Enuresis amongst Children in Foster Care: Prevalence and Risk Factors
Jacqueline Faison, Jeannie Hampton-Risucci, MegAnn McGinnis, Kimberly Trapasso, LEND Trainees
Jenean Castillo, LEND Faculty
Leadership Education in Neurodevelopmental and related Disabilities (LEND) Program
Westchester Institute for Human Development, University Center for Excellence in Developmental Disabilities and New York Medical College

Objectives
- Determine the prevalence of enuresis in children in foster care.
- Determine the risk factors associated with enuresis in children in foster care.
- Identify tips and strategies from the literature to better support foster care children, their foster and birth parents.

Methods
Participants: 51 foster children who received services through WIHD’s Child Welfare Services program
Study Design: Retrospective chart review of past clients
Analysis: Descriptive statistics, T-tests, Chi-square tests

Demographics
- Gender
  - Boys 47.1%
  - Girls 52.9%
- Race/Ethnicity
  - White 7.8%
  - Black 64.7%
  - Hispanic 23.5%
  - Multiracial 2%
  - Unknown 2%
- Age
  - Mean age in months (SD) 89.45 (21.32)

Enuresis: is the repeated voiding of urine into bed or clothes, whether involuntary or intentional.

Concerns Related to Enuresis
- Low self-esteem
- Increased anxiety
- Perplexity
- Humiliation
- Fear of detection
- A sense of immaturity
- Social isolation

Gap in literature
The etiology of enuresis is not fully understood. Furthermore, no research was found that looked at enuresis in foster care children.

Background
- Low self-esteem
- Increased anxiety
- Perplexity
- Humiliation
- Fear of detection
- A sense of immaturity
- Social isolation

Results
Table: Test Variable | Outcome (NS= not significant, S= significant)
- Age | NS; no differences were noted
- Gender | NS; enuresis is more prevalent among boys
- Placement | Test variable unable to be analyzed
- IQ | S; p <0.05, children with enuresis have significantly higher IQ scores
- Vineland | NS; children with enuresis have higher motor and socialization skills scores
- CBCL | NS; children with enuresis have higher withdrawn/depressed, anxiety/depressed and somatic complaints scores
- TSCC | S; p <0.05, children with enuresis are significantly more likely to underreport symptoms

Discussion
Child welfare providers should be aware that children in this sample who presented with enuresis had significantly higher IQs and were significantly more likely to underreport trauma symptoms. A trend was also found suggesting boys presented with more voiding issues than girls. Also, those with higher scores on the internalizing subscales of the CBCL reported more enuresis concerns. These findings will be used to compile tips and strategies to better support DSS, foster parents, and providers.