Protective and risk effects of peer relations and social support on antisocial behaviour in adolescents from multi-problem milieus

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This article addresses the relation between antisocial behaviour and social resources in a 2-year longitudinal study of 100 high-risk adolescents in residential care. Problem behaviour was measured with the Externalizing Scale of the Youth Self Report. Social resources were recorded using semi-structured methods. Hierarchical regression analyses showed interactions suggesting that the same variables can fulfill risk as well as protective functions: clique membership and satisfaction with social support fostered behavioural continuity. In contrast, a lack of social embeddedness had a risk effect for well-adapted adolescents and a protective effect for the deviant ones. Social resources were more influential in girls. Theoretical implications and methodological problems are discussed.

Introduction

During the last decade, research on resilience and protective factors has strongly expanded in developmental psychopathology. Studies cover phenomena like successful development despite a high-risk status, the maintenance of competence under severe stress and recovery from trauma (Masten et al., 1990). Results have shown that there is a large variation in how children and adolescents respond to life stressors and adversities. Consequently, discovering the sources of vulnerability and resilience has become a very promising path toward better prevention by reducing the risk impact as well as strengthening the individual's resistance (Hurrelmann and Losel, 1990; Basic Behavioral Science Task Force, 1996).

A first period of research explored more or less idealized phenomena of "invulnerable" children (Anthony, 1974). However, it soon became evident that there is no absolute and quasi innate invulnerability but only a relative resistance that varies across time and circumstances and is an outcome of complex person-environment interactions (Rutter, 1985). A second phase of research investigated general protective factors. Studies covered a broad variety of risks like growing up in multi-problem families, with mentally ill parents, in families suffering from economic decline, in foster care institutions, in dangerous neighbourhoods, in war zones and so forth. Important protective factors proved to be (a) individual dispositions like temperament, cognitive competencies and positive self-related cognitions; (b) a good emotional climate and bond to a reference person within the family; and (c) positive relations and social support from outside the family (Werner and Smith, 1982; Garmezy, 1985). However, it also became clear that research on these factors is confronted with various problems (Rutter, 1990; Cicchetti and Garmezy, 1993; Luthar,
These particularly involve the definition and operationalization of the three key concepts resilience, risk factor and protective factor (Losel, 1994).

Resilience is conceptualized in different ways, for example, as the process of, capacity for, and outcome of successful adaptation despite threatening circumstances (Masten et al., 1990). The definition of a positive outcome varies substantially. For example, it is conceived as a more or less general state of well-being, as absence of specific illnesses and forms of psychopathology or as positive categories of social competence. However it is viewed, there is a lack of comparable, precise, and widely accepted criteria (e.g. Cicchetti and Garmezy, 1993; Masten and Coatsworth, 1995).

Risk factors are defined as variables that increase the probability of bad outcomes. A merely statistical concept of risk, however, provides no information about the underlying processes (e.g. Richters and Martinez, 1993). What we often interpret to be escape from risk may merely indicate that children had not really experienced major stressors and strains (Rutter, 1996). Frequently, it is not single risk factors but their cumulation that is particularly relevant for maladaptation (Rutter, 1979; Stattin et al., 1997).

Protective factors harbour the problem that they are often interpreted only as the opposite of risks (Masten and Garmezy, 1985). Variables may be described as either uniquely protective or uniquely risk-related or as simultaneously protective and risky depending on which side of the pole of a variable is considered. However, as Rutter (1987, 1990) has emphasized, protective factors should only be defined as moderators of outcome in relation to a specific risk constellation. Methodologically, one has to test for interaction effects, and these show a great need for further explication in developmental psychopathology (e.g. Farrington, 1997).

Although it can still be useful to assume some generally “protective” factors for healthy development when setting priorities in practice, resilience research has since entered into a third phase. Now, protective or risk functions of a variable are seen as depending on the individual constellation of other variables and the specific outcome under investigation. These functions may be limited to specific transitions or sensitive periods in development (Cicchetti and Richters, 1993). Different constellations and pathways can lead to similar outcomes, particularly when the two sexes are compared (Basic Behavioral Science Task Force, 1996; Cicchetti and Rogosch, 1996). Instead of emphasizing general protective factors, researchers now try to understand the specific protective mechanisms that underlie successful adaptation to specific risks for specific behavioural problems (Rutter, 1990).

Although there is a theoretical consensus on such a differential approach to the interplay of risk and protective factors, empirical knowledge is far from being conclusive (e.g. Cicchetti and Garmezy, 1993). This also holds for the relation between antisocial behaviour and social resources such as peer relations and social support. Ever since the early studies on differential association (Reiss and Rhodes, 1964), research has repeatedly shown that juvenile delinquency often takes place within groups and is reinforced by deviant peers (Elliott et al., 1985; Emler et al., 1987; Reiss and Farrington, 1991; Patterson et al., 1992). From a developmental perspective, however, it has to be asked whether association with deviant friends is a necessary precursor of delinquency (e.g. Keenan et al., 1995), or whether earlier antisocial behaviour leads to delinquent friends (e.g. Tremblay et al., 1995). Probably, there are different pathways in the development of antisocial behaviour that are associated with different influences stemming from the social network (Loeber, 1990; Moffitt, 1993; Dishion et al., 1994; Stattin and Magnusson, 1996). Early-onset, undersocialized-aggressive, and life-course-persistent antisociality seem to be caused
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