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Post-traumatic stress problems among poly-victimized Spanish youth: Time effect of past vs. recent interpersonal victimizations

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ABSTRACT

The cumulative effect of lifetime interpersonal victimization experiences (e.g., child maltreatment, sexual victimizations, conventional crime, witnessing indirect victimization, peer and sibling victimizations) on posttraumatic stress (PTS) symptoms is an important topic in the scientific literature. The objectives of the present study were: (a) to analyze the relationship between lifetime interpersonal victimizations and PTS symptoms, (b) to determine the most prevalent specific PTS symptoms among poly-victimized adolescents, and (c) to establish the time-based effect of interpersonal victimization experiences that occurred in the last year versus those that occurred years before on current level of PTS symptoms. Gender differences were taken into account for each of these objectives. Participants were 823 Spanish adolescents (63% girls and 37% boys) between 14 and 18 years of age recruited from May 2010 to November 2011 from schools in Barcelona, Spain. The majority (87.6%) was of Spanish nationality. The results highlighted the cumulative effect of interpersonal victimizations on PTS symptoms. Among poly-victims adolescents, the most prevalent PTS symptom was intrusive thoughts, but some differences were observed according to gender. The time-based effect of interpersonal victimizations showed a different pattern for girls and boys. For girls, the victimizing events occurring in past years had more explanatory power of the current PTS symptoms than those that occurred more recently. In boys, the interpersonal victimizing events occurring in the last year had the greater explanatory power. These results may have clinical and therapeutic value.

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Introduction

The relationship between experiencing interpersonal victimization episodes and mental health problems in adolescence is a well-documented topic in the scientific literature (Ashcroft, Daniels, & Hart, 2003). Depression, anxiety, delinquent behavior, post-traumatic stress (PTS) symptoms, and substance use are some of the psychopathological disorders linked to victimization (Chan, 2013; Ford, Elhai, Connor, & Frueh, 2010; Sullivan, Farrell, & Kiewer, 2006). Finkelhor (2008) defined

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interpersonal victimization (e.g., child maltreatment, sexual victimization, witnessing and indirect victimization, peer and sibling victimization) as “harm that comes to individuals because of other human actors behaving in ways that violate social norms” (p. 23).

Adolescents in today’s society are increasingly exposed to a multiplicity of interpersonal victimizations experiences. Most studies on this topic have focused on analyzing the effect that specific types of victimizing experiences have on psychological adjustment. Specifically, those considered of higher severity (i.e., physical abuse, neglect, and sexual abuse), referred to as the “big three” victimizations (Cuevas, Finkelhor, Clifford, Ormrod, & Turner, 2009), have attracted the greatest interest. By contrast, more commonly occurring events and events perceived as less severe have been analyzed to a much lesser extent. In this regard, Cuevas et al. (2009) point out that “attention to the other forms of victimization such as peer assaults, sibling assaults, bullying, witnessed victimization, and property theft also merit attention, and research efforts have begun to provide evidence of their association with psychological distress and psychopathology” (p. 639). These forms of victimization can also have a deleterious impact on children’s mental health.

Along these lines, recent studies unanimously indicate that cumulative exposure to interpersonal victimization experiences has more serious implications for mental health than does repeated exposure to the same type of victimizing event (Anda et al., 2006; Barnes, Noll, Putnam, & Trickett, 2009; Cuevas et al., 2009; Finkelhor, Ormrod, & Turner, 2007, 2009; Gustafsson, Nilsson, & Svedin, 2009; Turner, Finkelhor, & Ormrod, 2010). Several authors have noted that among victimized children, those exposed to multiple types of interpersonal victimizing events show poorer psychological adjustment (Arata, Langhinrichsen-Rohling, Bowers, & O’Farrill-Swails, 2005; Chan, 2013; Greenfield & Marks, 2010; Higgins & McCabe, 2000). Finkelhor, Shattuck, Turner, Ormrod, and Hamby (2011) have proposed the term *poly-victim* and *poly-victimization* to refer the multiple victimization group of youth who experience multiple victimizations. Although there are several ways of measuring poly-victimization, the authors have recently defined the highest group of poly-victims as the top 10% of the distribution in a specific sample.

Post-traumatic stress disorder (PTSD) is one of the most prevalent psychological syndromes among victimized adolescents (Blumenthal et al., 2008; Ford, Wasser, & Connor, 2011). Compared with non-victimized adolescents, poly-victimized youths were found to be more likely to report a greater number of psychological symptoms, especially PTS symptoms (Finkelhor et al., 2007; Soler, Paretilla, Kirchner, & Forns, 2012; Turner et al., 2010). According to Ford et al. (2010), poly-victimized adolescents had a three-fold higher risk of PTSD when compared with non-victimized youths, and this was especially the case among girls. In fact, studies about gender differences have consistently highlighted that when exposed to potentially traumatic events, females are more likely than males to develop PTSD (Soler, Kirchner, Paretilla, & Forns, 2013; Tolin & Foa, 2006). A study by Petersen, Elklit, and Olesen (2010) with a community sample of Faroese adolescents found that girls presented PTSD symptoms more than twice as often as boys did.

One interesting finding is that PTS symptoms can mediate the relationship between child victimization and subsequent victimizations (Arata, 2000), and the re-experiencing of PTS symptoms has been reported to be one of the more important predictors of subsequent victimizations (Orcutt, Erikson, & Wolfe, 2002). Thus, poly-victimized adolescents have a greater risk not only of psychopathology but also of being re-victimized. A prospective study by Finkelhor et al. (2007) highlighted that the risk for re-victimization in the second year was high for children victimized in the first year. These authors concluded that children who have previously been victimized, and especially poly-victims, are at higher risk of continued victimization. The implication is thus that these high-risk children need to be identified so as to make them priority targets for prevention efforts.

Not only recent victimization exposure but also prior experiences may put adolescents at risk for PTSD because early life events can have both immediate and long-term consequences (Copeland, Keeler, Angold, & Costello, 2007; Gerson & Rappaport, 2013). Some studies have highlighted the fact that traumatic events occurring during childhood and/or adolescence may have an influence on the development of PTSD in adulthood. In this regard, Haj-Yahia, Tishby, and de Zoysa (2009) concluded that the more adolescents witnessed interparental violence and experienced parental violence, the more they exhibited PTSD symptoms later.

Despite the value of the above research, very few studies have directly analyzed which factor – interpersonal victimizations that occurred recently (current year) or that occurred in years previous – has the greater influence on current symptoms of posttraumatic stress while also taking gender into account. Finkelhor et al. (2007) emphasized that “for older children, victimizations prior to the present year provided no additional predictive power over and above what was predicted by present year victimizations” (p. 161). Their study did not, however, examine gender differences.

Similarly, most studies analyze PTS as a syndrome, without regard to the specific symptoms of which it is comprised. Identifying which specific behaviors related to PTS syndrome are more impaired in poly-victimized adolescents may therefore be relevant in terms of developing psychological intervention programs. The present study seeks to contribute to this issue by considering the cumulative effect on PTS symptoms of a wide range of different lifetime interpersonal victimization events.

The objectives of the present study are threefold: (a) to analyze the level of post-traumatic stress problems (PTSP) in Spanish adolescents according to the degree of lifetime interpersonal victimizations reported, taking gender differences into account; (b) to determine the most prevalent specific symptoms of PTS among poly-victimized adolescents, again with reference to gender; and (c) to establish, by gender, the explanatory power of a wide spectrum of interpersonal victimizing events with respect to the level of current problems associated with PTS, taking into account whether these events occurred in the last year or before (time factor).

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