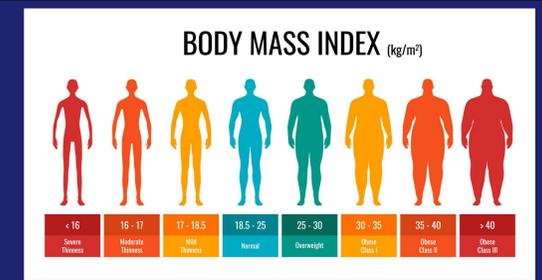


Child Maltreatment's Adverse Effects on Health Outcomes

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Abstract

- Child Maltreatment has been one of the most significant ongoing issues affecting people in the United States.
- Previous research has heavily focused on the effects of child maltreatment on a person's mental health. However, child maltreatment's adverse effects on health outcomes have been limited.
- The present study aimed determine that various forms of child maltreatment played a significant role in sleep problems and body mass index in adulthood.
- Secondary data analysis was conducted using a sample ($N = 863$) that participated in the Midlife Development in the United States (MIDUS) Refresher Biomarker data set.
- Two multiple linear regression analyses were conducted. The results of this study showed that emotional abuse had a significant effect on sleep problems. However, none of the various forms of child maltreatment predicted body mass index.
- These findings have significant implications in the social work field. Social workers can shift their focus in providing appropriate resources in combating emotional abuse to avoid future negative health outcome.

Introduction

Significance of Study

- According to newly released data from the Children's Bureau (2021), child protective services (CPS) received approximately 4.4 million referrals in 2019, including 7.9 million children in the United States.
- The research on child maltreatment primarily focused on the correlation between the abuse and adverse psychological outcomes.
- Research on child maltreatment's adverse effects on health outcomes have been severely neglected.

Purpose of the Research

- The purpose of the study was to analysis the effects of child maltreatment on health outcomes.

Research Questions

- "What is the effect of child maltreatment on obesity?"
- "What is the effect of child maltreatment on sleep disturbances?"

Hypothesis

- Child Maltreatment would increase the risk of obesity.
- Child Maltreatment would increase the risk of sleep disturbances.

Literature Review

Sleep Disturbances and Obesity

- Child maltreatment played a pivotal role in sleep disturbances and obesity in adulthood.
- There is limited research on child maltreatment's adverse effects on health outcomes.

Multi-theoretical Approach

- The life Course of Epidemiology** - is the study of long-term health outcomes caused by physical or social exposures through a person's life course.
- The Allostatic Load** - is the biological explanation to weight gain caused by the dysregulation of stress hormones on the brain.

GAP

- There has been a crucial gap in literature of the differential effect of diverse types of child maltreatment on health outcomes.

Methodology

Research Design

- The current study is a secondary analysis of the data from the Midlife Development in the United States (MIDUS) Refresher Biomarker data set, which is the fourth project in a five project series.
- Like the MIDUS 2 Biomarker project, the MIDUS Refresher Biomarker subset focuses on biopsychosocial pathways that contributing to diverse health outcomes.
- The overall objective of MIDUS was to discover the correlations between sociodemographic, psychosocial, and biological variables to determine for later life profiles of morbidity and mortality.

Sample and Sampling Method

- 863 participants were randomly chosen from the national sample ($n = 746$) and the Milwaukee County sample ($n = 117$).
- The participants ranged from 26 to 78 years old with a mean of 52.7 years. The standard deviation of age was 13.4 years. Women represented 52% of the cohort. When it came to race and ethnicity, the majority were white with a 70% representation. The other race and ethnicities included 18% Black or African American, 6% other race/ethnicity, 3% Native American or Alaskan Native, 1% Asian, and less than 1% Native Hawaiian or Pacific Islander
- The recruitment process consisted of a two-stage procedure: The first stage involved mailing out recruitment packets to the potential participants, which was followed by telephone calls to answer questions and concerns. The second stage was assigning participants to three laboratory locations to collect data within a two-day period: University of California-Los Angeles, University of Washington, and Georgetown University.
- On the first day, the researchers gathered data by having the participants complete their medical history, physical exam vitals, self-administered questionnaires, and self-reported sleep assessments. Additionally, medically trained staff collected data through medical examination and equipment on the second day

Measures

Independent Variables : Child Maltreatment (utilized the Childhood Trauma Questionnaire: a 28-item self-report measurement scale)

- Emotional Abuse ($\alpha = .86$)
- Physical Abuse ($\alpha = .80$)
- Sexual Abuse ($\alpha = .946$)
- Emotional Neglect ($\alpha = .897$)
- Physical Neglect. ($\alpha = .678$)

Dependent Variables : Health Outcomes

- Sleep Disturbances (utilized Pittsburgh Sleep Quality: a 19-item self-report questionnaire)
- Body Mass Index (utilized BMI Chart)

Results

Sleep Disturbances

- A multiple linear regression was calculated to predict participant's sleep problem based on emotional abuse, physical abuse, sexual abuse, emotional neglect, physical neglect, respondent age at time of clinic visit, respondent's sex, and pre-tax income last calendar year.
- A significant regression equation was found $F(8, 632) = 7.536, p < .001$, with an R^2 of .087
- Emotional abuse ($p < .05$) and respondent's sex ($p < .05$) were significant predictors of sleep problems assed at Time 1.
- Participants who experienced higher level of emotional abuse were more likely to report higher sleep disturbances.
- Physical abuse ($p = .242$), sexual abuse ($p = .385$), emotional neglect ($p = .563$), physical neglect ($p = .553$), respondent age ($p = .561$), and pre-tax ($p = .219$) were not significant predictors of sleep disturbances at Time 1

Table 1
Results of Multiple Regression Analyses Predicting Higher Level of Sleep Problems

Variable	ANOVA	R ²	B	SE	Beta	t	Sig.
Global score higher level of sleep problems	$F(8, 632) = 7.536, p < .001$.087					
Constant			4.507	.614	--	7.336	<.001
Emotional abuse			.108	.046	.138	2.331	.020
Physical abuse			.060	.051	.060	1.172	.242
Sexual Abuse			.032	.037	.039	.870	.385
Emotional neglect			.023	.039	.033	.578	.563
Physical neglect			.037	.062	.030	.594	.553
Respondent's age at clinic visit			-.005	.009	-.022	-.581	.561
Respondent's sex			-.652	.256	-.105	2.551	.011
Pre-tax income last calendar year			-3.193	.000	-.049	-1.231	.219

Body Mass Index

- A multiple linear regression was calculated to predict participant's body mass index based on emotional abuse, physical abuse, sexual abuse, emotional neglect, physical neglect, respondent age at time of clinic visit, respondent's sex, and pre-tax income last calendar year.
- The regression equation was not significant ($F(8,225) = 1.219, p = .289$) with an R^2 of .042.
- None of the independent variables significantly predicted participants' body mass index.

Table 2
Results of Multiple Regression Analyses Predicting Body Mass Index

Variable	ANOVA	R ²	B	SE	Beta	t	Sig.
Body Mass Index	$F(8, 225) = 1.219, p = .289$.042					
Constant			26.380	2.399	--	10.995	<.001
Emotional abuse			.144	.186	.083	.773	.440
Physical abuse			.084	.200	.037	.419	.676
Sexual Abuse			.083	.136	.047	.614	.540
Emotional neglect			-.155	.164	-.100	-.943	.347
Physical neglect			.399	.243	.145	1.641	.102
Respondent's age at clinic visit			-.021	.036	-.039	-.582	.561
Respondent's sex			.1052	1.052	.073	1.000	.319
Pre-tax income last calendar year			-8.215	.000	-.052	-7.754	.452

Conclusion

Interpretation of Findings

- The results of this study showed that emotional abuse had a significant effect on sleep problems. However, none of the various forms of child maltreatment predicted body mass index.
- This finding partially supports the hypothesis that a particular form of child maltreatment would significantly impact sleep problems in adulthood.
- The results of child maltreatment had a significant impact on sleep problems is consistent with previous research.

Strengths and Limitations

- The primary strength of this study is studying the effects of child maltreatment on health outcomes in adulthood.
- The first critical limitation is data set was based on adult retrospective reporting on child maltreatment. The adults' memory of child maltreatment may have been faulty. They may have failed to recollect previous maltreatment or did not recollect it accurately.
- The data was gathered from the generic public adults and not a high-risk sample, which can be less prevalent than the latter.

Implications for Research and Practice

- Examining the correlation between differential effect of specific type of child maltreatment and adult health outcomes would increase the importance of creating proper preventative measures to protect children from maltreatment and health outcomes.
- The social work field can strengthen their focus and preventative measures to combat emotional abuse.
- Non-profits and organizations that concentrate on aiding child maltreatment survivors can shift their care plans to address emotional abuse and health outcomes.
- Although Emotional abuse is the most neglected area of child maltreatment, it is just as detrimental as physical and sexual abuse.



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