## Kids' Coping Ability Minimizes Peer Victimization

BY DIANA MAHONEY

New England Bureau

BOSTON — Adolescents' beliefs in their own coping abilities can help mediate the psychosocial impact of relational victimization in school, results of a study have shown.

Students who can disengage themselves from the role of victim, who avoid self-blame, and who use active coping strategies—such as addressing problems or seeking help—are less vulnerable to the negative ef-

fects of peer behavior that is purposefully intended to damage social relationships, such as exclusion or rumor spreading, Puneet Singh reported in a poster presentation at the biennial meeting of the So-

ciety for Research in Child Development.

Such relational victimization by peers has been identified as a significant predictor of internalizing distress, including depression and social anxiety, among schoolage children. Coping self-efficacy, which refers to an individual's belief in his or her

ability to handle adversity, has consistently been shown to be central in an individual's ability to recover from distressing events, said Ms. Singh, a doctoral candidate at Macquarie (Sydney) University.

To examine the relationship between coping strategies and the negative outcomes of relational victimization in adolescents, Ms. Singh and her colleagues considered the experiences of 2,162 predominantly white middle-class children recruited from 18 schools and four grades (sixth to ninth). All of the students completed a three-item peer relational victimization survey and a coping self-efficacy questionnaire that included items relating to active coping strategies, avoiding negative construal (self-blame), victim role disengagement, positive construal, and avoiding aggressive behavior.

In addition, the investigators measured social anxiety and depression using the Social Anxiety Scale for Adolescents (SAS-A) and the Center for Epidemiological Studies for Depression Scale for Children (CES-DC), and they conducted hierarchical multiple regression analyses to examine the contribution of coping self-efficacy in predicting social anxiety and depression

The results showed that relational vic-

timization predicted both depression and social anxiety, Ms. Singh said.

When the models were controlled for age, gender, and relational victimization, coping efficacy was associated with an 18% reduction in social anxiety levels and a 9% reduction in depression scores, she said.

"A student's efficacy for victim role disengagement, avoiding self-blame, and active coping mediated the relationship between relational victimization and both social anxiety and depression," Ms. Singh noted.

Teaching children "to avoid blaming themselves and to develop and practice active coping strategies, including problem solving, support seeking, conflict resolution, and assertiveness should be central to intervention efforts," she said.

## Positive Parenting Helps Keep Early-Maturing Girls on Track

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BY DIANA MAHONEY

New England Bureau

BOSTON — Positive parenting practices can minimize the impact that negative peer influence has on early-maturing girls and thus can reduce the risk of externalizing problems, results of a study have shown.

For this reason, psychosocial interventions targeting at-risk girls should focus on the parent-family relationship, Sylvie Mrug, Ph.D., reported in a poster presentation at a meeting of the Society for Research in Child Development.

Previous studies have shown that early puberty in girls predicts disruptive behavior, delinquency, and earlier initiation of substance use, and that psychological immaturity and affiliations with older, more deviant peers exacerbate these problems, said Dr. Mrug of the University of Alabama, Birmingham.

To determine the degree to which parenting practices buffer or amplify these effects of early puberty, Dr. Mrug and colleagues analyzed data on 330 fifth grade girls from the three metropolitan areas who participated in phase I of Healthy Passages, a multisite longitudinal study of adolescent health and behavior. The mean age of the girls in the study was 11.25 years. Thirtynine percent were African American, 35% were Hispanic, and 19% were white; the remaining participants were other ethnicities.

Outcome measures included onset of menarche; caregiver-reported parental monitoring; self-reported aggression (physical, nonphysical, relational); delinquency (fighting, running away from home, truancy); maternal nurturance; and communication with parents about anger, aggression, smoking, puberty, and sex.

As in previous studies, significant, independent associations were observed between early maturation and delinquency plus all three types of aggression, according to Dr. Mrug. The results of multiple hierarchical regression analyses showed that parental monitoring, maternal nurturance, and effective

communication each moderated this link.

"Early maturation predicted delinquency at low levels of monitoring, but not when parental monitoring was high," Dr. Mrug said. "Early maturation predicted higher levels of aggression only when combined with low levels of nurturance, and [early maturation] predicted higher levels of aggression only when girls reported lower levels of parental communication," she said.

From these results, "we can conclude that positive parenting offers some protection against the various externalizing problems associated with early puberty in girls," said Dr. Mrug. It's possible that parental monitoring may limit affiliations with more deviant peers and opportunities for delinquent behavior, and that parental nurturance and communication "may improve coping and refusal skills, and thus decrease susceptibility to negative peer influence."

Interventions that promote and encourage open communication with parents as well as those that foster greater parental involvement are likely to be most successful, Dr. Mrug suggested.

## Multiple Types of Abuse Lead To PTSD, Other Comorbidities

BY ROBERT FINN
San Francisco Bureau

HOLLYWOOD, CALIF. — The more complex a child's victimization history, the more likely he or she is to experience multiple negative outcomes, including posttraumatic stress disorder, depression, and substance use, Benjamin E. Saunders, Ph.D., reported at the annual meeting of the International Society for Traumatic Stress Studies.

In a longitudinal study of 530 families reported to the U.S. Navy's Family Advocacy Program for child sexual abuse, child physical abuse, or partner violence, more than two-thirds of the children interviewed reported experiencing several different types of trauma. The average child experienced 2.26 different types of trauma, and 18% of the children experienced four or five different types, said Dr. Saunders of the Medical University of South Carolina, Charleston.

He emphasized that, for the purposes of the study, a child who experienced

many instances of physical abuse but no other forms of victimization would be classified as having experienced only a single type of trauma. Data were collected from 12 major naval installations.

Of the 195 children between the ages of 7 and 18 years (mean age, 12.2), 67% were victims of personal assault, including 29% who were victims of sexual assault, 34% who were victims of physical assault, and 48% who were victims of physical abuse. In addition, 80% of the children had witnessed violence, including 70% who had witnessed community violence and 44% who had witnessed domestic violence.

Girls were significantly more likely than boys were to be victims of sexual assault (46% vs. 1%) and to witness domestic violence (49% vs. 34%), but otherwise there were no significant gender differences in the subcategories of violent exposure, Dr. Saunders reported at the meeting, which was also sponsored by Boston University.

The children were assessed at four time points—the first at 2-6 weeks after the initial report and the fourth, 36-40 months after the report. At the first time point, and after researchers controlled for gender and age, the number of victimization types significantly predicted all five measured outcomes—diagnosis of posttraumatic stress disorder, diagnosis of depression, problems with alcohol, problems with other drugs, and participation in a delinquent act, he said.

After 3 years, significant associations were found between the number of victimization types and all but one of those outcomes. Only problems with alcohol failed to show a significant relationship with the number of victimization types, after controlling for gender and age.

In view of the high prevalence of multiple victimizations, one message is that therapists would be wrong to focus on only a single type of victimization in a child, Dr. Saunders said.

