Risk and Protective Factors:
The New Dimensions of Human Behavior

In the preface of *Dimensions of Human Behavior*, Hutchison (2003) argues that, as social workers, we need a broad “multidimensional knowledge base that allows us to scan widely for and think critically about risk factors and protective factors and to craft mutipronged intervention programs to reduce risks and strengthen protective factors”. While acknowledging that the emerging literature suggests that the inherent risk and protective factors in contemporary social arrangements influence human behavior, Hutchinson fails to mention the factors further in the text. The multidimensional approach provided in *Dimensions of Human Behavior* is rooted in the systems perspective that recognizes human behavior as dynamic interactions within, between and among persons and environments. A further discussion of risk and protective factors would be helpful to show how these interactions also call upon the other seven theoretical perspectives on human behavior in this text.

Understanding risk factors helps social workers focus intervention programs on those individual behaviors and environmental conditions that increase an individual’s vulnerability to negative outcomes. Protective factors buffer the impact of risk factors and can even enhance the individual’s well-being. Hawkins (1995) points to how this model has been applied to disease control: “Seeking to prevent cardiovascular disease, researchers in the field of public health first identified risk factors…tobacco use, high-fat diet, sedentary life style, high levels of stress and family history of heart disease” (p. 10). Equally important, the researchers also identified several protective factors to buffer the risk factors: cease tobacco use, switch to a low-fat diet, aerobic exercise and relaxation techniques. Clearly, identifying the risk factors and intervening with these protective factors will enhance the well-being of many at-risk clients (U.C. Berkeley).

Through the lenses of the systems perspective, the cardiovascular disease risk factors
illustrate how many behaviors are interrelated and each have an impact on the whole person or physiological system. While other theoretical perspectives could apply, this example is also a good illustration of the social behavioral perspective’s tenant of behavioral change. By changing the risky behaviors to the protective behavior factors of healthy living, dramatic changes can occur. By quitting smoking, a client’s risk factor will decline to a level similar to those who have never smoked within five to ten years (U.C. Berkeley). Hutchinson (2003) agrees that the systems perspective is useful for understanding human behavior (p.55) and the social behavioral perspective’s strengths lie in its methods and techniques for modifying behavior (p.80).

While risk and protection factors are central concepts in public health they are ubiquitous in social work. The concept of risk has been used extensively in traditional developmental risk assessments by social workers and health professionals. Bergen (1994) has taken risk conditions and further classified them in three arenas or domains. The separation into the distinct risk arenas of established (genetic disabilities), biological (trauma during prenatal or neonatal period) and environmental (physical, socioeconomic and cultural factors) allows a better examination of the vulnerabilities as a child develops. These arenas are considered in assessment tools to improve the accuracy of intervention protective factor strategies for newborn children. Here, the developmental perspective can be useful by providing an expectation of normalcy or ‘ideal’ developmental stage. While infants and toddlers share developmental milestones, Schriver (2004) cautions that when using assessments to gather knowledge they must equally respect common developmental milestones and differences (p. 181).

Risk factors have also been used to assess conditions in the larger system arenas beyond the child to include family, peer group, school and community. Researchers began using the public health model to determine if the same prevention principals could be used to reduce the risks associated with juvenile substance abuse and crime. Hawkins and Catalano (1993) were
able to take 30 years of research on risk factors for co-occurring problem behaviors, including delinquency, school dropout, teen pregnancy, substance abuse and violence. Developing a list of risk factors they further classified, as Bergen did later, the factors into arenas or domains. In the individual/peer domain they found a correlation between problem behaviors and constitutional factors (genetic & biological). In the school domain a correlation was found between poor grades, acting out and lack of commitment to school. In the family domain it was parental attitudes favorable or involved in the problem behavior (ie: selling and using drugs), and family conflict. In the community domain there were correlations in the macro environments, low neighborhood attachment, extreme economic deprivation and the availability of firearms.

It was also apparent that some youngsters, even though exposed to risk factors, did not become delinquents, drop out of school, abuse drugs or engage in other problem behaviors. Further research indicated that there were protective factors in the youths’ lives that somehow buffered the risks. Hawkins (1995) has identified the following three protective factor categories: 1. Individual characteristics of resilient temperament and positive social orientation. 2. Bonding with family members, teachers or other adults, in positive relationships. 3. Healthy beliefs and clear standards of behavior.

Hawkins and Catalano have managed to bring in the remaining theoretical perspectives critiqued by Hutchison (2003) into their model of risk and protective factors. Evidence of the rational choice perspective is apparent in the individual/peer domain where the youth could be seen as making bad choices for the wrong goals. Here too the developmental perspective would give biological explanations for the constitutional factors that would lead the youth through stages towards delinquency. The family domain is most influenced by the psychodynamic perspective, heavily influenced by Freud and Erikson, early childhood experiences are seen to be central in patterning the youth’s emotional and mental health. The school risk factors begin to
open up the social arena for the youth, here, the social constructionist perspective would say the individual was beginning to be shaped by continual social interaction, by the school culture and his peers. The community domain fits very well with the explanations offered by the social behavioralists who state “human behavior is learned by association stimuli, by reinforcement, by imitation, and by personal expectations and meanings” (Hutchinson, 2003, p. 77).

The final theory has been recently analyzed by social work researchers. The humanistic perspective holds that each person has the capacity to change which is driven by the desire for growth, personal meaning, self-efficacy. This perspective also theorizes that each person has a need to be nurtured and bond with others. These are the strengths celebrated by the protective factors (Hawkins). Examples of protective factors include: the presence of and bonding with caring adults, high expectations of youth behavior, youth participation in service, involvement and responsibility in tasks and decisions.

The use of risk and protective factor principals by social workers as prevention strategies for their communities turn again to the systems perspective. Hawkins (1995) presents the following guidelines: Focus on known risk factors in the various domains or systems. Once identified, prevention programs that enhance protective factors can target the risks in the community, school, family, peer and individual domains.

In 1999, a special volume of Social Work Research (23, 3) was devoted to this subject. Fraser, Richman and Galinsky’s lead article “Risk, protection, and resilience: Toward a conceptual frame work for social work practice” (pp.131-143), is a comprehensive introduction to risk and protective factors. Had Hutchison (2003) included more discussion of risk and protective factors, students of social work would have been able to gain a better understanding of the eight theoretical perspectives and been introduced to a new and promising prevention strategy.
References


