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COMMUNITY INVOLVEMENT AND VICTIMIZATION AT SCHOOL: AN ANALYSIS THROUGH FAMILY, PERSONAL AND SOCIAL ADJUSTMENT

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The present study analyzes the impact of adolescents' community involvement on victimization by peers at school through various indicators of family, personal and social adjustment (openness of communication with mother and father, life satisfaction, social self-esteem, and loneliness). Participating in the project were 565 adolescents aged 11 to 18 (51% male) drawn from secondary schools in Spain. Statistical analyses were conducted using bivariate correlations, the t test and structural equation modeling. Results indicated an indirect and protective influence of community involvement, openness of communication with parents and life satisfaction on victimization by peers. There was also a direct protective effect of social self-esteem and a direct risk effect of loneliness on victimization at school. Findings are discussed in light of the consideration that community involvement is a key factor in the promotion of other protective factors related to adolescent victimization at school. © 2009 Wiley Periodicals, Inc.

This research project was supported by the Ministry of Science and Innovation of Spain Research Grant PSI2008-01535/PSIC: "School Violence: Victimization and Social Reputation in Adolescence" and cofinanced by the FEDER European Fund.
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JOURNAL OF COMMUNITY PSYCHOLOGY, Vol. 37, No. 8, 959–974 (2009)
Published online in Wiley InterScience (www.interscience.wiley.com).
 DOI: 10.1002/jcop.20342

INTRODUCTION

Since the 1980s, there has been a remarkable increase in research analyzing problems of violent behavior among school-aged children in selected European countries and in the United States (Olweus, 2001; Skiba, 2000; Smith, 2003). School bullying first became a topic of psychological research with Olweus' work in Scandinavia in the 1970s (Olweus, 1978). Since then, numerous studies have been conducted in many countries around the world, underscoring the fact that bullying is a significant problem for a number of adolescents and victimization is a problem for an even a larger number of them (Eslea et al., 2004; Ramos, 2008). This may be the reason why more recent research has been focused on analyzing the causes, consequences, and correlates of victimization instead of the nature and incidence of bullying (Hodges & Perry, 1996).

Peer victimization has been defined as "the experience among children of being a target of aggressive behavior of other children, who are not siblings and not necessarily of the same age" (Hawker & Boulton, 2000, p. 441) and has been associated with serious negative consequences such as depression, anxiety, low self-esteem, loneliness, common health symptoms, and school absenteeism (Boulton & Smith, 1994; Egan & Perry, 1998; Estévez, Herrero, Martínez, & Musitu, 2006; Estévez, Musitu, & Herrero, 2005; Hodges, Malone, & Perry, 1997; Hodges & Perry, 1999). The seriousness of these negative consequences on the victims' well-being has motivated many researchers to investigate the risk and protective factors that put children and adolescents in a particularly vulnerable position for maltreatment by peers.

In these studies, it has been suggested that certain personal, family, and social adjustment difficulties may increase the probability of victimization (e.g., Fox & Boulton, 2006; Kochenderfer-Ladd, 2004). At the personal level, children with low self-regard are at risk of increased victimization (Egan & Perry, 1998). Likewise, studies have shown that victims tend to have low self-esteem (Olweus, 1978) and are prone to blame their victimization on their own personality (Graham & Juvonen, 1998). This characteristic may be a consequence of victimization, but it could also be a risk factor if bullies perceive those students as easy targets incapable of defending themselves (Garandeau & Cillesen, 2006). Other studies have pointed out that not only victims have a negative opinion of themselves, but they are also very unsatisfied with their own lives (Andreou, 2000; Prinstein, Boergers, & Vernberg, 2001; Rodríguez, 2004; Seals & Young, 2003). In other words, victimization seems to be closely related to unhappiness (Flouri & Buchanan, 2002).

At the family level, researchers have suggested that a negative family environment characterized by frequent family conflicts and low levels of open communication, affection, and support, is an important risk factor for peer victimization at school (Gerard & Buehler, 1999; Johnson et al., 2001; Lucia & Breslau, 2006). However, relatively little is known about how this influence operates. It is probable that the family environment affects children's psychosocial adjustment through its influence on social competence, feelings of loneliness (Johnson et al., 2001; Larose & Boivin, 1998; Marturano, Ferrerira, & Bacarji, 2005), and self-esteem (Cava, Musitu, & Murgui, 2007; Jiménez, Estévez, Musitu, & Murgui, 2007; Musitu & Garcia, 2004). A positive relationship with parents based on open, supportive, affective, and nonconflictive communication, would help children and adolescents to develop a sense of security, which would encourage them to explore new social contexts (Ainsworth, Blehar, Walters, & Wall, 1978; Larose & Boivin, 1998).

In light of the above and as regards the social level, it has been suggested that social isolation is one of the most relevant risk factors in the development of psychosocial adjustment problems in children. Indeed, research has shown that adolescents who are rejected by peers and who do not have a network of friends are a greater risk for peer victimization (Hodges et al., 1997; Hodges & Perry, 1999; Schwartz, McFadyen-Ketchum, Dodge, Pettit, & Bates, 1999), whereas having solid friendships and a high number of friends have traditionally been considered to be protective factors against victimization (Hodges & Perry, 1999). Furthermore, some earlier studies have revealed a strong connection between loneliness and peer victimization (Ladd & Troop-Gordon, 2003; Storch, Phil, Nock, Masia-Warner, & Barlas, 2003). Although some studies have concluded that loneliness is a consequence of victimization, others suggest that loneliness may be a personality trait in potential victims, which once detected by bullies can increase the probability of peer victimization (Cava et al., 2007).

However, it must also be noted that in adolescence the social context goes beyond the peer group and it is therefore necessary to take the broader community context into consideration as well. In light of this, Jessor (1993) highlights perceived community environment as one of the most important explanatory factors related to psychosocial adjustment in adolescence. Thus, when examining causes of problems in the adolescent period, one should pay attention not only to immediate interaction contexts, such as family, but also to interaction within communities and neighborhoods and their degree of support and involvement with the young citizens (De Winter, Kroneman, & Baerveldt, 1999). Many research projects have associated community variables (e.g., community participation, community integration, neighborhood interaction) with mental health measures, especially with depressive symptoms and general psychological well-being (e.g., Felton & Shinn, 1992; Herrero & Gracia, 2004; Lin, Simeone, Ensel, & Kuo, 1979; Unger & Wandersman, 1985). However, community benefits, from the psychosocial standpoint, have traditionally been studied in adult populations; little is known about potential protective effects in adolescence. Previous research suggests that community involvement decreases social isolation and contributes to personal and psychosocial adjustment in adolescents (Hull, Kilbourne, Reece, & Husaini, 2008).

Another important point is that most of the previous studies have focused only on the direct effects of community variables on well-being. Thus, some community effects may have remained obscured by simple or univariate analyses. In other words, although it is true that findings to date may enhance our understanding of the potential causes of adolescent victimization, it must also be understood that most of this research examines risk and protective factors independently. Theoretical frameworks like the ecological model of human development (Bronfenbrenner, 1977) assume that community variables operate through complex mechanisms; however, these theoretical assumptions are rarely tested with multiple-variable models from different domains (e.g., personal, family, and social). Furthermore, the conduct-problem theory (Jessor, 1993) indicates that adolescents occupy a particular position on the continuum representing the probability of the risk of experiencing a variety of problems. This position depends on the balance between the risk and protective factors present in developmental environments. Fewer studies however have jointly examined the contribution of multiple variables from different domains to adolescent victimization by peers.

Drawing from these ideas, this study aims to examine the role of adolescent community involvement, as a distal protective factor, on victimization by peers.

In more specific terms, we analyze the influence of community involvement on victimization through its relationship with family variables (open and supportive communication with both parents), personal variables (adolescent life satisfaction) and social adjustment (social self-esteem and feelings of loneliness), hypothesizing that community involvement is related to victimization by peers through its relationships with other personal, family, and social factors. Finally, as prior research has found significant differences between the sexes in terms of peer victimization, with boys showing a higher and more direct implication (Cleary, 2000; Flannery, Wester, & Singer, 2004; Glover, Gough, Jonnson, & Cartwright, 2000), a second purpose of the present study is to examine the mentioned relations among the variables in boys and girls.

METHOD

Participants

Participating in the study were 565 adolescents attending public secondary education schools in Seville, a metropolitan area with a population of one million. Ages ranged from 11 to 18 (mean age = 13.6; *SD* = 1.4); 51% were boys and 49% were girls.

Procedure

Data for this research was collected as part of a larger study on adjustment problems in adolescence. After precontacts were made with large number of selected public schools, seven schools were selected to participate in the study. The selection was based primarily on the schools' availability and the willingness of staff to collaborate in the investigation. Following initial contact with schools' principals, the entire teaching staff was informed of the study's objectives in a 2-hour presentation. A letter describing the study was then sent to the parents requesting that they indicate in writing if they did not want their child to participate in the study (only 1% of parents did so). Both the teachers and the parents expressed a desire to be informed of the main results of the study in a meeting with the research team; this took place once data analyses were completed. Participants anonymously filled out the scales during a regular class period, lasting approximately one hour. All measures in English were translated to Spanish using bidirectional translation.

Instruments

Social Involvement in the Community Scale. Based on a questionnaire of perceived community support (PCSQ, Herrero & Gracia, 2004, 2007), two dimensions were assessed as a measure of social involvement in the community: community integration and community participation. Community integration is a 4-item subscale that measures sense of belonging to and identification with the community or neighborhood (e.g., "I identify with my community," "I feel that I belong to my community"). Community participation is a 5-item subscale that measures the degree to which the respondent is involved in social activities in the community (e.g., "I participate—alone, with my family or with friends—in organizations and associations in my community," "I take part—alone, with my family or with friends—in social activities in my

community''). Items are answered on a 4-point scale (1 = *I strongly agree*, 4 = *I strongly disagree*). Cronbach alphas for these subscales in the current sample were .85 and .85, respectively. In previous research, it has been shown that the PCSQ adequately represents the community experience for young adults and adolescents (Herrero & Gracia, 2004; Ramos, 2008).

To determine the participants' level of community involvement, the sample was split into two groups by means of a cluster analysis: 57.1% of adolescents were classified as high community integration with a mean score of 3.5 for community integration-related issues, whereas 42.9 % of adolescents were classified as low community integration with a mean score of 2.4. The same procedure was used to calculate community participation: 48.1% of adolescents were classified as high community participation with a mean score of 3.3, and 51.9 % were classified as low community participation with a mean score of 2.2. These results are consistent with the trends found in the latest published reports on youth in Spain, where observations indicate that young people in Spain have a high sense of local belonging: about 52% identify first with their neighborhood, city or town, and secondly with Europe or the world. These reports also show that active participation among young people in the social life of their town or neighborhood is, as a whole, infrequent, informal, and sporadic (Instituto de la Juventud, 2004, 2006, 2008). According to Bendit (2000), low community participation in Spanish adolescents is due to the absence of social spaces (social organizations, associations, or institutions) promoting opportunities for their participation.

Peer Victimization Scale (adapted from Mynard & Joseph, 2000). This scale consisted of 20 items, each rated on 4-point scales (1 = *never*, 4 = *many times*) and referring to victimization at school. Principal component analysis revealed a 3-factor structure: The first factor (35.74% of variance) was defined by seven items referring to overt physical victimization (e.g., ''Some classmates have hit me''), the second factor (21.71% of variance) was defined by seven items referring to overt verbal victimization (e.g., ''Some classmates have insulted me''), and the third factor (18, 54% variance) was defined by six items referring to relational victimization (e.g., ''Some classmates have spread rumors about me so that nobody will associate with me''). Cronbach alphas for these subscales in the current sample were .89, .71, and .70, respectively.

Parent–Adolescent Communication Scale (PACS; Barnes & Olson, 1982; Spanish-language version of Musitu, Buelga, Lila, & Cava, 2001). Adolescent communication with parents was measured using the PACS's 10-item subscale, which evaluates, on a 5-point scale (1 = *never*, 5 = *always*), the degree of openness in communication (positive, free, comprehensive, and satisfactory communication) with father and mother (e.g., ''My mother/father is always a good listener,'' ''If I had problems, I would talk to my mother/father about them.''). The alpha coefficient for this scale was .87.

Social Self-Esteem Scale. We employed the social self-esteem dimension of the Multidimensional Self-esteem Scale (García & Musitu, 1999). This subscale is composed of six items answered on a 4-point scale (1 = *I strongly agree*, 4 = *I strongly disagree*), which provide a general measure of social self-esteem (e.g., ''I make friends easily,'' ''I am a sociable person''). Internal consistency for this scale in the present study was .76.

Satisfaction with Life Scale (Diener, Emmons, Larsen, & Griffin, 1985; Spanish-language version of Atienza, Pons, Balaguer, & García-Merita, 2000). This instrument consisted of five items rated on a 4-point scale (1 = *I strongly agree*, 4 = *I strongly disagree*) that give a general measure of subjective well-being and life satisfaction (e.g., ''I am satisfied with

my life," "If I could start my life over again, I would change almost nothing"). Cronbach alpha for this scale in the current sample was .81.

UCLA Loneliness Scale (Russell, 1996; Spanish-language version of Exposito & Moya, 1999). The UCLA scale is comprised of 20 items and was developed to assess subjective feelings of loneliness and social isolation (e.g., "How often do you feel completely alone?," "How often do you feel as if nobody really understands you?"). Items are rated on a 4-point scale (1 = *never*, 4 = *often*). Alpha coefficient for this scale was .90.

RESULTS

Preliminary correlational analyses among all variables and mean difference analyses by sex (*t* test) were conducted. Table 1 gives bivariate correlations made among the observed variables included in the study, their means, *t* values and standard deviations.

Community integration proved to be inversely related to physical and relational victimization. As expected, communication with both parents, life satisfaction, social self-esteem and feeling of loneliness also correlated with community integration and participation at one end of the spectrum and the three dimensions of victimization at the other end. We also observed significant differences between boys and girls in terms of community participation variables, degree of openness of communication with father, social self-esteem, physical overt victimization, and feelings of loneliness. In all of the cases, except loneliness, statistics for boys were higher than for girls.

We used the EQS version 6.1. (Bentler & Wu, 2002) to test the measurement model. This model included six latent factors. Table 2 reports the factor loadings of the observed variables on their corresponding latent factors. The latent factors included in the model were: Community Involvement (measured with two indicators: community integration and community participation of the Social Involvement in the Community Scale), Communication with Parents (measured with two indicators: open communication with mother and father of the Parent–Adolescent Communication Scale), Life Satisfaction (measured with the Life Satisfaction Index), Social Self-Esteem (measured with the social self-esteem dimension of the Multi-dimensional Self-esteem Scale), Loneliness (measured with the UCLA Loneliness Scale Index), Victimization (measured with three indicators: overt physical victimization, overt verbal victimization, and relational victimization of the Peer Victimization Scale). This measurement model allowed latent factors to co-vary while imposing no cross-loading and no correlated error restrictions on measurements, be they from the same construct or different constructs. A robust fit index was employed to account for the nonnormality of the data (normalized estimate = 3.2684). Because χ^2 is very sensitive in large sample sizes, we used several fit indexes to evaluate the model fit (Hair, Anderson, Tathman, & Black, 1999): S-B (Satorra–Bentler statistic) χ^2 (23, $N = 565$) = 19.98, $p < .05$; comparative fit index (CFI = .99); the Bentler-Bonett nonnormed fit index (NNFI = .96); the Bollen fit index (IFI = .99); and the root mean square error of approximation (RMSEA = .03). The model fits the observed data well when the fit indexes are .90 or higher, and the RMSEA is less than .05 (Bentler, 1990; Hu & Bentler, 1999). These results are indicative of the measurement model's quality of fit.

The hypothesized model was also tested using EQS version 6.1 (Bentler & Wu, 2002). Fit indexes obtained for the estimated model were S-B χ^2 (28, $N = 565$) = 45.7244, $p < .05$; CFI = .98, IFI = .98, NNFI = .97, and RMSEA = .04.

Journal of Community Psychology DOI: 10.1002/jcop

Table 1. Pearson Correlations Among Observed Variables, Means, t Values, and Standard Deviations

	1	*2*	*3*	*4*	*5*	*6*	*7*	*8*	*9*	*10*
1. Community integration	1									
2. Community participation	.307***	1								
3. Open communication with mother	.228***	.147**	1							
4. Open communication with father	.218***	.141**	.717***	1						
5. Life satisfaction	.254***	.115*	.386***	.373***	1					
6. Social self-esteem	.323***	.149**	.167***	.194***	.209***	1				
7. Verbal overt victimization	.073	.028	.258***	.255***	.164***	.003	1			
8. Physical overt victimization	−.101*	.018	−.104*	−.117*	−.187***	−.128**	.184***	1		
9. Relational victimization	−.131**	−.004	−.126**	−.120*	−.160***	−.041	.129**	.635***	1	
10. Loneliness	−.366***	−.189***	−.305***	−.298***	−.442***	−.477***	−.133**	.288***	.209***	1
M	16.45	16.53	42.86	39.46	15.61	19.57	9.7	4.88	14.55	35.68
Boys/girls[a]	16.7/16.24	17.21/15.83	42.87/43.0	40.38/38.53	15.77/15.57	19.83/19.22	9.72/9.8	5.07/4.72	14.35/14.83	34.9/36.56
(*t* value)	(1.75)	(3.14)**	(−.18)	(2.23)*	(.73)	(2.38)*	(−.25)	(2.48)*	(−.96)	(−2.07)*
SD	2.89	4.76	8.13	8.76	3.02	2.93	3.89	1.58	5.45	8.74
Boys/girls	2.87/2.93	4.37/5.15	8.2/8.03	8.83/8.73	2.9/3.18	2.76/3.09	3.72/4.15	1.77/1.36	5.28/5.73	8.3/9.14

Note. Variables are standardized.
[a]Means used for *t* test in gender differences.
*$p<.05$; **$p<.01$; ***$p<.001$.

Table 2. Unstandardized Parameter Estimates, Standard Errors, and Significance Levels (Total Sample) and Factor Loadings by Sex (Unconstrain and Constrain Model)

Factor	*Variables*	*Number of items*	*Factor loadings*	*SE*	*Factor loadings unconstrain model*[b]	*Factor loadings constrain model*
Community involvement	Community integration	4	1[a]	0	1.064 (.946)	1.011
	Community participation	5	.445*	.18	.219 (1.056)[c]	–
Communication with parents	Open communication with mother	10	1[a]	0	.988 (1.077)	1.038
	Open communication with father	10	.955***	.10	1.012 (.929)	.965
Victimization	Verbal overt victimization	7	1[a]	0	1.483 (1.501)	1.490
	Physical overt victimization	7	.645***	.05	.674 (.666)	.671
	Relational victimization	6	.995***	.10	.987 (.997)	.993
Life satisfaction	Life satisfaction	5	1[a]	0	1[a]	1[a]
Social self-esteem	Social self-esteem	6	1[a]	0	1[a]	1[a]
Loneliness	Loneliness	20	1[a]	0	1[a]	1[a]

Note. Robust statistics.
[a]Fixed to 1.00 during estimation.
[b]Boys (girls).
[c]This constrain was relaxed in the constrain model, $p < .05$.
*$p < .05$ (two-tailed test); ***$p < .001$ (two-tailed test).

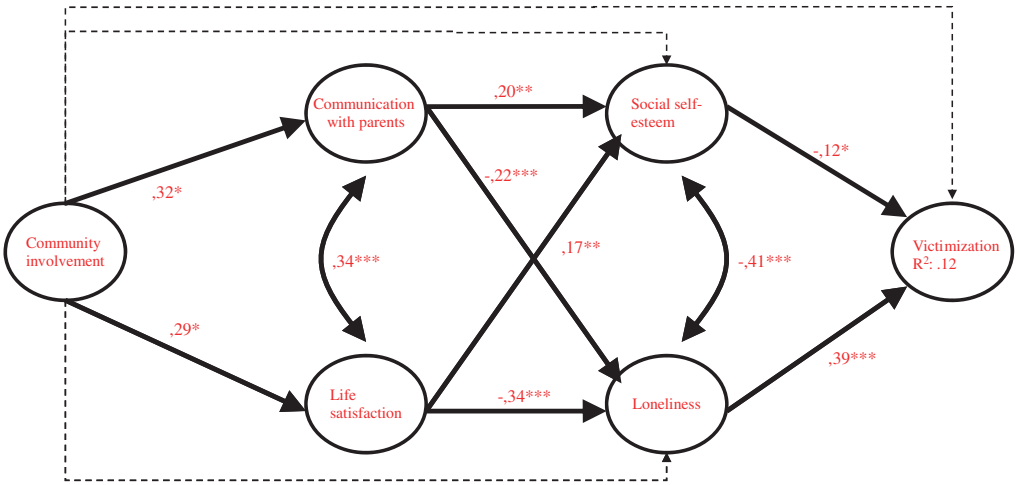

Figure 1. Final structural model. Continuous lines represent significant paths among latent variables and curve lines represent correlations. Robust standard errors were used to determine the significance of the standardized paths (*$p<.05$; **$p<.01$; ***$p<.001$).

The structural model showed a good fit. This model accounted for 12% of the variance in the outcome variable, victimization by peers, with an effect size of .14. This effect size is considered small but acceptable (Cohen, 1977, p. 413) and is similar to that observed in other related studies (for example, Kokkino & Panayiotou, 2004; Rosario, Salzinger, Feldman, & Ng-Mak, 2003). These effect sizes must be considered in order to avoid type II errors (García, Pascual, Frías, Van Krunckelsven, & Murgui, 2008).

Figure 1 presents the structural model with the standardized path coefficients and their confidence intervals. As the results in this figure indicate, community involvement was indirectly related to victimization at school through communication with parents, life satisfaction, social self-esteem, and loneliness. On the one hand, we found significant associations between community involvement and open communication with parents and higher life satisfaction ($\beta = .32$ and $\beta = .29$, $p<.05$). On the other hand, results revealed that positive and open communication with both parents was directly related to social self-esteem ($\beta = .20$, $p<.01$) and inversely related to feelings of loneliness ($\beta = .22$, $p<.001$). In addition, life satisfaction was also associated with higher social self-esteem ($\beta = .17$, $p<.01$), as well as with a lower sense of loneliness ($\beta = -.34$, $p<.001$). Finally, these latter variables were, in turn, directly related to being victimized at school ($\beta = -.12$, $p<.05$ for social self-esteem, and $\beta = .39$, $p<.001$ for loneliness). Thus, community involvement followed an indirect path in its relationship with victimization at school via family, personal, and social adjustment variables. The indirect effect of community involvement on the victimization factor was $\beta = -.052$ ($p<.05$).

As mentioned above, the results of several studies, including ours, have shown that there are differences between boys and girls in terms of victimization rates. Accordingly, we checked the model's integrity by testing structural invariance across gender groups through multigroup analyses (Bentler & Wu, 2002). For this purpose, two models were tested: for the unrestricted model, parameter estimates (factor loadings—see Table 2, and structural paths) were liberally estimated across groups, whereas in the restricted model, we considered all of the factor loadings and the

structural paths to be invariant. If χ^2 of the restricted model was significantly larger than χ^2 of the unrestricted model, the invariance assumption would not be valid. For gender-based groups the unrestricted model showed a significantly smaller χ^2 than the restricted model: $\Delta\chi^2$ (25, $N = 565$) = 38.46, $p < .05$. After removing one of the constraints (community participation factor loading), unconstrained and constrained models were statistically equivalent: $\Delta\chi^2$ (24, $N = 565$) = 35.48, *ns*. Despite these minor differences, results supported both the factorial and structural invariance across groups, which gave the additional advantage of broader applicability of the proposed model.

DISCUSSION

The present study analyzed a set of personal, family, and social variables in relation to peer victimization in a sample of Spanish adolescents. The first objective of this study was to examine the effect of adolescent community involvement on peer victimization, also taking relationships with personal, family, and social adjustment factors into consideration. In our results, community involvement was not directly associated with victimization by peers. The absence of a direct relationship between community involvement and peer victimization may explain the lack of publications conducted on adolescent victimization that have investigated the contribution of community dimensions. Nevertheless, structural equation modeling (SEM) analyses have revealed indirect significant effects. Indeed, in the present study we found significant associations between community involvement (community participation and integration) and family and personal adjustment (open communication with both parents and life satisfaction) which, in turn, were associated with social adjustment in adolescence (social self-esteem and feelings of loneliness). These characteristics of social adjustment were proximal factors closely associated with victimization by peers. Our model showed that community involvement is a relevant protective factor that should be considered when studying the explanatory factors linked to victimization at school.

Adolescent community involvement directly contributes to higher life satisfaction, as well as to parental communication, and indirectly to social adjustment. In others words, socially integrated adolescents who participate in their communities seem to present higher levels of family and personal adjustment and, in turn, higher levels of social adjustment. Our results are consistent with prior studies that report on the beneficial effects of community involvement on well-being in the cases of both adults and adolescents (Albanesi, Cicognani, & Zani, 2006; Hull et al., 2008; Vieno, Nation, Perkins, & Santinello, 2007). As Vieno et al. (2007) suggest, taking part in community life enhances adolescents' sense of control and self-efficacy and, as a whole, fosters positive developmental outcomes and social well-being.

Family and personal adjustment have been significantly associated with social adjustment. In more specific terms, adolescents who have open and supportive communication with both parents and feel satisfied with their lives, generally exhibit higher levels of social self-esteem and lesser feelings of loneliness. Accordingly, these two indicators of social adjustment were significant factors in terms of victimization. Our results are in line with previous studies that address the influence of family on children's behavior and developmental outcomes through its impact on positive self-evaluation (Cava et al., 2007; Jiménez et al., 2007; Jiménez, Musitu, & Murgui, 2008).

At this point, it is important to examine the profile of adolescents who are at risk for being victimized. In our study, adolescents with low social self-esteem (those who perceived themselves as lacking the skills required to make friends) and exhibiting high feelings of loneliness were more likely to be targets of peer harassment. These findings are consistent with previous studies in which these variables were also considered as risk factors for peer victimization (Hodges & Perry, 1999; Salmivalli & Isaacs, 2005). Although these variables may be perceived as the consequences of peer victimization, some studies have suggested that they might be previously observed characteristics of victims detected by bullies (Cava et al., 2007; Hodges & Perry, 1999). Along this line, some authors remark that negative self-perceptions may lead to increased victimization as negative self-perceptions are associated with less assertive and agentic styles of interaction (Salmivalli & Isaacs, 2005). It is possible that both low self-esteem and high loneliness could translate into behaviors displaying vulnerability and submissiveness, which turn these adolescents into easy targets of peer abuse. In addition, other authors have pointed out that aggressors pay attention to signs of suffering and submission to choose their victims (Boldizar, Perry, & Perry, 1989).

A second goal of this study was to test the proposed model of the relationships among the study's variables separately; one for the cases of boys and another girls. Prior to testing the hypothesized model, we tested potential differences between boys and girls in terms of the study variables means. Our results indicated significant differences between the sexes in terms of community participation, openness of communication with father, social self-esteem, physical overt victimization, and loneliness. Previous research has shown that girls have more feelings of loneliness (Brage, Meredith, & Woodward, 1993) and adolescent boys, compared with girls, participate more in community activities (Instituto de la Juventud, 2004, 2006, 2008), communicate better with their fathers (Noller & Callan, 1991), present higher levels of social self-esteem (Sahlstein & Allen, 2002), and higher frequency of physical victimization (Nansel et al. 2001). As for the latter result, it is important to underscore the fact that boys are more likely to be involved in cases of more explicit (physical) victimization. These results are in line with studies demonstrating that boys are generally more likely to engage in and/or be victims of physical violence (Nansel et al., 2001; Olweus, 1993). Other studies seem to indicate that girls typically engage in what has been described as indirect and relational aggression: rumor spreading, intentional exclusion, social isolation, and friendship manipulation (Cleary, 2000; Glover et al., 2000; Olweus, 1998). However, despite these differences in rates and types of victimization by sex, our results indicate that the structural model was the same for both boys and girls. Therefore, a similar process of correlation between risk and protective factors was found for both boys and girls who are victimized by peers. Thus, it seems that differences between boys and girls found in previous studies do not stem from the existence of gender-related differences in the victimization process, but from the higher visibility of certain victimization acts in boys.

In conclusion, our findings revealed an indirect association between community involvement and victimization by peers, in which family, personal, and social adjustment indicators have proven to be significant connectors. Moreover, this set of relations between explanatory factors has not shown any variation across gender. Results from this research can be useful for the design of community-based interventions and programs aimed at improving the relationship between community agents, parents, adolescents, and schools. The findings suggest that the community setting is by no means a trivial factor in the prevention of victimization among

adolescents. Conversely, if we are to raise levels of adolescents' personal and family adjustment and to reduce social isolation and the risk of being victimized, it is important that adolescents be given more opportunities that might allow them to experience a sense of belonging to a particular place, and to value their social participation and relevance as citizens.

Finally, several limitations of this study should be acknowledged. Data for the present research project was collected from a single source—the adolescent's self-report—so response bias might affect the validity of the results obtained. However, it is also important to highlight that comparisons with data from independent sources such as parents, does support the reliability of self-reported measures of behavioral outcomes in adolescence (Flisher, Evans, Muller, & Lombard, 2004; Ritakallio, Kaltiala-Heino, Kivivuori, & Rimpelä, 2005). For future research projects, however, it would be desirable to obtain additional data from parents and teachers that might serve as a means for measuring adolescent victimization and community involvement among other statistics. Moreover, as the present study used a cross-sectional design, the authors cannot infer causal relationships among the study's variables. As indicated above, some of the previous studies have indicated that displays of low self-esteem and a high degree of feelings of loneliness represent serious negative consequences of overt victimization (e.g., Ladd & Troop-Gordon, 2003). Moreover, according to findings presented in the current study, it seems that these variables could also be important precedents in the study of victimization. In light of these limitations, however, further clarification of these relationships would require a more sophisticated study that included a longitudinal study.

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