

Chapter 7

Growing up in Adverse Family Contexts: Risks and Resources for Adolescent Development



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Introduction

Childhood and adolescence are crucial periods of the life cycle and the basis of the ulterior stages of human development. The World Health Organization (2020) estimated that more than 30% of the worldwide population are children and adolescents. The healthy development of children and adolescents depends on diverse supportive systems in which they grow, such as family, school, and community. Positive adolescent development involves connecting with others and establishing positive relationships, dealing with normative and non-normative situations, solving problems, and learning to manage emotions. Despite adolescents being considered a healthy group, between 10% and 20% of adolescents in the world experience mental disorders; however, they are not diagnosed and only around 9% of them receive some type of treatment. In Latin America, adolescents represent 30% of the population, and most psychological development issues are associated with adverse conditions such as poverty. Children and adolescents from lower socioeconomic levels living in urban, suburban, and rural settings are the most vulnerable; thus, researchers and practitioners have been addressing their development from different perspectives.

Latin America represents a wide range of cultural contexts that frame the development of children, adolescents, and families; nevertheless, some macro-structural conditions such as poverty seem to be a common factor, linked to high marginalization and low human development rates, of a significant population percentage in the area. In the Americas, around 10% of people have 48% of the global income,

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whereas the poorest 10% only have 1.6%, which implies inequitable opportunities for the development of families, children, and adolescent in many countries (e.g., Brazil, Bolivia, Chile, Guatemala, Ecuador, Nicaragua, Peru, Argentina), including Mexico, where even the urban poverty has also shown an increase of around 40% to 59%, depending on the measurement method used (Boltvinik & Damián, 2016; Salinas et al., 2018).

These living conditions imply multiple adversities associated with pressure and stress for most Latin American families who mostly have children and adolescents. In the last decade, 51.7% of the population was living in poverty, and also the rate of urban unemployment in Latin America from 1998 to 2006 was 10.4%, (CEPAL, 2018; UNICEF, 2021), resulting in parent migration, increasing the informal economy and the consistent incorporation of women and family mothers to the “productive” country economy. Therefore, the “traditional family” setting has suffered transformations giving way to new family structures to face the imperatives of globalized world requirements. In the 1970s, in Latin America, the family was formed by the father, generally, as provider and head of the family, whereas the mother was the primary caregiver and was responsible for raising the children (Kliksberg, 2015). In addition, the current COVID-19 pandemic has contributed to rising poverty in low and lower- middle income countries (LMICs) in the world including Latin America (World Bank, 2021). On the other hand, in Mexico, the National Institute of Statistics and Geography (INEGI, 2018) reported that around 97 million people live in families, of which 65 million are nuclear, 30 million are extended families, and two million people live in other kinds of families, suggesting that structures and family functioning continues to change, influencing directly or indirectly the developmental trajectories of its members. On the other hand, Mexico’s National Population Council (CONAPO, 2015), highlights an increase in the number of Mexican homes that are provided by mothers and that 40% of households are economically supported only by women.

From science of development and relational developmental systems theories and ecological perspective (e.g., Cicchetti, 2010; Lerner et al., 2013; Sameroff, 2010), particularly, from the ecological-transactional model, understanding the trajectories and adaptation outcomes of adolescent development requires considering the context in which the adolescents live. Thus, poverty is a distal contextual factor that represents a risk for adolescent development. Recurrent economic crises in Latin America have affected families and adolescents, implying multiple risks and challenges, increasing their vulnerability. However, evidence shows that adolescents are capable of showing good adaptation, facing stress, risk, and adversity depending on the interplay of personal and family factors maintaining mental health and well-being. Thus, the objective of this chapter is to present a theoretical-conceptual analysis of adolescent development from classic and new research, showing evidence that personal and family characteristics are associated with both adaptive and maladaptive processes in adverse contexts. Findings in Latin America are presented, as well as results from a large project with Mexican adolescents from risky contexts, related to poverty and marginalization, facing stress and adversity.

An Overview of the Ecological-Systemic Framework of Adolescent Development

Developmental science is a broad multidisciplinary field including the intersection of diverse social and health disciplines such as psychiatry, psychology, education, and neurosciences, integrating diverse theoretical and methodological paradigms (Lerner & Steinberg, 2009). The purpose of the science of development is the understanding of the complex variability of developmental trajectories and outcomes of children, adolescents, and families in diverse conditions and contexts (Lerner, 2018; Masten, 2015). Research on child and adolescent development has been changing, and many theoretical and methodological models have emerged, most of them based on the ecological-systemic perspective (Bronfenbrenner, 1986) and the relational development systems theories (e.g., Overton & Lerner, 2014). Developmental researchers (e.g., Cicchetti, 2013; Lerner et al., 2013; Masten, 2018; Sameroff, 2010) have focused on the complex interaction of individual and context to understand adaptive and maladaptive developmental outcomes in both diverse normative and non-normative situations. Longitudinal and cross-sectional investigation have provided multi-causal and multi-level models for understanding the underlying mechanisms involved in the variability of developmental trajectories and outcomes across domains, times, places, and cultures (Catalano et al., 2017; Conger et al., 2010; Goodrum et al., 2020; McDonald et al., 2020; Wadsworth et al., 2013).

Research has provided evidence to understand that adaptation and resilience are dynamic processes that imply the interplay of a set of risk-protective personal and contextual factors across proximal and distal ecological levels, in which family is a proximal factor playing a central role in adolescent development (Masten & Monn, 2015; Sameroff & Rosenblum, 2006; Walsh, 2016). From a developmental system viewpoint, the family has been defined as:

1. A natural group with a systemic structure defined from a complex relational context with changing interactions among its members (Minuchin et al., 2007).
2. A self-regulatory system able to adapt to diverse individual and family normative and non-normative events of either individuals or the entire family across its own life cycle (McGoldrick et al., 2016).
3. A semi-opened system in interaction across external ecological systems (Bronfenbrenner, 1986).

Therefore, family functioning is a complex process, resulting from transactional rules between its members, in a dynamic interaction between change and continuity (McGoldrick et al., 2016; Minuchin et al., 2007; Patterson, 2002). Furthermore, there are many theoretical and empirical models regarding family functioning, some of them focused on normal and transitional processes and others trying to explain family functioning in extraordinary and stressful situations. Olson's Circumflex Family Model (Olson, 2000; Olson & Lavee, 2013)) underlines as central mechanisms: cohesion, communication, flexibility, and conflict and problem solving, as they are linked to adaptive and non-adaptive children and adolescent outcomes

depending on the characteristics of each one of them. For instance, high to moderate levels of cohesion contribute to enhancing the developmental tasks during adolescence and accomplish a sense of own identity and belonging (McGoldrick et al., 2016), whereas an over-involvement, or, on the contrary, an emotional disengagement can be displayed in adolescents as a false sense of independence; thus, they could perceive it as parents' neglect and lack of support (Minuchin et al., 2007). To understand family functioning and adaptation processes in thriving adverse situations, family stress models such as the "ABCX" (McCubbin & McCubbin, 2013) and the family stress theory (McCubbin & Patterson, 1982), as well as the theory of family resistance (Patterson, 2002), have been useful theoretical-methodological frameworks to explain how some families react in daily and extraordinary situations supporting their children to face critical and stressful experiences across the life cycle (Amfani-Joe, 2012; Walsh, 2016).

On the other hand, according to assumptions of family communication patterns theory (Koerner et al., 2017; Schrodt & Shimkowski, 2017), the communicational patterns among family members reflects family functioning, including parenting styles. As communication involves digital and analog communication, the perception of the relationship between adolescents and parents plays an important role during adolescence (Ebbert et al., 2019; Soenens et al., 2019). Moreover, communication covers a symbolic, instrumental, and emotional function, supporting the development and mental health of adolescents. Family adaptability or family flexibility is another mechanism to help the family to fit and react in a proper way to transitional changes and challenges of the life cycle; moreover, it is the ability to face situational stress, non-normative life events, or adverse situations in the lives of the family or its members (McGoldrick et al., 2016; Olson & Lavee, 2013). These mechanisms involve organizational rules helping to accomplish the developmental tasks and enhancing family to adapt to daily life, as well as to significant transitional changes.

Adolescent Development in Adverse Contexts: Beyond Adaptation

For decades, developmental ecological-systemic approaches have considered that poverty is a distal risk factor associated with other proximal risk factors including family, in cumulative cascade processes affecting the trajectories and outcomes of children and adolescents (Evans & De France, 2021; Duncan et al., 2015; Garnezy, 1991; Masten & Cicchetti, 2010; Rutter, 2012; Sameroff, 2010). These risky processes linked to disadvantaged backgrounds can go on across generations, such as maltreatment and child abuse (Thornberry & Henry, 2013; Russotti et al., 2021), negligent parenting and domestic violence (Riley et al., 2017; Suh & Luthar, 2019), parental and family conflicts (Wadsworth et al., 2016), as well as antisocial behavior (Catalano et al., 2017; Moffitt, 2017) and risky behaviors in adolescence, such as

drug abuse (Handley et al., 2015). Thus, family issues are basic factors in the developmental and adaptation processes of children and adolescents (Soenens et al., 2019). However, the investigation has been moved from search markers of risk to search promotive and protective factors involved in risk-protective mechanisms, encompassing positive adaptation of adolescents under adverse conditions (Gaylord-Harden et al., 2010; Luthar, 2006; Rutter, 2012; Sameroff, 2009). Therefore, the study of resilience has been structured around some key concepts such as adaptation, multifinality, equifinality, protection, risk, stress, and adversity (Cicchetti, 2013; Luthar, 2006; Masten & Cicchetti, 2016).

Adaptation has been defined in many ways, in terms of external adaptation involving successful functioning in all domains, such as academic achievement, prosocial behavior, and social competence according to an external criterion, or internal adaptation involving well-being (Masten, 2015; Masten & Obradović, 2006). Likewise, a positive adaptation involves cognitive, emotional, and social regulation processes that translate into good functioning according to what is expected for a given age period and cultural context (Burt et al., 2008; Masten & Tellegen, 2012). Adolescent adjustment or adaptation also used to be associated with the absence of significant emotional and behavioral problems and psychopathology according to a standard (Achenbach, 2015; Luthar, 2006). It should be noted that one can be competent in some domains and fail in others; however, failures in core domains, such as social competence, can lead to psychopathology (Masten & Cicchetti, 2010, 2016). In sum, three criteria can be considered adaptation:

1. The presence of certain competencies according to the developmental tasks.
2. Good functioning within a norm and a cultural context,
3. Absence of significant emotional and behavioral problems or psychopathology.

Therefore, resilience goes beyond adaptation to ordinary situations; it implies positive adaptations under adverse, stressful, and risky situations that regularly involve non-normative or unexpected events in the adolescent and family life cycle (Infurna & Luthar, 2018; Masten & Cicchetti, 2016).

Hence, there are many explanatory models of resilience; most of them assume that development involves an interplay between diverse, proximal, and distal risk, and protective factors across ecological systems. The compensation model of resilience (Masten, 2015), inoculation stress theory (Malhi et al., 2019; Rutter, 2013), and the cumulative cascade risk (Burt et al., 2008; Evans & De France, 2021; Rutter, 2012), seems to be more useful approaches to understanding adaptation and resilience, as well as psychopathology in adolescents living in adverse contexts such as poverty. Research with adolescents from vulnerable population and risk contexts (e.g., Handley et al., 2015; Moffitt, 2017; Santiago et al., 2012) has identified issues associated with family functioning, such as: low socioeconomic status (SES); low level of schooling parents schooling; low parent occupation profiles; low living standard; unemployment of the main provider; lack of stability in the family configuration; mental illness precedents in some of the parents; sexual abuse; intra-family violence; antisocial behavior and crime; alcohol and drugs in the parents;

and suicidal behavior precedents in the family that tend to increase the effect of other internal or external stress sources, creating a synergistic effect and giving rise to discontinuities in adolescent development.

Moreover, families from poverty backgrounds imply different levels of risk as there may be a source of multiple stressful events, and on the contrary provide few sources of protection. Diverse studies (e.g., Conger et al., 2010; Golberstein et al., 2019; Leventhal & Brooks-Gunn, 2000; Sameroff & Rosenblum, 2006) indicate a set of useful sociodemographic markers to identify poverty: family income level; schooling and occupation of the parents; mother's age at the first pregnancy; and family structure and size. The negative impact of stress, adversity, and traumatic experiences within the family on adolescent development has been widely documented. Neglected or maltreated children are more likely to develop biological and psychological problems, for instance, depression, drug abuse, and antisocial behavior (Bacchini et al., 2011; Cicchetti & Handley, 2019; Riley et al., 2017); as well as the physical and sexual chronic child and adolescent negative life events in the family (e.g., by relatives or parents), which are associated with severe depression, self-harm, and suicidal behavior (Olshen et al., 2007; Paul, 2018).

Multifactorial research aimed at studying adolescents and families mechanisms of adaptation with low economic resources and conditions of poverty (e.g., McDonald et al., 2020; Perzow et al., 2018; Santiago et al., 2012; Santiago & Wadsworth, 2009), include individual and family factors such as adolescent, parental, and family coping strategies, as well as other aspects linked to the poverty context, such as support networks, characteristics of the neighborhood (Sanders et al., 2017), that can arise among the risky conditions, showing that these can also be protection factors and give positive endings as a result; such is the case of coping, the perception of the life events, and the social support. Therefore, the family system represents a context of multiple factors across multiple-level systems, operating on a continuum of risk and protection, for example, the parental support and a family climate can lead to either adaptive or maladaptive outcomes (Aaron & Dallaire, 2010; Conger et al., 2010). Many adolescents living under conditions of poverty grow up in a troubled family environment with communication difficulties, a low level of support, and cohesion, associated with emotional problems (Rodriguez et al., 2015). Families characterized by the absence of parenting support and negative parenting practices enhance internalizing and externalizing problems (Razavi & Razavi, 2014; Schleider & Weisz, 2016; Smokowski et al., 2015). In contrast, family cohesion (Goodrum et al., 2020), flexible communication patterns (e.g., Schrodtt & Shimkowski, 2017), and positive parenting practices (Karreman et al., 2009; Soenens et al., 2019; Smokowski et al., 2015) have been protective factors linked to resilience.

Stress models particularly related to economic strains (e.g., Conger et al., 2010; Duncan et al., 2015) propose that family economic conditions contribute to explaining how low SES and economic hardship can directly or indirectly impact adolescent development through the deterioration of marital relations and parenting. Based on the model of Conger's model (Conger et al., 2010), recent studies have focused on understanding the complex relationship between poverty, family stress,

and mental health and psychopathology in adolescence (e.g., Evans & De France, 2021; Kim et al., 2016; Wadsworth et al., 2016). They have tested several models showing that children and adolescents can display diverse trajectories depending on the combination of family and individual factors in which coping plays a central role, moderating the economic pressures on adolescent outcomes (Amfani-Joe, 2012; Wadsworth et al., 2013). They also show that disengagement coping is linked with internalizing and externalizing problems (Evans & Kim, 2013; Santiago et al., 2012), whereas engagement coping can be a moderator even of the family difficulties, as well as the economic pressure and adolescent outcomes (Santiago & Wadsworth, 2009), moderating the negative effect of the poverty and marital conflict, contributing to the mental health of adolescents.

In summary, living in poverty-stricken neighborhoods and with economic hardship frequently imply growing up in an at-risk family context, within a cascading risk process. It is likely that adolescents having to deal with multiple stressful events with medium- and long-term consequences in diverse domains, for instance, affecting neuropsychological development (e.g., executive functions), and likely producing negative pathways and maladaptive outcomes (Buckley et al., 2019; Evans & De France, 2021; Handley et al., 2015). Nevertheless, the neurobiological and behavioral plasticity during adolescence contributes to good adaptation despite risk and adverse experiences, which means that they are resilient (Evans & Kim, 2013; Masten, 2018; Rutter, 2012). Family can give support to an adolescent with a low level of achievement or who was assaulted. In this process, the family can be crucial for positive adaptation or resilience. Nevertheless, there are also variables in the “individual system” that can help to minimize the negative effect of parental and family stress on adolescent outcomes. For example, coping and perceived social support are essential individual resources as they assume a mediating role between distal factors such as poverty, as well as the crisis and family conflict situations and the adaptation of adolescents.

Moving Toward Resilience: Findings in Latin America

The global economic crisis in many countries, especially those of Latin America, considered by the World Bank (2021) as LMICs, have influenced the instability and drop in family income that has caused family members to mobilize to increase their economic capacity. This situation has produced changes in the organization of society and the family dynamic, for example, an increase in the participation of women in the household income, sharing economic responsibility with husbands or couples. Likewise, these changes have led to unemployment and migration, with consequences for the family system, such as economic hardships, school drop-out, families with single parents, divorce, maltreatment, orphanhood, parental neglect, abuse, and maltreatment. In many Latin American countries, the recurrent economic crises have generated a situation in which many families are inserted into what is known as the “poverty circle” proposed by Birch and Gussow (Garmez, 1991), as

poverty represents a chronic stressor associated with other adversities in a cascading process, as Rutter indicates (Rutter, 2012). Hence, the families must face diverse environmental challenges, many of them, in turn, linked to risk factors of the macrosystem such as poverty, social exclusion, low human development indexes (HDIs), kidnaping, displacement, migration, violence, delinquency, and crime (UNICEF, 2021). Kliksberg's studies in Latin America (Kliksberg, 2015) show multiple structures and types of families, most of them living in marginalized settings and facing diverse stressful events. In spite of this, Latin American families and adolescents seem to be able to overcome adverse experiences, showing good adjustment.

Macro-structural factors (e.g., social, economic, and political issues), such as lack of a job and opportunities to grow, a low index of development, violence, and delinquency, are a few problems associated with Latin American poverty and marginalized contexts. Therefore, the configuration and dynamic of families, have been changing and adapting over time, thriving adversities and being resilient in most cases. A nuclear or intact family is no longer the most frequent type of family; the single-parent configuration has become common, as well as extended families, trying to cover specific and contextual needs of Latin American families. The question is, how do adolescents and families face these situations? The answer is not quite simple, as it involves multiple domains, and multilevel and multi-perspective research that requires longitudinal or complex cross-sectional designs to be conducted.

In the last few decades in Latin America, under the large umbrella of "Developmental Science," research from an ecological-systemic perspective has expanded, showing the importance of family context in child and adolescent outcomes (e.g., Acevedo & Hernandez-Wolfe, 2020; Ierullo, 2015; Tapia et al., 2012). The chronic nature of poverty makes it a major risk for the development of adolescents living in multi-problem Latin American families. The more frequent family difficulties are related to divorce, economic hardship, negligent parenting, family violence, behavioral and emotional problems, and migration; most of them are related to the most prevalent mental health problems, such as alcohol abuse, use of drugs, anxiety, depression, and suicide (Pan American Health Organization (PAHO), 2021), nevertheless, many adolescents grow up showing good adaptation and resilience.

Regarding violence, Colombian research highlights the importance of family cohesion and the sense of belonging of adolescents in circumstances such as violence and displacement, or under economic pressures and unemployment (e.g., Acosta et al., 2019), illustrating that adolescents' perception of the family union can help to deal with these kinds of negative situations. Additionally, studies in Mexico with the rural and marginalized population (e.g., indigenous groups versus mestizo group), reported that family cohesion and parental warmth relationships were related to a better lifestyle and well-being, with the mestizo group scoring higher than the indigenous group and also showing better adjustment levels (Campos-Uscanga et al., 2018). Recent research with Chilean marginalized youth facing a disaster situation (Salgado & Leria, 2018) observed that exposure to violence, housing deterioration, and job loss were the strongest predictors of psychopathological

symptoms such as depression, anxiety, somatization, obsession-compulsion, although positive reactions were also observed such as problem solving.

Studies in Colombian families, facing various adverse situations reported that 57% of families in marginalized settings are at risk either because of their economic situation and/or conflictive family relationships (e.g., Giraldo, 2014); likewise, concern risk families, it is reported that 40.7% are functional families, 27% presented mid-family dysfunction, 20.8% show moderate dysfunction, and 11.7% severe dysfunction (Rueda et al., 2010). Moreover, forced displacement is a psychosocial problem also associated with 24% of mental health disorders, including suicidal ideation; however, adolescents also presented resilience, with good family functioning and social support the most important protective factors (Cardozo-Rusique et al., 2013). In many cases, active coping and social and family support, for example, helped to deal with stressful family events, such as divorce or child separation (Arrieta et al., 2012; Cadavid & Amarís, 2007). Findings with Ecuadorian families showed that low or poor functioning with negative communication patterns, characterized by low negotiation as well as disengagement structures are related to behavioral problems, such as alcohol and drug abuse in adolescents than families with higher levels of functioning (Ramírez & Andrade, 2005; Sigüenza, 2015).

Family issues related to poverty, low economic status, parents' educational and cultural resources, are associated with parenting problems in Mexican troubled adolescents. Parents of adolescents with depressive symptomatology present parenting practices mainly characterized by psychological control and rejection (Andrade et al., 2012). Conversely, positive parenting practices, such as open communication, and a warm parental relationship, have been associated with a lower number of internalized and externalized problems and mental health (Betancourt & Andrade, 2011; Méndez et al., 2013; Ruvalcaba et al., 2016). Besides, a positive family climate and positive parenting have been associated with better academic-social adjustment in school and clinical adolescents of low SES (Márquez & Barcelata, 2016), whereas low academic profiles were associated with rejection as the main parenting practice (e.g., González et al., 2017). Regarding competence and resilience with Mexican teenagers living in rural and urban poverty, for example, social behavior was predicted by social competence and positive family, and peer support (Palomar & Victorio, 2018), whereas the main predictors of academic success were the father's parenting practices, such as behavioral control, and warm and supportive family relationships (Palomar & Victorio, 2017). On the other hand, high levels of internalizing and externalizing behaviors were associated with more stressful events and a high level of negative parenting, with the lowest levels of personal resources in adolescents living in a rural area (Palomar & Victorio, 2016).

Previous reviews examining family processes (e.g., Ramírez & Andrade, 2005; Rodríguez et al., 2007) also suggest that family cohesion with a higher level of parental communication might increase resilience in adolescents, comparing users and non-users of drugs. For instance, low parental control and supervision with a negative family climate were also linked to delinquency in adolescents (Carrillo et al., 2016). Conversely, in Mexican adolescents with a low SES and suicidal risk, social support, union, and family support were protective factors (e.g., Rivera &

Andrade, 2006); however, personality can also be a protective factor in adolescents with multiple stressful life events and with suicidal behavior (Arenas-Landgrave et al., 2019); thus, intervention programs have been developed to promote resilience in the school setting. Findings in Peruvian families (Villarreal & Paz, 2017) showed similar results, supporting the notion that cohesive and flexible families might promote adolescent resilience.

Migration is another important issue affecting the development of adolescents, parents, and families in Latin America as it forces displacements and leaving home in search of a better quality of life. Experiences of ambiguous losses in adolescents who remained in the origin country, with one or both parents migrating were examined by Jerves et al. (2020). For instance, the absence of a father in immigrant Mexican families in the USA was the stronger factor for stress than other variables (Falicov, 2012). Linked to migration in Mexican people, mothers have left home, assuming new roles to face economic, and social challenges, with grandparents becoming the main caregivers of children and adolescents (Pick et al., 2011). Nevertheless, many family dynamics of Mexican migrants are characterized by cohesion of the family, social, and community support climate, promoting individual and family resilience (Rivera et al., 2013; Vidal de Haymes et al., 2011).

Finally, it is worth mentioning recent research in the field of resilience based on Bandura's Social Learning Theory. Acevedo and Hernandez-Wolfe (2020) take up the construct of "vicarious resilience" (Hernandez-Wolfe, 2018) to understand how Colombian families can help each other through experiences of observational learning. Their work with community mothers, which provides mutual assistance, as well as to their children, and their own families, is an example of the usefulness of the systemic-ecological perspective as a framework for multilevel research of adolescent developmental trajectories and outcomes, and for designing evidence-based intervention.

Findings from "Health, Adolescence, and Family Research" and Further Directions

Some of the findings presented below come from a large research project with Mexican adolescents and families as part of a multidisciplinary research group "Health, Adolescence, and Family," composed of psychology, psychiatry, and education researchers from the National Autonomous University of Mexico (UNAM) in collaboration with other educational and mental health institutions. Some studies have been supported by the Program for Research and Technological Innovation Projects (PAPIIT-UNAM), integrating diverse studies across years. This work has been carried out from the developmental perspective, particularly from an ecological-systemic macro-paradigm. Most of the studies have included adolescents from 12 to 21 years old and families from multiple contexts and risk conditions, predominantly from the metropolitan area of Mexico City and suburban bordering states,

characterized by a low index of development ranking, according to the availability of health and educational services, infrastructure, and housing, as well as the quality level of the urban environment (CONAPO, 2015). Some general questions that have guided our studies on the adaptation and resilience processes of adolescents and families with different poverty-based adversities (e.g., Barcelata & Márquez, 2017): How do they experience or perceive their socioeconomic condition? What is the key risk-protective factors involved in adaptation and resilience? How do these factors work in different risk contexts? In addition to intrinsic risks of poverty, what other types of adversities do adolescents and families experience? Can risk-protection “profiles” be established? How might an intervention change negative developmental trajectories and improve resilience in disadvantaged youth and families, given the complex contexts of poverty? Thus, Fig. 7.1 presents a general scheme with some variables involved in our research regarding adolescent outcome in family and poverty contexts presented in this chapter.

Hence, we have conducted cross-sectional studies with community and clinical groups living in urban and sub-urban poverty settings based on ethical principles for investigation (Sociedad Mexicana de Psicología, 2009); thus, informed consent was applied in all cases. We have noted that a large proportion of adolescents (60%) have experienced more than two negative events (Barcelata & Lucio, 2012), supporting previous data from a Metropolitan survey of adolescents (Benjet et al., 2009), which shows that around of 68% of youths in Mexico City had experienced at least adversity or living under conditions of chronic adversity conditions and 17% had experienced some type of adversity linked to psychopathology. In most of our studies, the level of poverty was assessed using several criteria of low SES, for example, household income, and parents’ schooling and occupation, as well as the

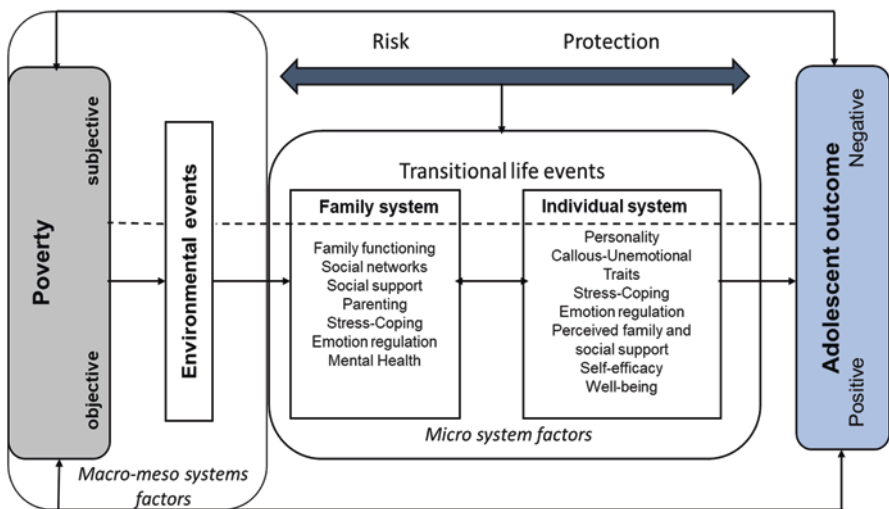


Fig. 7.1 Research schema of personal and family factors involved in adolescent outcomes in a poverty context

adolescents and parents' subjective appraisal of economic hardship such as lack of money to buy basic products, such as food, or to access to leisure, etc. (Conger et al., 2010; Duncan et al., 2015; Wadsworth et al., 2005). Comparative studies to examine negative and positive life events and the interaction effect among sex, age, and clinical versus community samples (sex*age*sample*) from marginalized settings (e.g., Barcelata et al., 2012b) reported that a clinical sample of adolescents presented more adverse life events, with the highest scores in family and personal domains than the community sample did, with the youngest girls scoring higher in negative family life events than boys, whereas community samples presented a lower number of negative life events, but more negative life events in the social domain than expected, in concordance with the findings of others (Evans & De France, 2021; Leventhal & Brooks-Gunn, 2000). These data suggest that stressful life events might be a significant risk leading to psychopathology, in a cumulative process with other adversities related to low SES. Moreover, studies revealed that around 38% of adolescents showed a good level of adaptation according to measures of adaptation or functioning (e.g., Minnesota Multiphasic Personality Inventory-Adolescent; Youth Self Report [YSR]), in mostly healthy domains (Barcelata et al., 2012a, 2017), and good functioning with less internalizing and externalizing of problems and more resources, even in clinical samples (Márquez & Pérez, 2019), which can form the basis of psychotherapy.

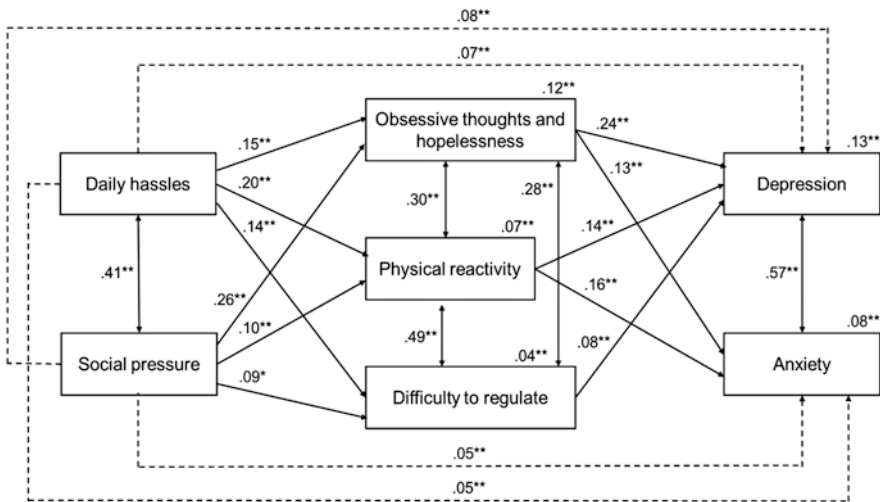
Active coping has been the central protective factor from economic hardship, as well as the best resilience predictor among variables such as social support (Barcelata, 2020; Barcelata et al., 2012a, 2016; Barcelata & Rodríguez, 2017; Rodríguez & Barcelata, 2020). For instance, the contribution of coping, perceived control, self-efficacy, positive thinking, and social support as predictors of mental health outcomes of adolescents were tested using correlational and hierarchical regression analyses (Barcelata & Rodríguez, 2017). Data from high school students from the marginal metropolitan zone of Mexico City ($N = 913$; $M_{\text{age}} = 14.91; \pm 1.47$) revealed that perceived control and family support predicted internalizing behaviors, explaining 37% of variance, and externalizing behaviors with 28% of variance explained. Conversely, positive features (e.g., prosocial behavior and positive self-concept), were positively predicted by positive thinking, perceived social support, and self-efficacy, explaining 23% of variance. However, a few of both internalizing and externalizing broadband of YSR were predictors, depending on each specific behavior (e.g., somatic complaints/rule breaking); moreover, perceived control was the best predictor of both negative and positive outcomes. A subsequent study (Rodríguez et al., 2020) tested the predictive role of personality and emotion regulation on adolescents' coping strategies ($N = 848$; $M_{\text{age}} = 15.02; \pm 1.60$). Unexpected, personality traits such as consciousness and agreeableness showed a greater contribution ($R^2 = 0.324$; $F = 80.765$; $p < 0.001$) than emotion regulation strategies, such as cognitive change, recognition of positive and negative emotions ($R^2 = 0.197$; $F = 41.320$; $p < 0.001$).

Given the controversies of whether emotion regulation leads to coping, or coping precedes emotion regulation, even more, emotion regulation is part of coping process (e.g., Compas et al., 2014; Gross, 2015). Recently, a cross-sectional study with

sub-urban high-school adolescents (Rodríguez et al., 2021) was conducted ($N = 523$; $M_{age} = 13.67$; ± 0.786) and several mediation models were tested using multivariate and factorial analyses (e.g., Sobel’s test; structural equations modeling [SEM]). Significant direct and indirect effects were observed in models, with the highest explained variance ($F(2-520) = 58.32$, $p < 0.001$) smaller than the total effect, explaining 18% of variance. Difficulty with emotion regulation was an indirect effect mediating the role of social pressure and hopelessness (estimate = 0.066; Sobel test = 4.16, 95% CI [0.02, 0.07]; $p < 0.001$) with a low total effect of social pressure on obsessive thoughts and hopelessness ($\beta = 0.260$; $p < 0.001$).

Likewise, the role of coping and emotion regulation strategies was tested in a sample of a marginalized area of Mexico City ($N = 770$; $M_{age} = 15.03$; ± 1.59). Several models of stressful events and internalizing and externalizing outcomes were computed through SEM. The model presented is an example of one of them (Fig. 7.2). Good model fit indices were obtained ($X^2 = 11.523$ [$p = 0.42$; $df = 5$]; GFI = 0.996; CFI = 0.994; RMSEA = 0.04 [0.007–0.07]). Significant direct effects ($p < 0.01$) were observed of social pressure on obsessive thoughts and hopelessness daily stressors on physical reactivity, obsessive thoughts and hopelessness on depression, and physiological responses on anxiety. We observed significant indirect effects ($p < 0.01$) of the daily stressors on depression but little significant effect on anxiety (unpublished data).

Data from all models provides a better picture of stress responses in marginalized youth; however, surprisingly, the low contribution of perceived stress was observed in all models. Based on the stress inoculation model of resilience, these data suggest that adolescents living in adverse contexts might be frequently exposed



Note. N= 770 (* $p < .05$; ** $p < .001$)

Fig. 7.2 Stressful events structural equation model that predicts anxiety and depression, with coping and emotion regulation as mediator variables

to daily stressors and might be likely to have greater tolerance of stress than adolescents from other communities or neighborhoods (Felton et al., 2017; Malhi et al., 2019). Note that most of these studies were aimed at testing some of the adaptation and resilience models in community samples of disadvantaged backgrounds; the protective, medium, or moderating role of coping was consistent with previous data with this population (Barcelata, 2020; Barcelata et al., 2016; Barcelata & Rodríguez, 2017; Rodríguez et al., 2020, 2021). Nevertheless, more studies are needed concerning the relationship between personality, coping, and emotion regulation. Despite these studies explaining a moderate percentage of variance, the findings can be used to design selective versus indicated interventions.

From the positive youth development (PYD) approach (Lerner, 2018), we conducted some studies. For instance, to test the predictive role of psychological well-being in life satisfaction, we carried out a study with 572 Mexican early and middle adolescents aged between 13 and 18 years (Barcelata & Rivas, 2016). Correlational and regression analyses show significant relationships between psychological well-being and life satisfaction, with self-acceptance and self-control as predictors of life satisfaction in both early and middle adolescents. Besides, Rivas et al. (2017), studied the relationship between coping and subjective well-being in a suburban school sample ($N = 559$; $M_{\text{age}} = 15.3$ years). Multivariate analyses indicated significant sex and age main effects on coping and subjective well-being, but no interaction effects were found. Data showed positive relationships between productive coping and vital satisfaction and positive emotions, as well as negative correlations with negative emotions in both frequency, and intensity, showing that adolescents can promote their wellbeing, as PYD theory and empirical evidence show (Lerner, 2018). This approach is a useful frame for seeking resources beyond difficulties.

Concerning family factors related to diverse issues in different samples of adolescents from marginalized settings of Mexico City, we have found that many families in the context of poverty and psychosocial risk are characterized by parental and adolescent stress with a significative relationship with internalizing and externalizing behaviors (Barcelata & Granados, 2018). Likewise, family support was associated with high cohesion and communication and low conflict and good family functioning in a school sample (Barcelata et al., 2013). Conversely, using Olson's Circumplex Model of Family (Olson, 2000), low cohesion and poor communication were related to adolescent pregnancy, with significant differences between pregnant and nonpregnant teenagers (Barcelata et al., 2014). These data suggest that parents of low SES are usually worried and stressed about their own problems; thus, monitoring of their children is low, and may be repeating the same intergenerational communication pattern (Bacchini et al., 2011; Soenens et al., 2019). Regarding parenting, a study with a clinical sample of low SES was conducted (Márquez & Barcelata, 2016); positive parenting (e.g., behavioral control and parental warmth) were linked to fewer internalizing symptoms (anxiety/depression), as previous studies inform (Karreman et al., 2009; Smokowski et al., 2015), whereas the father's rejection and the mother's psychological control were associated with more internalizing and externalizing symptoms (aggressive

behavior), as have been reported (González et al., 2017; Razavi & Razavi, 2014; Schleider & Weisz, 2016). Similar data were observed with school samples, with lower scores than clinical samples in broadbands of YSR. Another study recruited students from a marginal community of a sub-urban zone of Mexico City ($N = 357$; 13–18 years old). Based on a developmental perspective, analyses were conducted by age group of adolescents. Early adolescents (13–15 years old) perceived greater warmth from the mother than the father, whereas middle adolescents (16–18 years old) perceived greater parental control. However, the youngest girls perceived more family conflicts and negative parenting than the boys did (Barcelata & Gutiérrez, 2018). Note that Mexican girls spend more time at home helping with domestic chores than boys did; thus, they are likely to perceive more restrictions and family difficulties whereas boys are not. Moreover, research with other community samples (Rodríguez et al., 2018) reported high correlations of the rejection of parenting practices by both mother and father with both internalizing and externalizing behaviors, corroborating the importance of parenting in the mental health of teenagers. Data demonstrate that adolescence is a wide transitional period with changing processes; thus, perception depends on the specific adolescent sub-stage (Ebbert et al., 2019).

In sum, findings confirm that adaptation and resilience result from the combination of a set of individual and family factors, in concordance with some conceptual definition (Luthar, 2006; Masten & Obradović, 2006; Masten & Tellegen, 2012); however, coping, in most of them, is a personal factor involved in adolescent outcomes, whether as functional or dysfunctional coping, as well as predictor, mediator/moderator of the stressful events. Likewise, family issues such as social support and family interaction are the most significant variables (Evans & De France, 2021; Evans & Kim, 2013; Kim et al., 2016; McDonald et al., 2020; Perzow et al., 2018; Santiago et al., 2012).

In addition, our research with the marginalized population has generated the need to develop culturally suitable measures considering background differences. Considering that resilience is a process and outcome in a risky or adverse situation, we developed the Resilience Potential Resources Scale for Adolescents (Barcelata & Rodríguez, 2016), aimed at assessing potential resources on resilience in adolescents aged between 13 and 18 years old. A Principal Component Analysis (PCA) was conducted, and eight factors were observed (variance = 42.15%), Positive thinking, Active coping, Avoidance coping, Family support, Social support, Internal control, Spirituality, and External Control, which were confirmed by a Confirmatory Factor Analysis (CFA), using a maximum likelihood method (MLM), showing good fit indexes and Cronbach's alphas (0.642 to 0.746). Recently we also built diverse scales and questionnaires to assess stressful events, for both adolescents and parents. For example, the Perceived Stressful Events Global Scale for Adolescents (Barcelata et al., 2020) was developed with a normative sample ($N = 991$) from different regions of Mexico. A PCA (Promax rotation method) was performed, which revealed six factors: Critical events; Daily hassles; Social exhibition; Family concerns; Academic stressors; and Social pressure. A CFA with MLM, were computed corroborating the six-factor structure. The Parent Perceived Stressors Scale

(Barcelata et al., [in press](#)) was developed following similar statistical procedures to the adolescent scale. The Multidimensional Scale of Emotion Regulation for Adolescents (Rodríguez & Barcelata, 2020) was mainly developed based on Gross' model (Gross, 2015). FACTOR (Lorenzo-Seva & Ferrando, 2013) was used and factor analysis yielded eight factors: Recognition of positive emotions, Expression of positive emotions, Emotional control, Suppression, Cognitive change, Physical reactions, Recognition of negative emotions, and Difficulty to regulate. A CFA using the Robust Unweighted Least Squares, corroborated the structure of eight factors and showed acceptable fit indexes.

Finally, according to the global aim of our research project, in the context of the COVID-19 pandemic, we constructed the COVID-19 Youth Perception Survey, for youths from 13 to 24 years of age, in order to explore the contextual and demographic conditions associated with COVID-19, as well as the psychological responses of adolescents in eight domains: Fear and worries, Stress indicators, School pressures, Preventive behaviors, Routine changes, Family functioning, Relaxation and leisure, and Virtual socialization (Explained variance = 59.07%). Risk factors associated with confinement have been identified, such as family difficulties, school pressures, and presence of stress indicators, with girls scoring higher than boys. Resources have also been identified, such as virtual socialization, recreation and relaxation activities, and the use of preventive measures, which have allowed adolescents to adapt positively to the conditions of the current pandemic. Youths from different regions or states of Mexico (e.g., Hidalgo, Querétaro, Michoacán, Mérida, Puebla, State of Mexico, and Mexico City) have participated, and some results have not yet been published (e.g., Barcelata & Jiménez, [in press](#); Barcelata et al., 2021).

Summarizing, most of the studies have been carried out with similar cross-sectional designs and statistical methods. Multivariate methods (e.g., multiple analysis of variance, regression analyses, discriminant analyses) have been useful, for example, to identify the contribution of risk and protective factors in predicting psychopathology, adaptation, and resilience. Likewise, some factorial analyses with SEM have been conducted, trying to go beyond the regression analyses to answer questions aimed at understanding the underlying mechanisms, as recommended (Cicchetti, 2013; Lerner et al., 2013; Masten, 2018). SEM is especially useful in overcoming some limitations of cross-sectional studies as conducting longitudinal research with adolescents and families of marginalized settings is unlikely for diverse reasons (e.g., family moves, migration, changes of authorities of schools and health institutions, low financial support to conduct research for many years). In spite of these limitations, a few universal and selective school-based interventions have been designed focusing on disadvantaged adolescents and parents and aimed at supporting them in thriving in adverse situations and promoting positive adjustment (Barcelata & Flores, 2019; Barcelata & Hernández, 2015; Barcelata & Montalvo, [in press](#)).

Final Considerations and Future Perspective

The ecological-systemic perspective of child and adolescent development represents a macro-paradigm integrated for multiple models and theories, and is particularly useful for analyzing adolescents and families in risky, stressful, or adverse situations. Growing international evidence from this perspective shows the relevance of proximal factors such as family, as well as distal factors such as poverty and marginalization, which can represent a risk for adolescent developmental outcomes, depending on a dynamic interaction between adolescents and ecological systems. This model has been a framework of diverse research in Latin America, as a high proportion of children, adolescents, and families live under risky conditions.

The family may be a stable group for growing up during adolescence, but the adolescent developmental trajectories and outcomes do not depend only on this proximal context; thus, it is important to make some critical considerations, because adaptive mechanisms are not always the same, changing across contexts and cultures (Ungar, 2021; Walsh, 2021). Family systemic theories propose that functional families are those with high levels of cohesion and flexibility, open communication, good parenting practices, and skills to cope with the internal and external stressors (McGoldrick et al., 2016; Walsh, 2016). However, daily social and economic pressures can be a substantial source of parental stress leading to other emotional and behavioral problems in parents, affecting their children and adolescents in a negative way in a cascading process as has been noted (e.g., Burt et al., 2008; Masten & Cicchetti, 2010; Rutter, 2012). Further, interdisciplinary investigation has identified the negative potential of adverse experiences linked to poverty on the biopsychosocial development of adolescents; however, the plasticity in adolescence might contribute to changing developmental trajectories (Buckley et al., 2019; Cicchetti, 2013). Thus, more studies of adolescent development in normative as well as non-normative conditions is needed, particularly with the Latin American population, because around 50% live in extreme, rural, or urban poverty, with a significant increase in the latter in recent years.

Many processes of adaptation and resilience can be understood from the compensation risk-protective model of resilience (Masten, 2015), as shown in some of the studies presented in this chapter. In other cases, the challenge resilience model can be useful for explaining how Latin American adolescents can resist many adversities, responding with less intensity to stressful events, as has been noted (Rodríguez et al., 2021; Rutter, 2013). Given that moderate exposure to stress or to low-adversity experiences may increase tolerance to stress and resistance to adverse situations (Felton et al., 2017), some preventive interventions could be designed. On contrary, the model of a cumulative cascade of risk (Burt et al., 2008; Evans & De France, 2021; Rutter, 2012) seems to be more suitable for understanding persistent issues linked to negative outcomes, such as alcohol consumption, maltreatment, neglect, and family abuse, problems of high prevalence among Latin American adolescents and families, as also observed in the Mexican population (e.g., Rivera et al., 2013;

Rodríguez et al., 2007). In these risky groups an adolescent–family integrative and selective intervention is imperative.

The overview of some of the studies on Latin American adolescents and families living in adverse contexts show that some of them have focused on adaptive processes related to diverse risk levels, analyzing the relationship between stress, risk, adverse life events, and resilience in different directions:

1. Toward the study of major stressful life events, severe stressors, or trauma in individuals and families (e.g., Acevedo & Hernandez-Wolfe, 2020; Cardozo-Rusínque et al., 2013; Rueda et al., 2010).
2. Focusing on individual and family stress-coping processes in multiple adverse situations, examining the relationship among minor life events, chronic and daily stressors (Arenas-Landgrave et al., 2019; Barcelata et al., 2012a, b, 2014; Barcelata & Rodríguez, 2017; Estévez et al., 2012).
3. Addressing family functioning, parenting, or rearing, focusing on communication processes, cohesion, and flexibility (e.g., Barcelata & Gutiérrez, 2018; Rivera et al., 2013).

Hence, in Latin America, family is the most important proximal system, either functioning as a risk factor or as a protective factor, as family is associated with mental health problems, but also, with positive outcomes as the research noted. On the other hand, adolescence represents a life cycle period of resources and plasticity. Therefore, many Latin American children and adolescents are resilient; they have a more functional family environment, have greater supervision from their parents, and perceive greater parental support and positive parenting. Despite contextual conditions for families, development of children and adolescents is similar in Latin America; paradoxically, the cultural diversity across countries makes the region one of the most unequal in terms of development indices and quality of life for adolescents and families, even within each country. Research from a multicultural and multilevel perspective is crucial to understand the variability of adaptation processes and resilience in Latin America. In Mexico, for example, there are diverse micro-contexts across the country that represent multiple cosmovisions. Many ethnic groups have their own belief system, and discrimination means that they are ignored, generating a gap among development indices of the rural, suburban, and urban populations. Socio-cultural assumptions and beliefs about parenting, success, good functioning, “doing well” change across regions. Thus, given the multiple cultural contexts and the co-variation of specific psychological processes and different settings, the designing of research and selective interventions are needed.

Evaluation and intervention from a preventive empirical basis perspective should carry on in different settings. Nevertheless, every region of Latin America should be considered according to the diversity of families and the challenges they have to face. We need to propose mental health actions to make families, children, and adolescents resilient, keeping in mind the different microsystems in which they live. Measures should be used as a screen in the early detection of developmental difficulties, for example, identifying callous-unemotional traits in the early stages, as

adolescents are increasingly involved in delinquent activities. New and more school-based evidence programs are needed, designed from a preventive and integrative perspective intervention, with children, adolescents, families, and educators, given the lack of mental health public services (e.g., around 9% of children and adolescents receive mental health services (WHO, 2020)). Research should be the basis for planning public health action, for instance, healthy school programs, aimed at reducing risky youth behaviors from a preventive perspective, as have been conducted in Colombia supported by the Ministry of Education (e.g., Mantilla et al., 2021). Nevertheless, risk groups with multiple sources of stress and significant levels of behavioral and emotional problems should be considered a priority group for selective mental health actions.

Latin American researchers have many challenges in proposing their own theoretical and empirical models, as well as suitable measures, adapting and reviewing those have been shown to be useful across cultures and developing new instruments. Studies have been carried out across multiple settings, with different specific theoretical and methodological models according to populations, groups, contexts, and resources; however, it is important to integrate experiences and findings in other countries. Neurosciences have been growing, broadening our perspective on adolescent development; thus, more integrative and multidisciplinary research is needed to understand the complexity of developmental pathways and outcomes in Latin American youth and families, most of them living under pressurized socioeconomic conditions. Longitudinal studies are also needed because the effects of early experiences are not always evident in cross-sectional studies.

In synthesis, the developmental systems perspective implies broad theoretical and methodological framework research with practical implications that are particularly relevant in the Latin American context owing to the variability of macro-cultural factors across the countries and micro-cultural contexts, even within a country. It is important to adopt more positive adolescent development models (e.g., competence model, or the PYD theory), suitable for the Latin American context, to improve social, emotional, and cognitive competences in adolescents and families, focusing more on their resources or abilities than their difficulties, to face challenges in a changing world.

In Latin American culture, the family plays a central role; however, recurrent economic and political crises have turned it into a proximal risk factor for adolescent development. Nevertheless, the family can also be a mediating and moderating factor that buffers and protects adolescents from adverse situations implicit in environments of marginalization and poverty, contributing to successful adolescent adaptation; thus, a more inclusive intervention should focus on improving family competencies. Therefore, enhanced multidisciplinary, integrative, and multilevel research is needed based on diverse methodological approaches, with stronger designs and more robust statistical analyses, overcoming some of the limitations of cross-sectional studies. Research should be the basis of designing multilevel intervention from a preventive perspective in diverse settings. So many investigation challenges, as well as opportunities, are awaiting Latin American researchers.

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