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What doesn't kill them doesn't make them stronger: Questioning our current notions of resilience

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ABSTRACT

This study expands on earlier analyses of the data generated by a cross-sectional study involving a random sample of 5149 middle-school students with a mean age of 14.5 years from four EU-countries (Austria, Germany, Slovenia, and Spain), in which every fourth respondent (23.0%) had been physically abused by his or her parents and almost every sixth respondent (17.3%) had witnessed physical spousal abuse. Contrary to expectations, some of these youths reported no engagement in peer violence and no symptoms of depression, which meant that they could be considered “resilient.” Given their precarious conditions, we inquired into how these young people functioned on other protective and risk indicators when compared to non-violence exposed peers. Using Bonferroni post-hoc tests, we conducted an analysis of variance based comparison of levels of risk and protective factors on three groups of violence and depression-resilient youth (low, middle and high family violence experience) with those participants who reported no family violence or abuse, no depression and no use of violence. The violence and depression-resilient participants reported significantly higher levels of aggression supportive beliefs, alcohol consumption, drug use, verbal aggression towards and from teachers and use of indirect aggression, along with lower levels of social and personal protective characteristics such as self-acceptance, emotional self-control, optimism about the future, and positive relations with parents and teachers, than students without family violence experiences. We therefore concluded that while some family violence exposed young people may not engage in violence or experience depression, this does not automatically imply an absence of other challenges and calls into question our current notions of resilience.

1. Introduction

Violence in all its contexts including the family is a global concern. In their introduction to the World Health Organization's manual for estimating the costs of violence, Butchart et al. (2008) state that, “Every day, children, women and men live inside their homes with the fear of violence by close family members” (p. v). A large body of existing research persuasively indicates that family violence, such as witnessing physical spousal abuse or experiencing physical abuse by parents is a common experience for adolescents in the European Union (EU) and the United States (US) (Hussey, Chang, & Kotch, 2006; Kassis et al., 2010). Almost 28% of

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adolescents in the US-National Longitudinal Study of Adolescent Health reported physical abuse by caregivers during childhood (Hussey et al., 2006). In Canada, a retrospective study involving a sample of 23,395 young adults aged 18 found that 32% of the respondents reported experiencing abuse as children (Afifi et al., 2014).

The negative impacts of family violence on the psychosocial functioning of children and youth are well documented (Maas, Herrenkohl, & Sousa, 2008; Wright, Tibbetts, & Daigle, 2008). As DeLisi et al., 2010 note in their extensive review of the research on family violence and maladaptive behavior that “there is considerable evidence that various forms of violence, abuse, depravity, and suffering that occur in early life environments engender maladaptive and antisocial behaviours across contexts.” Further, as Kitzmann, Gaylord, Holt, & Kenny, 2003 examination of 118 comparative studies published between 1978 and 2000 showed, there is a significant association between exposure to inter-paternal aggression and/or violence and to physical abuse and poor child outcomes. Witnessing inter-parental violence creates notable risks that are at least as problematic as direct parental abuse (Artz et al., 2014). These findings make a strong case for combining exposure to inter-paternal aggression and/or violence with exposure to physical abuse as a composite measure when examining the impact of abuse on children and youth. We are of course, not alone in noting this (Afifi et al., 2014; Bedi & Goddard, 2007).

Given that different forms of family violence often co-occur, many children who witness domestic violence also experience child abuse, which raises the probability of negative developmental outcomes for those children (Wood & Sommers, 2011). This is called the “double whammy” effect (see Moylan et al., 2010), or cumulative risk effect (Wright, Masten, & Narayan, 2013) and represents an increased risk for child abuse due to: (a) the presence of multiple risk factors; (b) multiple occurrences of the same risk factor; or (c) the accumulating effects of ongoing adversity. Thus, it has become critical to examine cumulative risk factors to more accurately predict and understand developmental outcomes of children and youth (Wright et al., 2013). However, despite numerous risk factors, some children, in some domains, function better than the others. These children, typically described as resilient, although no single agreed definition of resilience as yet exists.

Resilience has been described as process of achieving positive adjustment despite adversity (Luthar, Cicchetti, & Becker, 2000) but it has also been noted that determining the presence of resilience requires the setting of clear and agreed upon criteria that describe positive adjustment and good outcomes in the face of a specific risk like for example, family violence (Masten, 2014). Deciding on criteria can be very difficult, as numerous indicators can be taken into account. Some of these are external, for example, the absence of behavioral problems and the existence of age appropriate competences like school attendance and achievement, others take the form of internal indicators, like subjective wellbeing and good mental health (Masten & O’Dougherty Wright, 2010). Following Luthar et al. (2000), we argue that at-risk children must excel in multiple adjustment domains, whereas others require excellence in one salient sphere with at least average performance in other areas. Additionally, we state with Luthar and Cushing (1999) that optimal outcome indicators are those that are conceptually most relevant to the risk encountered.

In the particular case of violence, several internalizing (e.g. low self-esteem, social withdrawal, depression, and anxiety) and externalizing (e.g. aggression, violence, substance abuse, and delinquency) indicators have been highlighted by the literature as adverse psychosocial outcomes of direct victimization and/or exposure to family violence (Evans, Davies, & DiLillo, 2008; Margolin & Gordis, 2000; Moylan et al., 2010). Given these insights, using additional resilience indicators, e.g., substance-use, would blur the paper’s focus on specific outcomes as aggression and depression, although mixed results are found depending on several variables, namely, age, gender, or type of violence experienced (Sternberg, Baradaran, Abbott, Lamb, & Guterman, 2006). Still, the mechanisms for the violence cycle and the links between violence and depression are quite well known: Physical maltreatment by parents (Gilbert et al., 2009; Hussey et al., 2006) and witnessing violence or psychological aggression between parents (Kitzmann et al., 2003) are linked to both violent behavior and depression.

Also implicated and often connected to depression, are other mental and emotional process such as fears for one’s personal safety and security and negative self-perceptions and internalizing problems (Margolin & Gordis, 2000). As well, research has identified problems with social information processing, changes in neurotransmitter systems and the promotion of antisocial attitudes as directly connected to experiencing the cycle of violence (Wright, Turanovic, O’Neal, Morse, & Booth, 2016).

As we developed our inquiry, we noted that the results of studies that focused on comparisons of resilient and non-resilient youth are not consistent. Luthar (1991) found that resilient children were significantly more depressed and anxious than their peers with no family-violence experiences. On the other hand, Masten et al. (1999) found that resilient and non-violence and abuse exposed young people were similar on the majority of tested indicators such as IQ levels, experiences of parenting, and psychological well-being. In Masten’s study, the only difference that emerged was that resilient youth were less rule-abiding and experienced more negative affect than their non-violence and abuse exposed peers. We therefore looked further and examined the extant literature in multiple domains:

1.1. Individual risk and protective factors

In the current research on individual protective factors, a positive self-concept (Brownfield & Thompson, 2005; Leadbeater, Kupermine, Blatt, & Hertzog, 1999) and self-acceptance (Greenwald et al., 2002) are noted as protective factors for aggression and depression in adolescence. Further, as Brownfield and Thompson (2005) have shown, young people who have a more internalized locus of control (that is they see themselves as having a choice in how they behave and what their future holds) are likely to be more resilient to violence. Finally, an optimistic sense of the future has been shown to reduce levels of depression (Thomaes, Bushman, Stegge, & Olthof, 2008) and aggression (Hilt & Pollak, 2012) in violence exposed young people. It follows then that for adolescents, while a positive self-concept and optimism can act as protective factors for aggression and depression, a negative self-concept, and a lack of optimism can be understood as risks.

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