Resilience, commonly understood as the ability to maintain adaptive functioning in the face of adversity, has emerged as a salient entry point in the field of positive youth development. This study makes a unique contribution by exploring dimensions of resilience among adolescents in Uganda, examining associations between violence from different perpetrators and resilience, and testing whether sex moderates these relationships. Analyses are based on data from 3706 primary school students. Exploratory factor analysis (EFA) identified five factors underlying the construct of resilience: Emotional Support; Family Connectedness; School Connectedness; Social Assets; and Psychological Assets. We used regression analysis to investigate associations between these dependent variables, background characteristics, and experiences of violence (including exposure to intimate partner violence against female caregivers). Results reflect a complex relationship between violence and resilience, with patterns varying by perpetrator (e.g., teacher, peers, caregivers) and some evidence that the sex of the student moderates these dynamics. Overall, there is a consistently negative relationship between all violence measures and Psychological Assets. In addition, teacher violence is associated with lower resilience across factors and both caregiver violence and exposure to IPV are consistently associated with decreased Family Connectedness. These findings suggest that adolescents experiencing (and exposed to) violence from adults may be particularly vulnerable to internalizing and/or externalizing behaviors and withdrawal from the family. Findings point to preventing violence from teachers complemented with enhancing family relationships as promising avenues for resilience-strengthening interventions, and also emphasize the need to consider gendered strategies to ensure girls and boys benefit equally.

1. Introduction

In recent years, much of the discourse on promoting youth development has shifted from an emphasis on mitigating risks to a focus on nurturing strengths (Ager, 2013; Almedom & Glandon, 2007; Richardson, 2002). One of the ways this focus has been articulated is through a construct known as resilience – the ability of some individuals to adapt and maintain positive functioning in the face of significant adversity while others faced with similar difficulties experience negative outcomes (Luthar, Cicchetti, & Becker, 2000). Adolescence represents a pivotal life-stage focused on learning, exploration, identity consolidation and relationship building (Lippman et al., Lippman, Moore, & McIntosh, 2011). This period is also characterized by dynamic brain development, shaping many
of the cognitive and emotional patterns an individual will sustain in adulthood (Blakemore & Mills, 2014), thus providing an opportune moment to bolster resilience and build a foundation for life-long health and wellbeing. The potential to foster positive development among adolescents has been termed a “triple dividend,” as it can trigger immediate benefits, positive changes in future adult life and for future generations (Patton et al., 2016).

At the same time, adolescence presents a high potential for crisis and vulnerability to violence (Guedes, Bott, Garcia-Moreno, & Colombini, 2016). Risks such as experiencing sexual, physical or emotional violence, experimentation with drugs or alcohol, the onset of mental disorders, or engagement in risky sexual behaviors may be exacerbated by more structural forms of adversity (poverty and unemployment, discriminatory racial and gender norms, armed conflict and mass displacement, exposure to harmful practices, etc.) (Patton et al., 2016). Significant stress or trauma at a young age often triggers long-lasting consequences. For example, violence against children has been linked to a wide range of adverse outcomes extending into adulthood, including mental health problems and suicide (Norman et al., 2012; Thumann et al., 2016); poor reproductive health and substance abuse; (Norman et al., 2012; Pinheiro, 2006); neglect of medical care (Bair-Merritt, Blackstone, & Feudtner, 2006); anti-social behaviors (Smith, Ireland, & Thornberry 2005), low academic performance (Boden, Horwood, & Fergusson, 2007), as well as perpetration of violence against future generations (Amato, 2000; Fulu et al., 2017; Holt et al., 2008).

Theories of resilience offer conceptual models to understand how young people overcome adverse conditions as well as how practitioners can use this knowledge to improve strengths and build positive characteristics over the lifetime (Zolkoski & Bullock, 2012). While initial work on resilience in adolescence focused on personal qualities of individuals identified as resilient—such as self-esteem and autonomy—more recent literature conceptualizes resilience as a socio-ecological phenomenon (Brooks, 2006; Jaffee et al., 2007). Expanding analyses beyond individual characteristics to include family dynamics as well as the broader social and community environment underscores that availability of (and access to) developmentally supportive resources are integral components of an individual’s capacity to overcome adversity (Luthar et al., 2000; Ungar, 2011).

There currently exists a substantial body of literature examining the determinants of resilience among “at risk” youth, including some exploration of the potential relationships between the experience of violence, resilience, and negative outcomes. For instance, Salami (2010) found that the relationship between violence exposure and PTSD was moderated by features of resilience such as self-esteem and social support, such that adolescents who displayed higher resilience were less likely to exhibit PTSD after violence exposure. Other studies have shown that baseline resilience can improve outcomes following sexual abuse in children (Cacchetti & Toth, 2005; Daigeeault et al., 2013; Maniglio, 2009). Similarly, Kliwer, Murrelle, Mejia, Torres de G and Angold (2001) found that among children exposed to violence in the family, higher levels of emotional support were correlated with a decreased risk of internalizing emotional problems.

Collectively, this research has furthered our understanding of how resilience may help mitigate the effects of some forms of violence. However it is likely that the relationship between resilience and violence is complex and bi-directional—for example, less resilient youth may be at increased risk of violence, while the experience of violence itself may compromise an individual’s resilience. Who perpetrates violence (caregiver, teacher, peer, stranger, etc.) may also influence these dynamics; however such nuanced assessments are absent in the literature.

In addition, very few studies explore sex-based differences in resilience profiles or whether gender influences resilience outcomes (notable exceptions include Jaffee et al., 2007; Mcgloin & Widom, 2001; Sun & Stewart, 2007). In Uganda, similar to many other countries regionally and globally, cultural expectations and treatment of girls and boys are markedly different, reflecting pervasive gender inequality rooted in entrenched patriarchal beliefs (Kyeogombe et al., 2015; Wyrod, 2008). These gender differences may become even more pronounced in adolescence when attitudes towards gender roles and norms are frequently solidified (Barker, 2000; Kaufman, 2000), thus underscoring the salience of examining gender differences during this life-stage. While some resilience research includes sex as a covariate, to our knowledge no study has tested whether sex moderates the relationship between violence and resilience outcomes.

To date, much of the existing knowledge base on youth resilience is informed by research in high-income countries where structural, cultural and social conditions often differ from other contexts. Ungar (2004) emphasizes that specific features of resilience are, at least in part, social and culturally determined, and thus cannot be expected to remain constant across different settings. One of the few resilience-focused studies set in Uganda—which looks at the impacts of prosocial behaviors on depression and anxiety symptoms in Northern Uganda—similarly recognizes the need for locally defined concepts of distressing life conditions as well as potential protective factors (Haroz, Murray, Bolton, Betancourt, & Bass, 2015). The present analysis aims to address these gaps by exploring the dimensions of resilience, and associations with experiences of violence, among adolescents attending primary school in Luwero district, Uganda. In particular, we focus on the experience of various forms of violence, including exposure to intimate partner violence (IPV) against female caregivers, in order to better understand how specific experiences of violence are independently correlated with resilience outcomes. We analyze data separately for girls and boys and test empirically whether sex is a moderator on any of the significant associations observed. To our knowledge this is the first study to explicitly examine characteristics of adolescent resilience in the Ugandan general population (previous research in Uganda has looked at resilience among specific populations, such as child soldiers and children in post-conflict communities; Haroz et al. 2013; Klasen et al., 2010). Findings are expected to highlight dimensions of resilience that may be most salient among adolescents experiencing violence, thus pointing to promising areas for interventions to bolster resilience in contexts characterized by a high prevalence of VAC and other adversity.
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