Commentary

Advances in Understanding Intergenerational Transmission of Parenting Practices and the Role of Safe, Stable, and Nurturing Relationships: Comments on a Promising Approach, Practical Application, and Some Cautions

It was almost 30 years ago that I first began focusing my research efforts on understanding the antecedents and consequences of child abuse and neglect. Those of us interested in providing an empirical foundation for preventive and ameliorative interventions were met with statements from federal funding agencies as well as scholars [1], challenging us to update the research base in this relatively new interdisciplinary field because the empirical work was considered to be severely limited, owing in large part to the reliance on cross-sectional designs involving poorly defined constructs of the major variables of interest (i.e., maltreatment).

In this historical context, my initial reaction when reading the introduction [2] to this special series of papers was one of pride—maltreatment researchers have not only met the challenge, but in some respects are now providing other fields with a model for how to address important research questions. Whereas multisite coordinated projects (e.g., using similar methods) have been developed to address a variety of health issues, including attempts to identify the antecedents and consequences of maltreatment [3], the current approach involves the identification of appropriate existing datasets that might help to inform specific efforts to break the cycle of abuse and neglect (i.e., intergenerational transmission). This post hoc identification of such longitudinal datasets is encouraging, both because I realized how far the maltreatment field has come in the past 30 years, and because it demonstrates a method that promises to continue to advance the field in the future. Although I am encouraged, and see the many potential advantages of having an interested agency or group identify potentially useful datasets and facilitate (i.e., support) their coordinated use by teams of researchers to address a specific gap in our empirical knowledge, the approach raises some questions and concerns. Specifically, this recreates a tenuous and potentially compromising relationship that can exist between advocacy and hypothesis testing. Although I would not argue that this relationship precludes such sponsored collaborative efforts, I would urge transparency and caution when engaging in such activities. First, caution requires recognizing the limitations of each sponsored study. In the current series of research reports, each team did a commendable job of identifying individual study limitations resulting from sampling and measurement issues [4–7]. The critical next step, which is determining the significance or applicability of the findings, must take into account these limitations, both within each study as well as across studies when combining them in a meta-analysis [8]. That is, the estimated effect sizes from a meta-analysis as well as their practical importance are limited by the quality of the studies included.

As the authors of the meta-analytic paper noted [8], some of the limitations within studies (e.g., specific restricted samples, variety of methods used to assess relevant variables) may actually lead to greater confidence in the overall effects that are observed as a result of increased external validity. Nevertheless, statistical significance in the individual studies, as well as the overall effect size resulting from the meta-analysis, must be evaluated in terms of their substantive or clinical significance (i.e., the degree to which they can inform prevention and practice). It is at this point that advocacy may come to dominate the interpretation of empirical findings (e.g., overstate their significance). For example, I agree that the four studies presented along with the meta-analysis provide support for targeting parents who have been abused and neglected, in an effort to prevent them from exposing their children to harsh disciplinary practices and possibly maltreatment (there is evidence of intergenerational transmission of parenting practices). It might also be useful to continue to explore the benefits of promoting the development of safe, stable, and nurturing relationships (SSNRs) in this targeted population. These general conclusions may be warranted, but a number of cautions should be added to those already identified in the preceding papers.

The first cautionary note relates to the outcome of interest, which is maltreatment. Whereas the focus of the introductory review [1] was on the intergenerational transmission of maltreatment, the individual papers assessed parent histories of finite [4], and subsequent child exposure to harsh disciplinary practices [5,6], parent reports that led to a determination by clinical professionals that maltreatment was probable or definite [4], and official reports [7]. The different degrees or levels of maltreatment severity that are likely related to these different methods of measurement may increase the generalizability of the overall effect [8], but they also serve to obscure attempts to establish the clinical significance of the findings. That is, should we be as concerned about the intergenerational transmission of harsh disciplinary practices as we are about substantiated maltreatment that has been related to a myriad of short- and long-term
negative consequences [9]? This range of outcomes measured also raises questions about the practical significance of the SSNR moderation effect size of .17 reported by Schofield and colleagues [8]. Although this effect size could be considered small, I am inclined to argue that it is clinically important if we are looking at maltreatment, given the co-occurrence of multiple adversities and its short- and long-term impact, but I would be hard-pressed to make that same argument when the outcome we are seeking to prevent is some indication of harsh discipline. Given the small number of studies, it was not possible to assess whether the relationship between SSNRs and intergenerational transmission of maltreatment versus harsh discipline might vary, but that is also a possibility (i.e., there is a curvilinear relationship between early adversities and problem responses to subsequent stressors [10], such that SSNRs are more likely to serve a protective function when moderate levels of adversity exist).

The second cautionary note relates to the potential moderator or protective factor that would be the target of preventive interventions (the SSNRs). I agree that the current findings support the focus of additional work on developing SSNRs in general, but much is still unknown. As noted, the studies only begin to examine different types of SSNRs, their timing, and their relationship to parenting practices. In any case, establishing the moderating or protective effects of SSNRs will ultimately have to wait for the results of preventive intervention evaluation studies, such as randomized clinical trials. In the meantime, more thought needs to go into how we conceptualize (and operationalize) SSNRs, their relationship to other potential protective factors that might be targeted in a preventive intervention (e.g., those focusing on characteristics of the individual parent), and how to use this conceptual base along with empirical findings to adapt existing programs (e.g., Triple-P, PICT) or to design other feasible interventions that can be tested. The important caution here is that SSNRs are likely only one source of potential protective factors. Additional work on how to operationalize them is needed, and we must continue to search for other potential protective factors. We may find that qualitative methods, especially in combination with quantitative approaches, may be useful in these efforts—some hint of this is offered in the analysis of the Lehigh Study by Herrenkohl and colleagues [6], as well as our experiences attempting to describe the lives of youth who entered foster care at an early age [11].

The current series of papers provides an example of a potentially beneficial approach to using available datasets to address important research questions, such as whether there is intergenerational transmission of maltreatment and what factors might disrupt continuity if it is observed. Although pre-selecting only longitudinal datasets is desirable, each dataset has its limitation. These limitations need to be recognized when interpreting the results of each study as well as any resultant meta-analysis. This is especially critical when attempting to identify the practical implications of findings that come from a focused series of studies that were specifically contracted to address the appropriateness of a federal agency’s prevention priorities [12]. While noting the need to be cautious when interpreting the current findings, it can be concluded that continuing efforts to break the cycle of negative parenting by developing SSNRs may be warranted. However, these efforts require better definitions of these relationships, when they might be targeted, and how other potential protective factors can be incorporated into preventive interventions that are subsequently evaluated.

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References