



## Research article

# Psychological maltreatment, emotional and behavioral problems in adolescents: The mediating role of resilience and self-esteem



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## ARTICLE INFO

## Article history:

Received 11 May 2015

Received in revised form 3 September 2015

Accepted 15 September 2015

Available online 28 October 2015

## Keywords:

Psychological maltreatment

Resilience

Self-esteem

Behavioral problems

Emotional problems

## ABSTRACT

In this study, structural equation modeling was used to examine the mediating role of resilience and self-esteem in the relationships between psychological maltreatment-emotional problems and psychological maltreatment-behavioral problems in adolescents. Participants were 937 adolescents from different high schools in Turkey. The sample included 502 female (53.6%) and 435 male (46.4%) students, 14–19 years old (mean age = 16.51,  $SD = 1.15$ ). Results indicated that psychological maltreatment was negatively correlated with resilience and self-esteem, and positively correlated with behavioral problems and emotional problems. Resilience and self-esteem also predicted behavioral problems and emotional problems. Finally, psychological maltreatment predicted emotional and behavioral problems mediated by resilience and self-esteem. Resilience and self-esteem partially mediated the relationship between psychological maltreatment-behavioral and psychological maltreatment-emotional problems in adolescents. Thus, resilience and self-esteem appear to play a protective role in emotional problems and behavioral problems in psychologically maltreated individuals. Implications are discussed and suggestions for psychological counselors and other mental health professionals are presented.

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## Introduction

Psychological maltreatment is an important predictor of emotional and behavioral problems in adolescents (Arslan, 2012; Langevin, Hébert, & Cossette, 2015; Lowell, Renk, & Adgate, 2014; Miller-Perrin & Perrin, 2007; Şimşek & Önder, 2011). Although it involves significant negative outcomes on children's health and development, there is no universally accepted definition of psychological maltreatment in the literature. Psychological maltreatment is the most omnipresent form of child maltreatment that results from the relationship between a parent and child, the interaction of concerns shaping the relationships, and potentially harmful interactions with severe impairment on a child's emotional and developmental health. Psychological maltreatment includes omission and commission acts such as spurning, terrorizing, isolating, exploiting, and denying emotional responsiveness (Glaser, 2002; Hart & Glaser, 2011). It also refers to a repeated pattern of behavior that expresses to children that they are worthless, unwanted, unloved, or only of value in meeting another's needs, which leads to lasting damage to their well-being and development (Brassard, Hart, & Hardy, 1991).

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The worldwide prevalence of psychological maltreatment was estimated at nearly 36% of children (Stoltenborgh, Bakermans-Kranenburg, Alink, & Ijzendoorn, 2012). In Turkey, the Social Services and Child Protection Institution, in a self-report study, stated that an estimated 51% of children were psychologically maltreated (Korkmazlar-Oral, Engin, & Büyükyazıcı, 2010). According to agency reports, 23% of children in England, 11% in the USA, 23% in Canada, and 34% of children in Australia were psychologically maltreated (Gilbert et al., 2009). This prevalence is especially high in East Asia and the Pacific Region (ranging from 31.3% [Korea] to 68.5% [China]; United Nations Children's Fund [UNICEF], 2012). This suggests that psychological maltreatment is quite common and it is necessary to understand its negative outcomes for adolescents. Results from a large body of research suggest that psychological maltreatment is associated with resilience (Flores, Cicchetti, & Rogosch, 2005; Seok et al., 2012), self-esteem (Karakuş, 2012; Korkut, 2012; Siyez, 2003; Stein, Leslie, & Nyamathi, 2002; Yılmaz-Irmak, 2008), and behavioral and emotional problems (Akse, Hale, Engels, Raaijmakers, & Meeus, 2004; Arslan & Balkis, 2014; Langevin et al., 2015; Lowell et al., 2014; Moretti & Craig, 2013).

Despite these specific relationships between variables, there is no research defining the collective relationships between psychological maltreatment, resilience, self-esteem, behavioral problems, and emotional problems. Although many studies have also focused on psychological maltreatment in adulthood, few have focused on psychological maltreatment experiences in adolescence. Hence, self-esteem and resilience may help to understand the relationships between psychological maltreatment, behavioral and emotional problems, given the direct and indirect relationships between them. This study will, therefore, make important contributions to prevention and intervention programs that could be designed to address emotional and behavioral problems in adolescents. The purpose of this study is to investigate direct and indirect relationships between these variables.

### *Direct Relationships between Variables*

Psychological maltreatment increases an individual's vulnerability and is central to all types of abuse (Iwaniec, Larkin, & Higgins, 2006), thus leading to many significant short-term and long-term negative outcomes (Miller-Perrin & Perrin, 2007). For example, numerous studies examining outcomes of psychological maltreatment experiences suggest that psychologically-maltreated individuals exhibit more emotional problems, including depression, suicidal tendencies, and posttraumatic disorders (Akse et al., 2004; Langevin et al., 2015; Lowell et al., 2014; Moretti & Craig, 2013; Norman et al., 2012; Stein et al., 2002; Yılmaz-Irmak, 2008). Stuewig and McCloskey (2005) found that individuals exposed to rejection by parents exhibit more depression symptoms in adolescence. Siyez (2003) reported that psychologically maltreated individuals have higher rates of depression and anxiety in adolescence. Numerous longitudinal studies have also supported that child maltreatment leads to various emotional and behavioral problems (e.g. Banyard, Williams, & Siegel, 2001; Gross & Keller, 1992; Mullen, Martin, Anderson, Romans, & Herbison, 1996). For example, Silverman, Reinherz, and Giaconia (1996) pointed out that maltreated participants demonstrate a high level of emotional and behavioral problems, such as depressive symptoms, anxiety, psychiatric disorders, and suicidal ideation. In particular, psychological maltreatment was longitudinally found to be a significant predictor of emotional and behavioral problems (Gross & Keller, 1992).

Psychological maltreatment is associated with many behavioral problems, such as tobacco use, academic problems, alcohol use, anti-social behaviors, and illicit drug use (Akse et al., 2004; Arslan, 2012; Langevin et al., 2015; Lowell et al., 2014; Moran, Vuchinich, & Hall, 2004; Norman et al., 2012; Yılmaz-Irmak, 2008). In particular, drug and alcohol use were higher among psychologically maltreated adolescents (Widom & White, 1997). Psychological maltreatment has also been linked to more anti-social behaviors in adolescence (Bal, 2010; Kabasakal & Arslan, 2014; Lansford et al., 2002). Arslan and Balkis (2014) reported that maltreated individuals exhibit more problem behaviors, including anti-social behaviors, alcohol use, smoking, suicidal tendencies, eating problems, and dropping out of school in adolescence. Consequently, psychological maltreatment experiences are closely associated with behavioral and emotional problems. Therefore, psychological maltreatment is a significant risk factor for adolescents' well-being.

Individuals exposed to psychological maltreatment have lower resilience and self-esteem compared to those who were not maltreated (Flores et al., 2005; Karakuş, 2012; Korkut, 2012). Resilience is a dynamic system encompassing the achievement of positive adaptation within the context of experiencing adversity (Luthar, Cicchetti, & Becker, 2000; Masten, 2011) and the capacity to successfully overcome this adversity while maintaining normal development (Olsson, Bond, Burns, Vella-Brodrick, & Sawyer, 2003; Rutter, 2006). In this study, resilience ecologically refers to the adolescents' capacity to navigate their way to the resources including psychological, social, cultural, and physical resources they need during adversity, and their ability to negotiate for these resources to be provided in meaningful ways (Ungar, 2008). Here, the emphasis is on interactional dimensions of resilience and its potential as a mediator in relationship between the risk and the well-being outcomes (Sanders, Munford, Thimasarn-Anwar, Liebenberg, & Ungar, 2015). Hence, resilience is considered to be a protective factor in the face of significant adversity (Bonanno, 2008; Gooding, Hurst, Johnson, & Tarrier, 2012), and it can modify adversity's impact (Olsson et al., 2003). Furthermore, it is not an outcome in itself instead, positive resources upon which adolescents can utilize as they challenge to accomplish positive outcomes (Sanders et al., 2015). Prior research has indicated that resilience is negatively related to psychological maltreatment (Arslan & Kabasakal, 2014a; Kabasakal & Arslan, 2014; Seok et al., 2012; Zautra, Hall, & Murray, 2010). Therefore, psychologically maltreated individuals have lower resilience than those who are not maltreated (Flores et al., 2005). Collishaw et al. (2007), for example, found that adults who were maltreated in childhood demonstrate lower resilience. Arslan and Kabasakal (2014a) reported lower resilience for adolescents with a

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