

# International Journal of Psychiatry Sciences www.psychiatryjournal.net

Online ISSN: 2664-925X, Print ISSN: 2664-9241

Received: 02-01-2021, Accepted: 16-01-2021, Published: 30-01-2021

Volume 3, Issue 1, 2021, Page No. 01-06

# Children undergoing adverse experiences: The psychological, familial and social protective factors

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#### **Abstract**

Protective factors are utilized by individuals who are facing unfavorable experiences, such as adverse childhood experiences, in order to alter the outcome of these experiences. Three broad protective factor groups have been identified and analyzed: child-level, family-level and community level. These three factors have been further divided into subgroups and examined based on how they impact the outcome for children who face maladaptive experiences. The protective factors discussed have been shown to reduce the poor outcomes for children who were exposed to maltreatment, abuse and neglect. Resilience is another term used to describe protective factors and has been used to examine a child's ability to overcome and adverse childhood experiences.

**Keywords:** adverse childhood experiences; psychological protective factors; familial protective factors: social protective factors; resilience

#### Introduction

Protective factors can impact how individuals respond to the adversity that places them at risk for maladaptive consequences in ways such as improving, influencing or significantly changing the outcome (Tufford, 2019) [39]. Rutter (2007) [33] saw protective factors as conditions, inclusive of environments, which may positively affect unfavorable circumstances and reduce risk factors, such as neglect (see also Zielinsky & Bradshaw, 2006) [42]. Three protective factors, child-level, family-level and communitylevel have been identified. Child-level protective factors include personal characteristics or personal traits, intellect, effective coping strategies, ability to appraise maltreatment and life satisfaction. Family-level protective factors focus on the resources available and supportive environments around the child, including family coherence, parental relationship, and spousal support. Finally, community-level protective factors include nonfamily relationships such as relationships outside of the family, and religion (Tufford, 2019) [39].

## Child protective factors Resilience

Children are particularly vulnerable to neglect or abuse during their first ten years of life which negatively impacts their later adolescence and adulthood (Broidy *et al.*, 2003) <sup>[9]</sup>. Although resilience may protect children from the harmful effects of neglect, it is dynamic due to its ability to change over time or only affect specific areas of a child's development (Walsh, 2003) <sup>[41]</sup>. It was found that approximately 10%-20% of maltreated children exhibit resilient functioning which demonstrates resilience in maltreated children (Cicchetti & Rogosch, 1997) <sup>[11]</sup>. Resilience in maltreated children is evidenced when the children demonstrate normal ranges of competencies across several domains of functioning, including competence in interacting with others, mental health, and academic achievement. Several protective factors for children have

been identified. Ego resilience, an identified protective factor, is the ability of one to be resourceful and adaptable under stressful circumstances. Additionally, the ability for one to exert control over their impulses, emotional reactions and behaviors, also serve as different protective factors (Afifi & MacMillan, 2011) [1].

When an individual is able to control arousal impulses, it allows them to delay gratification and think more clearly during stressful situations. Evidence has been found to support a positive relationship between mothers who were able to control their emotions and children who exhibited greater achievement in math and verbal scores. Research has shown, and continues to show, the great correlation that ego resilience and ego overcontrol have in resilience development within maltreated children (). Skills identified as protective factors that are associated with children's resilience to externalizing behavior problems include: self-control, assertion, cooperation, and the ability to display responsible behavior (Cicchetti & Rogosch, 2007) [12].

## Intelligence

Evidence lacks consistency in supporting intelligence as a protective factor for children (Tufford, 2019) [39]. Some research reports weak association between intelligence and resilience (Afifi & MacMillan, 2011) [1]. However, other research indicates that there is an association between IQ scores, the ability to pay attention and later resiliency development (Oliver, 2007) [27]. Although there is limited research supporting intelligence as a protective factor, it is believed that intelligence may lead to greater development of skills and strategies used to cope with maltreatment (Tufford, 2019) [39]. In addition, intelligence allows for strength in other areas that are associated with development such as better school performance, greater teacher relations, and higher self-esteem. Finally, children demonstrating resilience, who have been maltreated, have a heightened ability to develop strong cognitive strategies, which in turn results in effective coping with their maltreatment (Tufford,

2019) [39].

## **Belief Systems**

It is demonstrated that resilient children have greater optimism, hopefulness, persistence and are goal oriented, regardless to if they have failed initially or see life as meaningless (Masten & Powell, 2003) [23]. Evidence portrays the correlation between high-achieving students and families that had a strong outlook on life, who held a strong sense of purpose and possessed high levels of personal efficacy. The belief in a higher being may strengthen one's resilience since the belief has the ability to provide meaning to a child's life, increase their coping abilities during difficult times and provide increased support through organized religious gatherings (Juby & Rycraft, 2004; Oliver, 2007) [18, 27].

## **Internalization and Self-Efficacy**

Internalization of wellbeing, which is related to resilience in children, may serve as a protective factor that can aid in avoiding mental health issues such as anxiety or depression. Self-efficacy, which Bandura (1994) [2] described as an ability for one to reach a specific goal, and self-reliance, or one's belief to think and act independently, can also serve as protective factors for neglected children (Place *et al.*, 2002) [30]

#### **Locus of Control**

Locus of control is the individual's perception of the responsibility for life events. It is evidenced that individuals have either an external or internal locus of control. Individuals who hold an internal locus of control believe that their actions make up their destiny and have the ability to change the outcomes of certain situations by creating their own circumstances. When individuals have a strong locus of control, they have greater ability to adapt to stressful situations due to the belief that the outcome can change and have strength in ability to handle adverse events (Juby & Rycraft, 2004) [18].

#### **Temperament**

Temperament is an individual's natural predisposition to respond to certain environmental stimuli, both emotionally and behaviorally (Thomas & Chess, 1977) [38]. Children who encompass an 'easy-going' temperament demonstrate successfulness in engaging with and reducing parental anxiety, thus protecting them against negative effects of parenting such as neglect or even abuse by caregivers (Sanson & Rothbart, 1995) [34].

## **Supportive Adults**

Supportive adults, such as foster parents, therapists, or social workers, are crucial for helping children cope with neglect or abuse by their caregivers (Masten & Powell, 2003) [23]. Supportive adults can be viewed as an anchor in the child's life, by compensating for the negative consequences that the neglected child experienced, such as decreasing posttraumatic stress symptoms, depression, and behavioral problems by offering a supportive environment (Tufford, 2019) [39]. The networks can assist in increasing the child's educational achievements, lower aggressive behavior, if present, or neglect on the parents' part, and teach the parent's better parenting strategies (Masten & Powell, 2003) [23]. When a child has a consistent, positive

relationship with a reliable adult, it may foster certain pathways to resilience in various ways. When children have these positive relationships, it may aid in their understanding that the world around them is not inhabited by neglectful and uncaring adults, but instead there are those who care, which could in result increase their trust in others (Erikson, 1963) [16]. Since infants are solely dependent on their caregivers, their early childhood relationships will foster whether they will grow up to be trusting people or develop mistrust in the world. When children are able to develop a strong sense of trust in childhood, they are better prepared to develop resiliency later in life. As such, when caregivers provide a consistent amount of love and care for the child, it often results in an increased sense of self-worth which is correlated with increased resiliency). This results in the development of the child to have a predisposition for hope in their future, which researchers believe aid in the ability for individuals to cope more effectively with life's unpredictable circumstances (Polgar, 2017) [31].

#### Gender

In certain circumstances being a female may serve as a protective factor. A study of kindergarten students demonstrated that girls exhibited a lower risk for having behavioral problems, this may be due to the fact that boys are naturally subjected to harsher discipline than girls are (Criss *et al.*, 2002) [14].

# Parental Protective Factors Parenting Style

The authoritative parenting style has many benefits, one being it serves as a protective factor for children. This style involves a warm and loving approach, *yet also* encompasses clear expectations for appropriate behavior, and set firm boundaries. It is believed that parents who have more resilient offspring tend to have a commonality of spending a great amount quality time with their children and engaging in shared activities. When children are able to have strong adult role models in their lives who resolve conflicts in positive ways, they model healthy behaviors which can be used as a protective factor in the future against maladaptive thinking (Oliver, 2007) [27].

# **Partner Support**

The quality and strength of a couple's relationship can also serve as a protective factor (Belsky, 1993) [3].

When parents have the same viewpoints on how they would like to raise their children, it may contribute to them exercising authoritative parenting (Purdom *et al.*, 2006) <sup>[32]</sup>. DeLongis *et al.* (2004) <sup>[15]</sup> found that strong support between partners positively influences affection, which then, positively affects the wellbeing of the child.

## **Mental Health of Parents**

Parental wellbeing, including being free from use of abusive substances, absence of depression or any other mental health challenges, decreases the chances of parents neglecting or abusing their child and can prevent aggression from developing in high-risk children (Nantel- Vivier *et al.*, 2014) <sup>[26]</sup>. Research suggests that the absence of maternal drug dependence, having a few symptoms of mental health problems, in particular a lack of maternal depressive symptoms, have been associated with lower prevalence of maltreated and other high-risk children externalizing their

problems (Manly *et al.*, 2013; Nantel- Vivier *et al.*, 2014) <sup>[22, 26]</sup>. When mothers are mentally stable, they encompass greater problem-solving capacities, and refrain from angry, intrusive or hostile behaviors. In addition, mothers living without depression engaged in greater communication with their children, and developed exposure to increased social learning opportunities, compared to mothers living with depression (Papero, 2005) <sup>[29]</sup>.

## **Parental Physical Health**

Positive physical health includes receiving regular screening, immunizations and bringing attention to health concerns as they arise. Resiliency in adolescent mothers was seen in positive lifestyle practices such as maintaining good nutrition, physical activity, and stress management (Black & Ford-Gillboe, 2004) <sup>[7]</sup>. When parents are healthy, they are more energetic and productive. In addition, they are able to develop better coping mechanisms when life's stresses and strains occur. In historical studies of resilient children in families, there is minimal prevalence of heredity or chronic illness, which demonstrates the value of resilience (Mandleco & Peery, 2000) <sup>[21]</sup>.

## **Parental Education and Employment**

Level of education and encompassing employable skills seen in parents increase chances of stable employment, resulting in reduction of financial stress and improvement in familial functioning. Moreover, children are cognitively stimulated based on the level of parental education (Serbin & Karp, 2004) [35]. Both the level of parental education, and having stable employment aid in the ability for the mother to feel accomplished, have strong social networks, and act as a positive role model for her children (Lloyd & Rosman, 2005) [19]. On the contrary, parents who experienced a job loss, or extensive periods of unemployment negatively impacted their children by putting them at a greater risk for developing depression, loneliness, withdrawal, and emotional sensitivity (McLoyd & Wilson, 1990) [24]. Low socioeconomic status has been evidenced to be associated with various problems such as early parenthood, increased school dropout rates, substance abuse, increased family stress, and child abuse (Lloyd & Rosman, 2005) [19]. However, affluence is seen as a protective factor in children experiencing adverse situations (Papero, 2005) [29].

# **Family Protective Factors**

Families for the most part include a combination of two adults who are joined with each other through mutual connectiveness, and together they assume various responsibilities in order to develop adequate familial functions (Vanier Institute of the Family, 2004) [40]. When families face an adverse incident or experience, and are able to emerge with greater strength and capability, then they are considered resilient (Simon *et al.*, 2005) [36]. However, familial resiliency is a process, not an outcome, and is thought to significantly vary across time and situations (Benzies & Mychasiuk, 2009) [6].

## **Family Structure**

Protective factors are dependent on family characteristics including children age and size of family. Since smaller families experience less financial burden there are lower levels of stress at home (Smokowski *et al.*, 2004). Older mothers are demonstrated to have higher paying jobs which

allows for adequate resources in order to provide the child's needs resulting in healthy development.

In addition, families who have two incomes can also be a protective factor, since single mothers are overrepresented in the poor (Benzies *et al.*, 2006) <sup>[5]</sup>.

## **Family Cohesion**

When familial interactions encompass warmth and cohesiveness, they serve as a protective factor for families that have a parent who is living with depression (Place *et al.*, 2002) [30]. When families are faced with adversity, it is vital that they cope with them in unison by exercising cooperation, mutual support, and family commitment. High levels of warmth and cohesion in families, even during financial challenges, are evidenced to improve children's academic performances and increased the likelihood of children attending postsecondary education (Walsh, 2003) [41]

#### **Parent-Child Relationship**

During child adverse situations, secure parent-child attachment creates positive outcomes (Brennan *et al.*, 2003) <sup>[8]</sup>. When parents actively participate in their children's activities, they are able to protect them from externalizing their behavioral problems and prevent juvenile delinquency. In addition, nurturing and involved parental guidance creates positive results in their children's academic performance, which results in higher ratings of self-confidence and greater social bonds between with peers of the child (Conger & Conger, 2002) <sup>[13]</sup>. Negative consequences can be prevented during economic distress when parents display warmth and supportive approaches towards their children (Mistry *et al.*, 2002) <sup>[25]</sup>.

# **Home Environment**

A stimulating home environment with active learning environments allows for children to achieve optimal cognitive development. Cognitive stimulation within the home environment enhances young children's development of problem-solving skills (Serbin & Karp, 2004) [35].

## **Social Networks**

Social support networks for families may include extended family, neighbors, or even co -workers that can aid in various ways such as providing emotional support, helping with everyday needs, or providing information. Resiliency is promoted when individuals feel connected to others outside of their family and are able to accept help from these individuals in times of need. When social networks are able to provide instrumental, emotional, and practical support to families during times of adversity, it is proven that the support maintains positive physical, and emotional health. During times of economic distress, social support can be used as a protective factor for both single -parent and dual low - income families (Walsh, 2003) [41].

# **Family of Origin**

The social learning theory discusses the ability for children to acquire their parents' behaviors either by observation or simply by copying them (Bandura, 1969). Intergenerational links in cognitive development, school performance, and transmission of risk factors within the literature (Serbin & Karp, 2004) [35]. Protective factors may be transmitted from parents to children, similar to risk factors. An example of

the transmission of protective factors is seen when children observe parental interactions and relationships with others, which allow them to learn social relationships (Chen & Kaplan, 2001) [10].

## Housing

A common risk factor for low-income families is inadequate housing. Home environments, especially in the early years of a child's life, are positively correlated with greater academic achievement later in life. In addition, when families with children move constantly, they are proven to be disadvantaged when compared to children who were in stable environment (Ou, 2005) [28].

# **Community Protective Factors Social Cohesion**

Neighborhood social cohesion can include trusting relationships with neighbors and obeying social control, such as following appropriate behaviors and managing conflict efficiently during times of stress. Collective efficacy is formed when social cohesion and social control are together (Guterman et al., 2009) [17]. In neighborhoods with low collective efficacy, it is demonstrated there is often times an increased rate of assault and aggression towards children (Guterman et al., 2009) [17]. On the other hand, when social cohesion is exercised in a neighborhood, feelings of support amongst neighbors is present and may aid those who are in need of help, for example providing supervision of children. In such neighborhoods, there may be decreased prevalence of parents neglecting or harming their children due to the close relationships between the neighbors and ability for them to intervene. Due to this, research has demonstrated that in such neighborhoods, where neighborhood social cohesion was demonstrated, rates of child neglect are lower (Maguire-Jack & Showalter, 2016) [20].

## Safe Neighborhoods

It is evidenced that families that live in safe and secure neighborhoods have greater engagement in better child rearing practices. Conversely, in neighborhoods that do not have clean water, plumbing, roads, or garbage collection, families have higher chances of engaging with poorer educational systems, a paucity of basic services, as well as environmental health risks (Papero, 2005) [29]. These factors may prevent families from meeting their everyday basic needs, such as cooking or bathing their children with clean water (Papero, 2005) [29].

## **Education, Childcare and Healthcare**

Children who receive quality education have a better chance at developing resilience, regardless of what their home environment entails (Bennett *et al.*, 2005) <sup>[4]</sup>. Post-secondary education is seen most commonly in children who have a positive attitude towards school, are involved with peer groups, and have support for their teachers (Ou,2005) <sup>[28]</sup>. Access to adequate childcare can lead to improved child outcomes and parental employability, especially in low-income families (Mistry *et al.*, 2002) <sup>[25]</sup>. Evidently, a lack of adequate medical care increases family stress and economic insecurity, which negatively impacts family health. Therefore, access to healthcare can protect high-risk families and strengthen family resiliency (Simon *et al.*, 2005) <sup>[36]</sup>.

#### **Mentors and Peers**

Mentors are notable protective factors for families. Community mentors may include teachers, coaches, or instructors who are involved in children's activities such as music or art, or those involved in religious institutions. When children have a strong relationship with a supportive and encouraging mentor, they demonstrate greater resiliency (Walsh, 2003) [41].

#### Conclusion

Child maltreatment, neglect and abuse affect the mental and physical health of children who experience them and can impact their future well-being. The protective factors reviewed above are known to increase resilience in children who faced adversities by altering the trajectory of the mental and physical challenges that may occur. This increased resilience results in promotion of health and well-being for maltreated children. Although protective factors cancel the negative effects of the abuse, maltreatment or neglect experienced, they can allow children to reach their full potential in life by reducing the impairment that occurs following exposure to maltreatment. This review may initiate treatment strategies by mental health workers who aim to assist children and later adults deal with their emotional scars form the abuse that was inflicted on them as children.

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