

Fabienne Glowacz and Michel Born

What makes individuals evolve differently when confronted with unfavorable situations and/or traumas? Why do some individuals engage in delinquency and substance use as a result of these at-risk situations and others abstain? In this chapter, we wish to draw attention to the concepts of resilience and protective factors. These areas of research were developed on the premise that some youths manage to “survive” and adapt when exposed to adversity, whereas others develop adjustment problems or psychopathologies.

Several studies have demonstrated that a significant proportion of individuals identified as “high risk” (between 25 % and 50 %) are resilient to the difficulties produced by high-risk environments and do not engage in delinquent and criminal behaviors (Laub & Sampson, 2001; Turner, Hartman, Exum, & Cullen, 2007; Werner, 1989). As stated by Hartman, Turner, Daigle, Exum, and Cullen (2009), resilience does not merely refer to the act of abstaining from crime. Resilience is more accurately conceptualized as the ability of individuals with high-risk profiles to resist the criminogenic conditions that are often associated with criminal and antisocial behaviors. What differentiates resilient from non-resilient youths? To answer this question, we shift the focus from risk to protective factors, since the latter promote the

process of resilience. In this chapter, drawing on the relevant research, we define the constructs of resilience and protective factors. We also discuss the relevance of these constructs in the development of criminal and antisocial behavior.

Defining Resilience

Resilience has been defined as the maintenance of a healthy and successful functioning despite exposure to significant adversity or risk (Garmezy, 1993; Luthar, Cicchetti, & Becker, 2000, Masten & Obradovic, 2006). Although there is substantial variability in the definition of resilience, two central constructs are included in most definitions: adversity (or risk) and positive adaptation (or competence). These two constructs were introduced by Luthar and colleagues (2000, 2006). *Adversity* includes risk factors, traumas, negative life events that are harmful to healthy adaptation, or any other form of hardship or suffering. It is essential for researchers to clearly define the concept of adversity (Fletcher & Sarkar, 2013), as there are many variations in the definitions employed by researchers.

It is equally important to define the concept of successful or *positive adaptation* to the environment. Luthar and Cicchetti (2000, p. 858) defined positive adaptation as “behaviorally manifested social competence, or success at meeting stage-salient developmental tasks.” Subsequently, adaptations will vary across fields,

F. Glowacz (✉) • M. Born
Department of Psychology, University of Liège,
B33 Sart Tilman, 4000 Liège, Belgium
e-mail: Fabienne.glowacz@ulg.ac.be; mborn@ulg.ac.be

developmental stages, and populations. Masten and Obradovic (2006) emphasized the importance of both external adaptation to the environment and internal sense of well-being in the assessment of resilience. An appropriate behavior in one environment may be regarded as inappropriate in a different environment. For example, a young person can develop antisocial behaviors that are appropriate in a context where delinquent acts confer a higher social status. It is thus important to consider the sociocultural context in which these constructs are established and defined. Delinquent behaviors and other forms of antisocial behaviors (e.g., drug use) can be regarded as survival strategies or adaptive behaviors in particular contexts, but are not indicators of resilience at the behavioral level. However, these behaviors may occur in conjunction with individual values, such as autonomy and perseverance, which may promote the development of resilience among individuals. It has been suggested that a very small proportion of children show evidence of resilience in all areas of adaptation; resilience is usually observed in specific domains (Luthar, 2003).

Resilience as a Multidimensional Concept

As stated above, resilience is not a single-dimensional or a global construct, which means that individuals may be resilient in one domain of adaptation or several, but rarely in all domains. A topic of debate in the literature relates to whether resilience is best regarded as a feature or a process (e.g., see Windle, 2011). As a feature, resilience represents a constellation of characteristics that lead the individual to adapt positively in unfavorable circumstances. Following Rutter (1987), resilience factors are influences that modify, ameliorate, or alter a person's response to some environmental hazard that predisposes to a maladaptive outcome. Psychological resilience conceptualized as a personality trait is considered by Rutter (1987, p. 316) as the "positive pole of individual differences in people's response to stress and

adversity." However, resilience has also been conceptualized as a process subject to change over time. Luthar et al. (2000, p. 543) make reference to a "dynamic process encompassing positive adaptation within the context of significant adversity." Instead of defining resilience as a single personality trait, this perspective considers resilience as a process or phenomenon that may be influenced not only by individual characteristics but also by the various social systems and environments they are exposed to (Luthar, 2003).

The impact of protective factors also varies across contexts and time. Even though an individual may adapt positively to adversity at a particular time of his/her life, he/she will not necessarily adapt positively to other stressful situations occurring at different periods of his/her life. Resilience is more accurately defined as a dynamic process because individuals can be resilient to specific environmental hazards or at one particular period in time (Rutter, 2006). Resilience is thus not a static state, but rather a dynamic process.

We therefore propose to define resilience to delinquent behavior as a dynamic process that involves an individual's positive adaptation despite at-risk conditions or life events and interactions between the individual's protective personal characteristics and his environmental support. Thus, the concept of resilience is regarded as multidimensional and dependent on the intrinsic and extrinsic characteristics of the individual.

Protective Factors and the Resilience Process

Protective factors refer to influences altering or improving the response of an individual to various at-risk situations preceding maladaptation (Rutter, 1985). Protective factors prevent an individual exposed to risk from developing deviant or antisocial behaviors. These factors enhance adaptation and reduce the likelihood of problem behavior either directly or by mediating or moderating the effect of exposure to risk factors

(Luthar, 2006; Masten & Obradovic, 2006; Rutter, 1987; Werner & Smith, 2001). Recent research, particularly longitudinal studies, has better defined the protective factors against adolescent drug use, delinquency, violence, and school dropout (Hawkins, Catalano, & Miller, 1992; Lipsey & Derzon, 1998; Loeber & Stouthamer-Loeber, 2008). Although a single protective factor may exert a modest impact on given behaviors, the accumulation of protective factors promotes resilience among high-risk youths. It is thus the cumulative effect in addition to the interactions and combinations of multiple protective factors that enable young people to resist taking the path to delinquency. In addition, different protective factors may be related to a lower probability of onset of delinquency but also to desistance from these behaviors. The latter, however, should arguably be referred to as desistance factors (Kazemian, 2015).

Different terms have been used more or less interchangeably to refer to protective factors. Lösel and Farrington (2012) make the distinction between direct and buffering protective factors in the development of youth violence. According to these authors, *direct protective factors* [also referred to as *promotive* (e.g., Stouthamer-Loeber, Loeber, Wei, Farrington, & Wikström, 2002) or *compensatory factors* (e.g., Fergusson, Vitaro, Wanner, & Brendgen, 2007)] predict a lower probability of future problem behavior and violence through a main effect, thus not taking other factors into account. In contrast, *buffering protective factors* predict a lower probability of violence in the presence of risk factors by attenuating the impact of a risk factor through a moderating effect (see also Rutter, 1985).

It has been argued that resilience emerges within an interactive model in which the relationship between a risk factor and an outcome is weakened by the presence of one or more protective factor(s) (Noltemeyer & Bush, 2013; Rutter, 1985). The effects of protective factors may vary in nature: they may buffer the risk factor, interrupt the risk chain, or prevent the occurrence of the risk factor altogether (Lösel & Farrington, 2012). Protective factors can be *extrinsic* or situational (e.g., family, peers, school, community,

etc.) or *intrinsic* (e.g., personality characteristics, empowerment, self-control, cultural sensitivity, self-concept, social sensitivity, etc.) (Garmezy, 1993; Masten, Best, & Garmezy, 1990; Noltemeyer & Bush, 2013).

In a recent review of the literature, Lösel and Farrington (2012) grouped variables that have protective or promotive effects against antisocial behavior into five categories: (1) individual traits, (2) family, (3) school, (4) peers, and (5) neighborhood characteristics. First, individual traits include cognitive functions, psychological characteristics, and temperamental characteristics (e.g., above-average intelligence, positive attitudes toward family and school, nonaggressive social cognitions and beliefs, low impulsivity, absence of attention deficit or hyperactivity, enhanced anxiety and shyness, etc.). Portnoy et al. (2013) also highlighted recent studies suggesting that biological factors such as high heart rate or high monoamine oxidase A (MAO-A) may have protective effects (see Beaver, Schwartz, & Gajos, 2015). Adolescent religiosity is also related to a higher age of onset for drug use, a more limited number of different drugs used, and reduced involvement in other types of delinquent behaviors (McKnight & Loper, 2002). Hartman et al. (2009) found that girls reporting frequent religious service attendance and high importance of religion tend to avoid getting involved in delinquent behavior. More broadly, participating in a range of prosocial activities promotes reduced illegal activity among high-risk youth (Mahoney & Stattin, 2000). At the individual level, a sense of purpose, a sense of control, and hope for the future characterize youth who avoid delinquency (Taylor, Karcher, Kelly, & Valescu, 2003). Protective factors that lead to hopefulness buffer and reduce the effects of risk factors (Garmezy & Rutter, 1983; Masten, 2001).

Second, research has consistently demonstrated the protective effects (direct or buffering) of several family factors, such as strong bonds with at least one parent, parental acceptance, intensive supervision, high persistence of discipline, parental disapproval of antisocial behavior, low physical punishment, strong involvement in family activities, above-average

socioeconomic status (SES), low parental stress, family models of constructive coping, and positive parental attitudes toward the child's education (Vanderbilt-Adriance & Shaw, 2008).

Third, school performance, bonding to school, motivation to study, educational aspirations, support and supervision from teachers, clear classroom rules, and a positive school climate have been found to exert protective effects in the context of delinquency (Lösel & Farrington, 2012).

Fourth, prosocial friends, membership to a peer group that condemns antisocial behavior, involvement in religious groups, and social isolation may have direct or buffering protective effects against youth violence and delinquency (Lösel & Farrington, 2012; Herrenkohl, Tajima, Whitney, & Huang, 2005). Close relationships with nondeviant peers and involvement in religious groups have been shown as having a buffering protective effect against violence in the presence of risk factors (Cattellino, 2000; Herrenkohl et al., 2005; Werner, 1993).

Finally, living in a nondeprived, nonviolent, and cohesive neighborhood, where informal social control is eminent, constitutes an important protective factor (Loeber, Farrington, Stouthamer-Loeber, & White, 2008). Lynam et al. (2000) found that living in a nondeprived neighborhood buffered to some degree the undesirable impact of impulsivity on juvenile offending.

Each of the factors listed above can have a protective effect, either on their own or in association with others, but we reiterate that the cumulative effect or the configuration of different factors will prove to have the most salient effects. Four models of resilience have been proposed to conceptualize these configurations of protective and promotive factors in childhood and adolescence aggression (Fergus & Zimmerman, 2005; Hollister-Wagner, Foshee, & Jackson, 2001): (1) compensatory, (2) risk-protective, (3) protective-protective, and (4) challenge models. Each model proposes a different relationship between risk and protective factors. The *compensatory model* states that each risk and protective factor act independently and directly on predicted outcomes but combine

cumulatively to compensate for each other. The *risk-protective model* postulates the presence or the absence of protective factors as moderating factors in the associations between risk factors and development. The *protective-protective model* is based on the interactive risk-protective model by positing that the risk and outcome relationship decreases with each protective factor present. Finally, the *challenge model* proposes a curvilinear relationship between risk factors and predicted outcome. In others words, the low levels of risk engagement provide an experiential context for learning new coping strategies. Donnon (2010) empirically tested these models in a study on bullying and victimization, conceptualizing exposure to violence as a risk factor, and closeness to an adult, importance of religion, self-esteem, relationship competence, constructive communication, and constructive anger as protective factors. Findings suggested that the most appropriate model of resilience varies by gender. The protective-protective and challenge models were more influential for females, but none of the models were supported for males, highlighting an important gap in the state of knowledge on resilience and protective factors.

Primary Versus Secondary Resilience

Primary resilience refers to the absence of disorder despite the occurrence of various risk factors (Luthar et al., 2000; Masten & Obradovic, 2006). *Secondary resilience* refers to the process of starting a new life and a new development (Born, 2011; Cyrulnik, 2008). Primary delinquency resilience applies to individuals who do not commit an offense, or commit only minor or sporadic offenses, after being exposed to various risk factors. Minimal involvement in offending is included in the definition of primary resilience, namely, because several studies have shown that over 50 % of youths commit at least one offense during adolescence (Klein, 1989). These periods of temporary offending during adolescence have been labeled as exploratory or sporadic delinquency (Fréchette & Le Blanc, 1987) or

adolescence-limited delinquency (Moffitt, 1993). Because adolescence is a period of questioning, some involvement in delinquency is considered to be the norm and a manner in which to test rules, laws, boundaries, and social tolerance. Adolescents involved in delinquency can be regarded as resilient only if they have been exposed to social, familial, or personal risk factors.

Secondary resilience adds to the concept of primary resilience by integrating the concept of “reconstructing/rebuilding oneself,” i.e., find a positive social life after having committed several offenses (see Maruna, 2001). This type of resilience may occur among individuals who have been subject to formal punishment for their behaviors (e.g., residential placement or imprisonment). The absence of reoffending is referred to as desistance (see Kazemian, 2007, 2015), and it is an essential component of secondary resilience. Lösel and Bliesener (1994) discuss resilience by isolating the factors of success and of desistance after a period of incarceration for young people. The authors showed that resilient youth from an institutionalized population have a larger social network and are more satisfied with their social support system. There is evidence that resilient adolescents live in a more positive emotional climate, i.e., in a nonconflictual, cohesive environment in which autonomy and open-mindedness are encouraged and the values of success and religion are endorsed. Lösel and Bliesener (1994) found that resilient youths tend to have a meaningful relationship with a person outside of the nuclear family; a third have a meaningful relationship with a member of the extended family and half with a teacher.

Drapeau, Saint-Jacques, Lépine, Bégin, and Bernard's (2004) study on adolescents in substitute or foster families highlights the importance of several factors for resilience (i.e., the establishment of emotional ties with adults, and the presence of positive experiences in the sporting, artistic or professional fields, which can be encouraged in the institutions). On an individual level, the perception of being able to control one's life, the confidence of these young people

in their own ability to become better, and high self-esteem may reinforce resilience. These resilience factors interact with the environment (in this case, interventions provided in the institution that support secondary resilience).

In a study of the delinquent trajectories of 363 institutionalized youths in Public Institutions for the Protection of Youth network of a French-speaking community in Belgium, Born, Chevalier, and Humblet (1997) identified only 7 % of the youths as primary resilient youths, i.e., having very minor delinquency despite exposure to several risky factors. These authors also observed that 30 % of the youths desist from delinquency after their stay in a residential setting; these individuals may be regarded as secondary resilient desisters, depending on whether they displayed many or few risk factors. Delinquent trajectories varied with levels of self-control and maturity. Born, Chevalier, and Humblet (1997) and Born, Jackson, and Jacob (1997) also reported that youths who were perceived by the residential treatment center staff as being less aggressive and more capable of showing attachment and interest in others were better adjusted to institutional life and had a more favorable prognosis at the end of their placement. These individual characteristics suggest the absence of a delinquent personality, as described by Le Blanc and Morizot (2001). In other words, personality traits can play a protective role for youths in residential treatment. For these delinquent youths with protective personality traits, secondary resilience will be dependent on their capacity to make new socially acceptable choices, which are expressed at the end of their institutional placement through the formulation of an adequate personal project. In a study of 100 teenagers from the same Belgian institutions, Hélin et al. (2004) noted that it is the adhesion to a realistic project that supports secondary resilience (e.g., the transition from being a resident of the institution to an educational instructor).

Resilience appears to be a result of within-individual factors that help to withstand environmental risk factors. For example, the capacity for an individual to exercise self-control and to resist

the temptations of the environment is a protective factor, which finds its origin in individual aptitudes and early training. This capacity of inhibition, which develops early during childhood, proves to be a safeguard against externalizing problems and antisocial behavior (Boët & Born, 2001). These inhibitive effects are also likely to result from parenting practices as well as temperamental and personality characteristics that facilitate adaptability and social conformity (Glowacz, Veronneau, Boët, & Born, 2013). These claims are consistent with social and cognitive learning theories, which are the most relevant paradigms to explain socialization toward social conformity.

Sexual Abuse and Resilience

Research on delinquency has always primarily relied on male samples, namely, because researchers have taken for granted the scarcity of female delinquency as well as women's specific biological and social protective factors (see Lanctôt, 2015). Moreover, few studies have investigated the protective factors that may predict positive outcomes among girls (Rasseneur & Born, 2004; Stevens et al. 2011). Using a sample of 2,247 Belgian adolescents, Vettenburg, Brondeel, and Gavray (2013) found that unsurprisingly, boys committed significantly more delinquent acts when compared to girls (see Lanctôt & Le Blanc, 2002). They also found a strong correlation between the attitudes promoting violence and the production of violent behaviors. With regard to protective factors, the authors also noted that 63 % of boys and 37 % of girls reported that violent and delinquent behavior was acceptable or promoted in their peer group.

The link between sexual abuse and criminal trajectories is another important topic in the study of female delinquency. Among girls, sexual assault is significantly associated with a higher risk of having a deviant and delinquent trajectory, particularly for violent crimes (Kerig & Becker, 2015). Sexual victimization during childhood increases the risk of being arrested

during adolescence; over half of criminal justice-involved women (56 %) in Goodkind, Ng, and Sarri's (2006) study had been victims of sexual abuse. Incarcerated women also present a much higher prevalence of childhood sexual victimization when compared to nonincarcerated women. In addition, many empirical studies have highlighted the significant prevalence of sexual abuse histories among adolescents and adults with alcohol and drug use problems.

While not all sexually abused teenagers will engage in delinquency, and not all delinquents have histories of victimization, there is a significant association between sexual victimization and offending. The nature of the abuse, the extent of violence involved, its duration, and chronic character are important factors in the explanation of the abuse-offending link. Five factors have been identified as predictors of resilience following an experience of trauma (e.g., sexual abuse): (1) attachment, (2) personal characteristics, (3) support at the moment of disclosure, and the (4) family and (5) environmental resources. Some personal characteristics of children and youths promote resilience, including intelligence, self-esteem, recognition of one's own successes, and adaptive coping strategies, such as the search for social support and re-evaluation. Many authors have stressed the importance of support when reporting the abusive situation; victims who received adequate parental support presented less behavioral problems (Spaccarelli & Kim 1994; Dumont, Spatz Widom, & Czaja, 2007). In our own study (Glowacz & Buzitu, 2014), paternal support differentiated our two groups of victims; nondelinquent female teenagers benefited from higher levels of paternal support. Other studies have found similar results. Parent-Boursier and Hébert (2010) found that the perception of high paternal support at the time of reporting the sexual abuse incidents predicted a better psychosocial adaptation. Harris, Furstenberg, and Marmer (1998) reported that the paternal figure acts as a protective factor against delinquent behaviors, particularly when the mother shows low levels of commitment. Finally, our research also showed that nondelinquent female teenagers benefited more from

resources that come from outside the family, which is consistent with studies showing that a significant relationship with an adult external to the nuclear family acts as a protective factor against delinquency and can be considered as an important factor of resilience after an abusive situation (Glowacz & Buzitu, 2014).

Evaluating the Strength of Protective Factors

We approached protective and resilience from the angle of developmental criminology. However, the concept of protective factors is also used in forensic sciences for the evaluation of minor and adult offenders who are subject to psycho-legal interventions:

- In forensic psychiatry, the *Structured Assessment of Protective Factors for Violence Risk* (SAPROF) was developed to extend violence risk assessment with an assessment of protective factors (DevriesRobbé, de Vogel, & Stam 2012). The SAPROF consists of 2 static and 15 dynamic protective factors organized within 3 scales: internal factors (e.g., coping, self-control), motivational factors (e.g., work, attitudes toward authority), and external factors (e.g., social network, professional care). The scores indicate the extent to which the factors are present for a given person in a specific situation. These factors can be important for the individual in two ways: The factors that provide protection at the time of assessment are *key factors*, while the factors that are potential targets for treatment are *goal factors*. The identification of key factors and goal factors is very important in clinical practice because they can be useful for the development of risk management plans and treatment intervention strategies. The assessment with SAPROF also provides an overall protection score, which is counterbalanced against that of violence risk, i.e., low, moderate, or high (De Vogel, devriesRobbé, de Ruiter, & Bouman, 2011).

- When dealing delinquent youths, professionals should strive to look for their strengths and resources, which will enable them to resume a satisfactory social development and allow them to rechannel these strengths to more prosocial outcomes.
- The assessment of resilience can be done using psychological interviews, qualitative evaluations, and psychometric instruments. While the psychometric instruments that have been developed often draw on self-reports, they make it possible to have a standardized measurement and are easy to use (e.g., Connor-Davidson Resilience Scale (CD-RISC), Connor & Davidson, 2003; Adolescent Resilient Scale (ARS), Oshio et al., 2003); Resilience Scale for Adolescents (RSA), Hjemdal, Friborg, Stiles, Rosenvinge, & Martinussen, 2006; Resilience Factors Inventory (IFR-40), Bekaert, Masclet, & Caron, 2012).

Using the resiliency scales for children and adolescents, identified 4 profiles of resilience in a population of 215 delinquents (51 males and 164 females, average age 16 years and 1 month). The first profile shows low levels of resilience and very high vulnerability and includes the highest percentage of females, who were significantly younger, incarcerated at a younger age during the current incarceration. They rated themselves higher on the adaptability and comfort subscales. Their adaptability can be used in interventions to improve their sense of mastery over the environment, improve their trust in others, and learn strategies for emotional regulation.

In the second profile, there are mainly males who are labeled *high vulnerability* by Prince-Embury and Steer's (2010). These individuals have to learn ways to control their emotional reactivity and impulsivity.

The third profile includes a large number of juveniles from non-Caucasian ethnic origin that committed major delinquent offenses. Their dangerousness forbids them from attending school or taking advantage of instructional time. They do not have protective factors associated with

attending school and obtaining educational advancement and have a lower level of resilience. They are labeled as *low resource vulnerability*. Interventions should focus on teaching skills relevant to the juvenile's future goals. Self-monitoring, anger management, and problem-solving may help them attain desirable outcomes without aggression.

Finally, the fourth profile includes older youths and those incarcerated at an older age, usually for a shorter period of time. They have the fewest major offenses and they demonstrate average resilience and vulnerability according to Prince-Embury and Steer (2010).

In conclusion, we stress the importance to continue our efforts to identify protective factors and resilience processes of delinquency in different contexts and for different types of individuals. The necessity to improve our tools for assessment and to generalize their use also has to be encouraged. Recognition of protective factors should be an essential part of the risk management process and of interventions with high-risk adolescents to reduce reoffending (Rutter, 2010). We argue that theory and research on resilience and the related assessments or typologies are useful tools to differentiate the best and most promising effective interventions adapted to specific persons, which is the only way to successfully help criminals on the way to resilience "pour qu'ils s'en sortent" ("for them to make it"; Born, 2011).

Summary

- Resilience can be defined as a personal characteristic of an individual who has succeeded in overcoming stressful and potentially damaging circumstances but can also be considered as the process through which a person adjusts and succeeds in overcoming adversity.
- It is important to distinguish between primary and secondary resilience, which can be paralleled to the processes of onset and desistance.
- Protective factors can be drawn from various dimensions: the community, family, school,

peers, and individual. However, the cumulative effect and particularly the configuration of multiple protective factors are more important than any single factor associated with resilience.

- The impact of these protective factors varies with the situations in which the children and youth are living and are not universal. Risk factors can be different according to distinct developmental periods (i.e., children, adolescents, and adults) or genders (males or females). This specificity is also true for protective and resilience processes.

Future Research Needs

- The challenge for future research is to better identify the internal and external factors supporting resilience.
- Forensic psychiatry assessments mainly focus on risk factors, although they have acknowledged the value in taking into account protective factors. Further research investigating protective factors and strengths exhibited by juvenile offenders will aid in identifying developmental pathways for delinquency and resilience processes as well as more effective tools for prevention and intervention.
- Research is needed to identify not only the protective factors acting individually or in combination with others but also the configurations of these factors that are most effective in different periods of the life course.

Marc Le Blanc's Contribution

Marc Le Blanc's work is impossible to bypass in any discussion of risk and protective factors. Le Blanc was among the first researchers, with David Farrington and Rolf Loeber, to carry out broad-scale longitudinal research on the predictors of delinquent behaviors among adolescents, which resulted in the development of explanatory theoretical models. Le Blanc largely contributed to the identification of the

developmental paths that lead to and protect from the onset and persistence in delinquent trajectories. His self-reported assessment instruments have been highly influential in organizations working with juvenile offenders and are employed in various French-speaking countries.

He developed and validated a comprehensive instrument (Measures of Quebec Adolescents' Social and Personal Adjustment; MASPAQ, Le Blanc, 1996) for the assessment of individuals in juvenile facilities. This instrument measures delinquent and deviant behaviors but also factors from diverse domains of risk. This enables practitioners to employ scientifically validated tools in psychosocial and psychoeducational intervention organizations, which are not usually inclined to use such assessment approaches. The MASPAQ remains a useful instrument to assess protective factors and resilience among adolescents in need of care.

Through his research, Marc Le Blanc revisited Pinatel's concept of criminal personality and conceptualized it as an identifiable syndrome of delinquent personality that exhibits some degree of stability across different periods of the life course (Le Blanc & Morizot, 2001). This approach provides a theoretically relevant framework for the evaluation of personality characteristics often used in psychocriminological research. Le Blanc's work generally, and his work with Rolf Loeber more specifically, largely contributed to the birth and the notoriety of the field of developmental criminology (Loeber & Le Blanc, 1990; Le Blanc & Loeber, 1998).

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