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Child maltreatment is a major public health issue, and the number of child maltreatment report cases has remained very high since the 1980s. Negative long-term consequences often follow maltreatment experiences in childhood. Consequently, risk and protective factors for those negative consequences should be examined by developing effective prevention strategies. During my PhD program, I have focused on studying protective and risk factors for negative adolescent health and mental health outcomes as a result of adverse childhood experiences. Additionally, I have been developing my work in the field of child welfare and child maltreatment prevention.

### Research Experience

My first doctoral project was writing a book chapter entitled “child maltreatment in the context of poverty and other forms of adversity” for the APSAC Handbook on Child Maltreatment 4<sup>th</sup> edition. My primary contribution was an exploration of environmental influences on child maltreatment and their relations to other family risk factors. I also participated in a study on the effects of poverty and resilience factors on youth mental health following childhood victimization, utilizing a population-representative study (Washington State 2010 Healthy Youth Survey). That study was published in *School Mental Health*.

In my general examination, I focused on examining the literature published between 1990 and 2019 on the effects of child maltreatment subtypes (physical, sexual, and emotional abuse, and neglect) on suicide ideation. This study, using systematic review and meta-analysis, found that all the maltreatment subtypes contributed to increased risk of suicide ideation, and no significant differences in magnitude of effects on suicidal ideation existed between each maltreatment subtype. The findings suggest that emotional abuse and neglect can be detrimental risk factors for suicide ideation, and therefore should receive more attention than currently given, along with other well-known violence-related risk factors such as physical and sexual abuse. This first authored-manuscript is in its final revision stage, and will soon be submitted to the journal *Suicide and Life-Threatening Behavior*.

To further investigate the trajectory between child maltreatment and suicide behavior, my dissertation focuses on empirically examining how different types, severity, and chronicity of child maltreatment and other risk/protective factors for suicide behavior lead to different probability of suicidal ideation and attempts. This project uses data from the 40-year longitudinal Lehigh study of child maltreatment, and the overall theoretical model was developed mainly based on Joiner’s Interpersonal Theory of Suicide and Klonsky’s 3-step Theory.

Aside from epidemiologic studies regarding child maltreatment, I have been involved in several child welfare related projects in the US and South Korea. I have worked with Casey Family Programs to conduct a systematic review on the effects of family resource center programs on child welfare outcomes

such as child maltreatment referrals, substantiations, and foster care entries. Since 2019, I have also participated in projects for vulnerable youth, led by the Korea Institute for Health and Social Affairs (KIHASA). In these projects, I have mainly conducted comparative reviews of cross-national differences (focusing on the US, the UK, and South Korea) of independent living programs for children and youth who leave foster care system. This year, I will be working with researchers in the KIHASA for implementation of a new database of research about transitional aged foster youth.

### **Future Directions**

As a short term goal, I will focus on identifying risk and protective factors for suicide among Black youth and populations who are/were involved in child welfare system in suicide because the suicide rates among those populations have been gradually increasing. In the long term, I would like to further develop my theoretical framework on the trajectory from child maltreatment to suicide based on additional empirical examinations of the framework. There are a number of important demographical, socio-environmental and physiological factors that should be examined further, such as gender, gender identity, race/ethnicity, poverty, neighborhood influences, and personal stress as measured by biomarkers. Along with that, I would also like to focus on examining the effectiveness of various programs and strategies that aim to alleviate or prevent child maltreatment and suicide in the US and South Korea.