



# Stability of bullying and internalizing problems among adolescents with ASD, ID, or typical development

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## ABSTRACT

**Background:** It is known that children with disabilities, especially adolescents with autism spectrum disorder (ASD), are at increased risk for victimization. However, little is known about the impact of victimization over time.

**Aims:** Primary aims included identifying to what extent risk factors (i.e., internalizing behavior problems and conflict in friendship) related to bullying victimization over time.

**Methods and procedures:** In-depth interviews conducted separately with 15-year-olds with autism spectrum disorder (ASD), intellectual disability (ID), or typical development (TD) and their mothers investigated the experiences of victimization in a two-year follow up to an earlier study at adolescent age 13.

**Outcomes and results:** Findings at age 15 demonstrated that the highest rates of bullying continued to be endorsed by youth with ASD. However, youth with ID were found to experience and report the most severe bullying. Longitudinal examination revealed that internalizing behaviors at age 13 predicted victimization experiences at age 15.

**Conclusions and implications:** During middle adolescence, youth with ASD continue to experience more frequent victimization. Thus, shifting the focus of interventions that not only target the salient social deficits of ASD, but also address comorbid conditions such as internalizing symptoms, may further contribute to reduction of social isolation and peer difficulties.

## What this paper adds

This paper adds to the current body of research in the field of developmental disabilities as it explores the relationship between risk factors related to transition during adolescence for youth with and without intellectual disability (ID) and autism (ASD). While it is known that youth with ASD and ID are at an increased risk for being bullied, little is known about the impact of victimization over time when comparing adolescents with and without developmental disabilities. This manuscript includes critical information gained from adolescent self-report in conjunction with parent report, as self-report is so often excluded in research with youth with developmental disabilities. Further, this manuscript examines the longitudinal changes in both risk and protective factors that are salient during adolescence (e.g., friendship and internalizing behavior problems), as they relate to bullying or victimization. Perhaps the most noteworthy finding is that youth with developmental disabilities, such as ASD or ID, continue to experience more frequent

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victimization, as well as lower levels of friendship quality (warmth/closeness and positive reciprocity), when compared to their typically developing (TD) peers during the transition from early to middle adolescence.

## 1. Introduction

Consistent reports of bullying have been reported across adolescents in the U.S., with 28–30% of all students reporting problems (National Center for Educational Statistics, 2011). It is known that children with disabilities, especially youth with autism spectrum disorder (ASD), are at increased risk for victimization (Cappadocia, Weiss, & Pepler, 2012; Rowley et al., 2012). For these youth, the rates of bullying are especially high during adolescence, where they may experience increased verbal and relational bullying (Zeedyk, Rodriguez, Tipton, Baker, & Blacher, 2014). However, little is known about the impact of victimization over time when comparing adolescents with and without developmental disabilities.

In a meta-analysis, Maiano, Normand, Salvad, Moullec, and Aime (2015) examined the prevalence rates of school-based bullying and victimization of individuals with ASD between the ages of 5 and 22 years. Results showed that bullying was most commonly encountered by students with ASD at school, with verbal bullying being the most prominent type endorsed by youth. Some have found that individuals with autism who had no intellectual disability, but significant social and communication impairments, actually experienced the highest rates of victimization (Rowley et al., 2012). However, studies have also shown that youth with either autism spectrum disorder (ASD) or intellectual disability (ID) are victimized more frequently than their typically developing (TD) peers (Blake, Lund, Zhou, Kwok, & Benz, 2012; Christensen, Fryant, Neece, & Baker, 2012; Zeedyk et al., 2014). Significantly higher rates of physical bullying and greater emotional impact were reported in interviews with 13-year-old youth with ASD when compared to youth with TD (AUTHORS BLINDED FOR REVIEW). For example, in early adolescence (age 13), youth with ASD were victimized more frequently than were their ID or TD peers. Further, rates of internalizing problem behaviors were found to be more salient in adolescents with ASD, whether self-reported or reported by their parents. In addition, internalizing behavior problems and conflict with friends were found to be significantly related to rates of victimization. The present study is a follow-up of (AUTHORS BLINDED FOR REVIEW), here with a focus on changes in rates of victimization across groups of adolescents with ASD, ID, or TD, as they transitioned into high school.

Internalizing behavior problems and friendship quality may contribute to bullying risk in adolescence. For example, studies have identified internalizing behavior problems as a significant risk factor for youth with ASD, with positive associations found between internalizing symptoms and bullying victimization (Adams, Fredstrom, Duncan, Holleb, & Bishop, 2014; Cappadocia et al., 2012). In one study of youth with ASD, researchers examined the relation between psychological functioning and bullying and found that youth who were frequently victimized were those who were more likely to exhibit higher overall internalizing symptoms (Zablotsky, Bradshaw, Anderson, & Law, 2013). The frequency of bullying behaviors was significantly related to level of impairment, with the presence of internalizing symptoms placing youth at greater risk for falling into a victim profile, rather than one of perpetrator or bully-victim (Zablotsky et al., 2013). Given that social deficits become more apparent as children age and enter adolescence, it is not surprising that behavior difficulties also become more challenging as children struggle to navigate their social groups.

Adolescents with ASD have been found to exhibit co-occurring internalizing symptoms such as social anxiety, depressed mood, and social withdrawal, with a large number meeting the diagnostic criteria for anxiety or depression (Gadow, DeVincent, & Schneider, 2008). Early adolescence also presents a period in development marked by lower quality friendships for youth with ID (Tipton, Christensen, & Blacher, 2013) or ASD (Mazurek & Kanne, 2010). Interestingly, social skills and behavior problems in early adolescents have been shown to predict higher rates of friendship quality (warmth and closeness) and lower rates of internalizing behavior above and beyond disability status (Tipton et al., 2013). Thus, among the biggest concerns for youth with developmental disabilities during this transition into later adolescence are social isolation, lack of acceptance, and loneliness (LaFontana & Cillessen, 2010). Though high school students with ASD often minimized their own reports of the severity of their bullying incidents, they also withdrew socially from peer relationships, contributing further to their social isolation (Fisher & Taylor, 2016). As social demands increase in adolescence, strong social skills and quality peer relationships may be important protective factors upon high school entry, as demonstrated in the literature on TD youth (Bowker, Rubin, Burgess, Booth-LaForce, & Rose-Krasnor, 2006; Schohl et al., 2013).

### 1.1. Present study

While previous research used cross-sectional data to highlight a number of bullying-related challenges for youth with ASD or ID, the present study focused on how these youth experience victimization as they transitioned from early into later adolescence. Of particular interest was the relationship between bullying victimization and internalizing behavior problems across two time points – youth ages 13 and 15 years.

The primary research questions in this follow-up study include: (1) Descriptively, what do adolescents and their parents report about youth victimization and quality of friendships at youth age 15; (2) Are these reports consistent from middle school (age 13) into high school (age 15); and (3) To what extent are risk factors (i.e., internalizing behavior problems and conflict in friendships) related to bullying victimization over time?

## 2. Material and methods

Participant youth with intellectual disabilities (ID) and those who were typically developing (TD) were part of a larger longitudinal study, ongoing since they were three years old. The study, in collaboration with three major universities across the west and

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