



# Intergenerational Transmission of Child Maltreatment: Nonoffending Caregivers

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May 5, 2014

# Job Interview



- <https://www.youtube.com/watch?v=HB3xM93rXbY>



## References

- **Vaughan-Eden, V. (2014).** Nonoffending mothers of sexually abused children. In J. Korbin and R. Krugman (Eds.). *Child Maltreatment Series: Contemporary Issues in Research and Policy (Vol. 2). Handbook of child maltreatment* (pp. 431-441). New York: Springer Publishing.
- **Vaughan-Eden, V. (2003).** *The impact of nonoffending mothers own histories of sexual abuse on their ability to effectively parent their sexually abused children.* Unpublished doctoral dissertation, Virginia Commonwealth University, Richmond.



# Non-Offending Caregivers

- Mothers, Fathers, Step-parents, Grandparents, Aunts/Uncles, Foster Parents, Adoptive Parents, Siblings
- All socioeconomic status (rich and poor)
- All races, ethnicities, religions
- All levels of education and work ethic



*Just Like You and Me*



# Scope of the Problem

*Review presentation handouts from previous speakers on May 5, 2014*

- Historical Context
- Incidence versus Prevalence
- Relation to Other Forms of Maltreatment



# Child Sexual Abuse

*Review presentation handouts from previous speakers on May 5, 2014*

- Impaired Biopsychosocial Functioning
- Children More Likely Abused
- Factors that Lessen Traumatic Effects

# Factors that Lessen Traumatic Effects



- Mother's ability to support her child following disclosure
- Evaluations or treatment intervention as soon after the disclosure as possible
- CAC's and MDT's



# Adult Survivors

*Review presentation handouts from previous speakers on May 5, 2014*

- Intergenerational Recidivism
- Impaired Biopsychosocial Functioning



# Myths about Non-Offending Mothers

- Mothers' Culpability
- Lack Support and Don't Believe Child
- Poor Parenting Attitudes and Practices



# *Just Imagine*

*(you received a phone call that your child has disclosed abuse)*



# Common Reactions of Caregivers

*Denial*    *Ambivalence*    *Violence*    *Self-Blame*  
*Shock*    *Numbness*    *Repulsion*  
*Anger*    *Resentment*    *Grief*  
*Helplessness*    *Depression*    *Guilt*  
*Loss*    *Finances*    *Shelter*



# Parental Reaction to Abuse Disclosure

- Belief in Child's Report
- Emotional Support to Child
- Action Toward Perpetrator
- Use of Professional Services

Everson et al., 1989

# NOC fall into a Continuum

Didn't know  
Supportive

Knew  
Not supportive

Didn't know  
Not supportive

Knew  
Participated  
Perpetrating



How Do We  
As Professionals  
Perceive & Respond  
to Children's  
Trauma?



Some trauma is more easily acknowledged:

- Natural Disasters
- Death of a Loved One
- Life Threatening Illness









PAUL HEUSTERN/THE OKLAHOMAN/AP



Other trauma may not be as easily recognized:

- Sexual Abuse
- Neglect
- Witnessing Domestic Violence











# Manage Our Frustration

- Don't Blame or Judge
- Crisis Mode – Stabilize Situation
- Normalize Feelings/Responses
- Respond in a Supportive Manner
- Acknowledge Possible Divided Loyalties



# Nonoffending Caregiver and Youth Experiences With Child Sexual Abuse Investigations

Jones et al. (2010). *Journal of Interpersonal Violence*



# How Do Clients (Non-Offending Caregivers & Youth) Experience Us?

Jones & colleagues (2010)



## Jones' Study

- **Interdisciplinary cooperation**
  - Degree to which agencies/investigators communicated or worked with each other
- **Multidisciplinary Teams improve overall communication so professionals aren't working at cross purposes**
- **MDT/CACs improve client experiences**

How Child Welfare SW & LE Collaborate to Investigate Child Abuse  
Research Findings of Viola W. Lindsay, PhD, MSW

Coordination

Cooperation

Collaboration

# Coordination



About achieving efficiency in procedures such as sharing information about rules under which each agency operates

Does not lend itself to communicating the reciprocal consequences of those procedures  
(Denise, 1999)



# Cooperation

An interaction that is intended to contribute, directly or indirectly, to the effectiveness of each other's work (Strimling, 2006)

Interactions across organizational boundaries are usually informal and lack rigid structure

Each agency functions separately and without consideration for the other's goals; interactions are based on an as needed basis

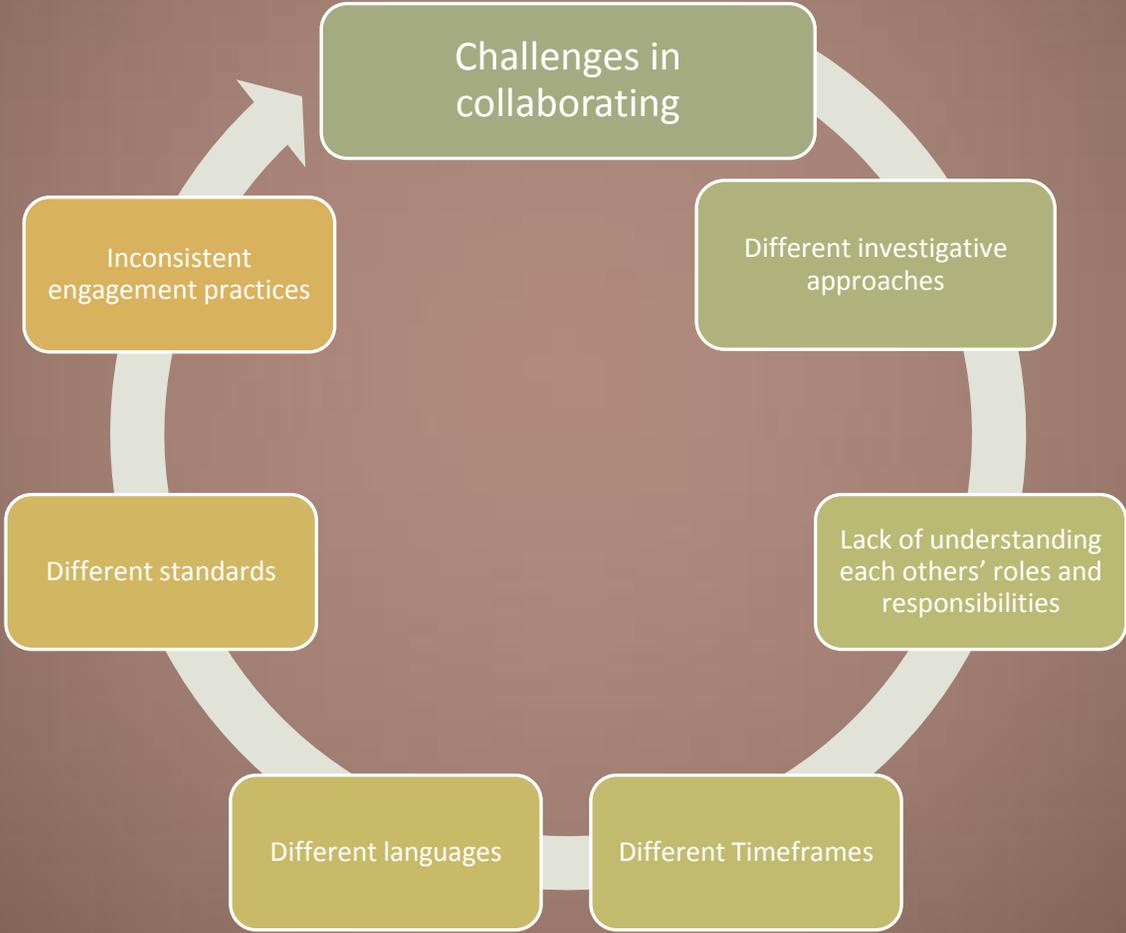
# Collaboration Continuum

People getting together in a room to talk to each other often misconceptualized as collaboration (Mizrahi, 1999)

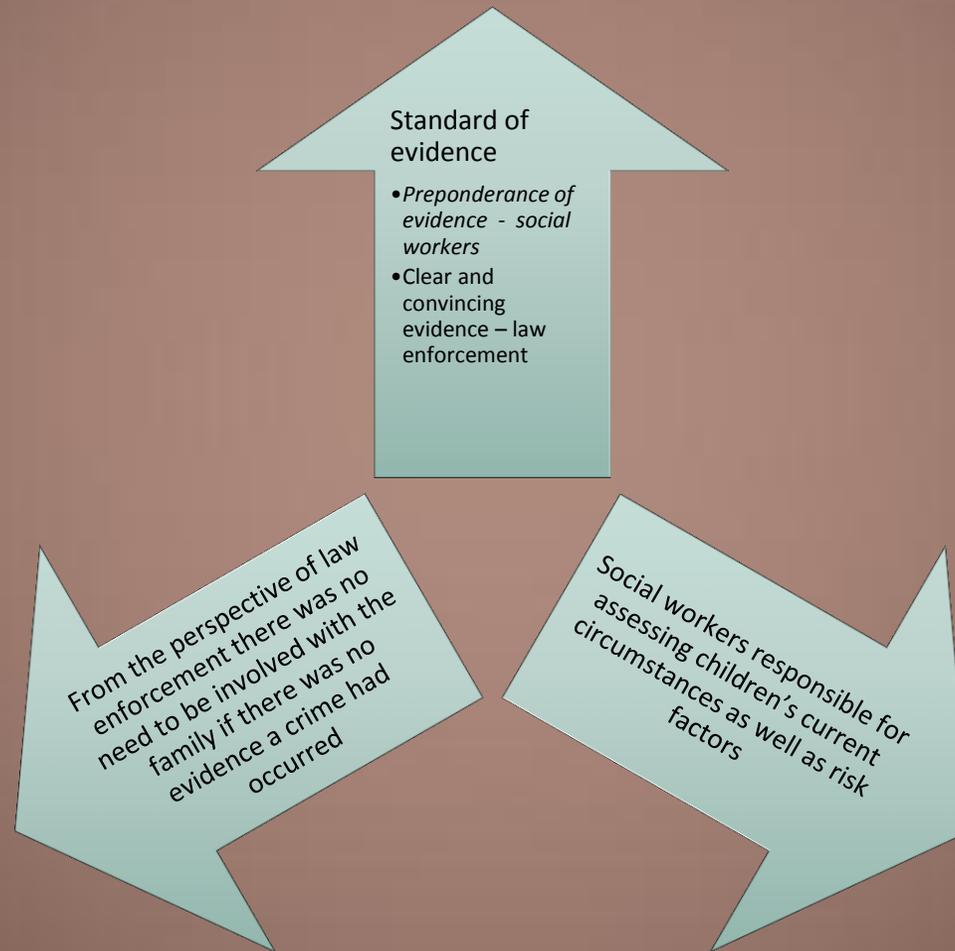
Degree to which communication is formalized, frequent, and a willingness to exchange and share information for the purpose of meeting mutual goals (Horwath & Morrison, 2007)

Coordination & Cooperation as a continuum leading to Collaboration

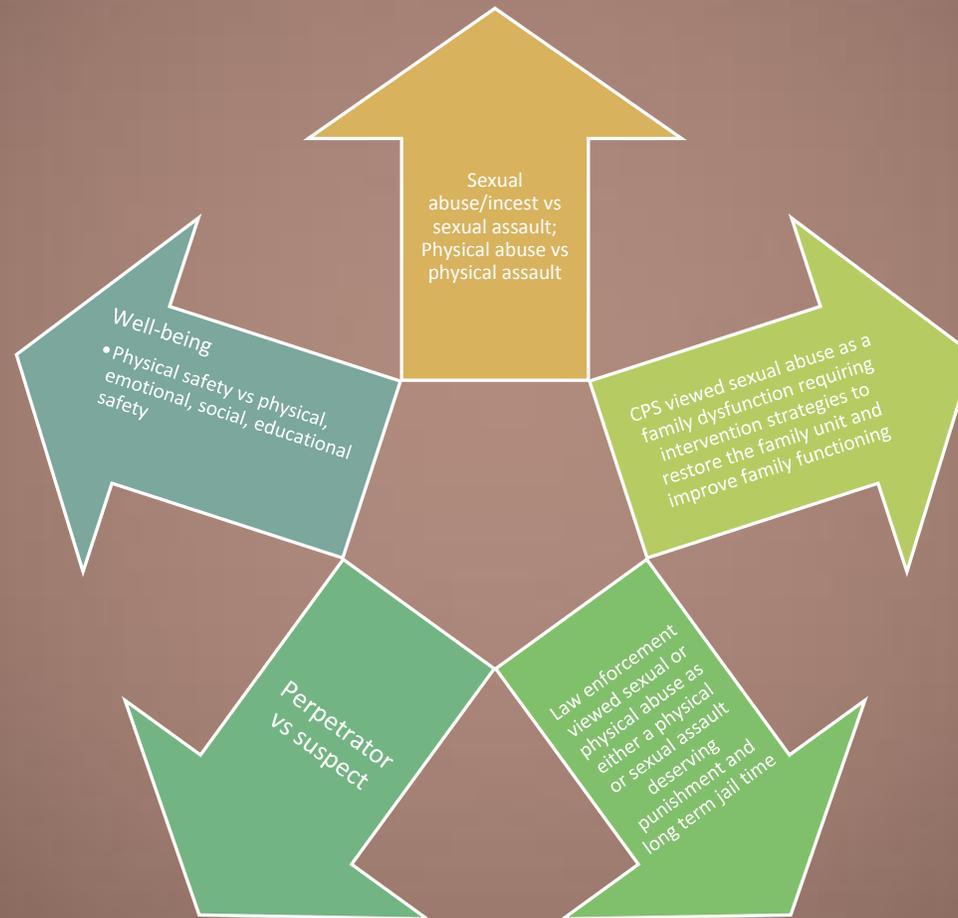
# Challenges



# Different Standards



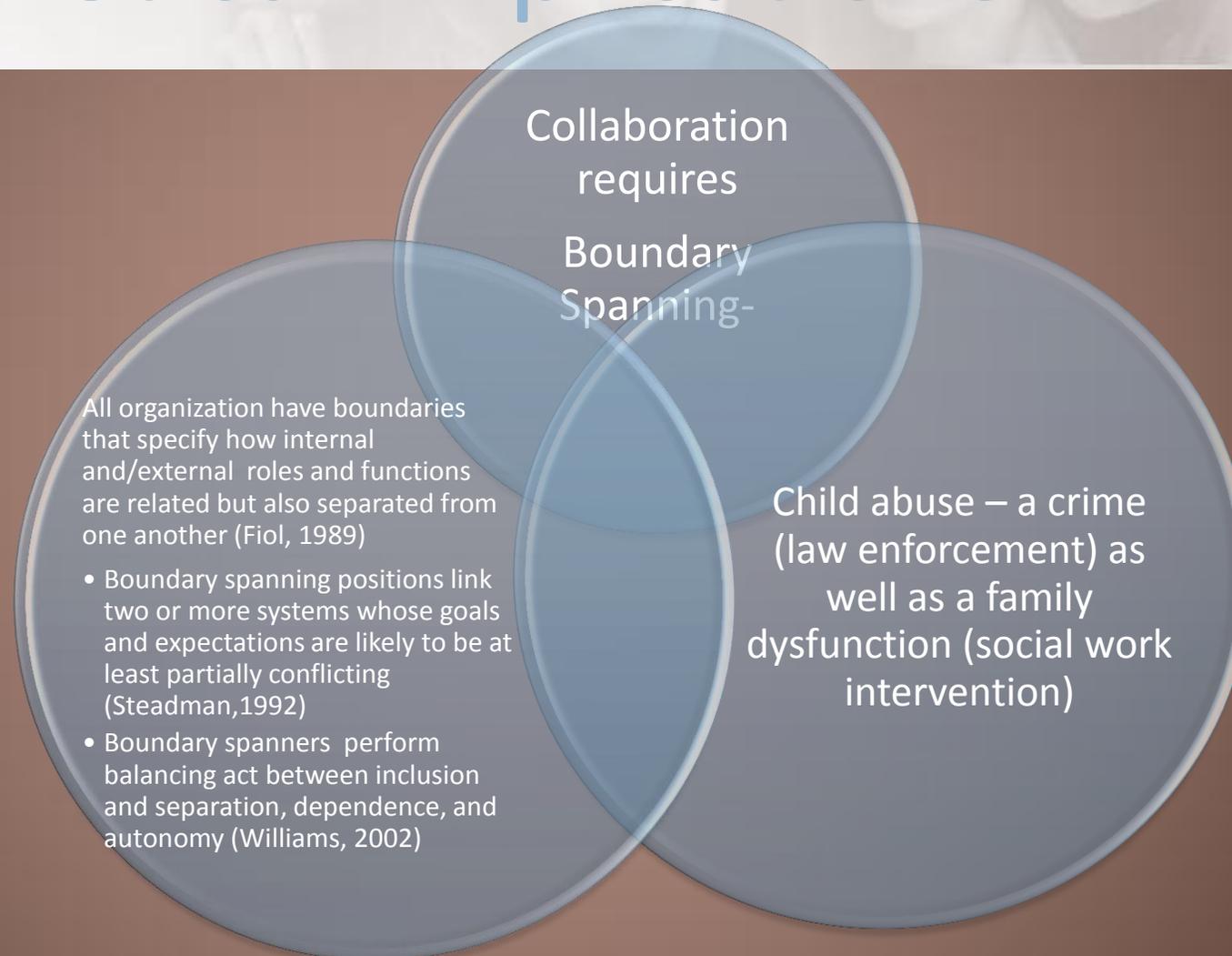
# Different Languages





How Do We  
(Professionals)  
View Each Other?

# Theoretical Implications





# Can Lawyers and Social Workers Speak the Same Language?

Vaughan-Eden (2013) Master of Jurisprudence in Children's Law and Policy Thesis



# Collaborative Forensic Social Work

- Tina Maschi, PhD

Ideally, the goal is to increase  
the social and justice outcomes for the diverse  
populations we serve by integrating the  
knowledge, values, and skills of social work,  
policy practice, and the law/judicial system  
through collaboration



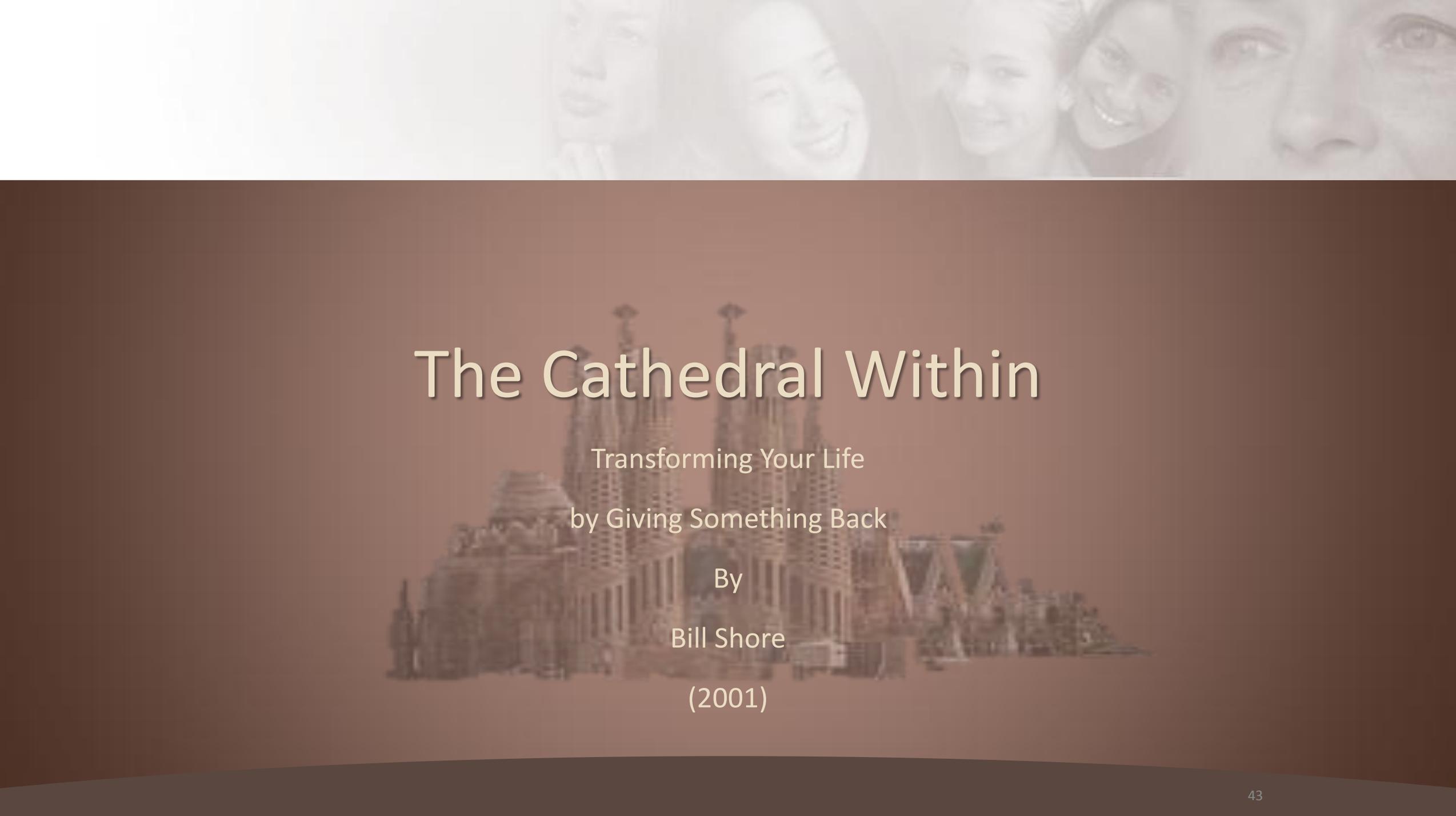
# How to Support Non-Offending Caregivers

- Treat them with Respect
- Communicate Effectively
- Validate their Reality
- Advocate for them
- Empower them
- Educate them about the process



# Support Con't

- Cultural Considerations
- Help them know their options
- Help them Identify Support Systems
- Tell ways to safeguard their child's future
- Work Collaboratively with Them & Other Professionals



# The Cathedral Within

Transforming Your Life  
by Giving Something Back

By  
Bill Shore  
(2001)









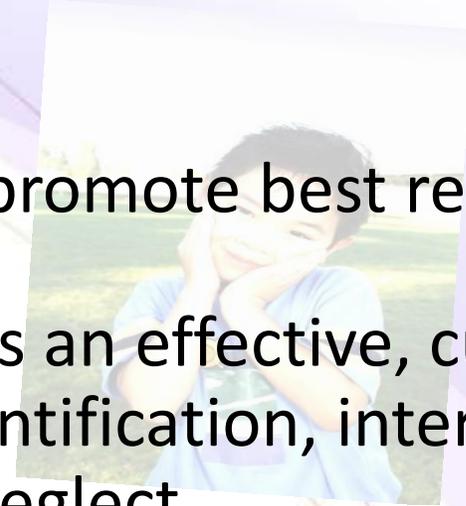
# Interdisciplinary Collaboration is IMPORTANT:

- Before by training together and utilizing MDT
- From the beginning of the investigation [forensic interviewing] – to the middle [treatment services] – to the end – [testifying in court] – essentially TROUGHOUT the entire case!
- How clients experience trauma depends on how well we work together.
- View Caregivers and Children as part of TEAM

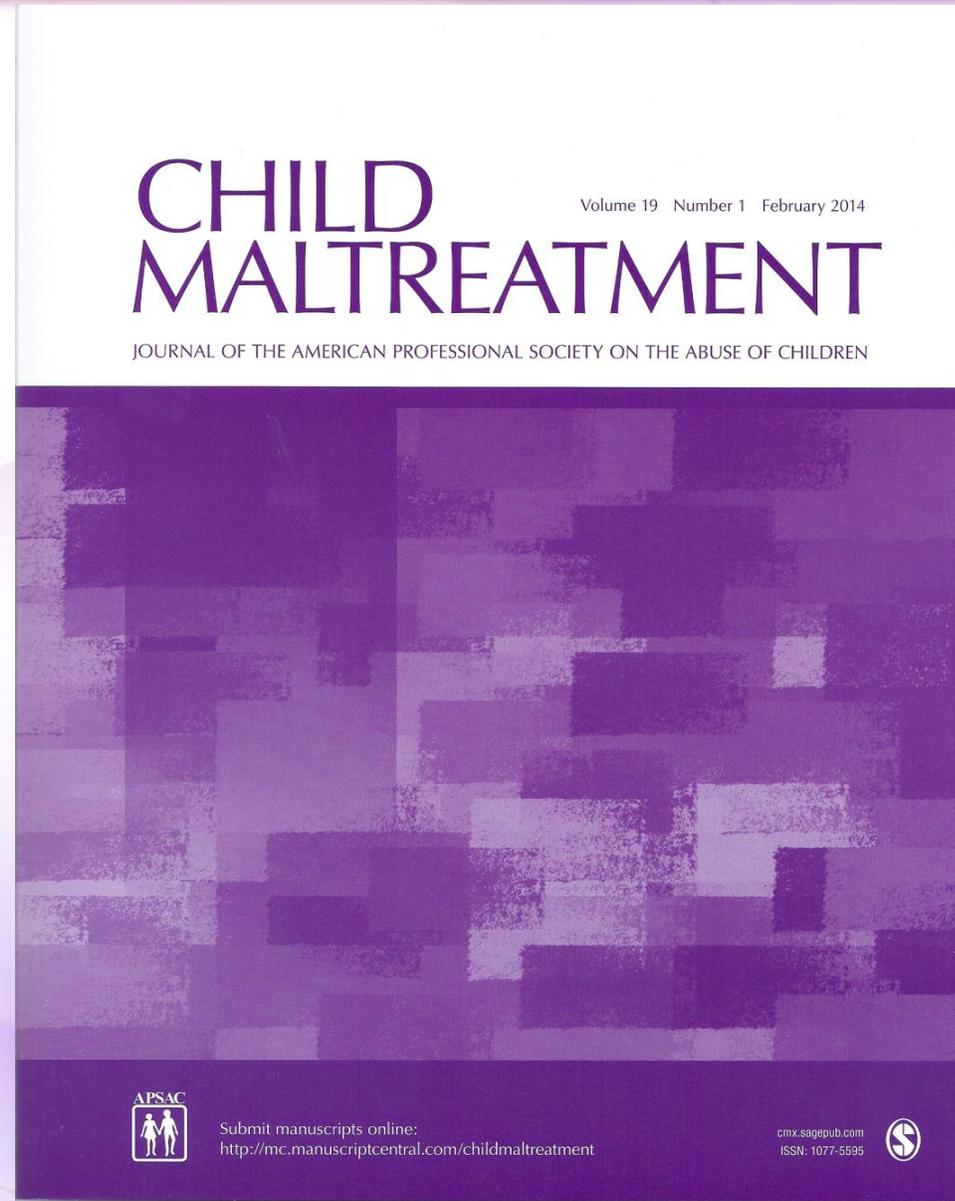


# American Professional Society on the Abuse of Children

- APSAC is committed to:
  - Connecting professionals across disciplines to promote best response
  - Providing professional education that promotes an effective, culturally sensitive, and interdisciplinary approach to identification, intervention, treatment and prevention of child abuse and neglect
  - Ensuring that American's public policy concerning child maltreatment is well informed and constructive
  - Promoting research and guidelines to inform best practice



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**Trends in Children's Hospital-Based Child Abuse Medical Services: 2012 Survey Findings**

Nancy Hanson, BA

The author discusses the development of child abuse medical services at children's hospitals and summarizes findings from the 2012 child abuse medical survey. Nearly all children's hospitals provide services to maltreated children, and a quarter house a children's advocacy center, but the depth and scope of services vary. The 2012 survey also provides valuable information on persistent challenges for child protection teams and "critical services" training, education, and prevention in the community.

**The National Local Community Conference on Child Abuse**

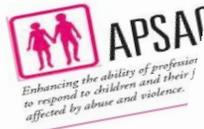
Karen Farst, PhD

The author reviews standards for child abuse medical services and provides information on staying current with the latest research.

**Peer Review**

Lori

The author discusses the importance of peer review in the publication process.



## Interviewing Victims and Suspected Perpetrators Who Are Reluctant to Talk

Michael E. Lamb, PhD, Irit Hershkowitz, PhD, and Thomas D. Lyon, JD, PhD

Most professionals know that many alleged victims do not disclose abuse when formally interviewed and that disclosure is affected by a variety of factors, among which the relationship between suspects and children appears to be especially important (see Pips, Lamb, Orbach, & Cederberg, 2007, for reviews). Children—especially boys and preschoolers—are hesitant to report abuse to parents and guardians, particularly when sexual abuse or physical abuse is suspected. For example, Pips, Lamb, Orbach, & Cederberg (2007) reported that only 38% of the preschoolers interviewed disclosed sexual abuse by a parent even when the allegations were independently substantiated by corroborative evidence. Indeed, only 12% of the preschool-aged boys included in Hershkowitz, Horowitz, and Lamb's (2005) analysis of Israeli national statistics disclosed sexual abuse when interviewed. Even though some nondisclosure by preschoolers may be due to immaturity rather than reluctance (Sjöberg & Lindblad, 2002), substantial evidence indicates that large percentages of older abused children will deny abuse as well (Pips, Lamb, Orbach, & Cederberg, 2007). Laboratory experiments have shown how easy it is to induce denials among children who have witnessed the transgression of others (Bottoms, Goodman, & Harris, 1999; Talwar, Lee, Bala, & Lindsay, 1989; Potkin, Schwarz-Kennedy, & Thomas, 2002; Ceci & Lichtenman, 1992; Pips & Wilson, 1994; Talwar, 2002; Ceci & Lichtenman, 1992; 2008; Lyon, Malloy, Quas, Bala, & Lindsay, 2004), or have been jointly implicated in wrongdoing (Lyon & Dorado, 2008; Lyon, Malloy, Quas, Bala, & Lindsay, 2008).

### Factors Affecting Child Behavior and Responsiveness in Interviews

In addition to characteristics of children or of child-suspect relationships, the quality of the interaction between children and forensic interviewers may profoundly affect whether or not victims disclose and how much information these children provide when they do. In a study exploring these children's views with children whose victimization had been independently verified, Hershkowitz, Orbach, Lamb, Sternberg, and Horowitz (2006) identified a pattern of escalating uncooperativeness and coercion. In a rapport-building pre-substantive phase, the children's initial uncooperativeness was clearly challenging for the interviewers, but interviewers' responses—in the form of intensive

questioning, uncooperativeness, and premature discussion of sensitive topics—were counterproductive. Specifically, the children who later failed to disclose abuse seemed to avoid establishing rapport with the interviewers early in the interview; they were less responsive to interviewers' questions than their disclosing peers and provided fewer personally meaningful details about sexual experiences when invited to do so. In response, interviewers were unresponsive and then attempted to explore the possibility that abuse had taken place by transitioning prematurely into the substantive phase. Interviewers also addressed fewer open-ended questions and fewer supportive comments to victims than to cooperative children. Hershkowitz et al. concluded that the interviewers' strategies were counterproductive because they did not address the children's emotional needs, interviewers should make increased efforts to establish rapport, and researchers recommended that, in such circumstances, interviewers should avoid shifting the focus to substantive issues until children appear comfortable and cooperative. Interviewers, they advised, should be more, rather than less, supportive of resistant children.

Because the nondisclosing children had started showing their reluctance early in the rapport-building phase, Hershkowitz et al. (2006) stressed the importance of identifying and addressing dynamics emerged. Subsequent research showed that interviewers expressed their initial reluctance nonverbally as well as verbally. Hershkowitz, Malloy, Lamb, Atabaki, & Spindler (2012), thereby providing interviewers with additional cues for identifying uncooperative interviewees. Although studies such as these show the operational importance of emotional factors affecting children's behavior and responsiveness in the interview context, researchers have based best practice guidelines such as the NICHD Protocol on date emphasized cognitive factors associated with children's memory retrieval and reporting in interview contexts. They have also paid much less attention to the motivational factors that may inhibit children's cooperativeness and informativeness.

Rapport-building is clearly important, but interviewers often fail to behave supportively when interviewing children who appear uncooperative. The question is this: Can these dynamics be changed? Fortunately the answer is "Yes" as shown in our recent studies, which we summarize in this article. In these studies, we have

### The Key to Indian Country: Lessons Learned From Front Line Professionals

in Alaska have reminded us that much of their population cannot be accessed by any road and that, in some instances, only a sled dog could reach a village.

Likewise, something as simple as preparing a child victim for court can be much more cumbersome in outlying areas. Those of us working at a national level must be much more vigilant in understanding unique characteristics of smaller, geographically diverse communities and willing to adapt our recommendations for national standards accordingly.

**Lesson #3: The Importance of Oral Tradition**

In one of our forensic interview training courses, students are required to take and pass an essay examination. In one class, several child protection professionals from Indian country shared the importance of oral communications in their culture. Instead of a taking written test, they asked to be questioned orally and through the telling of stories, they articulated how a forensic interview could be conducted. Although we had learned the importance of oral tradition as early as our college days, it was this concrete example that solidified the lesson for us.

**Lesson #4: The Importance of Sharing Materials in Advance**

Most of us who provide training to front line child protection professionals know it is important to share our slides and other materials with the local conference organizer to make copies for the local conference. This is vital for the success of the conference. Uniquely



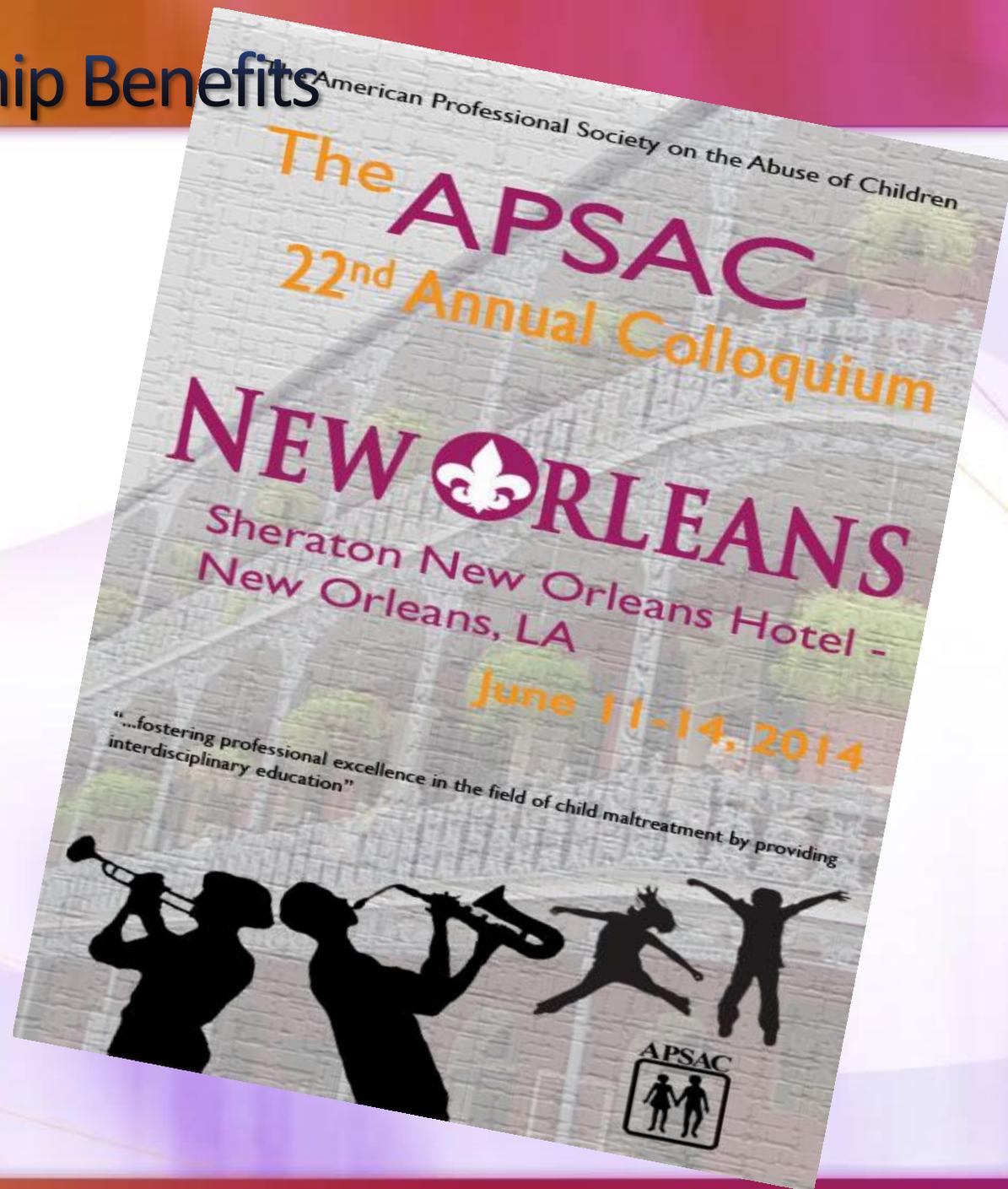
discusses the importance of spirituality to many abused children and how frequently offenders consciously distort the child's spirituality as a means of gaining power over the victim (Vieth, 2010). Therefore, it is not surprising when front line professionals ask presenters to address this topic. What we have learned from colleagues in Indian country, though, is that spirituality here is more diverse and often combines multiple traditions. Accordingly, it is important to understand the unique spiritual dynamics in the community where one is interacting. This happens only by asking questions and otherwise making a concerted, conscious effort to expand our cultural awareness.

### Lesson #6: The Importance of Recognizing Abilities

While training on a reservation, a doctor within the community approached one of us on a break and scolded us for the detail of the information we had been providing. According to this doctor, the local child protection professionals in Indian country lacked the skills to handle a complex case of child abuse. In giving these professionals would now attempt to do things that exceeded their capabilities. His was not a comment we had ever heard before, even when instructing off-reservation MDTI, many of whom also lack significant training on complex cases of child abuse.



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