. 2002). Although little is known about the specific aspects of parental dissatisfaction that are associated with child maltreatment potential (Carpenter and Donohue 2006), parental satisfaction is a better predictor of harsh discipline compared with parental education, extent of depression, beliefs about discipline, and parents being subject to harsh discipline in their own childhood (Simons et al. 1993).

Parental substance abuse is strongly associated with child maltreatment, and is a growing problem in child welfare systems (Magura and Laudet 1996). Jones (2005) found 68% of children who were maltreated had mothers who abused alcohol or drugs, and other investigators have identified substance abuse as a primary risk factor for child maltreatment (Donohue et al. 2006; Dunn et al. 2002; Hamilton and Browne 1999), often leading to a lack of parental supervision (Corcoran 2000) and family dysfunction (Bijur et al. 1992; Davis 1990). In a study by English et al. (1999), the likelihood of substantiating child maltreatment was determined by caregiver substance abuse. Thus, there is ample support to suggest the importance of examining the relationship between parental satisfaction and child maltreatment in substance abusing parents. Along similar lines, there is extant research demonstrating how parental substance abuse influences parental satisfaction (Tarter et al. 1993). High levels of parental dissatisfaction have been found in substance abusing fathers (Ammerman et al. 1994), while lifetime substance use disorders mediated the relationship between parents' own experience of child maltreatment and parenting satisfaction in a sample of Native Americans (Libby et al. 2008).

Based on these considerations, the current study examines the relationship between parental satisfaction and child maltreatment, and contributes to the existing literature in several critical ways. First, the nature of study referral offers a *real-world* context in which to interpret results, as participants were referred from child protective service case workers, and these referrals were identified to evidence drug use (which has been identified to occur more often than not in child maltreatment settings). Second, the study includes validated methods of assessing parental satisfaction and child maltreatment potential. Lastly, the study examines the influence of social desirability when assessing the relationship between parental satisfaction and child maltreatment potential, which has not occurred in prior research (Stowman and Donohue 2005) and is a significant concern within child welfare settings (Donohue and Van Hasselt 1999; Lounds et al. 2004).

Methods

Participants

Data included in this study were collected as part of a prospective randomized controlled trial designed to develop and evaluate the effectiveness of an intervention to treat child neglect and substance use disorders. Specifically, the data set included 82 adult mothers who were referred to a treatment by local Department of Family Service (DFS) caseworkers for child neglect and comorbid substance use disorders. To be eligible for referral, caseworkers were told that the mothers needed to evidence illicit drug use during the four months prior to

being referred for treatment, be living with the child victim of neglect or it was the intention of the Court to return the child to the home, have at least one adult willing to be involved in the participant's treatment, and sexual abuse or domestic violence could not be the primary reason for referral. Caseworkers were also informed that participants would need to evidence a diagnosis of Substance Abuse or Dependence according to their responses to structured clinical interviews with program staff at the time of referral. Therefore, the participants in this study reflected significant problems that referral to the parent study reflected referrals commonly from child protective service agencies.

The sample was predominantly Caucasian (45%) but included African Americans (26%), Asian Americans (3%), Hispanics (14%), and other ethnic backgrounds (13%). Their age range was 18 to 49 years (mean=29, *SD*=7.86). Fifty percent were reportedly single, 17% were married, while 33% were cohabiting. Eighty-eight percent were unemployed. The mean educational grade level completed was 11 (*SD*=1.96). Child victims were mostly females (55%), ranging in age from one month old to fourteen years (mean age=3 years, *SD*=46 months). Half of the children (54%) were living in the home.

Measures

The Child Abuse Potential Inventory (CAPI; Milner 1986) is a 160-item screening instrument designed to assess the potential of parents to neglect and physically abuse their children. Abuse and Lie scale scores may also be derived. The Abuse subscale ranges from zero to 486, with higher scores indicating greater likelihood of child maltreatment potential (recommended cut-off score=166). The Lie scale ranges from 0 to 18, with higher scores indicating greater likelihood of presenting oneself in a favorable light (recommended cut-off score=7).

Parent Satisfaction with Youth Scale (PSYS; Donohue et al. 2001). The PSYS measures how content parents are with their children across various domains in the parent—child relationship. Parents respond to items in increments of ten utilizing a 0 to 100 scale measuring percentage of "happiness" with their child. The reliability and validity of this scale are excellent (Donohue et al. 2001). In the current study, the PSYS scale was modified to be appropriate for use with mothers of infants and victims of child maltreatment such that several items were relevant to children of all ages (i.e., communication, reaction to my rewards, how my child interacts with me), and six items are relevant only to parents of children older than 18 months (i.e., compliance, reaction to my redirection or punishment, how my child follows house rules, safety skills, the way my child does household chores, how my child participates in educational activities with me, how my child participates in family activities).

Procedure

Upon being referred for treatment by the DFS caseworker, participants were contacted by research assistants to complete phone screening to provide a preliminary determination of whether study inclusion criteria were met. Based on this screening, eligible mothers where scheduled for a pre-treatment assessment, in which they provided informed consent and underwent comprehensive evaluation to ensure they met study criteria. Measures were collected as part of this comprehensive evaluation. Participants were informed that with the exception of future harm to themselves or others all information provided during the study would be kept confidential. The study was approved by the Institutional Review Board for the protection of human participants at the University of Nevada, Las Vegas.

Results

Mean Ratings of Parental Satisfaction

Table 1 presents the means and standard deviations of PSYS and CAPI scores. As can be seen, the lowest PSYS scores appeared to be related to discipline, whereas higher scores appeared to describe activities or skills that did not typically require discipline. The mean CAPI Abuse score was just below the cut-off score of 166, and the mean CAPI Lie score for the sample was just below the recommended cut-off score of 7 (it should be noted that a cut-off score of 8 has been recommended for participants with less than 12 years of education; Milner 1986). Thus, many of the participants were at significant risk of maltreating their children, and attempting to present in a favorable light. Based upon the mean education of the sample (*M*=11 years, *SD*=1.96), the higher score of 8 was used when determining Lie score classification.

Relationship Between Parental Satisfaction & Child Abuse Potential Without Consideration of Social Desirability

To assist in determining the extent to which parental satisfaction is associated with child maltreatment potential without consideration of social desirability, Spearman rho coefficients were calculated between the 11 PSYS scores and CAPI Abuse scores. It was expected that as PSYS scores increased, CAPI Abuse scores would decrease. Somewhat consistent with these expectations, all domains of parental satisfaction were negatively correlated with child maltreatment potential, including overall happiness, and five domains reached the level of significance (p<.05) (see Table 2).

Relationship Between Parental Satisfaction and Child Maltreatment Potential Considering Social Desirability

To assess perceived pressure to respond in a socially desirable manner when completing the study measures, CAPI Lie scale scores were first correlated with Abuse subscale scores and PSYS scores. As can be seen in Table 3, there were statistically significant positive associations between most of the satisfaction scores and CAPI Lie subscale scores. Therefore, participants who scored high on the social desirability scale (i.e., CAPI Lie scores>8) were removed from analyses that examined the relationship between parental satisfaction and child abuse potential. Recalculating this series of analyses resulted in a significant negative relationship between Overall Happiness and CAPI Abuse scores only. Thus, for Valid Responders (i.e., CAPI Lie Scale score<8), there was no relationship between domains of parental satisfaction and child abuse potential with the exception of overall happiness.

To further examine the effect of social desirability on study measures, a between-subjects (i.e. Socially Desirable Responders, N=48, vs. Valid Responders, N=34) MANOVA was performed on parents' overall happiness scores and Abuse subscale scores. It was suspected that Socially Desirable Responders would endorse higher levels of overall happiness and rate lower in child maltreatment potential than Valid Responders. The Wilk's criterion (Λ) omnibus test statistic was significant, R(2, 77)=11.78, p<.001, partial η ²=.23. There was a significant main effect for CAPI Abuse, R(1, 78)=21.49, p<.001, partial η ²=.22. Child maltreatment potential was significantly higher for Valid Responders (M=199, SD=103) relative to Socially Desirable Responders (M=106, SD=80). There was also a significant main effect for parental Overall Happiness ratings, R(1, 78)= 6.37, P=.014, partial η 2=.08. Specifically, overall parental happiness with children was significantly higher for Socially Desirable Responders (M=99, SD=3.8) relative to Valid Responders (M=91, SD=19.3). Therefore, Socially Desirable Responders may be biasing their parental satisfaction scores to present themselves more favorably than Valid Responders.

Discussion

Without consideration of social desirability, the results of this study would have suggested there may be significant relationships between several domains of parental satisfaction with youth and child maltreatment potential. For instance, almost half of the parental satisfaction domains assessed in this study were significantly negatively associated with child maltreatment potential; however, when social desirability was taken into account, with the exception of overall satisfaction, these relationships were no longer significant. These results suggest social desirability influences relationships between self-reported domains of parental satisfaction that were assessed in this study and child maltreatment potential, but not in the relationship between overall parental satisfaction and child maltreatment potential. Socially desirable responders were also found to evidence lower child maltreatment potential and higher overall satisfaction.

Given these results, what treatment implications may be derived from this study? First, it is probably important to examine measures of social desirability when interpreting parental satisfaction within child neglect and drug abuse referrals from child protective services. When measures of social desirability appear to be valid, the modified PSYS, may be utilized to obtain information that is relevant to the prevention of child maltreatment. For instance, in our clinic, we have found it useful to ask parents who have been referred for child maltreatment and substance abuse to indicate how their parental satisfaction in particular domains can be improved. This method often leads to rich discussion about specific behaviors and activities that may be enhanced, and given the results of this study, potentially act as buffers in the prevention of child maltreatment. Indeed, Azrin et al. (1973) theorized that when children engage in behaviors that are desired by their parents, they are more likely to reinforce them, and Mouton and Tuma (1988) found the extent to which children positively react to rewards and punishment influences satisfaction of parents with their children. When validity scales are elevated, with the exception of Overall Happiness, such questions are likely to yield guarded information.

It is important to point out the restricted age range in this sample. More than 50% of the children in the study were 2 years old or younger, with a third of these children being four months old or younger. Although this age range represents the majority of child neglect cases, it is possible that mothers of infants had limited opportunities to interact with their children, especially mothers who lost custody of their children for extended periods of time. Thus, additional research is needed in regards to parental satisfaction among parents with infants. Of course, the number of older children in this study was low and may have resulted in low statistical power for the correlation analyses that included only these youth. To this end, future research should focus on including a larger sample with a broader range of children. It would also be very informative to compare maltreated children with a matched control group of non-maltreated children. Future research will need to focus on incorporating additional measures of response validity and determining what factors influence identified perpetrators of child maltreatment to be more or less susceptible to social desirability.

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Table 1

Parent satisfaction with youth scale and child abuse potential inventory means and standard deviations

Measures	М	SD
Parent satisfaction with youth scale		
Following household rules	68.44	28.99
Compliance	68.86	26.43
Reaction to my redirection or punishment	69.13	27.47
Household chores	69.84	27.80
Safety skills	79.09	23.61
School and education activities	81.91	18.37
Communication	85.50	20.37
Family involvement	85.91	22.65
Relationship	87.47	20.54
Reaction to my rewards and attention	90.63	18.70
Overall happiness	94.25	15.33
Chile abuse potential inventory		
Abuse Subscale	160.74	104.42
Lie Subscale	6.91	3.67

PSYS Parent Satisfaction with Youth Scale; CAPI Child Abuse Potential Inventory

Table 2

The relationship between child abuse potential and parental satisfaction with and without consideration of social desirability (spearman correlations coefficients)

Satisfaction domains	CAPI abuse including mothers with elevated social desirability	CAPI abuse excluding mothers with elevated social desirability
Communication	24 [*] (<i>№</i> 80)	19 (<i>N</i> =46)
Relationship	30** (<i>N</i> =79)	15 (<i>N</i> =46)
Reaction to my praise rewards and attention	24 [*] (<i>№</i> =79)	23 (<i>N</i> =46)
Overall happiness	29**(<i>N</i> =80)	30*(<i>N</i> =46)
Compliance	24 (<i>N</i> =44)	16 (<i>N</i> =28)
Reaction to my redirection or punishment	21 (<i>N</i> =46)	15 (<i>N</i> =29)
Following household rules	29 (<i>N</i> =45)	.05 (<i>N</i> =28)
Family involvement	29 (<i>N</i> =44)	14 (<i>N</i> =28)
Safety skills	25 (<i>N</i> =44)	01 (<i>N</i> =28)
Household chores	18 (<i>N</i> =45)	02 (<i>N</i> =28)
School and education activities	35*(<i>N</i> =43)	.18 (<i>N</i> =27)

^{**} Correlation is significant at the 0.01 level (2-tailed).

 $^{^{\}ast}$ Correlation is significant at the 0.05 level (2-tailed).

 Table 3

 The relationship between CAPI lie subscale scores and parental satisfaction (spearman correlations)

Variables	CAPI lie subscale
Communication	.26*(<i>N=80</i>)
Relationship	.45**(<i>N=79</i>)
Reaction to my praise rewards and attention	.32**(<i>N=79</i>)
Overall happiness	30**(<i>N</i> =80)
Compliance	.34*(<i>N=44</i>)
Reaction to my redirection or punishment	.21 (<i>N=46</i>)
Following household rules	.38*(<i>N=45</i>)
Family involvement	.45**(<i>N=44</i>)
Safety skills	.29 (<i>N=44</i>)
Household chores	.16 (<i>N=45</i>)
School and education activities	.49**(<i>N=43</i>)

^{**} Correlation is significant at the 0.01 level (2-tailed).

^{*} Correlation is significant at the 0.05 level (2-tailed).