

## RESIDENTIAL CHILD CARE WORKERS' ATTITUDES TOWARD ABUSIVE CAREGIVER-ADOLESCENT INTERACTIONS

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**ABSTRACT:** Residential child care workers' attitudes toward abusive parent-adolescent interactions were investigated using the Adolescent Abuse Inventory. Of the 65 residential child care workers that completed the inventory, 46 workers (71 percent) were categorized as low risk for potentially acting in an abusive manner and 19 (29 percent) were categorized as being high risk for potentially acting in an abusive manner. Further analyses revealed that gender, educational attainment, and years of experience in residential child care were not significantly associated with risk for maltreatment as measured by the Adolescent Abuse Inventory. Implications for staff selection and training are discussed.

### INTRODUCTION

The extent of child and adolescent maltreatment in residential facilities is difficult to estimate. Some researchers suggest that maltreatment of children and adolescents in out-of-home care is far more extensive than is commonly believed (Rindfleisch and Rabb, 1984). Given that many children and adolescents are placed in out-of-home care at least in part to remove them from potentially harmful childrearing practices and to provide a therapeutic environment, many are outraged to find that children and adolescents continue to be maltreated within these settings. A recent survey of executive directors of residential child care facilities in New York State found that many executive directors feel that one fundamental issue in preventing child and adolescent maltreatment in out-of-home care involves recruiting, training and retaining qualified staff (Dodge Reyome, 1990).

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Many people have grappled with the notion of what "qualified" means. Some have suggested that certain personality types might be best suited for residential child care (Wasmund and Tate, 1988; Mufson, 1986). Others have suggested certain life approaches make one more or less suited to work in the field of residential child care (Ross and Hoeltke, 1985). Another way to conceptualize the issue of what makes an effective child care worker would be to look at what an effective child care worker needs to be able to do. It appears that many of the activities that residential child care workers need to carry out effectively are similar to activities encountered in parenting children and adolescents. In structured interviews on the nature of child care work with 60 child care workers in British Columbia, Rathbun, Webster and Taylor (1983) found that child care workers list the following activities, among others, that comprise the role of child care worker: establishing and maintaining routine; providing physical and recreational activities; giving individual care; developing relationships; approaching tasks and activities from the child's point of view; being available to the child; disciplining the child; and providing an adult role model.

However, very few have applied what we know about differences in parenting and quality of familial care to quality of care in residential facilities. There is a substantial literature on parenting and child maltreatment which suggests that abusive parents when compared with nonabusive parents have unrealistic expectations for children, possess less knowledge about normal development and use less effective strategies when dealing with problem behaviors (Belsky and Vondra, 1989). A few researchers have already looked at potential for maltreatment in day care center workers and residential care workers with handicapped children from this angle (Atten and Milner, 1987; Jones, Joy and Martin, 1990). It is likely that factors similar to these that account for differences between abusive and nonabusive parents would also account for differences between abusive and nonabusive direct care residential staff. It is the intent of the present research project to:

1. discern whether there are differences in residential child care workers in regard to their attitudes toward abusive caregiver-adolescent interactions.
2. whether there is an association between various background variables (such as level of education and years of experience in residential child care) and residential child care workers' attitudes toward abusive interactions.

## METHOD

### Subjects

The participants in this study were 76 residential child care workers from three residential facilities in New York State. Of the 76 residential child care workers that participated, 24 workers were male (32 percent) and 51 workers were female (67 percent). The gender of one worker was undeter-

mined. One third of the participants reported having a high school diploma or a GED as the highest level of educational attainment and almost 60 percent reported having an associate's or bachelor's degree.

In regard to length of time in the field of child care, close to half of the sample (42 percent) reported that they had spent one to five years in the field. In terms of their day-to-day job duties, 59 percent reported that they spent 75–100 percent of their time at work in direct contact with children and adolescents and another 28 percent said that they spent 50–75 percent of their work day involved in direct care.

### Measures

In addition to reporting on background information as discussed above, each child care worker was asked to fill out the Adolescent Abuse Inventory. The Adolescent Abuse Inventory, as developed by Garbarino, Schellenbach and Sebes (1986), is comprised of 26 vignettes that describe potentially abusive and nonabusive parent-adolescent interactions to which the worker was asked to rate the appropriateness of the parent's actions and the likelihood that he/she would act in a similar manner. The following are scenarios taken directly from the three categories of abusive and neglectful interactions represented on the Adolescent Abuse Inventory:

*Hand-On Abuse:* "Sam came in drunk one night and began to argue with his mother. His father came in just as Sam yelled an obscene remark at his mother and his father then punched him.

*Hands-Off Abuse:* "Tom really wanted to buy a new radio for himself, but didn't have enough money. He decided to take some of the money his parents had saved. When Tom came home from school that day, his parents asked him if he had taken the money. He replied "no." Furious, Tom's parent told him to go to his room, and would not let him out for two days."

*Neglect:* "Ross's parents want to go away on a trip for a week but don't really want to pay a sitter to watch him. They know he's been hanging around with "a fast crowd lately." They decide to go away, anyway, and Ross invites several of his friends over to "party" with him while they are gone."

Answers to questions like these were used to derive a score that indicates level of risk for maltreatment. The Adolescent Abuse Inventory was utilized in this study because a majority of the children in residential care facilities are pre-adolescents or adolescents (Wurtele, Wilson & Prentice-Dunn, 1983; Thomas, 1990).

**RESULTS**

A risk score was computed for each child care worker using his/her responses to the Adolescent Abuse Inventory and each individual's score was categorized as low risk, medium-low risk, medium-high risk and high risk using the cutoff scores developed by Garbarino, Schellenbach and Sebes (1986) in their research with high risk parents. Risk scores could not be computed for eleven child care workers because they either did not completely fill out the Adolescent Abuse Inventory or did so in an erroneous fashion (i.e. circling two answers for the same question). The overall percentage of child care workers falling into each of the above stated risk categories is contained in Table 1.

TABLE 1: Distribution of Risk Scores on the AAI

	<u>Frequency</u>	<u>Percent</u>
Low Risk	32	49.23
Low-Medium Risk	14	21.54
High-Medium Risk	8	12.31
High Risk	11	16.92

As can be seen in Table 1, of the 65 residential child care workers that had completely filled out the Adolescent Abuse Inventory, slightly over two-thirds (71 percent) scored in the low risk and medium-low risk range on the inventory. However, close to one-third of the sample (29 percent) scored in the medium-high risk and high risk range.

Cross tabulations were performed and chi square statistics were computed to look at the degree of association between risk scores on the Adolescent Abuse Inventory and the following background variables: gender, level of educational attainment, and years of experience in the child care field. For the purposes of these analyses, the low risk and medium-low risk categories were combined into an overall low risk category and the medium-high risk and high risk categories were combined into an overall high risk category. As can be seen in Tables 2, 3, and 4, none of these variables were found to be significantly associated with risk scores from the Adolescent Abuse Inventory.

**TABLE 2: Distribution of Combined**

**AAI Risk Categories Across Gender**

<u>Risk Category</u>	<u>Gender</u>	
	<u>Male</u>	<u>Female</u>
Low	17	29
High	4	15
X <sup>2</sup> =1.56, p=.2124		

**TABLE 3: Distribution of Combined AAI Risk Categories Across Level of Educational Attainment**

**Level of Educational Attainment**

<u>Risk Category</u>	<u>High School/GED</u>	<u>AAS/BA</u>	<u>MA/PH.D.</u>	<u>Other</u>
Low	18	3	1	4
High	4	12	0	3
X <sup>2</sup> =2.772, p=.4281				

**TABLE 4: Distribution of Combined AAI Risk Categories Across Years of Experience in Residential Child Care**

**Years of Experience in Residential Child Care**

<u>Risk Category</u>	<u>5 years or less</u>	<u>6 years or more</u>
Low	24	22
High	8	0
X <sup>2</sup> =.3092, p=.5782		

## DISCUSSION AND IMPLICATIONS

The present study investigated residential child care workers' attitudes toward abusive interactions with adolescents. Close to one-third of the sample of residential child care workers that participated in the study responded to the Adolescent Abuse Inventory in such a manner that they would be considered at medium to high risk for potentially acting abusively with adolescents. This finding is particularly surprising given the seemingly straightforward, "obvious" manner in which the Adolescent Abuse Inventory is written (please refer to sample questions).

However, caution must be used when interpreting this finding. Clearly the inventory measures what people think they would do in a particular situation, not what they actually would do. Typically, there is only a moderate correlation between thinking and behaving. One major problem associated with scales designed to determine potential for maltreatment is the tendency to label as "high risk for abuse" people who actually never act in abusive ways and label as "low risk for abuse" people who actually act abusively (Milner, 1991). Second, the vignettes on the inventory were not designed to depict typical situations encountered in residential care and it may be that residential child care workers would be more sensitive to and report less potentially abusive attitudes when asked to consider scenarios taken directly from residential child care encounters.

It was also discovered that none of the background variables measured were significantly associated with risk for maltreatment as measured by the Adolescent Abuse Inventory. Therefore, the findings of this study suggest that being a college graduate and having worked in the field of residential child care for a considerable length of time does not make one less likely to respond in potentially abusive ways on the Adolescent Abuse Inventory.

Clearly more effort needs to be expended in the residential child care field to develop a comprehensive method to assess potential residential child care workers' attitudes toward working with children and adolescents prior to their assuming direct care positions and more effort needs to be expended in the area of training to provide current child care workers with appropriate guidelines and strategies for dealing with problematic situations which arise when interacting with children and adolescents. It was apparent from visual inspection of the "high risk" inventories that residential child care workers that were labeled high risk were more likely to respond that they were "uncertain" when asked what they thought about what the parent had done and they were more likely to suggest that they were "uncertain" about the likelihood that they would use a similar approach to the situation. It is possible that such uncertainty is due to a lack of knowledge of appropriate strategies for dealing with problematic situations with children and adolescents and the inability to discern what would lead to the most effective outcomes. Such uncertainty and indecision would be particularly troubling in a residential care environment where crises arise very quickly that require rapid and effective decision making.

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