

## ABSTRACT

### Enigma: The Power of Resilience A Narrative Case Study on Adult Survivors of Childhood Physical, Sexual Abuse, and Poverty

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The number of children living in poverty experience physical and sexual abuse at alarming rates. Abused poverty-stricken children enter adulthood with physical and emotional wounds. Information given to the public details the challenges adult survivors of childhood poverty, physical and sexual abuse face, but this data does not illustrate the resilience of these survivors. Childhood poverty, physical and sexual abuse contribute to adult health problems, including physical symptoms, psychological problems, and substance abuse. Research fails to report stories of high educational attainment, healthy lifestyles, and the well-adaptiveness of adults who were once childhood victims. Failures and maladaptation of adult survivors of childhood poverty and abuse are in abundance.

This research analyzes the experiences of ten adult survivors of childhood physical and sexual abuse along with the intersection of poverty. The current study examined these experiences from a non-deficit point of view by investigating the attributes of survivors who attain higher education degrees, live above poverty, and maintain healthy relationships.

Significant outcomes will inform educators, school counselors, and support staff, whose primary roles include supporting children's educational and socio-emotional needs. This research aims to ascertain and replicate the qualities of the survivors to help children in similar situations to become emotionally and academically competent. The stories allowed readers to gain perspectives on the unique experiences and the lives of those who were once victims.

Participants discussed their experiences to help foster an understanding of the phenomenon thoroughly from a first-person perspective. Criterion-based sampling identified participants that obtained a post-secondary degree who experienced childhood physical abuse, sexual abuse, and lived-in poverty. Participants varied in age, race, marital status, and socio-economic status. Scripted question interviews with room for natural variation, electronic surveys, and online video chat were available per participant's preference. I analyzed, categorized, and reported information based on data analysis of the commonalities found in the participants' responses.

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Enigma: The Power of Resilience  
A Narrative Case Study on Adult Survivors  
of Childhood Physical, Sexual Abuse, and Poverty

by

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A Dissertation

Approved by the Department of Curriculum and Instruction

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of  
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## LIST OF ABBREVIATIONS

ACEs: Adverse Childhood Experiences

CDC: Center for Disease Control

CSA: Child Sexual Assault

ITCM: Intergenerational Transmission of Child Maltreatment

NVDRS: National Violent Death Reporting System

PTSD: Post Traumatic Stress Disorder

S.A.: Sexual Assault

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## DEDICATION

To my children 'Nikalos, Amber, and Chase, may the happiness from your childhood memories last you a lifetime. I love you forever, Mommy

## CHAPTER ONE

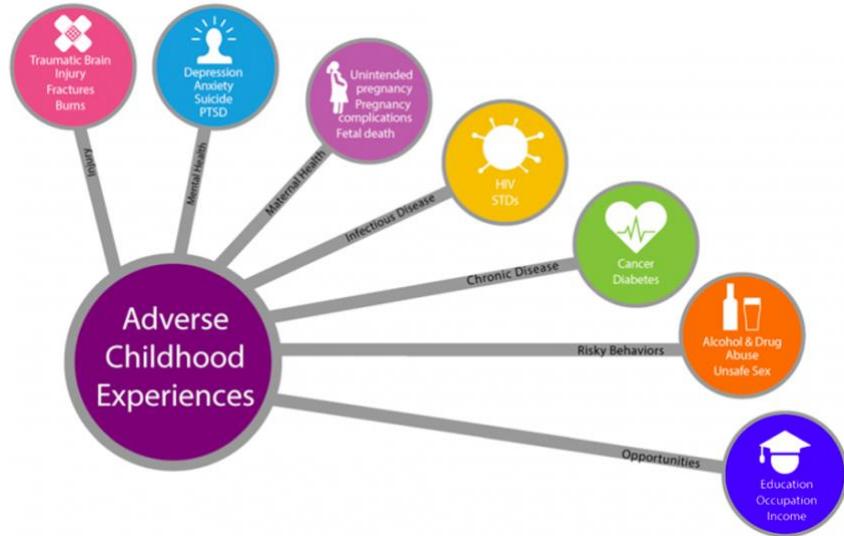
### Introduction to the Problem of Practice

#### *Introduction*

The impact of childhood physical and sexual abuse has the power to destroy the lives of more than just the victims. Childhood abuse is a centripetal force that has often continued throughout generations. When such a deadly phenomenon coincides with poverty, the odds of survival and recovery become gravely low. The tragedy of childhood maltreatment remains at the forefront of public attention. Every state takes initiatives to prevent and eliminate the mistreatment of children. Research details the outcomes of adverse childhood experiences (ACEs) and the effects on academic and social consequences, as well as maladaptation that carries over well into adulthood. The trauma from childhood abuse echoes into all aspects of life and contributes to cyclical abuse. The severity of this issue and the significant implications on the lives of survivors are well established by researchers. After experiencing unimaginable trauma as a child, moving forward in life is complicated and hopeless without motivation and support. Intrinsic motivation is impossible to sense after being scorned so profoundly. The stories of triumph, courage, and accomplishments of victims will serve as an inspiration to those seeking solace from the nightmares that plagued them as victims. Their stories will empower victims. Their journey to self-help begins with knowing that others who endured childhood atrocities and fought their way past the pain will foster hope and healing in moments of despair. Survivor stories will serve as a form of support and motivation for perseverance.

## *Background*

When children under the age of eighteen experience multifaceted types of abuse, it is categorized as adverse childhood experiences (ACE), which includes any form of abuse (physical, emotional, and sexual) as well as the imprisonment of a parent or parental divorce (Center for Disease Control and Prevention, 2019). ACEs result in substance abuse, depression, and obesity (Sacks & Murphey, 2018), and as the number of ACEs increases, so does the risk for each factor. Figure 1 details risk factors and related outcomes.



*Figure 1.* Risk factors and related outcomes. Source Note: This image was taken from the Centers for Disease Control's materials public domain and therefore free of copyright restrictions.

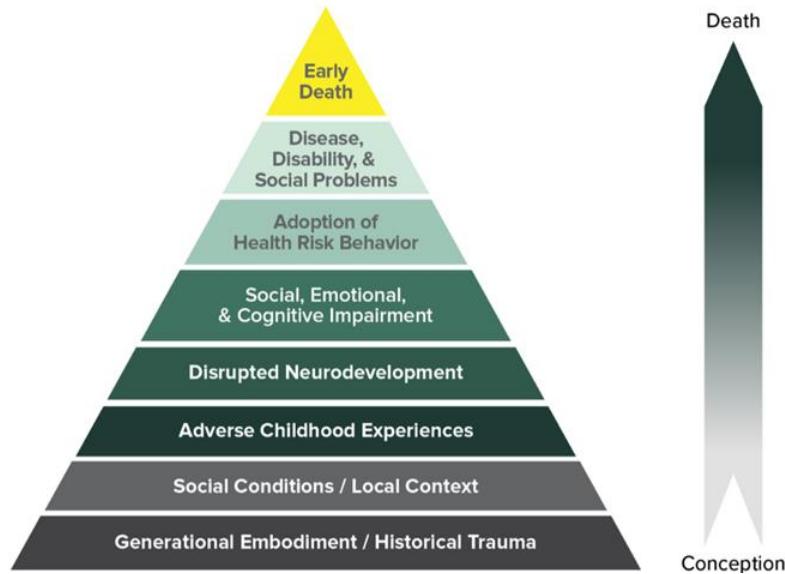
The Kaiser Permanente study was the most extensive study conducted related to the risk factors caused by adversity. From 1995 to 1997, Kaiser Permanente conducted the first ACE study; this study “was a significant investigation of multiple types of childhood and household challenges that suggested a correlation to later-life health and well-being” (Center for Disease Control and Prevention, 2019). A Southern California

Health Maintenance Organization (HMO) studied ACEs by focusing on participants' behaviors and existing health status through survey collection (Center for Disease Control and Prevention, 2019). Results indicate a strong relationship between the length of exposure to childhood abuse and family dysfunction and several risk factors causing early death in adults (Felitti et al., 1998). This study developed the ACE Pyramid-a pyramid, representing how ACEs are strongly related to developing risk factors for disease and adult well-being. Findings from this study revealed that ACEs are common across all populations. Approximately half of the participants indicated at least one ACE, and more than one in five participants experienced multiple ACEs (Center for Disease Control and Prevention, 2019).

Felitti et al. (1998) concluded a direct correlation between childhood abuse and household dysfunction to many of the leading causes of death in adults. Yet, some survivors managed to achieve high educational attainment and live productive lives. Despite the discouraging odds, some adults who were once victims are now living enriching lives. A need to understand the lives of adult survivors who are the enigma to current and past research exists. Their stories of survival will serve as a groundwork for the healing of children who have experienced or are experiencing physical or sexual abuse. These shared stories of lived experiences from survivors will help circumvent maladaptation and long-term adverse effects.

Children have no control over harmful situations in which they live, this lack of control is amplified when they experience dangerous encounters in their homes or familiar places. This lack of control leads to a learned helplessness-a physiological state where an individual involuntarily experiences recurring adverse circumstances and is

powerless and averse to avoiding such traumatic events for fear of nothing changing despite their efforts (Cherry, 2014; Evans, 2003). The CDC captured the progression of historical trauma through early death in the pyramid pictured in Figure 2.



*Figure 2.* The ACE pyramid, Center for Disease Control, 1997. *Source Note.* This image was taken from the Center for Disease Control materials public domain and therefore free of copyright restrictions.

Thus, the brain's response to traumatic and stressful situations discharges potent neurochemicals leading to flight, fight or freeze reactions from individuals (De Bellis & Zisk, 2015; Thompson et al. 2014). Repeated exposure to trauma results in the belief that the situation will not change no matter what you do, which creates learned helplessness. Suppose children are not made aware of the stories of ordinary people who survived the torture of poverty, physical and sexual abuse. In that case, they will grow into adults who never leave the mental imprisonment that their traumatic childhood sentenced them.

### *Statement of the Problem*

Research on the perspectives of adult survivors of physical abuse, sexual abuse, and the intersection of poverty is limited. Exploration of the experiences of this group of people is necessary to understand their lived experiences. Current research details the maladaptation, mental illness, and early death of adults who experienced abuse as children living in poverty (Min et al., 2013). Research on adults who have experienced physical and sexual abuse also reported victims of abuse perpetuating instances of abuse as adults, thereby making a case for Intergenerational Transmission of Child Maltreatment (ITCM; Bartlett et al., 2017; Berlin et al., 2011; Min et al., 2012; Pears & Capaldi, 2001; Putnam-Hornstein et al., 2015; Stevens-Simon, Nelligan, & Kelly, 2001; Kim, 2009; & Valentino et al., 2012). Therefore, understanding and describing the experiences of adult survivors of childhood poverty, physical abuse, and sexual abuse will contribute to the gaps in the literature on well-adjusted and adapted adult survivors and the attributes this group of people identifies as reasons for their personal and professional triumphs.

### *Purpose of the Study*

This case study described and explained the experiences that adult survivors of childhood physical abuse, sexual abuse, and poverty attributed to their ability to persevere both personally and professionally. This research challenged the cycle of abuse theory by telling the stories of well-adaptive adult survivors of childhood maltreatment that do not inflict the harm done to them upon their children or others. They obtain higher educational degrees and hold promising careers, and are in healthy relationships. This research aimed to determine which experiences contributed to survivors becoming

emotionally and academically competent and well adaptive personally and professionally. Thus, this narrative case study focused on answering the following primary research question: What experiences do adult survivors of childhood physical abuse, sexual abuse, and poverty attribute to their perseverance; and examined three sub-questions: What role did experiences at school play in building resilience in adult survivors of childhood physical abuse, sexual abuse, and poverty; What role did religious experiences play in building resilience in adult survivors of childhood physical abuse, sexual abuse, and poverty, and what role therapeutic intervention play in building resilience in adult survivors of childhood physical abuse, sexual abuse, and poverty?

### *Theoretical Framework*

This qualitative multiple case study followed an *a posteriori* theoretical framework that drew from the Resilience Theory. The Resilience theory is a strength-based theory that focuses on the positive outcomes of children who experienced adversity such as child abuse, poverty, and neglect (Fergus & Zimmerman, 2005; Zimmerman & Brenner, 2010). Research on resilience began as early as the 1970s. Notable resilience theorists investigated why some adolescents thrive despite experience physical and psychological trauma, and others do not (Garmezy, 1991; Masten, Cutuli, Herbers, & Reed, 2007; Rutter, 1987; Werner & Smith, 1982). Researchers of resilience in children defined the attributes that help children overcome maltreatment and harmful environments as promotive factors (Fergus & Zimmerman, 2005). Promotive factors, both social and environmental, counteract negative outcomes from Adverse Childhood Experiences (ACE). Garmezy et al., 1984 defined promotive factors as positive assets and resources. Assets are internal such as “self-esteem and self-efficacy,” while resources

are external and include parental support and community support (Garmezy et al., 1984; Ledesma, 2014; Luthar, 2006, Masten et al., 2007). Together positive assets and resources support healthy development (Fergus & Zimmerman, 2005; Garmezy et al., 1984; Luthar, 2006, Masten et al., 2007). Promotive factors are protective effects that create positive outcomes for maltreated children (Fergus & Zimmerman, 2005; Garmezy et al., 1984; Luthar, 2006, Masten et al., 2007). The Resilience Theory, specifically the components of protective factors, aided in developing my research questions and sub-questions.

It was essential for me to ask interview questions that would yield findings surrounding the promotive factors that participants attributed to their perseverance. I created questions that would elicit detailed responses that included protective factors that adult survivors of childhood physical abuse, sexual abuse, and poverty attributed to their perseverance. I created sub-questions divided into categories based on promotive assets such as self-efficacy and promotive resources such as school, community, and religion. I generated primary research questions and sub-questions to shed light on protective effects that result from promotive factors in ten child abuse survivors.

I utilized the protective model framework to identify positive influences in the lives of children who suffered abuse. To collect this data, I asked open-ended questions because they allow participants to narrate and reflect on their childhood experiences (Creswell & Creswell, 2018). My study utilized the Protective Factor Model to identify the experiences that adult survivors of childhood physical abuse, sexual abuse, and poverty attributed as the reasons they persevered. I used open-ended questions in interviews to gather information regarding support systems and positive influences during

the survivor's childhood. I used data from participants' reflections as valuable information required to answer the primary research questions and each sub-question (Creswell, 2013; Creswell & Poth, 2018; Creswell & Plano Clark, 2018). I collected data to uncover promotive factors that aligned with the Resilience Theory and protective factors framework.

### *Research Design and Methods*

As the aim of this study was to understand how resilience influenced the experiences of child abuse survivors. Specifically, it explored the occurrences of a group of 10 survivors from a non-deficit approach by examining positive attributes that contributed to their ability to persevere. This study provided details and insights from adult survivors of childhood physical abuse, sexual abuse, and poverty in the form of a narrative case study. This research also investigated the intersectionality of the three as past literature has examined these areas in isolation. Participants discussed their lived experiences to help foster an understanding of the phenomenon thoroughly from the first-person perspective. The sampling technique utilized was purposive criterion-based (Creswell & Poth, 2018). Participants must have experienced physical abuse, sexual abuse and lived in poverty during their childhood. Respondents who met the criteria participated in one-on-one interviews with me using scripted questions with room for natural variation. Electronic surveys and online video chats were available per participant's preference.

### *Definition of Key Terms*

*Adverse Childhood Experiences (ACEs)*: For this study, ACEs refer to physical abuse, sexual abuse, and poverty. ACEs, defined by the Center for Disease Control and

Prevention (CDC), is “a term used to describe all types of abuse, neglect, and other potentially traumatic experiences that occur to people under the age of eighteen” (Center for Disease Control and Prevention, 2019).

*Child Maltreatment:* “Child maltreatment is any act, intentional or not, that results in harm, the potential for harm, or the threat of harm to a child. The four types of child maltreatment include physical abuse: sexual abuse; emotional abuse; and neglect” (Center for Disease Control and Prevention, 2019). For this study, I refer to child maltreatment as physical or sexual abuse of a minor one or more times.

*Mental Illness:* A disorder that affects the brain and negatively impacts one’s ability to function, think, or respond in a manner expected from most adults. The Center for Disease Control defines mental illness as “Mental illnesses are conditions that affect a person’s thinking, feeling, mood or behavior, such as depression, anxiety, bipolar disorder, or schizophrenia. Such conditions may be occasional or long-lasting (chronic) and affect someone’s ability to relate to others and function each day” (Center for Disease Control and Prevention, 2018).

*Poverty:* Households that receive “welfare and living in low-income neighborhoods or subsidized housing” (Roos et al., 2019). Additionally, when the head of the household’s income is less than what it takes to provide: food; shelter; clothing; pay rent and utilities; or secure the essentials for day to day living for the number of people living in the household, without the assistance of the government.

*Sexual abuse:* “Child sexual abuse refers to the involvement of a child (person less than 18 years old) in sexual activity that violates the laws or social taboos of society and that he/she: does not fully comprehend does not consent to or is unable to give

informed consent to or is not developmentally prepared for and cannot give consent to” (Center for Disease Control and Prevention, 2020). For this study, I further defined sexual abuse as one or more occurrences of touching, licking, and fondling parts of a child under the age of eighteen bodies in a sexual way; this includes making the child get on top of them, getting on top of the child, make them touch or fondle their own sexual parts or the sexual parts of the other person, and performing oral or anal sex. These acts include violent and non-violent occurrences.

*Sexual assault* (S.A.); “any type of sexual contact or behavior that occurs without the explicit consent of the recipient of the unwanted sexual activity. S.A. may also include psychological coercion or taking advantage of an individual who is under duress, incapacitated, or unable to make decisions” (The Rape Abuse and Incest National Network [RAINN]).

*Survivors of sexual abuse*: For the purpose of this study, survivors of sexual abuse refer to a male or female that experienced sexual abuse, was gainfully employed, has a college degree, and has not repeated abuse.

*Trauma*: Events that cause horror, helplessness, physical or mental injuries, or death (Center for Disease Control and Prevention, 2019). For this study, I codified trauma as physical and sexual abuse.

### *Conclusion*

In conclusion, past research on victims of childhood abuse as perpetrators of mistreatment during their adult years does not provide a comprehensive understanding of the experiences of this group of people. Therefore, this study explores the lived experiences of adult survivors of childhood abuse who grew up in poverty. Specifically,

this study seeks to understand the attributes that contributed to their accomplishments and the commonalities shared among this group of people that could minimize the long-term effect of child abuse. Given the nature of this study, the key terms are critical towards operationalizing the focus of this study and ensuring its integrity.

## CHAPTER TWO

### Literature Review

#### *Introduction*

The purpose of this narrative case study was to ascertain the experiences and commonalities of adult survivors of childhood physical abuse, sexual abuse, and poverty possess that helped them persevere personally and professionally. The analysis of their experiences could help minimize or mitigate the long-term effects of child abuse. Childhood physical abuse forecast severe mental and physical health conditions that include depression, anxiety, and other medical conditions. Victims of physical and sexual abuse are at a higher risk of developing post-traumatic stress disorder as well as depression, anxiety, and personality disorders (Springer et al., 2007; Allen et al., 2014; McLean & Gallop, 2003; Crow et al., 2015; Shin et al., 2015; Gulec et al., 2013; Infurna et al., 2016; Burns et al., 2012; Spertus et al., 2003).

However, this study goes beyond the existing literature on this topic by exploring the shared attributes of adult survivors. Some research has shed light on the issue of childhood abuse in the United States. For instance, the U.S. Department of Health and Human Services noted that in 2012, an approximated 1,640 children died from maltreatment 44% of these children either solely faced physical abuse or partly faced physical abuse with other forms of maltreatment (U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau, 2012). The 2012 rates of death per 100,000 children were near 5 for African Americans and Pacific Islanders. Percentages for other

Nationalities ranged from 1.7 percent to 2.2 (National Violent Death Reporting System, [NVDRS] 2014). This finding further shows that children of all nationalities are affected by child abuse.

To echo the findings above, “an approximated 700,000 children experience abuse annually in the United States. Specifically, 205,438 children reported experiences of sexual abuse. In comparison, 60,987 children reported experiences of physical abuse” (U.S. Department of Health & Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children’s Bureau (2016). In addition, the state and local Child Protective Services (CPS) in the U.S. reported they received an approximated 3.4 million child abuse referrals in 2012, with 18% physically abused and 9% sexually abused (U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children’s Bureau (2012). These statistics indicate that childhood abuse is a common phenomenon within the United States. Physical and sexual abuse tarnishes and removes childhood innocence. For those who manage to survive, the effects of the abuse lead to maladaptive behaviors that carry over into adulthood—these maladaptive behaviors lead to a cascade of slow and early deaths (U.S. Department of Health & Human Services, Administration for Children and Families Administration on Children, Youth and Families, Children’s Bureau, 2019).

Exposure to multiple or repeated forms of maltreatment and trauma in childhood not only leads to death but can also affect numerous interpersonal domains (Cloitre et al., 2009). Abused children suffer from mental health issues including depression, anxiety, suicidal ideation, post-traumatic stress disorder (PTSD), physical health risk, relationship

failure, and limited educational attainment (National Center for Injury Prevention and Control, Division of Violence Prevention, 2009). Issues related to mental health were approximately 52% greater in participants who experienced sexual abuse as children than their non-abused counterparts (Child Maltreatment, 2014).

According to Spertus, Yehuda, Wong, Halligna, and Seremetis (2003), child maltreatment affects personal relationships and causes mental health disorders. Harvard researcher Teicher and Samson (2013) studied 200 middle class educated adults aged 18 to 25 that experienced abuse and neglect using a brain scan study. Their research concluded that maltreated children are at greater risk for depression, post-traumatic stress disorder, and drug addictions in adulthood. The percentage of participants who experience multiple forms of maltreatment increased by 25% in the number of disorders. The volume of parts of their brain decreased compared to non-abused children. Teicher's research supports the adverse effects of child maltreatment. However, his research did not include the medical conditions of survivors who experienced the same types of abuse and did not show signs of mental or health disorders.

#### *The Case for Intergenerational Transmission of Child Maltreatment*

The belief that victims of child abuse and neglect will inevitably abuse their children is a widespread concept referred to as Intergenerational Transmission of Child Maltreatment (ITCM); see discussion in Bandura, 1977; Garbarino & Gilliam (1980); Newcomb and Locke (2001); Heyman & Slep (2002); Thornberry & Henry (2013). Researchers and sociologists support ITCM and believe that maltreatment is a generational cycle confirming that adults who experienced child maltreatment will

continue the abuse by abusing their children; their children will do the same (Garbarino & Gilliam, 1980).

Bandura's Social Learning Theory suggests that children learn through behaviors and interaction in their home environment. Children accept these behaviors as the norm (Bandura, 1977 as cited by Schele & Geiger, 2016). Caregivers use punishments and rewards to reinforce or suppress behaviors. The social learning theory serves as a theoretical framework for ITCM. Albert Bandura believes that individuals acquire new behaviors by directly observing the behaviors of others around them 1971). Hence, social learning or social cognitive theory focuses on the cognitive process of children and adults' social experiences and how these processes affect their behavior and development (Grusec, 1992).

Bandura's theory posits that individuals cognitively adapt to information they face in various social experiences, which includes oral discussions, models, and discipline experiences; thus, these cognitions influence how individuals react to messages from their environments, as well as the kinds of environments they choose for themselves (Grusec, 1992). Specifically, Bandura's social cognitive theory hypothesizes that the imitation and learning of others' behaviors intensify when people's observations are positive or include incentives associated with the observed and learned behavior (Navabi, 2012).

Bandura based his social learning theory on the principles of observation, imitation, and modeling (Navabi, 2012; Schelbe & Geiger, 2017). Bandura's study on social learning divided 72 school children into three groups and exposed them to three different models. The first group of children observed an aggressive adult. The second

group monitored a reserved, nonaggressive adult. The third group of children had no exposure to either model. Findings from this study showed that children exposed to aggressive adults played aggressively with their toys compared to those exposed to the nonaggressive and control models (Bandura et al., 1961). Bandura's Bobo Doll experiment on patterns of behavior posits that people shape their behaviors after models. They imitate others based on observed behavior—a phenomenon bandura termed observational learning (Navabi, 2012). Observational learning explains that children imitate and learn what they see. For example, children can learn from live models, that is, real individuals displaying a behavior. They can also learn from the verbal instruction model, explained behavior, or learn from a symbolic model that involves actual or fictional characters acting out behaviors through different media (Navabi, 2012).

In reference to this study, Bandura's theory of social learning, on the one hand, argues that when individuals observe and mimic a negative behavior, they may impact others negatively, leading to a form of punishment. On the other hand, when individuals observe positive behavior, they may be rewarded by others (Navabi, 2012). Thus, according to Bandura's social learning theory, if a child's model displays negative behavior, the child (observer) will learn and mimic such behavior (Navabi, 2012)—a concept the ITCM theory reinforces but is contradicted by the Resilience Theory.

Research on the type of childhood experiences of maltreatment and its influence on adulthood parental behavior, using a longitudinal sample of 383 parents from an ethnically diverse community, and a Structural Equation Modeling approach to quantitative research, revealed support for the concept of the intergenerational transmission of child maltreatment for both mothers and fathers (Newcomb & Locke,

2001). In both cases, experiences of child maltreatment increased the likelihood of poor parenting. Childhood experiences of sexual abuse also resulted in a parenting style viewed as aggressive for mothers and rejecting fathers (Newcomb & Locke, 2001).

In a similar result, Heyman and Slep (2002) investigated the effect of physical victimization and interparental violence on the increased risk of child and partner abuse perpetrations, as well as partner abuse victimization. The study utilized the 1985 National Family Violence Survey data, which included 6,002 participants 18 years of age or older. Data analysis supported the concept of the cycle of violence as it indicated that a family's history of violence increases the risk for adulthood violence perpetration. Specifically, women who experienced interparental and parent-child violence have a high likelihood of child and partner abuse perpetrations, as well as partner abuse victimization. Similarly, men who experienced both forms of family-of-origin violence have an increased risk of perpetrating partner abuse victimization.

Furthermore, Thornberry and Henry (2013) researched the likelihood of a causal relationship between a history of maltreatment victimization and the continuous perpetration of maltreatment, as well as the timing of maltreatment victimization on this relationship. This quantitative research utilized longitudinal data from the Rochester Youth Development Study that focused on a stratified random sample of 1000 seventh and eighth-graders. Data analysis using propensity score models indicated that the likelihood of perpetrating maltreatment significantly increases by a history of maltreatment victimization, particularly when maltreatment victimization experience during adolescence. This study emphasizes the cycle of abuse when maltreatment victimization occurs in childhood and continues into adolescence. Data analysis using

propensity score models indicated that the likelihood of perpetrating maltreatment significantly increases by a history of maltreatment victimization, notably when perpetrators experienced maltreatment victimization during adolescence. This study emphasizes the cycle of abuse when maltreatment victimization occurs in childhood and continues into adolescence. This conclusion makes a case for ITCM, which is a concept that this study seeks to disprove by sharing the perspective of adult survivors of childhood poverty, physical abuse.

To reinforce the concept of Intergenerational Transmission of Child Maltreatment in current research, Yang et al. (2018) quantitatively investigated the relationship between maternal history of physical abuse and neglect and the perpetration of physical abuse and neglect on offspring. The authors utilized longitudinal data, a six-year panel study from the Illinois Families Study (IFS), and a random stratified sampling method with 1200 participants (mothers). Results showed that a history of maternal physical abuse increases the likelihood of physical abuse and neglect on offspring. In contrast, a history of maternal neglect is strongly and only related to offspring neglect.

Assink et al. (2018) further strengthen the argument for the concept of Intergenerational Transmission of Child Maltreatment. The authors examined risk factors for ITCM to develop preventive strategies. This quantitative three-level meta-analysis adopted purposive criterion-based sampling to locate previously conducted primary studies on child maltreatment, which resulted in the use of 84 studies that included over 84 participants. Assink et al. (2018) concluded that parents who experienced childhood maltreatment are three times more likely to abuse their children than parents who did not experience maltreatment.

These kinds of literature and others concerning (Bartlett et al., 2017; Berlin et al., 2011; Min et al., 2012; Pears & Capaldi, 2001; Putnam-Hornstein et al., 2015; Stevens-Simon, Nelligan, & Kelly, 2001; Kim, 2009; & Valentino et al., 2012) emphasized the support for the Intergenerational Transmission of Child Maltreatment—a concept that this study aims to challenge by giving voices to well-adapted adult survivors of childhood maltreatment—victims of maltreatment who did not perpetuate a vicious cycle of abuse as reported in this literature. Specifically, my study also seeks to identify the experiences contributing to adult survivors' personal and professional perseverance of childhood poverty, physical and sexual *abuse*.

#### *The Case Against Intergenerational Transmission of Child Maltreatment*

Several research studies have argued against the concept of intergenerational transmission of child maltreatment. These studies examined the narratives of adult women survivors of childhood maltreatment (Thomas & Hall, 2008). Data consisted of a total of 27 survivors who ranged from ages 27–79, in which most of them experienced sexual abuse, along with physical abuse, emotional abuse, and neglect. Findings from three sets of interviews showed that while participants experienced depression, they succeeded remarkably in work, education, and parenting (Thomas & Hall, 2008). The study opposes the assumption that maltreatment victims will perpetuate abusive behavior as parents.

Robert (2011) also studied the experiences of child maltreatment survivors through their processes of becoming parents. Participants comprise eight survivors of child maltreatment with ages ranging from 38 to 55 years. Using grounded theory as an approach to methodology, findings from interviews and observational field notes

indicated that child maltreatment survivors desire an evolved parental identity shaped by the specific contexts of their ability to obtain support and form connections with people. This study disproves the intergenerational cycle of child maltreatment as participants in this study sought to break the cycle of abuse by achieving an evolved parental identity.

Eshed Bar-Sade (2008) qualitatively explored factors contributing to breaking the intergenerational transmission cycle of maltreatment by adult men and their ability to show resilience in parenting. Using content analysis to understand the experiences of neglect narrated by three married men with at least one offspring between the ages of 3–15, findings showed that participants' ability to function and adjust had evolved and changed through time. While participants still had challenges adjusting socially and emotionally, they demonstrated resilience in the domain of parenting (Eshed Bar-Sade, 2008). This study also identified seven common yet significant themes that characterized participants as non-neglecting fathers. For instance, participants were all conscious about evolving and being different from their maltreating parents. These participants consciously constructed their identity as non-neglecting fathers during the first pregnancy (Eshed Bar-Sade, 2008).

Another research study highlighting participants' ability to break the intergenerational transmission cycle of maltreatment investigated the protective factors that prevented the intergenerational cycle of child abuse and the non-abusive strategies utilized by women who experienced abuse as children to raise their offspring (Hall, 2011). Findings from the interviews of three female participants highlighted participants' solemn promise to protect and support their children. Results also unveiled participants'

ability to rectify their abusive histories by adopting parenting styles different from their abusive parents and developed creative, flexible parenting methods (Hall, 2011).

The above research studies explored factors that contributed to breaking the intergenerational transmission cycle of abuse. They also highlight how participants with a history of abuse demonstrated resilience in their parenting styles. Like these studies, this Problem of Practice explores resilience as a theoretical framework to understand the experiences of child abuse survivors. Specifically, this study examines the factors that contributed to them being well-adjusted adult survivors of child abuse. This research study focuses on understanding the intersection of sexual abuse, physical abuse, and poverty. This study aims to examine how poverty could have impeded adult survivors from accessing treatment and recovery services at an earlier time in their lives.

#### *Treatment for Trauma Victims*

For decades, doctors prescribed multiple types of therapeutic recommendations to adult survivors of childhood trauma. Suggestions on how to help adult survivors of child sexual assault (CSA) range from psychotherapy to medication. The determining factor on whether therapy fostered healing from childhood trauma varied based on the individual. The research supports that some form of therapy or even intermittent therapy was better than not having treatment at all (Chard, 2004; Finkelhor & Berliner, 1995; McDounag et al., 2005; Ross & O'Carrol, 2004; Saywitz et al., 2000).

Mindfulness through meditation therapy served as another suggested alternative for helping support adult survivors. Researchers Kimbrough, Langenberg, Chesney, Berman Clin (2010) reported their findings regarding mindfulness meditation. Their investigation involved twenty-seven adult survivors of childhood sexual abuse. When

trauma victims truly focus on activities that bring peace of mind, they are less likely to feel anxiety from past experiences. Practicing mindfulness as a trauma intervention has brings significant benefits to the afflicted.

The cost to provide the much-needed treatment and remedies for victimized children and adult survivors is expensive. This issue relates to the intersectionality of physical and sexual abuse and poverty—a deadly combination. Research has shown that children from low socio-economic backgrounds are more likely to experience maltreatment and less likely to access consistent therapeutic services (Sedlak et al., 2010). Dufy (2016) noted that poverty is a debilitating condition that has a lasting impact on the health of individuals. More so, the combination of early childhood adversity and poverty severely impacts the structural design of the brain and prolongs lifelong illness (Dufy, 2016). Dufy (2016) argues that while poverty can be a motivating factor to humans, it can also promote depression in individuals who have experienced trauma. Therefore, it is essential to understand the impact of poverty on children who cannot afford treatment.

#### *The Intersectionality of Sexual Abuse, Physical Abuse, and Poverty*

There is an irrefutable connection between sexual abuse, physical abuse, and poverty (American Civil Liberties Union [ACLU], 2008; Bryant-Davis et al., 2010; Fahmy et al., 2016; Gerstein, 2000; Greco & Dawgert, 2007; Runarsdottir et al., 2019; Sulimani-Aidan & Benbenishty, 2013). For instance, the inability to access one's basic needs could increase the risk for sexual violence (Greco & Dawgert, 2007). Simultaneously, individuals who experience sexual abuse could be impacted economically, thus leading to several stressors and challenges, such as unemployment,

mental health issues, homelessness, and disrupted education (ACLU, 2008; Bryant-Davis et al., 2010; Greco & Dawgert, 2007).

Drake and Pandey (1996) explored the connection between child abuse and poverty and found a strong correlation between the two. Data from the 1990 census and Missouri's 1992 Child Abuse and Neglect (CA/N) suggested a positive relationship between neighborhood poverty and neglect, physical abuse, and sexual abuse. Compared to moderate poverty areas, higher poverty neighborhoods have a more significant number of child maltreatment incidents. Also, moderate poverty areas recorded a more substantial number of child abuse incidents than low poverty areas. More specifically, poverty strongly influenced neglect, a moderate impact on sexual abuse, and a strong relationship with physical abuse (Drake & Pandey, 1996).

Bryant-Davis et al. (2010) also explored the relationship between mental health and income effects on 413 African American sexual assault survivors using hierarchical regression analyses. Results revealed that after experiencing a history of child sexual abuse, lower-income African American adult sexual survivors faced more significant symptoms of depression and PTSD and are more likely to engage in illicit drugs than their counterparts with higher income (Bryant-Davis et al., 2010). Based on four studies (Bryant-Davis & Ocampo, 2006; Kiser & Black, 2005; Ngu & Flores, 2007; and Russell & Davis, 2007), Bryant-Davis et al. (2010) concluded that the mental health challenges that poor women face are as a result of experiencing multiple traumas. They also argued that poverty can impede one's access to mental health services and that the inaccessibility to these services would potentially hinder therapeutic effects. According to Bryant-Davis et al. (2010), counselors and mental health practitioners should consider adopting

culturally competent care that caters to individual socio-economic status and its challenges.

A guide on the relationship between poverty and sexual violence noted an undeniable link between sexual violence and homelessness (Greco & Dawgert, 2007). According to the authors, sexual abuse victims and survivors, such as children, teens, migrant workers, refugees, or immigrants, often depend on their abusers for basic needs, including housing and shelter, and escaping leads to homelessness. As a result, sexual assault victims and survivors experience the trauma of inaccessibility to medical and legal resources, social alienation, and isolation (Greco & Dawgert, 2007). Similarly, sexual violence victims are more likely to lose their employment as they tend to struggle on the job for several reasons (health care services, trauma, depression, anxiety, etc.). As a result, individuals could experience prolonged poverty, impeding their recovery process (Greco & Dawgert, 2007). Sexual violence can also disrupt one's education and consequently diminishes income, employment opportunities and ultimately hinder access to health care —a significant need to survive after experiencing sexual violence (Greco & Dawgert, 2007).

An article on domestic violence and homelessness showed that poor women with a higher likelihood of being homeless have an increased risk of domestic violence since they have limited choices and often find it more difficult to escape their perpetrators (ACLU, 2008). Women with low household incomes experience domestic violence faster than their counterparts with higher household incomes. Additionally, women who reside in poor neighborhoods are at a greater risk of experiencing domestic violence than those in more affluent communities (ACLU, 2008).

Farrell et al. (2017) argued that children in poor communities have a higher risk of experiencing abuse in examining the relationship between community poverty and child abuse fatalities in the United States. The authors collected longitudinal data (1999–2014) on child abuse fatalities in U.S. children (0–4 years) from the Centers for Disease Control and Prevention Compressed Mortality, along with U.S. Census data. Results from the multivariate negative binomial regression modeling indicate that communities with higher poverty concentration experienced a greater rate (>3 times) of child abuse fatalities than communities with less poverty concentration (Farrell et al., 2017).

Finally, Runarsdottir et al. (2019) further examined the effects of gender and family affluence on adolescents' experiences of sexual abuse in 10th grade. Self-reported data of the 2014 Health Behavior in School-aged Children study and 3,618 participants revealed that adolescents, particularly girls from low socio-economic status, have an increased likelihood of experiencing sexual abuse than those with high or medium socio-economic backgrounds (Runarsdottir et al., 2019). The authors concluded that girls who reside in less affluent homes are highly vulnerable to sexual abuse.

Overall, research on the intersection of sexual abuse, physical abuse, and poverty has shown a higher risk of experiencing sexual and physical abuse in poverty-concentrated areas. Research also revealed that sexual violence victims and survivors are prone to homelessness, diminished earnings, and unemployment. Studies have shown that impoverished individuals may not access the health care services they need to survive after experiencing sexual abuse. This literature review emphasizes the negative impact of the intersection of sexual abuse, physical abuse, and poverty. A gap exists in the literature that reports the successful outcomes of adult survivors of childhood maltreatment who

lived in poverty. This study focused on the narrative accounts of physically and sexually abused survivors while living in poverty. Discussions with survivors will uncover the attributes they possess that help them build resilience despite adversity.

### *Understanding the Resilience Theory*

My study aimed to understand how resilience influences the outcomes of child abuse survivors. Specifically, this narrative case study explored the experiences of a group of five adult survivors of verbal, physical, and sexual abuse. Using a non-deficit approach, I examined the positive attributes that resulted from their lived experiences. I emphasized seeking experiences that contributed to their ability to persevere. Research on the Resilience Theory indicates that some child abuse survivors show resilient attributes that help them become well-adjusted adults.

For example, using logistic regression, Kimberly et al. (2007) studied various levels of resilience predictors and changes in resilience in children who experienced abuse and neglect. Results from 676 documented abuse and neglect cases reveal that children who were abused and neglected in adolescence and early adulthood showed resilient attributes. According to the authors, racial and gender indicators are central to understanding resilience since results indicate that African American individuals and females who experienced abuse and neglect in childhood seem to be more resilient than their male, white, and non-Hispanic counterparts. Also, factors such as cognitive ability, living in a stable residence, and growing up in a privileged community, influenced resilience in participants (Kimberly et al., 2007).

In the same year, Collishaw et al. (2007) explored indications of mental or behavioral challenges in individuals (adolescents and adults) who reported cases of

childhood abuse. The authors also examined the extent of resilient attributes among this group of people. Data collected from an epidemiological community sample and a 30-year follow-up period indicated that a high risk of adult psychopathology (PTSD, depression, suicidal behavior, substance abuse, etc.) was more prevalent in abused individuals. Also, a considerable percentage of individuals who also experienced childhood abuse have no account of psychiatric challenges throughout the 30-year follow-up period. Specifically, data analysis shows that this group of individuals who did not experience psychiatric problems are well-adjusted and described as resilient in areas of health, non-penal incidences, and interpersonal relationships (Collishaw et al., 2007).

A similar quantitative study by Tlapek et al. (2016) focused on exploring the function of resilient attributes in the relationship between childhood abuse and psychopathology, including revictimization, in 237 adolescent girls between ages 12–19. Survey data reveal a significant correlation between child abuse, psychopathological factors (depression, PTSD, substance abuse, etc.), including revictimization. Tlapek et al., 2016. correlated higher levels of resilience characteristics with more minor PTSD symptoms, depression, and revictimization. Data also showed that individuals who reported sexual abuse but showed resilience characteristics have a lower likelihood of experiencing depression, PTSD, and revictimization (Tlapek et al., 2016). Similarly, participants who reported emotional abuse but showed resilience characteristics have a lower likelihood of experiencing depression (Tlapek et al., 2016). The authors highlight resilience as a protective factor in the relationship between abuse and psychopathological factors (Tlapek et al., 2016).

Furthermore, Pérez-González et al. (2017) investigated sexual abuse, symptoms of emotional and behavioral issues, individual, family, and social protective factors in 1105 children and youth between ages 12 and 17 from northeastern Spain. This quantitative study indicates high levels of psychological maladjustment among children and youth who reported experiences of sexual abuse. Additionally, resilient factors such as low negative cognition, high social abilities, empathy, tolerance, affinity to school and family, as well as increased self-confidence resulted in a lower likelihood of experiencing emotional and behavioral problems in children and youth with a history of sexual abuse. The above-referenced research further emphasizes how resilient attributes influence the favorable adjustment of child abuse victims in adulthood.

#### *Synthesizing Social Learning Theory, ITCM, and Resilience Theory*

The application of Bandura's social learning theory to individuals who experienced childhood physical and sexual abuse suggests that children imitate their parents' intentional or unintentional behaviors, impacting the child's future behaviors in social situations (Burdick, 2014). As such, a child can learn violence when their parents hit them to correct a bad attitude. While the intention may have been to make them behave properly, the unintentional message it sends to the child is that violence is a way to communicate one's feelings (Burdick, 2014; Schelbe & Geiger, 2017). Similarly, children who experience physical and sexual abuse imitate these behaviors, impairs their future parenting skills and the behaviors they teach to their offspring (Abbassi & Aslinia, 2010; Burdick, 2014; Durant et al., 1994).

Bandura's social learning theory correlates to the ITCM theory. The ITCM theory posits that a person who experienced childhood maltreatment has an increased tendency

to maltreat their children (Schelbe & Geiger, 2017). The ITCM theory strongly suggests that individuals who abuse their children were victims of abuse themselves and that children who experience abuse grow up to abuse their offspring; thereby conceptualizing the ITCM theory, in some ways, as a family tradition of maltreatment rooted in cultural and social standards and shaped by various factors (Schelbe & Geiger, 2017).

The implicit and explicit examination of ITCM integrates Bandura's social learning theory as the process of behavior transmission and is often implicitly grounded in social learning theory (Schelbe & Geiger, 2017). The integration of social learning theory in ITCM is due to how social learning correlates to understanding child maltreatment patterns among individuals who experienced childhood abuse and consequently learned adaptive or dysfunctional parenting practices (Schelbe & Geiger, 2017). While Bandura's social learning theory establishes the relationship between childhood history of abuse and the perpetration of abusive behavior, there is no causal relationship between these two behavior patterns. A history of abuse is not the only factor that shapes future abusive behavior, nor does it necessarily predict such behavior (Schelbe & Geiger, 2017). The theory also does not acknowledge environmental factors that may influence parenting approaches and foster child abuse and ITCM (Schelbe & Geiger, 2017).

The Resilience Theory focuses on demonstrating strengths that enable individuals to surmount adversity (Collishaw et al., 2007; González et al., 017; Kimberly et al., 2007; Pérez-Tlapek et al., 2016; VanBreda, 2001). An individual tends to develop the capacity to adapt despite difficult or threatening circumstances (Masten et al., 1990). The term resilience defines individuals who have experienced harrowing events but overcame

them, those viewed as high-risk but have successful outcomes than one typically expect, and individuals who exhibit positive adjustment behaviors despite life challenges (Masten et al., 1990). Building resilience in children through community, schools, and family will help maltreated children live healthy lives.

Resilience also draws from the assumption of social learning theory that emphasizes the continuous interaction between human behavior and cognitive, behavioral, and environmental factors. This behavior is naturally self-regulatory (Scoloveno, 2018). Also, the assumptions of social learning theory suggest that individuals can select, organize, and transform stressors that impact them to achieve mastery and competence (Scoloveno, 2018). Lastly, people who perceive themselves as self-efficient or have a high self-value are more likely to possess increased coping efforts (Scoloveno, 2018). Increased coping efforts are related to self-efficacy, which is a promotive factor for building resilience.

Compared to Bandura's social learning theory and ITCM, the Resilience Theory focuses on strengths that foster positive abilities, qualities, and achievements (Schelbe & Geiger, 2017). While there are risk factors associated with the experiences and circumstances of individuals, the Resilience Theory acknowledges and promotes perseverance and the protective factors one owns (Schelbe & Geiger, 2017). Relatedly, understanding the risks associated with ITCM should not be the sole focus. The attention given to the strengths that individuals exhibit when they break the cycle of ITCM is essential. For example, individuals often possess a myriad of strengths and resources to avoid ITCM (Schelbe & Geiger, 2017). Awareness of strengths individuals use to

overcome adversity is more beneficial than focusing on deficits caused by adversity. The Resilience theory serves as a framework for viewing strengths.

### *Conclusion*

Children in the United States experience physical abuse, sexual abuse, as well as emotional abuse. The numbers cited within this section suggest that childhood abuse in the United States is a pervasive problem for years. While society has advanced in how it deals with the abuse of children and its knowledge of the life-long effects of abuse, the need for additional expertise and interventions that can support maltreated children remains. While a plethora of literature examines the impact of sexual abuse, physical abuse, and poverty on adult survivors, there still lies a need to examine salient knowledge and resilience that can help mediate the effects of these kinds of abuses.

The current literature expounds on the multiple maladaptations and suggests interventions that are not at the disposal of those living in poverty. Most of the interventions were experimental and made a positive difference for individual traumas. Children cannot care for themselves and depend on their caregivers for their physical, social, and emotional survival. An effective framework would encompass treatment for all, the victim, the victimizer, the onlookers, and the caretakers of the wounded. This study describes and explains the attributes that adult survivors of childhood poverty and abuse indicate contributed to their ability to persevere both professionally and personally. This study's findings will be for publication in professional journals to benefit educators and those who work with abused children.

## CHAPTER THREE

### Methodology

#### *Introduction: Research Questions*

The purpose of this narrative case study was to determine the experiences that adult survivors of childhood poverty, physical and sexual abuse attribute to their perseverance. Additionally, the sub-question addressed the role of religion, school experiences, and participation in a therapeutic session. By reflecting on the stories of adult survivors, I explored the process survivors underwent to overcome adversity. This research challenged the concept of Intergenerational Transmission of Child Maltreatment (ITCM). ITCM believes that child abuse and neglect victims will inevitably abuse their children (Kempe et al., 1962; Spinetta & Rigler 1972; Garbarino & Gilliam, 1980; Herzberger 1990). Thus, creating a cyclical process that will continue throughout future generations. Telling the stories of well-adapted adult survivors of childhood maltreatment who stop the cycle of abuse, obtain higher educational degrees, hold promising careers, and maintain healthy romantic relationships. Former victims of child maltreatment informed audiences of interventions that contributed to their survival. These survivors defy the statistics that support the cycle of abuse theory. The research addressed one central question and three sub-questions:

- What experiences do adult survivors of childhood physical abuse, sexual abuse, and poverty attribute to their perseverance?

#### Sub Questions

- What role did experiences at school play in building perseverance in adult survivors of childhood physical abuse, sexual abuse, and poverty?

- What role did religious experiences play in building perseverance in adult survivors of childhood physical abuse, sexual abuse, and poverty?
- What role therapeutic intervention play in building perseverance in adult survivors of childhood physical abuse, sexual abuse, and poverty?

The primary research question allowed insight into the experiences of adult survivors.

Analyzing and synthesizing the participants' narratives yielded answers to the primary research question and sub-questions.

The qualitative research methodology was the most suitable paradigm for this study. I used narrative data to develop an in-depth understanding of participants using a qualitative design (Creswell & Poth, 2018). Found within the qualitative research paradigm is case study methodology. Case studies research allows the researcher to bind studies of a phenomenon based on thematic analysis (Yin 2014). The research was based on the participants' experiences as they pertain to the survival of child abuse. Therefore, I chose a case study design for the current qualitative research.

#### *Researcher's Perspective*

As the principal investigator in this study, the audience must be aware of who I am and what association I have with this research study. Disclosure of personal connections to participants and past experiences helps avoid researcher bias (Creswell & Creswell, 2018 p. 183). This study relates closely to my journey. I am a survivor of both physical and sexual abuse. I lived all my childhood and early adulthood in poverty. I was homeless during my last two years of high school. I barely graduated. Although in 1994, I began college at Prairie View A&M University. During my freshman year, I attempted suicide. I was dropped from classes on the twelfth day of my sophomore year due to my inability to pay or provide evidence of secured funding through federal student aid. Two

years later, I was pregnant with my first child. I was evicted from my apartment with my one-month-old son at the age of twenty-two. The eviction was a turning point in my life. Being a mother motivated me to succeed. I had to be a better version of myself so that he would not have to experience what I experienced. I had to be sure that he would have a better life. I secured work at a national bank. After I held several company positions, my managers promoted me to a Senior Loan Analyst for International Banking.

In 1999, I enrolled at the University of Houston to begin college for the second time. I worked full-time during the day and attended school full-time at night. During this time, I learned of Intergenerational Transmission of Abuse in Adolescent Psychology. The professor emphasized statistics about poor physically and sexually abused children from broken homes and their unlikelihood in completing their college education. The statistics she shared twenty-one years ago are like those reported in the present research. Duncan (2000) stated that more than half of college students who experience sexual abuse or various types of maltreatment drop out by their second semester (Duncan, p. 987). Although there were 30 to 40 students in the class, I felt she spoke directly to me. I asked myself, what was the point in trying? These statistics seemed to predict my failure, which left me in tears and prompted me to question my attempts to succeed in college. I dropped out of college again, married my son's father, and did not return to school until ten years later. My life reflects the statistics surrounding abuse. However, I was able to change my trajectory by returning to college and securing a career. When I returned to college for the third time, I graduated *Magna Cum Laude*. Despite the highs and lows in my life, I have persevered. My experiences transformed me from a victim to what I am today. I currently hold a master's degree in Educational Leadership for Linguistically

Diverse Learners, I am a Doctoral Candidate, and I will celebrate my 20<sup>th</sup> wedding anniversary in November. I am also the proud mother of three very healthy and productive children.

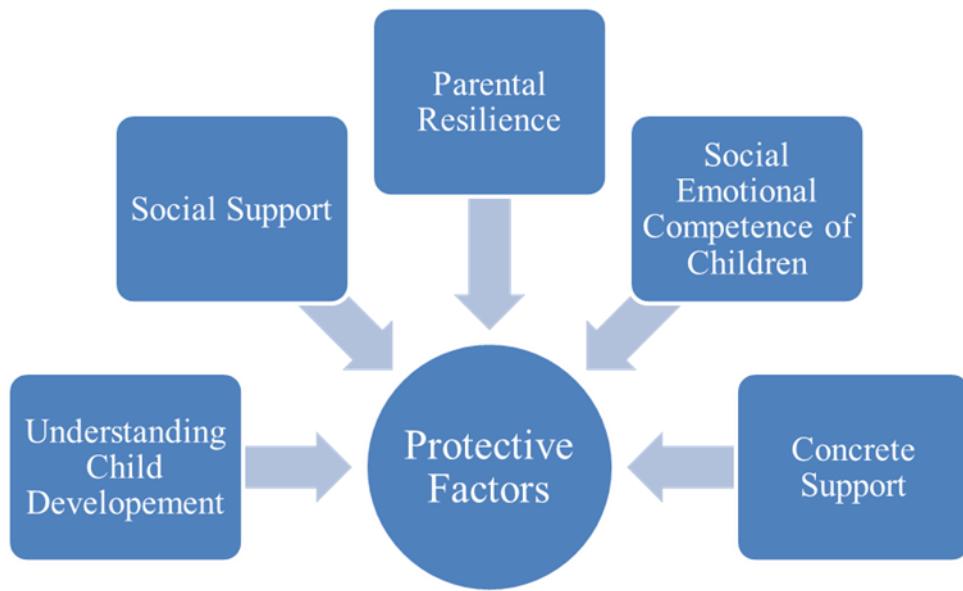
I agree that abused children experience maladaptation because my experience confirms the research. However, I cannot accept previous research findings that only detail the deficits of adult survivors of child maltreatment as a conclusion. My experiences confirm otherwise. I experienced highs and lows, ultimately representing a counterexample of popular research on adults who were once victims of child abuse. Therefore, this research is vital to change the narrative of abused children. My life experiences compelled me to explore the topic of adult survivors of childhood abuse and poverty. I often wonder how I persevered. I longed to understand how some childhood victims prevail and overcome deadly odds while others continue the cycle of abuse. I hope this study's results are published in professional journals to benefit those who work with abused children. I would like to use the findings from this study as a basis to purpose future studies.

#### *Theoretical Framework*

The Resilience Theory most influenced this research. This theory provided a framework for viewing ITCM from a non-deficit perspective and focused on survivors' strengths. This study followed an *a posteriori* theoretical framework that extended or drew from two perspectives of the Resilience Theory's theoretical frameworks. It provided details and insights from adult survivors of childhood physical abuse, sexual abuse, and poverty in the form of narrative case studies. Participants' narratives allowed me to gain insight into the phenomenon that they survived. It is only through rich

discussion that I, as the researcher, could gather a detailed understanding that explained the outcomes from their shared experiences (Creswell & Creswell, 2018; Creswell & Poth, 2018; Hancock & Algozzine, 2006; Stake, 2006; Yin, 2014). The case study design allowed me to analyze common themes and categorize behaviors (Creswell & Creswell, 2018; Creswell & Poth, 2018; Hancock & Algozzine, 2006; Stake, 2006; Yin, 2014). This research also examined the intersectionality of physical abuse, sexual abuse, and poverty. Past literature has examined child abuse topics in isolation. However, excluding poverty in child abuse research is needed because poverty limits access to recommended treatment for abused children. Without the inclusion of the ramifications of living in poverty, child abuse research left questions on how adult survivors of child abuse persevered.

The Resilience Theory framework, particularly the protective factors model, contributed to the design of the research questions. This theory focuses on the protective factors that abuse children develop because of their lived experiences. Therefore, the research questions allowed the participants to explain factors that contributed to their resilience. Open-ended questions allow participants to narrate and reflect on their lived experiences (Creswell & Creswell, 2018). My study utilized the Protective Factor Model to understand the experiences that adult survivors of childhood physical abuse, sexual abuse, and poverty attributed as the reasons they persevered personally and professionally. The Protective Factor Model describes the interaction between the negative results and the protective factors (Ledesma, 2014). Figure 3 illustrates the protective factor model.



*Figure 3.* Protective factors model.

Utilizing the protective model's framework allowed me to identify the protective factors that adult survivors attributed to their resilience during and after abuse. My research aimed to identify the protective factors to make informed recommendations to school administrators, educators, school counselors, and support staff whose primary roles include supporting the education and socio-emotional learning for children.

#### *Research Design*

This narrative case study follows the guidelines of the qualitative research design methodology. The research questions prompted the qualitative research design. Questions that begin with “how” or “what” are “open-ended, evolving, and non-directional. These question types commonly appear in qualitative research” (Creswell & Poth, 2018, p. 137). Furthermore, this study aims to seek understanding, which is a common attribute that warrants qualitative research. According to Creswell and Poth (2018), individuals

share lived experiences with the researchers to provide a clear understanding of events. (p. 68). It is appropriate to use qualitative research when variables are not easily measured or to gain an understanding of the issue (Creswell & Poth, 2018, p. 45). This study ascertains the commonalities of adult survivors who were once victims of childhood abuse while living in poverty.

#### *Site Selection*

In March of 2020, the United States declared a pandemic. A highly contagious disease, COVID-19, rapidly spread across the nation. Stay-at-home orders were put into place to help stop the spread of the deadly disease. To protect human subjects from the COVID-19 Pandemic, commonly referred to as the Corona Virus, additional care and consideration for the data collection site remained a top priority. Based on recommendations from the CDC and social distancing requirements, “maintaining physical distance between the person and staying at home” helps stop the virus’s spread (Center for Disease Control, 2020). According to the Center for Disease Control 2020, “Community mitigation activities are actions that people and communities can take to slow the spread of infectious diseases. Community mitigation is critical before a vaccine or drug becomes widely available” (Center for Disease Control, 2020). There were several options for data collection sites.

For participants who felt more comfortable in a face-to-face setting, I secured a location that would allow for safe interactions. I sent a letter to We Work offices in the Houston Galleria to confirm an area for face-to-face interviews. We Work provides co-working space options. They offer co-working space options and are open twenty-four hours a day and five days a week to students enrolled in 2U powered programs.

Amenities include open or private workspaces, food, beverages, and support staff. I requested permission to use this location because it serves as a location without a vested interest in the research. Utilizing a place that benefits from the study is not the best practice (Creswell & Creswell, 2018, p. 92). Additional options were available for all participants. I offered telephone interviews, Zoom video conferences, and email correspondence based on the participant's level of comfort with each.

### *Participants and Sampling*

#### *Participant Recruitment*

I conducted participants' recruitment in three phases. During Phase I, I released a pre-recorded YouTube video that provided an overview of the research topic to Facebook, Twitter, Instagram, and LinkedIn. Using social media to gain participation in research studies is common (Rudestam & Newton, 2014, p. 91). The video ended with a request for interested volunteers to click on a Universal Records Locator (URL) that led them to answer four questions from the original ACEs survey. Viewers of the video had time to review details of my study at their leisure as often as needed to determine if they met the criteria and consider if they wanted to participate. Social media recruiting is effective when attempting to locate hard-to-reach populations because it provides anonymity "without a requirement for in-person contact with the research team" (Russomanno et al., 2019). Figure 4 depicts a screenshot and script used in the participant recruitment survey.



Hello, my name is U’Nika Harrell, and I am a Doctoral Candidate at Baylor University. I would like to invite you to participate in my research study entitled, Enigma: The Power of Resilience. The purpose of my study is to ascertain the attributes that adult survivors of childhood physical abuse, sexual abuse, and poverty indicate as contributors to their ability to persevere both personally and professionally. My goal is to build a body of knowledge from the stories told by adult survivors to help benefit children in similar situations. The information will be used to inform educators and child advocates. Your identity will remain anonymous. If you are interested in participating in this groundbreaking research please complete the short survey by visiting this link <https://forms.gle/bBqKBuRuZwCeFbvKA> and if not, please forward this video to someone you know that will. If you have questions or would like more information, please feel free to email me at [nika\\_harrell@baylor.edu](mailto:nika_harrell@baylor.edu) or call 281-838-7489. Thank you so much for your time and consideration.

*Figure 4.* Participant recruitment video transcript.

During Phase II, I selected ten participants based on their responses to questions from a modified version of the ACEs survey pictured in Figure 5. Ten participants indicated they were physically abused, sexually abused, and lived in poverty.



## Enigma: The Power of Resilience

1. What email address would you like for me to contact you regarding this study?
2. What telephone number would you like for me to contact you regarding this study?
3. What is your preferred method of contact? <input type="checkbox"/> Telephone <input type="checkbox"/> Email <input type="checkbox"/> Text <input type="checkbox"/> Zoom <input type="checkbox"/> Skype <input type="checkbox"/> Prefer to meet face to face <input type="checkbox"/> Other
4. What is your marital status? <input type="checkbox"/> Single <input type="checkbox"/> Engaged <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Its complicated <input type="checkbox"/> Other
5. What is the highest level of education that you have completed? <input type="checkbox"/> GED <input type="checkbox"/> High School Diploma <input type="checkbox"/> Some College <input type="checkbox"/> Associates Degree <input type="checkbox"/> Bachelors Degree <input type="checkbox"/> Masters Degree <input type="checkbox"/> Doctorate
6. Prior to your 18 <sup>th</sup> birthday, did a parent or other adult in the household often or very often...swear at you, insult you, put you down, or humiliate you? Or did they act in a way that made you feel afraid that you might be physically hurt? <input type="checkbox"/> Never <input type="checkbox"/> Once <input type="checkbox"/> More than once <input type="checkbox"/> Frequently
7. Prior to your 18 <sup>th</sup> birthday, did a parent or other adult in the household often or very often...push, grab, slap, or throw something at you or ever hit you so hard that you had marks or were injured? <input type="checkbox"/> Never <input type="checkbox"/> Once <input type="checkbox"/> More than once <input type="checkbox"/> Frequently
8. Prior to your 18 <sup>th</sup> birthday did an adult or person at least 5 years older than you ever touch or fondle you or have you touch their body in a sexual way or attempt or actually have oral, anal, or vaginal intercourse with you? <input type="checkbox"/> Never <input type="checkbox"/> Once <input type="checkbox"/> More than once <input type="checkbox"/> Frequently
9. Prior to your 18 <sup>th</sup> birthday, did you often or very often feel that...you didn't have enough to eat, had to wear dirty clothes, and had no one to protect you or your parents were too drunk or high to take care of you or take you to the doctor if you needed it? <input type="checkbox"/> Never <input type="checkbox"/> Once <input type="checkbox"/> More than once <input type="checkbox"/> Frequently
10. If you are chosen to participate what name, alias, or pseudonym would you like to use (this will help to keep your identity anonymous)
<i>In the words of Maya Angelou, "We delight in the beauty of the butterfly but rarely admit the changes it has gone through to achieve that beauty." Thank you for being rare.</i>

Figure 5. Participant recruitment survey.

I adopted four of the ten questions from the Adverse Childhood Experiences (ACES) survey conducted at Kaiser Permanente from 1995 to 1997 (Felitti et al., 1998). I included questions one–three and question seven from the original ACEs survey.

According to Rudestam and Newton (2014), amending previously used surveys is acceptable (p. 99). The adopted questions pertained to different abuse categories: verbal, physical, and sexual. One question pertained to living in impoverished conditions. The adopted questions also aligned to the purposeful sampling criteria for qualified participants (Creswell & Poth 2018). Table 1 details the adopted questions and their sequential order.

Table 1

*Questions Adopted from Adverse Childhood Experiences Survey*

Sequence	ACES Survey Question
Question 6	Prior to your 18th birthday, did a parent or other adult in the household often or very often... swear at you, insult you, put you down, or humiliate you or act in a way that made you afraid that you might be physically hurt?
Questions 7	Prior to your 18th birthday, did a parent or other adult in the household often or very often... push, grab, slap, or throw something at you or ever hit you so hard that you had marks or were injured?
Questions 8	Prior to your 18th birthday, did an adult or person at least 5 years older than you ever... touch or fondle you or have you touch their body in a sexual way or attempt or actually have oral, anal, or vaginal intercourse with you?
Question 9	Prior to your 18th birthday, did you often or very often feel that ...you didn't have enough to eat, had to wear dirty clothes, and had no one to protect you or your parents were too drunk or high to take care of you or take you to the doctor if you needed it?

Purposive criterion-based sampling was ideal for identifying candidates for this study. “Criterion sampling works well when all individuals studied represent people who have experienced the phenomenon” (Creswell & Poth 2018, p. 157). Prior to conducting the research, participants submitted signed consent forms indicating their agreement to participate in the study (Creswell & Creswell, 2018, p. 91). The inclusion criteria for this

study were the experience of physical or sexual abuse as a child, lived in poverty, obtained a post-secondary degree, and commitment to a long-term healthy relationship. I maintained congruency with the focus of the study by using inclusion criteria.

### *Participant Sample*

I contacted ten participants based on their willingness to share experiences contributing to their survival of physical abuse, sexual abuse, and poverty during childhood. Additional inclusionary standards included in the survey were marital status and post-high school attainment. I excluded respondents that did not indicate physical abuse, sexual abuse, not married or in a committed relationship, or did not obtain an associate's degree or higher. Table 2 presents a synthesis of participants' responses to the recruitment survey, resulting in their transition from respondents to participants.

Table 2

### *Participant Profiles*

Participant Pseudonym	Gender	ACE Score	Abuse Type (s)	Relationship Status	Highest Level of Education
Avatar	F	6	FPSV	M	Bachelors
Cathy	F	5	FPV	M	Masters
Craig	M	4	PSV	M	Associates
Ebony	F	4	FPSV	M	Masters
June	F	5	SV	M	Bachelors
King	M	5	SV	M	Masters
KP	F	4	SVP	M	Doctorate
Noah	M	5	FPSV	M	Bachelors
Rená	F	5	SPV	M	Bachelors
Rose	F	5	FPSV	C	Masters

*Note.* C = Committed Relationship; F = Poverty; M = Married P = Physical; S = Sexual; V = Verbal.

During Phase III, I disaggregated survey responses from fifty-five respondents. I chose ten respondents to partake in my study based on their answers to the four questions from the ACEs survey (which indicated that they experienced verbal abuse, physical abuse, sexual abuse, and poverty), and their willingness to share the experiences that contributed to their survival of poverty, physical and sexual abuse during their childhood.

### *Data Collection*

One of the most important aspects of a research study is determining if the used measures are appropriate for the chosen type of study. Semi-structured interviews with room for variance are proper measures to use in qualitative studies (Creswell & Creswell, 2018, p. 183). This study relied heavily on participants sharing their childhood experiences. Researchers must ask themselves, “are the accounts valid and by whose standards, to support credibility, reliability, and validity” (Creswell & Poth, 2018, p. 253). To maintain the integrity of my study, I assessed the internal validity through member-checking. Participants could “judge the accuracy and credibility” of the study’s data, analysis, interpretations, and conclusions (Creswell, 2013, p. 252). I emailed each participant a copy of their narratives exactly how I planned to include them in my study.

I exhibited additional care and consideration for data collection location and implementation and the protection of human subjects due to the COVID-19 Pandemic, commonly referred to as the Corona Virus. Based on recommendations from the CDC and social distancing requirements, “maintaining physical distance between persons and staying at home” helps stop the virus’s spread (CDC, 2020). According to the (CDC, 2020) “Community mitigation activities are actions that people and communities can take to slow the spread of infectious diseases. Community mitigation is critical before a

vaccine or drug becomes widely available.” Therefore, I offered different options for data collection sites to participants. For participants who felt more comfortable in a face-to-face setting, I secured a location that would allow for safe interactions. I sent a request letter for interview space to the We Work offices in the Houston Galleria to confirm an area for face-to-face interviews. We Work offers co-working space options and was open 24 hours/5 days a week. Amenities included open or private workspaces, food, beverages, and support staff. I requested permission to use this location because it served as a location without a vested interest in the research. Utilizing a site where participants feel safe and comfortable provided an atmosphere that promoted sharing of information. Alternative options were available for all participants. I offered telephone interviews, Zoom video conferences, and email correspondence based on the participant’s level of comfort with each. Creswell, 2013; Creswell and Plano Clark, 2018 explain the importance of five essential steps in data collection procedures which begin with identify a data collection site where participants are free from distractions.

Effective data collection in qualitative research is a sequential method. According to Creswell and Poth (2018), this process includes gathering valuable information, the use of sampling procedures, obtaining permission, recruiting participants, identifying data sources, re-coding the data, and administering the process to answer evolving research questions (Creswell, 2013; Creswell & Poth, 2018; Creswell & Plano Clark, 2018). Prior to beginning the data collection process, I contacted the Institutional Review Board (IRB) for consent to research human subjects. The IRB determined that my study did not require a full review. I collected data in three phases; participant recruitment video,

google survey, desegregation of survey data to identify candidates who met the criteria to participate, and participant semi-structured face-to-face, online, or telephone interviews.

Phase I included a survey with four questions from the original ACEs survey along with research-specific questions I created. I selected potential candidates who indicated an answer other than none to questions 1–4, indicated that they obtained an associate degree or higher, and were in a committed relationship to continue to Phase II. I notified participants via their contact preference that they qualified to participate in my study. I confirmed interview dates, times, and preferred interview methods.

During Phase III, participants chose to partake in interview sessions via telephone and Zoom video conferences. I asked ten semi-structured interview questions with room for variation. The questions allowed me to determine if interested candidates fit the criteria to become participants in the research study. I notified participants of the sample size limit of 10 (Creswell & Plano Clark, 2018). I provided participants with details the virtual meeting details for Zoom video conferencing. I obtained permission via a signed consent form from each participant (Creswell & Plano Clark, 2018; Creswell & Poth, 2018). Finally, I confirmed dates and sent calendar invites based on the participant's preference. Respondents' replies to my initial survey were my first touchpoint with participants. Data collection began September 25, 2020 and commenced March 15, 2021. My data collection efforts included email and telephone follow-up to confirm additional interviews and ask clarifying questions. During initial interviews, I asked each participant the same questions outlined in the interview protocol. Table 3 displays the data collection efforts with each participant.

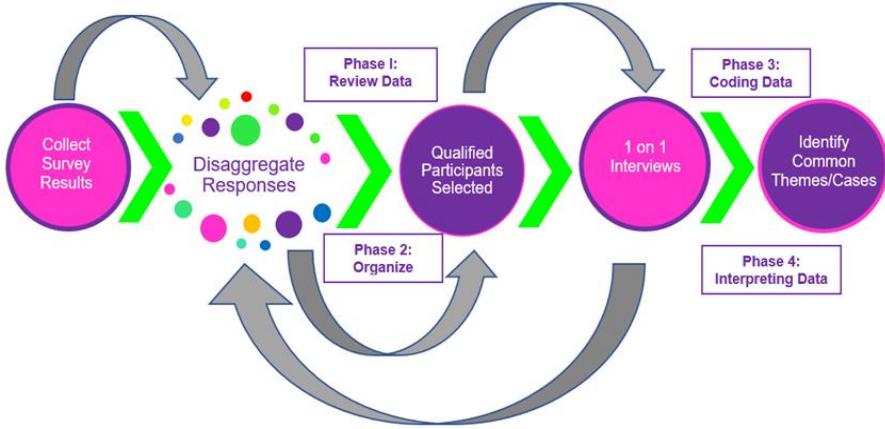
Table 3

*Data Collection Efforts*

Participant Pseudonym	Date Collections Began	Method of Collection	Number of Interviews
Avatar	10-31-2020	Survey   Video Interview   Telephone	3
Cathy	10-26-2020	Survey   Video Interview	1
Craig	09-27-2020	Survey   Video Interview	1
Ebony	02-10-2021	Survey   Video Interview   Telephone	1
June J.	10-26-2020	Survey   Video Interview   Telephone	4
King	10-30-2020	Survey   Video Interview   Telephone	1
KP	02-10-2021	Survey   Video Interview   Email   Text	3
Noah	02-05-2020	Survey   Video Interview   Telephone	2
Rená	09-25-2020	Survey   Video Interview   Telephone	1
Rose	10-30-2020	Survey   Video Interview   Telephone	4

*Data Analysis*

As depicted in Figure 6 below, the data analysis process in this study was cyclical, and I carried it out in four phases (Saldana, 2016). The first phase began with reviewing the initial data by desegregating responses submitted via the participant recruitment surveys. In this qualitative study, I selected ten participants during the first phase of the data analysis process. Participants included three men and seven women to ensure triangulation (Faid-Douglas, 2000; Creswell & Creswell, 2018). The selected participant responded once, more than once, or frequently to questions 4–9 (see Figure 5.). This group of participants indicated that they were married, widowed, or in a long-term committed relationship and obtained an associate's degree or higher. Selected participants also indicated that they lived in poverty, were physically and sexually abused as a child. I contacted participants via telephone to confirm their participation and answer any questions regarding the benefits and risk of involvement, the time and duration of the study, and concerns related to anonymity. I scheduled interviews for the selected participants.



*Figure 6.* Data analysis cycle.

Phase II began by organizing the data and conducting one-on-one interviews both face-to-face and virtually and lasted for 30 to 60 minutes. Participants were asked semi-structured open-ended questions that allowed them to narrate their experiences and allowed me to focus on understanding the essence of these experiences (Creswell & Poth, 2018). Figure 7 includes the interview protocol. The interview protocol encouraged participants to talk using questions that foster elaboration (Creswell & Poth, 2018). I was able to maintain accuracy and fidelity during interviews because I followed the interview protocol. The interview protocol ensured that I asked all participants the same questions. I asked clarifying questions as needed. Scripted questions with room for variation are recommended for qualitative research to provide thick, rich narratives (Creswell & Poth, 2018).

I documented the participants' responses using analytical notes, video, and voice recordings (Creswell & Poth, 2018). During the interviews, the participant selected a pseudonym to use for the duration of the study. I labeled all information from the interviews using participant's self-selected pseudonyms. Lastly, I reminded participants

who displayed discomfort of the one-hour complimentary session with a licensed counselor.

<i>Interview Protocol: Enigma: The Power of Resilience</i>	
<i>Name Used for Interviewee:</i>	
<i>Date of Interview</i>	
<i>Time of Interview:</i>	
<i>Location:</i>	
<i>Interviewer:</i>	
<i>Position of the interviewee:</i>	
<i>Questions:</i>	
1. Tell me about your childhood.	
2. How would you describe your social experiences during your K-12 education?	3.
3. How would you describe your academic experiences during your K-12 education?	
4. What factors do you perceive motivated you to attend college?	
5. What factors or combination of factors helped you survive during the abuse?	
6. How well do you think you have done in life despite your childhood? To what or whom do you credit for your accomplishments?	
7. How do you think that your childhood experiences influence your decisions in life?	
8. As a child abuse survivor, what attributes do you perceive influenced your parenting style?	
9. How would you describe your religious experiences? What role do you think your religious experience played in your personal or professional life?	
10. As a sexual/physical abuse survivor, what attributes do you perceive help you persevere personally and professionally?	

*Figure 7.* Interview protocol.

Phase III began with the initial coding of interviews to identify common themes. Data analysis is a process that continues until the completion of the research study (Galletta, 2013). I converted the information into conclusions, cases, and themes based on common attributes (Patton, 2015). Precision and careful planning enhance the quality of the results. Preparation and organization of collected data, such as analytic field notes, video conferences, must be reviewed several times, transcribed, and sorted (Creswell & Creswell, 2018; Saldana, 2016). I divided coding activities into two cycles based on when I collected the data. The Literary and Language method was used for the first cycle of

coding. Specifically, I used narrative coding to “draw on aspects of written and oral communication” (Saldana, 2018, p. 80). In the first cycle; this is similar to simultaneously coding during data collection (Miles et al., 2013; Simmons-Mackie, 2014; Saldana, 2016). To assist with coding, NVivo data analysis software was used. I categorized data based on research participants' stories, interpretive accounts, and the reader's reconstruction of interviews (Riessman. 2008). During the second cycle, I used coding to finalize and define the decision made during the first coding process (Saldana, 2016). Finally, I used pattern matching to categorize data (Saldana 2016). Carefully coding data allowed me to separate data according to themes; this is an essential process.

After the second cycle, coding the fourth and final data analysis phase consisted of interpreting the findings. I constantly bracketed my biases and presuppositions and asked clarifying questions to analyze participants' experiences accurately. To address trustworthiness, I ensured that the stories of my participants were accurately told using descriptive rich narratives and to ensure credibility and transferability (Creswell &. Creswell; 2018). A narrative case study design process includes documenting the procedures for checking, rechecking, and organizing the data throughout the study (confirmability). Case studies allowed me to align lived experiences for data collection (Yin, 2014). The case study design was the most appropriate design for my research.

I asked to provide an alias during the initial selection. Across reference of transcripts with a written report was conducted. I shared completed narratives with each participant to ensure accuracy. Participants provided a pseudonym during the initial survey to remain anonymous. I cross-referenced transcripts with the final research report to ensure accuracy.

### *Ethical Considerations*

It is the professional responsibility of researchers to adhere to a code of ethical standards for conducting research, given the purpose of this narrative case study, which was to ascertain the experiences and commonalities of adult survivors of childhood physical abuse, sexual abuse, and poverty possess that helped them persevere personally and professionally. I monitored the fidelity of the gathering process, collecting and examining the data according to the code of ethics outlined in the American Psychological Association Ethical Principles of Psychologists and Code of Conduct. Prior to conducting the research, I sent a research proposal to the Institutional Review Board (IRB) for review and approval (J. Creswell, 2018; J. Creswell, 2018). I submitted the intended use of the current research results to the Universities IRB. The IRB determined the present study did not warrant a full review because the study results focused on individual experiences and did not draw conclusions, inform policy, or generalize findings.

Additionally, Participants may feel uncomfortable discussing trauma from their past experiences. Therefore, a complimentary session with a licensed psychologist was available for participants who wish to speak with someone other than me. Participants may choose to withdraw from the study. I discussed ethical considerations with participants before beginning the study. The discussion included protecting the trust of their research participant and guard against any negative conduct that jeopardizes the integrity of the study (Israel & Hay 2006, as cited in Creswell & Creswell, 2018)—reviewing ethical concerns that may arise during data collection. During the data collection process, I explained the purpose of the study to the participants to avoid this concern (Creswell, 2018 & Creswell, 2018). This procedure helped to avoid deceiving

the participants. Before conducting interviews, I considered the interview time allocations and the availability of the data collection site to prevent interruption during interviews. I offered a complimentary one-hour session with a licensed counselor to all participants. Although all participants did not take advantage of this benefit, it was made available to all participants; this ensures that all participants receive the same incentive. As suggested by Creswell and Creswell (2018), waitlist provisions were put into place (p. 89, p. 93). I informed participants of this incentive at the beginning of the study and an opportunity to schedule their session at that time. I confirmed the request on a first-come, first-serve basis.

The most significant ethical issue that I was concerned with centered around respecting the imbalance of power. This moral issue was a concern because of my perspective and personal experience with physical abuse, sexual abuse, and poverty. This connection created a bias. This bias compelled me to acknowledge this information in the researcher's perspective section of my study. To address this concern the I reviewed the interview protocol depicted in Figure 7 above. I allowed time for participants to ask questions. Participants were aware that of their rights to withdraw from the study at any time. I avoided guiding the participants towards desired responses and sharing personal beliefs or experiences by strictly adhering to the interview protocol (Creswell & Creswell, 2018). I analyzed questions to avoid leading participants toward a particular answer. I avoided the exploitation of research participants through reciprocity (Creswell, 2018). I gave participants a copy of the final research study for collaboration. Collaboration with participants helped them to feel valued for their participation. By following these procedures, I avoided ethical concerns.

### *Limitations and Delimitations*

This qualitative narrative case study provided rich, detailed content that fostered an understanding of the participants' lived experiences. It allowed the readers to make connections to the participants. The small sample size of 10 in this study was a limitation. Additionally, some participants shared more information than others and were more comfortable answering some questions. Therefore, some studies are not as robust as others. The findings from a study with a small sample size make it difficult to generalize the results. The Covid-19 Pandemic presented a further limit to this study. The prolonged quarantine and later social distancing restrictions during the Covid-19 pandemic did not allow face-to-face interactions with participants. Therefore, establishing trust was a foundational element needed in this qualitative research because non-face-to-face interactions are less personal.

Delimitations included specific criteria for selected participants. I aligned these criterion-based stipulations with the goals of the research study; to understand the lived experiences of adult survivors of childhood physical abuse, sexual abuse, and poverty. I intentionally put parameters in place to attract a specific group of individuals.

This study focused on understanding the attributes of 10 adult survivors of physical and sexual abuse from a low socio-economic background. I conducted this search in the south region of the United States. The participants were individuals who obtained a post-secondary degree, maintained healthy romantic relationships, and experienced physical and sexual abuse as a child living in poverty. Participants in this study were from diverse racial and ethnic backgrounds and various states in the United States and from

### *Conclusion*

The purpose of this narrative case study was to ascertain the experiences of adult survivors of childhood physical abuse, sexual abuse, and poverty attribute to their perseverance. The analysis of their lived experiences could help minimize or mitigate the long-term effects of child abuse. In Chapter Three, I provided an overview of the methodology used for this study. Child maltreatment has the potential to impact all aspects of victims' lives negatively. Research surrounding positive outcomes of former victims must shed light on the variables that lead to resilience in physically and sexually abused children living in poverty.

In the subsequent chapter, I discuss the research findings in debt by outlining the results and discussing participants' responses to the interview questions. Through these discussions, I categorized participants' responses into four common themes that provided answers to the research questions and sub-questions, using NVivo qualitative data analysis software.

## CHAPTER FOUR

### Results and Implications

#### *Introduction*

The purpose of this narrative case study was to ascertain the experiences of adult survivors of childhood physical abuse, sexual abuse, and poverty attribute to their perseverance. The analysis of their experiences could help minimize or mitigate the long-term effects of child abuse. To conduct this study, I used a narrative, multiple case study design. To answer the central research question and sub-questions listed below:

- What experiences do adult survivors of childhood physical abuse, sexual abuse, and poverty attribute to their perseverance?

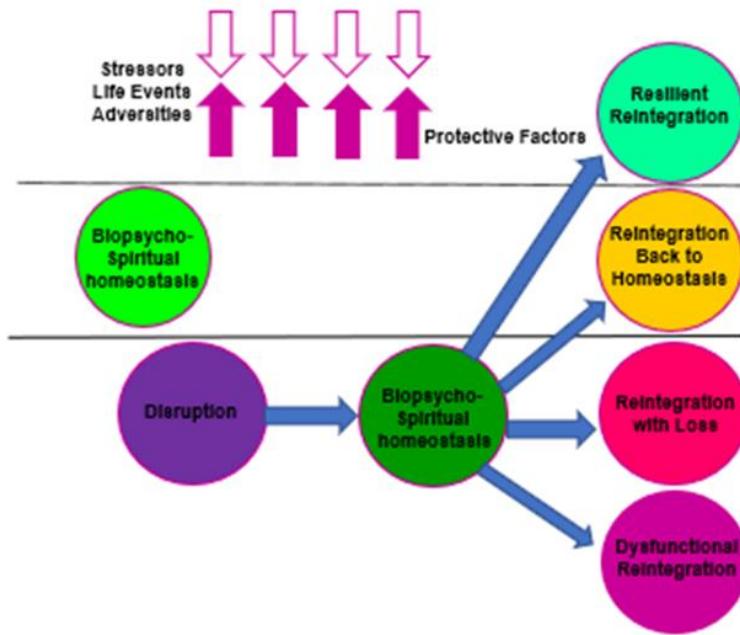
#### Sub Questions

- What role did experiences at school play in building perseverance in adult survivors of childhood physical abuse, sexual abuse, and poverty?
- What role did religious experiences play in building perseverance in adult survivors of childhood physical abuse, sexual abuse, and poverty?
- What role therapeutic intervention play in building perseverance in adult survivors of childhood physical abuse, sexual abuse, and poverty?

I used excerpts from ten participants' narratives and analyzed each record to discover common themes.

As previously explained in Chapter Two, the Resilience Framework suggests that child abuse survivors show resilient attributes that help them become well-adjusted adults. Promotive or protective factors reduce the likelihood of adverse outcomes (Fergus & Zimmerman, 2005). The Resilience Theory Framework served as a guide for data analysis. Figure 8 illustrates the process of a series of protective factors that emerge in

survivors because of life adversities (Garmezy, 1990; Masten, 2001; Masten & Powell, 2003; Perez-Gonzalez et al., 2017). Figure 8 illustrates the Resilience Model.



*Figure 8.* Resilience model. Source Note: The Metatheory of Resilience and Resiliency, Glenn Richardson (2002).

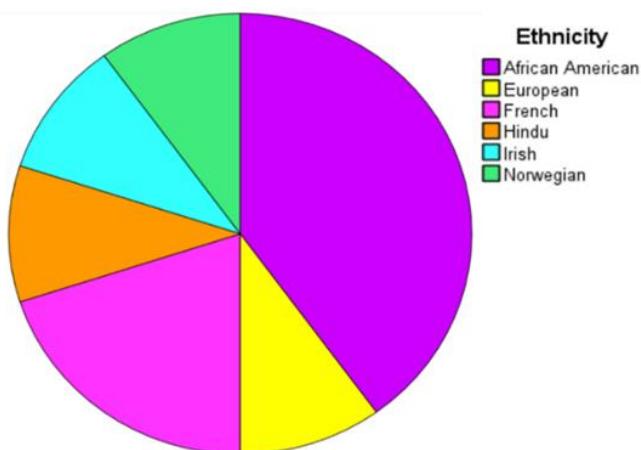
Protective factors include optimism; self-confidence; determination; and a sense of control (Afifi & MacMillan, 2011). Such factors contribute to positive outcomes and resilience.

Respondents ( $N = 55$ ) voluntarily chose to complete the participant recruitment survey. Demographics of the 55 individuals who completed the survey varied by race, age, and education level. There were 65.5% female respondents and 34.5% male respondents. The average age of the sample was 39.65 years old ( $SD = 8.13$ ). The race of respondents was as follows Asian (7.3%); Black (45.5%); Hispanic (5.5%); and White (41.8%). Most participants (58.24%) obtained Masters. Degree; (7.3%) had some college; (5.5%) obtained a High School Diploma; (3.6%) had an Associate degree; (20%)

obtained a bachelor's degree; and (5.5%) obtained a Doctoral degree. Data were analyzed using IBM SPSS (v. 27). I chose respondents who answered once, more than once, or frequently to questions 6, 7, and 8 as participants.

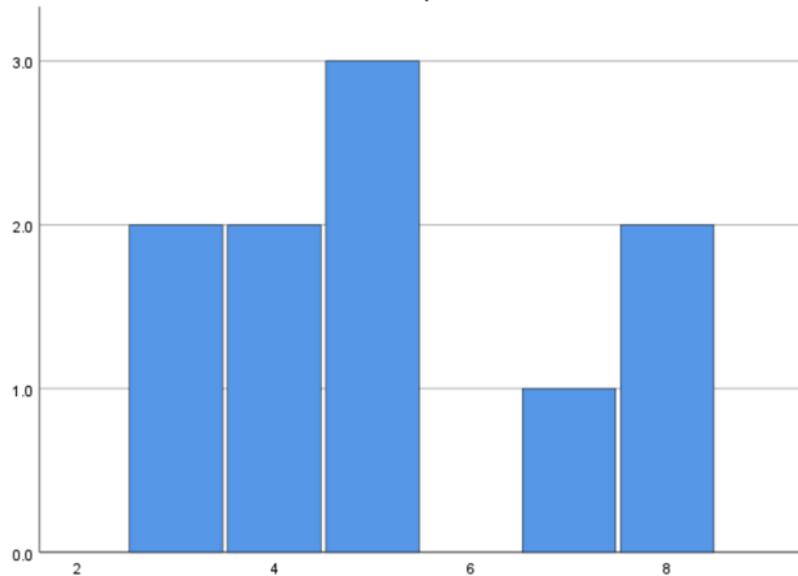
### *Participants*

Respondents who selected once, more than once, or frequently to one or more than one of the questions asked in numbers 6-9 indicated that they obtained an associate degree or higher and were in a committed relationship were selected as participants. Ten respondents ( $N = 10$ ) met the above criteria to serve as participants. The demographics of the 10 participants were as follows. Seventy percent of participants were female, and 30% were male. The average age of the participants was ( $M = 43.9$ ) years old ( $SD = 9.48$ ). There were three different races of participants and five different ethnicities, Asian (10%), Black (40%), and White (50%). The ethnicity of the participants was African American (40%), European (10%); French (20%); Hindu (10%), Irish (10%), and Norwegian (10%). Figure 9 below depicts the ethnicity of the selected participants for this case study.



*Figure 9.* Participant ethnicities count.

All participants obtained a post-high school degree. Twenty percent obtained an associate degree, 30% had a bachelor's degree, 40%; 1% had a Doctoral degree, and 40% obtained a master's degree. In addition to completing the participant recruitment survey, participants responded to ten yes or no questions from the ACE survey (previously listed in Table 3). The ACE score is the total number of questions from the ACE survey in which participants responded yes. Figure 10 shows participants' average ace score. The average ACE score for participants was ( $M = 5.2$ ) ( $SD = 1.87$ ). Participants who reported an ACE score of three were 20%, four 20%, and eight were at 20% reported scores of five were at 30%: a score of seven reported by 10% of participants. Two participants were the results of snowball sampling. Referrals from current participants are snowball samples (Creswell, 2013; Patton, 2002). All respondents agreed to participate in my study and self-selected pseudonyms for anonymity.



*Figure 10.* Participant ACE score.

Table 4 displays the main socio-demographic characteristics of the participant sample.

Table 4  
*Participant Demographics*

Participant (Pseudonym)	Age	Race	Ethnicity	ACE	Gender	Place of Birth
Avatar	36	Asian	Hindu	4	Female	India
Cathy	63	White	French	3	Female	United States
Craig	47	Black	African American	4	Male	United States
Ebony	41	White	Norwegian	5	Female	United States
June	29	White	European	5	Female	United States
King	49	Black	African	2	Male	United States
KP	40	White	Irish	5	Female	United States
Noah	44	Black	African	8	Male	United States
Rená	38	Black	African	7	Female	United States
Rose	52	White	French	9	Female	United States

#### *Case Descriptions and Thematic Analysis*

In this section, I detail the narratives acquired through one-on-one interviews with five participants. I asked open-ended related to five categories. I chose religious beliefs and school experiences because I predicted that both topics would be reasoning that survivors list as support for their perseverance. I chose the remaining categories; to challenge the research that suggests that children who experience child abuse will become adults who struggle to maintain healthy romantic relationships, less likely to obtain college degrees, and or more likely to become maladaptive adults (Springer et al.,

2007; Allen et al., 2014). I provided a brief description of participants' responses in a table before their corresponding narrative.

*Avatar | The Miracle Child.* Avatar began describing multiple childhood experiences starting with her birth. Table 5 provides an overview of my interview with Avatar. After exchanging pleasantries, I started the discussion by asking Avatar to tell me about her childhood. I intentionally began with this request to gain background knowledge of my participant's childhood experiences. The request for a background narrative left the conversation open for participants to share as much or as little information as they felt comfortable sharing.

Table 5

*Avatar's Overview*

Category	Findings
Childhood	Sexually abused by cousins, physically abused by her aunt, lived poorly in India.
K-12 Experiences	She loved school, never got in trouble, failing grades; the highest grade was in Art. She could only count on teachers.
College Experiences	She discovered her love of reading about religions.
Religious Beliefs	Believes that everyone has a powerful permanent energy that lives inside everyone.
Professional Career	Watching hard-working women as a child carried over into her worth ethic. High performer
Personal Relationship Experiences that contributed to perseverance	Her husband is a hero because he puts others first. Imagination, the innocence of not knowing, and parental resilience

*Childhood.* Avatar explained that she was the third child born to her mother but only the second to live. The second baby girl lived for six days after birth. Her brother is old than her by four years. Avatar was born in a small village in Ahmadabad, India. The

second baby was born prematurely and died after six days. She shares her story in a prideful yet humbling tone:

That's why she [momma] calls me her miracle child. She went through a lot of trouble during her pregnancy with me. Out of the eight months, she kept me in six of those months, and she was bedridden. I was not only born very premature, and I was very ill. Childhood, [deep sigh] three years after I was born, dad left to the U.S. I don't remember much before that. I didn't know that I had a father until I was seven years old. I had a hard time in my childhood being attached to anyone but my mother. The family I used to live with was my father's older brother, and his wife, and their children. Although I was not abused by his brother, I was by his wife and my cousin. My aunt hit me a lot over the smallest things.

Avatar explained that her father left for the United States when she was three and did not return until she was seven. In her culture, once a woman is married, they live with the father's family. It was uncanny to go back to the mother's family with the children. They were required to stay. Avatar and her mother endured emotional and physical abuse. Avatar also endured sexual abuse by her cousin. She nor her mother ever told her father. They took the abuse because they thought it was the norm for them. Avatar felt that her mother was never treated fairly by her father's family. Instead, her sister-in-law treated her like her personal servant. She never made a connection with her father's family. She only had her mother and brother. Avatar always knew of her father but did not genuinely connect with him until he returned to India. She then learned that her father sent clothes and money for her, her older brother, and her mother. She recalls her father questioning her mother:

Why is she wearing ripped-up clothes? Why is she not wearing the clothes I sent to her? That is when my mother told my father the truth. My dad confronted his brother and found out he took them (clothes and money) away. He told them I left my family with you in hopes that you will take care of them while I was away, and obviously, that is not the case. Dad stayed for three months, rented an apartment, and we stayed with him. He left and told Mom to go back to her mom. We stayed with my mother's

family until I was 10. For three years, we were a family of seven or eight people; even great-grandma was alive.

I could hear the positive change in her tone. The happy inflections in her voice let me know that she was no longer distressed, and I felt comfortable moving forward. Avatar describes moving with her maternal side of the family as the first turning point in her life. She surrounded herself by a caring family and no longer experienced abuse. She was happy. Avatar's description of how she felt about being with family and her school improvement resulted from her living in a stable residence. A stable home promoted cognitive factors and helped to influence resilience in participants. Avatar's change aligns with the research findings of abused children who receive external supports and assets. Supports for abused youth include family, adults, and school. Connectedness to family is a promotive factor that builds resilience in sexually abused children (Afifi & MacMillan, 2011; Bogar & Hulse-Killacky, 2006; Bronson, 1997; Kimberly et al., 2007; Marriott et al., 2014; Perez-Gonzalez et al., 2017).

*K-12 experiences.* Avatar struggled academically and socially during early elementary due to moving with her father's family, which marked the beginning of the abuse that lasted for four years. Avatar recalls always being afraid, not speaking to anyone, and rarely making friends. She did not tell the few girls she played with at the playground; she kept everything a secret. Avatar loved being at school. She earned failing grades in all classes. Although she loved Art, she scored 50's. Art was her highest grade. She had dyslexia, struggle with her first language, Gujarati and Hindi. She remembered changing her grades before taking her report card home. Despite social and academic failures, Avatar loved being at school. She shared:

Once coming back from school, I didn't want to go home from school. I didn't want to be there [at home]. The only person I wanted to be around was my mom, but sometimes, I didn't trust mother; if she could slap me over breaking a pencil, she would do something worse if she knew what was happening. But she was treated so unfairly (*now crying*), so she would always take her anger out on her children; despite that, I still lingered around with her because she was all that I had for support. I still didn't want to go home. I still went, obviously [we both laughed]. I had amazing ESL teachers [in America]. One was the main teacher and an assistant or co-teacher. I had the same one for three years. They were so bubbly, charming, and amazingly happy. In school, there were books and homework, things in school lot of books. I knew that if I wanted to go to college, I had to do better in school. Right after the first semester, I made As. The first year there was huge progress for me. I loved to read. Exposure to a good Art class helped me. I needed to do better to impress my parent- I just wanted to make them proud.

Moving to United States [California] was a huge turning point in Avatar's life. Many of her relatives lived in California. She recalls being excited about the "many books" in America. She began reading everything she could get her hands on. No topic was off-limits. If she had chips, new socks, and a notebook, she was happy. Connectedness to school is when a student believes that their teachers care for them as a person and their academic achievement (Centers for Disease Control and Prevention, 2009; Pérez-Gonzalez et al., 2017). School connectedness is a protective factor that fosters resilience (Afifi & MacMillan, 2011; Bogar & Hulse-Killacky, 2006; Bronson, 1997; Center for Disease Control and Prevention, 2009; Kimberly et al., 2007; Marriott et al., 2014; Perez-Gonzalez et al., 2017).

The pain in Avatar's voice led me to remind her that we could reschedule the remainder of the interview and that I understood if she no longer wanted to participate. She decided to continue. Avatar explained:

During middle school, I made so many Fs. What really motivated me to do better was those Fs. After the first six weeks, I realized I needed to do something, or it was going to get worse. I was a true ESL [English as a Second Language] student.

Avatar reported that school was a challenge for her. She was “dyslexic and didn’t understand what she read” until she began to take ownership of her learning.

*College experiences.* The hardships in America are what motivated Avatar to attend college. She explains how little money they had. She believes that the seven years that her parents were apart put a strain on their marriage. She felt that she added to their frustration throughout the years with her academic struggles. Her parents were not happy with each other, and they were not pleased with her underperformance in school. She explains:

My Parents never got to know each other. My parents always fought. Seven years apart was a huge gap. Mom always asked for attention. He was very independent. He just didn’t want her lingering around [him]. As kids, we were always involved in arguments. She would make my dad look bad in front of my eyes, and he would make her looked bad in front of my eyes. I realized that I needed to do something better. I needed to do better to impress my parents. I just wanted to make them proud so that they could have something to be happy about. Brother could not help. He was in high school. I knew that I could only rely on teachers.

*Religious beliefs.* Avatar often went to the temple with her great-grandmother as a young girl in India. She watched her mom pray every morning and light incense. One of her maternal uncles was religious. She recalls:

Every morning [uncle], he would do prayers and do beads, and he would sit me down and teach me how. Watching spiritual prayers helped me to understand that there is one person who is living inside of all our souls, and it is our main support. I read a lot of Spiritual books in college, Buddhism, the Quran, Bible's ways of living. People are not permanent. There is a powerful energy that lives inside of us, and that is permanent. What motivated me to keep doing better, and keep doing better, [her voice became more intense] and keep doing better [she began to cry] is this idea of Spirituality. There is a spiritual book that we read all the time, and, in that book, it says, *the hardships are only given to those who can withstand them and become stronger*. And so, I am just taking them in so that I can get strong.

I reminded her that she is strong. I asked her did she know that she was already a powerful person. She responded with a quivering voice, “um, hmm, yep.” As I fought back the tears, I paused for a moment and asked for the name of the book she was referencing. She said it was the “Gita.” She further explained:

My great grandmother, God bless her; she would walk a mile and half from home at 6:00 a.m. to the temple. She would take me with her. I would just watch her do her thing. Also, my mom, to this day, she prays every single morning she hasn’t failed yet.

*Professional career.* Avatar worked part-time during college. She always wanted to prove herself to her mother “because she [momma] was always so hard working.” Avatar did not want her mother to feel that all she worked for and everything she went through for her children to “go down the drain.” Her mother always pushed and motivated her. Avatar’s first job was working in retail. Her mother encouraged her to secure a career that would pay a salary instead of an hourly rate. Avatar decided that she would always give back to her community and children no matter where she worked. She proclaimed:

I wanted to work with children because I felt like I may not be able to have children due to some of the things I went through personally. I always loved working with children. So, if I could touch one child, even if not my own, I would do that. I often wondered how I could give back to charity. So, I chose to give back to children. If I could reach them when they are at a young age, they would become something at an older age. The next generation is being shaped for. If I want to change the future, I have to give back to the young. It is the children that need the most help. Most times, they cannot help themselves.

Avatar attributes the experiences she witnessed her mother navigate as the reason she is a hard worker and why she is thriving. She shared:

My dad left; my grandfather was paralyzed [mom took care of him]. Mom was always still taking care of everyone, always working. Despite the abuse, despite things with my dad, she was strong. Watching her success motivated me. She has a Bachelor of Arts. In my country, it is common for women to go to college and go

be a housewife. Mom had a fabric stitching company. I always saw hard-working women. I was surrounded by them. I am a hard worker because of them.

*Personal relationship.* Avatar's first relationship was with her husband. She was never with anyone; she "never got into relationships before her husband, because of him I learned to trust and believe in myself and that not everyone will hurt you." She explained how the abuse she endured influenced her relationship with her husband. She stated:

The abuse I experienced very much affected my marriage. I was exposed to sexuality at an immature age. I was exposed to it at the wrong time. My family, we are very traditional Indians. In the culture I come from, people here don't accept sexuality. For God's sake, we did invent the Kama sutra [we both laughed aloud for a minute]. The book of love-making was made by Indian people, you would think that it was still okay to talk about things like that, but it is not. Because I was exposed to early in life, I thought it was okay to talk about sex. I am very open-minded in that sense; my husband is very shy. He never went through what I went though. I have always been very open about sexuality with him. He hasn't. I feel like I can't talk to him about sexually related things. He won't understand.

*Experiences that contributed to perseverance.* Avatar attributes "a change in scenery...the move to the United States with both mother and father" as the most significant factor contributing to her survival. During the abuse, Avatar didn't feel like anything was wrong. She explained:

I lived in a whimsical place in my mind. I lived in La La Land. I was very whimsical. I did not know that what was happening to me was wrong. I just didn't know. Getting hit was routine. What happened to me [silent pause]. I thought it was what happened to every little girl. I thought everyone experienced it. It was just how life was. We just never talked about it. You don't know until you get to that age...then you know.

Her voice trembled. I reminded her of how strong she was as a little girl and how her success story is essential for others to hear. I thanked her for allowing me to enter her world and for sharing her experiences with me. I deviated from the structured interview

and asked her what advice she would give to children in similar situations. In a pleaded voice, she advised:

Talk to someone. The one thing that I did not do. Don't keep it in. Look for that one person that you absolutely trust and talk to them. Talk to a counselor or teacher.

*Findings for the research question and sub-questions.* Avatar described her failures in school as motivation to go to college. Specifically, “it was those Fs” that motivated her to do better. Once Avatar realized that bringing up her grades was within her locus of control, she was determined to improve, and she made a conscious decision to do so (Afifi & MacMillan, 2011; Bogar & Hulse-Killacky, 2006; Garmezy, N. (1991); Bogar & Hulse-Killacky, 2006; Cicchetti, 2013; Marriot et al., 2014; Pérez-González et al., 2017; Wright, Crawford, & Sebastian, 2007). Avatar described the move from her Uncle's house to her maternal grandmother's home and the move to California as the changes in scenery as positive experiences that helped her overcome physical and sexual victimization. Results from experiences such as Avatar's aligned with the research findings of Pérez-González et al. (2017), which concluded that environmental factors serve as an implication in the development of resilience. Avatar also felt empathy for her mother, praised her dedication to hard work, and acknowledged how watching her mother overcome adversities gave her the belief that she could do the same. When parents manage and overcome trauma and life's stressors, it is to as parental resilience, and it is a promotive factor that helps build resilience through secure emotional attachments between parents and children (Harper, 2014; Ledesma, 2011; Easterbrooks et al., 2013; Luthar, 2003; Luthar & Cicchetti, 2000; Luthar et al., 2000; Masten, 2001; Rutter, 2007; Seccombe, 2002; Ungar, 2008, 2011; Walsh, 2006; Wright & Masten, 2006; Yoon,

2018). Avatar enjoyed art. She described loving her ESL teachers. The school was a haven for Avatar, and very often, she did not want to return home. Avatar found solace in various religions. She has faith in a higher power that governs the universe. She learned to turn to her faith when she felt despair at an early age: her great-grandmother and her uncle model religious prayers for her. Avatar did not attend therapy.

*Avatar's summary and conclusion.* Avatar's words from the Gita resonated with me; "the hardships are only given to those who can withstand them and become stronger." "My mother had a similar saying, "*what doesn't kill you makes you stronger.*" She often said this after a ritualistic beating. I wondered if there was a correlation. Some researchers believe that increased religious participation will decrease the effects of childhood trauma (Harris et al., 2014). Once I stopped recording the interview, Avatar and I continued to talk for over an additional thirty minutes. She is a beautiful woman both inside and out. Although she does not have any kids of her own, she makes sure that she spreads happiness to children. We shared tears and ended in laughter. Avatar's experiences as a child are examples of how adversities can be used as protective factors to help childhood victims become well adaptive adults. It is the development of resilience that contributed to her ability to persevere.

*June | The Dancer.* I was very excited about interviewing June. Table 6 provides an overview of my interview with June. We played phone tag throughout the day but finally met later in the evening after she left work. She was very comfortable keeping her camera on, to my surprise. When I saw how young, beautiful, and happy she appeared to be, I wondered what happened to her, what would make her qualify for my study. I knew

how she responded to the research questions; it was hard to imagine her ever being broken-hearted. I explained the purpose of my research and reminded her that if she needed to stop or wanted to skip a question, she could. We talk for twenty minutes before beginning the official interview. She plopped on her bed, adjust her long, red, flowing hair, and responded with a big smile, “Let’s do it!” She began by describing her childhood as requested.

Table 6

*June’s Overview*

Category	Findings
Childhood	Middle-class family, parents divorced when she was seven, physically, sexually, and emotionally abused by stepfather
K-12 Experiences	She was involved in extracurricular activities at school and private dance lessons.
College Experiences	Obtained BS in Psychology; struggled in college diagnosed Bipolar and suffers from Complex PTSD
Religious Beliefs	Atheist for a while now more Agnostic
Professional Career	Works to change the lives of children
Personal Relationship	Maintaining a healthy marriage
Experiences that contributed to perseverance	Therapy, her mother, and meticulously following the instruction from her doctors.

*Childhood.* June grew up in a white middle-class suburban area. Her parents divorced when she was seven. Unfortunately, her mother’s new husband physically, sexually, and emotionally abused June from the age of seven. June took ballet lessons four hours a week. She loved dance class. Her stepfather decided that he did not want to take her to dance class anymore. Instead, he used that time to abuse her sexually. The sexual abuse continued until June was well into middle school. She explained:

It was terrible. They [her parents] finally finally divorced when I was in middle school. I didn't report it until I was twenty-one. I really wanted him to know that I wasn't going to shut up or be silent. And in the event that there was anyone else that he hurt, which I am almost absolutely, absolutely positive he hurt his own daughter his granddaughter me he worked in the boy scouts, so God knows how many kids he had his hands on. There was no way I was going to be silent anymore.

I could hear the fight and strength in June's words. The emphasis she put behind each I let me know that she intended to face her abuser not just for herself but for anyone he may have ever harmed. Suddenly, her voice changed. I could hear despair when she said, "This past December, my case against him got dismissed." I was speechless, angry, and felt helpless. I quickly got myself together as not to show emotions. I immediately commended her for standing up and fighting back. I let her know that we can only control our action not those of other. I reminded her that she is a fighter and that reporting her stepfather was proof that she was no longer a victim living in silence. June shared that her stepfathers' lawyer was a high-profile criminal lawyer and was very expensive. "I know it had to cost him at least fifty thousand, so I got a good swing at it. He went to jail for a while and fled the country."

*K-12 experiences.* June remembers some parts of her childhood but stated that "chunks of memories from childhood were lost." Aside from the abuse, she remembers participating in a drill team during high school. She describes it as "a big outlet."

*College experiences.* During college, June doubled majored in Psychology and Human Development and Family Studies. She spent nine years in college. June recalls withdrawing for medical reasons more than once and taking semester-long breaks; June revealed that she had been diagnosed with Complex Post Traumatic Stress Disorder (CPTSD) and Bi-Polar disorder. She graduated despite her disabilities. She explained:

I joined the drill team, my first year of college, it continued to be a big outlet for me [after high school]. I really loved it. Honestly, if I could have had my way, I would have ended up being a dance teacher. It [college] took a lot of trying again, a lot of persistence, a lot of dropped classes.

I asked June what motivated her after all the adversities and setbacks. I could no longer hear her. I waited for her response, but she remained silent. I asked if she could hear me. My heart began to beat fast. I hoped that recalling all of this didn't make her sad. I repeated the question and began to think of words to convey my condolences, appreciation, and motivation. She was in such great spirits before. I hoped that I didn't ruin her happy mood. Finally, she responded in a puzzling tone:

I can hear you; I'm just don't know. Um, I think... what motivated me was the fact that I did not want to be defined by my failures or the fact that I have my mental illnesses. I know like having mental illnesses makes it very difficult in general, and trauma is just, it's a thing. I just [deep breath and pause] I didn't [deep breath sigh and pause] I couldn't live with myself if I didn't reach what I feel is my, my own potential. I feel like I am capable of so much more than what I have been able to accomplish this far; I don't know, maybe this sounds like it's an excuse, but I have all of these very distinct measurable symptoms, and as I've learned more about Complex PTSD especially, and I've been able to better understand myself through that lens. So, I cannot deny that I really did face some pretty big impediments. I still do, I mean, it's still something I really, really struggle with, but I don't want that man to limit me any more than he already has; I don't want him to hurt me and my life and keep me from achieving what I want.

She paused for a moment, tilted her head to the side, and said in a very empowering voice, "I mean Fuck him!" Just like that, what was a somber and intense moment switched to laughter. We laughed so hard and loud. It was such an unexpected ending to a soliloquy. I echoed her sentiment. We both gave him the middle finger. I promised not to edit her words. It took us a moment to get serious again, but we managed to gather our composure and finish the interview. June's description of her reasons for success, moving forward after failures, and motivation for success equated to an intrinsic motivation often described as self-determination. Self-determination is a theory that explains the intrinsic

need for growth, motivation, and wellness (Deci & Ryan, 2000; Dehann et al., 2015; Ryan et al., 2009; Van den Broeck et al., 2016).

*Religious beliefs.* June went to church occasionally. She became an atheist for a while. But considers herself “more agnostic.” June believes:

there is a higher power out there. I don’t know what it is. When you experience things that I did during my childhood, it gives you an awareness of the world and how it works. It is a different way to see the world. We are all fundamentally different. There is an authenticity that you don’t see in other people; it’s in the energy.

June’s description of the faith in a higher power instead of organized religion align with the beliefs of other participants (Block, 2016; Kim, 2008; Masten et al., 2009 Rutter, 2012; Waldron et al., 2018). Non-religious beliefs were an unexpected response for me. I predicted that the experience with organized religion would have been an experience that participants shared as contributing to their perseverance. She is the first to credit therapy as a contributing factor. Participation in therapy is aligned with what I expected and with the past research that concluded that some form of involvement in therapeutic treatment after abuse was better than not participating at all (Chard, 2004; Finkelhor & Berliner, 1995; McDounag et al., 2005; Ross & O’Carrol, 2004; Saywitz et al., 2000).

*Professional career.* Due to what June experienced as a child, she believes that every decision she makes is affected by her trauma. However, she takes it as a positive learning experience for her to learn more. That is why she spends her professional career seeking information on “what makes a healthy and happy child.” June enjoys “being on the ground with children every day” and describes working with children as making a

massive difference in her life. She states, “I am making an impact. Even if it’s a small little thing, I am making an impact on the lives of children. I love what I do.”

*Personal relationship.* June enjoys time with her wife, and if she could have things her way, she would “have a million children.” She shared:

I believe that my past experiences are going to make me intentional and focused on making sure that everything I do, everything I put into my kid's life, is something kind and positive. Something that is of benefit to them also. I really hope I can learn from my mom and keep my kids away from predators. I really hope I can manage to do that much. You know, as abuse goes, she's a [her mother] is a victim of abuse. Her mother [June's grandmother] was physically, verbally, emotionally, abused, and so was my grandmother and just on and on, so I'm hoping that I can break the cycle. That's the goal. I will take what I have learned in therapy and give it to my children, and I guess, do my best that way.

June acknowledged that it would be costly for her and her wife to have children “because I’m gay.” she stated. I could hear a little bit of despair in her voice. I wish I could tell her something that would make it easier for her to have children. I know the complications of gay couples trying to have children because of my brother and his experiences. June wanted to be sure I include a conversation she had with her therapist. She exclaimed, “Oh yeah, make sure you put this in there. I am not gay because my idiot stepfather raped me. I couldn’t believe it when my therapist asked me that. Being gay is not something you choose. I have always been gay!” She spoke in a tone that sounded like she would end with a loud DUUH.

June described breaking the Intergenerational Transmission of Child Maltreatment (ITCM) cycle between her grandmother and her mother. (I discussed this in Chapter Two). ITCM suggests that abuse and neglect will continue for subsequent generations (Bartlett et al., 2017; Berlin et al., 2011; Min et al., 2012; Pears & Capaldi, 2001; Putnam-Hornstein et al., 2015; Stevens-Simon, Nelligan, & Kelly, 2001; Kim,

2009; & Valentino et al., 2012). I informed her that she is already breaking the cycle by making a conscious effort to break the cycle and implement therapeutic interventions before having one child. Despite the dysfunctional relationships that June encountered, she is in a healthy, happy marriage. June's ability to be in a long-term committed relationship is evidence that abused children can grow up to be well adaptive adults (Collishaw et al., 2007; Kimberly et al., 2007; Pérez-González et al., 2017; Tlapek et al., 2016).

*Experiences that contributed to perseverance.* June credits her participation in “deep-rooted psychological processes.” She feels that therapy has helped her overcome her abuse. June describes her life from the age of seven to thirteen as “living in terror.” She explained every other Wednesday and every other weekend as a “relief from that terror” because she got to spend time with her dad. She states:

Therapy, [is what got her through] I have been in so much therapy. I would not be alive if it were not for the therapy I have received. I survived with Therapy. My mother, for all of her flaws and her bad decisions, has been by my side and supporting me with all of this. Once I told her what happened, she has been by my side. She has been nod-judgmental throughout this process.

*Findings for the research question and sub-questions.* June explicitly credits her participation in therapy sessions, drill team, the support of her mother, and her faith in a powerful energy as the experiences that continue to help her persevere. The experiences she described that helped her persevere align to promotive factors that build resilience; school connectedness and family support (Afifi & MacMillan, 2011; Bogar & Hulse-Killacky, 2006; Bronson, 1997; Center for Disease Control and Prevention, 2009; Kimberly et al., 2007; Marriott et al., 2014; Perez-Gonzalez et al., 2017). Bravery is a strength that serves as a protective factor for building resilience and greater life

satisfaction after mental illness recovery (Martínez-Martí & Ruch (2017). Junes exhibited bravery when she filed criminal charges against him for raping her as a child. June participated in dance at school and spent an additional four hours a week in private dance lessons. It was her escape from the abuse. Religion did not play a role in June's perseverance. She believes in a higher power or energy as a guide for life. June attributes her mental wellness to regularly attending therapy.

*June's summary and conclusion.* My interview with June was one of the most memorable and enjoyable interviews throughout my research. I laughed more with June than I had with anyone. She is an example of how childhood abuse can foster illness, as stated in the original ACEs survey. Yet, she is also an example of how resilience can grow from childhood adversities. In her late twenties, June is taking control of her life by managing her mental illnesses, working with children, and sharing her experiences to benefit others who worked with children. June reminds me that sometimes behind outward beauty can be internal pain. I am glad that she is an example of how victims manage pain through therapy, family, and school activities.

*KP | The Perfectionist.* KP was one of the first participants that I had the pleasure of interviewing based on a recommendation for my study. My first actual snowball sample. She was so professional and funny. She chose to have her camera on during the interview, although I informed her that it was optional. I was glad she decided to keep it on; it makes things a little more natural when interviewing. I explained the purpose of the study, and we jumped right in. Table 7 provides an overview of my interview with KP.

Table 7

*KP's Overview*

Category	Findings
Childhood	She was sexually abused by her grandmother, physically abused by her dad: a middle-class only child.
K-12 Experiences	A High achiever, popular, involved in multiple extracurricular activities, and highly competitive
College Experiences	Full scholarship for bachelor's and master's degree,
Religious Beliefs	High Achiever; musician, numerous scholarships
Professional Career	She continues to struggle with faith in religion
Personal Relationship	Successful doctor with a private practice
Experiences that contributed to perseverance	Married for 20 years, meeting her husband was the turning point in her life ended the self-destructive/self-soothing behaviors
	Need to achieve, Continuous therapy and understanding husband

*Childhood.* KP was an only child. She grew up in the Midwest in a rural setting with both parents. Her parents were college graduates. Her mother was a teacher, and her father was a businessman. She never had to worry about money, clothing, or food. She described her childhood as “quintessential.” She agreed to participate in my study because we share the same wonderings. She explained:

I've wondered kind of the same thing, like why do so many people who experienced these things really spiral and turn to drugs and like end up dead, and I'm like, why am I, so far, the opposite; I'm a crazy overachiever...it could have been different, I was a good student I stayed with my grandparents a lot, and my grandmother is actually the person who abused me all the time. She sexually abused me, my dad was physically abusive [to her] and just really strict, and so those are like my abuse issues for the most part.

KP spoke openly and candidly about her experiences. She exuded confidence and was eager to share and discuss her thoughts on this research topic. It was as though she were an open book ready to be read. KP's abuse by both her grandmother and father continued until she was around fifteen years old.

*K-12 experiences.* KP participated in sports, band, orchestra, and choir. She recalled always having lots of friends and didn't consider herself to be unpopular. Yet, she knew that she was not as happy as other children. She shared:

When I was getting married, I told my husband lets do a slide show for the wedding. I looked at the pictures of me as a kid, and I looked at pictures of him as a kid, and you could just see his like unbridled joy and carefreeness. I don't look like that in my pictures. I was like oh God, umm. I was told that I had a happy childhood. I was not ever carefree like that. I was definitely more guarded and controlled.

KP acknowledged that there were times that she was "super controlled and regimented," and other times she felt like, "hell yeah, let's tie one on and go crazy." Yet, she still always worried that she would get in trouble. She explained:

I would be in trouble because even when I didn't do bad stuff, I was still always being abused, hit, kicked, or punished in some way, and so I kind of operated like within that framework of really pushing the edge of what can I do without tipping the scales, not to make someone get really mad because I knew that I would be in a lot of trouble at home and that my dad would probably beat my ass about it.

KP was happiest and safest when other family members were at her home. She knew that her father would not hit her, and her grandmother would not molest her while other family members were around.

*College experiences.* KP earned a full scholarship to college. She knew that no going to college was never an option. She earned a full talent scholarship for music. KP completed her bachelor's and master's degree programs with merit scholarships. She recalls:

I got a talent scholarship for music, and I went for that for a couple of years. And knew right away like I'm not going to do this because it just was so competitive it took all the joy out of it for me. I really didn't like it anymore. Then I was like, well, what am I going to do, but luckily my grades were good enough that I was able to keep the scholarship, and I ended up going into speech, hearing science, and audiology and kept the scholarship for my masters. Nice, right after that, I'm like

no one's more surprised than me that I'm getting all this, even though I was good at school, I didn't love it, you know like it wasn't my thing. I liked it okay, and I'm good at it, but nope, that is not me.

*Religious beliefs.* KP went to church every Sunday with her Grandmother. She enjoyed singing in the choir. She “only liked going to church to sing, see people and socialize.” KP’s grandmother was “a really important person at the church and in the community.” KP has a hard time separating her feelings about religion from her feelings about being sexually abused by her grandmother (Block, 2016; Kim, 2008; Masten et al., 2009; Rutter, 2012; Waldren et al., 2018). She explained:

it is really hard for me to separate those two things. It's just; it's been really hard process that I have not worked through. I grew up Methodist, which is, of course, like Christian light like, but it's not as strict. It's very encompassing and probably one of the most welcoming denominations, accepting of all people and different walks of life and commingling and whatever. But I remember as a child, like sitting [in church] I just wanted to go saying and see my friends like I didn't even want to go to Sunday school. I didn't really want to learn about it all because I would just sit in church. Eight years old me would sit there during Children's Time [Sunday School]; they're talking about Jesus loves you, and I'm sitting there going well, you know not really, no he doesn't; if so, he's got a funny way of showing it. And so that has been a really difficult thing for me that I am not anywhere close to being through because I feel like I went in the opposite direction of being religious. I know a lot of people do the other thing you know they will pray, and they feel safe at church, and they feel like at least God listens and understands me and blah blah blah grace and mercy whatever. I'm on the other end like, Wow, you know, I don't know, but if this is [God's] love, I'm not a fan. I don't like it; it's not working out, so not for me.

*Professional career.* KP described herself as a “super overachiever and perfectionist.” She believes that immersing herself in her work began as a “distraction from all of the horrible things that were wrong” in her life. She stated, “Being the best at everything was the kind of mentality that drove me forward.” KP had obtained a Bachelor's, Master's, and Doctoral degree in Audiology by the time she was 30 years old.

Her professional career is guided by her philosophy, “Don’t miss opportunities to learn something new.”

*Personal relationship.* KP is married with one stepson. She describes meeting her husband as “the first time I was in a healthy relationship and knew that someone really loved me. It was the first time I felt safe. I felt physically safe.” KP and her husband settled down and got married quickly. He had a son. KP stated, “That took away my party days because the only thing worse than being hungover is like being hungover with a kid.” Being married and having a stepson was a positive turning point in her life (Afifi & MacMillan, 2011; Bogar & Hulse-Killacky, 2006; Bronson, 1997; Kimberly et al., 2007; Marriott et al., 2014; Perez-Gonzalez et al., 2017). When KP and I discussed how her past experiences with abuse affected her decisions regarding having and raising children, she expressed:

I wouldn’t let anybody keep that child or send him to camp or sleep away things. I would be a basket case. I could not stand the thought of anyone hurting her child. I would have been a lunatic basket case. It’s too painful and hard and scary to trust people, to trust that they wouldn’t hurt my child. It’s still hard as a stepparent. I was worried that I could do it [protect her child]. It would just be too heartbreaking to me if someone were to hurt my child.

*Experiences that contributed to perseverance.* KP credits teachers, meeting her husband, perseverance, and the need to achieve as the contributors to her survival. KP discussed her thoughts:

I’m just trying to think of it like, you know, it’s perseverance, determination. It’s, you know, those people who aren’t your parents who believe in you extra tell you how great what you’re doing and how you have the ability to do all these things, and it means more because it’s not your parents, it would be primarily, teachers.

KP’s desire to be a winner stems from more than wanting accolades or trophies. She explained:

I am an achiever. As a kid, I'm like, well, if I do this perfectly, just maybe I'll be good enough, and all these bad things will stop. If I make it so that I am perfect, no one can touch me then; no one can actually physically touch me. But I still had a grandmother who molests me every day I got home from school. I still do it, to this day [work to be perfect], you know it's not something you can just drop or stop. Here now [as an adult], it's really tough to do [be good enough], but I don't really think there's a lot of things that I can't do. Even though people would say, you can't do that or even if people told me you're not pretty enough to do that, or you're not thin enough to do that, or you're not at all these things enough to do that, and I'm always like well we'll see, and we'll see who can do it better in the end because there's not anything in this world that I will not work tirelessly at to be better than the person who told me I couldn't do it.

*Findings for research questions and sub-questions.* What experiences do adult survivors of childhood physical abuse, sexual abuse, and poverty attribute to their personal and professional perseverance? KP contributes attending therapy regularly and being in a marriage that makes her feel safe in all aspects of her life. KP described being with her husband as the first time she felt safe in all aspects of her life. Music was an experience that was therapeutic to her, and she was very good at it. Her band and music teachers encouraged her to pursue music. Religion did not play a role in KPs perseverance, and she believes in a higher energy and not organized religion. KPs positive experiences with her music and choir teachers, attending therapy, being in a healthy relationship after being in unhealthy relationships, and her need to achieve are what led to her perseverance.

*KP's summary and conclusion.* My interview with KP uncovered new information for me to explore. Unlike the other participants, she expressed a strong need to achieve, be a winner, and be an overachiever. KP's comments regarding her need for perfection left me wondering if her strive for perfection was related to the abuse she endured. I must admit that I have been referred to as a perfectionist, even obsessive-

compulsive, but often disagreed with the statements. Therefore, I had yet another reason to conduct a query over *perfectionism and child maltreatment*. Seminal research revealed that perfectionism is a coping strategy used by children who have experienced trauma to gain a sense of control (Burgess & DiBartolo 2016; Egan & Kane, 2014; Flett et al., 2016, 2011, 2012; Molnar et al., 2018; Nobel n.d.). The same authors discussed perfectionism as a maladaptation due to childhood maltreatment. Although some researchers view perfectionism as maladaptive, it yielded positive extrinsic rewards. KP's response to her abuse contradicts the Intergenerational Transmission of Abuse (ITCM), which states that parents pass down abuse from one generation to the next (Garbarino and Gilliam 1980; Herzberger 1990, Kempe et al. 1962; Spinetta & Rigler 1972; Herzberger 1990). KP raises a stepson with her husband, and they maintain a healthy relationship. She is conscientious with how she shows affection to her stepson because she “never wants to make him feel uncomfortable.” KP described her self-determination and need to achieve because of her abuse. Self-determination is a protective factor that builds resilience (Deci & Ryan, 2000; Dehann et al., 2015; Ryan et al., 2009; Van den Broeck et al., 2016). It was KPs’ strive for excellence and perfection that led to her resilience.

*Rose | Pinwheel.* Rose is a survivor who shared details regarding how she hit “the bottom” before turning her life around. She acknowledged using drugs as a teenager, choosing the wrong significant other, and being afraid to have children because of the turmoil she endured as a child. Rose is brave, confident, and secure in who she is, which is why she could share what most people would have kept a secret. Table 8 provides a summary of our discussion.

Table 8

*Rose's Overview*

Category	Findings
Childhood	Adored by her mother. Sexually abused by stepfather from ages 6 to 12.
K-12 Experiences	She was involved in track, cheer, and basketball. She enjoyed the attention she gained from sports.
College Experiences	Obtained GED She moved to Austin attended community college before obtaining her bachelor's and master's degrees
Religious Beliefs	She grew up Southern Baptist; not religious, just went to church to be social
Professional Career	Works with children
Personal Relationship	In a committed relationship
Experiences that contributed to Perseverance	She credits her mother for loving her unconditionally and being a part of school extracurricular activities.

*Childhood.* Rose grew up with her three siblings, mother, and her stepdad. Her mother was married at 22, dropped out of college had Rose. Rose's dad was an alcoholic. He and her mother divorced after he lost his job abuse. Her mother remarried, and Rose's stepbrother and stepdad sexually abused her from six until 12. She obtained a general education (GRD), moved to Austin, got a job went to community college for three years. She was involved in track cheer basketball. Until drugs in 10th grade. You are at the top when you are a cheerleader. Rose enjoyed the attention. She remembered seeking validation during that time.

*K-12 experiences.* Rose participated in cheerleading, basketball, and volleyball throughout most of her school years. She recalls her coaches making her feel important. One coach would always speak to her and asked how she was doing. It seemed minor at the time, but now Rose describes it as "something simple, but it made a difference. Rose turned to drugs as a sophomore in high school to deal with her adversity. She began

attending therapy sessions and participating in mindfulness activities to work on self-efficacy. Therapy “changed her life.”

*Religious beliefs.* Rose grew up in a Southern Baptist church. She did not consider herself a spiritual person. She described her reason for going to church as “just to be social.” She stated that religion did not play a role in her perseverance. Rose became more “religious and spirituality” as an adult. She said, “Religion has played a role in my healing as an adult.”

*Professional career.* Rose's resilience carries over into her challenging career in special education. She uses the knowledge she gained from her experiences to advocate for those who do not have a voice. Her career is demanding, she works long hours, and it is a “thankless job.” She continues to do the work that she does because she is “helping others.”

*Personal relationship* Rose was married at the age of thirty. She described her former husband as “a good person, just not the right one” for her. She admits that she married to gain a sense of security and acknowledges that she was afraid of being hurt. . . .“He felt safe. He wasn’t the best partner. We were married for 11 years, and it wasn’t what either one of us wanted.” Rose described having a few relationships where she was mistreated and was sometimes abusive. She stated.

I accepted it. I would never have thought I would have after what my mother went through. I had to learn to value myself. I picked people that highlighted that [her low self-esteem]. But I did the work to value myself more. I went to therapy and spiritual meditation and participated in self-help activities. I made sure that I am valuing myself, and I picked a person that values me.

*Experiences that contributed to perseverance.* Rose struggled to find a definitive answer to what contributed to her perseverance. When asked to describe the experiences that led to her survival, she responded:

I don't know. I just knew that I wasn't succeeding in life. I was determined but turned to drugs and drinking. I found ways to escape reality. In some ways, I don't survive self-destructive behavior wasted years. Took me a really long time. It's sort of moving forward and going back. Afraid to have children, though, that I would screw it up. By the time I wanted kids, it was too late. I've done well because I am breaking the pattern of the stuff that was handed down to me; I stopped it and made the effort to heal. Credit to my mother, she went back to school at 40 and became successful. Mom was a role model for me. I don't know; I just wanted better than I saw, just wanted to be happier. I had a determination not to settle. Just determined.

*Findings for research questions and sub-questions.* Rose credits witnessing her mother survive adversity and her internal desire to do better as the driving forces in her perseverance. Rose was a cheerleader and played multiple sports in school. Her coaches made her feel valued. Spirituality helped Rose find solace as an adult. She is more religious as an adult than she was as a child. Rose attended therapy to "work on herself" by completing mindfulness and self-help activities, she improved her self-esteem.

*Rose's summary and conclusion.* Overall, Rose's experiences of childhood physical abuse by her stepfather caused Rose to experience a downward spiral; she overcame her pain with therapy and self-care. Rose was motivated by her mother's tenacity and her religious beliefs. Rose's experiences prove that survivors of sexual abuse, physical abuse can thrive despite experiencing adversity (Kimberly et al., 2007). Rose is an example of how positive promotive assets resources led to healthy development.

*Noah | The Marine.* I was most nervous about my interview with Noah. He was a guest speaker in one of my classes. I was just as anxious when he spoke then as I was before and during our interview. Noah's words came with imagery that made you not want to visualize what he is saying, but he left me doing just that. Table 9 includes our overview. The conclusion explains my emotions.

Table 9  
Noah's Overview

Category	Findings
Childhood	Product of an abusive relationship, severely physically abused by mother, raped by an uncle.
K-12 Experiences	Very introverted, antisocial, self-described as a "recluse," Joined the United States Marines immediately after high school.
College Experiences	Obtained an Associate degree while in prison
Religious Beliefs	He believes in a source of energy inside of him, "a higher power."
Professional Career	Works as a lead in a metal factory
Personal Relationship	Married for 18 years
Factors contributing to perseverance	Gained strength from recalling the abuse and focusing on the fact that he did not die. Used the anger and pain to fuel a competitive spirit in track and swim meets

*Childhood.* Noah grew up in a single-parent home with his mother and three other siblings. He is the second born and the oldest male child. Noah detailed the amount of responsibility placed on him at an early age. He believed that because he was the result of an abusive relationship, his mother took her "rage" out on him and his sister that shared the same father. Noah's father went to prison while his mother was pregnant with him. Noah shared:

I didn't have the innocence to dream. She [Noah's mother] isolated me in the garage away from them, my sisters, and my brother. She gave me a blanket and a bucket. When my siblings would try and sneak me food and get caught, they would be...

He paused, and I could hear his sobs. He apologized. My chest ached...his voice quivered, warm tears slowly cascaded down my cheeks. He continued: "I'm sorry, I didn't expect that to happen." [I offered to postpone or cancel the session]. He declined and began explaining how some memories trigger old feelings. "This is therapeutic in a way. I'm fine."

*K-12 experiences.* Noah described himself as a "very introverted person." He believes that the abuse he endured caused me to be "very antisocial in school and very reclusive." Children bullied Noah in school, and he felt that it was acceptable. He explained."

Since I was abused at home, I would think that... well, if my mom does this to me, then why not anybody else, you know. I accepted it; if the person that brought me into this world, the person that was supposed to protect me and love me and keep me from these elements, didn't care enough to do so, who else would care. I knew that if I went home and talk about this type of situation that happened to me or, you know, being bullied at school, that I will probably be reprimanded for something that you know I didn't do wrong. But it would be my fault at home, so I wouldn't say anything.

Noah never stood up to his bullies or fought back until sixth grade. He acknowledged that his fighting got out of control, and it was hard to stop hitting. Noah wanted to tell someone about the abuse going on at home but did not. He stopped fighting because the teachers would call his home. He stated,

I had to learn how to control my anger and balance, knowing when to be aggressive or assertive in situations outside of the home. I knew one thing for sure being assertive or aggressive or giving my opinion, or saying anything about the abuse that went on at home [deep sigh] would land me in the hospital.

Noah never gave much thought about obtaining a high school diploma or what he wanted to pursue as an adult because Noah was “certain that he would die by his mother’s hands by the time he turned 15.” He was lost and did not know what to do when he lived past 15 and one days. He recalls, “I didn’t even dream of being anything, I couldn’t I didn’t have the time, I didn’t have the freedom or the innocence of dreaming.” He described this as a turning point in his life. He began to care about himself. He saw a future. He began to read different types of books. He recalls:

It didn’t matter what book it was if it were a book, it had words, I could lose myself in it.” I started reading books more profoundly at 15, and it was the literature that I was reading that gave me think, oh wow, people do this type of things. I find a book here, somebody leaves a book there, and I will take it and just read it, so that’s what gave me the ability to dream and know that there were actual careers out there that just open the world up to me.

*College experiences.* Noah obtained an associate degree while serving a 25-year sentence in prison. He began college before being incarcerated. He made a promise to himself that he would obtain his college degree. Noah enrolled in a four-year university after release from prison.

*Religious experiences.* Noah recalls going to church seven days a week, being forced to learn a Bible scripture a day, and being beat if he could not recite where he could find it in the Bible. When asked about the role that religion has played in his perseverance, he shared:

I resented all religions. My mother was extremely religious and Christian. Spare the rod spoil the child. It was mom’s favorite scripture. She didn’t spare the rod; it [the rod] could be anything, her fist, her foot, a broom, pot, hanger, stiletto shoe, metal crutches, and if I was lucky, a belt. But I always prayed. It was never for things; it was never praying for, you know, praying to give me this car [or] oh I want this jacket, it was, please get me through this. Whether it was a bargain that I’d make with him if you let me survive this, don’t let me die from this beating, I

pray to a higher power. So, there has always been a belief in faith and something greater than myself, but I wouldn't necessarily identify it with any type of religion.

Noah's response was not a surprise to me at this point. Most participants have little faith in organized religion (Block, 2016; Kim, 2008; Masten et al., 2009; Rutter, 2012; Waldren et al., 2018). There are some aspects of abuse that Noah connected to being brought up in a religious household that led him not to have faith in the church's organization.

*Professional career.* Before going to prison, Noah worked as a manager. He worked his way from the mailroom to the manager of new employees. Noah took pride in his work. He described work as a way to become a new person. He liked being at work because his colleagues showed him respect, and no one knew of his horrific childhood. He stated, “no one knew, so no one could make preconceived notions about who he was based on [his] childhood experiences.” At work, Noah was the boss and moved up from an entry-level position quickly.

*Personal relationship.* Noah has been married for 18 years. He believes that the abuse he endured as a child affects how he manages his marriage. He believes that open and honest communication is “a must in any healthy relationship.”

*Experiences that contributed to perseverance.* Noah believes that I believe that “overcoming it is a continuous thing. I don't know that I can pinpoint; this is what has made me not give up.” He paused and then explained his response:

I mean, there was a time where suicide was a mantra in my mind like, just end it, if you don't kill yourself, she's going to. I don't think that I woke up one day miraculously and was like, okay, I'm over it. It's the resilient part of me that continues to move forward and press towards the next step on the ladder. It [years of abuse] is something that I will always remember. Sometimes I gain strength from

it [the abuse]. I think to myself, you've been through worse than this, so you can certainly survive this.

His voice was somber. He spoke slowly. I could hear his sniffles. He shared:

I went to my high school guidance counselor to tell her that I was going to drop out because I was going to die. I was 15 {preparing for death}. So, she asked me if I were to give you a jacket and some money, would you come to school tomorrow? So, every week my counselor gave me \$40.00 [now crying]. I loved going to Odyssey of the Mind [school club]. My sister, I watched her, she got out. I remember what happened to her. She got out. She was opinionated, but she showed me that education was my only way out.

*Findings for research questions and sub-questions.* Noah's experiences that helped him persevere were interactions with his school counselor, being in Odyssey of the Mind, watching his sister overcome her abuse, and becoming a United States Marine. What role did experiences at school play in building perseverance in adult survivors of childhood physical abuse, sexual abuse, and poverty? Noah's school counselor played a pivotal role in his high school career. Being a part of clubs helped him feel a sense of belonging. Religious experienced did not play a role in Noah's perseverance. He has faith in and prays to a higher power. Noah recently began participating in therapy sessions. It was not a part of his adolescent or young adult life.

*Noah's summary and conclusion.* Noah's experiences of childhood physical and sexual abuse led him to be a self-proclaimed introvert. He persevered "despite" his childhood. His high school counselor contributed to a turning point in his life by providing a basic need. Being a part of the United States Marine Corps gave him a different system of support. Noah found solace in prayer to a power greater than himself, viewed his sister's triumph as motivation. He described promotive resources that helped him persevere and at least one positive connection with family Afifi & MacMillan, 2011;

Bogar & Hulse-Killacky, 2006; Bronson, 1997; Kimberly et al., 2007; Marriott et al., 2014; Perez-Gonzalez et al., 2017).

Noah's stories evoked different emotional responses from me than the other research participants. I envisioned the towel, blanket, and bucket given to him to live in the garage separate from his siblings. I felt the kick and blows from his mother's fist while handcuffed to his sister. His melancholy words synchronized with my own, and throughout the interview, my soul felt an ache that I had not felt since Children's Protective Services removed from my home. I did not need to conduct member checking to confirm the words I put into this narrative. Noah and I share the same memories, the same pain, shed the same tears, and share the same blood because we also share the same mother. I am his sister.

#### *Cross Case Thematic Analysis*

The cross-case thematic analysis allowed me to examine the participants' responses and identify commonalities across all ten case studies. The purpose of the multiple case study cross-case analysis was to bind emerging themes (Stake 2006). The results from the cross-case analysis revealed four significant experiences that lead to the participants' resilience. The subsequent section summarizes the emerging themes and includes a synopsis of the data collected from the ten participants' narratives highlighted in my study.

#### *Emerging Themes*

During cross-case analysis, four themes emerged. Using the qualitative data analysis software NVivo, I identified commonly used words or phrases from each case study. The repeated terms allowed me to identify pattern matches within the participants'

narratives. Significant statements that multiple participants repeated were coded as such and placed into themes (Creswell, 2013; Yüksel & Yıldırım, 2015). Figure 11 depicts the emerging themes.

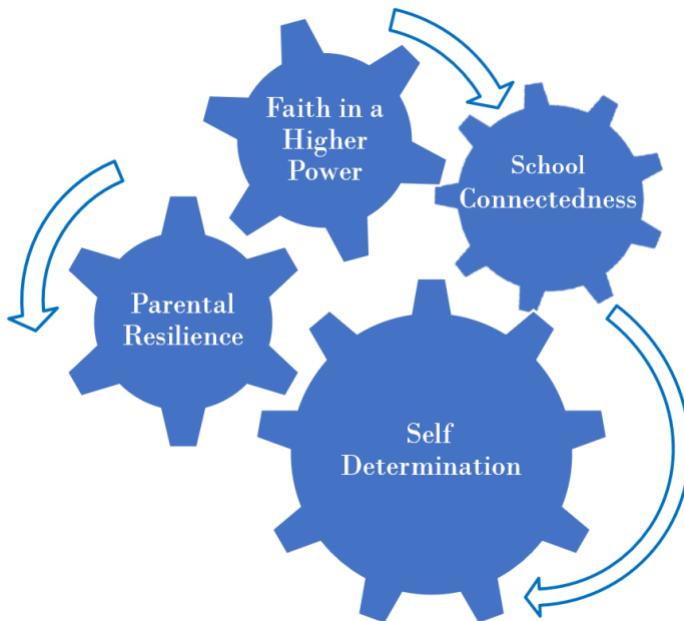


Figure 11. Emerging themes.

Although all four themes were prevalent during the interview, I wanted to ensure accuracy and avoid assumptions based on my interpretation prior to analysis (Creswell & Poth 2013). Self Determination, Faith in a Higher Power, Parental Resilience, and School Connectedness were the four discussed below, along with their correlation to the theoretical framework, the Resilience Theory.

#### *Self Determination*

The most prevalent of the emerging themes was self-determination. Figure 12 below depicts participants' responses related to self-determination. In lieu of participants' portraits, I used a blue and silver mylar pinwheel to protect the identity and

anonymity of my participants. Prevent Child Abuse America (PCA America) used the same pinwheels in the Pinwheels for Prevention campaign. Prevent Child Abuse America is “the nation’s oldest and largest organization committed to preventing child abuse and neglect before it happens” (Prevent Child Abuse America, n.d.). Participants whose names appeared along with an asterisk data were analyzed; I excluded full narratives from the detailed case descriptions. However, I included their responses in the thematic analysis.



*Figure 12.* Case studies for self-determination. *Note.* Excluded from case descriptions but included in thematic analysis.

When I asked participants to list the experiences and motivations for their perseverance, 100% responded. “I don’t know,” followed by “I was determined not to...” Their stories included phrases such as “determined to do better than my mother; determined to break the cycle, determined not to be a victim.” Self-determination is an internal motivation that supports an individual's need to control their faith. Researchers developed the concept of self-determination into a theory anchored in the belief that humans react on an internal instinct to reach happiness or well-being (Deci & Ryan, 2000; Ryan & Deci, 2000; Vansteenkiste & Ryan, 2013). Once a person has decided to try and reach self-actualization, their self-determination results in resilience.

*Self-Determination and resilience.* Resilience Theory is a strength-based theory that focuses on positive attributes and protective factors that arise from being in at-risk environments or situations (Schelbe & Geiger, 2017). Perlman et al., 2018 proposed a pathway to resilience illustrated in Figure 13.

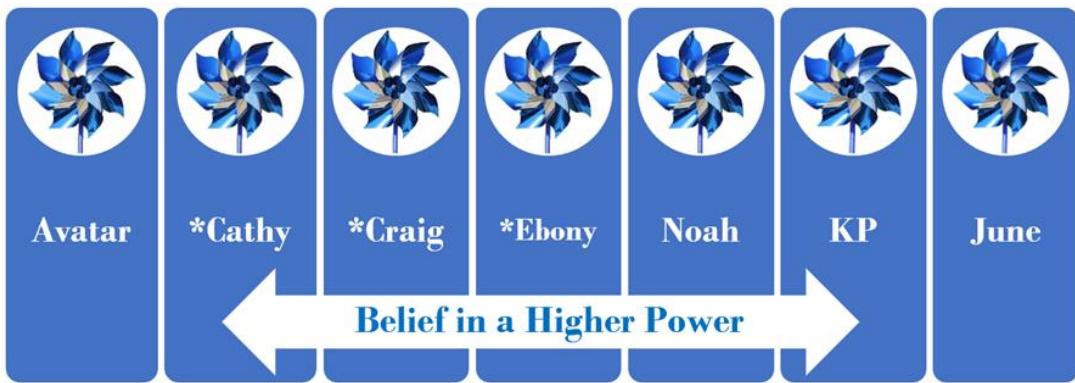


*Figure 13.* Proposed path to self-determination theory to resilience. *Note.* Figure was adapted from Perlman et al., 2018.

The researchers conclude that a strong correlation exists between psychological needs and self-determination, predicting resilience (Perlman et al., 2018). The participants' explanations of perseverance were aligned to SDT. Their stories of overcoming adversity led to resilience.

#### *Faith in a Higher Power*

Researchers have questioned the role of spirituality in helping abused children cope with the effects of abuse. According to Waldren et al., 2018 victims of child abuse may “view God as less supportive” because they had to endure or experience abuse as a child. Figure 14 portrays the participants who described having faith or belief in a higher governing power or energy. Participants expressed a lack of trust in organized religion or Christianity.



*Figure 14.* Case studies for faith in a higher power. *Note.* Excluded from case descriptions but included in thematic analysis.

Seven out of ten participants spoke of their belief in prayer and described having faith in a power greater than themselves. Study findings on religiosity in maltreated children conducted by Kim (2008) suggested that faith served as a protective effect on abused children. Some researchers indicated that motivational systems of adaptation include religion, spirituality, and faith (Masten et al., 2009). Faith, spirituality, and a sense of hope are skills that promote resilience (Block 2016 & Rutter, 2012). The combination of self-determination and faith in a higher power put the participants in this study on a path to resilience. These were crucial factors that led to their perseverance. It is important to note that none of the participants stated organized religion, such as God or attending church, as a factor in overcoming child abuse. The lack of inclusion of God and religion was astonishing because all participants reported attending church, temples, or chapels. They were involved with organized religions throughout most of their childhood. The mention of the word God was a theme that I predicted would serve as a source of refugee and strength for victims of childhood abuse at the onset of my study.

### *Parental Resilience*

Four out of ten participants introduced me to the concept of parental resilience. Although participants did not explicitly state parental resilience, they described experiences where they witnessed their parents survive as motivation for them during stressful life events. The participants in Figure 15 shared adversities that they saw their mothers endure and overcome, which gave them hope and the belief that they too could overcome any obstacles they faced.



*Figure 15.* Case studies for parental resilience. Note. Excluded from case descriptions but included in thematic analysis.

Avatar watched her aunt physically abuse her mother. Ebony witnessed her mother take care of four children with limited to no income. Rená saw her mother battle cancer and lupus, watched her go through a divorce while enduring verbal and physical abuse. Rená served as her mother's caregiver and was at her side when she lost her battle with cancer. Rená was 23 years old, a senior in college, and about to become a mother for the first time. The participants in Figure 15 witnessed spousal abuse, cancer, lupus, drug abuse, physical abuse sexual abuse while living in poverty. "A supportive caregiver facilitates stress exposure that results in positive growth for the individual;" (Horner,

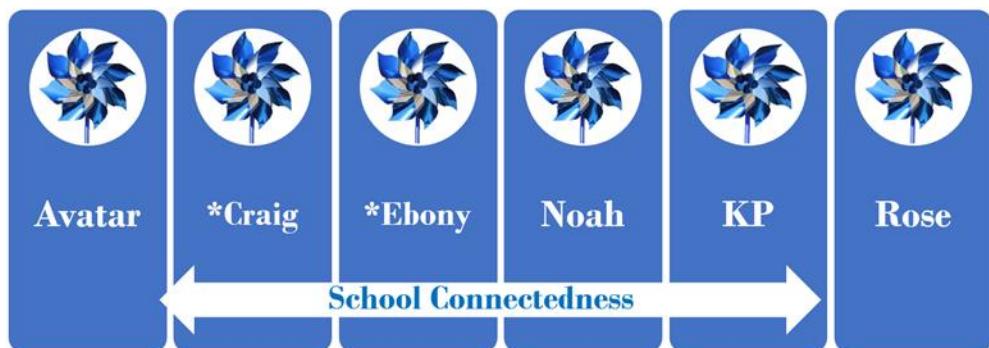
2017, p. 385). Parental resilience is a protective factor that fosters resilience in children.

When a parent models resilience, it positively affects that parent and their child, thus benefitting two generations (Ledesma, 2011). Although the participants in this study witnessed their mothers endure adversity, the parent-child relationship was positive.

When a parent supports their child with positive parenting, the parent's actions serve as a protective factor (Yamaoka & Bard, 2019). The participants in this study observed resilience through indirect modeling by their mothers. Witnessing their mothers' demonstrations of pain and perseverance as a child while going through their abuse gave them hope and strength.

#### *School Connectedness*

There are multiple ways of developing resilience in abused children. However, school connectedness, ties to a prosocial organization, and positive adult relationships are protective factors that promote strength in most resilience frameworks (Block, 2016; Hornor, 2017; Luthar, 1991; Masten, 2011; Ungar 2005). Six out of ten participants, pictured in Figure 16 candidly discussed the positive impact that being a part of extracurricular activities and clubs had on their school experiences.



*Figure 16. Case studies for school connectedness.*

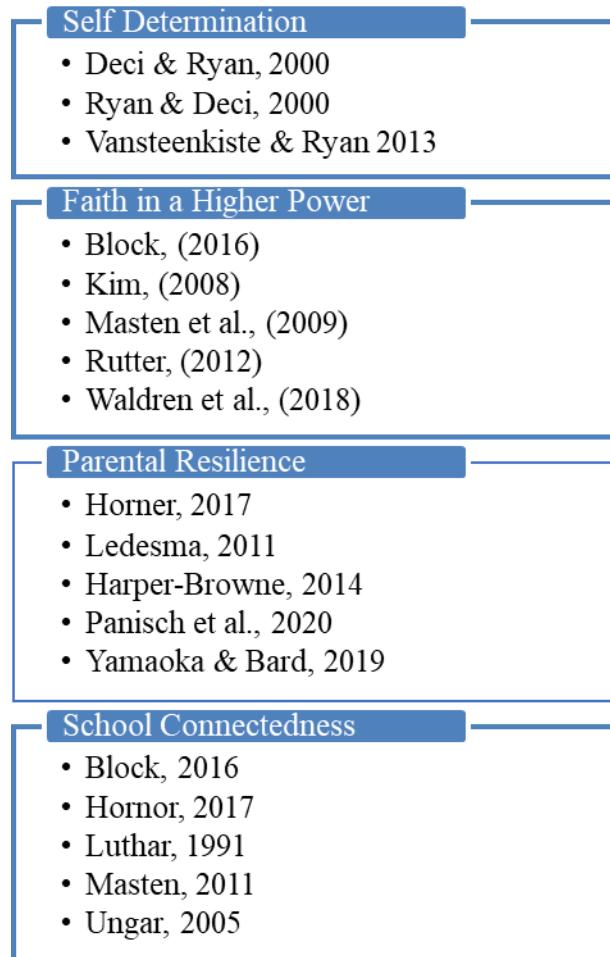
Being a part of school activities created positive experiences and cultivated bonds that some participants in this study did not experience at home. Ebony discussed leadership opportunities within the marching band and choir that made her feel confident. Identifying the individual strengths and interests of children also promotes resilience. When children participate in activities that they enjoy, it builds their self-esteem (Block, 2016). Participants described feeling a sense of pride and belonging at school.

Participants recalled feeling safe at school because the school kept them away from their abusers. I know that feeling all too well as my schools and teachers gave me tranquility and hope throughout the many childhood years that I experienced physical and sexual abuse while living in poverty.

### *Qualitative Data Findings*

Evidence from surveys, participants' narratives, and interview notes revealed the experiences that adult survivors of childhood physical and sexual abuse attributed to their perseverance. Analysis of participants' narratives uncovered four emerging themes aligned with research literature for building the Resilience Theory. Self Determination, Faith in a Higher Power, School Connectedness, and Parental Resilience surfaced when participants described their experiences that helped them persevere. Each of the themes and their connection to the research literature appears in Figure 17.

The results from the participants' interviews uncovered protective factors that led to resilience. The Resilience Theory suggests that survivors can overcome the risk of such trauma through resilient attributes that help them become well-adjusted adults despite experiencing adversity.



*Figure 17.* Themes aligned with the literature.

Additionally, resilience theory identified these attributes as protective factors (Luthar, 2016; Masten et al., 2007; Fergus & Zimmerman. 2005; Garmezy, Masten & Tellegen, 1984). The participants in the current study identified positive promotive resources such as parental support and school connectedness. Promotive factors that influenced survivor resilience were positive relationships with at least one parent and self-determination. The common themes that emerge suggest a need to build promotive factors to help facilitate resilience.

### *Discussion*

In this chapter, I offered the results from my data analysis using NVivo qualitative data analysis software. The research disclosed four key themes that yielded implications for school administrators, educators, school counselors, and support staff whose primary roles include supporting children's educational and socio-emotional needs. The participants in this study provided insight into their experiences that aided in their perseverance aligned with the Resilience Theory's theoretical framework.

### *Implications*

The data from the current study suggests important novel implications. These implications center on recognizing and promoting the concept of resilience among victims of child abuse; in the case studies examined in this chapter, the participant narratives associated resilience with self-determination, parental resilience, faith in higher power or energy, and school connectedness. Each of the themes that emerged in this study has implications for abused children's development of resilience. This research provided implications for enhancing protective factors in maltreated children to foster healing and hope for mental wellness and health. Implications for the need to understand how protective factors can mitigate the negative impacts of Adverse Childhood Experiences (ACE) are essential for supporting the implementation of interventions that build resilience in children.

This research shed light on the need for in-school support with confidence building and socio-emotional well-being activities implemented throughout the school day. Despite the literature that detail the adverse outcomes and maladaptive behavior of physically and sexually abused children, this study confirmed that abused children grow

up to become well-adaptive, obtain higher educational degrees, and maintain healthy romantic relationships. Although the participants in the current research survived their childhood despite adversity, their stories implicate a need for organizational change within the school system.

*School administrators and educators.* School administrators should foster and encourage school connectedness (Center for Disease Control and Prevention, 2009). School administrators should use the results of this study to consider structuring training in ACE and understanding the school's role and relationship in building resilience in all children (Langenkamp, 2010; Sege et al., 2017). School administrators should create a school culture where faculty and staff can comprehensively implement protective factors throughout the school day (Paterson et al., 2005). Out of all school personnel, educators spend the most time with children. They can create positive relationships with children, thus promoting opportunities to implement activities that support school connectedness.

*School counselors and support staff.* The role of school counselors is vital to building school connectedness, self-determination, and mindfulness in children. When counselors are responsive to student's needs, children feel more connected to school (Lapan et al., 2014). Given the amount of time that counselors have to provide one-on-one support, implementing impactful strategies to build resilience must be prioritized (Karcher, 2009). Additionally, counselors should effectively address mental health concerns with all children to foster appropriate emotional regulation and acceptable behavior (Corney et al., 2018). School counselors and support staff whose primary roles include supporting children's educational and socio-emotional needs can bridge the gap

between home and school by responding to students' individual needs to create a greater sense of school connectedness.

### *Summary and Conclusion*

Chapter Four included the participants' demographic information, ACE score, and types of abuse that each of the ten participants in this study represented. I chose five case narratives from the initial group of ten narratives to illustrate in this study. I detailed the participants' childhood experiences, religious beliefs, professional career, personal relationships, college experiences, and most importantly, the experiences that contributed to their perseverance. Additionally, I presented the research findings along with emerging themes and cross-case analysis from all ten participants. I used NVivo qualitative data analysis computer software which revealed four emerging themes; self-determination, faith in a higher power or energy, parental resilience, and school connectedness. Through rich discussions with participants, some moments of despair, and tears, I unveiled essential experiences that contributed to the perseverance of former victims of child maltreatment.

## CHAPTER FIVE

### Distribution of Findings

#### *Executive Summary*

Many adult survivors of childhood physical abuse, sexual abuse, and poverty possess a-resilience that is worthy of praise. Information revealed in my study allowed readers to immerse themselves in the personal experiences of five adult survivors of childhood abuse and their stories of triumph. In this chapter, I present an executive summary, an overview of data collection and analysis procedures; a summary of key findings; informed recommendations, and my findings distribution proposal.

The concept of Intergenerational Transmission of Childhood Maltreatment (ITCM) suggests that many children who experience one or more forms of child abuse grow up to become maladaptive. and inflict similar kinds of abuse upon their children (Garbarino and Gilliam 1980; Herzberger 1990, Kempe et al. 1962; Spinetta and Rigler 1972; Herzberger 1990). This narrative case study challenged the concept of ITCM by utilizing the Resilience Theory as a framework. The Resilience Theory suggests that some child abuse survivors show resilient attributes that help them become well-adjusted adults (Collishaw et al., 2007; Kimberly et al., 2007; Pérez-González et al., 2017; Tlapak et al., 2016). I identified the current study sample utilizing criterion-based sampling, which I detail in the subsequent section. I used interviews of ten adult survivors of childhood physical and sexual abuse and analyzed their narratives. Their stories were instrumental in answering the research question, What experiences do adult survivors of

childhood physical abuse and sexual abuse and poverty attribute to their personal and professional perseverance?

Additionally, there were three sub-questions: What role did school experiences play in building perseverance; what role did religious backgrounds play in building perseverance; and what role did therapeutic interventions play in building perseverance? During one-on-one interviews, these survivors shared their childhood experiences while focusing on what helped them endure. Participants' rich narratives shed light on the power of resilience.

#### *Overview of Data Collection and Analysis Procedures*

I collected data via social media platforms, Facebook, Twitter, and Instagram. I posted a participant recruitment video on each platform. The video encouraged viewers to complete the survey via a Universal Record Locator (URL) survey link or access the survey by scanning a barcode embedded within the posted video. Respondents interested in participating in my study answered a ten-question survey—respondents self-selected pseudonyms as part of the survey completion to help with anonymity. Fifty-five people responded. Ten respondents indicated that they were currently married or in a committed relationship, obtained a post-high school degree, and experienced childhood physical or sexual abuse. At the onset of my study, I predicted that poverty would be an indicator that contributed to their childhood adversity. However, due to a low response rate and insufficient data regarding poverty, I removed poverty as a criterion for selection. Therefore, ten respondents met the criteria for participation in the current study. I conducted one-on-one interviews with all ten respondents.

During the analysis of the data, I divided the narratives into ten separate cases. I created a case study snapshot of each participant and sent each participant their narratives to verify that I correctly represented their story. Verifying participants' narratives with them is a process called member checking. Member checking creates trust between researchers and participants (Birt et al., 2016; J.W. Creswell; J.D. Creswell; 2018). After the online interviews and data analysis of all ten narratives, I conducted a second round of sampling to identify the most robust responses and prominent data from each case based upon maximum variation case sampling (Stake, 2006; Yin 2014). This process narrowed the participant pool to five cases for narrative representations. The five narratives that I chose to depict in the study provided detailed responses and discussion to all interview questions and offered additional insight into each questioning category. I analyzed the remaining five case narratives, and their stories were included and visually represented in figures for cross-case and thematic analysis. According to Palinkas et al. (2015), “the selection of cases with maximum variation is used for … the purpose of documenting homogeneous cases to … simplify analysis” (p. 3). Each participant shared their highly unique story. The chosen cases included multiple forms of child abuse over a variety of different caregivers and experiences. I utilized NVivo, a qualitative data analysis computer software, to identify patterns that led to emerging themes for cross-case thematic analysis. In the next section, I offer a summary of key findings.

### *Summary of Key Findings*

Through the analysis of ten narratives, significant findings emerged that revealed four overarching themes: 1. Self-Determination (Deci & Ryan, 2000; Ryan & Deci, 2000; Vansteenkiste & Ryan 2013); 2. Faith in a higher power or energy (Block, 2016; Kim,

2008; Masten et al., 2009; Rutter, 2012; Waldren et al., 2018); 3. School Connectedness (Block, 2016; Hornor, 2017; Luthar, 1991; Masten, 2011; Ungar, 2005); and 4. Parental Resilience (Horner, 2017; Ledesma, 2011; Harper-Browne, 2014; Panisch et al., 2020; Yamaoka & Bard, 2019). Above all other participant statements, these four themes repeatedly emerged throughout the thematic analysis of these cases. The four themes were salient factors that attributed to the participants' perseverance.

*Self determination.* When I asked participants what attributes helped them persevere; all participants stated that they did not know how to explain it or said that they were determined to do or be better than their childhood experiences and refused to be defeated by their negative experiences (Deci & Ryan, 2000; Ryan & Deci, 2000; Vansteenkiste & Ryan 2013). Self-determination is a protective factor that leads to resilience.

*Faith in a higher power.* I asked participants what role religion played in their survival; an unexpected theme revealed itself: seven out of ten participants described having faith in a “higher power” or “energy” as a source of lifelong strength and motivation (Block, 2016; Kim, 2008; Masten et al., 2009; Rutter, 2012; Waldren et al., 2018). Faith helped former child abuse victims believed in something greater than themselves fostered hope.

*School connectedness.* Participants described being a part of extra-curricular activities such as sports teams, music ensembles, and subject matter clubs to avoid having to go home. It “kept their focus” away from the “bad” things that were happening to them. They reported perceiving school as a safe place. School connectedness helped

participants feel a sense of worth and belonging (Block, 2016; Hornor, 2017; Luthar, 1991; Masten, 2011; Ungar, 2005). According to Lapan et al. (2014), “Youth who were more connected to their school were better protected from risk factors and had more positive in-school outcomes” (p. 304). School is an integral part of children’s lives; it is imperative that children feel connected and safe.

*Parental resilience.* Participants described parental resilience by explaining that they saw what their mother went through and repeated phrases such as, “if she survived, I knew I could...” (Horner, 2017; Ledesma, 2011; Harper-Browne, 2014; Panisch et al., 2020; Yamaoka & Bard, 2019). When children witness their parents show resilience traits, it gave them the confidence to persevere.

#### *Informed Recommendations*

Based on this study’s findings presented in Chapter Four, I recommend the following to school administrators, educators, school counselors, and support staff whose primary roles include supporting children’s educational and socio-emotional needs. My recommendations are warranted based on the research literature presented throughout my study and in the literature review. Key research studies follow stakeholder recommendations to support the need for implementation in education.

*School administrators.* Ensure that all faculty and staff cognizant of Adverse Childhood Experiences (ACE) include experiencing violence, abuse, neglect, or witnessing violence in the home or community having a family member attempt or die by suicide (Center for Disease Control & Prevention, 2020). Have all faculty and staff complete the ACE Survey. Participate in and provide professional development

surrounding the importance of school connectedness in building promotive factors that lead to resilience in children. Require an elective class for all students that incorporate yoga, mindfulness activities, self-care, and self-reflection. Encourage participation in extracurricular activities and clubs at school Schonert-Reichl et al., 2015; Ross & Talon, 2018; Garner et al., 2018; Lawson et al., 2018).

*Educators* Participate in professional development surrounding the importance of school connectedness in building promotive factors that lead to resilience in children, complete ACE training and take the ACE survey. Build nurturing social-emotional relationships with students by getting to know them through the utilization of response journals. Use the following as a sentence stem for the beginning of the year writing assignment, “I wish my teacher knew...” Encourage participation in extracurricular activities and clubs at school. Begin class utilizing a mindfulness technique such as breathing exercises, tense and release muscle relaxation, or name thoughts, feelings, and emotions before instruction begins (Schonert-Reichl et al., 2015; Ross & Talon, 2018; Garner et al., 2018; Lawson et al., 2018). Teachers play a vital role in foster school connectedness.

*Counselors and support staff whose primary roles include supporting children's educational and socio-emotional needs.* Lead professional development for staff using the MindUP program and guide the implementation of weekly mindfulness techniques throughout the school day with all children (Schonert-Reichl et al., 2015; Ross & Talon, 2018; Garner et al., 2018). Support students and teachers with *the* implementation of socio and emotional learning (Lawson et al., 2018). Utilize trauma-informed practices to

teach self-regulation and executive functioning skills during school (Reinbergs & Fefer, 2018; Lemberger-Truelove et al., 2018). School counselors are responsible for in-school mental health advocates for students, and they should serve as support for school-wide mental health interventions.

The pervasiveness and deleterious effects of abuse touch children of all socio-economic backgrounds, ages, and nationalities. Administrators, educators, school counselors, and support staff could enrich students' lives by implementing the above recommendations. Creating pathways for students to build resilience during the school day can potentially remove or create fewer barriers for student access to supportive resources (Masten, 2011; Ungar, 2005). This could help propel students forward by enhancing and supporting resilience and reducing child maltreatment's long-term effects.

#### *Recommendations for Future Research*

This study's findings suggest that a more extensive scale of studies on the roots of resiliency are warranted to shed light upon the statistically significant factors common towards the development of resilience. Moreover, additional research that examines strategies detailing how to promote resilience among child abuse victims is also warranted. In addition, studies that examine the impact of child abuse across various students, not just low income. Why is this important? None of the ten survivors I interviewed exposed what happened to them during the abuse; this strongly suggests that most children, rich and poor alike, multi-ethics chose to suffer in silence.

#### *Findings Distribution Proposal*

The targeted audience for my study is school administrators, educators, school counselors, and those whose primary roles include supporting the educational and socio-

emotional needs of children. Unfortunately, child abuse is an all-too-common child experience. Children spend a significant amount of time in school settings. Therefore, knowledge of this study can help develop strategies capable of building protective factors and promoting resilience in children. Until child abuse is acknowledged and eradicated, educators can work collectively to mitigate it.

The ideal venue to reach my targeted audience is district professional development. After the summer break, schools reconvene with a district-wide gathering in which school administrators, educators, and counselors meet for a week of professional development. A district-wide meeting is an opportune time to provide professional development, discuss findings from this study, and empower everyone to advocate for students by promoting resilience through school connectedness. Although meeting face to face to share would be most beneficial due to the Covid-19 pandemic, it may still be unsafe. The contingency plan for distribution would be to conduct a TED talk. This method of distribution can be shared across multiple platforms and adheres to safety protocols. Additionally, brochures, posters, and posters can be transmitted electronically. The goal is to reach as many school administrators, educators, school counselors, and those whose primary roles include supporting the socio-emotional needs and education of children as possible.

### *Conclusion*

There is an atrocious epidemic in the culture of the United States that murders our children. Adverse Childhood Experiences have deleterious effects on children's long-term mental health and well-being. Children are particularly vulnerable as their locus of control is restricted by the innocence of their youth. In some instances, children are left as helpless prey

to be victimized by predators. We must find a way to attenuate the effects of child maltreatment. With each newly reported child abuse case, it is increasingly evident that parts of our nation are wounded. When we do not protect and provide safety for our children or give children the capacity to thrive physically, mentally, and emotionally, we have failed.

My doctoral journey tested my resilience. You see, I am an Enigma, a survivor of childhood physical abuse, sexual abuse, and poverty. Maya Angelou once said, “We delight in the beauty of the butterfly, but rarely admit the changes it has gone through to achieve that beauty” In my research, I, along with the Enigma participants, revealed our ugly in hopes to achieve beauty. We let you see our change. The guilt of being a survivor weighs heavy on my heart. While I do not feel as though I have done anything wrong, I often struggle with the question, Why me?” How and why did I survive when so many fell victim to maladaptation. Though my journey of navigating the effects of rape, molestations, physical abuse, homelessness, suicide ideation, and healing was less than beautiful, it empowered me to help all children.

It is my hope that my research enlightens you, garners your support as a child advocate, and compels you to mobilize forces and enact organizational change within schools and communities for the benefit and the stability of our nation’s children. My educational journey has not led me to understand the actions of those who inflict harm upon children. Still, until my eyes close for the final time and breath leaves my body, I will advocate for the underprivileged, underserved, and the maltreated child. It is my penultimate journey until mortality.

## APPENDIX

## APPENDIX

### Member Checking Email

Hello,

I hope that your day is going well and that you have awesome Spring Break plans. Thank you again for your willingness to participate in my research study. The trustworthiness of qualitative results is the core of high-quality qualitative research. Member checking, also known as participant or respondent validation, is a research tool used to explore the credibility of results. Data or results are returned to participants to check for accuracy and resonance with their experiences. Member checking helps to validate, verify, or assess the trustworthiness of qualitative results (Birt et al., 2016).

I have attached the narrative from our one-on-one interview. To ensure I have captured the essence of your thoughts and perspectives, please take some time to review the transcript. If you find any errors or concerns, please let me know. There are two areas where I am in need of additional information. I have highlighted the areas. Please let me know if you will be available to speak via telephone, email, Zoom, or text. I am at your mercy. Have a wonderful weekend.

With Thanks and Kind Regards,  
U’Nika Harrell  
Baylor University Doctoral Candidate

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