



Self-esteem: A mediator between peer relationships and behaviors of adolescents in foster care



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ABSTRACT

Youth in foster care have been shown to be at risk for a range of negative behaviors. Developmental research has highlighted the important role that peer relationships can play in an adolescent's development. For youth in foster care, peer relationships can also play an important role in both youths' internal perception of themselves and their enacted behaviors. This study utilized National Survey of Child and Adolescent Wellbeing, a national secondary dataset to analyze the connection between peer relationships for youths in long-term foster care and their report of internalizing, externalizing, and delinquent behaviors ($n = 188$). Additionally, the self-esteem of adolescents was explored as a potential mediator between peer relationships and these behaviors. Preliminary analyses indicated that peer relationships had a significant association with all three of the identified behaviors: internalizing, externalizing, and delinquent behaviors of youths in foster care. Self-esteem was found to be a significant mediator between peer relationships and adolescents' report of their internalizing, externalizing, and delinquent behaviors. Clinical implications for therapeutic services that focuses on the adolescent's self-image and potential policy implications are discussed.

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1. Introduction

Approximately half a million children reside in the child welfare system in the United States (U.S. Department of Health and Human Services, 2014). Over one third of the foster care population includes adolescents (U.S. Department of Health and Human Services, 2014) and adolescents in foster care can be a particularly vulnerable population. For these youth, the experience of growing up in foster care and managing the normal developmental transitions that occur in adolescence highlights a unique context that needs to be explored (Smith, Leve, & Chamberlain, 2011).

Overwhelmingly, it has been found that adolescents in the foster care system are at risk of a range of negative behaviors. Orme and Buehler (2001) described a range of internalizing (e.g. depressive) symptoms to severe externalizing behaviors, such as delinquency, that youth in foster care may exhibit. Youths in foster care have been found to report higher levels of internalizing and externalizing behaviors than the general population. Heflinger, Simpkins, and Combs-Orme (2000) identified that approximately one third of youth in care

displayed behavioral concerns of a clinical level, well above what is expected in the general population. In addition, youth in foster care are reportedly more involved in delinquent behavior than their counterparts who are not in foster care (Leathers, 2002). These alarming disparities highlight a need for identifying supports or protective factors that can guard against these negative behaviors.

Relationships have been shown to be a significant protective factor for youth in foster care. For adolescents in particular, peer relationships can play a particularly important role. Negative peer relationships have been found to be significantly related to more negative behaviors of youth in care (Ryan, Testa, & Zhai, 2008), which might indicate that positive peer relationships could potentially serve as a protective factor against negative outcomes. McLean and Jennings (2012) highlighted the important role that peer relationships play in identity development and formulation in adolescence, particularly by influencing peers' self-representation of themselves. Given the important role that peers may play in the development of an adolescent's identity, it is likely that these relationships could greatly influence the way that adolescents in foster care view and feel about themselves, otherwise known as self-esteem. Understanding the connection between peer relationships, various negative behaviors of youth in foster care, and self-esteem could be of particular importance in reducing problematic behaviors of youth in care by providing more information for researchers, practitioners, and

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policymakers in developing interventions or supports for youths in foster care.

1.1. Peer relationships

As mentioned earlier, peer relationships become increasingly significant during the adolescent years in relation to multiple areas of development, particularly self-esteem. Vanhalst, Luyckx, and Goossens (2014) found that adolescents' social experiences and interactions with their peers could have a significant influence on their self-esteem. Liem and Martin (2011) found that adolescents' relationships with their peers were positively related to school experiences and their general self-esteem. Peer relationships may be particularly significant for those youth in foster care as these may provide a source of consistency for youths who are experiencing multiple transitions in their lives. However, it seems the majority of research with foster youth focuses on relationships with one's caregivers or biological family (Salas Martinez, Fuentes, Bernedo, & Garcia-Martin, 2014; Storer et al., 2014). Considering that peer relationships are a normative aspect of youth development, one would expect that peer relationships could play a significant role for adolescents in foster care. Additionally, previous research has indicated that for youth in foster care, peer relationships may play a more significant role than either the relationship with one's foster caregiver or biological parent, Farineau, Wojciak, & McWey (2013).

Beyond these internal processes, peer relationships can also impact other behaviors. For example, a study by Kaufmann, Wyman, Forbes-Jones, and Barry (2007) indicated that youth with antisocial peer affiliations reported higher ratings of delinquent behavior. Conversely, youth with more prosocial involvement reported lower levels of delinquency (Kaufmann et al., 2007). It is evident that peer relations can have a significant influence on the internalizing and externalizing behaviors of adolescents.

1.2. Negative behaviors of youth in foster care

1.2.1. Internalizing behaviors

Youth in foster care have less favorable mental health outcomes than those in the general population (Harmon, Childs, & Kelleher, 2000). In fact, in a study looking at mental health outcomes of youth who have exited foster care, Anctil, McCubbin, O'Brien, and Pecora (2007) found that foster care placement was the biggest predictor of a mental health diagnosis. Depression in youth who are in foster care has also been associated with greater likelihood of substance use and sexual activity compared to a community sample (Stevens, Brice, Ale, & Morris, 2011). Salazar, Keller, and Courtney (2011) examined the effects of pre-foster care maltreatment and length of time in foster care on depression. Those with more severe maltreatment had a greater chance of having a mental health diagnosis.

Furthermore, it has also been found that self-esteem is linked to various internalizing behaviors. One study by Garcia-Reid, Peterson, Reid, and Peterson (2013) found that those youth with a stronger sense of community and higher self-esteem levels were less likely to be at risk for internalizing behaviors. Suzuki and Tomoda (2015) also found that self-esteem was a significant mediator between various forms of attachment and specific depressive symptoms for youth in foster care in Japan.

1.2.2. Externalizing behaviors

As mentioned previously, a higher prevalence of behavioral problems exists for youth entering foster care and these problems may also impact an individual throughout their lifetime (McMillen et al., 2005). Across multiple studies, the prevalence of behavioral disorders in foster care has ranged from approximately 20 to 80% of the study sample (Keil & Price, 2006). Additionally, another study found that a high number of foster youth reported both alcohol and substance use, with 35% meeting the criteria for a substance use disorder (Vaughn, Ollie,

McMillen, Scott, & Munson, 2007). Externalizing behaviors have long been seen as especially problematic (Pilowsky, 1995), as they could lead to problems long into adulthood (Burchart, Kahane, Phinney, Mian, & Furniss, 2006). Although there are multiple factors that contribute to the development of externalizing behaviors of children and adolescents, a history of neglect or maltreatment significantly increases the prevalence (Herrenkohl & Herrenkohl, 2007; Lansford et al., 2002; Manly, Kim, Rogosch, & Cicchetti, 2001).

Youth in foster care show a higher prevalence of both internalizing and externalizing behavior problems when compared to the general population (McMillen et al., 2005). Externalizing behaviors constitute explicit and disruptive actions that may lead to harm against self or others or the destruction of property (Keil & Price, 2006). Among youth in the general population, researchers have found that low self-esteem is related to higher levels of externalizing behaviors and this relationship held both cross-sectionally and longitudinally (Donnellan, Trzesniewski, Robins, Moffitt, & Avshalom, 2005). In a similar study of at-risk youth, poor self-esteem as a child predicted criminal behavior into adulthood among other negative outcomes (i.e., poorer mental illness, physical health, economic well-being; Trzesniewski, Moffitt, Poulton, Donnellan, Robins, & Caspi, 2006). For youth in foster care, lower self-esteem may also be related to more aggressive behaviors (Legault, Anawati, & Flynn, 2006).

1.2.3. Delinquency

Delinquent behavior is defined as extreme behaviors associated with illegal or criminal activity in adolescence, and these behaviors may have originally appeared as less severe externalizing behaviors (Liu, 2004). As with other negative behaviors, youth in foster care have been found to be disproportionately at risk for involvement in delinquency and the juvenile justice system compared to the general population (Leathers, 2002; Ryan & Testa, 2005). Leslie et al. (2010) found that youth reported a range of severe risky behaviors with approximately 20% reporting some substance use, 10% reported involvement in a fight, and almost 7% reported carrying a weapon in the past 6 months. Similar to internalizing and externalizing behaviors, these extreme behaviors can also have a significant influence on youths' placements in foster care. Octoman, McLean, and Sleep (2014) found that the most challenging behaviors for caregivers to handle with youths were substance abuse, aggression, and other delinquent behaviors.

1.2.4. Self-esteem as a mediator

In the general population, adolescents with lower levels of self-esteem tend to have higher levels of mental health issues, more physical health issues, a greater chance of criminal activity, and fewer economic assets and aspirations, even when controlling for gender, socioeconomic status, and adolescent depression (Trzesniewski et al., 2006). These findings are important given that they apply to youth in the general population and that these youth are not experiencing the unique context of foster care. Unrau, Seita, and Putney (2008) conducted qualitative interviews with youth in foster care to learn about the losses they experienced while in care. Besides the loss of obvious things like contact with their parents, siblings, and material belongings, they also stated that they have lost their self-esteem. Such comments as, "why doesn't anyone want me?" or "what is wrong with me?" were feelings that adolescents shared. Further, Kools (1997) conducted qualitative interviews with youth in foster care and highlighted two themes: devaluation of self and the need to protect oneself. The devaluation of oneself occurred because of their interactions with others. The adolescents felt stigmatized because of their foster care status. They reported that some of their peers would assume that because they were in foster care that they were "crazy" or that they were "juvenile delinquents."

While these results may appear to be bleak for youth in foster care, Anctil et al. (2007) reported that youth who have received mental health services and had foster parents that they found helpful had significantly higher levels of self-esteem than youth that did not. Valdez,

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