

Majority of children who have contact with the child welfare system flourish in adulthood

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Most research on children involved with the child welfare system focuses on the negative consequences, such as depression and suicide. A

new study from University of Toronto researchers instead examined factors associated with resilience and flourishing among adults who had contact with the child welfare system as children.

"It is a testament to the amazing strength and resiliency of children in contact with the [child welfare](#) system that two-thirds of these individuals [64%] achieve excellent [mental health](#) as adults," said lead author Dr. Esme Fuller-Thomson, Professor at the University of Toronto's Factor-Inwentash Faculty of Social Work (FIFSW) and Director of the Institute for Life Course & Aging.

To classify as being in excellent mental health in adulthood: Individuals had to report 1) being happy or satisfied with life most days in the past month, 2) having high levels of social and psychological well-being in the past month, and 3) being free of [mental illness](#), suicidal thoughts and substance dependence in the past year.

Understanding the various factors that contribute to excellent mental health may be useful for tailoring interventions to enhance the long-term well-being of this vulnerable population.

Although the prevalence of excellent mental health among those with child welfare involvement is higher than was anticipated, it is still substantially lower than the prevalence among adults without this childhood experience [74%), emphasizing the importance of creating programs and interventions which work to improve mental health and overall quality of life for those with a history of child welfare contact.

Respondents who had a history of major depression or generalized anxiety disorder had much lower likelihood of being in optimal mental health, emphasizing the importance of providing timely and effective mental-health interventions for this population.

"Unfortunately, the survey did not have information on what interventions, if any, respondents received. However, there is substantial research indicating that [cognitive behavioral therapy](#) [CBT] reduces post-[traumatic stress disorder](#) and depressive and anxiety symptoms among the survivors of childhood abuse," said co-author Mahsima Nosrati-Inanlou, a recent Masters of Social Work (MSW) graduate of FIFSW.

Those who were socially isolated were particularly vulnerable to poor mental health. The odds of being in excellent mental health are more than five-fold for those with a confidant compared to those without.

"Recent research has identified promising interventions to promote independent living and better quality of life for foster children aging out of care. Such interventions include mentorship programs, programs designed to provide life skills training, transitional housing programs, and residential education programs. Overall, youth who received such interventions had better outcomes than those who had not, including a lower incidence of homelessness, greater economic stability due to higher employment rates and financial training, and higher quality of life," reported co-author Alex Sellors a recent MSW graduate of FIFSW.

Not surprisingly, individuals who reported the most types of childhood adversities were least likely to be in optimal mental health. Only 29% of those who reported experiencing all three types of childhood adversities investigated (childhood [sexual abuse](#), childhood physical abuse and chronic parental domestic violence) were in flourishing mental health.

Respondents who had chronic pain were only half as likely to be in excellent mental health compared to those who were free of chronic pain. "It is important that health and social-service professionals insure that those with a history of contact with the child welfare system have their [chronic pain](#) conditions addressed," suggested Andie MacNeil a

recent MSW graduate of FIFSW.

The study, published online ahead of print this week in *Psychiatry Research* was based upon data from the nationally representative Canadian Community Health Survey—Mental Health. A subsample of 732 adults who reported that they had contact with the child welfare system during their childhood was compared with 20,410 respondents who did not have interactions with the child welfare system in their youth. A major limitation of the study is that the survey could not determine the level of child welfare services received, which could range from an unsubstantiated investigation to foster care placement. Nor could the study determine the severity or duration of the childhood maltreatment experienced.

"By expanding our research focus from the devastating consequences of adverse [childhood](#) experiences among those in contact with the [child welfare system](#) to factors associated with achieving optimal mental health in adulthood, we hope to design effective interventions to help ever more people flourish," said Fuller-Thomson.

More information: Esme Fuller-Thomson et al, Flourishing mental health among adults with child welfare contact during childhood: Findings from a nationally representative Canadian survey, *Psychiatry Research* (2022). [DOI: 10.1016/j.psychres.2022.114660](https://doi.org/10.1016/j.psychres.2022.114660)

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