Grades for the Adequacy and Accuracy of Coverage of Child Maltreatment (CM) in 10 Top-selling Abnormal Psychology Textbooks

Based on:

Note: The three textbooks that received consistently highest ratings and were found to have the fewest weaknesses are highlighted in yellow below.

<table>
<thead>
<tr>
<th>Author(s)</th>
<th>Year Published</th>
<th>DSM Version*</th>
<th>Summary of Findings</th>
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</table>
| Barlow & Durand       | 2012           | DSM-IV-TR    | • Consistently poor ranking for mentions of child maltreatment (CM) (rank = 8), CM citations (rank = 8), and CM links with psychological disorders (rank = 6).
|                       |                |              | • Fails to present research documenting that recovered memory of CM is as accurate as is continuously recalled CM (1-4).
|                       |                |              | • Fails to present research showing that “recovered memory” patients scored lower on suggestibility than did a psychiatric control group (5).
|                       |                |              | • Fails to present studies that have found corroborating evidence of severe CM in individuals with dissociative identity disorder (DID) (6-10).
|                       |                |              | • Only text to discuss the False Memory Syndrome Foundation; describes it as a group whose goal it is to educate the public and professionals about “false memories” of child abuse. |
| Beidel, Bulik, & Stanley | 2014          | DSM-5        | • Average ranking for CM mentions (rank = 5) and CM citations (rank = 5), and poor with CM links (rank = 8).
|                       |                |              | • Presents the second lowest number of psychological disorders (N = 6) that are linked to CM.
|                       |                |              | • Fails to present research documenting that recovered memory of CM is as accurate as is continuously recalled memories of CM (1-4). |


Ten popular abnormal psychology textbooks were coded using three indices:
(a) the number of times a type of child maltreatment [CM] (i.e., child abuse, CSA, child physical abuse, child emotional/verbal/psychological abuse, childhood trauma, neglect, CM, and inconsistent or harsh parenting) was mentioned, hereafter referred to as CM Mentions,
(b) the number of psychological disorders linked to CM, hereafter referred to as Link Mentions, and
(c) the number of research citations about CM, hereafter referred to as CM citations.
Strong intra-class correlation coefficients were found between raters on the three indices (ICCs ranged from 0.84 – 0.94, p < .01). The books were ranked across the three indices; lower scores indicate better performance compared to other textbooks.
<table>
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<th>Notes</th>
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| Butcher, Mineka, & Hooley           | 2013 | DSM-IV-TR   | • Dedicates 5 pages to reviewing the recovered memory controversy, yet the authors do not equally present both sides of the controversy.  
• Authors contend that some theorists conclude that anyone who experiences dissociative symptoms must have been abused, yet do not substantiate this claim, which is contradictory to theories of dissociation articulated by leading dissociation experts (11, 12).  
• Fails to present studies that have found corroborating evidence of severe CM in individuals with dissociative identity disorder (DID) (6-10).  
• Fails to present studies that show that treatment of DID is associated with consistent improvements in symptoms and functioning (13-18).  
• Inaccurately claims that dissociative identity disorder (DID) is rare. This is not substantiated by research (19-25).  

| Comer                               | 2014 | DSM-5       | • Consistently poor ranking for mentions of child maltreatment (CM) (rank = 7) and CM links with psychological disorders (rank = 7), although high on CM citations (rank = 2).  
• Emphasizes controversial cases related to CM at the expense of informing students about the prevalence, impact and treatment of CM (e.g., dedicated 19 sentences on the Sybil case).  
• Some readers may be insulted by a joke about repression, particularly if they have experienced CM. |

| Kring, Johnson, Davison, & Neale    | 2014 | DSM-5       | • Consistently very good ranking for mentions of CM (rank = 2), for CM citations (rank = 3) and CM links with psychological disorders (rank = 3).  
• Fails to review most of the research showing that treatment of DD is associated with consistent improvements in symptoms and functioning (13-18, 27). States that dissociative disorders (DD) treatment has potentially negative effects and references treatment approaches that are not advocated by DD experts (e.g., “facilitated communication”) (28, 29).  
• Discusses controversial meta-analysis about child sexual abuse (30) without adequately... |
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<th>Strengths/Discussions</th>
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| Lyons & Martin | 2014 | DSM-5 | • Consistent rankings: excellent for CM link mentions (rank = 1), but fair for CM mentions (rank = 6) and poor for CM citations (rank = 9).
• Discusses controversial meta-analysis about child sexual abuse (30) without adequately discussing the study’s methodological weaknesses and wide condemnation of the authors’ conclusions (31). |

**Awarded the "Best Coverage of Child Maltreatment in Undergraduate Psychology Textbooks Award" by Division 56 of APA:**

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| Nevid, Rathus, & Greene | 2014 | DSM-5 | • Presents the largest number of psychological disorders ($N = 13$) that are linked to CM.
• Excellent section dedicated to presenting information about CM.
• Consistent very good ranking for mentions of CM (rank = 3) and CM links (rank = 2), but only fair on CM citations (rank = 7).
• This is the only textbook that reviews several studies that show that DID treatment is associated with consistent improvements in symptoms and functioning (13-18, 27). |
| Oltmanns & Emery | 2012 | DSM-IV-TR | • Consistent average ranking for mentions of CM (rank = 4), CM citations (rank = 4) and CM links (rank = 4).
• Emphasizes controversies about CM at the expense of informing students about the links between CM and psychopathology.
• Fails to present research documenting that recovered memory of CM is as accurate as is continuously recalled memories of CM (1-4).
• Presents statements about the long-term impact of CM that are not well substantiated by research. Example: Authors state that studies of the long-term effects of CM find little evidence of a consistent link with psychopathology (e.g., dissociation). Considerable research contradicts this opinion (11, 32-39).
• This is the only book that recognizes that Munchausen-by-proxy is a form of child abuse.
• Inaccurately claims that DID is rare. This is not substantiated by research (19-25).
• Fails to present studies that have found corroborating evidence of severe CM in individuals with DID (6-10) while emphasizing the controversy about CM being the cause of DID.
• States there is no systematic research on the effectiveness of any treatment for DD, despite there being many published studies and a meta-analysis about DD treatment (e.g., (13-15, 17, 27, 40, 41)). |
<table>
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<th>Rosenberg &amp; Kosslyn</th>
<th>2011</th>
<th>DSM-IV-TR</th>
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<td>Has a section dedicated to presenting information about CM.</td>
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<td>Empirically sound presentation of statistics about the prevalence and impact of CM.</td>
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<tr>
<td>Consistent very poor ranking for CM mentions (rank = 10) and CM links (rank = 9) but fair on CM citations (rank = 6).</td>
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<tr>
<td>Cites research documenting corroborated history of severe CM in DID patients (6-10).</td>
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<td>This is the one of the few texts that presents the impact of CM on attachment and the stress response system.</td>
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<th>Whitbourne &amp; Halgin</th>
<th>2014</th>
<th>DSM-5</th>
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<tbody>
<tr>
<td>Consistent very poor ranking for CM mentions (rank = 9), CM citations (rank = 10) and CM links (rank = 10).</td>
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<td>Presents the lowest number of psychological disorders (N = 3) that are linked to CM.</td>
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<td>Almost no discussion of CM.</td>
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DSM-IV-TR = Diagnostic and Statistical Manual of Mental Disorders, Edition IV, Text Revision.
DSM-5 = Diagnostic and Statistical Manual of Mental Disorders, Edition 5.

**References**

1. Dalenberg C. Recovered memory and the Daubert criteria: recovered memory as professionally tested, peer reviewed, and accepted in the relevant scientific community. Trauma, Violence & Abuse. 2006;7:274-310.


33. Dalenberg C, Carlson EB. Dissociation in Posttraumatic Stress Disorder Part II: How theoretical models fit the empirical evidence and recommendations for modifying the diagnostic criteria for PTSD. Psychological Trauma: Theory, Research, Practice, and Policy. 2012.


Child maltreatment is the abuse and neglect that occurs to children under 18 years of age. It includes all types of physical and/or emotional ill-treatment, sexual abuse, neglect, negligence and commercial or other exploitation, which results in actual or potential harm to the childâ€™s health, survival, development or dignity in the context of a relationship of responsibility, trust or power. The type of child maltreatment studied; the coverage and quality of official statistics; the coverage and quality of surveys that request self-reports from victims, parents or caregivers. Having special needs, crying persistently or having abnormal physical features. Having an intellectual disability or neurological disorder. Identifying as or being identified as lesbian, gay, bisexual or transgender. To understand the relationship between childhood maltreatment and personality dimensions in suicide risk, our study aims to explore the role of self-criticism and dependency, two different pathological personality traits, as potential mediators of the link between different types of childhood maltreatment and suicide risk in young adults. For this purpose, 306 students from three Italian public universities were recruited. 2Department of Psychological, Health and Territorial Sciences, University of Chieti-Pescara, Chieti, Italy. 3Department of Languages and Educational Sciences, University of Calabria, Rende, Italy. 4Department of Psychology, Catholic University of Sacred Heart, Milan, Italy. This makes it evident that people being on the top of the food chain should take responsibility to prevent animals from becoming extinct. Another reason why our society should take action in order to help endangered species is that people themselves are culpable for the elimination of wildlife in some areas. Indeed, in our days, urban sprawl and deforestation ruin natural habitats for animals; moreover, air and land pollution makes their survival even more challenging. In these circumstances, humanity has no right to neglect the problem and refuse responsibility. In conclusion, although species The ninth edition of Abnormal Psychology in a Changing World was honored in 2015 by receiving the Best Coverage of Child Maltreatment in Undergraduate Psychology Textbooks award. The award was bestowed by Division 56 (Trauma) of the American Psychological Association in recognition of the textbookâ€™s outstanding coverage of traumatic disorders linked to childhood maltreatment. Dr. Nevid is also actively involved in a program of pedagogical research that focuses on helping students become more effective learners. Recent research in the field of child maltreatment has begun to shed new light on the emergence of health problems in children by emphasizing the responsiveness of developmental processes to children's environmental and biological contexts. Here, I highlight recent trends in the field with an emphasis on the effects of early life stress across multiple levels of developmental domains.