

Contents lists available at [ScienceDirect](https://www.sciencedirect.com)

Child Abuse & Neglect

journal homepage: www.elsevier.com/locate/chiabuneg

Research article

Childhood adversity, social support networks and well-being among youth aging out of care: An exploratory study of mediation



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ARTICLE INFO

Keywords:

Social network
Childhood adversity
Well-being
Social support
Care leavers

ABSTRACT

The goals of the present study are to examine the relationship between childhood adversity and adult well-being among vulnerable young adults formerly placed in substitute care, and to investigate how characteristics of their social support networks mediate this association.

A sample of 345 Israeli young adults (ages 18–25), who had aged out of foster or residential care, responded to standardized self-report questionnaires tapping their social support network characteristics (e.g., network size or adequacy) vis-à-vis several types of social support (emotional, practical, information and guidance), experiences of childhood adversity, and measures of well-being (psychological distress, loneliness, and life satisfaction).

Structural equation modelling (SEM) provided support for the mediating role of social support in the relationship between early adversity and adult well-being. Although network size, frequency of contact with its members, satisfaction with support, and network adequacy, were all negatively related to early adversity, only network adequacy showed a major and consistent contribution to the various measures of well-being. While patterns were similar across the types of support, the effects of practical and guidance support were most substantial.

The findings suggest that the detrimental long-term consequences of early adversity on adult well-being are related not only to impaired structural aspects of support (e.g., network size), but also to a decreased ability to recognize available support and mobilize it. Practical and guidance support, more than emotional support, seem to be of critical importance.

1. Introduction

Youth aging out of the child welfare system have typically been exposed as children to abuse, neglect and other adversities within their biological families, as well as to negative experiences during the care experience itself (Pecora et al., 2005). Their history is often fraught with disruptions of their social network, a by-product of the removal from their home environment and changes in their placement and schools, leaving them with impoverished support to rely on as they make the critical transition out of care and into adult and independent life (Perry, 2006). It is therefore not surprising that care leavers constitute an especially high-risk group among young adults in terms of their overall functioning and well-being (Stein, 2006). In particular, they are known to suffer from disproportionately high levels of mental diagnoses (Havlicek, Garcia, & Smith, 2013), and to be especially prone to feelings of loneliness (Samuels & Pryce, 2008) and low levels of satisfaction with their lives (Dregan & Gulliford, 2012). Research on the association between early adversity and adult well-being, and on the manner in which social support may link the two, has almost exclusively been confined to community samples (Salazar, Keller, & Courtney, 2011). Moreover, and of special relevance to the current study, the role played by distinct support functions (e.g., emotional or practical) and attributes of the social support network (e.g., network size or

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<http://dx.doi.org/10.1016/j.chiabu.2017.07.020>

Received 28 June 2016; Received in revised form 20 July 2017; Accepted 25 July 2017

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adequacy) in these associations, remains largely unknown. Therefore the goals of the present study are to examine the relationship between childhood adversity and well-being among young adults formerly placed in substitute care, and to investigate how characteristics of their social support networks mediate this association.

1.1. Childhood adversity and well-being

The association between childhood maltreatment and a variety of mental health problems in adulthood is well established in scientific literature among the general population (e.g., Topitzes, Mersky, Dezen, & Reynolds, 2013). Extensive empirical research has also demonstrated that other adverse conditions such as economic deprivation, drug abuse, or criminal activity in the household tend to co-occur with specific forms of child abuse and cumulatively influence mental and physical health (e.g., Anda, Butchart, Felitti, & Brown, 2010). This pattern of associations was recently confirmed in a large representative sample of youth formerly placed in care, in a study conducted by Salazar et al. (2011). The findings of the study demonstrated that both pre-care and in-care experiences of maltreatment among this group were related to depression in young adulthood.

1.2. Social support and social networks

Social networks and the support they provide have long been recognized as a central factor that may explain the well-being of individuals exposed to adversity (Uchino, 2009). Research in the field commonly distinguishes between the structural and the qualitative aspects of the support. The structural aspects of social support usually refer to support network resources that can affect the accessibility and capacity of social networks to provide assistance to the focal person, including the size of the network, or the strength of ties with its members (the frequency of contact). Unlike the quantitative structural components, the quality of social support is one's subjective appraisal about the support received (Smith & Christakis, 2008). Effects on measures of well-being of young and older adults, such as psychological distress and loneliness, have been reported for the structural aspects of network size and frequency of contact (Phongsavan et al., 2013; Shiovitz-Ezra & Leitsch, 2010), as well as for qualitative attributes of support, such as satisfaction with support or the extent to which it adequately addresses one's needs (Huxhold, Fiori, & Windsor, 2012; Kafetsios & Sideridis, 2006). Evidence suggests, however, that the latter are more reliable predictors of outcomes than the structural attributes (Uchino, 2009).

Another important distinction to be made concerns the different functions support may fulfil, the three most central being: emotional (e.g., caring or encouragement), instrumental or practical (e.g., provision of goods or money) and information and guidance (provision of information or advice; Thoits, 2011). Studies on the effects of social support have predominantly used global measures that do not reflect these different functions or have focused on the central role of emotional support in promoting mental and physical health (Malecki & Demaray, 2003). Yet a few studies have emphasized the importance of practical support in addressing certain material needs, such as economic hardship (Turney & Harknett, 2010). Knowledge concerning the effects of information and guidance support is much more limited, though some studies point to the importance of information provided by members of one's support network in coping with unknown and stressful situations such as postpartum depression or the illness of a family member (Sarajärvi, Haapamäki, & Paavilainen, 2006). Other studies have highlighted the significance of information regarding new and attractive job opportunities acquired through network members for the job-seeking process and subsequent employment (Yakubovich, 2005). While the focus of these studies was on material aspects of well-being, it is likely that improved employment and financial opportunities would result in indirect effects on well-being as well.

1.2.1. The social support network of youth leaving care

Care leavers' history of long-term placement in substitute care often limits the development of a support network that can respond to their needs in coping with the abrupt transition to adulthood (Rosenfeld et al., 1997). After having suffered considerable adversity within their home setting, these young people are separated from their biological families, schools, neighborhoods, and friends and then may pass through transient or failed foster settings, as well as between caseworkers, foster parents, or other caretakers. These repeated network disruptions increase the likelihood of smaller and less supportive social networks (Perry, 2006). As a result, many of the youth leave care without the long-term multi-dimensional support resources typically provided by a stable family and a network of childhood friends (Avery & Freundlich, 2009). Moreover, person-oriented research identified distinctive profiles of care leavers demonstrating difficulties in multiple domains that were characterized by greater exposure to childhood adversity as well as more limited support resources than those groups that displayed higher functioning (Keller, Cusick, & Courtney, 2007).

1.2.2. The mediating role of social support

Evidence showing that a history of parental maltreatment and abuse is directly predictive of decreased social support in adulthood (Vranceanu, Hobfoll, & Johnson, 2007), suggests social support may act as a mediator that links early adversity and adult well-being. According to the mediating hypothesis, adverse experiences cause disruptions in the individual's social network and that these disruptions limit the extent of available support, thereby decreasing the abilities of the individual to cope and to adjust (Cassel, 1976). Vranceanu et al. (2007), have suggested a theoretical model that delineates two possible paths by which social support exerts its mediating effects in the relationship between childhood maltreatment and adult mental health problems. First, maltreated children are likely to have less actual support available to them because potential familial support is limited due to the fact that parents or siblings may have been the perpetrators or have themselves been exposed to similar experiences, and may therefore be less effective providers of support (Elliott & Carnes, 2001). Second, experiences of maltreatment may cause distortions in children's

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