

## Supplementary Online Content

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**eAppendix 1.** Recruitment and Classification Procedures

**eAppendix 2.** Procedure

**eTable.** Number of Attendees

This supplementary material has been provided by the authors to give readers additional information about their work.

## **eAppendix 1. Recruitment and Classification Procedures**

Parents of all maltreated and nonmaltreated children provided informed consent for their child's participation, as well as consent for examination of any Department of Human Services (DHS) records pertaining to the family. The research was approved by the Research Subjects Review Board of the University of Rochester. Children in the maltreated group had been identified by the county DHS as having experienced child abuse and/or neglect, and the sample was representative of the children in families receiving services from the DHS. A recruitment liaison from DHS contacted eligible maltreating families, explained the study, and if parents were interested, then their names were released to the project team for recruitment. Families were free to choose whether or not to participate. Comprehensive searches of DHS records were completed, and maltreatment information was coded utilizing operational criteria from maltreatment nosology specified in the *Maltreatment Classification System* (MCS<sup>1</sup>), as discussed below.

Consistent with national demographic characteristics of maltreating families (National Incidence Study – NIS-4<sup>2</sup>), the maltreated children were predominantly from low socioeconomic status families. Consequently, demographically comparable nonmaltreated children were recruited from families receiving Temporary Assistance for Needy Families (TANF). A DHS recruitment liaison contacted eligible nonmaltreating families, described the project, and if interested, parents signed a release for their names to be given to the project for recruitment. DHS record searches were completed for these families to verify the absence of any record of child maltreatment. Trained research assistants also interviewed mothers of children recruited for the nonmaltreatment group to confirm a lack of DHS involvement and prior maltreatment experiences. Subsequently, record searches were conducted in the year following camp attendance to verify that all available information had been accessed. Only children from families without any history of documented abuse or neglect were retained in the nonmaltreatment group. In addition, families who had received preventive services through DHS due to concerns over risk for maltreatment were excluded from the sample to reduce the potential for unidentified maltreatment existing within this group.

The MCS is a reliable and valid method for classifying maltreatment<sup>3-5</sup> that utilizes DHS records detailing investigations and findings involving maltreatment in identified families over time. Rather than relying on official designations and case dispositions, the MCS codes all available information from DHS records, making independent determinations of maltreatment experiences. Based on operational criteria, the MCS designates all of the subtypes of maltreatment children have experienced (i.e., neglect, emotional maltreatment, physical abuse, sexual abuse). Coding of the DHS records was conducted by trained research assistants, doctoral students, and clinical psychologists. Coders were required to meet acceptable reliability with criterion standards before coding actual records for the study; weighted  $\kappa$ 's with the criterion ranged from .86 to .98. Reliabilities ( $\kappa$ 's) for the presence vs. absence of maltreatment subtypes ranged from .90 to 1.00.

In terms of the subtypes of maltreatment, *neglect* involves failure to provide for the child's basic physical needs for adequate food, clothing, shelter, and medical treatment. In addition to inadequate attention to physical needs, forms of this subtype include lack of supervision, moral-legal neglect, and education neglect. *Emotional maltreatment* involves extreme thwarting of children's basic emotional needs for psychological safety and security, acceptance and self-esteem, and age-appropriate autonomy. Examples of emotional maltreatment of increasing severity include belittling and ridiculing the child, extreme negativity and hostility, exposure to severe marital violence, abandoning the child, and suicidal or homicidal threats. *Physical abuse* involves the non-accidental infliction of physical injury on the child (e.g., bruises, welts, burns, choking, broken bones). Injuries range from minor and temporary to permanently disfiguring. Finally, *sexual abuse* involves attempted or actual sexual contact between the child and caregiver for purposes of the caregiver's sexual satisfaction or financial benefit. Events range from exposure to pornography or adult sexual activity, to sexual touching and fondling, to forced intercourse with the child.

Children in the maltreatment group all had documented histories of abuse and/or neglect. Among the maltreated children, 79% had experienced neglect, 61% had experienced emotional maltreatment, 34% had experienced physical abuse, and 10% had experienced sexual abuse. As is typical in maltreated populations,<sup>3,6,7</sup> the majority of

children had experienced multiple subtypes of maltreatment. Specifically, 60% of the maltreated children had experienced two or more maltreatment subtypes.

## eReferences

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## **eAppendix 2. Procedure**

Children attended a week-long day camp program and participated in research assessments. At the camp, children were assigned to groups of eight to ten same-age and same-sex peers; half of the children assigned to each group were maltreated. Each group was conducted by three trained camp counselors, who were unaware of the maltreatment status of children and the hypotheses of the study. Camp lasted 7 hrs/day for five days, providing 35 hours of interaction between children and counselors. In addition to the recreational activities, after providing assent, children participated in various research assessments (see Cicchetti & Manly, 1990, for detailed descriptions of camp procedures). Trained research assistants, who also were unaware of research hypotheses and maltreatment status, conducted individual research sessions with children, in which questionnaires and other research measures were administered. Clinical consultation and intervention occurred if any concerns over danger to self or others emerged during research sessions. At the end of the week, the counselors, who had been trained extensively for two weeks prior to the camp, also completed assessment measures on individual children, based on their observations and interactions with children in their respective groups.

**eTable. Number of Attendees**

Year of attendance	Number of participants	Percent of total participants	Total number of camp attendees
1986	97	4.2	111
1987	141	6.2	242
1988	3	0.1	194
1989	53	2.3	196
1990	65	2.8	215
1991	62	2.7	223
1992	64	2.8	246
1993	56	2.4	188
1994	67	2.9	261
1995	52	2.3	245
1996	59	2.6	209
1997	49	2.1	223
1998	70	3.1	250
1999	45	2	208
2000	25	1.1	217
2001	67	2.9	196
2002	69	3	224
2003	78	3.4	247
2004	166	7.2	209
2005	157	6.8	157
2006	121	5.3	121
2007	168	7.3	168
2009	231	10.1	231
2010	62	2.7	242
2011	213	9.3	263
2012	52	2.3	213
<b>Total</b>	<b>2292</b>	<b>100</b>	