Trauma resilience among youth in substitute care demonstrating sexual behavior problems

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Abstract

Objective: The purpose of this longitudinal study was to examine the relationship between several proposed protective factors and trauma symptoms among highly vulnerable youth in the child welfare system.

Methods: Participants were 142 youth identified with a sexual behavior problem and their caregivers. Two waves of data were collected for each participant an average of 18 months apart. Foster parents reported on perceived level of support from the child welfare agency, youth involvement in club activities, and perception of youths’ interpersonal and emotional competence. Youth provided self-reports of their sexual and physical abuse experiences, trauma symptoms at both time 1 and time 2, and ratings of parenting practices.

Results: Youth with higher rates of sexual abuse showed more negative affect and higher levels of sexual and non-sexual rumination at time 2, controlling for time 1 scores. Boys and youth who experienced better parenting practices displayed lower negative affect. Youth with higher levels of emotional and interpersonal competence showed lower levels of non-sexual rumination. Moderation analyses revealed that youth with more significant sexual abuse histories whose foster parents did not feel supported by their child welfare caseworkers had higher levels of sexually ruminative thoughts. Finally, the results revealed that only youth without sexual abuse histories experienced the benefits of club involvement in terms of lower sexual rumination scores.

Conclusions: This study demonstrated that youth with significant vulnerabilities can still exhibit a degree of protection from trauma symptomatology in the presence of a wide range of personal and social variables. These findings support the efforts of stakeholders to promote strengths at the level of the individual, family, and broader social network and community.

Keywords: Child welfare; Resilience; Maltreatment; Sexual behavior

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Introduction

Resilience among youth has been defined as the “dynamic process encompassing positive adaptation within the context of significant adversity” (Luthar, Cicchetti, & Becker, 2000). Characteristics that precipitate resilience are known as protective factors (Luthar et al., 2000; Luthar & Zigler, 1991; Werner, 1989). The resilience literature has evolved to posit three interacting factors that affect adaptation to adversity among youth: (1) qualities of the individual (e.g., temperament, intelligence), (2) qualities of the youth’s family (e.g., parenting practices), and (3) qualities of the youth’s broader social environment (e.g., involvement in extra-curricular activities) (Heller, Larrieu, D’Imperio, & Boris, 1999; Luthar et al., 2000). The current study explores the effects of a range of possible protective factors across a sample of high-risk youth in the child welfare system (substitute care) who are beginning to demonstrate atypical, exploitative, and/or developmentally premature sexual behavior, known as sexual behavior problems (Ryan, 1997).

Child maltreatment

Recent estimates indicate that over 800,000 children are abused or neglected annually in the U.S. (U.S. Department of Health and Human Services, Administration on Children, Youth and Families, 2006). Additional adversities often exist for maltreated youth entering the child welfare system (Levine, Doueck, Freeman, & Compaan, 1996; Roberts, 2002). Research indicates that the possibility of multiple foster care placements, disrupted medical and educational services, and the potential for abuse while in foster care all place youth in substitute care at risk of increased health, developmental, and psychological problems (Benedict, Zuravin, Somerfield, & Brandt, 1996; Newton, Litrownik, & Landsverk, 2000; Roberts, 1993).

The effects of maltreatment also have been studied, and the presence of trauma symptoms is common among survivors of abuse (e.g., McLeer, Deblinger, Henry, & Orvaschel, 1992; Wolfe, Sas, & Wekerle, 1994). These symptoms may also be a trigger for sexual behavior problems among some youth (Pithers, Cumming, Beal, Young, & Turner, 1989). Consequently, understanding the factors that worsen or decrease trauma symptoms among youth beginning to demonstrate sexual behavior problems could have critical implications for therapeutic intervention.

Resilience maltreated children

Maltreated children have received considerable attention in resilience studies; resilience is frequently couched in terms of recovery from trauma (Masten, 1994). Research methods employing strict criteria for resilience, such as the presence of better-than-average functioning across more than one assessment period, have led to low rates of resilience in the maltreated population (Bolger & Patterson, 2003; Cicchetti & Rogosch, 1997; Farber & Egeland, 1987). For example, Cicchetti and Rogosch (1997) followed 213 maltreated and non-maltreated low-income youth over 3 years. Among the maltreated population, only 1.5% of youth demonstrated high functioning over all three assessments, compared to 10% of youth in the non-maltreated sample. In light of these findings, research exploring resilience among maltreated children has focused more on the relative benefits of what are termed protective factors in this highly vulnerable population.

A protective factor is any positive attribute or strength that, when present, leads to relatively better outcomes over time; it, therefore, is critical to use longitudinal designs when studying protective factors.
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